

1078597
I.D. number
No. d'identification

SIMONELLI
Surname
Nom de famille

VICTOR SPR.
Given names
Prénoms

Demob

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU
PERSONNEL

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location
Lieu

8918

«CONTENTS CONFIDENTIAL»
«CONTENU CONFIDENTIEL»

REGIMENTAL DOCUMENTS

15.5.19
8.1.19

NAME *SIMONELLI* *Victor* *Spr.* REGT. NO. *1078597* UNIT *3rd Pioneer Bn* H Q. FILE NO.

S

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

DEATH

Category

DISCHARGE

Category

DESERTION

- 1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)
- 3 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)
- TRAINING HISTORY SHEET (M.F.W. 113)
- 1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)
- 1 REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)
- 1 COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)
- 2 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)
- 1 DENTAL HISTORY SHEET (M.F.B. 465)
- MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)
- 1 MEDICAL EXAMINATION (M.F.W. 129)
- 1 TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)
- PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)
- DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)
- LAST PAY CERTIFICATE (M.F.W. 44)
- 1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)
- PARTICULARS OF CHARACTER (A.F.W. 3226)
- 1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)
- 1 *A.F. B. 117.*
- 2 *misc*
- 1 *M.F.W. 67.*
- 1 *R 172*
- 1 *R 149*

PUBLIC ARCHIVES
CENTRE
RECORDS

H

20331

bot
19/8

482640

38 - 7
13 - 7
4 - 8

SERVICE GROUP 26
OCCUPATIONAL GROUP 13

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.) A

Hammeron
Mothel
Machumst

1. No.	1078597	APR 12 1919	EMBARKED FOR CANADA
2. Rank.	Spr	DISEMBARKED, HALIFAX, N.S.	
3. Name.	Simonelli	Victor	
4. Unit.	6 B. 2	5th Recon Bn	
5. Date of Discharge	APR 23 1919	Place	HAMILTON, ONT.
6. Reason for Discharge	DEMOBILIZATION		
7. Authority.	No. 2, D.D., Part II, D.O. No. 116		
8. Proposed Residence after Discharge	161 Mount Pleasant St Norwich Conn. WPA		
9.	CERTIFICATE TO BE SIGNED BY SOLDIER.		
I hereby acknowledge that at the undernoted place and date I received my discharge Certificate			
M. F. W.?			
Victor Simonelli			
Signature of Soldier.			
10.	CONFIRMATION.		
The discharge of the above named man is hereby confirmed.			
Place HAMILTON, ONT.			
Date APR 23 1919			
Signature Jack Young			
(O. C. Discharging Unit.)			

40
42/3

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate.....	Militia Form W. 23
or Particulars of Recruit.....	Militia Form W. 133
Field Conduct Sheet.....	Militia Form W. 178 or A.F.B. 122
Casualty Form.....	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate.....	Militia Form W. 44
Certificate that missing documents are unobtainable.....	
Medical History Sheet.....	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board.....	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet.....	Militia Form B. 465
Medical Report.....	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet.....	Militia Form B. 263
Company Conduct Sheet.....	Militia Form B. 263a

.....Date

.....Checked by No.

.....Group

Group.....

Checked by No.

Date.....

30 MAR 1919

5th PIONEER BATTALION

ORIGINAL

ATTESTATION PAPER.

C. E. F. CANADIAN OVER-SEAS EXPEDITIONARY FORCE

Alc. 597
No. 1078

Folio.

ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? *Simonelli*
- 1a. What are your Christian names? *Victor Andrew*
- 1b. What is your present address? *Sherbrooke P.Q. Canada*
2. In what Town, Township or Parish, and in what Country were you born? *France*
3. What is the name of your next-of-kin? *Mother*
4. What is the address of your next-of-kin? *South Pygote Vermont U.S.A.*
- 4a. What is the relationship of your next-of-kin? *Cristina Simonelli*
5. What is the date of your birth? *Jan 12 1898*
6. What is your Trade or Calling? *Machinist*
7. Are you married? *No*
8. Are you willing to be vaccinated or re-vaccinated and inoculated? *Yes*
9. Do you now belong to the Active Militia? *4th Can Engineers*
10. Have you ever served in any Military Force? *No*
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? *Yes*
12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } *Yes*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Victor Simonelli*, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the Canadian Over-Seas Expeditionary Force, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Date *Sept 11* 191*6*. *Victor A. Simonelli* (Signature of Recruit)
D.B. Brand (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Victor Simonelli*, do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Date *Sept 11* 191*6*. *Victor A. Simonelli* (Signature of Recruit)
D.B. Brand (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath

before me, at *Sherbrooke* this *11* day of *September* 191*6*.

[Signature] (Signature of Justice)

JUSTICE OF THE PEACE for the
DISTRICT of ST. FRANCIS

Description of Victor Andrew Simonelli on Enlistment.

Apparent Age 18 years 7 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer).

Height 5 ft. 11 ins.

Chest measurement { Girth when fully expanded 36 ins.
Range of expansion 3 ins.

Complexion Brown

Eyes Brown

Hair Brown

Religious denominations { Church of England
Presbyterian
Methodist
Baptist or Congregationalist
Roman Catholic L
Jewish
Other denominations
(Denomination to be stated.)

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him Fit for the Canadian Over-Seas Expeditionary Force.
Date Sept 11 1916
Place Shirburn Quebec
Medical Officer. G. H. Sims

*Insert here "fit" or "unfit."
NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

Victor Andrew Simonelli having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

W. R. Dondly (Signature of Officer)
Date 11th September 1916.

Lieut. Colonel
Officer Commanding
5th Overseas Pioneer Battalion C.E.F.

DUPLICATE

To be made out in duplicate.

H.Q. 54-21-23-53

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

5th PIONEER
BATTALION
C. E. F.

- (1) Name of Overseas Unit which Soldier joins.....
- (2) Regimental Number.....1078597.
- (3) Full Name of Soldier.....Vito Simonetti
- (4) Place of Birth.....France
- (5) Are you married, or not?.....No
- (6) If married, state,
(a) Full name of your wife.....
- (b) Present Postal Address.....
- (7) Are you a widower?.....No
- (8) Have you any children?.....

