REGIMENTAL DOCUMENTS

NAME BODEN CARL Pte REGT. NO. 542228 UNIT Gy Inst Corps 28th Bn H Q. FILE NO. 25456

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
3	1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
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	1 CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
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	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob
	1 MEDICAL EXAMINATION (M.F.W. 129)					
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	1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					18-28
	1 Casc500qa					28-28
	1 AB 1043 4					
	2 Disp Cert					1
	1 mow 67					
	1 Can Card					
	1 Pass					
	1 R49					
	1 R162					

W 2589
100M-11-18
1772-39-1377

~~Duplicate~~ Original

ATTESTATION PAPER.

No. 542228

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Boden
1a. What are your Christian names?	Carl.
1b. What is your present address?	Indian Head. Sask.
2. In what Town, Township or Parish, and in what Country were you born?	Indian Head, Sask. Can.
3. What is the name of your next-of kin?	Mrs. C. Boden.
4. What is the address of your next-of-kin?	Indian Head, Sask, Can,
4a. What is the relationship of your next-of-kin?	Mother.
5. What is the date of your birth?	Aug, 20th, 1898.
6. What is your Trade or Calling?	Farmer.
7. Are you married?	Single.
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	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.

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Carl Boden (Signature of Recruit)

Date Sept, 27th, 1916. J. T. Richards (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Carl Boden. 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.

Carl Boden (Signature of Recruit)

Date Sept, 27th, 1916. J. T. Richards (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 Regina Sask, this 27th, day of September 1916.

E. B. L. Chappell (Signature of Justice)

D. S. O.

M. F. W. 23
750M—3-16
H. Q. 1772-39-341

Description of Carl Boden on Enlistment.

Apparent Age 18 years 1 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft 6 ins.

Chest measurement { Girth when fully expanded ..... 36 3/4 ins.
Range of expansion .... 4 1/4 ins.

Complexion ..... Fair

Eyes ..... Grey.

Hair ..... Light Brown.

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

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 Sept. 27th. 1916. 191 .

Place Regina Sask.

Hugh Macdonald Capt. pmc.
Dennis Sweeney Lt. C.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.

Carl Boden 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.

E. G. W. Carthy Leach (Signature of Officer)
O. C. Divisional Cycle Platoon

Date Sept. 27th. 1916.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 542228 (Rank) Pte

Name (in full) Carl Boden enlisted in

the Can Cyclist Bn.

CANADIAN EXPEDITIONARY FORCE at Regina on the 27th

day of September 19 16.

HE served in 28th Bn Can Inf France & Belgium.

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

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

Age 21

Height 5' 6"

Complexion Fair

Eyes Grey

Hair L. Brown.

Marks or Scars Nil

Carl H. Boden.
Signature of Soldier

Date of Discharge No. 2 DISTRICT DEPOT MAY 11 1919 TORONTO

Issuing Officer

For
O.C. No. 2 District Depot.
Rank

Date MAY 11 1919 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.
1049-D.P.-300M-11-18.
H.Q. 1772-39-882.

ORIGINAL

MEDICAL HISTORY SHEET

ORIGINAL

Surname Boden Christian Name Carl

Examined on 27th, day of Sept, 1916.
at Regina Sask.

Birthplace City or Town Indian Head.
County Sask.

Apparent age 18 Years,

Trade or occupation Farmer.

Height 5. feet 6. Inches

Weight 135. lbs.

Chest measurement Minimum 32½ inches
Maximum expansion 36¾ inches

Physical development Good.

Small-pox Marks None.

Vaccination Marks Arm Right Left
Number None.

When Vaccinated last Never.

(a) Marks indicating congential peculiarities or previous disease None.

(b) Slight defects but not sufficient to cause rejection None.

Approved by Hughmacken Capt Esme Denis Bruney

Rank Lieut. C.A.M.C. M.O.

Date	Fit or Unfit	Examined for Re-Engagement	
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.

Date	Result	Vaccinations	
25/1/17		Hughmacken	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
5/12/16		Hughmacken	M.O.
12/12/16		Hughmacken	M.O.
20/12/16		Hughmacken	M.O.

Enlisted on 27th day of Sept: 1916 at Regina Sask

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	Div: Cycle Platoon	542228		Sept 27th 1916
Transferred to	15th Canadian Res. Battn 28th Bn 15th CAN. RES. BATTN.			20. 6. 17 15. 11. 17 FEB 23 1919

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 Servcie, on the man becoming non-effective; the date and cause being stated on next page.

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

J.Mc

MEDICAL HISTORY SHEET

Surname Boden Christian Name Carl

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				

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units. No.

