ATTESTATION PAPER

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

1. What is your name? — John Harold White
2. In what Town, Township, or Parish, and in what Country were you born? — Georgina Ont. Canada
3. What is the name of your next-of-kin? — Jeannette Elizabeth White - wife
4. What is the address of your next-of-kin? — C/o John O'Brian L'Orignal Ont
5. What is the date of your birth? — August 25th 1873
6. What is your trade or calling? — Physician & Surgeon
7. Are you married? — yes
8. Are you willing to be vaccinated or re-vaccinated? — yes
9. Do you now belong to the Active Militia? — no
10. Have you ever served in any Military Force? — 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 CANADIAN OVER-SEAS EXPEDITIONARY FORCE? — yes

J H H White (Signature of Man.)

[illegible] (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, John Harold White, 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.

J H H White (Signature of Recruit.)

Date May 1 1915 [illegible] (Signature of Witness.)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, John Harold White, 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.

J H H White (Signature of Recruit.)

Date May 1 1915 [illegible] (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 Ottawa this 1st day of May 1915

[illegible] (Signature of Justice.)

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

(Approving Officer.)

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

DESCRIPTION OF John Gerard White ON ENLISTMENT.

Apparent Age 37 years 8 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 6 1/4 ins.

Chest measurement
- Girth when fully expanded 38 ins.
- Range of expansion 4 ins.

Complexion Fair

Eyes Grey

Hair Dark Brown

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

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

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

Scar base left thumb

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 April 30, 1915 Thomas Ross Capt

Place Montreal

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

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 .

Duplicate

FORM R. 171.
6531—2 M—22/1/17.

Unit C.A.M.C. *Rank* Captain *Name* White, J.H.

OFFICERS' DECLARATION PAPER

CANADIAN OVERSEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE ANSWERED BY OFFICER.

(ANSWERS).

1. (*a*) What is your Surname? WHITE

(*b*) What are your Christian Names? John Harold

2. (*a*) Where were you born? (State place and country) Iroquois, Ont. Canada

(*b*) What is your present address? Bank of Montreal, Waterloo Place, London

3. What is the date of your birth? August 25th. 1877.

4. What is (*a*) the name of your next-of-kin? ~~Xxxx~~ Jeannette Elizabeth White

(*b*) the address of your next-of-kin? c/o Bank of Montreal, Waterloo ~~Pl~~ Place, London S.W.

(*c*) the relationship of your next-of-kin? WIFE

5. What is your profession or occupation? Physician & Surgeon

6. What is your religion? C of E

7. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes

8. To what Unit of the Active Militia do you belong? None

9. State particulars of any former Military Service? 2 Yrs. R.A.M.C. ✓

10. Are you willing to serve in the CANADIAN OVERSEAS EXPEDITIONARY FORCE Yes

The undersigned hereby declares that the above answers made by him to the above questions are true.

T.O.S. on appointment
CAMC Depot. Westenhanger
14-5-17 P2-D.O. 167

J.H. White Capt Canc (*Signature of Officer*).

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider him* Fit for the CANADIAN OVERSEAS EXPEDITIONARY FORCE.

Date June 14th. 1917

Place Westenhanger, Kent

Wm. Robb Capt
Medical Officer.

*Insert here "fit" or "unfit."

Unit C.A.M.C. Rank Captain Name White, J.H.

OFFICERS' DECLARATION PAPER

CANADIAN OVERSEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE ANSWERED BY OFFICER.

(ANSWERS).

1. (a) What is your Surname? WHITE

(b) What are your Christian Names? John Harold

2. (a) Where were you born? (State place and country) Iroquois, Ont. Canada

(b) What is your present address? Bank of Montreal, Waterloo Place, London

3. What is the date of your birth? August 25th. 1877.

4. What is (a) the name of your next-of-kin? Emma Jeannette Elizabeth White

(b) the address of your next-of-kin? c/o Bank of Montreal, Waterloo Pl Place, London S.W.

(c) the relationship of your next-of-kin? WIFE

5. What is your profession or occupation? Physician & Surgeon

6. What is your religion? C of E

7. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes

8. To what Unit of the Active Militia do you belong? None

9. State particulars of any former Military Service? 2 Yrs. R.A.M.C.

10. Are you willing to serve in the CANADIAN OVERSEAS EXPEDITIONARY FORCE Yes

The undersigned hereby declares that the above answers made by him to the above questions are true

(Signature of Officer)

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider him ... for the CANADIAN OVERSEAS EXPEDITIONARY FORCE.