If so, give number of boys and girls.....

Also their names and ages.....

(9) Is your Father alive? *No.*

If so, state name and address

(10) Is your Mother alive? *Yes*

If so, state name and address *Christina Simonelli*

Do Rygati Vt. U.S.A

(11) If your Mother is a widow *Yes*

Are you her sole support, or not? *No*

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

No.

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

Christina Simonelli

Do Rygati

Vermont U.S.A

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

20.00 per month to Mother

(15) Are you insured? *No*

If so, in what Company?

Have you made arrangements for payment of your Insurance premium?

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Date *Sept. 13th 1916*

Victor Simonelli
Officer Commanding

A. R. Roddy
Lieut. Colonel
Officer Commanding
5th Overseas Pioneer Battalion C.E.F.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 1078597 (Rank) Sgt.

Name (in full) Victor Simonelli enlisted in
the 5th Pioneer Bn.

CANADIAN EXPEDITIONARY FORCE at Sherbrooke PQ on the 11th
day of September 19 16

HE served in France & Belgium

and is now discharged from the service by reason of Demobilization.
Medical Unfitness.

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows:—

Age 20

Height 5' 11 1/2"

Complexion Brown

Eyes Brown

Hair Brown

Marks or Scars none

Victor Simonelli
Signature of Soldier

Jos. A. Gough
Issuing Officer

Date of Discharge

HAMILTON, ONT.
NO. 2
APR 23 1919
DISTRICT DEPOT.

For Rank
O. C. No. 2 District Depot.
Date Apr 23 19 19

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. _____ (Rank) _____
 Name (in full) _____
 enlisted in _____

on the _____ day of _____
 CANADIAN EXPEDITIONARY FORCE at _____

He served in _____

Uniform is not to be worn after
 expiration of one month from
 date of discharge, except by special
 permission of G. O. C. District.

and is now discharged

THE DESCRIPTION OF THIS

Age _____

Height _____

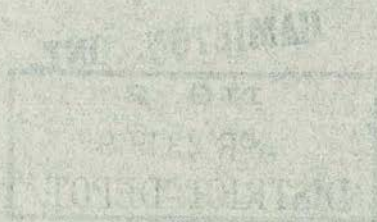
Complexion _____

Eyes _____

Hair _____

Signature of Soldier _____

Date of Discharge _____



Date _____

N.B.—As no duplicate of this certificate will be issued, and persons entitled same is requested to forward it in an
 unopened envelope to the Secretary, M.H.A. (General), Ottawa, Canada.

M.H.A. 100
 1015 D.P. 2000-11-11
 H.P. 170-20-202

Casualty Form—Active Service.

Unit, Regiment or Corps **5th OVERSEAS PIONEER BATTN. C.E.F.**

Regimental No. **1078597** Rank **Private** Name **Simonelli, Victor Andrew**

Enlisted (a) **11/9/16** Terms of Service (a) **6 6/12 d of war** Service reckons from (a) **11/9/16**

Date of promotion to present rank. } Date of appointment to lance rank. } Numerical position on roll of N. C. Os. }

Extended Re-engaged Qualification (b) **Against**

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				

27/11/16 H.Q. Embarked, Canada Halifax 27/11/16 H.M. **W. Metagama**

6/12/16 " Arrived, England Liverpool 6/12/16 " "

5/2/17 H.Q. Transferred to Can. Railway Const'n Corps. Bramshott 5/2/17 DOPLI 36/92 dated 5/2/17

Graser
Capt. and Adjt.
5th. O/s Pioneers

6.2.17 **5th Pns.** Taken on Str. C.P.T. Mans. 5th Pns. C.P.T.

Perfect. 6.2.17 Pt II D.O. 26

7/2/17 **5th Pns.** Taken on Strength

Perfect. 7.2.17 Pt II D.O. 26

27/1/17 **5th Pns.** Provided Overseas

Perfect. 7/2/17 Pt II D.O. 26

Landed Home

24/2/17 **L.R. 7641**
Call 40 m 36 d 1-30/4/17

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
26/3/17	O. L. Lewis	Ad. (Light) Cam	Luice	21/3/17	B 213. D.C. S. 3.
26/3/17	-	Key unit	-	23/3/17	-
24/3/17	3 L. F. A.	To Duty	-	23/3/17	A36. 16 3070 - 8734 D.C.S. 46.
17.11.17	Old Unit	Comm To 3rd Army F.P.	Acheux	18/11/17	B 213
15.11.17	Do	Sentenced To 3 dys 7 th Field Not Complying with a Company order, in that he was improperly dressed on parade	Field	15/11/17	B 2069 H. L. O. 103. d. 27.11.17
24.11.17	Do	Entry on B 213 d. 17.11.17 Should read Comm To	Hauterville	19.11.17	B 213 d. 24.11.17
22.11.17	Do	Sentenced To 16 dys 7 th Field Talking in the ranks. Insolence To an NCO	Field	17.11.17	B 2069, H. L. O. 107. d. 7.12.17
8.12.17	Do	Rejoined unit from 7 th Field	Field	6.12.17	B 213.
1.2.18	Do	Granted Leave	Do	3.1.18	L. 72 85 K.H. 17-48
19.1.18	Do	Rejoined unit from leave	Do	17.1.18	B 213.
9.2.18	Do	Comm To F.P.	Lillers	7.2.18	Do.
7.2.18	Do	Sentenced To 28 dys 7 th Field Drunk on 2.2.18 from 9 th am To 10.30 am 4.2.18	Field	5.2.18	B 2069 H. L. O. 10 d. 18.2.18
9.2.18	Do	Rejoined unit	Field	7.2.18	B 213
72.2.18	Do	Detached To 1 st CR 2 Pending Transfer	Do	22.2.18	Do

Sheet 2
Casualty Form—Active Service.Regiment or Corps *5th Pioneer*Rank *Sgt.* Surname *Shannon* Christian Name *V.A.*Religion *War* Age on Enlistment *11-9-16* years *11-9-16* monthsEnlisted (a) *11-9-16* Terms of Service (a) *War* Service reckons from (a) *11-9-16*Date of promotion to present rank *11-9-16* Date of appointment to lance rank *11-9-16*Extended { } Re-engaged { } Qualification (b) *11-9-16*
or Corps Trade and rate *11-9-16*Occupation *11-9-16* Signature of Officer *11-9-16*

