9-9-19

REGIMENTAL DOCUMENTS

NAME Allen, Stephen, Lawrence REGT. NO. Pte 486674 UNIT W O R D att H. Q. FILE NO. 6226

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
3	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	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)					
4	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
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1	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					401
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	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)					
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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)					
2	C D - 3					
	[illegible]					
2	R 122					12-25
1	Cas card					19-25
1	Pay card					29-26
						3
1	C a D C 5009A					
	Paysheets					

W H

W 2589
1[illegible]M-11-18
1772-39-1377

486674.

ORIGINAL

ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS.)
1. What is your name?	S. L. Allen.
2. In what Town, Township or Parish, and in what Country were you born?	Ottawa.
3. What is the name of your next-of kin?	Mrs C. B. Allen. Mother.
4. What is the address of your next-of-kin?	76. College St. Toronto Ont.
5. What is the date of your birth?	2nd July. 1895.
6. What is your Trade or Calling?	Engineering
7. Are you married?	no.
8. Are you willing to be vaccinated or re-vaccinated? and Inoculated	S. L. A. 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.

S. L. Allen (Signature of Man.)

F. H. King (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, S. L. Allen, 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.

S. L. Allen (Signature of Recruit)

Date Nov. 3rd 1915. F. H. King (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, S. L. Allen, 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.

S. L. Allen (Signature of Recruit)

Date Nov. 3rd 1915. F. H. King (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 Toronto this 3rd day of Nov. 1915.

Wm Mulock (Signature of Justice)

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

C. F. Bickerdike (Approving Officer)

M. F. W. 23.
200 M.—7-15.
H. Q. 1772-39-841.

Description of S. L. Allen 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 9 ins.

Chest measurement: Girth when fully expanded ..... 36 ins.
Range of expansion .... 4 ins.

Complexion ..... Fresh .....

Eyes ..... Hazel .....

Hair ..... Dark Brown .....

Religious denominations.
Church of England .....
Presbyterian ..... X .....
~~Wesleyan~~ Methodist .....
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).

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 Nov 3rd 1915. ..... H. G. Thomson .....

Place Toronto Ex. Camp ..... Capt A.M.C
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.

..... S. L. Allen ..... 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.

..... C. J. Best ..... (Signature of Officer)

Date November 3rd 1915. Lt. Col. O.C. 37th D.S. Bn C.E.F.

CANADIAN EXPEDITIONARY FORCE

War Service Badge
Class "A" No. 3[illegible]

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 486644 (Rank) PTE

Name (in full) ALLEN STEPHEN LAWRENCE enlisted in

the 34 BTTN.

CANADIAN EXPEDITIONARY FORCE at TORONTO on the THIRD

day of NOVEMBER 1915

HE served in CANADA. ENGLAND AND FRANCE.

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 24 YRS.

Height 5. FT. 9 IN

Complexion FRESH.

Eyes HAZEL

Hair D. BROWN.

Signature of Soldier.

Marks or Scars Nil.

Issuing Officer.

Capt.
FOR O. C. No. 2 D. D.

Rank

Date of Discharge

No. 2 District Depot
Toronto, Ont.
AUG 26 1919

AUG 26 1919

Date 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.

M.F.B. 39A.

ORIGINAL.

486674
486674

MEDICAL HISTORY SHEET.

Surname Allen *Christian Name* L. L.

Examined { on 3rd day of Nov 191 5
at Exhibition Camp

Approved by M.G. Thomson
Rank Captain M.O.

Birthplace { City or Town Ottawa
County Canada

Apparent age 20.

Trade or occupation Engineering

Height 5 Feet 9 Inches.

Weight 150 Lbs.

Chest measurement { Minimum 32 inches.
Maximum expansion 36 inches.

Physical development Good

Small-Pox Marks None.

Vaccination Marks { Arm Right. Left.
Number ✓ ✓

When Vaccinated last ✓

(*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,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
		M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
16/11/15	+	M.O.
19/11/15	+	M.O.
10/12/15	+	M.O.
		M.O.

M.O. Thomson Capt

Enlisted on ..... *day of* ..... 191 ..... *at* .....

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	37 Bn 6th F	486674	Good	
Transferred to..	Transferred to 12th Reserve Battalion, Shorncliffe Authority 168-3-156., dated 4-3-16. 18th Bn.		C.A. Beer Lieut Col. O.C., 37th N.O Battalion. C.E.F.	

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.

Surname..... Christian Name.....

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	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.

ORIGINAL

486674

6251

MEDICAL HISTORY SHEET.

Surname Allen *Christian Name* S. G.

Examined { on 3 day of Nov 191 5
at Toronto

Approved by

Birthplace { City or Town Ottawa
County Canada

Rank M.O.

Apparent age 20

Trade or occupation Engineering

Height 5 Feet 9 Inches.

Weight 150 Lbs.

Chest measurement { Minimum 37 inches.
Maximum expansion 36 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right. ✓ Left. ✓
Number

When Vaccinated last

(*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,
		25 SEP 1916 M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
		M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
1915 16/11		M.O.
19/1		Mc Thomson M.O.
10/x		M.O.

Enlisted on *day of* *191* *at*

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	37th Bn 66th	486674	Good	
Transferred to..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Hastings No. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL	7-Oct-17 11 DEC 1917	Otitis media-Ch. " "	PRESIDENT. STANDING MEDICAL BOARD BT Adjutant Capt. AFC. Winbrighton hospital canada
	June 30 1918	Otitis Media Chronic	B, 2nd Regiment Capt
5 Can Gen Hos	July 17/19	" "	BTC Adjutant Canadian Corps

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.

Surname ..... Christian Name .....

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Discharge from Hospital. Day	Month	Year	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. 3	Signature of Medical Officer.
Bramshott Mt		8	2	16	12	2	16	Chronic Rhinitis	5	Cured	[illegible]
Hemingford St Aux Hosp. att 1st W. G. Hospital Liverpool		19	9	16	2	10	16	G S W Rt Arm	13	Wound healed.	[illegible]
No. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL		18	JUN	1918				Scabies scabies		G.C. good, has a papular rash, between fingers front of arms - front of chest and abdomen. also on penis, scrotum, inner sides of legs. rash very irritating - esper. at night's. ~~rash much~~ skin excoriated by scratching - some burrows between fingers O.K. otherwise. patient - improving	A. F. Rykert Capt. Comm

Duplicate Medical History Sheet posted to here. Medical Registrar Record Office

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

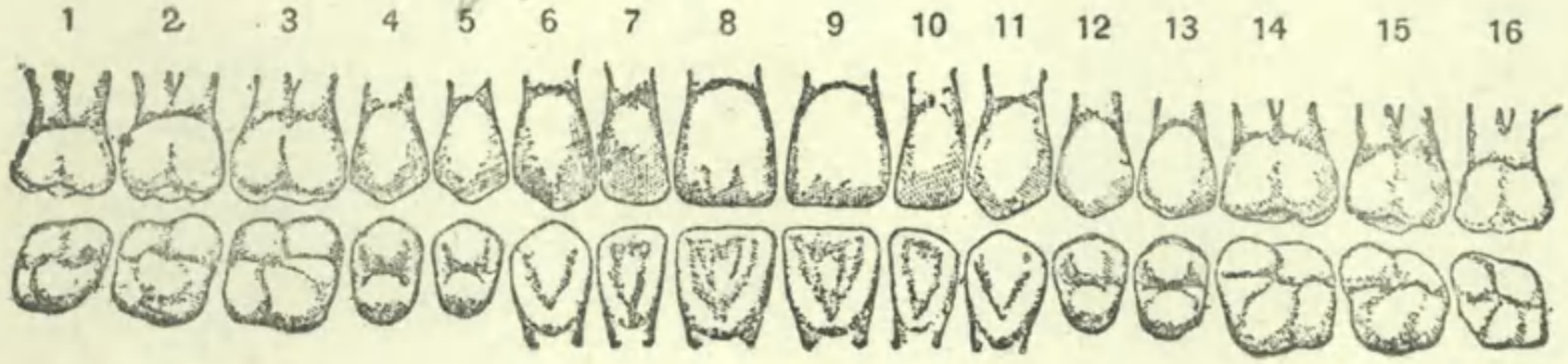
DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) ALLEN, STEPHEN, LAWRENCE

