...REGIMENTAL DOCUMENTS

NAME BOLSTER EFFIE CHRISTINA REGT. NO. N/S UNIT Canada H. Q. FILE NO. 26760

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
2	ATTESTATION PAPER (M.F.W. 23, 133, or 51)		M		H	DEATH
	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
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2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob
1	MEDICAL EXAMINATION (M.F.W. 129)		H			
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	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
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	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	Doc S.F.10			2		
1	Doc 17			9.10		
	Canada			9.10		
1	1917			2.10		
	/					

W. 2589
100M-11-15
1778-39-1277

Officer's Declaration Form

R.

UNIT ..... Rank

Regimental No. .....

ATTESTATION PAPER.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS)
1. What is your name?	Effie Christina Bolster
2. In what Town, Township or Parish, and in what Country were you born?	Colourg Ontario
3. What is the name of your next-of-kin? Relation	Mrs J. G. Nichols
4. What is the address of your next-of-kin?	Colourg Ont.
5. What is the date of your birth?	1884 Jan: 16th.
6. What is your Trade or Calling?	3.
7. Are you married?	No. 22257
8. Are you willing to be vaccinated or re-vaccinated?	yes
9. Do you now belong to the Active Militia?	R. A. M. C. & British Red Cross
10. Have you ever served in any Military Force? If so, state particulars of former Service.	Nursing Sister C. A. M. C.
11. Do you understand the nature and terms of your engagement? Rank + Unit	
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?	

Effie C. Bolster (Signature of Man). Officer

Lilian Dyson (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION. Officer

I, Effie C. Bolster, 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.

Effie C. Bolster (Signature of Recruit). Officer.

Date May 9th 1916. Lilian Dyson (Signature of Witness).

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, ..., 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.

..... (Signature of Recruit).

Date ..... 191 ..... (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

..... this ..... day of 191

..... (Signature of Justice).

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

..... (Approving Officer).

V. & S., Ltd. 30M. 18-12-15. 48297.

Description of Effie C. Bolster on Enlistment.

Apparent Age 32 years ..... 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 34 ins.
Range of expansion 3 ins.

Complexion Dark.

Eyes Brown.

Hair Dark turning grey.

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

Distinctive marks, and marks indicating congenital peculiarities or previous disease. None

(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~~ Officer 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 9/8 1916 J.L. Campbell Capt

Place London ..... *Medical Officer.*

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the ~~Recruit~~ Officer 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.

..... 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.

..... (Signature of Officer.)

Date 191

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS District 3.

Name of Soldier Roberts, E. C. No. M/A.

Rank

Regiment

INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

	Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhea	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination	1919 Sept 29	1.4 14. 17.21																		R.St.Alejne	3	Can. 18.
	. 29	1 / 18																		R.St.Alejne	3	Complete.

M. F. B. 465.
150M —6-18.
772-39-930.

Officer's Declaration Form.

R. 144.

UNIT ..... Rank. Regimental No. .....

ATTESTATION PAPER.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS)
1. What is your name?	Effie Christina Bolster.
2. In what Town, Township or Parish, and in what Country were you born?	Cobourg Ontario.
3. What is the name of your next-of-kin? Relation	Mrs J. G. Nichols
4. What is the address of your next-of-kin?	Cobourg Ont
5. What is the date of your birth?	1884. Jan: 16th
6. What is your Trade or Calling?	
7. Are you married?	No.
8. Are you willing to be vaccinated or re-vaccinated?	Yes.
9. Do you now belong to the Active Militia?	
10. Have you ever served in any Military Force? If so, state particulars of former Service.	R. A. M. C. & British Red Cross. Nursing Sister C. A. M. C.
11. Do you understand the nature and terms of your engagement? Rank + Unit	
12. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force?	

Effie C. Bolster (Signature of Man). Officer

Lilian Dupon (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION. Officer

I, Effie C. Bolster, 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.

Effie C. Bolster (Signature of Recruit). Officer.

Date May 9th 1916. Lilian Dupon (Signature of Witness).

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, ..., 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.

..... (Signature of Recruit).

Date ..... 191 ..... (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

..... this ..... day of 191

..... (Signature of Justice).

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

..... (Approving Officer).

V. & S., Ltd. 30M. 18-12-15. 48297.

Description of Effie C. Bolster on Enlistment.

Apparent Age 32 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 3 ins.

Chest measurement: Girth when fully expanded 34 ins.
Range of expansion 3 ins.

Complexion Dark

Eyes Brown

Hair Dark turning grey

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

Distinctive marks, and marks indicating congenital peculiarities or previous disease. None

(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 9/5 1916. J. McCampbell Capt

Place London

*Insert here "fit" or "unfit." *Medical Officer.*

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.