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked ...			
		Disembarked ...			
<i>27.4.18</i>	<i>5 CRA</i>	<i>Repaired unit</i>	<i>Field</i>	<i>22.10.18</i>	<i>B.213</i>
<i>10.10.18</i>	<i>229th F.A.</i>	<i>By Hand. L. (Acc) Adm</i>	<i>229th F.A.</i>	<i>10-10-18</i>	<i>A. 714</i>
		<i>Do</i>	<i>Duty.</i>	<i>10-10-18</i>	
<i>1st</i>	<i>5 CRA</i>	<i>Sentenced to 10 days F.P.</i>	<i>Field</i>	<i>7-10-18</i>	<i>B. 2069.</i>
		<i>No. 2. for A.O.S. A.W.L.</i>			<i>A. 114.</i>
		<i>from 9.30pm 29-9-18 to</i>			<i>d. 23-10-18.</i>
		<i>7.00 am 30-9-18. Forfeits</i>			
		<i>1 days pay by Adm.</i>			
<i>2-11-18</i>	<i>1st</i>	<i>Repaired unit</i>	<i>Field</i>	<i>10-10-18</i>	<i>B. 213.</i>
<i>28.11.18.</i>	<i>63 bbl.</i>	<i>V.O. Soft. Sore. Adm.</i>	<i>63 bbl.</i>	<i>26.11.18.</i>	<i>A. 2586.</i>

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) Signaller, Shoeing-Smith, &c.

W. 8625—M2733 2000m 9/17 (35611) C. P. & S., Ltd., Form B./103 E/1807.

P.T.O.

1078597.

Simonelli

V. H.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
21-11-18	5 Chd	Sentenced to 28 days F.P. No. 2, for W.O.A.S. A.M. 07.00 hours 14.11.18 to 16.30 hrs 20-11-18. Forfeits 1 day pay by A.M.		20-11-18.	P. 2069. Pt. D. 135 d. 3-12-18.
4-12-18.	7 Gen.	7 Gen.	51 Gen.	4-12-18.	A 9600.
3-12-18	A.	A.M.	7 Gen.	3-12-18	A 9559.
14-12-18.	A.	Forfeits field allowance in place of stoppage of pay at the rate of 50 cents per diem whilst in hospital from 3-12-18 to 4-12-18. (1 day).			A. F. O. 1643. A. F. O. 8627. Pt. D. 143 d. 17-12-18.
4-12-18.	51 Gen.	A.M.	51 Gen.	A.	A. 183.
26-11-18.	39 Stat.	Soft blame.	39 Stat.	26-11-18.	A. 170.
29-1-19.	A.M.	S.O.S. to Chd. Pool		1-2-19.	A. 125. Pt. D. 11/19.
✓	✓	S.O.S. from 5 Chd.		2-2-19.	Pt. D. 1/19.
9-2-19	C.G.B.D.	S.O.S. for Demobilization + reported to C.R.T. Depot		10-2-19	A.R. D.O. 3/1919.
		Knotty Ash after inspection			
3/3/19	C.R.T. Depot	T.O.S. this Depot from 5 th CAT C.G.D. Witley	Knotty Ash	22/3/19	149 Pt. D. 11/19

Lieut. for Lt.-Col., A. A. G.
Canadian Section, G. H. O. 3rd Echelon, B. E. F.

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McCombes

SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103—1.
Part I.

(1)*Substantive rank *Acting rank * [To be entered in pencil to facilitate alteration.] (4) Surname (5) Christian Names (6) Army Form, number of, Attestation } Form or Record of Service paper } (7) Whether of British or of Alien origin [vide A.C.I. 578 of 1918] (8) Date of birth as stated on enlistment (9) (a)	(2) Regiment or Corps	(3) Regtl. No.

(10) Enlistment (b)	(11) Engagement (c)
(12) Service reckons from (date)	(13) Special conditions (if any) of enlistment (d)
(14) Any subsequent variations (if any) } of conditions of service }	

Initials and Rank of
an Officer.

(Authority)

(date)

(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) (Record of Occupation in Civil life (vide Army Order 93 of 1917)
				Industrial Group No. Trade or Calling Married or Single Particulars of Trade Test Occupation Cards despatched on (date) Second Occupation Card despatched on (date)

(17) Next of Kin	(Place)	(Signature of Posting Officer)
(18) Demobilizer (f)	(Date)	
(19) Pivotal-man (f)	or (21) Corps trade and rate	
(20) Qualifications (g)		
(22) Extended }	(23) Re-engaged }	
(24) Miscellaneous entries:—		

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [vide A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoing-smith, &c.

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W1889—PP1150 1M 5/18 G.W.P.Co (3490)

(A) Report		(B)	(C)	(D)	(E)	(F)
Date	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer

Attached C.C.C. Kimmel Park for
return to Canada. Part II Orders
No. ~~888~~ ~~14-4-19~~ Ceases to be attached
C.C.C. Kimmel Park on embarking
for Canada, Part II Order
No. ~~888~~ ~~14-4-19~~

Commanding Wing,
Kimmel Park camp.

APR 12 1919

EMBARKED FOR CANADA

APR 12 1919 O.S. T.O.S. No. 2 DISTRICT DEPOT, TORONTO

PART II D. O. 113

APR 23 1919 S.O.S. No. 2 District Depot

Part II, D.O. No. 116

[Signature]

Lieut.
For O. G. No. 2 District Depot

Nothing to be written in this margin.

JM.

Rank

Pte

Name

SIMONELLI, Victor Andrew

Reg'l No.

R-122
8,401-50,000-21-10-16.
1078597

Unit

5th Pioneer Bn.

If in perm. Corps,
What Unit?

Married or Single Single.

Place and Date of Enlistment Sherbrooke P.Q. 11th Sept 1916, Place of Birth France, Nic.

Name and Address, Next-of-Kin Cristine Simonelli.

