1/9.14
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RE[illegible]UMENTS

NAME AIKINS. HAROLD. R. REGT. NO. 453552 UNIT [illegible] H. Q. FILE NO. 2843

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
S	ATTESTATION PAPER (M.F.W. 23, 133, or 51) 3		M			DEATH
	CASUALTY FORM (M.F.W. 54 or A.F.B. 103) 2					Category
	~~TRAINING HISTORY SHEET~~ (M.F.W. 113) Rec sheet					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122) 1		~~[illegible]~~			
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) 1					
3	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178) 2		H			DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465) 1					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					[illegible]
	MEDICAL EXAMINATION (M.F.W. 129) X					
	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)					DESERTION
1	LAST PAY CERTIFICATE (M.F.W. 44) 1					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	A F B 11 Day sheets					
1	C A D C [illegible]					
1	Day Card					
1	Minute from A5 re Medals					14-20
						21-20
						27-20
						1

CANADIAN FORCES RECORDS CENTRE PERS JACKET ROOM

401927

W. 2589
100M-11-18
1772-[illegible]-1377

ORIGINAL

ATTESTATION PAPER

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

3.35552

QUESTIONS TO BE PUT BEFORE ATTESTATION.

		(ANSWERS)
1.	What is your name?	Harold Richmond Aikins
2.	In what Town, Township, or Parish, and in what Country were you born?	Meaford, Grey Co. Ont
3.	What is the name of your next-of-kin?	Mrs Ethel R Aikins (Mother)
4.	What is the address of your next-of-kin?	146 Ruby St Lancaster Pa. U.S.A.
5.	What is the date of your birth?	July 24th 1895
6.	What is your trade or calling?	Student
7.	Are you married?	No
8.	Are you willing to be vaccinated or re-vaccinated?	Yes
9.	Do you now belong to the Active Militia?	No
10.	Have you ever served in any Military Force? If so, state particulars of former Service.	No
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

H. R. Aikins (Signature of Man.)

E. G. Armstrong (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, H. R. Aikins, do solemnly declare that the above answers made by me to the above questions 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.

H. R. Aikins (Signature of Recruit.)

Date June 25th 1915 E. G. Armstrong (Signature of Witness.)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, H. R. Aikins, 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.

H. R. Aikins (Signature of Recruit.)

Date June 25th 1915 E. G. Armstrong (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 Niagara this 25th day of June 1915

J. P. M. Campbell (Signature of Justice.)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

H. Isaacs Capt. (Approving Officer.)

M. F. W. 23.
200 M.—3-15.
H.Q. 1772-39-841.

DESCRIPTION OF H.R. Atkins ON ENLISTMENT.

Apparent Age 20 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height		5 ft. ..... ins.
Chest measurement	Girth when fully expanded	37 ins.
	Range of expansion	4½ ins.
Complexion		Fair
Eyes		Brown
Hair		fair
Religious Denominations	Church of England	
	Presbyterian	
	Methodist	yes
	Baptist or Congregationalist	
	Other Protestants (Denomination to be stated.)	
	Roman Catholic	
	Jewish	

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.)

1 burn scar

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 June 27 1915. ..... Capt

Place Niagara Camp ..... Medical Officer.

*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

H. R. Atkins 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.

Date June 30th 1915 ..... (Signature of Officer.)

..... Lieut.-Col.

Commanding 58th Batt'n, C. E. F.

P. 851.

a/5

LAST PAY CERTIFICATE.

No. 453552 Rank Pte Name Aikens H.R. Unit R.A.F. Cadets
Flight Cadet.
~~Nominated for embarkation to Canada~~ : Date 10.8.18 Auth. Sch. 22 Woking 17.10.18

CREDIT.	$	¢	DEBIT.	$	¢
BALANCE FORWARD as at 191			CASH PAYMENTS :—	141	13
EARNINGS :—					
From 1.5.18 to 9.8.18					
101 days at $ 1.00					
FA. ~~days~~ at $ .10	111	10			
days at $					
ANY OTHER CREDITS :—			OTHER CHARGES :—		
Interest on Deferred Pay 30.6.18	85	70			
Cr.Bal.30.4.18	85	70	WAR LOAN INSTALMENTS CHARGED :—		
			X ASSIGNED PAY for period from ....to....at $.... per month in favour of :—		
			Name		
			Address		
			Relationship		
			X SEPARATION ALLOWANCE, if any, in favour of same party as Assignment at $....per month		
X BALANCE DEBIT	205	31	X BALANCE CREDIT 9.8.18 £13.3.9	64	18
				205	31

"VICTORY" WAR LOAN
Amount Subscribed - $....
Amount Paid - - ....
Balance due - ....

I hereby Certify that I am satisfied that the balance of my account as shown on this statement is correct.

....
(Signature of Soldier.)

Transferred to Rest 4. Woking for Settlement

BALANCE GIVEN IS SUBJECT TO ANY CHARGES AND/OR CREDITS ENDORSED ON THE REVERSE HEREOF.

THESE PAYMENTS TO DEPENDENTS :— X (Strike out whichever inapplicable.)

X Have been stopped. Effective ....191....
or
X Are being continued in England for three months from ....unless other instructions are received from Ottawa
or
X Being a Canadian Payment, cancellation or otherwise of future payments will be dealt with by Ottawa.

COMPILED BY E.Winearls
CHECKED BY O.H.Loveday

CERTIFIED CORRECT .... Capt. Lieut.
FOR BRIGADIER-GENERAL
PAYMASTER GENERAL, O.M.F.C.

Date ....191....

ENDORSEMENTS.

DEBITS AND/OR CREDITS SUBSEQUENT TO ISSUE OF L.P.C.

Date.	Unit.	A.R. No. or Other Particulars	Amount. Cr.	Amount. Dr.	Paymaster's Signature.

Explanation of Debit Balance :—

.....

.....

For Use of Canada.

DATE	PARTICULARS.	DR.	CR.
	Balance on proceeding to Canada - - -		
	Pay and Allowance to..... -		
	Civilian Clothing Allowance - - - -		
	First Instalment Post Discharge Pay - -		
	Assigned Pay - - - - - -		
	Boat Expense Money - - - - -		
	Train Expense Money - - - - -		
	Cheque No..... Balance -		

PLACE OF EMBARKATION.....