..... 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.

..... (Signature of Officer.)

Date 191

CANADIAN EXPEDITIONARY FORCE

W.W. 3-40.
T.H.

Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

This is to Certify that (Rank) Nursing-Sister.

(Name in full) Effie Christina ROTHER.

Enlisted in Canadian Army Medical Corps.

CANADIAN EXPEDITIONARY FORCE, on the [illegible]

day of [illegible] 191 ... AND WAS APPOINTED to COMMISSIONED RANK

in Canadian Army Medical Corps.

CANADIAN EXPEDITIONARY FORCE on the Eighth day

of May 191 6.

He SERVED in CANADA, England and France with the C.A.M.C., #19 Can. Gen. Hosp., #3 Can. Gen. Hosp., C.A.M.C. Depot., Can. Conv. Hosp. Bearwood., On Command Transport Duty to Canada, Montreal Mil. Hosp., Ste. Anne De Bellevue Mil.Hosp., Cobourg Mil. Hosp.

and was STRUCK OFF THE STRENGTH on the Thirtieth day

of September 191 9 by reason of General Demobilization.

Dated at Ottawa, this Twentieth day

of January 191[illegible] 1920.

Gleanwell
for. Director of Personal Services.

Lieut.

M. F. W. 2618a
30m.—4-19.
1772-39-1428.

M

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. -- Rank M/S Surname BOLSTER
(Give name in full)
Effie Christina

Unit or Corps C.A.M.C. Birthplace Cobourg, Ont.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 112 lbs. Height 5 ft. 5 in. Colour of Eyes Brown

Nutrition Fair

Pulse 88

Condition of arteries Good

Vision Rt. 20/20 Left 20/20

Hearing (conversational voice) Rt. 25 ft.

Left 25 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 No Genito Urinary System No Cardio-Vascular System No

Special Senses No Integumentary System No Respiratory System No

Disturbance of mentality No Muscular System No Digestive System No

Osseous and Joint System No Any other general condition No

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

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

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at.....(Overseas)

Date ..... Signed Effie C. Bolster ...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 Effie C. Bolster

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

THIS SECTION FOR USE IN CANADA—

Examined at Cobourg....(Canada)

Date 30-9-19..... Signed N Bowen 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 Effie C. Bolster

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

(This space to be used, if necessary, in connection with Section 8, overleaf, only.)

Approved
OCT 2 - 1919

W Craig Captain A. M. C.
For A. D. M. S. M. District No. 3.

[OVER]

M.F.W. 123.
1033 (D.P.) 500M-11-18.
1772-39-1142.

(Sheet 2)

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

M. F. W. 54. (A. F. B. 103.
350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps ..... MONTREAL MILITARY HOSPITAL. C.A.M.C.

Regimental No. xxxxxx ..... Rank ..... N/S ..... Name ... BOLSTER ... Effi Christina. .....
C. E. F.

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				
		Montreal, February 3rd, 1919. Taken on strength M.M.H. on transfer from MD #3. Authy. R.O. 1595, Para."A" of 1-2-19(4D 51-1-2. Corp Ord #210 of 3-2-19.Part 11 No 36 of 5-2-19) J. D. L. Shannon ..... Capt. Adjutant M.M.H. C.E.F.			
		Montreal, March 27th, 1919. Transferred to Ste Anne de Belle-vue Mil. Hosp. Authy.4D 9-B-208 of 25-3-19. Ref.Corps Ord 527 of 26-3-19. Part 11 Order No 86 of 27-3-19.) J. D. L. Shannon ..... Cap Adjutant M.M.H. C.E.F.			
Ste. Annes	27-3-19	T.O.S. Ste. Anne de Bellevue Mil. Hosp. as from27-3-19 Auth. A.D.M.S. Corps Orders dated26-3-19 No. 527. S.A.B. D.O. PartII dated27th March 1919. No. 86.			
26th/5/19	S.A.B.	S.O.S. Ste.A.B.M.H. on transfer to M.D.No.3 asfrom 25-5-19 Auth. H.Q. 392-2-2 dated 23-5-19. S.A.B. D.O. Part II no.146 d/26-5-19. Kenaran Captain & Adjutant. Ste. Anne de Bellevue Militaty Hospitak.			

(*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				
Cobourg Mil.Hosp.	Taken on strength 3rd July,1919. Daily Orders Part 2.No.184., of 3rd July,1919.		Struckmoff strength of C.E.F,30th Sept.1919. Daily Orders Part 2.No.283., of 10th October,1919.		