Date June 14th. 1915

Place West Malling, Kent

Medical Officer.

REGIMENTAL DOCUMENTS

NAME White John Harold REGT. NO. 4[illegible] UNIT [illegible] H. Q. FILE NO.

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)					DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category I
TRAINING HISTORY SHEET (M.F.W. 113)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					
1 DENTAL HISTORY SHEET (M.F.B. 465)					DISCHARGE
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Category Deserter
1 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)					DESERTION
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)					
			17675		

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

(372-10-141) Pte Cond Capt

CARD NO.

SURNAME. White.

CHRISTIAN NAMES John. H.

Lost. 31/5/19 on retiring FOLL. in Bad. 01800. 124 to 2/7/19.

REGL. No. RANK ~~Lieut.~~ Capt Branch of a. D.M.S.

UNIT C. a. M. C. Transferred to R. a. M. C.

FORMER CORPS Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL White Mrs. J. H.

RELATIONSHIP TO SOLDIER

ADDRESS L'Orignal Ont.

COUNTRY OF BIRTH Canada.

DATE

PLACE OF ATTESTATION

DATE

Pro Kaapt. 10/5/16.

B/C 28/10/19 Ex Capt. 437 2.

L. L. 94504. M. & D. 6512. Auth Ottr II 136 d. 10/5/16.

M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

MARRIED SINGLE WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

Present Addres National Heart Hospital
Westmoreland St London

CARD NO. 4

FOLL.

SURNAME. White.

CHRISTIAN NAMES John Harold

REGL. No. 5-9691. RANK Pte.

UNIT A. M. C. Reinfts.

FORMER CORPS Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL White Mrs. Jeannette Elizabeth.

RELATIONSHIP TO SOLDIER Wife

ADDRESS C/o John O'Brian L'Orignal Ont.

COUNTRY OF BIRTH Canada, Iroquois Ont. DATE

PLACE OF ATTESTATION Moose Jaw Sask DATE May 1st. 1915.

L. L. 94504. M. & D. 6512.

M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

MARRIED yes. SINGLE WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

Number ..... Rank CAPT.

Surname WHITE

Christian Name JOHN HAROLD.

Units ..... Theatre of War ENGLAND.

Trans. to R.A.M.C. 21.5.15 - R.O. 1252. - Thorn.
appt. temp. Capt. C.A.M.C. 14.5.17.

Date of Service .....

Remarks W.O. ROLL #3. PAGE 12. W.O.N/W/9/1783 of 5.5.20

Latest Address .....

Roll No at Page 5171

200m.-6-21. C.A.M.C.

DESP. JUN 22 1923
REGN. NO. 2724

Capt. White John Harold.

b. A M. b

10-12

Forms R. 150. E.T.
3232. 15 M. 14/12/

For previous services see N-E ledger

Surname WHITE **Christian Names** John Harold

Rank Captain **Name and Address of Next-of-Kin** Wife

Promotion Jeaneette Elizabeth White

C/o. Bank of Montreal. Waterloo Place
London. S.W. England.

Unit C. A. M. C.

Place of birth Iroquois. Ont. Canada.

Married (Yes or No) Yes.

Appointments

Date of leaving Canada **Date and Cause of Resignation**

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
			CAN MED CORPS		CAMC
12.6.17.	DMS.	To be Temp Capt. CAMC. 6 Stn. posted CAMC Depot.		14.5.17.	Co. 751.
20.6.17.	W.O.	To be Temp Capt. CAMC.		14.5.17.	Lon. Gaz. 30141.
3.7.17	DMS.	Posted. to D of C. Can Red X Hp. Taplow.		18.6.17.	Co. 846.
25.9.17.	"	" " No 15 Can Gen Hosp		24.9.17	Co. 1259.
27.7.18	15 C.G.H	S.O.S. on posty to Bord of A. O mks. 2da.		18.7.18	Pt II O. 177
26.7.18	A.D.M.S	S.O.S. of this Brch on cease to be att. to 15 C.G.H		18.7.18	Pt II O. 150
3.8.18	Do	Detailed for duty at Can Con Offs.		18.7.18	Pt II O. 155
13-1-19	Do	"To Command" S.M.O.'s Office Southampton Docks		18-7-18	Pt II Ord 8
2-7-19	A.D.M.S	S.O.S. of O.M.F.C. on retiring in British Isles		31-5-19	Pt II of 124
24-6-19.	D.G.M.S.	S.O.S. Retires in the British Isles.		31-5-19	Co. 74. Z.J. 20/6/19.