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 No.

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

21. Have you, during the present war, served in the Imperial Forces? No.

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 No.

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? No.

(b) If so, was such reversion in consequence of misconduct or inefficiency? No.

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

MAY 11 1919 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.

QUESTIONS 12, 13, 14, 20, 24, 25, 26 & 27 ARE UNANSWERED.

Signature of Applicant: Carl H. Boden.

Place of Residence: Indian Head.

Declared before me at: Ripon Yorks.

This 4th day of April 1919.

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.

G. G. Lumb Major

POST DISCHARGE PAY.

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

Certified Correct.

District Paymaster.

Certified this document checked with Regimental documents.

P. 880.

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

Two claims

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 Carl Hamilton 2. Surname Boden.

3. Rank Pte. 4. Original Unit Div. Cycle Coy. 5. Reg. No. 542228.

6. Address, in full, to which future payments of gratuity are to be forwarded Union Bank of Canada Indian Head, Sask.

7. Date of enlistment in the C.E.F. Sept 27th 1916.

8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Not Applicable

9. Relationship of such dependent Not Applicable

10. Address, in full, of such dependent Not Applicable.

11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? Not Applicable

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 Div. Cycle Bch. 9 mons. 15th Bn. 5 mons. 28th Bn. 18 mons. 32 months

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.

5434. Wt. /30P. 250,000(8). 2/19. S.O., F.Rd.

Original

To be made out in duplicate. H.Q. 54-21-23-53

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

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

---

(1) Name of Overseas Unit which Soldier joins. Divisional Cycle Platoon
Regina Sask Canada.

(2) Regimental Number 542228

(3) Full Name of Soldier Carl Boden

(4) Place of Birth Indian Head Sask Canada

(5) Are you married, or not ? Single

(6) If married, state,
(a) Full name of your wife

(b) Present Postal Address

(7) Are you a widower ? No

(8) Have you any children ? No

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

300M.—5-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ? No

If so, state name and address .....

(10) Is your Mother alive ? Yes

If so, state name and address Mrs J.T.Boden, Indian Head, Sask, Canada.

.....

(11) If your Mother is a widow Yes

Are you her sole support, or not ? No

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

.....

.....

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

.....

.....

.....

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

.....

(15) Are you insured ? Yes

If so, in what Company ? North America Life, Regina Sask. Canada.

Have you made arrangements for payment of your Insurance premium Yes

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

C.S.M. Carthy Smith

Officer Commanding.

Date December 1st 1916 Divisional Cycle Platoon.

Capt.
O.C. Divisional Cyclist Depot

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

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

No. 542228 Rank Pte. Surname BODEN
(Give name in full)
Earl

Unit or Corps 15th Res. Birthplace Indian Hd. Sask.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 149 lbs. Height 5 ft. 6 in. Colour of Eyes Blue

Nutrition Good

Pulse 68

Condition of arteries Normal

Vision Rt. 6/12 Left 6/12

Hearing (conversational voice) Rt. 2/ ft.

Left 2/ ft.

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

Opinion as to general health and physical condition Good

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

Nervous System — Genito Urinary System — Cardio-Vascular System —

Special Senses — Integumentary System — Respiratory System Yes

Disturbance of mentality — Muscular System — Digestive System —

Osseous and Joint System — Any other general condition —

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

Influenza December 1918

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Ripon (Overseas)

Date 9/7/19 Signed A Thomas Capt Chmn M.O.

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

Signature Carl H. Boden.

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

THIS SECTION FOR USE IN CANADA—

Examined at.....(Canada)

Date ..... Signed .....M.O.

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

Signature .....

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

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

[OVER]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-39-1142.