DATE OF EMBARKATION.....

H.M. Transport.....

PLACE OF DISEMBARKATION.....

DATE OF DISEMBARKATION .....

ORIGINAL

MEDICAL HISTORY SHEET.

427

Surname Aikins *Christian Name* Harold

Examined { on 27 day of June 1915
at Niagara Ont.

Approved by W G Cobb
Rank Captain M.O.

Birthplace { City or Town Brantford.
County Ont

Apparent age 20

Trade or occupation Student

Height 6 Feet — Inches.

Weight 135 Lbs.

Chest measurement { Minimum 32½ inches.
Maximum expansion 4½ inches

Physical development Good

Small-Pox Marks

Vaccination Marks { Arm Right. Left. 1
Number 1

When Vaccinated last 9 yrs ago

(*a*) Marks indicating congenital peculiarities or previous disease

(*b*) Slight defects but not sufficient to cause rejection

Date	Fit or Unfit	Examined for Re-engagement,
		16 MAY. 19
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
July 15th 1915		W C Osler Capt
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
July 8th 1915		W C Osler Capt
" 12 "		M.O.
" 16 "		M.O.
		M.O.

Enlisted on 1st *day of* June 1915 *at* Owen Sound

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	31st Reg.			
Transferred to..	58th Bn. B.C.F.	453552		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

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.

M. F. B. 313.

100M.—1-15.
H. Q. 1772-39-439.

ORIGINAL

Surname Aitkins Christian Name Harold R

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital.			Dates of Discharge from Hospital.			DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Day	Month	Year	Day	Month	Year				

Army Form B. 117.

114
Gen. No.
4269.

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

Certificate of Medical Officer.

No. 453552 Pte AIKINS H.R. 58th Can. Bn att 3rd Div. Signals was admitted to hospital on the 12-5-17 suffering from Sprained Ankle Left.

†Here insert "trivial" or "serious."

The disability is of a † trivial nature, and in all probability

‡Here insert "will" or "will not."

‡ will not interfere with his future efficiency as a soldier.

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

*He does not claim 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

Date 12-5-17

R. Goulden Capt & A.M.C.
Medical Officer in Charge.

Certificate to be signed by soldier.

I, #453552 Pte E. AIKINS H.R. hereby declare that the injury sustained by me on the 12-5-17 did not occur while I was in the performance of military duty.

A.G's. OFFICE AT THE
No.
15 MAY 1917
16 6 4 19
CANADIAN SECTION

H.R. Aikins
Soldier's Signature.

Station In the Field

R. Goulden Capt & A.M.C.
Signature of Medical Officer.

Date 12-5-17

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 † _____ 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 soldier has been so informed.

Station _____ _____

Date _____ *Commanding* _____

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.

(92261) W 3725—1772 300,000 6/15 J J K & Co. Form/B. 117

Rank Pte Name AIKENS, Harold Richmond Reg'l No. 453552

Unit 58th Bn. If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Niagara, 25th June 1915. Place of Birth Meaford, Grey Co. Ont.

Name and Address, Next-of-Kin Mrs Ella R.Aikens,

141 Ruby St, Manchester, Pa. U.S.A. Relationship Mother

Assigned Pay Monthly $ 10 Payable to Mrs. E. Aikins

141 Ruby St Lancaster Pa. U S a. Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
1915										2	15/12	9 73					
Dec. 1	Dec 31	31	1.00	31 00	31	10¢	3 10	10 00*	44 10	49	31/12	24 33	10 00		44 06	04	* Clothing
1916										99	15/1	1460					
Jan 1	Jan 31	31		31 00	31	10¢	3 10	04	34 14	144	31/1	243	10 00		27 03	7 11	
										188		487					
Feb. 1 – 29		29		29 00	29		2 90		31 90	41		2 62 10 00		220	14 69	19 32	0032 1/2% ff 2 days pay
										42		262					
Mar 1 – 31		31		31 00	31		3 10		34 10	84		2 62 10 00			15 24	38 18	

BALANCE TRANSFERRED TO NEW LEDGER.

		122		1220	10	1442	0		6382	40		220	06	02	38	18	

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.	
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date							

L.L. 19226—M. & D. 7814.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
25m—4-17.
H. Q. 1772-39-819.

4

To Whom Mrs. E. Aikins

Address 141 Ruby St.,
Lancaster. Pa
U. S. A

Rate 50.00

SPECIAL REMITTANCE

Allied "394 5.7.17

By Whom Assigned Aikins, N. R

Regtl. No. 453552

Rank Pte

Corps 58th Bn

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917 1915			
Feb.				
March				
April				
May				
June				
July			A 14432 50	
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

CONSOLIDATED ACCOUNTS 1

File No. 155-H-12

WAR SERVICE GRATUITY.

1 N4 29-10-19 [illegible]

Register No. A 1078

Reg. No. 453552 Pte

Name Aikins Harold R

Address 141 Ruby St
Lamaster Penn
USA

Pay Soldier $ 420

W H Turner N G Davidson

Clerk J W Larose

Dependent

Address

Pay Dependent $

Days 183 Rate 70 Due 420-

Less P.D.P. credited

Less further Dr. Bal. or overpayment.

Net 420.00

RW104
11 11/19

Date	Ck. Order	Ck. No.	Amount	Remarks.	Date	Ck. Order	Ck. No.	Amount.
1 30/10/19	39221	537481	420 00	4/11/19	1			
2					2			
3					3			
4					4			
5					5			
6					6			

495-D.P.-100M-6-19 (10248).

GEN'L AUDITOR
Posting checked by
[illegible]
Date 30/10/19

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name Atkins Harold R
Surname Christian Name

Regimental Number 453552 Rank Pte

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Address (in full)

Rates:—Regimental pay $ per diem; Field Allowance $ per diem. Separation Allowance $ per month.

L.L. 53961—M. & D. 9721

	Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments to be Recovered	Total Amount Paid
		Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

M. F. W. 127
300M-1-19
1772-39-1140

Remarks:

L. L. JOB. 85506 M. & D. 5997.

M. F. W. 12.
20m.—9-15.
H. Q. 1772-39-819.

19/14

P. 40 Sw

2nd Contingent

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

To Whom Mrs Ella Aikins

Address 141 Ruby St.
Lancaster.
Penn.
U.S.A

Rate $10.00

By Whom Assigned Aikins H.R.

