

## C.E.F. REGIMENTAL DOCUMENTS

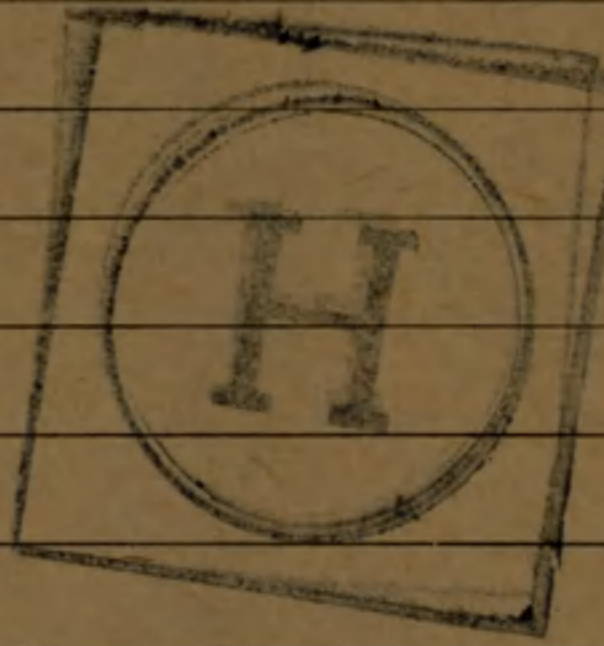
NAME **BOONE WILLIAM CECIL**

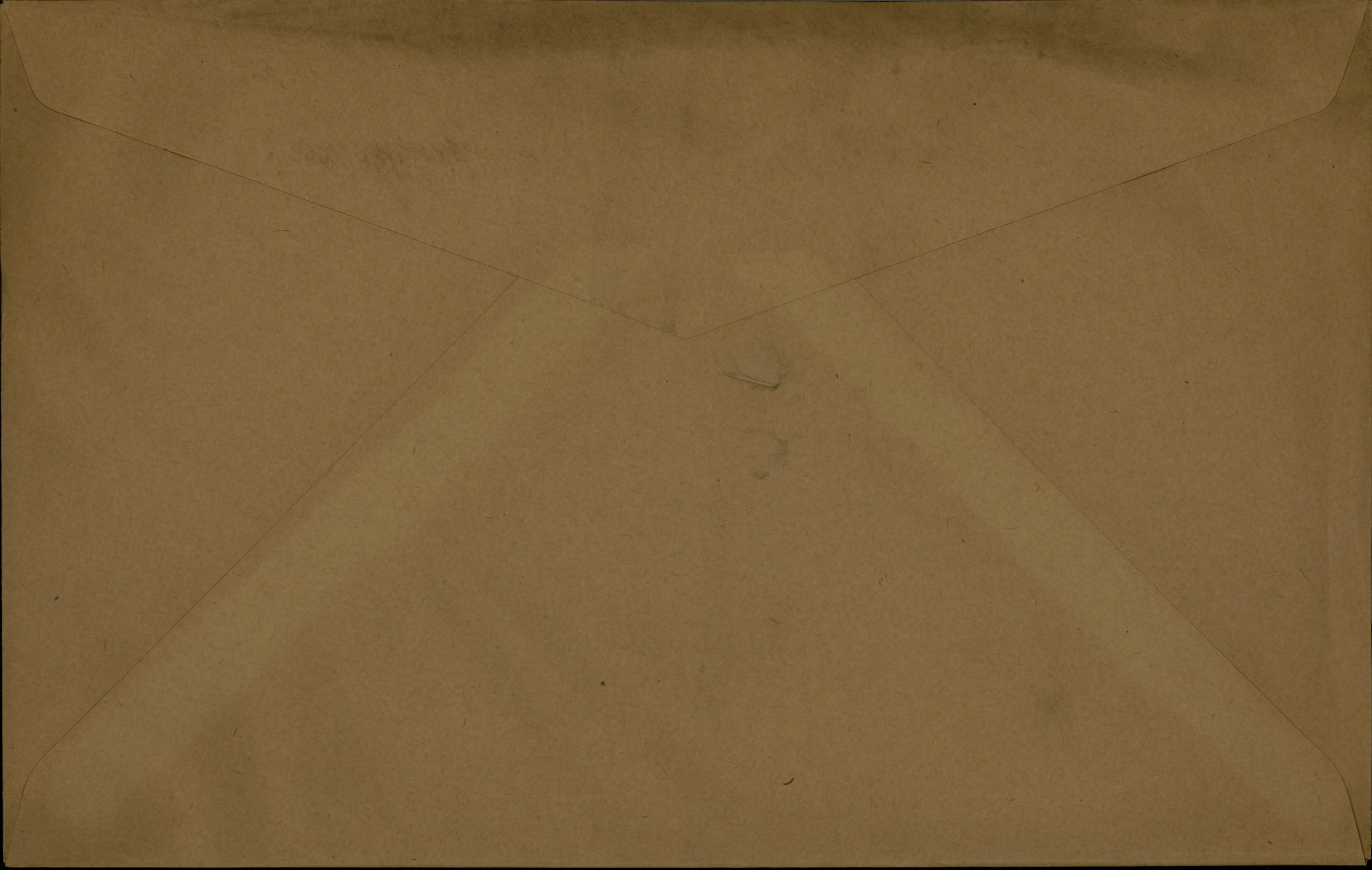
REGT. No. **817894**

UNIT **140 BN**

H. Q. FILE No. **28005**

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133 or 51)		<b>KILLED IN ACTION</b>	<b>15-8-17</b>		<b>DEATH</b>
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)				CATEGORY	
TRAINING HISTORY SHEET (M.F.W. 113)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 173)					<b>DISCHARGE</b>
DENTAL HISTORY SHEET (M.F.B. 465)					CATEGORY
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
MEDICAL EXAMINATION (M.F.W. 129)					
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					<b>DESERTION</b>
LAST PAY CERTIFICATE (M.F.W. 44)					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
CARDS					
PAY-SHEETS					





140th OVERSEAS BATTALION C. E. F.  
**ATTESTATION PAPER.**

ORIGINAL.

No. 817894

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

**QUESTIONS TO BE PUT BEFORE ATTESTATION.**

(ANSWERS.)

1. What is your surname? **Boone.**
- 1a. What are your Christian names? **William Cecil.**
- 1b. What is your present address? **Burtts Corner, York County.**
2. In what Town, Township or Parish, and in what Country were you born? **Burtts Corner, York Co., N.B.**
3. What is the name of your next-of kin? **Mrs. Alma Boone.**
4. What is the address of your next-of-kin? **Burtts Corner, York Co., N.B. Canada.**
- 4a. What is the relationship of your next-of-kin? **Mother.**
5. What is the date of your birth? **April 7th, 1897.**
6. What is your Trade or Calling? **Lumberman.**