C.A.D.C. 5009A

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

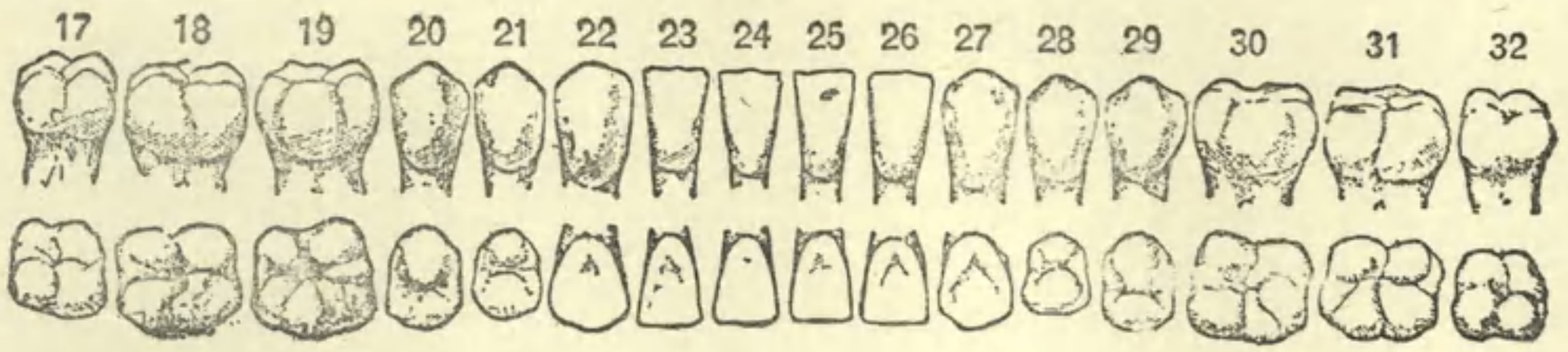
DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) BODEN

REGIMENT 15th Res Bn 1-417 RANK PTE. No. 542228.

Date of Examination in England _____ 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 13-18
2. EXTRACTIONS —
3. CROWNS —
4. DENTURES
   - (*a*) Full Upper —
   - (*b*) Part Upper —
   - (*c*) Full Lower —
   - (*d*) Part Lower —

HAS HE EVER REFUSED DENTAL TREATMENT? No

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 yes
- (*c*) In France —

Signature of Dental Officer J. E. Thompson, Capt.

Army Form B. 103. Sheet II Regimental Number 542228

Casualty Form—Active Service.

Regiment or Corps Dft. Can. Cyclist Coy.

Rank Pte Surname Boden Christian Name Carl

Religion Baptist Age on Enlistment 18 years 1 months.

Enlisted (*a*) 27.9.16 Terms of Service (*a*) DURATION OF WAR Service reckons from (*a*) 27.9.16

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

Extended { _____ } Re-engaged { _____ } Qualification (*b*) _____

or Corps Trade and Rate _____

Occ. Farmer _____ Signature of Officer i/c Records.

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 ...			
MAR 5 1919	O.C. 16th RES. BN.	TAKEN ON STRENGTH FROM S.R. Depot	RIPON.	FEB 23 1919	Pt. II. 64
12 APR 1919	O.C. 16th RES. BN.	STRUCK OFF STRENGTH TO M.D. 2 Wing Kinmel Park	RIPON.	12 APR 1919	PART II DAILY ORDERS No. 102 [illegible] Lt. ADJUTANT 16th RESERVE BATTALION

(*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.

[P.T.O.

(4 27 29) W 15012—5156 100,000 12/15 H W V(P 1977) Forms/B. 103/3

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				

H.M.T.Mauretania
Sailing No 53
Emb'k'd S'th'n on 3/5/19
Disemb'd Halifax 9/5/19

Army Form B. 103. W.S. Badge Class "A" Regimental Number 54228

Casualty Form—Active Service.

Regiment or Corps 8th Canadian Reserve Battalion Canadian Forestry Corps

Rank Pte Surname Borden Christian Name Basil

Religion Baptist Age on Enlistment 18 years months.

Enlisted (*a*) 27/9/16 Terms of Service (*a*) Duration + 6 Service reckons from (*a*) 27/9/16

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

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

or Corps Trade and Rate

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 ...	Shorncliffe	3-5-17	A. M. P.
		Disembarked...	Liverpool	4/5/17	Justicia
7/5/17	O.C. Can Reserve Bn	Taken on Strength	Shorncliffe	4/5/17	D.O. II 116
19/6/17	O.C. Details	Transferred 15th Res. Batt.	"	19/6/17	" 146
		J.H. Standerwick Capt to O.C. Can Res			Coast C
20.6.17	O.C. 15th Can Res Bn	T.O.S. 15th Can Res Bn	B'Shott.	19.6.17	Pt. II 165
				PART II. DAILY ORDERS No. 313.	
	O.C.	PROCEEDED OVERSEAS FOR SERVICE	BRAMSHOTT	O Can Res Bn	ADJUTANT.
16.11.17	15th RESERVE	WITH 28th BATTALION	15.11.17.	to RESERVE BATTALION.	
16/11/17	2 Can. Base	Arrived in France	C Calais	16/11/17	N.R. A.F.O. 110 d 20/11/17
		Depot for Left, for Unit			
19/11/17		28 Can. Co.	Etaples	19/11/17	NR
19/12/17	27 Bn.	Joined Unit	do	19/12/17	B.213
26/10/18		Granted 14 days leave to U.K.	U.K.	26/10/18	B.213 1-D 1918 Strength

CERTIFIED CORRECT. 29 NOV 1917 A.M.R. RECORDS LONDON

(*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.