REGIMENT 37. Batt'n RANK C/L. No. 406674

Date of Examination in England 20/11/19. Date of Examination in France



DIRECTIONS TO DENTAL OFFICERS

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
- ~~(*c*) In France~~

Signature of Dental Officer. C. C Graham Capt.

R. & O. 6045 (*Revised*).

115511 N.E.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Epsom, October 31st, 1916.

No. 486674 Rank Private Name S.L. Allen

Local Unit Overseas Unit 18th Bn. Age 17

Examination held at

DISABILITY.
Overseas—Local.
(scratch one out)

Under age
G.S.W. Sept. 14/16, rt arm - no disability

PRESENT CONDITION.

Bright lad. Was in High School at Sudbury.

BOARD RECOMMENDS:— School of Stenography, Bath.

1. Fit for Duty
2. Fit for duty after weeks' physical training.
3. Fit for Temporary Base Duty weeks.
4. Fit for Permanent Base Duty Yes.
5. Discharge

APPROVED
CAPTAIN C.A.M.C.
BRIGADIER GENERAL
COMMANDING
CANADIAN TRAINING DIVISION.
D.D. of R.A.M.C. Can.

Signatures:—

W. Barty, Major President.
A.K. Farrell, Capt.
Members
.....

APPROVED

Dated at 14 NOV 1916 1916.

For A.D.M.S.
Captain R.A.M.C.
for A.D.M.S., Canadians, London Area.

PROCEEDINGS OF A MEDICAL BOARD.

R. A. O. 1042 (Revised)

Dated at 1918

Name ..... Rank ..... No. ..... Age .....

Overseas Unit ..... Local Unit .....

PRESENT CONDITION.

(Duration one out)

DISABILITY.—Overseas—Local

Examination held at .....

1. Fit for Duty .....
2. Fit for Temporary Base Duty ..... Days.
3. Fit for Temporary Duty ..... Weeks.
4. Fit for Permanent Base Duty ..... Days.
5. Fit for duty after ..... Weeks, physical training.

BOARD RECOMMENDS:—

Signatures:—

Medical Officers ..... President.

Form R. & O 6045
1238-130M-29/11/16.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Hastings. August 7th. 1916 7/X

No. 486674 Rank Pte. Name Allen, S.L.

Local Unit C.A.S.C. Overseas Unit 18th. Battn. Age 18.

Examination held at S.M.B.

DISABILITY.
Overseas—[redacted].
(scratch one out)

CHRONIC OTITIS MEDIA. R.

PRESENT CONDITION.

5/12 in France.
Sent back with G.S.W. Right arm and ear trouble.
Right ear began to discharge after he was blown up.
Has continued ever since.
Special report on ear says "Unfit for A".
Wound of arm has healed and left no disability.

BOARD RECOMMENDS:—

Bi.

1. Fit for Duty.....
2. Fit for duty after.....weeks' physical training.
3. Fit for Temporary Base Duty.....weeks.
4. Fit for Permanent Base Duty .....
5. Discharge .....

Signatures:—

Members { H.C. Wallace Capt. ..... President.
J. McKinlay Capt. .....
.....

APPROVED Hastings, Sussex.

Dated at 7 AUG 1917 1916.

[signature] Lieut Col

For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

CHRONIC OTITIS MEDIA. R.

P.M.B.

Name: ALLEN, S.L. Rank: Pte. No. 453874

Age 18. Height. Weight. Left. Right. Overseas until

Local Unit: C.A.S.C. Examination held at

Disability

(Specify one only)

CATEGORY

PRESENT CONDITION.

Signature:—

Member

President.

Dated at this day of

Sent back with C.S.M. Might also end test prompts.
Might get pains to discharge after his wife plans up.
Has continued ever since.
Special report on eye says "Unfit for Va."
Would of him pas hearing and left no disability.

S\JS in France.

For A.D.M.S.

Dated at this day of

APPROVED

Hospitals Sur

Member

President.

Signature:—

1. Fit for Duty.

2. Fit for Temporary Base Duty

3. Fit for Temporary Base Duty

4. Fit for Permanent Base Duty

5. Fit for Duty after

6. Fit for Duty after weeks, but yet not retained

BOARD RECOMMENDS:—

BT.

Forms
I. 1237
12

5. CAN GEN HP.
LIVERPOOL

CAN GEN T.
MOORE BARRACKS
SHORNCLIFFE

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	486674	Pte	Allen.	J. [illegible]

Year	Unit.	Age.	Service.
	Can. C.	19	3 2 / 12. 3 1/2 / 12

Station and Date.	Disease
Hornsdale June 24 1918	Scabies Contracted Toward June 24. 1918 & suffering with a papular rash between fingers, on flexor surfaces of arms, front of chest and abdomen, in penis, and scrotum, and inner surfaces of legs. Rash much irritated by scratching and in several places skin much excoriated by fingers nails. Rash at night very irritating: Between the fingers there a number of typical burrows. Patient isolated in Tent with hot baths and Sulphur ointment applied nights and morning. A. J. Reykert. Capt. Comdg
June 29. 18	discharged to duty. Scabies cured A. J. R. Capt Comdg

* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

Wt. W 6604/M 2870—1,500,000—3/17—H. & Sr. (10938). Forms/I. 1237/12. (E239)

[P.T.O.

Station and Date.	

Forms
I. 1237
10

1ST W.C.H. LIVERPOOL

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
6528	486674	Pte.	Allen	S. C.
Year. 1916	Unit. 18th Canadians	A.	Age. 19	Service. 9/15 4/15

Station and Date.	Disease In out wound. R arm
HEMINGFORD ST. MIL. HOSPITAL	
Sept 19th	admittance
Oct: 2nd	Discharged S. Furlough.

* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

(8065.) W 2445–1448. 250M. 5/15. J. T. & S., Ltd.

P.T.O.

Station and Date.	