98 High St Norwich Conn U.S.A.
South Ryegate, Vermont, U.S.A.

Relationship Mother.

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

N/E. R.B. No	16028
File R.B.	
Category	Can OK.

Discharge, Date and Place

Reason

Character

Report.		Record or promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
Date.	From whom received.				
ARRIVED in ENGLAND*SS METAGAMA DEC, 6, 1916					
5/2/17.	5 th Pns.	S.I.S. to C.R.I. Depot.	Bramshott.	5/2/17	R.H. 30. 36.
6/2/17	Depot	T.O.S. from 5 th Pns.	Purfleet	6/2/17	P.H. 20. 26.
6/2/17	do	S.I.S. to 5 th Bn. C.R.I.	do	7/2/17	—
7-2-17	5-6 R.I.	Taken on strength.	do	7-2-17	—
4-4-17	Llo	Reported from Base	"Wounded"	21-3-17	C.L. A 17 not stated
4-4-17	Llo	" " "	"Rejoined Unit"	23-3-17	" A 17 " "
30-4-17	Llo	Arrived in France	Field	24-2-17	P.H. 36.
8-2-19	CRT Pool.	T.O.S. from 5 th CRT	" "	8-2-19	— / 5 CRT. D.O. 11 D. 1.2.19.
11-2-19	CRT Pool.	S.O.S. & posted to CRTD (unofficially)	" "	10-2-19	P.H. 3.

A.F.B. 103 CHECKED
30 MAR 1917
jgs

A.F.B. 103 CHECKED
30 MAR 1917
Jgs

Report.		Record of promotions reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
		46-I-63		13.4.19	
28-3-19	CR TD	LOS to MD Wing 2	per K. Ash	27-3-19	2082 MD 21 15.75/29.3.19
23.2.19.		LOS from SCRT.		22.2.19.	 49.7 MD 21 15.75/29.3.19 <i>Entered in error sub.</i>
14.4.19	MD 2	LOS to Canada	 Rhye	12.4.19	— 88.

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

DIRECTIONS TO
DENTAL OFFICERS

NAME OF SOLDIER (Block Letters)

SIMONELLI V.

REGIMENT

5th C.R.I.

RANK

Lp

No. 1078597

Date of Examination in England

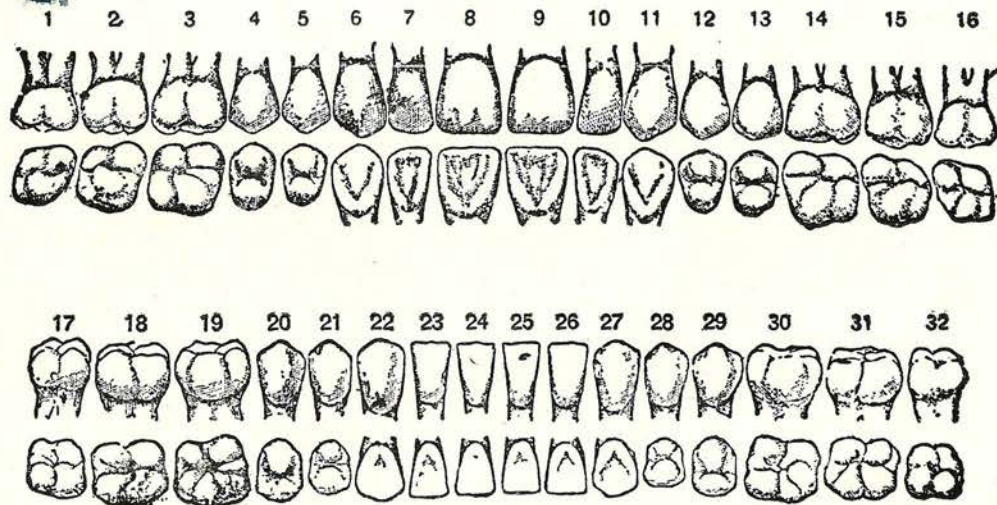
28.2.19

Date of Examination in France

1. This form will be made out for each individual at the time of Demobilization in England or France.

2. Figures as per chart will be used to designate teeth concerned.

3. In reference to Partial Dentures the numbers of teeth thereon will be stated



PRESENT DENTAL REQUIREMENTS

1. FILLINGS

30.

2. EXTRACTIONS

3. CROWNS

4. DENTURES

(a) Full Upper

(b) Part Upper

(c) Full Lower

(d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)

(a) In Canada

(b) In England

(c) In France

Signature of Dental Officer

A. B. H. B. H.

KNOTTY ASH CAMP,
LIVERPOOL

5th PIONEER
BATTALION
C. E. F.

ORIGINAL

ORIGINAL
PASSED MED. BOARD

MEDICAL HISTORY SHEET.

Surname Simonelli Christian Name Victor

Examined { on 11th day of Sept 1916
at Sherbrooke P.Q.

Approved by

G. Hume

Birthplace { City or Town France
County Nie

Rank Private M.O.

Apparent age 18

Trade or occupation Machinist

Height 5 Feet 11 1/2 Inches.

Weight 165 Lbs.

Chest measurement { Minimum 33 inches.

Maximum expansion 36 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right Left

Number 1

When Vaccinated last Childhood

(a) Marks indicating congenital peculiarities or

previous disease None

(b) Slight defects but not sufficient to cause rejection

None

None

None

None

None

None

None

None

None

None

None

None

None

None

None

None

None

None

None

None

None

None

None

None

None

None

Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
Date.	Result.	VACCINATIONS.
<u>11/9/16</u>	<u>76</u>	<u>C. G. Hume</u> M.O.
		M.O.
		M.O.
Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>15/9/16</u>	<u>76</u>	<u>C. G. Hume</u> M.O.
<u>22/9/16</u>	<u>76</u>	<u>C. G. Hume</u> M.O.
<u>7/10</u>	<u>76</u>	<u>C. G. Hume</u> M.O.

Enlisted on 11th day of September 1916 at Sherbrooke P.Q.