[P.T.O.

[M1101] W6135/M768 1000m 9/16s 153 G & S Forms/B.103/4. E./354.

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				
23/11/18	O.C. 2nd	Sick to Hosp	Fmo	11/11/18	B 213
4/12/18	3 Can Gen Hosp	Discharged	3 Can Gen	11/11/18	B 213 & 1706
2.12.18	Do	Do	To Buckingham Camp.	2.12.18	" 1W 4114
5.12.18	C 2/3 Dep.	Lond. Class A.	36th Gen	5.12.18	NR 529
8.12.18	Do	Left for Calais	Fld	8.12.18	" 1489
8.12.18	Calais	Arrived	do	8.12.18	" 1898
24/12/18		Left for Unit	do	24/12/18	B 213
4/1/19	O.C. 2nd	Rejoined Unit	do	2/1/19	B 213
22-2-19	28th Bn.	Proceded to England for the purpose of attending Khaki University and posted to ~~Base~~ Sick Regtl Depot South Repon. (authy O/S Mil Council of Canada Decision No 237 - ref min 10 - 12-47- 915-1-19)		14/2/19	B 213. D.H.Q. No 17 1919.

Canadian Section G.H.Q. 3rd Echelon B.E.F.

(A) Rec'd		(B)	(C)	(D)	(E)	(F)
Date.	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer
			Attached C.C.C. Kinmel Park for return to Canada, Part 11 Orders No....., Ceases to be attached C,C,C, Kinmel Park on embarking for Canada, Part 11 Order No. 109 - 8/5/19			
			J Pudsey Lieut. Commanding 2 Wing, Kinmel Park Camp.			
MAY 3 1919	O. S.	T. O. S. No. 2 DISTRICT DEPOT, TORONTO		1919	PART II D. O. 138	
MAY 11 1919	S. O. S.	(DISCHARGED FROM H. M. S.) No. 2 DIS. DEPOT,			PART II D. O. 133	

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

Nothing to be written in this margin.

SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103—I.
Part I.

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

(10) Enlistment (*b*) (11) Engagement (*c*)

(12) Service reckons from (*date*) (13) Special conditions (if any) of enlistment (*d*)

(14) Any subsequent variations (if any) of conditions of service

Initials and Rank of an Officer.

(Authority) (*date*)

(15) Category	Date	Medical Authority	Initials and Rank of an Officer

(16) (Record of Occupation in Civil life (*vide* Army Order 93 of 1917)

Industrial Group No.
Trade or Calling
Married or Single
Particulars of Trade Test

Occupation Cards despatched on (*date*)
Second Occupation Card despatched on (*date*)

(17) Next of Kin
(18) Demobilizer (*f*) (Place)
(19) Pivotal-man (*f*) (Date)
(20) Qualifications (*g*) *or* (21) Corps trade and rate

(Signature of Posting Officer

(22) Extended

(23) Re-engaged

(24) Miscellaneous entries:—

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

W1889—P21150 1M 5/18 G.W.P.Co (3490)

Nothing to be written in this margin.

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

Form R 122
2353—100M—9-12-16.

LTR

Rank — Name BODEN, Carl — Reg'l No. 542228

Unit Dft.Can.Cyclists Toronto to Res Cyclists Coy. — If in perm. Corps, What Unit? —

Married or Single Single.

Place and Date of Enlistment Regina, Sept, 27th, 1916. — Place of Birth Indian Head, Sask, Canada.

Name and Address, Next-of-Kin Mrs C. Boden, Indian Head, Sask, Canada

Relationship Mother.

Assigned Pay Monthly $ — Payable to

Relationship

Separation Allowance $ — Payable to

Relationship

N/E. R.B No 12358
Fits R.L.
Category O.R. Can.

Discharge, Date and Place — Reason — Character

H. W. V., Ld.—9546-16.

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 14 5 17 SS. JUSTICIA.			
17-5-17	Res Cyc	Taken on strength	Shiseldon	14-5-17	Pte Pl. II o 165-20-6-17. 15th R.Rs.
19.6/14.	"	S.O.S. to 15th Res Bn	"	19.6/14.	" "
16-11-17.	25th Res.	S.O.S. to 28th Bn Overseas	Roman	15.11.17.	3/3
7/3/19.	28th Bn.	S.O.S. to S.R.D.	Rouen	14/3/19	DO 64 DO 17 15th Res. 5/3/19.
~~8/3/19~~	~~1st Res~~				
12 4 19	13th Res	S.O.S. to M.D. 2 Rhyl for return to Canada	Pte Repton	12/4/19	DO 102 & 112 89a/15 4/19
12/4/19	—	A.W.L. from 0900 29.3.19 to 0930 30/3/19 (2 days) Admonished 7 & 0 days by R.L.	— —	31/3/19	— 102
8/5/19	17.D.2	S.O.S. to Canada	— —	3/5/19	DO. 109
		Canada 53-I-97.		3.5.19	

A.F.B. 103 (HEAD) 26/6/17

542228. Bodin C

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.				