Capt. A. M. C.
For O. C., Cobourg Military Hospital

Army Form B. 103. Temporary Regimental Number.....

Casualty Form—Active Service.

Regiment or Corps 3 Can Gen Hosp

Rank W/S Surname Bolster Christian Name Effie Christina

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

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

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

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

{.....} or Corps Trade and Rate.....

.....Signature of Officer.

Date	Report From whom received	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
13.5.16	Edm Can	To 6 W Sta Camp with effect		8.5.16	Rot 56 Code 05
24.5.16	D.M.S.	To 6 Can Gen Hosp	Lapland	22.5.16	
18.10.16.	D.M.S.	Transf to No 3 Can Gen Hosp.		13.10.16	G.O. 1917
23.10.16	3 Can Gen Hosp.	T. o. S.		13.10.16	Pt. of 65.
		Embarked ...			
		Disembarked...			
14/2/17	14 Stat Hosp	Adm (Surf Gyr Measles Sc)		14/2/17	W13034/265
22/2/17	"	To duty (")		22/2/17	" 1909
22/2/17	3 C G H	Rejoined Unit		22/2/17	B213 ACS 270 d/
27/2/17	"	Adm Princess Louise Con Home		27/2/17	B213 ACS 272
10/3/17	"	Rejoined Unit		5/3/17	" " 272
24/5/17	"	Granted Leave to 7/6/17	24/5/17		" Pt 39 d/15
9/6/17	"	Rejoined Unit.		9/6/17	" " 42 d/19
8/11/17	"	Granted 14 days Leave		8/11/17	" 48 d/15
22/11/17	"	Rejoined Unit.		22/11/17	B213
25.7.18.	Edm. Rep.	S.O.S of 3. C.G.H. & posted to C.A.M.C Depot.		7.8.18.	A.O. 31584
		Shorncliffe (Recalled			Pt II 0.46 d/
		Cont by: Edm. Rep. Tel No. 30-117 dt- 25 7/18).			

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

[P.T.O.

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

A A Bruce
Capt. for Lt.-Col., A. A. G.
Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

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				
17.8.18	Canada Def	T.O.S for no 3 C.G.H.	S'Cliffe	8.8.18	Pt II Do. 87
17.8.18	"	Granted Leave 9.8.18/25.8.18	"		Pt II do 87
30.8.18	"	S.O.S to C.C. H. Beauwood	"	26.8.18	Pt II Do 98
		Wounded		Sent to for D.A.G.	O/C Records S'Cliffe Depots Draft
27-8-18	C.C.H. Beauwood	T.O.S. on being Posted from C.C.M.C. Regtl Depot.	Beauwood S'Cliffe	28-8-18	Pt II Do 16 759. 27-8-18.
18-10-18	do.	S.O.S. to No 15 C.G.H. Taplow	Do	16-10-18	Pt II Do 16 791 of 18-10-18
					N. Macdonald Capt
16.10.18.	10 O.R.s for am'd Hdqrs-B-909	Taken on strength No. 15 Can. Gen. Hosp. from C.C.M.C. R.T.O. Hosps	Taplow Bacon	16.10.18	P. 290 @ 24 T - 17.10.18
20.11.18.	90 O.R.s R.C. 270 1788	Struck off strength No. 15 Can. Gen. Hosp. Posted to Camb Can Coy.	Taplow Bacon	13.11.18	P 290. 278 22-11-18 [illegible] Captain, C.A.M.C.
22-11-18	Camb Can Co.	T.O.S. from 15 C.G.H. Hosp.	S'Cliffe	13-11-18	Pt II Do 170.
3-12-18.	do.	On Can. Front. Duty.	do.	20-11-18.	Pt II D.O. 179.
13-1-19.	do.	S.O.S. to C.E.F. Canada.	do.	31-12-18.	Pt II D.O. 10.
					[illegible] Capt. for O.C., Camb. Can. Co.

R 150

Rank and Name BOLSTER, Effie Christina Nursing Sister

Regimental No.

Unit C.A.M.C.

Date of enlistment 8-5-16

Place of birth Cobourg, Ontario

Married (Yes or No) No

If in Permanent Force

Promotions or appointments

Name and Address of Next-of-Kin

Mrs. J.G. Nichols (Sister)
Cobourg,
Ontario, Canada.