Regtl. No. 453551

Rank Pte.

Corps 58th Battn. Staff

NOV 1 1915

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.		R5142	20 ✓	Nov. + Dec.
Jan.	1916	M12295	10	
Feb.		N 15289	10	
March		S16177	10	

Consolidated Account

23

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
60m.—12-15.
1772—39—819.

Sheet No. 2. Mrs. Ella. Aikins

L. L. Job 89002.—Req. 6213.

PAYMENTS. # 453551

Name of Soldier Aikins H.R. Ont 58

Month.	Year.	Cheque No.	Amt.		Remarks.
April	1916	J182	10—		10.00
May		K3379	10		
June		K6609	10		
July		a 7159	10		
Aug.		a 11118	10		
Sept.		B15217	10		
Oct.		B19545	10		
Nov.		B 24492	10		
Dec.		B 33065	10		
Jan.	1917	D 37017	10		
Feb.		D 42568	10		10 J.W.
March		D 48641	10		10. L.
April		E 72	10		10. L
May		E 6580	10		
June		E 12991	10		10. E.
July		G 19963	10		
Aug.		G 26724	10		
Sept.		F 38042	10		
Oct.					
Nov.					
Dec.					
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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.				

R—122.

Rank Pte Name AIKENS, Harold Richmond Reg'l No. 453552

Unit 58th Bn. If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Niagara, 25th June 1915. Place of Birth Meaford, Grey Co. Ont.

Name and Address, Next-of-Kin Mrs Ella R. Aikens,

141 Ruby St, ~~Manchester~~ Lancaster Pa. U.S.A. Relationship Mother

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character ~~Sgt.~~ Pte

N/E. R.B. No. 4799
File R.L.
Category Impl Comm.

Report Date	Report From whom received	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
		Arrived in England		2 DEC 1915	
1.2.16	O/C 58 Bn.	absenting from firing pt forfeit. of 2 days pay.	Bramshott.	1.2.16	P&O #32
		Embarked for France.		20.2.16	N.R.
30.4.16	3rd Div Sig Co	Attached for instruction	In the Field	21.4.16	pt II #17 also 58th Batt pt 2 #20
18-3-18	58 Bn	Cease to be attch 3rd Div Sig Co	— " — Pte	21.2.18	DO 27 (3 C.D. Sig Co DO 13 of 18.3.18)
5-4-18	58 Bn	Transf to Eng & posted to 2 CORD pending Comm R.F.C.	— " — —	1.3.18	DO 34 (T.O.S. 2 CORD. D.O. 113 on Commd Cadet: Distt Depot of 13-6-18)
13-5-18	2 CORD	On command Cadet Dist Depot	Witley Pte	1-3-18	DO 113
		Cancelled 2 CORD Pt 17 of 21-1-19			
~~12-12-18~~	~~Do~~	~~Appt'd A/Sgt with pay & allowances~~	~~do~~	~~13-5-18~~	~~DO 293~~
14.12.18	Do	Ceases on Comd to R.A.F. & S.O.S. on being discharged in British Iles	do	9.8.18	DO 295

45 3552 - Aikens 1-1R

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 Document	
Date	From whom received					

Army Form B. 103 Tempy Record Sheet Regimental Number 453552

Casualty Form—Active Service.

Regiment or Corps 58 Bn

Rank Pte Surname Aikens Christian Name H. R.

Religion ..... Age on Enlistment ..... years ..... months

Enlisted (a) ..... Terms of Service (a) ..... Service reckons from (a) .....

Date of promotion to present rank ..... Date of appointment to lance rank .....

Extended { ..... } Re-engaged { ..... } Qualification (b) .....

or Corps Trade and Rate .....

Occupation ..... Signature of Officer.

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...			
30.4.16	3rd C.D. Sig Co	att. for instruction	Field	21.4.16	Pt II 6.17
					also 58th Bn
					Pt II 020.
6.6.17	58th Bn	Admd No 8 Can. Field Amb'ce	— " —	12.5.17	C L A 351
6.6.17	— " —	Dischgd " " " "	— " —	15.5.17	Shr. L ankle — " —
18.3.18	3rd C.D. Sig Co.	Ceases to be Attached a			
		Return to 58th Bn	"	21.2.18	DO 13

File in Emp Jnr COR

(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.

(6228) W. 13863/M1477 2,400,000 1/17 McA & W Ltd Forms B./103/4 (E. 886)

[P.T.O.

TO R2 B4

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				

DISCHARGED IN ENGLAND,
K. R. & O. Par. 392, Sec. XXV.

A. Leighton
Captain
Officer [illegible]ding,
No. 2 Canadian Discharge Depôt,

CERTIFIED CORRECT.
Canadian Record Office,
Westminster House,
7 Millbank, S.W.

Fill in Only.—Unit, Number, Rank and Name.

58th BATTALION

M. F. W. 54.
150M. 10-15.
H.Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps

Regimental No. 453557. Rank Pte Name Harold Richmond Aikins
C. E. F.

Enlisted (a) June 25 1/15 Terms of Service (a) Duration of war Service reckons from (a) June 25 1/15.

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)

Report: Date	Report: From whom received	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.
Embarked for		Overseas Service with	58th Battn.	C.E.F.	FEB 20 1916 D. J. McLeod Adjt for O.C. 58th Battalion. C.E.F.
		EMBARKED FOR FRANCE.		20 2 16	13144. C.Y. 1844. 9 M.G.2.
		Disembarked.		21/22/2/16.	
22.4.16	O.C. Unit.	attached to 3rd Canadian Div. Signal Coy.	Field.	20.4.16.	B. 213. Authy: Tel. Bell. 5 504. d. 20.4.16. 9th Cdn. I. Bgde. Hdqts.
31.3.16	G.O.C. 3rd. Con Div.	do for instruction	do.	21.4.16.	Authy: G.O.C. 3rd Con. Div. G. 954/1. d. 31.3.16. Ref. Cdn Sect. K.I. 147/5x. d. 13/7/16. Part x. No 20. d. 13/7/16.
19-5-17	8 C F A.	Sp. L. Ankle (acc) Ad 12 5/17	Div. Duty	15.5.17	A 36/182
21.7.17.	O.C. Unit	Granted 10 days leave to marseilles		16.7.17.	B213 Pt II nd #63 a/ 2.8.17
30.12.17	"	14 days leave	UK	26/12/17	B213. Pt 2 No 3/18.
13.1.18	"	Retd. from		10.1.18	" / ~~Rt 2 No~~
24.2.18	"	Rtd from Commission		21.2.18	"
✓	✓	Ceases to be attached to 3rd Div. Sig. Coy. on return to duty with Battn.		21.2.18	" / Rt 2 No. 27/18.