L. & S. Job 4503.—M. & D. 6832.

ASSIGNED PAY.

MILITIA AND DEFENCE

M. F. W. 11.
50m.—6-16.
H. Q. 177-39-818.

SEPARATION ALLOWANCE

Name Mrs. C. Boden.

Address Indian Head. Sask.

Relation to Soldier wife, child or mother } $15.00

MAY 1 1917

Name of Soldier Boden, Earl

Regtl. No. 542228

Rank Pte.

Corps Div. Cyc. Dep.

To what Corps belonging when called out }

PAYMENTS

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

CONSOLIDATED ACCOUNT 7

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—4-16.
1772—39—819.

Sheet No. 2. Mrs. C. Boden.

L. L. Job 310.—Req. 6574.

Name of Soldier Boden, Carl

542228 – Pte – Div. Cyc. Dep.

$15.00

MAY 1 1917

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May		W 14089	15	
June		G 15817	15	
July		U 19897	15	
Aug.		W 29285	15	
Sept.		33340	15	
Oct.		A 48279	15	
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.				

Surname	Christian Name or Names	Reg. No.
BODEN.	C.	542228.
Rank	Unit	
Pte.	Sask. 28.	

Cas. List.	
18-11-18. A373.	3. C.G.H. B'logne. 11-11-18.
	Influ'za. Rw.
9-12-18. A391	Disch to Base Depot 2-12-'18.

A.M.D. 2 DEPT.
Bch. of D.G.M.S. Q.M.F.C. London.

D.M.S. 1300. 50M- 30-8-18.

Cas. List.

Form R. 149.

Name Boden Earl *Rank* Pte. *Reg. No.* 542228

Unit 28th Bn.

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
11.11.18.	3 Bdg/H. B'loane	Bulleneuve		A373		5600/4
2.12.	Discharged B.D. Tel'hum	do.		A391		6118-10

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

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
a 393-1.	3 C.G. Bologne	11-11-18.	Influenza
a 891-	" " " Ass. to B. Hlpo.	2-12-18	"

NAME Boden. C. REGT. No. 542228

RANK AND UNIT Pte. 28th Bn

NEXT OF KIN

CABLE		NATURE OF CASUALTY
No.	DATE	

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

No 542228 Rank Pte Name Boden C.

T.O.S. 27/9/16 Unit Dvr. Cyclist Platoon
Unit not stated
Dam payhd.
Trans. to Regina Sask 1/2/17
D.O 32 1/2/17

M. D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917	1917			
Jan 1	Jan 31	✓		
	Feb.	✓		
	Mar.	✓		
	Apr.	M.	Proceeded Overseas 26/4/17	(D.O. 117) of 27/4/17

No. 542228. RANK Pte NAME Boden. C.

T. O. S. UNIT Divisional Cycle Platoon.

M. D. 12.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Oct. 1.	Oct. 31.	✓.		
	Nov.	✓.		
	Dec.	✓.		
	1917.			
	Jan.	✓		

SURNAME. Boden

CHRISTIAN NAMES Earl.

REGL. No. 542228 RANK Pte.

UNIT Div. Cycle Platoon (Draft)

FORMER CORPS Nil

CARD No. 32

20 Dec 11-5-17
Demob FOLL.
20. 106 of 14-5-19
1205

NEXT OF KIN.

NAMES IN FULL Boden Mrs. E.,

RELATIONSHIP TO SOLDIER Mother

ADDRESS Indian Head, Sask.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Indian Head, Sask. DATE Aug 20th 1898.

PLACE OF ATTESTATION Regina, Sask. DATE Sept 27-1916.

0/S 3/5/17

2/C 9-5-19 315/81 Pte

L. L. 6945. M. & D. 6994.

M. F. W. 22. 100M.—8-16. H. Q. 1772-39-339.

Sailed from Halifax per S.S. Megantic 3/5/17

MARRIED SINGLE yes WIDOWER

TRADE OR CALLING Farmer RELIGION Baptist

DESCRIPTION.