Date and place of discharge

Reason for discharge

Character on discharge

Dft C AUG 15 1916
db Sept. 12

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
13/5/16	Comm Can	To be Nursister with effect		8-5-16.	P.C. 786. C.O. 805,
24/5/16	D.M.O.	Posted to the D. of. Con. Red X. Hap. Taplow.		22-5-16	C.O. 888.
25/5/16	D.G.L.H.	Taken on Strength	D.G.Con. Hp.	22-5-16	Pt II O.W. 145
13-10-16	D.G.Con.H.	Struck off Strength	do -	12-10-16	Pt " ord. 284.
18/10/16	D.M.S.	Transfd to No 3 Can. Gen. Hosp.		13-10-16	C.O. 1917. DO 5409.
23-10-16	3.C.Gen.H.	Taken on Strength admitted	France Discharged	13-10-16	Pt " ord. 65.
20-2-17	WO.	No 14 Stat. Hosp.	Boulogne reported unit	22.2.17	C.L.611
5-6-17	3.C.Gen.H.	Granted leave. from 24/5/17 to		14-2-17	C.L.604. Susp. Rubella Sch.
15.12.17	do	Granted 14 day leave		4-6-17	Pt " ord. 42. 3 P. 9/H
13-8-18	- do -	S.O.S and posted to AAMC	Cas. Co. Sciffe	7-8-18	Pt II ord. 39.
17-8-18	camc. Cas. Dep. Sec.	T.O.S. on posting from 3 Can. Gen. Hosp.		8-8-18	Pt II ord. 46
		Granted leave from 9-8-18 to		25-8-18	Pt II ord. 87
30-8-18	- do -	S.O.S. on posting to CCH.	Bearwood	26-8-18	Pt II. ord. 98

A.F.B. 116
19 AUG. 1918

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				
27-8-18	CCH Bearwood	T.O.S. CCH Bearwood from CAMC Reg. Dep		26-8-18	P.T. ord 239.
18-10-18	- do -	S.O.S. on being posted for duty to 15 CGHp.		16-10-18	P.T. ord 291.
17-10-18	15 CGHp	T.O.S. having reported from CCH Bearwood		16-10-18	P.T. ord 247.
23-11-18	Do CAMC	S.O.S having reported to CAMC Cas Coy		13-11-18	P.T. ord 278
22-11-18	Cas Coy	T.O.S. on posting from 15 Can Gen Hosp.		13-11-18	P.T. ord 170
3-12-18	Do	On Command transport duty to Canada.		20-11-18	P.T. ord 179
13.1.19	- do -	S.O.S. on posting to C.E.F. in Canada ~~for duty~~ Retained		31.12.18	P.T. ord. 10.
10-1-19	Hq. O.M.F.C.	S.O.S. on trans to C.E.F. in Canada (Retained)		31-12-18	RO. 5163

S.O.S. 25 Sep 19

10367

M. F. W. 41
1 0M—7-16
1772-39 889.

392-2-2

Sister Name Bolster, E. L. O.

Regimental No.

Unit 6d. M.G.

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin J. S. Nichols, Cobourg, Ont.

Date and place discharged Duley

Reason for discharge M.D. 2

Character on discharge

Melagama 22/7/18 Au 30/7/18 Aus Esp 12.P.L. clear 30/7/18

D. [illegible] ob 5351—M. & D. 6880.

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					
																621

M. F. W 41
1 0M—7.16
1772-39 889.

Name.....

Regimental No.

Name and address of next-of-kin

Unit

Date of enlistment

Place of "

Married (yes or no)

Date and place discharged

Amount of pay assigned monthly $

Reason for discharge

To whom payable

Character on discharge

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

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch B

OVERSEAS CONTINGENTS

8823
8824

Date of Assignment Dec 1-17.

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

50			

Bank Account Credit

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank N.S. Promoted Reverted Discharge

Soldier's Name Effie Bolster

Battalion C.R.C.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Dominion Bank

Address Cobourg Ont

Change of Address

1

2

3

4

1803-E-8.

Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
Jan	V 67839		100	100	mailed 10/1/6 Do	2 M 20/12/17.
Feb	b 92269		50	50	✓	
mar	a 99550		50	50	✓	
april	b 3420		50	50	✓	
May.	E 10034		50	50	✓	
June	D 18251		50	50	✓	
July.	X 32594		50	50	✓	
Aug.	L 30040		50	50	✓	
Sept.	D 36125		50	50	✓	
Oct.	B. 47895		50	50	✓	
Nov	B. 51497		50	50	✓	
Dec	b 65162		50	50	✓	
			650	650		

A/c Closed 31-12-18.

Ret'd per S.S. Metagama

Date 30/1/16 F.X. 9/12/16 to M.D.2.

Clerk Chote M.R.O. Destroy 16787.

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22820—M. & D. 7683.

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128.
400m.—5-17—1772 39-1141
L. L. 22830—M. & D. 1993.