(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.

[P.T.O.

453552 Rte. Aikins, H.R.

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				
17.2.18.	A.G. G.H.Q.	Transferred to England with a view to obtaining a Commission in the R.F.C. and posted to 2nd C.O.R.D., Shorncliffe.		1.3.18.	A.G. 2148/94 (O). C.S. file K.I. 18-6827. and 25542. Rt. 2 No. 34/78. E.W. Doriet Lieut. for Lieut. Col., A.A.G.
13-5-18	2nd C.O.R.D.	T.O.S on posting from 58th Bn on Command to Cadet Distribution D.	Witley	1-3-18	D.O. 113 [illegible] for Lt. Col. I/c Records O.M.F.C
11.12.18	2 C.O.R.D	Ceases on C's RAFS SOS of O.M.F.C of disc in B Isles.	Witley	9.8.18	DO 295 Geo. Herrick Capt for Lt. Col. I/c Records O.M.F.C

C.A.D.C.5009. 50M-3-5 18.

CANADIAN ARMY DENTAL CORPS.

DENTAL CERTIFICATE.

NOTE:- This form will be attached to the Medical History sheet of each Other Rank being returned to Canada for disposal.

REGTL. No. 453552 * NAME AIKINS, H.R. RANK PTE UNIT 58 BAT
to R.A.F.

Date of Examination	Oct 8/18,
Present Dental Condition	missing five lower three upper
In case of loss, or decay of teeth, is the loss due to wounds, injury, or disease, directly attributable to Active Service?	Cavities two lower " two upper no,
Has he ever declined Dental Treatment?	no,
Recommendation	fill cavities

Date Oct 8/18

Station London,

Signature of Examining Officer ..... Capt.
C.A.D.C.

* Name should be entered in block letters.

1

FORM D.M.S. 1300.
8137—50m—28/2/17.

Surname	Christian Name or Names	Reg. No.
Aikens	H.R.	453552

Rank	Unit	Co.	Troop	Batty.
Pte	58th Bn			

Hospital — Date of Admission

8 C.F.Amb. 12-5-17

Transferred ..... Hosp.

..... Hosp.

..... Hosp.

..... Hosp.

Diagnosis Spr Lt Ankle

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION — Date

C.L.6-6-17 A351 Dis. 15-517

REMARKS

A.M.D. 2 Dept.
Bch. of D.G.M.S.O.M.F.C. London

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

Nov 1st 1915

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

~~10~~ -	20		

PARTICULARS OF SEPARATION ALLOWANCE

No. 453552 (1)

Rank Pte Promoted Reverted Discharge

Soldier's Name H. R Aikins

Battalion 58th Battn Staff

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs Ella Aikins

Address 141 Ruby St, Lancaster

Change of Address ~~Penn~~. U.S.A

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
						file 154-H-21
Sept 1917			230.	$230.00		a/c. Stopped 31/3/18 3M. 5/3/18 JAC 30/3/18
Oct.	C 50230		10 -	10 -		(Rounding on Cadet Course)
Nov	C 52041		20	20	T	A.P. 20.00 x Nov. & future. 2M 15 10/17 - 1M 20 10/17
Dec	C 59772		20	20	C	Br. M.R.O. 2 B. Send 30/3/18.
Jan	F 61028		20	20	S.	
Feb	B 90798		20	20		
Mar	G 98027		20	20		
			340	340		

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7993.

CONSOLIDATED ACCOUNT

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

	Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS

M. F. W. 128
400M.—6-17—1772-39-141
L. L. 22320—M. & D. 7993.

No meds by Air Min
B + V by this Dept: 649-A-4109 30/20

Number ..... Rank 2/Lt.

Surname AIKINS

Christian Name Harold Richmond

Units ..... Theatre of War France

Date of Service .....

Remarks .....

Latest Address 156 Park Ave., Montreal, P.Q.

Roll No. B Page 22937

5m-7-23.(M95).

REGT'L NO. 453552.

NAME Aikens, H. R.

H. Q. FILE NO. 649.

RANK AND CORPS Pte. 58th Bn.

FOLLOWS NO.

FOLLOWS

CABLE NO.	CABLE DATE	NATURE OF CASUALTY

L. L. 20497—M. & D. 7908

M. F. W. 42—50M.—5-17.
H. Q. 1772-39-393.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 351.	#8 C. F. Amb.	12-5-17	Spr. L. ankle
A 351	Disch	15-5-17	" " "

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS

Ex W.E. No meds. by Air Min — B + V by this Dept. 649-A-4109 9/11/20

Number 453552 Rank Pte.

Surname AIKINS

Christian Names Harold Richmond

Unit 58 Balth Can Inf. Theatre of War France.

Date of Service S.O.S. appointed Flight Cadet R.A.F. 10.8.18. auth. 2nd CORD. PEDO. 295 of 14.12.18.