APPARENT AGE 18 YEARS 1 MONTHS

HEIGHT 5 FEET 6 INCHES

CHEST MEASUREMENT 36 3/4 INCHES EXPANSION 4 1/4 INCHES

COMPLEXION Fair EYES Grey HAIR Lt. Brown

DISTINGUISHING MARKS Not Stated

MEDICAL EXAMINATION. PLACE Regina, Sask DATE Sept 27th 1916.

Present Address- Indian Head Sask.

Reg. No.	Rank.	Surname	Category.	Dentally Unfit.
542228	pte	BODEN.		
		Christian Names (1) C.		
		(2) H (3)	Date	

Place of Enlistment:	Date of	Taken on from	Religion	Inoculations	Company
		28th Bn			B
Province.	Age on	Date		Vaccination	
		23.2.17			

On Command Left Penrith	Hospital	Permanent Cadre	Employed as
		Date taken on	
Date Proceeding	Date Admitted		

Record of Overseas Service: 28th	Profession or Trade (Civil)
28/	
1/	Transferred or Posted to
Reason for Return: 1/	Date

Married or Single	LEAVE.			
	No. of Pass Issued.	From.	To.	Free Transportation.
Address of Next of Kin				
Country				

A.G. 10434.

Part 2 Order Entries.

No.	Date	Ref.	No.	Date	Ref.
64	5.3.19	5,1,			

TRAINING.

Weeks of Training.

1	2	3	4	5	6	7	8	9	10	11	12	13	14	Over.

Nature of Training	Date passed test
Drill	
Musketry	
Bombing	
Rifle Bombing	
Bayonet Training	
Anti-Gas	
Lewis Gun	
Rapid Wiring	

Special Training Courses, etc.

E. m. H.

Number 542228 Rank Pte

Surname BODEN

Christian Name Carl

Units 28th Bn Can Inf Theatre of War France

Date of Service 16/11/17

Remarks

Latest Address P.O. Indian Head Sask

Roll No. B. Page 20516

200m.-6-21.

DESP. FEB 27 1923
REGN. NO. 21697

16 B 12
OTTAWA

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

B

Date of Assignment

8608 May 1/17

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15			

PARTICULARS OF SEPARATION ALLOWANCE

No. 542228

Rank Pte. Promoted Reverted Discharge

Soldier's Name Carl Boden.

Battalion Div. Byc. Dep.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs. C. Boden.

Address Indian Head Sask.

Change of Address

1

2

3

4

B8608

REMARKS 1742-6-4

Date	Cheque No.	Amount S/A	Amount A/P	Total	
Sept 30-17			75	75.	
Oct.	K 48779.		15	15	
Nov.	52443 F		15	15	
Dec	57913 F		15	15	C
Jany. 1918	65723 R		15	15	BR
Feb.	92091 b		15	15	D
Mar	99376 a		15	15	
April.	3235 C		15	15	E
May.	9992 E		15	15	B
June.	18059 A		15	15	
July	32392 x		15	15	
Aug.	29827 C.		15	15	
Sept	35882 D.		15	15	
Oct	47650 B.		15	15	B
Nov	51249 B		15	15	
Dec	64971 b		15	15	
JAN 1919	74831 D.		15	15	
Feby	76771 J		15	15	
March	83331 7		15	15	
Apr	4141 E		15	15	
MAY	8726 B.		15	15	

AUDITED.

M.D.2.

A/c Closed 31-5-19

Ret'd per Mauretania

Date 9/5/19 M.F.W.187 15/5/19

Closed G.T.S. M.R.O. 104313

CONSOLIDATED COURT

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22820—M. & D. 7883.

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—1772-30-1141
L. L. 22520—M. & D. 7693.

P 820
12474—375H—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ~~ENGLAND~~ OR CANADA.

EFFECTIVE DATE:- 1-5-17 Stopped 1/5/19

AMOUNT:- 15.00

SEPARATION ALLOWANCE. * ENGLAND OR CANADA.

EFFECTIVE DATE:-

AMOUNT:-

NAME:- BODEN, C.