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				

Rank Lieut Name WHITE, John Harold Reg'l No.

Unit C. A. M. C. If in perm. Corps, What Unit? No Married ~~xx~~Single

Place and Date of Enlistment Moose Jaw, Sask. 1.5.15 Place of Birth Iroquois, Ont.

Name and Address, Next-of-Kin
Jeannette Elizabeth White,
c/o John O'Brian, L'Original, Ont. Relationship Wife

Assigned Pay Monthly $ Payable to Relationship

Separation Allowance $ Payable to Relationship

Discharge, Date and Place Reason Character

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				
6-7-15	London	To Rame. Struck off list 6.7.		21-5-15	R.O. 1252 -

4028

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				

W.H. 13.48.

THIS IS TO CERTIFY that (Rank) Capt.

(Name in full) John Harold White

Enlisted in C.A.M.C.

CANADIAN EXPEDITIONARY FORCE, on the ——

day of —— 19 —— AND WAS APPOINTED TO COMMISSIONED RANK

in C.A.M.C.

CANADIAN EXPEDITIONARY FORCE on the 14 day

of May 1917

He SERVED in CANADA England with the C.A.M.C.

and was STRUCK OFF THE STRENGTH on the 31 day

of May 1919 by reason of Gen. Demob.

Dated at Ottawa, this day

of 19

Prious service with the R.A.M.C.
from 10-5-15 to 13-5-17.

Form P. 812B
7961 10m 1/5/19 D.671

FILE NO. 8690

WAR SERVICE GRATUITY and SEPARATION ALLOWANCE

Payable to WHITE. John Harold Capt.

Address National Heart Hospital. Westmoreland St off new Cavendish St

Dependent Mrs Jeannette E. White. (wife)

Address 11/8/19 c/o Rev. W. H. White. St Luke's Rectory. Peterboro. Ont. Canada. London. W.

Date	Cheque No.	Gratuity	Payments	Balance Due.	Remarks
June 18	27871		24 13 2		
July 10		188 0 3			
		49 6 3		212 13 4	
" 21	54811		24 13 2	188 0 2	2nd
" "			~~8~~ ~~4~~ ~~4~~	~~144~~ ~~17~~ ~~3~~	~~bounty~~
Aug 11	65748		43 2 11	144 17 3	3rd + adj of 633 each on 1+2 Inst.
" 11			188 0 3		Prev cr. cancelled by amended Statement
11			49 6 3		" " " " "
11	amended statement	157 3 10			Withheld £190.00
11	P888	41 1 11		105 16 6	till further notice
Aug 11			64 14 7		C.A to Canada 339 (£15.00)
" 11			41 1 11		C.A to Canada 340 (£20.00)
		435 12 3	435 12 3		

All future payments @ 150 pending payments to be adjusted

2 nd 10

Withheld { W.C. 130.00 / P.A. 40.00 / 190.00 }

£ 245.

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name White. John. Harold.
Surname Christian Name

Regimental Number Rank H. Major

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Address (in full)

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

L.L. 53961—M. & D. 9721

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

Remarks: Ledger sheet written from file 019256-J-175. 11/9/19

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

application No 8695

File No. 19256-J-176

WAR SERVICE GRATUITY.

Register No.

Reg. No. "Hon" Major

Name White. J. H.

Address % W.H. White

St Lukes. ~~Toronto~~

Reeday Peterboro Ont.

Pay Soldier $ 315.00

C.A.N. 339

Clerk L Charbonneau

Dependent Mrs Jeannette E. White

Address Same

auth for opening apl.

auth Credit advice note No -339 on file re above.

Pay Dependent $ 200.00

Days 153 Rate 1.90 Due 965.00 C.A.N. 340

Less P.D.P. credited 450.00

Less further Dr. Bal. or overpayment.