N/S - E C Bolster

Tos., 9-5-16; Thorncliffe
(arch.) England

W.D. file

Capt	Dawson	Carl
Lieut	Baker	Clarence
How Capt &	Chas Bucklee	Harry
Capt.	Brown	John C
Lieut	Brown	Chas Lewis
Lieut	Amyot	S.
Lieut.	Arhon	J. A.

Number ..... Rank N/S

Surname BOLSTER

Christian Name EFFIE. CHRISTINA.

Units ..... Theatre of War FRANCE

Date of Service 13-10-16

Remarks Sent to RR #6

Latest Address Cobourg - Ont.

Roll No. B Page 21998.

200m.-6-21.

GRATUITY (IMPERIAL)

CHRISTIAN NAME	SURNAME	REG. NO.
SCHEDULE NO.	LINE NO.	
UNIT RETIRED OR DISCHARGED FROM		
PLACE OF RETIREMENT OR DISCHARGE		
DATE RECEIVED FROM OTTAWA		IMPERIAL DEPOT NO.
DATE RECEIVED FROM REG. DEPOT.		DATE FORWARDED TO OTTAWA

DESP. NOV 7 1924
REGN. NO. 7273

868—D.P.—40M-1-12-19.

M. F. W. 71—500M.—5-18.
1772—39—961.

NAME Effie Christina Bolster

REGIMENTAL NO. — RANK Nursing Sister

ENLISTED AT Toronto Red Cross Society PROMOTIONS, &c. AND DATE

DATE Apr. 12/16 - Trans. to C. A. M. C. June 1st/16.

IF SERVED PREVIOUSLY, STATE UNIT, &c. —

MARRIED, WIDOWER, OR SINGLE Single

NEXT OF KIN Mrs J. G. Nichols RELATIONSHIP Sister

ADDRESS OF — Cobourg. Ont.

ASSIGNMENT OF PAY $ — c. — TO —

ADDRESS —

SEPARATION ALLOWANCE, ENTITLED OR NOT —

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR

CASUALTIES, &c.

NATURE E.G. ABSENCE, PROMOTION, &c.	PART II. D. O. No.	PART II. D. O. Date	REMARKS IF IN HOSPITAL, NOTE NAME, &c.
S. O. S. Obtaining Military Hospital. 30-6-19	184	3-7-19	Auth. C. O. No. 476 of 2-7-19.
S. O. S. of C. E. F. On Demobilization. 30-9-19	283	10-10-19	Auth. C. O. No. 794 of 9-10-19.

H. Q.

M. D. No. 2

Surname Balster

Christian names

T. O. S. 19

Regtl. No. Rank

D. O. Pt. II of

Unit

S. O. S. 30/9/19

Reason Demob.

Auth D.O. 283 10/10/19 Cobourg
RO 2225, 9 11-10-19 3 Mil. Hosp.

Next of kin

Relationship

Address

Also notify:

BORN—Place

Date

ATTESTED—Place

Date 7.5.

O/S

R/C 30/11/18

W. 22—100M 7-18. 1772-39-839.

R. 149.

Name BOLSTER *Rank* N/STR. *Reg. No.*
Effie Christina.
Unit CAMC 3 CGH.
Canada.
Next of Kin

Date 1917	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
14-2	14 Stat. Hos.	Boulogne	Susp. Rubella	604		
22-2-17	Dischd. duty		Rubella	611		

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

NAME Dolsbee E. G.

RANK AND CORPS M/Sgt. C.A.M.C. 36GX.

REGT'L NO

H. Q. FILE NO. 649-

FOLLOWS NO.

FOLLOWS

CABLE

No.	Date

NATURE OF CASUALTY

L. L. 12767—M. & D. 7390.

M. F. W. 42—50M.—12-16.
H. Q. 1772-39-893.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
#604-1/4	Stat. Boulogne	6/14-217	Susp Rubella set
#611	" Dusch to duty	7-2-17.	Cat 636 Rubella

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
Apr 1 1915	1st Cdn Auxiliary Hospital Regina
Apr 10 1915	1st Can Auxiliary Hospital Toronto
Apr 20 1915	1st Can Auxiliary Hospital Cobourg
1915.	Vaccinated G.A. Campbell Capt
Coburg. 30-9-19.	No disability due to service W. Mackay Lieut

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

ORIGINAL.

Nurse

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

Surname Bolster *Christian Name* Effie Christina

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Coburg. County Northumberland

Examined ... ... on 9th day of May. 1916.
at 86 Strand London.

Declared Age ... ... 32 years days.

Trade or Occupation ... Nurse

Height ... ... 5- feet, 6- inches.

Weight ... ... 103- lbs.

Chest Measurement { Girth when fully Expanded. 34 inches.
Range of Expansion inches.