P. 880.

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

Certified this document checked with Regimental documents.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

1. Christian names Stephen Lawrence 2. Surname Allen.
3. Rank C/Sgt. 4. Original Unit 37th Batt'n. 5. Reg. No. 486674
6. Address, in full, to which future payments of gratuity are to be forwarded
Bank of Toronto, Toronto Ont
7. Date of enlistment in the C.E.F. 3-11-15.
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Mrs C.B. Allen.
9. Relationship of such dependent Mother. Not App
10. Address, in full, of such dependent 1126 College st Toronto Ont E K Brush Lt. Capt
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? No
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States?
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served 3-11-15 to 16-11-15. in Canada 17-11-15, to 15-4-16 in England 16-4-16 to 15-9-16 in France
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department No.
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? No

5134. Wt. /30P. 250,000(8). 2/19. S.O. [illegible]
6624. Wt. /P56. 20,000(4). 5/19. S.O. [illegible]

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units. N/C

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid N/C

20. Have you been issued with a War Service Badge? If so what class? N/C

21. Have you, during the present war, served in the Imperial Forces? N/C

22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled N/C

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? N/C

(b) If so, was such reversion in consequence of misconduct or inefficiency? N/C

24. Are you now serving in the C.E.F.? If not, give: (a) Date of discharge AUG 26 1919 (b) Reason for discharge DEMOBILIZATION

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit in which you served at the front, and dates of such service with that unit

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?

(b) If so, are you in receipt of full pay and allowances from that Department?

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: S. Allen.

Place of Residence: 76 College St. Toronto.

Declared before me at: Witley, Surrey.

This 24th day of June 1919

"Questions 12, 13, 14, 20, 24, 25, 26 and 27 are unanswered."

A. G. Bennett Maj

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths under P.C. 2767, dated 11th Nov., 1918.

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due

Certified Correct.

District Paymaster.

P.Allen C.A.M.E. SPECIALISTS REPORT.

Chronic Suppurative Otitis . Right ear.

Very little discharge now.

Hearing R. - 1/20 of N.)
L. - normal.)

I suggest (1) A strip of dry gauze in ear daily packed to bottom of meatus.

(2) A Nasal wash of Soda Biborate
Soda Bicarb. aa Gii ad.Oz.1
b.d.

Ohf-27734

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

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps 37 O S Batt CEF

Regimental No. 486674 Rank Pte Name Allen: S. L.

C. E. F.

Enlisted (a) 3/11/15 Terms of Service (a) Duration of War Allen Service reckons from (a) 3/11/15

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) Engineer

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 Canada		25.11.15	
		Transferred to 18th Reserve Battalion, Shorncliffe Authority 166-3-15C, dated 4-3-16. C A Beck Lieut Col. O.C., 37th F.O Battalion, C.E.F.			
		Taken on strength.	Shorncliffe	16/3/16	Part 2 B.O. No 2.
6/5/16 1st	Hdqrs. C.T.B.	Transferred to the 18th Battn in France.	Shorncliffe	7/5/16.	W B Mulhur ASST. ADJ. 12th RESERVE BATTALION C.E.F.
8-5-16	Can Base Depot	Arrived from 12th Can Res Bn, Shorncliffe, and taken on strength of 18th Can Bn.	Can Base Depot	8-5-16	Nom Roll. Pt II Order 22, 31/5/16
31-5-16	do	Proceeded to join unit	In the Fld	31-5-16	Nom Roll, 31/5/16 DCS.209
9-6-16	18th Bn	Joined unit	do	2-6-16	B.213 DCS.216

1 OCT. REC°

(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.

OVER

486674 Pte. Allen S. L.

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.
17.9.16	H.S. Brighton	G.S.W. R. upper arm (slt) Adm.	H.S. Brighton, to England	17-9-16	W 3083. Pt. II Order 42, 27/9/16.
					J W Hogan Capt. For Officer i/c Can. Records, Canadian Section. G.H.Q. 3rd Echelon.
27.12.16	Attached	to C.A.S.C. Hastings Pt II	Orders No. 30 -	27-12-16.	from C.G.D.D.
10.3.17	C.A.S.C. C.D. Shorncliffe	T.O.S. of C.A.S.C. Hastings	C.A.S.C. C.D. Pt II 31.	9.4.17	W H Biggar Capt. OFFICER COMMANDING, C.A.S.C., HASTINGS.
13.8.17	C.A.S.C. Hastings	Struck off Strength on transfer to 25th Res Battn Bramshott.	Auth. D.A.A.G. D.O.1 10.3.6	Pt II D.O. 191 13.8.17	[illegible] Capt. OFFICER COMMANDING, C.A.S.C., HASTINGS.
16-8-17	25th Res	T.O.S. on transfer from C.A.S.C.	Bramshott	14-8-17	Part II DO 228
22-10-17	25th Res	S.O.S. on posting W.O.R.D.	B. Shott.	19-10-17	Part II DO 294

[illegible] Lieut Asst Adj. 25th Res B'n

W6490/1535.—2,000,000—J. J. K. & Co., Ltd.—Forms B. 103/1.

Sheet #2

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps W.O.R.D.

Regimental No. 486674 Rank Pte Name Allen S.L.

Enlisted (*a*)_____ Terms of Service (*a*)_____ Service reckons from (*a*)_____

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		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				
22.10.17	W.O.R.D.	Reported to Depot. Coy T.O.S Posted F to 777 26th Res. Bn.	Bishott.	21-10-17	Do # 195
22.11.17	W.O.R.D.	Shown on Command Kirkdale. Hospital from Post. being detailed as police	Bishott.	21.11.17	Do # 222 Petrie Cash
21.11.17	5th C.G.Hpl.	Attached from W.O.R.D.	Liverpool	21.11.17	PT. 2 DO. No. 172 D. 21/11/1917.
22.4.19.	Do	CEASES TO BE ATTACHED FROM W.O.R.D.	— Do —	22-4-19.	PT. 2 DO. No. 53 D. 22/4/1919. W Brown MAJOR C.A.M.C. REGISTRAR, CANADIAN GENERAL HOSPITAL, LIVERPOOL. FOR D.O.C. No.

(*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.

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				
23-7-19	R. Wing	T.O.S. WITLEY. —		13-8-19	
		SOS. OMFC. TO CEF CANADA		13-8-19	
AUG 13 1919	O. S.	T. O. S. No. 2 DISTRICT DEPOT,	TORONTO	1919	PART II P. [illegible] 241
AUG 26 1919	S. O. [illegible]	(DISCHARGED FROM H. M. S.)	No. 2 DIS. DEPOT,		PART II 241

G. Ward Capt
OFFICER I/C RECORDS,
R. WING C.C.C.,
WITLEY,

W. C. Roberts
Lieut.
For O. C. No. 2 District Depot.

R—122

VES

Rank Pte. Name ALLEN S.L. Reg'l No. 486674

Unit 37th Bn If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Toronto, 3 Nov.1915. Place of Birth Ottawa.