7. Are you married? **No.**
8. Are you willing to be vaccinated or re-vaccinated and inoculated? **W.C.B. Yes**
9. Do you now belong to the Active Militia? **No**
10. Have you ever served in any Military Force? **No**  
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? **Yes**
12. Are you willing to be attested to serve in the } **Yes**  
 CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

**DECLARATION TO BE MADE BY MAN ON ATTESTATION.**

I, **William Cecil Boone**, 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.

*William Cecil Boone* (Signature of Recruit)

Date **March 1st**, 191**6** *[Signature]* (Signature of Witness)

**OATH TO BE TAKEN BY MAN ON ATTESTATION.**

I, **William Cecil Boone**, 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.

*William Cecil Boone* (Signature of Recruit)

Date **March 1st**, 191**6** *[Signature]* (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 **West St., John, N.B.** this **1st** day of **March**, 191**6**.

*[Signature]* (Signature of Justice)

# Description of William Cecil Boone on Enlistment.

Apparent Age 18 years 11 months.  
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

Height 5 ft. 6 ins.

Chest measurement { Girth when fully expanded 35 ins.  
 Range of expansion 2 ins.

Complexion Dark

Eyes Brown.

Hair Brown.

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

## CERTIFICATE OF MEDICAL EXAMINATION.

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

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

I consider him\* fit for the Canadian Over-Seas Expeditionary Force.