NUMBER:- 542228

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 C Boden
Indian Head
Sask

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private

UNIT AND TRANSFERS

ORIGINAL UNIT:- Cyclists Depot

DATE ACCOUNT FIRST OPENED:- 1-5-17

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			28th
		28/3/6	Canada Dept

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
3/4.	4	15 Res	~~9 75~~	29/4		1 PB Bat	20 71
3/4	4	"	~~19 77~~ 29/4				
			29 50				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBSISTENCE ALLOWANCE
	1 -	10		

PARTICULARS OF RENDERING NON-EFFECTIVE: Discharged Canada 30/4/19. Rejoined #6258. 7/4/19. Mtd 11

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mar 31	Bal forward								67 28		
Apl.	P. P	33 00		Can A/P				15 -			
				AR 14 11/4/18 28th Bn.	4 46						
				" 72 21/4 "	3 57				77 25		
		33 -			8 03			15			
May	P. P.	34 10		" 128 4/5 "	4 46						
				Can A/P				15			
				AR 192 23/5 "	3 57						
		34 10			8 03			15	58 32		
June	P.P.	33 ..		AP				15			
				AR 254 11/6 "	3 57						
				" 304 22/6 "	4 46						
		33			8 03			15	98 29		
July	P.P.	34 10		AP.				15			
				AR 381 9/7 "	3 57						
				" 394 24/7 "	4 46				109 36		
		34 10			8 03			15			
Aug	P.P.	34 10		AP.				15	128 46		
		34 10						15			
Sept	✓	33 ..		AP.				15	146 46		
				AR 512 30/8 28th	7 14						
				" 963 15/9 "	3 57						
				" 1188 26/9 "	3 57				132 18		acquitted 7/3/19
		33 ..			14 28			15			
Oct	✓	34 10		CAP				15			
				AR 1574 17/10/18 6 B NB.	3 33				147 55		
				" 2078 26/10/18 "	7 46				140 09		
				" 1756 24/11/18 "	97 33				42 76		
		34 10			108 52			15			

NUMBER 542228 RANK NAME BODEN, C.

MONTH	PARTICULARS	Cr. 1.	Cr. 2.	PARTICULARS	Dr. 1	Dr. 2	Dr. 3.	Dr. 4.	BALANCE	DEFERRED	SEPARATION
	Bal Forwards.								42 76		
Nov	Pgd	33		Cap				15	143 96		
Dec	"	34 10		"				15			
				AR 5774 7/12/18 C & B	13 99						
				" 4438 18/12/18 2 Bdl Cloths	3 73						
Jan	"	34 10		Cap				15	81 24		
		101 20			17 72			45	146 14		
Feb	"	30 80		" 4328 14/1/19 C & B	3 77						
Mch	"	34 10		Cap				15			
				" 4928 28/1/19 "	3 73						
				P6 London 17/2/19 730	73 00						
				" 5289 15/2/19 "	3 73						
				Cap 8223				15	31 91		
April	"	33		Cap				15	49 91		
		97 90			84 23			45			
				A WL 0900 29/3/19 - 0930 30/3/19 forfeits 2 days Pay. by Pte. Reg. 0631/3/18 - 15 Res. 50102. 12/4/19		2 20					
				4. 7/4/19 15 Res	9 73						
				" " "	19 47						
				3675 17/4/19 WL 2 KP Evd	9 73						
				7708 1/5/19 " Evd	9 73						95
				4866	48 66	2 20					

S O S Canada 3/5/19.
S List 53.

5086
4991
095

P. 559

MARRIED OR SINGLE: Single

PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN: Mrs. C. Boden. Indian Head, Sask.

RELATIONSHIP OF NEXT OF KIN

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. 542228 RANK — NAME Boden C

IF IN PERMT. CORPS WHAT UNIT — UNIT Cyclists Depot. TRANSFERRED TO Can Res Cyc. DATE — AUTHORITY

PERMANENT FORCE ALLOWANCES — TRANSFERRED TO 28th Bn DATE 1/1/18 AUTHORITY N. Rec

PLACE OF ATTESTATION Regina — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 27th June 1916. TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY MONTHLY $ 15.00 DATE EFFECTIVE

PAYABLE TO Mrs. C. Boden, Indian Head, Sask RELATIONSHIP

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)

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
1917														22	22																22				Balance from Canada
1-5-17 to 30-6-17	61	1.10	67	10											67 10	114	31/5							7 30				30		37 30	51 80				A.P. May & June
July	31	"	34	10											34 10													15		15	70 90				
Aug	31	"	34	10											34 10	132	176							7 30				15		22 30	82 70				
Sept-	30		33												33													15		15	100 70				
			168	30										22	190 30									14 60				75		89 60					

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFERRED PAY	SER. ALLCE. ENG.
	Bal c/d 2nd	100 70							100 70		
Oct	P.P.	34 10		D.R. a/c 784 15/8 (15 Rec)	7 30						
				Adv					15 112 50		
		34 10			7 30				15		
Nov	P/P	33		D.R. 446 15/7 "	4 87						
				" 313 25/6 "	2 34						
	P/P	34 10		" 624 15/8 "	9 44						
				" 525 31/7 "	7 30				15		
				" 803 30/9 "	9 74				15		
				" 898 15/10 "	9 73						
				" 982 31/10 "	9 93				74 15		
		67 50			75 45				30		