Corps.	REG'TL NUMBER.	HABITS.	DATE.
<u>5th Pioneer Bttn C.E.F.</u>	<u>1098597</u>		<u>11th Sept 1916</u>
<u>Can. Railway Const'n Corps</u>	<u>Trans 5th Bn. C.P.T.</u>	<u>7.2.17</u>	<u>5th. Feb. 1917.</u>

Adjutant Blaser

5th Pioneer Battalion C. E. F.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Wentworth</u>	<u>24-3-19</u>	<u>Nil</u> PASSED MED. BOARD	<u>'A' with no cpts</u>

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

Surname Simone Christian Name Victor

Surname Simone Christian Name Victor

[illegible]

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 1078597 Rank SPP Surname SIMONELLI
(Given name in full) VICTOR
Unit or Corps C A T D Birthplace NICE FRANCE

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer.)

1. GENERAL DESCRIPTION:

Physique good Weight 165 lbs. Height 5 ft. 11 1/2 in. Colour of Eyes Brown
Nutrition good
Pulse normal
Condition of arteries good
Vision Rt. 9/6 Left 9/6
Hearing (conversational voice) Rt. 2 1/2 ft.
Left 2 ft.

Identification marks, scars, or deformities.
(Give cause and date of origin).

Two scars on back of lt hand. Prior to enlistment

Opinion as to general health and physical condition good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No") (Subjective evidence may be sufficient in certain cases.)

Nervous System no Genito Urinary System yes Cardio-Vascular System no
Special Senses no Integumentary System no Respiratory System no
Disturbance of Mentality no Muscular System no Digestive System no
Osseous and Joint System no Any other general condition no

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

Amputation of right leg. V.D. Left leg 25-11-18.
to 4-6-18. France. Recovered. no disability.

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Knolly Ash (Overseas)

Date 24-3-19 Signed W. B. Hooper M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature x J. Simonelli

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at (Canada)

Date Signed M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature

(If not satisfied, M.F.B. 227 will be completed by a Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

Report on Wounds or other Injuries, received otherwise than in Action.

114
Gen. No.
4269.

Certificate of Medical Officer.

No. 1078597. SPB SIMONELLI, V. 5CAN RLY TRNPS.

was admitted to hospital on the 19-3-17. suffering from Int Displacement of Knee Joint (L)

† Here insert "trivial" or "serious."

† Here insert "will" or "will not."

* Here insert "claims" or "does not claim."

The disability is of a † Final nature, and in all probability † will not interfere with his future efficiency as a soldier.

* He Claims that he was in the performance of military duty at the time of the accident.

(If the soldier makes no claim that he was on duty at the time, the certificate below should be signed by him.)

Station In the field General Shuterford
Date 19-3-17. Capt R. R. R. Medical Officer in Charge.

Certificate to be signed by soldier.

I, _____ hereby declare that the injury sustained by me on the _____ did not occur while I was in the performance of military duty.



Station _____ Date _____
{ Soldier's Signature.
{ Signature of Medical Officer.

Certificate of Commanding Officer.

(This certificate will be completed only in cases of trivial injury where the soldier claims to have been injured while on duty.)

† Here insert "occurred" or "did not occur."

I certify that the injury to the above-named soldier † occurred while he was in the performance of military duty.

† If on duty, state (a) The date of the injury. (b) The place where it occurred. (c) The nature of the duty. (d) Whether the soldier was in any way to blame.

† The above named soldier was on duty when accident occurred (a) on the 19th March 1917 (b) It occurred on the village of Rossan, (c) He was Despatched Rider (d) He was not to blame

The soldier has been so informed.

Station Baincourt H. Earle Capt.
Date March 21st 1917 Commanding Detachment 5th C.R.T.

This Army Form will be attached to the Medical History Sheet, on which it will be recorded whether the soldier was on duty, and whether he was to blame.

SURNAME.

Simonelli

CHRISTIAN NAMES

Victor

REGL. No.

1078597

RANK

Pioneer

UNIT

5th Pioneer

FORMER CORPS

4th Fld. Can. Engineers

CARD No.

23-4-19
 26-4-19
 220

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Simonelli Mrs Christine

RELATIONSHIP TO SOLDIER

Mother

ADDR

104 High St., Norwich,
 98 Conn., U.S.A.

(auth. 5-4-21-38-1-2/4/15)

S.A.A.P. 14-1-18

COUNTRY OF BIRTH

France Nice

DATE

June 12th 1898

PLACE OF ATTESTATION

Sherbrooke, P.Q.

DATE

Sept. 11th 1916

R 10 20-4-19 307 R/E

MARRIED

SINGLE *yes*

WIDOWER

TRADE OR CALLING

machinist

RELIGION

Roman Catholic

DESCRIPTION.

APPARENT AGE

18 YEARS

MONTHS

HEIGHT

5 FEET

11 INCHES

CHEST MEASUREMENT

36 INCHES

EXPANSION

3 INCHES

COMPLEXION

Brown

EYES

Brown

HAIR

Brown

DISTINGUISHING MARKS

Not stated

MEDICAL EXAMINATION.

PLACE

Sherbrooke, P. Q.

DATE

Sept 11th 1916

Present address - Sherbrooke, P. Q.

NAME

RANK AND CORPS

CABLE

No.

DATE

NATURE OF CASUALTY

REG'T L No

H. Q. FILE NO. 649-

FOLLOWS

No.

FOLLOWS

Simonelli Victor Andrew
Pte 5th Railway Troops
M-1165 3-4-17. Reported wounded march 21st 1917
returned to duty march 23rd 1917

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
a17	Rept from Base	21-3-17	Wounded. (not stated)
a17	" " "	23-3-17	Rejoined unit " "
a350	① 229 3rd Amb.	10-10-18	Inf. R. Hand accid
a350	① " " " Disc. "	"	" " Hand "
a394	② 7 Gen. Wimerux	3-12-18	736.
a395	② 51 Gen. Etaples	4-12-18	736
a440	" " Disc. "	29-1-19	42.

Reg. No. 1078597

Next of Kin Christine Simarelli, 98 High St.
Newrich, Conn. U.S.A

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918						
10-10	229 F. Amb.	Inj. 2. Hand (Rec)		0350		38725
10-10	20 Unit	- 010 -		0350		
3-12	78 Jap. Hammer		736	A394		6173
4-12	51 Jap. Cataples		- 010 -	A396		6161-6
29-1-19	10 men captured		42	A440		7082-8

[illegible]

No. 1078597 RANK

Pvt

NAME

Simonelly V

T. O. S. 11-9-16

UNIT

5th Pioneer Battalion, C. E. F.