Date March 1st 1916 D. C. Malcolm

Place West St. John, N.B. Capt.  
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.

William Cecil Boone 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.

Lt. Beechcol (Signature of Officer)

Date March 1st, 1916 140th OVERSEAS BATTALION C. E. F.

*amp*  
*YH*

*Plu-10*

Number 817894 Rank \_\_\_\_\_

Surname BOONE

Christian Name William Cecil

Units 26<sup>th</sup> Div. Com. Coy Theatre of War France

Date of Service 28-10-16

Remarks (1) Rainsford Boone, Esq.

Latest Address Co. Dr. Anglin

Pairville, St. John Co.,

Roll No B. Page 19487 N.B.

DESP. JAN 16 1923  
REGN. NO. *27434*

No. 817894 RANK *Pvt.*

NAME *Boone, Wm. Cecil*

T.O.S. 29-2-16.  
(Do 23-2-3-16)

UNIT *140th Battalion C.S.*

M. D. *6*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916</i>	<i>1916</i>			
<i>Mar. 29</i>	<i>Mar. 31</i>	<i>✓</i>		
<i>Apr.</i>		<i>✓</i>	<i>a w. L. for 2 days pay April Paylist</i>	
<i>May</i>		<i>✓</i>		
<i>June</i>		<i>n</i>		
<i>July</i>		<i>n</i>		
<i>Aug</i>		<i>✓</i>		
<i>Sept</i>		<i>✓</i>	<i>a w. L. for 4 days pay.</i>	<i>Sept Paylist</i>
<i>Oct</i>		<i>n</i>		

UNIT SAILED

SEP 25 1916





SURNAME.

Boone

649-B-18605

CARD NO.

D

CHRISTIAN NAMES

William Cecil

FOLL.

REGL. NO.

817894

RANK

Pte

UNIT

140<sup>th</sup>

Bn.

FORMER CORPS

nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Boone Mrs. Alma.

RELATIONSHIP TO SOLDIER

Mother

ADDRESS

Burt's Corner, York Co., N. B.

COUNTRY OF BIRTH

Canada, Burt's Corner, York Co., N. B.

DATE

April 7<sup>th</sup> 1897.

PLACE OF ATTESTATION

West St. John N. B.

DATE

March 1<sup>st</sup> 1916.

O/S. 25-9-16 546 / 3.

MARRIED

SINGLE

*yes*

WIDOWER

TRADE OR CALLING

*Lumberman*

RELIGION

*Baptist*

DESCRIPTION.

APPARENT AGE

*18*

YEARS

*11*

MONTHS

HEIGHT

*5'*

FEET

*6*

INCHES

CHEST MEASUREMENT

*35'*

INCHES

EXPANSION

*2*

INCHES

COMPLEXION

*Dark*

EYES

*Brown*

HAIR

*Brown*

DISTINGUISHING MARKS

*not stated*

MEDICAL EXAMINATION.

PLACE

*West St. John N. B.*

DATE

*March 1<sup>st</sup> 1916.*

*Present Address - Burt's Corner, York Co., N. B.*





NAME

Roane, William Cecil

REGT'L. No.

817894

RANK AND CORPS

Plt. 26th Br. Tamm

H. Q. FILE NO. 649

FOLLOWS  
No.

FOLLOWS

CABLE

NO.

DATE

NATURE OF CASUALTY

M 5-946  
62-10

25-8-17

Killed in action Aug 16th 1917 ✓

A. J. B. 2090a

" " " " " " " "

Raven 22-8-17

Rec'd. 6/10/17.

LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

a599.

Rept from base.

15-8-17.

Killed in action

649-B-18605.

Boone W.C. Pte. #817894-C.E.F. *26 Bw M*

Medals  
& Dec. (father) Rainsford Boone, Esq.,  
c/o Dr. Anglin,  
Fairville,  
St. John Co., N.B.

P.&S. (father) ditto  
*(Serial no. 778547)*  
Scroll Dep. FEB 8 1921 Reqn. No. 2-18289  
Plaque Dep. 24-7-22 Reqn. No. L. 43080

Mem. Cross. (mother) Mrs. Alma Boone,  
Burtts Corner,  
York County, N.B.