Name and Address, Next-of-Kin Mrs C.B.Allen

76 College St, Toronto, Ont, Canada Relationship Mother

Assigned Pay Monthly $ Payable to

Relationship D.S R.133B507

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character WORD

2.10.16	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 Per S.S. Lapland			11 DEC 1915
	16.3.16	O/c 37th Bn	S.O.S. 37th Bn Tfd to 12th Res Bn	Shorncliffe	15-3-16	Pt II Order 76
	13.4.16	D.Ch. 7	Adm to Mil HP.	Bramshott	9-2-16	N.Y.D. (Chronic Rhinitis)
	-	-	Dis from - -	-	12-2-16	
	16.3.16	O.C. 12th	Taken on Strength	Shorncliffe	15.3.16	Pt II. O. 76
	7-5-16	- -	Struck off. Trans to 18th Ba.	Overseas	7-5-16	- - 127.
	31.5.16	O.C. 18th	Taken on strength from 12th	In Field	8.5.16	" . 22.
CASC 141	23.9.16	18th	1st Westn Genl Hosp. Fazakerley, L'pool		19.9.16	Cas. List B169 } GSW Rt Arm Severe
	27.9.16	18th	Transferred to C.C.A.C., Folkestone.		17.9.16	Part II 42 W
	26.9.16	C.C.A.C.	Taken on strength.	Do.	19.9.16	Pt II O 418/A

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.
3.10.16	18th. Bn.	Dischgd. fr. 1st Wn. Gen. Hosp.	Liverpool	2.10.16.	C.L. B177. (G.S.W. Rt arm. sev).
4.10.16	C.C.A.C	Reptd. from Brit. Hosp.	Folkestone	3.10.16	Pt II O 434 (C)
9.10.16	— " —	Adm. to Woodcote Park Hosp.	Epsom "	6.10.16	Pt II O 442/C.
13.10.16.	18th Bn.	" " CCH. Woodcote Park	Epsom	8.10.16	C.L. B186 (G.S.W. Rt arm serious)
27.11.16	"	Dischgd. from " "	"	13.11.16	" 222 "
14.11.16	CCAC	REPORTED TO C.C.A.C. from Epsom	Shoreham	13.11.16	Pt II O 501 E
19.11.16	C.C.A.C.	On Command to Carr. Duty Depot	Shoreham	17.11.16	Pt II O 510 (D) PBD S&S.
27.12.16	C.A.S.C. Hastings.	Attached for Duty Etc from C.C.A.C.	Hastings	27.12.16	Pt II. O. 30. (C.C.A.C. Pt II #38)
23.1.17	C.C.A.C.	Ceases to be att G.S.D. on Com. C.A.S.C.	"	27.12.16	Pt. II. D.O. 38
~~16-3-17~~	~~WVR Dep.~~	~~T.O.S. from CCAC.~~	~~B'Shott~~	~~11-3-17~~	Cancelled by Pt II O 56 d/11-5-17 ~~Pt II O. 17 & CCAC. 118~~
21-4-17	do	S.O.S. to C.A.S.C. St. Leonards.	do	20-4-17	— 39
26.3.17	CCAC	Ref Pt II O 118 d/ 12-3-17 transferred to WO Regt is amended to read trans to CASC Depot Schiff.	Hastings	10.3.17	— " — 132
7.4.17	CASCCD	TOS from CCAC	Schiff	10.3.17	— " — 29.
11.4.17	CASC	TOS from CASC CD	Hastings	10.3.17	— " — 86 (CASC CD Pt II O 31)
4.8.17	"	SOS to 25 Res Bn B'Shott	"	13.8.17	— " — 192

Form R 122.
8750—15M—25-4-17.

2nd Page of Record

Rank Pte Name Allen S L Reg'l No. 486674

Unit 37th Bn If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Toronto 3 Nov — 1915 Place of Birth Ottawa

Name and Address, Next-of-Kin Mrs C B Allen

76 College St Toronto Ont Canada Relationship Mother.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

H. W. V., Ld.—11319-17. 1st Page filed in Envelope 27-8-17

N/E. R.B. No 9634
File R.L.
Canada CAN.OR

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.
					Perm't Grade Pte after Rank Nil
14.8.17	CASC	SOS to 25 Res Bn B Shott Pte	Hastings	13-8-17	Pte 192
15-8-17	25th Res	T.O.S. from C.A.S.C.	" B Shott	14-8-17	— 228
19.10.17	"	Posted to ~~25th~~ Reg. Depot	" "	19.10.17	Pte 294. WORD 195. 22 10/17
22.11.17	WORD	On Com No 5 Gen. Hosp. Kirkdale	" "	21.11.17	— 222
29-7-19	"	SOS to R Wing	" Witley	24-7-19	" 152
		106-1-46		13.8.19	
15.8.19	R Wing	S.O.S. to Canada	Witley	13.8.19	Do 109.

WEST: ONT. REGT.

CASC 121

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.				

P—56

Rank Pte. Name ALLEN S.L. Reg'l No 486674

Unit 37th Bn If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Toronto, 3 Nov. 1915. Place of Birth Ottawa.

Name and Address, Next-of-Kin Mrs C.B.Allen

76 College St, Toronto, Ont, Canada Relationship Mother

Assigned Pay Monthly $ Nil 15.00 1/2/16 Payable to Mrs Carolina Bertha Allen, 76 College St Toronto. ont

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	1 Dec	31 Dec	31	1.00	31 –	31	10	3 10	10 –	44 10	130		26 76			26 76	17 34	C Clothing Credit
													14 60					
1916	1 Jan	31 Jan	31	1.00	31 –	31	10	3 10		34 10	187		12 17			26 77	24 67	
											229		4 87					
	1 Feb	29 Feb	29	1.00	29 –	29	10	2 90		31 90	262		17 03	15 –		36 90	19 67	
																		D.O.76. 2 Transfd
	1 Mar	15 Mar	15	1.00	15 –	15	10	1 50		16 50	300		4 87	15 –		19 87	16 30	12th Res Bn 15/3/16
	16/3/16	31/3/16	16		16	16		1 60		14 60	1083		7 30			7 30	9 60	
					122			12 20	10	12 20			87 60	30		117 60		Balance Trans to new Ledger

BALANCE TRANSFERRED TO NEW LEDGER.

Checked.....

15 Bal
Ledger 1/3/16

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. JOB. 85506 M. & D. 5997.

180 Queen St E.
Toronto Ont

M. F. W. 12.
2m.—9-15.
H. Q. 1772-39-819.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

C/

4"/6 Rew

To Whom Mrs. Carolina B. Allen

By Whom Assigned Allen S.L.

Address ~~76 a Keller W. East.~~ ~~76 College St.~~ ~~Toronto Ont.~~ ~~Paris General Delivery Toronto~~ 4/1/16

Regtl. No. 486674

Rank Pte

Corps Base detail 37 Bttn

Rate 15oc Feby 1/16

2 M 27/1/16

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.		W 11559	15	
March		L 16961	15	

CANCELLED

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

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

L. L. Job 89002.—Req. 6213.

Sheet No. 2. Mrs. Carolina Bullen

Name of Soldier S. L. Cullen 186674

Base Detail 37th Battn

15mo

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	L 419	15 –	
May		K 3611	15	
June		L 6835	15	
July		Q 7377	15 ✓	Remailed 12 9/16 HAN.
Aug. ✓		Q 11585	15	
Sept.		D 15153	15	
Oct. ✓		D 19527	15	
Nov.		D 24631	15	
Dec.		D 31917	15	
Jan.	1917	G 35783	15	
Feb.		G 42354	15	15 R
March		G 48497	15	15-L-
April		H 158	15	15-E.
May		H 6530	15	
June		H 12892	15	15-Cu
July		H 19928	15	Cu
Aug.		J 27119	15	L
Sept.		J 33846	15	J
Oct.				$300. ✓
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.				

L-L. Job 5470—M. & D. 6888

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

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

P Rah 23/4/17

To Whom Mrs Carolina B. Allen

Address 180 Queen St. E., Toronto, Ont.

Rate 15.00 Feby 1/16.

By Whom Assigned Allen S. L.

Regtl. No. 486674.

Rank Pte.

Corps Base detail 37th Bn.