(Do. O. 160.13-9-16)

M. D. Vgl.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 sept 11	1916 sept 30	✓	awarded 6 days C. O. for discharge diem.	Do. O. 191. 17-10-16.
est		✓		
now		✓		

7106—250m—7/2/17.

Name **Simonelli.**

Rank Pte.

Reg. No. 1078597

Victor. Andrew

Unit 5th. RLY. Troops

Next of Kin U.S.A.

[illegible]

[illegible]

26
Number

1078597

Rank

~~Pvt~~ Spr. B

Surname

SIMONELLI

Christian Name

Victor Andrew

Units

1st Air Pz Gp

Theatre of War

France

Date of Service

24/2/17

Remarks

Latest Address

~~161 Mount Pleasant St
Norwich~~

Roll No

P.R. 4
Cotton Vermont Conn

Bray 10358

U.S.A

Surname

Christian Name or Names

Reg. No.

SIMONELLI.

V.A.

1078597.

Rank

Unit

Spr.

C.R.T. 5.

Cas. List.

229. F. Amb.

10-10-18.

21-10-18.A350.

Inj.L. Hand. Accid. *h*

Dis.

10-10-18.

11-12-18 *a/394-2.*7 *G. Winescent*

3-12-18

*rose. h.*12-12-18 *a 395-2*51 *Gau Etaples*

4. 12. 18

6.2.19 *a 440**Disc 28.1-19*

Cas. List.

Surname

Christian Name or Names

Reg. No.

Samonelli.

Rank

Unit

V.A.

Co.

1078597.

Troop

Batty.

Pte.

Hospital

5th. C.R.T.

Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1)

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Date

C.L. 4-4-17. A/17.

REMARKS

R.F.Base. Wd. 21-3-17.

Rej. Unit. 23-3-17.

A.M.D. 2 DEPT.

Bch. of D.G.M.S. O.M.F.C. London.

R

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12
 50m.-7-16
 H. Q. 1772-39-819

To Whom *Mrs Christine Simonelli*
 Address *South Rye Gate*
Vermont
U. S. A.

By Whom Assigned *Simonelli V*
 Regtl. No. *1078597*
 Rank *Pvt.*
 Corps *5th*

Rate *\$20⁰⁰/_{xx}*

DEC 1 1916

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 50m.—7-16
 1772—39—819.

Sheet No. 2
 (Assignee)

L. L. Job 5470—Req. 6888.

Mrs. B. Simonelli

PAYMENTS.

Name of Soldier

Simonelli V
#1078597 Pnr. 5th Pnr. Bn.

Month.	Year.	Cheque No.	Amt.	Remarks
			<i>\$20⁰⁰/_{xx}</i>	<i>DEC 1 1916</i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.		<i>R 36446</i>	<i>20</i>	
Jan.	1917	<i>U 40999</i>	<i>20</i>	
Feb.		<i>V 42907</i>	<i>20</i>	
March		<i>H 52863</i>	<i>20</i>	<i>20 L</i>
April		<i>F 4828</i>	<i>20</i>	<i>20 Cu</i>
May		<i>F 11866</i>	<i>20</i>	
June		<i>E 18982</i>	<i>20</i>	<i>s</i>
July		<i>F 25247</i>	<i>20</i>	<i>c</i>
Aug.		<i>V 31939</i>	<i>20</i>	
Sept.		<i>E 39609</i>	<i>20</i>	
Oct.		<i>F 45531</i>	<i>20</i>	
Nov.		<i>O 53379</i>	<i>20</i>	
Dec.		<i>O 61041</i>	<i>20</i>	<i>260 J</i>
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

A.

COUNT

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

Month.	Year.	Cheque No.	Amt.		Remarks	
Aug.	1918					
Sept.						
Oct.						
Nov.						
Dec.						
Jan.	1919					
Feb.						
March						
April						
May						
June						
July						
Aug.						
Sept.						
Oct.						
Nov.						
Dec.						
Jan.	1920					
Feb.						
March						
April						
May						
June						
July						
Aug.						
Sept.						
Oct.						
Nov.						

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

05443

Dec 1/16.

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

20			
----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. 1078594.

Rank Pmr Promoted

Reverted

Discharge

Soldier's Name

V. Simonelli
5th Pioneer Bn.

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Mrs Christine Simonelli

Address

South Rye Gate Vermont.

Change of Address

104 High St. U.S.G.

1

Norwich Conn. 10-1-18

2

Norwich Conn.

3

98 High St. Norwich, Conn. U.S.A.

4

161 Mt Pleasant St. per card 26/4/18

Date	Cheque No.	Amount S/A	Amount A/P	Total
Dec 31			260	260
Jan - 18	20-447		20	20
Feb	67876		20	20
Mar	95810		20	20
Apr	9415		20	20
May	22708		20	20
June	15585		20	20
July	26968		20	20
Aug	39662		20	20
Sept	53745		20	20
Oct	68693		20	20
Nov	83270		20	20
Dec	99936		20	20
Jan	113828		20	20
FEB	126864		20	20
MAR	138684		20	20
Apr	7414		20	20
			580	580

16819-V-1

REMARKS

M.R.O. 13 15-4-18. SM.

M.R.O. 44817 (alter) and 26/4/18 a.B.U.

MD no 2

A/c Closed 30-4-19

Ret'd per Adriatic

Date 20/19. M.F.W. 187 26/19

Clerk S.B.S.

M.R.O. 72794 Destroy 26/19



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date

Cheque
No.Amount
S/AAmount
A/P

Total

REMARKS

ASSIGNED
PAY.ENGLAND or
CANADA.SEPARATION
ALLOWANCE.ENGLAND or
CANADA.