*not elig. for star*  
*" " V.M.*  
*M.F. " B.W.M.*

*4,500*  
*132.*

~~MB:39857~~

JAN 55 1921

970



Surname **BOONE** Christian Name or Names **W.C.** Reg. No. **817894**  
 Rank **Pte.** Unit **26th Bn.** Co. Troop Batty.  
 Hospital Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1) Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

RFB. KILLED IN ACTION 15-8-17. *JH*

DISPOSITION

Date

CL. 25-8-17 A599.

REMARKS

A.M.D. 2 DEPT.

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

# EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

*mm*

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

M. F. W. 54.  
150M. 10.15.  
H.Q. 1772-39-920.

# Casualty Form—Active Service.

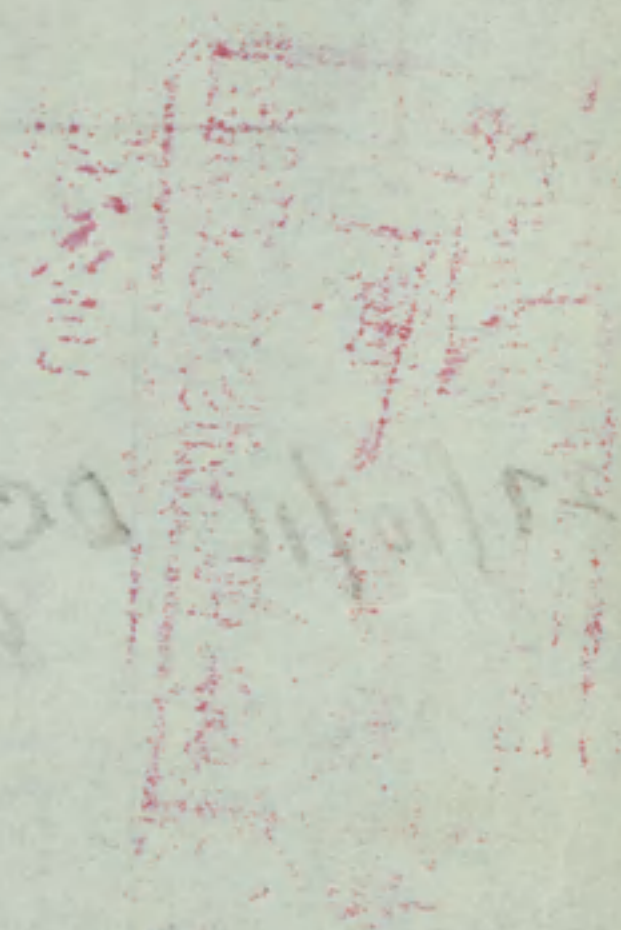
Unit, Regiment or Corps 140th B. S. Bn. C.E.F.  
 Regimental No. 517894 Rank Pte Name William Cecil Poore  
 Enlisted (a) Mar. 1/16 Terms of Service (a) duration of war Service reckons from (a) Mar. 1/16  
 Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }  
 Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) Quilt  
Carpenter

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				
		Embarked	Halifax	27/9/16	S.S. Corsican
		Disembarked	Liverpool	6/10/16	
27/10/16	26th Bn	Transf to 26th Bn. D.S.	Caesars Camp Shorncliffe.	27 <sup>10</sup> / <sub>16</sub>	Part II O. 231 27 <sup>10</sup> / <sub>16</sub> W. Lounsbury Capt & Adj. 140th Bn
25/10/16	C.B.D.	Taken on Strength	26th Bn	28 25/10/16	NR. G.T. O. 67. 7/11/16.
16.11.16.	"	Left for 2nd Cont Bn.		16.11.16	NR
19.11.16.	2nd Eng Bn	Arrived		19.11.16	NR.
2.2.17	"	Left for Unit		22/2/17	NR
3/3/17	of 26th	joined Unit		20/2/17	B 213
17.8.17	"	Killed in Action	Field	15.8.17	K1. 16/18303 Det Pt. 201d. 83-17

CERTIFIED CORRECT  
 7 NOV 1916  
 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) 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				
					<p><i>J. Whogan</i> Major for Lt.-Col., A.A.G. Canadian Section G.H.Q. 3rd Echelon D.E.F.</p>
<del> </del>					



A.G.R.