2 M. 27/1/16.

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			Consolidated acct
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.		W. 11559	15 -	
March		L. 16961	15 -	

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

A 1801

Date of Assignment

Feb. 1 – 1916

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15			

1 Lieb

PARTICULARS OF SEPARATION ALLOWANCE

No. 486674

Rank Pte. Promoted Reverted Discharge

Soldier's Name S. L. Allen

Battalion Base detail 37th Bn.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs Carolina B. Allen

Address ~~[illegible]~~

Change of Address ~~Toronto, Ont.~~

1 78 Amelia St. Toronto Ont 6/12/18 JvL

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	
Sept 30, 17			300	$300	
Oct.	C 50606		15	15	
Nov.	D 51758		15	15	12
Dec.	C 60128		15	15	Br.
Jan 18	C 65162		15	15	m
Feb	B 91706 ✓		15	15	~~B 91706 Cancelled Change of address~~
March	G 98931		15	15 ✓	
April	G 8700		15	15	R
May	A 11659		15	15	6
June	B 14544		15	15	6
July	V 27515		15	15	D.
Aug	a 30019		15	15	D.
Sept	a 36675		15	15	D.
Oct.	a 43315		15	15	B
NOV	a 51412		15	15	
DEC	B 63947		15	15	C
JAN 1919	B 70772		15	15	
FEB	a 77824		15	15	
March	D 83549		15	15	
APR	b 1169		15	15	
MAY	a 6186		15	15	L
JUN	a 9418		15	15	
July	a 11562		15	15	(Over)

6238-A-33 REMARKS

A/c Closed 31/8/19.

Ret'd per..... Toronto

Date 23/8/19.. M.F.W. 187 9/19

Clerk Mrs. 2 Collins a

MR0167508.

AUDITED.

A CONSOLIDATED ACCOUNT

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7693.

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 Pte 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
1919 July			6 30	6 30	
Aug	A 13239		1 15	1 15	
			64 5	64 5	

M. F. W. 128
400M.—6-17—172-39-1141
L. L. 22320—M. & D. 1483.

EPITOME OF HOSPITAL TREATMENT.

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

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
Allen	S. L.	486674

Rank	Unit	Co.	Troop	Batty.
Pb:	37 Bn 18th Bn		W O Depot	

Hospital — Date of Admission

Transferred Mil Hosp L Bramshott Hosp. 9.2.16

1st W. G. H. Liverpool. Hosp. 19.9.16

Epsom Can Mil Conv. Hosp. 8.10.16.

5 C. G. H. Kirkdale Hosp. 19.6.18

Diagnosis

(1) Chronic Rhinitis

Later Diagnosis (if changed)

(2) G.S.W. R. Arm Ser.

(3) Scabies. at.

Additional Diagnoses: If more than one state present

DISPOSITION — Date

Ch. 13.4.16 # 7-1-4-

" 18.8.16 - 35.

Ch. 23.9.16 B169 (1)

3.10.16. B177 2.

" 13.10.16 B186

C.L. 27-11-16 B 222

21.6.18 B336

2-7-18 B243

REMARKS

Dis 12.2.16

" 2.10.16

" 13-11-16

" 29-6-18

A.M.D. 2 DEPT.

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

J H D. W.

No. 486674 RANK Pte. NAME Allen. S. L.

T. O. S. 4-11-15. UNIT 37th Battalion.
D.D. 242.

M. D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915	1915.			
Nov. 4	Nov. 30	✓		
Dec		"		

UNIT SAILED
NOV 27 1915

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

Form R. 149. S. L

Name ALLEN. Rank Pte Reg. No. 486674

Unit ~~W.O.R.D.~~ WORD. ~~4th Res~~

Next of Kin Canada

Date 1918		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List
19	6	No 5 C G H Kirkdale		Scabies	C236			19961
29	6	Discharged		do	C243			6105
		B						

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

R. 149.

Name Allen S. L. Rank Pte. Reg. No. 486674

Unit 37 Batt.

Next of Kin Canada

Date 1916	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
9.2	Mild Bramshott		Myalgia	7.		
12-2-16	Dischgd "		Rheumatism	35		

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

R. 149.

Name ALLEN, S. L. *Rank* Pte. *Reg. No.* 486674

Unit 18th Bn.

Next of Kin Canada

Date 1916	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
19-9	1st West G.H.	Fazakerley, Liverpool	GSW R.Arm ser.	B169	1272	23-9
2-10	Discharged		-do-	B177		
8.10	Mil.Con.Hosp.	Woodcote Pk. Epsom	do	B186.		
13-11	Discharged		-do-	B222		

DESP. JAN 7 1930
REGN. NO. 4877 54

a L E

Number 486674 Rank Lc. B

Surname ALLEN

Christian Name Stephen Lawrence.

Units 18th Bn Can Inf Theatre of War France

Date of Service 6-7-5--16

P

BPC Dominion Acceptance Corp. Ltd.,

Remarks ~~[illegible] Toronto~~

Latest Address ~~426 College St~~

Atlas Building Toronto, Ontario

Roll No B Page 22765

10m.-8-21.M.

4 1/20

H. Q. FILE No. 649-

NAME Allen, Stephen L.

REGT'L. No. 486674.

RANK AND CORPS Pte. (Form 37th Bn.) 18th Bn.

CABLE NO.	CABLE DATE	NATURE OF CASUALTY
		C.
01272	23-9-16	Adm. First Western Gen. Hosp. Liverpool Sept. 19th 1916. Wounded right arm. Serious.
02018	3-10-16	W. S. M. Disch. from hosp. Oct. 2nd.

L. L. Job 86907- -M. & D. 16065.

M. F. W. 42-50m.-10-15.
H. Q. 1772—39 893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
7 (1)	Adm. Mil. Bramshott	9-2-16	N. Y. D.
7 (4)	Disch.	12-2-16	Chronic rhinitis
35	Disch.	12-2-16	"
B169 (1)	1st West. Gen. Fazakerley Liverpool	19. 9. 16	G. S. w. R. arm. Ser.
B177 (2)	1st West. Gen. Liverpool Disch	2-10-16	G. S. w. rt. arm. ser.
B186.	Mil. Convt. Woodcote Pk. Epsom	8-10-16	G. S. w. rt. arm. Serious
B222	Disch " " "	13-11-16	" " " "
C236.	5 Can Gen: Kirkdale	19-6-18	Scabies
C243	Discharged	29-6-18	"

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

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Medical Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (A.F.B. 309a).
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39) (Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D.3).
11. Equipment and Clothing } Statement Q.M.G. Form (D.C.S. 2).
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group B
Checked by No. 10
Date AUG 12 1919

O. G. 23
S. G. 22
D. A. [illegible]

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 48674
2. Rank. PTE.
3. Name. ALLEN STEPHEN LAWRENCE
4. Unit. W O R D. ATT. No. 5 CAN. GEN. HPL. LPL.
5. Date of Discharge AUG 26 1919 Place Toronto.
6. Reason for Discharge DEMOBILIZATION
7. Authority. No.2 District Depot, Part II, D.O. No. 241
8. Proposed Residence after Discharge 1126 COLLEGE ST. TORONTO CANADA.

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. ?

S. L. Allen
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place No. 2 District Depot Toronto, Ont. AUG 26 1919

Date

Signature
(O. C. Discharging Unit.)

Sail no 106 emb London 13-8-19 Dis Halifax 23-8-19

M.F.B. 218a—300M.-11-18—1772-39-113.

FOR O. C. No. 2 D. D.