Remarks Air Force Roll No 1. Page 1. AM. 252361/20/S.7. of 10.7.20

Latest Address

Roll No. B Page 3567

NAME

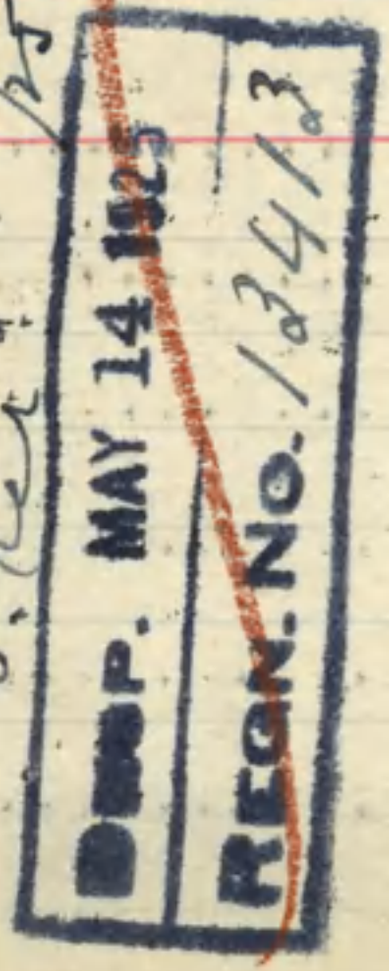
REGT. No.

RANK AND UNIT

NEXT OF KIN

CABLE	
No.	DATE

NATURE OF CASUALTY



Rec'd 5/6/25

DISP. MAY 14 1925

REGN. No. 13413

Creased for pre-ing.

29-6-53

M. F. W. 42—100M.—8-18.
H.Q. 1772 39-893.

No. 453551
453552?

RANK Pte

NAME Aikins, H. R.

T. O. S.

UNIT 31st Regt.

M. D. 2.

PAID FROM 1915	PAID TO 1915	SIG OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PARTICULARS	AUTHORITY
June 14	June 23	✓		
" 24	" 30	✓	now shown on 58th Bn.	
July		✓		
Aug		✓		
Sept		✓		
Oct		✓		
Nov		✓		
Dec		✓		

UNIT SAILED
Nov.
~~OCT~~ 22 1915

Form R. 149.
7106—250m—7/2/17.

Name AIKENS.Harold. *Rank* Pte. *Reg. No.* 453552.
Richmond.
Unit 58th.Battn..
Next of Kin U.S.A.

Date 1917.	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
12-5.	No.8.Can.Field Amb.		Spr.L.Ankle	A.351.		
15-5-	Discharged.		" " "	A.351.		

Date		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List

649-A-4109

B

CARD NO. 834 o/s

S.O.S. Dis 9-8-18
Comm. on R.C.F.
Do 295 of 14-2-18
2/T.R

SURNAME. Aikins

CHRISTIAN NAMES Harold R.

FOLL.

REGL. No. 453552 RANK Pte.

UNIT 58th Batt.

FORMER CORPS Nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Aikins, Mrs Ella R.

RELATIONSHIP TO SOLDIER Mother

ADDRESS 141 Ruby St., Lancaster Pa., U.S.A.

COUNTRY OF BIRTH Canada Meaford DATE

PLACE OF ATTESTATION Niagara, Ont. DATE June 30, 1915

Sailed from Halifax, Nov. 22nd/15 per S.S. "Saxonia"

272/3

L. L. [illegible]—M. & D. 6312 M. F. W. 22. 100m.—1-16. H. Q. 1772-[illegible]

MARRIED SINGLE yes WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

LIST OF DISCHARGE DOCUMENTS.

1. Proceedings on discharge. (Army Form B. 268.)
2. Proceedings on transfer to reserve (if any). (Army Form B. 2056.)
3. Duplicate attestation.
4. Army Form B. 97 (if any).
5. Declaration of change of name (if any).
6. Re-engagement paper (if any). Army Form B. 136).
7. Authority for continuance, or extension, of service (if any). Army Form B. 221.)
8. Court of Inquiry on an injury (if any) (Army Form A 2.)
9. Regimental conduct sheet. (Army Form B. 120).
10. Company conduct sheet. (Army Form B 121.)
11. Copies of convictions by Civil Power (if any).
12. Medical history sheet. (Army Form B. 178).
13. Medical report on invalid (if any). (Army Form B. 179).
14. Copy of receipt for purchase money (if any).
15. Attestation of fraudulently enlisted man for corps in which he has not been held to serve (if any).
16. Detailed statement of former service allowed to reckon towards pension (if any).
17. Copy of 3rd page attestation (in the case of men from abroad entitled to deferred pay who go to Netley or the discharge depot for discharge).
18. Descriptive return (Army Form D. 400), where required. See section 11 on second page.
19. Active service casualty form. (Army Form B. 103).
20. Employment sheet. (Army Form B. 2066).

In the case of recruits who are rejected before, or on, final approval, the discharge documents will consist of—

1. Duplicate attestation. (On third page the date and cause of discharge will be entered and signed by the competent military authority).
2. Medical history sheet (if any). (Army Form B. 178).

Instructions as to the preparation, dispatch, and custody, of discharge documents.

1. When a soldier is to be discharged, the documents retained with the duplicate attestation will be placed inside this form. Should any of the documents be missing, an explanation of the deficiency, signed by the commanding officer, must be substituted for the missing document. The officer in charge of records will then extract from the original attestation, any documents required to complete the list of discharge documents enumerated in the margin, which will then be placed in this form in the sequence given.

2. When men are discharged from the colours at home as medically unfit, or with claims to pension, Army Form B. 268 will be sent confirmed, together with the duplicate attestation and documents retained therein to the officer in charge of records 10 days in advance of the date for discharge in the case of invalids, and 14 days in other cases. This officer will then extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them in this form, and after carefully checking the duplicate attestation with the original forward the whole to the Secretary, Royal Hospital, Chelsea. When such men are discharged abroad, the same procedure will be adopted as above, with the exception that the discharge documents will be sent to the officer in charge of records immediately after discharge takes place (except in the case of men who are granted gratuities on discharge from local battalions or companies, Royal Artillery.

3. When soldiers are sent home from abroad for discharge, the documents retained with the duplicate attestation will be placed inside this form and sent home with the men for transmission to the officer who carries out the discharge, together with the following additional forms :—

(a) Discharge certificate (Army Form B. 2079 or Army Form B. 264).
(b) Character Certificate (Army Form B. 2067) if entitled.
(c) Copy company conduct sheet (Army Form B. 121) when required under King's Regulations.

The duplicate attestation and documents retained therein will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin and place them in this form.

4. The discharge documents of re-enlisted pensioners, on re-discharge, will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them inside this form, and forward the whole to the Secretary, Royal Hospital, Chelsea, irrespective of the cause of discharge.