NAME:- SIMONELLI

Victor

EFFECTIVE
DATE:-

1.12.16

EFFECTIVE
DATE:-

NUMBER:- 1048594

AMOUNT:-

20⁰⁰

AMOUNT:-

PARTICULARS OF RANK OR APPOINTMENT

NAME, ADDRESS, RELATIONSHIP & AUTHORITY

WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE
WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

AUTHORITY

DATE
EFFECTIVE

RANK OR APPOINTMENT

Mrs Christine Simonelli

98 High St, Norwich, Conn, U.S.A

Mother

Stopped effec 1-4-19

L 4173

C.R.T.D 15 R.A.S.

M.D. 1

Pvt

UNIT AND TRANSFERS

ORIGINAL UNIT:- 5 Pioneers

DATE ACCOUNT FIRST OPENED:- 1.12.16

AUTHORITY

DATE
EFFECTIVEDATE LEDGER
SHEET T'S F'D

UNIT TRANSFERRED TO

5 CRT

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS

UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED
BY INSERTION OF DATE CHARGED IN RED INKDATE OF
PAYMENTNUMBER
OF A.R.

UNIT PAID BY

AMOUNT

DATE OF
PAYMENTNUMBER
OF A.R.

UNIT PAID BY

AMOUNT

3-3-5 CRTD.

L 1187

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY

PAY

F.A.

P.F.A.

SUBS'CE
ALL'CE

1

10

PARTICULARS OF RENDERING NON-EFFECTIVE

Reason 31/10/18 R.A.S. CRTD. 31/10/18 R.A.S. M.D. 1

6-1-15

6-4-15

MONTH

PARTICULARS

CR. 1

CR. 2

PARTICULARS

DR. 1

DR. 2

DR. 3

DR. 4

BALANCE

DEFERRED

SEPARATION

1918

March 31

Bal forward
PP

33

10-4-4-18-1 CRT

1

535

Apr.

CAP

20

87-20-4-18-1 CRT

12

803

1886

May

PP

33

34 10

CAP

20

20

41 15/5 5 CRT

2

268

331 31/5

11

268

22 68

10 12

3280

June

PP

34 10

33

CAP

20

20

421 15/5 5 CRT

2

268

563 30/6

13

357

20

337

July

PP

33

34 10

CAP

20

20

695 15/5 5 CRT

2

357

916 31/7

14

357

20

359

3769

Aug

P.P.

34 10

34 10

C.R.P.

20

20

1037 15/8 5 CRT

4

357

1127 31/8

23

357

1769

1412

1055

Shopped Refec 1.4.19

L 4173
CR. 75 to R. Ad.
M.D. 1

UNIT AND TRANSFERS			
ORIGINAL UNIT:- <i>5 Pioneers</i>			
DATE ACCOUNT FIRST OPENED:- <i>1.12.16</i>			
AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S F'D	UNIT TRANSFERRED TO
			<i>5 CRT</i>

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
<i>3.3.</i>	<i>5411</i>	<i>CR. 75</i>	<i>£1.11.87</i>				

DAILY RATES OF PAY AND ALLOWANCES				
AUTHORITY	PAY	F.A.	P.F.A.	SUBS-CE ALL-CE
	<i>1</i>		<i>10</i>	

PARTICULARS OF RENDERING NON-EFFECTIVE

Defcon 31/3/19 CR. 75 to R. Ad. 6/1/19 CR. 75 to R. Ad. 6/1/19 CR. 75 to R. Ad.

6.1.15 6.4.15

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
<i>1918</i>									<i>DR</i>		
<i>Mar 31</i>	<i>Bal forward</i>								<i>18 48</i>		
<i>Apr.</i>	<i>PP</i>	<i>33</i>		<i>10-4-4-18-1 CRT</i>	<i>1</i>	<i>5 35</i>					
				<i>cap</i>				<i>20</i>			
				<i>87-20-4-18-1 CRT</i>	<i>12</i>	<i>8 03</i>			<i>18 86</i>		
		<i>33</i>				<i>13 38</i>		<i>20</i>			
<i>May</i>	<i>PP</i>	<i>34 10</i>		<i>cap</i>				<i>20</i>			
				<i>41 15/5 5 CRT</i>	<i>2</i>	<i>2 68</i>					
				<i>331 31/5</i>	<i>11</i>	<i>2 68</i>			<i>22 68</i>		
		<i>34 10</i>				<i>5 36</i>		<i>20</i>	<i>32 80</i>		
<i>June</i>	<i>PP</i>	<i>33</i>		<i>cap</i>				<i>20</i>			
				<i>421 15/6 5 CRT</i>	<i>2</i>	<i>2 68</i>			<i>20</i>		
				<i>563 30/6</i>	<i>13</i>	<i>3 57</i>			<i>3 37</i>		
		<i>33</i>				<i>6 25</i>		<i>20</i>			
<i>July</i>	<i>PP</i>	<i>34 10</i>		<i>cap</i>				<i>20</i>			
				<i>695 15/7 5 CRT</i>	<i>2</i>	<i>3 57</i>					
				<i>916 31/7</i>	<i>14</i>	<i>3 57</i>			<i>3 59</i>		
		<i>34 10</i>				<i>7 14</i>		<i>20</i>	<i>37 69</i>		
<i>Aug</i>	<i>P.P.</i>	<i>34 10</i>		<i>C.R.P.</i>				<i>20</i>	<i>17 69</i>		
				<i>1037 15/8 5 CRT</i>	<i>4</i>	<i>3 57</i>			<i>14 12</i>		
				<i>1122 31/8</i>	<i>23</i>	<i>3 57</i>			<i>10 55</i>		
		<i>34 10</i>				<i>4 14</i>		<i>20</i>			
<i>Sept</i>	<i>PP</i>	<i>33</i>		<i>cap</i>				<i>20</i>	<i>23 55</i>		
				<i>1233 15/9</i>	<i>3</i>	<i>3 57</i>					
				<i>1342 30/9</i>	<i>13</i>	<i>3 57</i>			<i>16 41</i>		
		<i>33</i>				<i>7 14</i>		<i>20</i>			