Rank

Name

BOONE, William Cecil ✓

Reg'l No.

817894 ✓

Unit

140th Bn. ✓

If in perm. Corps, }  
What Unit? }

Married or Single

Single ✓

Place and Date of Enlistment

West St. John, N.B. 1st March,

Place of Birth

Burt's Corner,

1916. ✓

York Co., N.B. ✓

Name and Address, Next-of-Kin

Mrs. Alma Boone, ✓

Burt's Corner, York Co., N.B., Canada. ✓

Relationship

Mother. ✓

Assigned Pay Monthly \$

Payable to



Relationship

Separation Allowance \$

Payable to

Relationship

N/E. R.B. No. 935  
File R.L. 25.B. 4133  
Category K.A.

Discharge, Date and Place

Reason

Character

H. W. & V., Ltd.—7165-16.



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.				
	Arr. in ENGLAND S.S.		CORSICAN	6-10-16.	
27 10 16	140Bn T'fd to 26th Res Bn		Caesars Bank L-r Dibrigate	27-10-16	D.O. 231
7-11-16	26th Bn	7 OS from 140th Bn	Field	29-10-16	PT II 0 07
25.8.17		Killed in Action	1st "	15.8.17	e-a.599. (Pao. 88 22/8/17)

A.F.B. 103 CHECKED  
NOV 1916



*100*

Register No. *DB 800*

WAR SERVICE GRATUITY  
TO  
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. *1839-W-7*

Reg't No. *817894* Name *William Cecil Boone*  
(Christian Name) (Surname)

Unit *170 Bn.* Rank *Pte.* Date of enlistment

Date of casualty *15-8-17* B.P.C. File No. *28042*

Was service performed overseas? *Yes*

DEPENDENT

Name *Mrs. Alma Boone* Relationship *Mother*

Address *Burtts Corner,  
York Co.,  
N.B.*

Amount of Special Pension Bonus \$ *nil* Abstracted by *J.M. Davidson*

Eligible for Gratuity \$

Less amount of Special Pension Bonus paid \$

Less Debit Balance of S. A. or A.P. \$

Total deductions \$

Balance due \$

Cheque No. Date issued

REMARKS: *Not eligible under P.C. 1486  
No S.A. paid*

Clerk *W. Mitchell*

Audited by  
Date

M.F.W. 2652  
25M-6-20.  
H.Q. 1772-39-1473

*Coted 18/8/20  
J.G.*

# POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname

Christian Name

Regimental Number

Rank

Address (in full)

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

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

L.L. 53961—M. & D. 9721

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

Remarks:

M. F. W. 127  
 300M-1-19  
 1772-89-1140



led 17

MILITIA AND DEFENCE  
ASSIGNED PAY  
OVERSEAS CONTINGENTS

M. F. W. 12.  
50m.—6-16.  
H. Q. 1772-39-819.

To Whom *Mrs Alma Boone*  
Address *Burtts Corner*  
*York Co. N. B.*

By Whom Assigned *Boone William Cecil*  
Regtl. No. *817894*  
Rank *Pvt.*  
Corps *140 Ball.*