Net 515.00

R. W. 134 23-1-20.

	Date	Ck. Order	Ck. No.	Amount		Remarks.	Date	Ck. Order	Ck. No.	Amount.	
1				—			1			40	00
2				—			2			40	00
3				—			3			40	00
4				—			4			40	00
5	23/9/19	21817	525036	315			23/9/19	21818	525035	40	00
										200	
6							6				

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

GEN'L AUDITOR
Posting checked by
J.A.B.
Date 17-9-19

C.A.D.C.-5009A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

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.

NAME OF SOLDIER (Block Letters) WHITE, J. H.

REGIMENT C. A. M. C. RANK Captain No.

Date of Examination in England | Date of Examination in France

PRESENT DENTAL REQUIREMENTS

1. FILLINGS —
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 E. J. Kelly
Capt C.A.D.C.

CANADIAN EXPEDITIONARY FORCE

W.H. 13-48.
R.A.P.

Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

This is to Certify that (Rank) Captain

(Name in full) John Harold WHITE.

Enlisted in Canadian Army Medical Corps.

CANADIAN EXPEDITIONARY FORCE, on the [illegible]

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

in Canadian Army Medical Corps.

CANADIAN EXPEDITIONARY FORCE on the ~~Fourteenth~~ 30 day

of ~~May~~ apr 191~~7~~ 15

HE SERVED in CANADA, and England with the Canadian Army Medical Corps.

and was STRUCK OFF THE STRENGTH on the Thirty First day

of May 19~~17~~ 19 by reason of General Demobilization

Dated at Ottawa, this Thirtieth day

of October 1920

~~Previous service~~ with the Royal Army Medical Corps, from 10-5-15 to 13-5-17.

Transferred & served in Middle East

W. J. Coleman Major

for Director of Personal Services.

M. F. W. 2618a

10M.—3-20
1772-39-1428

Reg

FORM P. 15. 12519—16M—1-3-18 H.W.V.Ld.—3717-18.

ASSIGNED PAY. 6/19

UNIT. NAME OF

RATE OF P. AND A.

RANK. DATE AUTHORITY

NAME.

Beneficiary

Address

Amount. $ 100 Can 1/12/18 Leave

Separation Allowance issued. Yes or No. 40 Eng.

Pay 4

F.A. 1

Messing 1

Capt

Retires from Ont Bty of 6 in Br. Sales 31.5.19

Ltr. 1a, 8-W-664 d/26/19

Name White

Initials J H.

Bank of Montreal

Traf Sq V

DATE 1919	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
Apl	Apl Pay R.		180					
14	a P Can				100			
23	Bank	776		80				
May 7	Sub. 1-30 4/19	1649					12-6-7	
	May Pay R		186					
13	a P Can				100		Fra 1/- cease Effec 16/19	
21	Bank	2513		86			Fr 1 to L & E Ledger.	
June 7	Sub. 1-31 3/19 - 1-31 5/19	3024					25.9.6	
							Fr L 3 to L 12 12/19	

N. S. G. Clearance Certificate issued 27/6/19 - A/c clear

FORM P. 15.
12519—16M—1-3-18 H.W.V.Ld.—3717-18.

ASSIGNED PAY.

UNIT. NAME OF

RATE OF P. AND A.

RANK.

DATE AUTHORITY

NAME.

Beneficiary

Address

Amount. $

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

Pay

F.A.

Messing

Name

Initials

Bank

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

FORM P. 15. 12519—16M—1-3-18 H.W.V.Ld.—3717-18.

ASSIGNED PAY. | **UNIT.** NAME OF | RATE OF P. AND A. | **RANK.** | DATE | AUTHORITY | **NAME.**

Beneficiary — D766.R.6.H. Taplow. — Pay #3 — Captain. — 14/6/17 — 19.6.1145 d/20/6/17 — Name White

Address — attach no 1 Ext Card — F.A. 14 ~~25~~ — Initials J. H.

1000 1/7/18 — Messing #1 — Bank Montreal Trafalgar Square Br.

Amount. $ ~~XXX~~ England. — Add Outfit allce 1/8/18 — 75 7/18 Dr — Eff 1/7/18

Separation Allowance issued. Yes ~~or No.~~ England #4.a — not on Rec. Fyle.