Physical Development ... Good

Vaccination Marks { Arm ... X Right Left
Number One

When Vaccinated ... 1913.

Vision ... ... { R.E.—V=
L.E.—V= Normal.

(a) Marks indicating congenital peculiarities or previous disease ... (a) none.

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

Approved by (*Signature*) G.A. Campbell Capt
(*Rank*) *Medical Officer.*

Enlisted ... ... at London
on 9 day of May 1916

Joined on Enlistment ...	Corps. Nursing Sis	Regtl. No. 6 Can.
Transferred to		

Became non-effective by

on day of 191 .

(*Signature*)

(*Rank*)

The Morgan Reeve Co., Ltd., Printers, 20/22, Goldsmith St., Kingsway, W.C.
(25506) Wt.W2869/1662. 200m. 5/15. Forms B. 178.

P.T.O.

CANADIAN

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				
14 Sty Hpl, Boulogne	14	2	17	22	2	17	Susp Rubella.		Discharged to Duty. Duplicate Medical History Sheet posted to here. MC	504-611 (HH)

AUDITOR | PAYMASTER

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

M. OR S. | REGT. No. | RANK S/S. | NAME (IN FULL) BOLSTER. E.O.

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. — IF IN P.F. WHAT UNIT? — (BLOCK LETTERS SURNAME FIRST)

PLACE OF ATTESTATION — TRANSFERRED TO Eng. N.F. — DATE 25-5-19 — AUTHORITY N.O. 146

DATE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ — DATE EFFECTIVE

PAYABLE TO — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE — DATE — REASON — AUTHORITY — IF ENTITLED TO POST DISCHARGE PAY

BALANCE FROM PREVIOUS ACCOUNT

MONTH	PAY AND F.A. NO. OF DAYS	PAY AND F.A. RATE	PAY AND F.A. AMOUNT $	PAY AND F.A. AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	C.	TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	ACQUITTANCE ROLLS COL. NO. 1 DATE	ACQUITTANCE ROLLS COL. NO. 2 NO.	ACQUITTANCE ROLLS COL. NO. 2 DATE	ACQUITTANCE ROLLS COL. NO. 3 NO.	ACQUITTANCE ROLLS COL. NO. 3 DATE	CASH PAYMENTS COL. NO. 1 $	CASH PAYMENTS COL. NO. 1 C.	CASH PAYMENTS COL. NO. 2 $	CASH PAYMENTS COL. NO. 2 C.	CASH PAYMENTS COL. NO. 3 $	CASH PAYMENTS COL. NO. 3 C.	ASSIGNED PAY $	ASSIGNED PAY C.	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C.	OTHER CHARGES $	OTHER CHARGES C.	$	C.	TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
March							Nil																																
April	30	3.00	90	00	17	00			107	00	2425						57	00									50	00			107	00						
1st May		—					—	—																			50	00										
May	31	3.00	93	50	18	50			108	50			2960	27					58	50											108	50						
June		—			50	00		—	50	00				6	5				50	00											50	00						

Effects
Wedding allowance 50/- per diem effective 1st March R.O. 1836
Transport Duty 7 Mar 19 D.O.T.
Wchgs 50-00 Glasgow Clearing Depot Portland A 9B208
Rels from Transport Duty 14-4-19 D.O.T.
Transport Duty 22-4-19 D.O.T.
Wchgs 50-00 Clearing Depot Portland B 208
Rels from Transport Duty 24-4-19 D.O.T.
Transp Duty 1-5-19 D.O.T.
Rels from Transp 2-5-19 R.O. 146
@ 50-00 Changed trade etc
Pmt 1 Mar

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

AUDITOR | PAYMASTER

M. OR S. | PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES | REGT. No. N/S | RANK | NAME (IN FULL) BOLSTER, E.C.

NEXT OF KIN | RELATIONSHIP | PARTICULARS | EFFECTIVE DATE | AUTHORITY | ORIGINAL UNIT C.E.F. | IF IN P.F. WHAT UNIT? | (BLOCK LETTERS SURNAME FIRST)

ADDRESS | 300 | 7 1 a. | PLACE OF ATTESTATION | TRANSFERRED TO Q.M.H. | DATE 28/5/19 | AUTHORITY

IS SEPARATION ALLOWANCE PAID? | DATE EFFECTIVE | Messrs Allen paid on 2066 31/1/19 effective 1/6/19 | DATE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