Rate *15-00*

OCT 1 - 1916

PAYMENTS

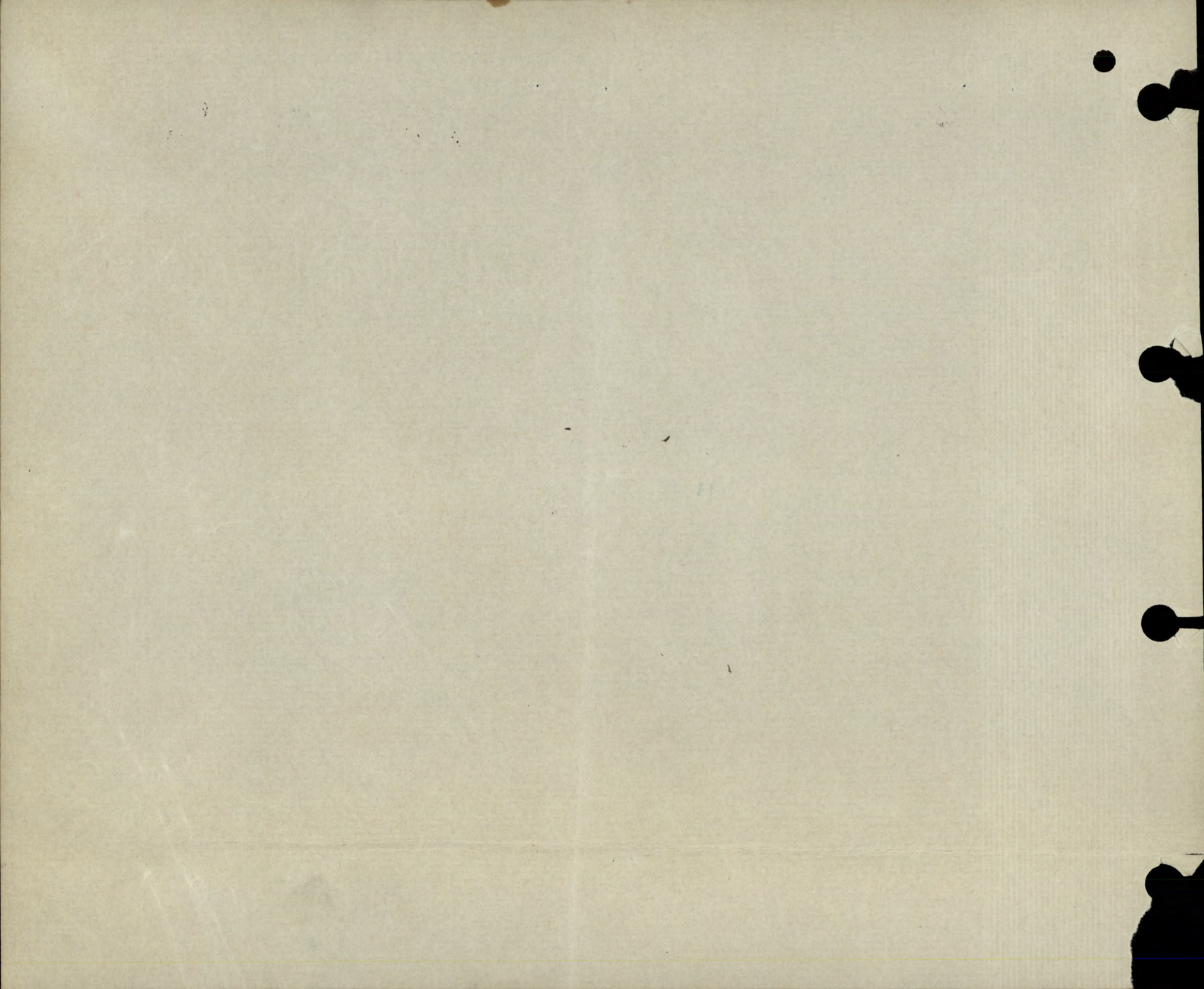
Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



Pensions Notified Date *29/8/17*  
 Killed in Action }  
 Died of Wounds } Date *15-8-17*  
 Missing }  
 J. L. (S. 7) *26/8/17* Clerk *J. A. Goldsmith*  
 Date Noted *29/8/1917*

PENSION  
 A. CLOSED.....  
 OVER-PAYT.....  
 RECOVERED.....  
 BY *B.L.*  
 B.P.C. *12-4-18*  
 GRANTED

PENSION GRANTED *1-9-17*  
 PER NO.....



MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

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

Sheet No. 2. Mrs A. Boone  
 (Assignee)

Name of Soldier Boone W. C.

L. L. Job 5470—Req. 6888.

15-00

PAYMENTS.