DATE	PARTICULARS		CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
1918:									
April 15	A.P. England.				115.				
" 17.	April Pay R.			142 50					
" 24		Bank.	1186		27 50		0		
May 2	Travalloc 9-10 4/18		1521					1.2.6	547
" 11	A.P. England.				115				
" 14	May Pay R.			147 25					
" 24		Bank.	2612.		132 25		0		
June 10	June Pay R.			142 50					
" 11.	A.P. England.				115				
" 24		Bank.	4139		27 50				
July 12	A.P. Eng.				100.				
15	July Pay R			147 25					
26		Bank	5608		47 25		0		
31	Subs 11-31 7/18		4993					6-9-5	31 50
Aug 1	Adj of Pay fr 1/8 to 21/8 Vc 8671.			61					
		Bank	6103.		61.				
" 14	A.P. England.				100				
	Aug Pay R.			178 25					
22		Bank	7122		78 25		0		
Sep 3	Subs 1-31 8/18		6471					9-11-1	46 50
" 9	Sept Pay			172 50					
" 11	A.P. England				100.				
" 20	Cloth iss on Rep. 12 9/18 (71 10) fst 17 8 Sept Vc 2931				6 81.				
" 23		Bank.	8930		65 69		0		
Oct 1	Subs 1-30 9/18		7845					9-4-11	45 00

Carry Forw

FORM P. 15. 12519—16M—1-3-18 H.W.V.Ld.—3717-18.

ASSIGNED PAY. | **UNIT.** NAME OF | RATE OF P. AND A. | **RANK.** | DATE | AUTHORITY | **NAME.**

Beneficiary — att: H.Q. Hal. — Pay 4.00 — Captain — 14/6/17 — Name H White

Address — C.A.P.C. — F.A. 1.~~75~~ — Initials J. H.

Messing 1.00 — Bank of Montreal. Trafalgar Square.

Amount. $100 ~~England~~ Canada 17/14 England

Separation Allowance issued. Yes ~~or No~~ H.O

Add Outfit allce 1/8/18

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
1918								
Oct	Brought forward			081				
10	Oct Pay		148 25					
" 14	A.P. England.			100.				
" "	Bank R	10667		78 25				
31	add. outfit allce 1/8/18		100					
	Bank	10997		100.				
Nov 16	Nov Pay R		192 50					
"	A P England			100				
18	add Nov Pay.	Bank	11870	92 50				
Dec	Dec. Pay R.		186					
13	A P Can				100			
14		Bank R	13485	86				
Jan	Jan Pay R.		186					
17	A P Can				100			
24		Bank R	15449	86				
29	Sub. 1.10 31/12/18		120 33				28-7-1 138.00	
Feb 7	Subs 1-31/1/19		123 73				9-11-1 46.50	
13	A P Can				100			
	Feb Pay R.		168					
21		Bank R	16751	68				
28	Sub 1-31/1/19 Despatch		131 18				3-3-8 15.50	
	1-28/2/19		131 17				11-10-2 56.00	
Mar	Mar Pay R.		186					
17	A P Can.				100			
21		Bank R	18388	86				

Date of Enlistment Not given.

1st Dec. 1918

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

W13361

Date of Assignment

1st Dec. 1918

RATE OF SEPARATION ALLOWANCE

40.00			

RATE OF ASSIGNMENT

100.00			

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion C. A. M. C. Reinf.

Beneficiary Mrs. J. E. White.

Relationship Wife.

Address Bank of Ottawa, Peterborough, Ont.

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1 MRS.J.E.WHITE,

2 BANK OF OTTAWA,

PETERBOROUGH,ONT. 100 40 140.00

3 % CAPT J.H.WHITE

ONE HUNDRED & FORTY DOLLARS

4

Date 1918		Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
							F-019257-J-17 M. Roll $ 00
Dec.	O	17714	40	100	140		x Mtd 9129 Remd to adj. Savgs for Dec. Ks 21/12/18 Mtd 23/12/18
Jan. 1919	N	74961	40	100	140	✓	
Feb	V	79986	40	100	140	✓	
Mar	N	89938	40	100	140	✓	
April	V.	1942	40	100	140	✓	
May	J	7890	40	100	140	✓	
June	W	10459	40		40		
"	V	H6526	40		40		

Suspend A.P 1/6/19. per P.A.B. ruling. 11/6/19. (pending investigation).