TO WHOM PAID | RELATIONSHIP | | ASSIGNED PAY | June 1st 1916 DATE EFFECTIVE

ADDRESS | | A. Sister E. C. Bolster Cobourg Ont. | PAYABLE TO | | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

| | | | | ADDRESS | | |

| | | | | STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE ✓ | |

| | | | | DISCHARGED | PLACE Kingston | DATE 30/9/19 | REASON Dem't. | AUTHORITY Cobourg 20583 | IF ENTITLED TO POST DISCHARGE PAY Yes

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.		C.	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.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																				
June	30	300	90	00 ✓	15	00 ✓			105	00 ✓	$ 2700361						91 ✓	00										1	50 ✓		92	50 ✓			12	50	D.O.149 T.O.S.C.S.COMM Pay adjtd. on LPC to 31-5-19
July	31	300	93	00 ✓	12 15	50 ✓ 50 ✓			121 ✓		$ 2900361 ✓						12	50 ✓					108	50 ✓							121 ✓					20 Days Proport. Rate Allowance 15 7 Days Field Allowance
AUG	31	300	93 ✓		15	50 ✓			108	50 ✓					3100361 ✓								108	50 ✓							108	50 ✓				
SEP	30	300	90	00 ✓	15	00 ✓			105	00 ✓					3136852 ✓								105 ✓								105	00 ✓				
			W.S.G.								War Service Gratuity W.S.G.																										
183 days	300		549 ✓						549	00 ✓							93	00 ✓											93	00 ✓					M.S.H. 259583 Acct 9/10/19 1st Payment W.S.G. 6.9.182361 - 15/10/19
																	93	✓											186	✓		363	✓	1330303	OCT 15 1919
																	90	✓											276	✓		273	✓	1334560	NOV 27 1919
																	93	✓											369			180		1851361	DEC 20 1919
																	90	✓											459	✓	351	90	✓	1841639	JAN 22 1920
																	90	✓											549			0		1842863	FEB 23 1920

200M-3-19.—L. L. 58785-... & D. 9985.
M. F. W. 2.96.
1772-39-1390.

246
135
381
273
155
139

M. F. W. 84.
5m.—2-17.
1772—39—993.
L. L. 15315.—M. & D. 7567.

W/O & C. Bolster

C.A.M.C.

Date of Dis-embarkation 1/CHIEF CONDUCTING PAYMASTER CLEARING SERVICES COMMAND

Place

PERIOD		PAY			FIELD		CREDIT LAST ACCOUNT	SUB-SISTENCE	TOTAL CREDITS	ASSIGNED PAY	OTHER CHARGES	Casual Payments	TOTAL DEBITS	Cheque No.	AMOUNT PAID	REMARKS
From	To	Days	Rate	Amount	Days	Amount										
July 11		32	11						33 50	1 raw 13/5/19 - 20/5/19.					33 50.	

Date of Embarkation .....

Place .....

Ship .....

DEPOT No.	REGT'L No.	RANK	NAME	CONTINGENT CORPS	ENLISTMENT CORPS	DESTINATION	REASON DISCHARGED	ADMITTED TO HOSPITAL	DISCHARGED FROM HOSPITAL	FINDING OF MEDICAL BOARD	DATE OF DISCHARGE	

FORM P.15
5986–25M–19/1/17

ASSIGNED PAY.

UNIT. NAME OF — Rates DATE — AUTHORITY

RANK. DATE — AUTHORITY

NAME.

Beneficiary

Address ban

Amount. $ 50

Separation Allowance issued. Yes or No.....

b.a.R.b — Pay 2.– pd; Q.R. 1.60; Mess 1.– "

R.S — 8 5/16. D.O. 2454-6 TD; 13 5/16.

Name Bolster

Initials b b.

Bank of Montreal Trafalgar Sq

add outfit allce, 8/8 $100.

1918-19

DATE 1918	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
apl 17	a P. ban				50.			
	apl Pay (R)		108.					
24	Bank	1187		58				
May 19	May Pay (R)		111 60					
11	A P. ban.				50.			
23	Bank	2683.		61 60				
June	June Pay (R)		108					
14	A P ban.				50			
21	Bank	H166		58				
July	July Pay (R)		111 60					
16	A P ban				50.			
23	Bank	5626		61 60				
Aug	Aug Pay R.		111 60					
13	A P ban.				50			
22	Bank	7066 7853		61 60				
Sep	Sept Pay R		108					
12	A P ban				50			
24	Bank	9187		58				
Oct	Oct Pay R.		111 60					
15	A P ban				50			
23	Bank	10404		61 60				
31.	add outfit allce		100.					
	Bank.	10854		100				
Nov 12	adv Nov. Pay.	6 ash. 1159.		58				
18	Nov. Pay (R)		108.					
" "	A. P Can.				50			

Mtd to Canada
L. of A. 6 to 30/11/18
Sf. to R.G. Ledger 12
from 25 9/19

FORM P.15
5986–25M–19/1/17

ASSIGNED PAY.	UNIT. NAME OF	DATE	AUTHORITY	RANK.	DATE	AUTHORITY	NAME.
Beneficiary Address Amount. $ Separation Allowance issued. Yes or No.....							Name Initials Bank

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS

FORM P.15
2227—10M—1/1/17

ASSIGNED PAY. | UNIT. | RANK. | NAME.