817894-Pl-140 Ball-

Month.	Year.	Cheque No.	Amt.	Remarks.
			15 00	OCT 1 - 1916
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		u 26430	15	
Nov.		H 29211	15	
Dec.		g 34176	15	
Jan.	1917	W 31690	15	
Feb.		W 38666	15	15 (JW)
March		V 44489	15	15 L
April		X 34	15	15-B.
May		u 6570	15	
June		C 12778	15	15. S.
July		W 22581	15	15 Cu 165 C.F.X. to 31-8-17 J.A. Goldsmith 29/8/17
Aug.		Y 27025	15	15 Cu Account closed 31-8-17 Cas.
Sept.		<del>Y 33841</del>	<del>15</del>	20 Y 33841 Cancelled. J.A. Goldsmith 29/8/17
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

W.B.

W.B.

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.				

Date of Enlistment

MILITIA AND DEFENCE

L. 17

Date of Assignment

# Separation and Assigned Pay Branch

*Oct 1st / 16*

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

<i>15</i>		
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## PARTICULARS OF SEPARATION ALLOWANCE

No. *817894*  
 Rank *Pte.* Promoted Reverted Discharge  
 Soldier's Name *William Cecil Boone.*  
 Battalion *140<sup>th</sup> Batt.*  
 Beneficiary  
 Relationship  
 Address

## PARTICULARS OF ASSIGNMENT

Name *Mrs. Alma Boone*  
 Address *Burtt's Corner York Co. N.C.*  
 Change of Address  
 1  
 2  
 3  
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>1917</i> <i>Aug 31</i>			<i>165</i>	<i>165</i>	<i>1839-10-7</i> <div data-bbox="1736 1009 2279 1183" data-label="Text"> <p>Pension Granted <i>1-9-17</i>            B.P.C. to Recover \$.....            Clerk <i>J. P. Lee</i> Date <i>6-4-18</i></p> </div> <div data-bbox="1507 1196 2821 1327" data-label="Text"> <p><i>A/c closed, Velled in Action 15<sup>th</sup> 8<sup>th</sup> pensions notified 29-8-17</i>  <i>E.F.X form issued 25-3-18</i></p> </div> <div data-bbox="1736 1327 2233 1620" data-label="Text"> <p>PENSION            A CLOSED.....            OVER-PAY.....            RECOVERED BY <i>B.L.</i> <i>12-4-18</i>            GRANTED</p> </div>

*12406*  
*MR*

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

## PARTICULARS OF SEPARATION ALLOWANCE

## PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

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

P. 559. MARRIED OR SINGLE *Single.*  
 PLACE OF BIRTH *Powhatan Co., York Co. N.B.*  
 NAME AND ADDRESS OF NEXT OF KIN *Mrs. Alma Boone, Burto's Corner, York Co., N.B.*  
 RELATIONSHIP OF NEXT OF KIN *Mother*  
 NAME AND ADDRESS OF NEXT OF KIN  
 RELATIONSHIP OF NEXT OF KIN  
 SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)  
 PAYABLE TO  
 RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &		
PARTICULARS	EFFECTIVE DATE	AUTHORITY
<i>Killed in action</i>	<i>15/8/17</i>	<i>LA599 25/1/17</i>

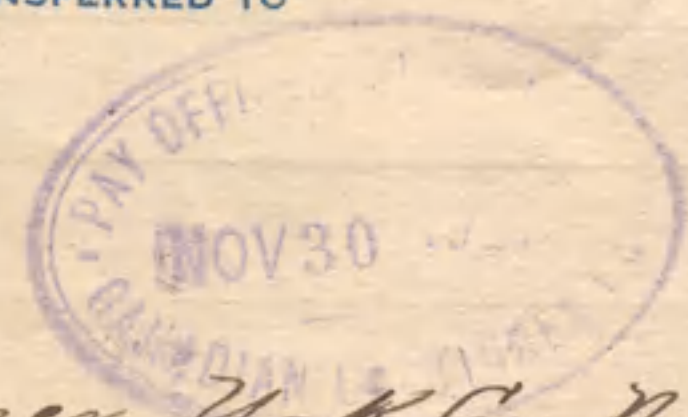
  

ADMISSIONS TO HOSPITAL, &c			
DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L. No. *817894* RANK *Oto.* NAME *"Boone" William Cecil*  
 IF IN PERM. CORPS WHAT UNIT UNIT *140<sup>th</sup> Dir. Transferred to 26<sup>th</sup> Pen. DATE 21-1-16 AUTHORITY *Co. 291 27-10-16**