(X) M.R.O.L.P. 111721 Alteration A.P.M. 11/6/19

Suspnd. s/a per P.A.B. 16/6/19 MEC 16/6/19

M.R.O. Susp. L.P. 96276 16/6/19 Can 2nd 16/6/19

N. 10459 Can 17/6/19. Mtd 48 42. 21/6/19 Mtd. 19/6/19

V 11654 Mtd L H 4847. 21/6/19. Can 21/6/19

Retired in England per Cable 24/6/19 MEC 30/6/19

M.R.O. Des L.P. 102150 30/6/19 (A)

A/c Closed

Ret'd per Megantic

Date 26/10/19. M.F.W.187 31/10/19

Clerk W.H

M. D # (N.S.).

AUTHORITY FOR NEW ACCT. Cable M.O. P 3993 6-12-18. M. Holleran 20.12.18

M. F. W. 128
400m.—6-17—172-39-1141
L. L. 22320—M. & D. 7493.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 1493.

(11) If your Mother is a Widow.....

Are you her sole support or not....No.....

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

.....Not applicable.....

.....

(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.

.....Not applicable.....

.....

.....

(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.

.....Yes.....

(15) Are you insured?..Yes.....

If so, in what Company?.Various.....

Have you made arrangements for payment of your Insurance premium.

.....Yes.....

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

D.R. Fletcher Lieut ASST. ADJUTANT,
FOR O.C., C.A.M.C. DEPOT.

.....
Officer Commanding

Date. June 14th. 1917....

M.F.W. 67.

Table made out in duplicate H.Q.54-21-23-52

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

(1) Name of Overseas Unit which soldier joins.....
.....CANADIAN ARMY MEDICAL CORPS.....
(2) Regimental number.....Captain.....
(3) Full name of Soldier...WHITE, John Harold.....
.....
(4) Place of birth..Iroquois, Ont. Canada.....
.....
(5) Are you married, or not?....~~Xxx~~ Married.....
(6) If married, state,
(a) Full name of your wife.....
...Jeannette Elizabeth White.....
(b) Present postal address.....
.c/o Bank of Montreal, Waterloo Place, London S.W.
(7) Are you a widower?...No.....
(8) Have you any children?.Yes.....
If so give number of boys and girls...1.Girl.....
Also their names and ages.....
..Grace Helen White.....Age 5 yrs. 6 Mos.....
.....
.....
.....
(9) Is your Father alive?...No.....
If so, state name and address.....
.....
(10) Is your Mother alive?..Yes...Mrs. Susan H. White.....
If so, state name and address.113 Bloor St. West.....
.....Toronto Ont. Canada.....

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 CAPTAIN Surname WHITE

(Given name in full) JOHN HAROLD

Unit or Corps Can C. Birthplace Iroquois Ontario

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

1. GENERAL DESCRIPTION:

Physique good Weight 160 lbs. Height 5 ft. 7 in. Colour of Eyes Grey

Nutrition good

Pulse 76

Condition of arteries good

Vision Rt. 6/6 Left 6/6 c glasses

Hearing (conversational voice) Rt. 25 ft.

Left 25 ft.

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

Scar. appendicitis operation
right iliac regions
Scar forehead right
Scar Thenar eminence left

Opinion as to general health and physical condition Fit

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 Nil Genito Urinary System Nil Cardio-Vascular System Nil

Special Senses Nil Integumentary System Nil Respiratory System Nil

Disturbance of Mentality Nil Muscular System Nil Digestive System Nil

Osseous and Joint System Yes Any other general condition Yes

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.

Contracted Sciatica while serving with Can C. in Dardanelles. Nov. 1915. Recurrence winter 1916 - 1917 while still in Can C. Recurrence autumn 1918 while in C. Can C. due to exposure while driving in motor car resulting sick in quarters. At present no disability.
Contracted Flat foot right while training in Can C. Has since worn instep support. No disability while wearing support.

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

[OVER]

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at 13 Berners St London W1 (Overseas)

Date 17.3.19 Signed Duncan Campbell M.O.
Capt Canada

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 J H White

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

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 a Medical Board.)