COMPILED BY *B.R. Lloyd*
CHECKED BY *B.R. Lloyd*

Forward

✓

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
OCT	PP	34	10	Balance Forward CAP 1443 15/10/18 5 CRT 10 amk 9.30 PM 29/9/18 67 days 30-9-18 23 10 days F.P. 21 day RW. 18. 30/11 10. 5 CRT 1550 30/10/18 5 CRT 43	373			20	1641 3051 2678 1468 1095		
Nov	P.P	34	10	CAP 1640 30/11 5 CRT 29 28d FPN ^o 2 20 ¹ / ₈ AWL 14 ¹ / ₈ to 20 ¹ / ₈ for 7 days pay by RN. 30/135 3 ¹ / ₈ (5 CRT)	933	1210		20	2395 1462		
DEC	✓	34	10	C.A.SD VD. 3 ¹ / ₈ 1/10 4 ¹ / ₈ 2d @ 60CS 30/134 17 ¹ / ₈ 5 CRT		38 50		20	2388 978 1098		
1919											
Jan	✓	34	10	CAP				20	312		
Feb	✓	30	80	CAP V.D. 4 ¹ / ₈ - 23 ¹ / ₈ 5 days @ 60 30/4 15 ¹ / ₈ CRT Per	933	3970		60			
	V.Bengal 4/1/18 Charged twice opposite acc. 7. Schas 3/1/18 to 23/1/19 Concomit 14 day with Field Punishment	60				3060		30	768 642		
Mar	✓	34	10	CAP 6441 3/3 96 487 8166 12/3 CRT D. 101 1947 11798 31/3 16 R/R 14 973 E				20	155 1792 2765		
		7390				24 34 30 60		40			
				Sosoban 12-14-19 SL 46 CRT							

"ADRIATIC" 20.4.19

DAILY RATE OF PAY AND ALLOWANCES

REGT. No. 1078597

Hami 11BALANCE
FROM
PREVIOUS
ACCOUNT

RELATIONSHIP OF DEPENDANT

AUTH

P. 559
MARRIED OR SINGLE

PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

S.
Nice, France
Christine Simonelli
South Ryegate, Vermont, U.S.A.
mother

NAME OF HOSPITAL

[illegible]

CTIONS, &c.
EFFECTIVE DATE
AUTHORITY

REG'L No. 1078597. RANK *Pir* NAME *Simonelli* Victor
IF IN PERMT. CORPS }
WHAT UNIT } UNIT *5th Pirs* Can Ry troops
TRANSFERRED TO *Purfleet B.D.* DATE *FEB 21 1917* AUTHORITY
PERMANENT FORCE ALLOWANCES TRANSFERRED TO *5th CRT* DATE *21/5/17* AUTHORITY *DO 36 30/4/17*
PLACE OF ATTESTATION *Sherbrooke* TRANSFERRED TO DATE AUTHORITY
DATE OF ATTESTATION *Sept 11th 1916.* TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY \$ *20.00* DATE EFFECTIVE *Decr 1st/16*
PAYABLE TO *Mrs Christine Simonelli, 98 High Street, Norwich, Conn, U.S.A. off 1/5/18 2013* RELATIONSHIP *mother*
South Life Gate, Vermont, U.S.A.

PITAL. &c.
NAME OF HOSPITAL

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE
PAYABLE TO RELATIONSHIP
STOP-PAYMENT FORM (Assigned Pay) RENDERED (DATE) EFFECTIVE REASON
DISCHARGE DATE AND PLACE REASON AND AUTHORITY
ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)
ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

QUITANCE ROLLS					CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
2	3	4			1	2	3	4				CREDIT	DEBIT			
DATE	NO.	DATE	NO.	DATE												
												28 00				<i>Balance from Canada</i>
					29 20				20 00		49 20	12 90				
<i>31/1/17</i>					2 43	9 73			20 00		32 76	14 84				
									20		20	16 84				
<i>5 CRT 24 172</i>							2 61				10 1 36					
<i>1/20 31/3</i>							4 86		20		30 09	29 65				
<i>1/71 83</i>							2 62									
									20		20 -	42 65				
									20		20 00	44 65				<i>Trans 5th CRT 21/5/17</i>
					2 62						171 45	51 52				<i>DO 36 30/4/17</i>
					2 61						5 23					
					2 68				20		25 36	59 16				
<i>950/20 10/7</i>					2 68			14 60	20		34 60	58 66				<i>alla S. Maria Teresa</i>
					2 68				20		25 35	67 41				<i>Infanteria, Massa, Canara, Italy</i>
<i>15/8</i>					2 68	2 68			20		30 71	69 70				
<i>0 01/8</i>					2 68	2 67										
					52 93	15 08	10 09	14 60	200		292 70					
					52 93	15 08	10 09	14 60	200		292 80					

1078594 Pte Simonelli V

Assd

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS			
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1		2		3		4		1	2	3	
			\$	C.			\$	C.			\$	C.				NO.	DATE	NO.	DATE	NO.	DATE	NO.	DATE				

DATE	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER. PAY	SEP. ALLOC. ENG.
Sept 1917	balance								69 40		
Oct	pp	34 10						20	83 80		
Nov				AR 605 30/9/17 5 CRT	2 68						
				" 550 15/9/17	2 68						
				Nov				20			
	pp	33		" 660 31/10/17 5 CRT	5 35						
	Dec	34 10		Dec				20			
				3d 7P 15/11/17 disprop. housed							
				PII 103 27/11/17 5 CRT		3 30					
				16d 384 17/11/17 Salting. Insolence concurrent with above		16 50					
1918		64 10		PII 107 7/12/17 5 CRT	10 41	19 80	40		80 39		
Jan	pp	34 10		AR 719 15/11/17 5 CRT	2 68						
				" 774 30/11/17	8 92						
				" 824 15/12/17	2 68						
				" 869 31/12/17	5 35						
				Can A P				20	74 86		
Feb	pp	34 10		1963	19 63			20			
		30 80		do				20			
				AR 909 15/1/18 5 CRT	75 84						
				" 974 31/1/18	2 68						
		30 80		28d 384 3/2/18, Disprop. housed 4/2/18	78 52						
		34 10		PII 10 19/2/18 5 CRT		30 80		20	4 14		
				Can A P				20			
March	pp			AR 1137 31/3/18 5 CRT	8 92						
		34 10			8 92	30 80	10				

7 14
34 10
41 24
59 72
18 48

[illegible]