PERMANENT FORCE ALLOWANCES TRANSFERRED TO *Sub. Div. L* DATE *1/9/17* AUTHORITY *LA599 25/1/17*  
 PLACE OF ATTESTATION *St. John, N.B.* TRANSFERRED TO DATE AUTHORITY  
 DATE OF ATTESTATION *29/1/16.* TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY \$ ~~*100.*~~<sup>*XX*</sup> DATE EFFECTIVE *1/10/16.*  
 PAYABLE TO *Mrs. Alma Boone, Burto's Corner, York Co., N.B.* RELATIONSHIP *Mother*  
 ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE  
 PAYABLE TO RELATIONSHIP  
 STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE *1/9/17* REASON *Killed in action 15/8/17 LA599 25/1/17*  
 DISCHARGE DATE AND PLACE REASON AND AUTHORITY  
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) *Entered on N. & Ward Index*  
 ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE) *Checked by H. Silobson*



DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS							
	NO. OF DAYS	RATE		AMOUNT		NO. OF DAYS	RATE		AMOUNT		NO. OF DAYS	RATE				AMOUNT		1	2	3	4	1	2				3	4				CREDIT	DEBIT					
		\$	C.	\$	C.		\$	C.	\$	C.		\$				C.	\$																	C.				
<i>1914</i>																																						
<i>Oct 1</i>													<i>1470</i>	<i>1470</i>																								
<i>Oct 31</i>	<i>31</i>	<i>100</i>						<i>310</i>					<i>3410</i>												<i>15</i>	<i>15</i>	<i>3380</i>											
<i>Nov 31</i>	<i>31</i>	<i>40</i>					<i>40</i>					<i>11</i>												<i>15</i>	<i>15</i>	<i>4080</i>												
<i>Dec 31</i>	<i>31</i>	<i>10</i>					<i>10</i>	<i>1</i>				<i>11</i>												<i>30</i>	<i>87</i>	<i>4308</i>												
<i>Dec 31</i>	<i>31</i>	<i>31</i>					<i>31</i>	<i>310</i>				<i>3410</i>												<i>15</i>	<i>2633</i>	<i>5085</i>			<i>New</i>	<i>5085</i>								
							<i>920</i>	<i>920</i>																														
<i>Jan 31</i>	<i>31</i>	<i>110</i>					<i>3410</i>					<i>2410</i>												<i>15</i>	<i>2024</i>	<i>6471</i>												
<i>Feb 28</i>	<i>28</i>	<i>110</i>					<i>3080</i>					<i>3080</i>												<i>15</i>	<i>2057</i>	<i>7494</i>												
<i>Mar 31</i>	<i>31</i>	<i>100</i>					<i>3410</i>					<i>3410</i>												<i>15</i>	<i>2546</i>	<i>8358</i>												
<i>April 30</i>	<i>30</i>	<i>100</i>					<i>33</i>	<i>36 5/4</i>				<i>33 36 5/4</i>											<i>15</i>	<i>53</i>	<i>1727</i>	<i>9931</i>												
<i>May 31</i>	<i>31</i>	<i>100</i>					<i>3410</i>					<i>3410</i>												<i>15</i>	<i>78</i>	<i>11841</i>												
<i>June 30</i>	<i>30</i>	<i>100</i>					<i>33</i>	<i>113 4/6</i>				<i>33 113 4/6</i>											<i>15</i>	<i>164</i>	<i>2813</i>	<i>12328</i>												
<i>July 31</i>	<i>31</i>	<i>100</i>					<i>3410</i>	<i>288 20/6</i>				<i>3410 288 20/6</i>											<i>15</i>	<i>1678</i>	<i>14060</i>	<i>14060</i>												
							<i>33440</i>					<i>1470 34910</i>												<i>1423</i>	<i>523,3609</i>	<i>20850</i>												

*A.P. ch with CF. x off 1.10.16 - 31.8.17 - 16.5*

*Carried forward.*

Statement of  
 DEC 14 1914  
 Account rendered

Statement of  
 FEB 9 1915  
 Account rendered