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and signature	
16-11-15	Inoculations.	M.G. Thomson
19-11-15	do	do
10-12-15	do	do

Table IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

I certify the foregoing to be a true copy of an original entry on the Medical History Sheet of this man.

C.A.M.C.

for the Officer in Charge of Records Canadian Contingents.

G.E.G.

DUPLICATE.

486674

ARMY FORM B. 178.

To be used (*a*) for recruits enlisting direct into the Regular Army and (*b*) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Allen *Christian Name* S.L.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Ottawa County Canada

Examined ... ... on 3rd day of November. 1915
at Toronto, Ont. Canada

Declared Age ... ... 20 years days.

Trade or occupation ... Engineering

Height ... ... 5 feet 9 inches.

Weight ... ... 150 lbs.

Chest Measurement — Girth when fully Expanded 32 inches.
Range of Expansion 36 inches.

Physical Development ... Good

Vaccination Marks — Arm ... (Right / Left)
Number ...

When Vaccinated ...

Vision ... ... R.E.—V=
L.E.—V=

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

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

Approved by (*Signature*)
(*Rank*) *Medical Officer.*

Enlisted ... ... at
on day of 191 .

Joined on Enlistment ...	Corps.	Regtl. No.
	37th Bn C.E.F.	486674
Transferred to		

Became non-effective by

This Medical History Sheet has been compared with the Corresponding Attestation Paper, and entries made in red have been taken from the Attestation Paper.

on day of 191 .

(*Signature*)
(*Rank*) Lieut.-Col.
Canadian Contingent.

(5506.) W. 14971/M. 89. 750m. 1/16. Forms B. 178 39 P.T.O.

Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
Bramshot M.H.	8	2	16	12	2	16	Chronic Rhinitis	5	Cured.	D.J. Guthrie

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date.	Brief details, and signature.
Epsom Oct 31/16.	Underage. P.B. to School of Stenography. A. Bapty major Pres. S. M. B.

Table IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

Temporary

Army Form B. 178.

To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Pte

Surname Allan *Christian Name* S. L.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish _____ County _____

Examined ... ... on _____ day of _____ 191 .
at _____

Declared Age ... ... _____ years _____ days.

Trade or Occupation ... _____

Height ... ... _____ feet, _____ inches.

Weight ... ... _____ lbs.

Chest Measurement: Girth when fully Expanded. _____ inches.
Range of Expansion _____ inches.

Physical Development ... _____

Vaccination Marks: Arm ... _____ Right _____ Left _____
Number _____

When Vaccinated ... ... _____

Vision ... ... R.E.—V= _____
L.E.—V= _____

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

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

Approved by (*Signature*) _____
(*Rank*) _____

Medical Officer.

Enlisted ... ... at _____
on _____ day of _____ 191 .

Joined on Enlistment ...

Transferred to ... ...

Corps.	Regtl. No.
18th Can Inf Bn	486674

Became non-effective by _____

on _____ day of _____ 191 .

(*Signature*) _____

(*Rank*) _____

2966. Wt. W8005/2748. 300,000. 8/15. D. D. & L.

[P.T.O.

Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Name of Hospital.	Admitted to Hospital			Discharged from Hospital			Disease	Number of Days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital must be shown The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer.
	Day	Month	Year	Day	Month	Year				
Woodcote Park Epsom	7.	10.	16	13	11.	16	G.S.W. Rt. Arm	37.	This boy is under age and is being sent back to Canada.	W. P. Brown Capt
									Discharged to CCAC. XX. QB School of Geography Bath	

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticised.

No.- No.15 "No." In view of the fact that ear bothers him only about once a month and treatment can if necessary be carried on while on duty. The intervals of discharge will likely clear up under climatic changes in Canada.

No.16 - Yes.

No.17 - Cat. Bii

19. Is the invalid fit for

(a) General service,	(Category A)	(~~Yes or~~ No.)	Bii 3 mos.
(b) Service abroad, not general service,	(" B)	(Yes or ~~No.~~)	Bii 3 mos.
(c) Home service (Canada only),	(" C)	(Yes or ~~No.~~)	
(d) Temporarily unfit.	(" D)	(~~Yes or~~ No.)	Bii 3 mos.
(e) Unfit for service in Categories A, B and C	(" E)	(~~Yes or~~ No.)	

20. It is certified that the invalid

(a) ~~Does require treatment.~~ (Give the nature of the condition and of the treatment required and its probable duration.)

(b) Does not require treatment.
(c) ~~Should pass under his own control.~~
(d) Should not pass under his own control.
(Strike out condition not applicable.)

21. It is recommended that the ~~invalid be discharged~~. (When not for discharge add special recommendation.)

Man be boarded (Bii) for return to Canada A.G.1 telegram 9083 of 11-11-18

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

"F.W.Blakeman" Major *President.*

PLACE No.5 Can.Gen.Hospl. Liverpool.

"V.K.O'Gorman" Capt.CAMC } Members

DATE July 17th 1919.

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned ..... understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness ..... Signed .....

Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

..... *President*

PLACE .....

DATE ..... } Members

CERTIFIED TRUE COPY

APPROVED BY

Geo. F. L. Fuller Capt. CAMC

Assistant Director of Medical Services.

DATE 18.7.19

APPROVED BY

Director-General of Medical Services.

DATE .....

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION No.5 C.G.H.Kirkdale DATE 17-7-19.

1. 1 (a) Unit W.O.R.D. (b) Regimental No. 486674 (c) Rank Cpl.

(d) Surname Allen (e) Christian name Stephen Lawrence

(f) Home address 1126, College St.Toronto

(g) Next of Kin Mrs. C.B.Allen (h) Relationship Mother

(i) Address of Next of Kin 1126 College Street, Toronto.

2. Age last birthday 20 Date of birth July, 2, 1899.

3. Enlistment, or Appointment (if an Officer) (a) Place Toronto (b) Date 3-11-15

4. Personal description:

(a) Height 5' 11. (b) Weight 180 est. (stripped) (c) Complexion fair

(d) Colour of hair fair (e) Colour of eyes blue (f) Identification marks, Scars, etc. nil

5. Former trade or occupation student.

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
man's statement	3	257

	Periods From	Periods To
Canada	3-11-15	15-11-15
England	15-11-15	July 1916
France or other theatres of War	July 1916	Oct. 1916

7. Original disease, or injury Chronic Rhinitis

(a) Date of origin Dec. 1915 (b) Place of origin England

(c) Cause Service conditions.

M. F. B. 227.
400M.—11-18.
1772-39-117.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (*a*) Weakness—slight, moderate, marked, etc; (*b*) Loss, complete or partial, of an organ or member, or of its functions; (*c*) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (*d*) Any other restrictions in choice of occupation.)

Partial loss function both ear. (Chronic Otitis Media.)

9. Present condition—(*a*) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Objective Patient is well developed, very well nourished. Hearing both ears 7 feet. slight discharge. Bramshott standing Med.Board place him Cat. Bi 30-6-18 He also has enlarged tonsils.

Subjective. Complains of slight discharge from both ears and slight deafness

Specialist Report. Chronic Supp.Otitis Media Right ear. very little discharge now.