UNIT. NAME OF	DATE	AUTHORITY	RANK.	DATE	AUTHORITY
C.A.M.C.		Pay $2.00 pd P.A. .60 " Mess 1.00 "	N/S	8/5/16	D.O. 24546 C.D. 4/13/16

Beneficiary
Address
Amount. $50 Can/12/17.
Separation Allowance issued. Yes or No.....

NAME.
Name Bolster
Initials E. C.
Bank of Montreal
Trafalgar Sq

1917-18

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
1917								
April 21	April Pay R.		108					
26		Bank 3003		108				
May 22	May Pay. R.		111 60			111 60		
23		Bank 5478		111 60				
June 14	June Pay (R)		108			108		
21		Bank. 9004		108				
July 19	July Pay (R)		111 60			111 60		
24		Bank. 13092		111 60				
Aug. 18	August Pay (R)		111 60					
20		Bank. 17361		111 60				
Sep 15	Sept Pay (R)		108			108		
11	A. P. ban							
21		Bank 21463		108				
Oct 9	October Pay (R)		111 60					
19		Bank 26291		111 60				
Nov 16	November Pay (R)		108					
20		Bank 30763		108				
Dec 7	December Pay (R)		111 60					
8	a P. ban.				50			
13		Bank 35096		61 60				
Jan	Jan Pay (R)		111 60					
14	a P. ban				50			
21		Bank. 39501		61 60				
Feb	Feb Pay (R)		100 80					
9	a P. ban.				50			
19		Bank 40996		50 80				

b for.

FORM P. 15
2227—10M—1/1/17

ASSIGNED PAY. | UNIT. NAME OF | DATE | AUTHORITY | RANK. | DATE | AUTHORITY | NAME.

Beneficiary
Address

Amount. $ 50
Separation Allowance issued. Yes or No.....

Name Bolster
Initials E. C
Bank of Montreal
Trafalgar Sq

DATE 1918	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
	Brought For							
Mar	March Pay (R)		111 60					
9	A. P. Can				50			
22	Bank			61 60				

P—15.

ASSIGNED PAY.

UNIT. NAME OF: C.A.M.C. DATE: — AUTHORITY: —

RANK. N/S. DATE: 8/5/16 AUTHORITY: Do. 2454 C.R.O. d/13/5/16.

NAME. Name Bolster. Initials E.C. Bank of Montreal.

Beneficiary

Address

Amount. $

Separation Allowance issued. Yes or No.....

1916-17

DATE 1916	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case	INITIALS
June 19	Pay June (R) C.7.D d/13/5/16 No. 30641 Bank Draft at m/s rate. 20 2x5/4		194 40	86 40				
July 20	Pay July (R)	Bank 36774	111 60	108		ø		
25		Bank 4997		111 60		ø		
Aug 17	Pay Aug. (R)		111 60					
23		Bank 7299		111 60		ø		
Sept 20	Pay Sep. (R)		108					
28		Bank 9510		108		ø		
Oct 23	Pay Oct (R)		111 60					
27		Bank 11000		111 60		ø		
Nov 17	Pay Nov (R)		108					
24		Bank		108		ø		
Dec 12	Pay Dec		111 60					
18		Bank		111 60		ø		
1917 Jan 22	Pay Jan		111 60					
25		Bank		111 60		ø		
Feb 13	Pay Feb.		100 80					
22		Bank 21943		100 80		ø		
March 20	March Pay (R)		111 60					
23		Bank 24818		111 60		ø		

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G. B. & S.

UNIT

NAME

ASSIGNED PAY:—

MONTHLY AMOUNT

TO WHOM PAYABLE

DATE OF APP

MARRIED (YES

NEXT OF KIN:

DATE NON-EFF

AND

BANK IN WHICH PAY & ALLOWANCES DEPOSITED

PERIOD		No. of Days	Regtl. Rate	PAY					Rate of Field Allowance	ALLOWANCES					A
From	To			Amount of Regimental	Command	Adjutant	Cr. from Prev. Account	TOTAL PAY		Amount of Field Allowance	P. F. Allowance	Messing	Subsistence	TOTAL	

SUNDRY PAYMENTS

DATE	CHEQUE No.	PARTICULARS