5. The original and duplicate attestations of recruits who are rejected before, or on, final approval will be retained by the approving officer for one year, when they will be destroyed.

6. In all other cases the discharge documents will be sent, directly the discharge is carried out, to the officer in charge of records of the unit concerned.

7. Postage need not be paid, and receipts are not required, in the case of documents sent to Chelsea or to the War Office,

8. When the discharge documents of men not entitled to pension are sent to the officer who will have final charge of them, they are to be accompanied by Army Form B. 279, and that officer will, if they are found to be correct, sign and return Army Form B. 279. Should any document be missing, he must at once apply for it.

9. The officers having final charge of the discharge documents will arrange them according to regimental numbers, and enter the names in the alphabetical index, Army Book No. 129.

This space to be left blank for the Chelsea Number.

23-A-213

M

Army Form B. 268.

Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 453552. Army Rank Pte Dvr Gjt. Pte.

Name Aikins Harold Richmond
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps 58th Batt.

Battalion, Battery, Company, Depôt, &c. 2nd C. O. R. D
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge 9/8/18.

Place of discharge 2. C.D.D. London

1. *Description at the time of discharge.*

Age 21 years 3 months
Height 6 feet 2 inches
Chest measurement { girth when fully expanded 39 ins. / range of expansion 3 ins.
Complexion Fair
Eyes Brown
Hair Brown
Trade Student
Intended place of residence (To be given as fully as practicable) 1 C.D.D. R.F.C. Stamford Lines.

Descriptive marks.
Nil

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of being appld Flight Cadet in R.A.F. 10.8.18.
Authy:- C.R.O. R.A.F. 28 Kig 17.10.18
K.R.O. 392 XXV

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

To be filled in on the soldier quitting the Colours.

3. Military character :— VERY GOOD

4. Character awarded in accordance with King's Regulations :—
MILITARY CHARACTER.
VERY GOOD

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.

2 CANADIAN DISPATCH LONDON

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

* Strike out if not applicable.

D. D. & L., London, E.C.
A4502 W. W17176 M291 500,000 2/16 Sch. 33 Forms B. 268 40

[OVER.

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings? Not Applicable

Classification for service, or proficiency pay... ... ... Class _____

6. Campaigns, Medals and Decorations — France 9th Months

Certificate of education ... Not Available

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me in accordance with Regulations.

(Place) _____ A. Leighton Capt

(Date) 9.8.18 *Commanding* _____ *Battn.* _____ *Regiment.*

No 2 CANADIAN DISCHARGE DEPOT LONDON

8. *Certificate to be signed by the soldier on discharge.*

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(Place) _____ H.R. Aikins (*Signature of Soldier.*)

(Date) 9.8.18 D. Anderson (*Signature of Witness.*)

(When a soldier is absent through illness or any other cause, and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned should be attached here.)

9. *Additional certificate in the case of a soldier who takes his discharge at his own request.*

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

H.R. Aikins (*Signature of Soldier.*)

10. *Statement of service.*

Service towards engagement to _____ (the date to which the record of service is completed) _____ years _____ days.

Further service „ „ 9.8.18 (the date of confirmation of discharge) ... ... 3 „ 46 „

Total ... 3 „ 46 „

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for 9.8.18 (date)

(Place) _____ *Signature* A. Leighton Capt

(Date) 9.8.18

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated and signed by the soldier.)

Subject to Balance of Pay

H.R. Aikins

MARRIED OR SINGLE S.

PLACE OF BIRTH Meaford, Grey Co. Ont.

NAME AND ADDRESS OF NEXT OF KIN Mrs Ella R. Aikens, 141. Ruby St. Manchester. Pa. USA

RELATIONSHIP OF NEXT OF KIN Mother.

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L NO. 453552 RANK Pte NAME Aikens, Harold Richmond

IF IN PERMT. CORPS WHAT UNIT UNIT 58th Bn TRANSFERRED TO 2 Cords DATE 1/11/17 AUTHORITY AR

PERMANENT FORCE ALLOWANCES TRANSFERRED TO 58 Batt DATE 1-2-18 AUTHORITY AR

PLACE OF ATTESTATION Niagara-on-Lake Ont. TRANSFERRED TO Sup Cadets DATE 1/3/18 AUTHORITY AR

DATE OF ATTESTATION 25 June 1915. TRANSFERRED TO DATE AUTHORITY

~~$20.00~~ eff. 1/11/17 mwf

ASSIGNED PAY MONTHLY $ ~~10.00~~ DATE EFFECTIVE ~~7/3/15~~

PAYABLE TO ~~Mrs. Ella R. Aikens, 141. Ruby St. Lancaster, Pa. USA~~ RELATIONSHIP ~~Mother~~

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO April RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) 5/3/18 EFFECTIVE 1/4/18 REASON Proceeding on Cadet Course

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

C C R

DATE	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
1916			122				1220							10 1480	9 1444 20											6382	£ 40	220	10602	3818				
Apr. 1/30	30	1.00	30	00	30	10	3	00							33 00	126	15/4							2 62				10 00		12 62	58 56			
May 1-31	31	1	31	.	31	10	3	10							34 10			5th Bn 242	5/9						3 49			10 .		13 49	79 17			
June 1-30	30	1	30		30	10	3								33													10		10	102 17			
July 1-31	31	1	31		31	10	3	10							34 10													10		10	126 27			
Aug 1-31	31		31		31		3	10							34 10			3 Signals 411 23/4/16 833 " 330 16/6/16							341			10		16 82	143 55			
Sept 1-30	30		30		30		3								33	441	13/9/16	710 6/9/16 256 19/9/16 654 23/8/16 541 14/8/16 475 a/7/16 535 27/7/16 333 24/5/16							523		341 341 349 256 349 349 349 349 341										
—																																			
—																																			
—																																			
Oct 1-31	31		31		31		3	10							34 10			158 28/9/16 808 " 14/9/16							349			10		16 98	155 02			
Nov 1-30	30		30		30		3								33			857 24/10/16							349			10		13 49	141 53	55	119 53	
Dec 1-31	31		31		31		3	10							34 10			883 15/9 911 30/11/16							523 17 41			10		27 41	181 19	60	121 19	
1917			39 70				39 70							10	44670									785	6164	6382	130	220	26551	Forward.				
			43690																																