Hearing. R. 1/20 of normal. (a)
L. normal Suggest a strip of dry gauze in each ear daily to bottom of meatus. (b) A nasal wash of Soda Biborate and Soda Bicarb ~~aa~~ Grs.~~ii~~ ad ozs i. (Sgd) -

(*b*) Has the invalid now any affection of the following systems, not described in Section 9 (*a*) above?
(Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System no Cardio-Vascular System no (If pulse rate is abnormal, B. P. will be taken.) Genito-Urinary System no (Albumen and Sugar will be excluded.)

Special Senses no Respiratory System no Integumentary System no

Disturbances of Mentality no Digestive System no Muscular System no

Osseous and Joint Systems no Any other general condition no

10. (*a*) History (of the condition referred to in Section 9 (*a*).)

(MHS) Patient had operation for Chronic Rhinitis Feby 1916. But complains that in Sept. 1916 Shell burst near him in France and a few days later ears began to discharge. He claims that he has had slight chronic discharge since.

10.—(*b*) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (*a*).)

G.S.W. rt. arm Henneford St. Aux. Hosp. 19-2-16 to 2-10-16

Scabies 5 C.G.H. 18-6-18.

(*c*) (Here give a description of wounds, scars and deformities.

Soar in upper rt. arm size of two shilling piece

11.—(*a*) Did the disabling condition have its origin before enlistment? no

(*b*) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

N.A.

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? (a & b) no.

The regimental documents will be referred to.
(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? Three months.

14. Treatment (Case reports, general or special, should be secured and attached where possible.)

states he had treatment at same time he had G.S.W. at Henneford St. Aux. Hospital.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? Yes.
(If the answer is "yes" state nature of treatment required and probable duration)

16. Can the former trade or occupation be resumed? no
(If not, briefly state why)

17. Recommendations Invalid to Canada.

"H.A.McKay" Capt., C.A.M.C.
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned S.L.Allen. have heard the description of my disability and present condition read, and am satisfied (~~or not satisfied~~) with it. (If dissatisfied, statement should follow.)

I complain in addition of nothing.

"S.L Allen," Cpl. Rank.
Signature of invalid examined.

"SAXONIA" 23-8-19

DISPERSAL "I"

AUDITOR | PAYMASTER

A24941

M. OR S.

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES

REGT. No. 486674 RANK Pte. NAME (IN FULL) ALLEN, S.L. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Nil — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. TORO. — IF IN P.F. WHAT UNIT? Bgde of Toronto Cavalry Can

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY — all payments to S.A.

DATE OF ATTESTATION 3-11-15 — TRANSFERRED TO — DATE — AUTHORITY 2/9/19 - WDS

ASSIGNED PAY $ 12 — DATE EFFECTIVE 21/8/19 — closed by Ottawa

PAYABLE TO Mrs Caroline B Allen — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS 28 Amelia St Toronto Ont

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE Toronto — DATE 26-8-19 — REASON Demob — AUTHORITY Do 241 — IF ENTITLED TO POST DISCHARGE PAY Yes

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.			TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	COL. NO. 1 DATE	COL. NO. 2 NO.	COL. NO. 2 DATE	COL. NO. 3 NO.	COL. NO. 3 DATE	CASH PAYMENTS COL. NO. 1 $	COL. NO. 1 C.	COL. NO. 2 $	COL. NO. 2 C.	COL. NO. 3 $	COL. NO. 3 C.	ASSIGNED PAY $	ASSIGNED PAY C.	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C.	OTHER CHARGES $	OTHER CHARGES C.			TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					13/8
31/7/19																											23	20			23	20	23	20			Debth Balce
28/8/19	28	11 0	20	80	32 10	-			13 52	80	6222		11060				78 -		973 487		5 -		12 -						1126	0							Both Allce 1st W & G
																																					Both Allce Both & Grain
																																					August 20
									13 52	80																			13 52	80							
		W.S.G.																									W.S.G.										
																																					AMOUNT DUE SOLDIER DEPENDENT
183 days			4 20						4 20								26-8-19										70 -										W.S.S. Paid as above
																											22						32	20	34 7	80	2 days P.A. over. on 1 Nov
											A.R. 116	Sept 24	13214	12 6			1d		67	80																	W.S.S. Paid by #2 D.D.
											A.R. 170	Oct 23	13614	716			1d		70	-																	
											A.R. 197	Nov 24	1367977				1d		70																		
											A.R. 222	Dec 23	1710961				1d		70	-																	
											A.R. 233	Jan 7	1713127				1d		70																		
		4 20							4 20																		4 20						4 20				

W.S.G. PAID IN FULL

J. Mann CAPTAIN

FOR PAYMASTER WAR SERVICE GRATUITY

2000M-8-19.—L. — 58/68-... & D. 9985.
M. F. W. 1296.
1774-39-1390.

P 820
12474 –375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:- 1/2/16		EFFECTIVE DATE:-	
AMOUNT:- ~~15~~ 00.		AMOUNT:-	

NAME:- ALLEN. S. L. A

NUMBER:- 486674

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 Carolina B. Allen. (mother)
180 Queen St East Toronto Ont

Stopped off 1/1/19

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte.
	/	

UNIT AND TRANSFERS

ORIGINAL UNIT:- 12th Batt.

DATE ACCOUNT FIRST OPENED:-

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
M.R.	1/11/17		Woked

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
1/7	1020	L Pool	~~7 73~~				
15/7	1282		~~9 73~~				
24/7	9485		~~24 33~~				
						Sedges Credit	20 59
						L P C Debit	23 20

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:- D/S to Canada 1/10/19 NR.B12113 24/7/19. Ditley & Ditley MD 1-2.

MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
31/3/18.	Brought Forward.								12		
April	30 Pte.	32 00		A.C. Card				15			
				AR 102 13/4/18 H.M.S. Pool	14 87						
				AR. S. 159 29/4/18. " "	9 73				15 40		
		33 –			14 60			15			
		34 10		Cap.				15			
May	31 C.P.			AR. S. 284 16/5/18. S.B.G.H. L'Pool	14 60						
				" " 413 29/5/18. " " "	14 87				15 03		
		34 10			19 47			15			
		33 –		Cap.				15			
June	30 C.P.			AR. S. 571 13/6/18. S.B.G.H. L'pool.	7 30						
				" S. 489 3/6. " "	14 87						
				" 769 29/6 "	2 43				18 43		
		33			14 60			15			
		34 10		C.a.P.				15			
July	31 –			" S. 863 15/7/18 " "	14 60						
				" 1031. 29/7/18 " "	9 73				13 20		
		24 10			24 33			15			
		34 10		C.a.P.				15			
Aug.	31 "			" 1138. 15/8/18 " "	9 73						
				" 1204. 22/8/18 " "	7 30				15 27		
		34 10			17 03			15			
		33 –		Cap.				15			
Sept	30 "			AR. 1386. 16/9/18. S. B.G.H. L'pool.	9 73						
				" S. 1524 27/9/18 " " "	7 30				16 24		
		33 –			17 03			15 –			
				Cap.							