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFERRED PAY	SER. ALLCE. ENG.
	Bal. Ford Dec.								74 15		
1918 Jany	Pte Pay.	34 10		A.P.					7 15		
				A.Q. 2244 5/11/17					36		
				A.R. 928 20/11 25th Bn					2 87		
				" 453 21/11 "					8 92		
				" 990 24/12 "					4 46		
				" 1162 15/11 15th Bn					9 73		
		34 10							27 04	15	6 21

5-42228 Pte Boden 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
MONTH	PARTICULARS	CR. 1	CR. 2		PARTICULARS											DR. 1	DR. 2	DR. 3		BALANCE																
	Bal Forck Jany.																																	
Feby	PP				3080				A.P.																										
									AR. 1053	15/1	25th Mar			446																					
									" 1100	26/1	"			357																					
					3080									803																					
Mar	"				3410				A.P.																										
									AR 695	31/8/17	15th Mar			974																					
									" 1211	15/3	28th "			1249																					
									" 1278	22/8	"			357																					
					3410									2580																					

"MAURETANIA" 9-5-19

B4867 DISPERSAL "T"

AUDITOR | PAYMASTER

M. OR S. — PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES — REGT. No. 542228 — RANK Pte. — NAME (IN FULL) BODEN, C.

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE

TO WHOM PAID Nil — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. S.R.D. — IF IN P.F. WHAT UNIT? ~~Can. Base Bk. Pay Sec. Head Sask.~~ (BLOCK LETTERS SURNAME FIRST)

PLACE OF ATTESTATION — TRANSFERRED TO 244 Glenlawn Wynne Road City — DATE — AUTHORITY

DATE OF ATTESTATION 27/9/16 — TRANSFERRED TO Indian Head. Sask. — DATE — AUTHORITY

ASSIGNED PAY $ 15/- closed by Ottawa 31-5-19 — DATE EFFECTIVE

PAYABLE TO Mrs. C Boden — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Indian Head Sask

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE Toronto — DATE 11-5-19 — REASON Demob — AUTHORITY DO 136 — IF ENTITLED TO POST DISCHARGE PAY Yes

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	C.	TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	BALANCE CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT							20	71	20	71																									20	71	Bal, Eng 2.P.C.
30.4.19																																					
18.5.19	18	1/10	1980								Endorsed on L.P.C. 1946												1500													Bal 1-5 — 18-5-19
					3500																																Clothing allce
					7000																																12 Days w.s.g.
																	487	500																			21 days 1919
																																					Loan Thrift Money
				W.S.G.			p/80		Cheque.										101	18							W.S.G.				14557						
																									Bal	11/5/19	70	—									Due
																											770										Soldiers
153 dys				350			350																								77	70	272	30			
													June 5		65760		70															147	70	202	30			1st W. S. G. Paid by #2 D. D.
											AR 82		July 8		67747		70															147	70	134	30			
																											2	20				219	90	120	10			
																																		60	10			all 339 219 see voucher
											AR 102		Aug 1		985-350		70															289	90	~~61 10~~				
											AR 174		Sep 3		1347018		61	10														350	-	100				Paid.
							350	-									241	10									79	90				351	-	1	-			
																																						Ldr bal 100 Passed to P.M.B.
																																						W.S.G. PAID IN FULL

CAPTAIN
FOR PAYMASTER WAR SERVICE GRATUITY

Passed to Sudbury 1358 ap See File B 0563
Cheques 17/11/20 Toronto

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1390.

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militi 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

Group ....A....

Checked by No. ....

....

Date ....24 MAY 1919....

WAR SERVICE BADGE CLASS A 28934 Toronto

SERVICE GROUP 16 SHORT FORM 28934 Mother

OCCUPATIONAL GROUP 1 A Farmer

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 542228 Baptist
2. Rank. Pte
3. Name. Boden Carl
4. Unit. S.R.D. 28 Bn. Cycling Corps.
5. Date of Discharge MAY 11 1919 Place TORONTO, ONT.
6. Reason for Discharge DEMOBILIZATION
7. Authority. No.2, D.D., Part II, D.O.No. 136
8. Proposed Residence after Discharge Indian Head. Sask.

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.?

Carl H. Boden.

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place TORONTO, ONT.

Date MAY 11 1919

H.M.T.Mauretania

Signature Dis. Cr. for H. [illegible] 3/5/19

O.C. No. 2 D.D. (O.C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.