20.00 11/11/17
10.00 ap

453552 Pte Aikens. H. R.

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
Forward 1917			436	70										10	446 70					959 3DS 27/9/16 3 Divs 3 441 18/12/16				785		6164	6382	130	220	265 51	181 19				
Jan 1-31	31	10	34	10											34 10					3403.						340		10		16 98	198 31		65	133 31	
Feb 1-28	28		30	80											30 80					1007 17/						349		10		13 49	215 62		1/0	145 62	
Mar 1/31	31		34	10											34 10					1083 17/- 3 Sigs. 1031 3/6 1085 18/- 1109 16/3 1149 24/-						698 349 349 348		10		30 93 43 76	218 79		75	143 79	
✓															✓																				
Apr 1/30	30		33												33													10		10	241 79		80	161 79	
															578 70														336 91					
May 1/31	31		34	10											34 10													10		10	265 89		85	180 89	
June 1/30	30		33												33					3576 129 29/6						698		10		16 98	281 91		90		
July 1/31	31		34	10											34 10					288 C YR 317 4/6 4451 3/5							50	10		60	256 01		98		
Aug	31		34	10											34 10					341 2/5 2026 $7N 25/5						357		10		17 13	272 98	✓	100		
Sept	30		33											523	38 23 7 50 43	297 1/11				990 3DS 7/5 286 16/5 71.5				8922				10		135 81 576 13	175 40	✓	105		Increase 22, 58 Sept 16 AR 441 - 12/11/16 Charged in Nov

MONTH 1917	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFN. PAY	SER. ALLCE.	ENG.
Oct 1	Forward	~~446 10~~							141 40	105.		
11-31	AP	34 10		ap					10			
				AR 483 - 3 Sigs 19/6/17		3 56						
				AR 639 - 3 Sig 21/6/17		3 57						
				" 1130 - 17/8/17		7 14						
				" 1366 - 11/9/17		3 57			181 66	110		
Nov. Res Pay		34 10 33 00		ap.		17 84			10 20	✓		
Dec ✓ ✓		34 10 67 10		Dec ap					20 208 76 40	110 ~~220~~		
JAN				ap					20			
	Res Pay	34 10		AR 1511 19/9 3 Sigs		3 57						
				✓ 1652 4/10 3 Sigs		3 57						
				✓ 1949 30/12 58 Bn		4867						
				Cp 4616 30/12 Cpon		973						
				✓ 5807 3/1 ✓		14 60						
				2nd AR 897 30/12 58 Bn		8 92			133 80	110 00		
						89 06			20			
Feb.	Ap	34 10 30 80		ap					20			
				AR 2848 - 3 Sig 25/1/18		446						
				✓ 2996 ✓ 5/2/18		357						
				✓ 2355 ✓ 13/12/17		446						
						12 49						

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFN. PAY	SER. ALLCE.	ENG.
						12 49						
				AR 1134 - 19/10/17 3 Sig		446						
				✓ 1955 - 4/11/17 3 Sig		13 38						
				✓ 2178 - 5/12/17 ✓		357			110 70		110 00	
						33 90			20			
Mar	P Pay	30 80 34 10		ap					20			
				6. P. 1625 London 4/3/18.		7 30						
				DN AR. 1763. 6-11-17 3rd Div Sig		3 57.						
				C.P. 1653 London 5-3-18		24 33						
				DN AR 3077. 3rd Sig. 14-3-18		4 46						
		34 10		✓ 1141 58 Bn 28-7-18		17 84			67 30			
						57 50			20			

P 820
12474—375H—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ENGLAND OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1. IV. 15.	EFFECTIVE DATE:-
AMOUNT:- ~~20/-~~ Cancelled 1/4/18	AMOUNT:-

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.

Mrs Ellen R Aikens 1/4/18
14 Ruby St. Same
Cancelled Lancaster USA. Mother

Sept

NAME:- Aikens. Harold Richmond

NUMBER:- 453552

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:- 58 Bn

DATE ACCOUNT FIRST OPENED - 1/12/15

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			Imp Cadets
N/R. 12/5/19	20.5.19		Demobilized

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
				Sept 30	1/4/18	9/8/18 = 131 days @ 1/10	£29-12-2 144 10
						Commenced Cadet Course 1/3/18. Auth. O/C Records	

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	10		✓

PARTICULARS OF RENDERING NON-EFFECTIVE:- Appointed P/Cadet effect 10-8-18 Auth. Schedule 22 Woking 17-10-18

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mar 31	Balce ford								69 30	110	
April	Pay	33.		AR 1226 Hastings 10-4-18	14 60				85 70		
		33.			14 60						
May	P. Pay	34 10		AR 4261 30/7/18 St Leods	14 60						
				" 6333. 14/8/18 "	14 60				90 80		
		34 10			29 20						
June	P. Pay	33.		AR 9274 Denham 5.6.18	14 60						
				✓ 11904 ✓ 20.6.18	29 20				79 80		
		33.			43 80						
July	✓	34 10		AR 16039 Denham 11.7.18	14 60						
				CP 19358 London 27.7.18	24 33						
				AR 19097 Uxbridge 26.7.18	14 60				60 37		
		34 10			53 53						
Aug	✓	34 10		AR 21676 Uxbridge 7.8.18	14 60				79 87		
		34 10			14 60						
Sept	✓	33.							112 87		
Oct	Int. on Def'd Pay →	33 ~~1 75~~		over 6 dated 10/8/18 - 30/9/18 = 52 days @ 1/10		57 20			~~47 12~~		
		8 51				57 20			64 18		
		8 51									
Nov Dec & Jan 1919				To Suspense a/c Dr hq 65	64 18				—	—	
Febr Mar.									—	—	

A 3 M. FORM REN'D 5/1919 EFFEC. 1/4/18
Transferred DISCHARGED TO Nat Cadets DATE 10/8/18
PAY BOOK VERIFIED 31/8/18
6d BAL. 64 18 L.P.C. REN'D 23/10/18
AUTHY Sch 22. Woking 17.10.18
C K S Cathcart

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION

PART I. A.G. 3a 2/2-A-950. 7.10.18. A.F.B. 179 Canada (Revised)

Reserved for M.H.C.