COMPILED BY E. Bonner

CHECKED BY [illegible]

NUMBER 486674 RANK Pte NAME ALLEN. A. L.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Oct									16 24		
	31 P.P.	34 10		Cap.				15	Jan 34 46 13		
				ch. 1679 13/7/18. 5 Cg. H Liverpool	2 43						
				" S. 1665 8/10/18 "	24 33						
				" S. 1814 31/10. "	26 76 4 87				3 71		a/c. agreed 15/2/19
		34 10			31 63			15	104 91		
Nov	30	33		Cap.				15	71 77		
				ch. S. 1995 14/11/18 5 Cg. H. Liverpool	4 87						
				" 2106 28/11/18 " 5 "	4 87						
Dec.	31	34 10		Cap.	9 74			15			
				2221. 18/12/18 5 "	17 03						
Jan		34 10		Cap.	26 79			15	33 14		
		101 20			26 77			45	98 04 83 52		
Feb.		30 80		CAP.				15			
				2381. 15/1/19. 5 Cg. H Liverpool	9 73						
				2451 28/1/19 "	14 68						
				3604 13/7/19. "	9 73						
MAR.		34 10		CAP.				15			
				2671. 28/2. "	9 73						
				2854 13/3 "	9 73				14 52		
		64 90			53 52			30			
April		33		CAP.				15			
				2974. 30/3/19 "	9 73						
				176. 16/4 "	9 73						
				208 30/4 "	7 30						
				2979 26/3. "	4 87						
May		34 10		CAP.				15			
				ch. 398. 7/5 "	14 60				5 39		
		67 10			46 23			30			
June		33		CAP.				15			
				5602. 7/6/19. "	9 73						
				483. 29/5. "	4 87						
July		34 10		CAP.				15			
				936. 26/6. "	7 30				20 59		
		67 10			21 90			30			
Aug		~~34 10~~		~~Cap.~~				~~15~~			
				CH. 1020 1/7. Liverpool	9 73						
				" 9485 25/7 Willey	24 33				13 47		
		--			34 06						
				11060 R. Wig. 6/8/19 Eng.	9 43						
				1282 Liverpool 15/7/19	9 73				32 93		
					19 46						
		Sailed		Canada 13 8 19 SL 106							

MARRIED OR SINGLE S.

PLACE OF BIRTH Ottawa

NAME AND ADDRESS OF NEXT OF KIN Mrs C.B. Allen
76 College St Toronto Ont Canada

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. 486674. RANK Pte NAME Allen S. L

WORD

IF IN PERMT. CORPS WHAT UNIT — UNIT 12th Battn

TRANSFERRED TO 18 Bn — DATE 11/6/16 AUTHORITY G.O. 120 7/10

PERMANENT FORCE ALLOWANCES

TRANSFERRED TO CCAC — DATE 1.10.16 AUTHORITY G.B. 169 13/9/16

" " Brit Hosp

PLACE OF ATTESTATION Toronto

TRANSFERRED TO W.O.R.D. — DATE 1.11.17 AUTHORITY

DATE OF ATTESTATION Nov 2nd 1915

TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY MONTHLY $ 15.00 DATE EFFECTIVE 1/2/16.

PAYABLE TO Mrs Carolina Bertha Allen ~~76 College St~~ Toronto Ont. RELATIONSHIP
180 Queen St East. Authority A.F. 4/13 1/3/17

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)

cd

c

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
			122				12	20						10	144	20											8x88	8760	38		11760	2660				
1/4 30/4	30	1.00	30		30	90	3								33		1132	M/4	1186	4/4				1216	486			15		3202	2758				
1/5 31/5	31		31		31		3	10							34	10												15		15	4668				
1/6 10/6	10		10		10		1								11													15		15	4268				
																											426			1962					
11—30	20		20		20		200								2200								3465	31.5						8525	5616			
																			1142	5.7			3226	20.5										
July	31		31		31		3	10							34	10			1175	13.7							524			2286	6740			
Aug	31		31		31		3	10							34	10	1272	8	1266	14	8				261		262		15		2023	8127			
Sep	30		30		30		3								33		1306	30.8							261				15	17	1778	9649			
Oct																																			
1.31	31		31		31		3	10							34	10							Ep 2916. 10/10 1st month 385 2/10				486 1.27		15		2708	10951			
Nov.																							Ep 3229. 8/11				243								
1-30	30		30		30		3	—							33	—			1216	13/11	30742	1/11	Rem 5574. 3%/11		243		487	1460	15		3933	10318			
Dec																																			
1-31	31		31	—	31		3	10							34	10	1276	28/11	1286	28/11								7787	150		10017	3711			
			30	90	70																														
1917																																			
Jany	31	1.00	31	10											34	10	1388	22/12							730				15		2230	4891			
Feby	28		30	80											30	80							148 Schiffe 9/1				1160		15		2960	5011			

Check Mann

Check Mathewson

Transferred CCAC.
1.10. No. C/B. 169 23.7.16
Issue on repayment. Wired 315 13/8/16.

418674 Pte Alden S.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
Mar	31	1.10	34	10											34 10	Hosly 19 16/- 306 1/8 1/8 1/8 1/8 241/12	30 24/2 1/8 1/8 1/8 1/8 1/8							29 20 14 60 17 46 7 30 7 35 7 23 2 43				15		10757		2336			
Apr	30	-	33	00											33 00								R2. R0 80-958 48 ex-Hosly 6/2.			124	15		16 24		660			
May	30	✓	33	00											33 00												15		15 00	11 40				
31	31	1		1	10										1 10												—		—	12 50	✓			
June	30	✓	33												33					96 Dept R/H Hosp					484		15		19 87	25 63				
July	31		34	10											34 10												15		15	44 73				
Aug	31		34	10											34 10												15		15	60 83				
Sept	30		33												33												15		15	81 83				

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR 3	DR 4	BALANCE	DEFER-RED PAY	SEP. ALLOE. ENG.
		81 83							81 83		
Oct	PP	34 10		Dep Hosp OR 253 25/4/17	9 73		15				
				400 1/5/17	9 73				81 47		
		34 10			19 46		15				
Nov	30 Cr.	33 00		OR 164 26/10/17 Hosp	9 73						
Dec	31 Cr.	34 10		OR 182 13/11/17 Hosp RD.	7 30						
				Ar. Lang.			15				
				OR 749 15/1/18 Estates Bur	9 73						
				OR 693 30/9/17 ✓ ✓ ✓	14 60						
				RNWR 570 25/5/17 Details Hastings	7 30						
				OR 630 15/9/17 Estates Bur	9 73						
				OR 601 31/8/17 ✓ ✓ ✓	9 73						
				OR 745 13/6/17 Details Hastings	9 73						
				RNWR 1111 15/4 " "	12 16						
				" 1271 26/4 " "	9 73						
				" 1376 10/8 Cash	12 17						
					111 91						
		69 10		A/c Lang.			15 30	166			

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFER-RED PAY	SEP. ALLOE. ENG.
Jan 18.									666		
	31. Cr.	34 10		A/c Lang.						15	
				Br. Est. 906 26/6/17 Details Hastings	14 60				11 16		
		34 10			14 60					15	
Feb.	28. Cr.	30 80		A/c Lang.						15	
				aR 5286 15/1/18 5 6 S.H. L/pool	4 87						
				Sn aR 117 5/12/17 ✓	9 73						
				✓ 135 17/2/17 ✓	2 43				993		
		30 80			17 03				34 10	15	
March	31. Cr.	34 10		A/c Lang.					44 03	15	
				aR 5529 27/1/18 56 Hosp	2 43				32 03		
				aR 615 14/3/18 5 6 S.H. L/pool	4 87				12 00		
				1154 15/2/18 2 4 6							
				5691 21/3/18 6 S.H. Lanham	4 87						
				Sn aR 370 30/1/18 5 S.H. L/pool	2 43				1200		
		34 10			17 03					15	