Regt. No. 453552. Rank Pte. Surname AIKINS. Christian Name Harold.

Unit or Corps—(a) Overseas from United Kingdom 58th. Battn. (b) In United Kingdom 58th. Battn.

Born at—Town Rochester. County or Province New York. Country U.S.A.

Date of Birth—Day 27th. Month July. Year 1897. Age 21. Yrs. 3. months.

Joined at Meaford, Ontario. Date 15. 5. 15.

Former Trade or Occupation Student. R.A.F.

Permanent marks or peculiarities that will serve for future identification :—

Height—feet 6 inches 2. Colour of eyes Brown.

Signature of Soldier *(for indentification purposes)* H. R. Aikins.

Medical Report.

☛ *The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully discriminate between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents bearing on the case. He will plainly state the existence of any of the disability prior to the soldier joining for the present war.*

1. DISABILITY *(State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted).*
(Follow the official nomenclature as far as possible.)

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group *(a)*. NEURASTHENIA.

Disabilities Group *(b)*. -

Disabilities Group *(c)*. -

2. CAUSE OF DISABILITY. *(Follow the official nomenclature in stating the disease or injury.)*

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(i) As to Group *(a)* above.	Strain of service.	France.	Feb.1918.
(ii) As to Group *(b)* above.	-	-	-
(iii) As to Group *(c)* above.	-	-	-

NOTE.—By Active Service is meant Service with the Colours in Canada, United Kingdom, or elsewhere during the present war (since August 4th, 1914)

3. Is the disability due to disease contracted or injuries received prior to Active Service ?

(i) As to Group *(a)* above ? No. If yes, has Active Service aggravated it ? N.A.

(ii) As to Group *(b)* above ? - If yes, has Active Service aggravated it ? -

(iii) As to Group *(c)* above ? - If yes, has Active Service aggravated it ? -

4. Is the disability due to disease contracted or injuries received while on Active Service—

(i) As to Group *(a)* above ? Yes.

(ii) As to Group *(b)* above ? -

(iii) As to Group *(c)* above ? -

PART III.

Proceedings of the Pensions and Claims Board on the Soldier mentioned in Part I.

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the day of 191

Members of the Board :—

The Board, having considered the evidence of the soldier marginally named, together with the documents submitted, recommend :—

Dated at this day of 191

Signatures of the Board

President.

PART I. *(continued).*

5. If a cause of disability was an injury received on Active Service, was it received— N.A.

(*i*) While on duty? (*ii*) While off duty?

(*iii*) Was a Court of Inquiry held? (*iv*) Where? (*v*) When?

(*vi*) Opinion of the Court?

6. HISTORY OF THE CASE. (*State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records.*)

Began to suffer from Headaches and a feeling of depression about the time he left France to become a cadet in the R.A.F.
He became much worse following an attack of Influenza in July 1918, but is improving.

7. PRESENT CONDITION. (*Give previous and present weight if likely to indicate progress of disability.*)

General Condition only fair. Weight 148. (He states that his ordinary weight was 175-lbs.) Complains of Headaches - and dizziness - which come on nearly every day. Has had a feeling of depression.
Respiratory sym. - No cough nor expectoration. L. Apex of chest is somewhat flat. No abnormal sounds heard.
Eye Exam. - Capt. Coulter. O.D. 6/6 Slight Hyperopia. O.S. 6/5.
Eye grounds normal. Eyes normal. Some obstruction L. nostril by deflected septum.
He is otherwise normal. Urine - normal.

8. OPERATION. (*i*) Was one performed? No.

(*ii*) If so, state what. N.A.

(*iii*) Was one advised and declined? No.

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto unless there is evidence to the contrary.

9. (*i*) Is there loss or decay of teeth attributable to Active Service? No.

(*ii*) If so, describe. N.A.

10. DO YOU RECOMMEND:—

(*a*) Fit for duty? N.A.

(*b*) Fit for base duty? N.A.

(*c*) Invalid to Canada? N.A.

(*d*) Discharge from the Service as ~~xxxxxxxxxxxx~~ Yes.

Date of Report 7. 10. 191 8. Signed Harold Buck, Major, CAMC.
Officer in medical charge of case.

Station 13, Berners St., London.

I have satisfied myself of the general accuracy of the above Report, and concur therein *except

{Officer i/c Hospital / S.M.O. Brigade} Strike out one of these.

Dated at Station, on 191

* Delete if inapplicable.

PART II.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.

11. Is the disability fully indicated in Part I (1)? Yes.

If not, indicate it. N.A.

12. Is the cause of the disability fully indicated in Part I (2)? Yes.

If not, indicate it. N.A.

13. Was the disability caused or aggravated by— (*a*) Negligence of the Soldier { Caused? No. / Aggravated No. } (*b*) Misconduct of the Soldier { Caused? No. / Aggravated No. }

14. THE ENTIRE DISABILITY. Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(*Estimate at none, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, or 100%.*)

Three per cent.

15. THE PENSIONABLE DISABILITY—(*see Part I (3). Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate*).
What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (*Estimate at none, 1/5, 2/5, 3/5, 4/5, or all*).

All.

16. Permanency of the Pensionable Disability estimated next above in (15).

(*i*) Is it permanent? No.

(*ii*) If not permanent, what is its probable minimum duration (*in months*)? Six months.

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable? No.

18. Remarks.

On being discharged from the C.M.F.C. on appointment as a Flight Cadet in the R.A.F.
Authority - A.G. 3a 2/2-A.-950 of 7.10.18.

19. Recommendation:—(*a*) Fit for duty? N.A.

(*b*) Fit for base duty? N.A.

(*c*) Invalid to Canada? N.A.

(*d*) Discharge from Service ~~xxxxxxxxxxxx~~? Yes.

Classification for the Military Hospitals Commission.

Date of Board 7.10.18.

Station 13, Berners St., London.

Signatures of the Board (Sgd.) Harold Buck, Major, A/ C.A.M.C. *President.*
" D. R. Dunlop, Capt. C.A.M.C.

(Sgd.) W.H. Delaney, Lt.Col.
A.D.M.S.

Approved 7th. Oct. 1918.

Dated at London. Station 191