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

MEDICAL HISTORY SHEET.

Surname W.H I T E *Christian Name* John Harold

Examined { on 14th. day of June 1917
at Westenhanger, Kent

Birthplace { City or Town Iroquois
County Ont. Canada

Apparent age 38 Years

Trade or occupation Physician & Surgeon

Height 5 Feet 7 Inches.

Weight 176 Lbs.

Chest measurement { Minimum 35 inches.
Maximum expansion 38 inches.

Physical development Good

Small-Pox Marks No

Vaccination Marks { Arm ~~Right.~~ Left.
Number 2

When Vaccinated last 4½ years ago

(*a*) Marks indicating congenital peculiarities or previous disease Scar following appendectomy

(*b*) Slight defects but not sufficient to cause rejection No.

Approved by W. M. Robb

Rank Capt. M.O.

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

Date	Result	Vaccinations.
14/6/17		Wm Robb M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
14/6/17	TAB	Wm Robb M.O.
		M.O.
		M.O.

Enlisted on *day of* 191 *at*

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	C.A.M.C.	Captain		
Transferred to..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

N. B —This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective ; the date and cause being stated on next page.

M. F. B. 313.
100M.—1-15.
H. Q. 1772-39-439.

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

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

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps C.A.M.C. Regimental Number Captain

Rank Captain Surname WHITE Christian Name John Harold

Religion C of E Age on Enlistment 38 years ____ months.

Enlisted (a) 14-5-17 Terms of Service (a) D of W Service reckons from (a) 14-5-17

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

Extended ____ Re-engaged ____ Qualification (b) Physician

or Corps Trade and Rate ____

Signature of Officer i/c Records.

Report: 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
		APPOINTMENT IN ENGLAND. Embarked ... Disembarked ...			
16-6-17	CAMC Depot	Taken on strength	Westenhanger ~~Hospital~~	14-5-17	P2-167
17.6.17.	C.C.S. Ch.D.	Posted to A.D.M.S. London Area.	Westenhanger	16.6.17	Pt II DO. 168.
			DR Herbert Lieut		ASST. ADJUTANT FOR O.C., C.A.M.C. DEPOT
6-1-17.	A.D.M.S.-L.G.	Posted from C.A.M.C. Depot to D. of C. Con. Red x Hpl. Taplow	13 Berners St. London W.1	18-6-17.	A.D.M.S.-R.O. 1422/30-6-17.
186-17.	A.D.M.S.	Taken on Strength D of C. C. R. x Hosp.	Taplow Bucks.	18-6-17.	P.2. D.O. 163 19-6-17

(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.

(B99130) W 15012—5156 J. P. & Co., Ltd. Forms/B103/3.

[P.T.O.

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				
21-2-18	66 Div of 66 Mil Hosp.	On command to Liverpool as Conducting Officer	Taplow Bucks	21-2-18	P 2 W O 45 21-2-18.
22-2-18	66 Div of 66 Mil Hosp.	Off Command from Liverpool as Conducting Offr	Taplow Bucks	22-2-18	P 2 W O. 47 23-2-18
9-4-18	66 Div of 66 Mil Hosp.	On Command to Devonport Duty. RW.66/17928 + 31 RW.66/17927+32	Taplow Bucks	9-4-18	P 2 W O. 84 9-4-18
11-4-18	66 Div of 66 Mil. Hosp.	Off Command from Devonport. duty	Taplow Bucks	11-4-18	P 2 W O. 86 11-4-18
9-7-18.	A D M S L.A. Ltr. LA 100-20-27	On Command to A D M S Cans. L A (Duty)	Taplow Bucks	11-7-18	P 2 W O 163 11-7-18.
25-7-18.	A D M S Ltr. A M D 10/4-20-188	Struck off strength No. 15 Can. Gen. Depot C. R. L. Hosp. Posted to Branch of A.D.M.S Cans. L A.	Taplow Bucks	18.7.18	P 2 W O. 177 27-7-18 Captain, C.A.M.C.
31-7-18.	No. 15 C.G.H., Taplow.	T.O.S. Branch of A.D.M.S. Canadians, London Area, on ceasing to be attached.	London.	18-7-18.	Part II Daily Order No. 150 of 26-7-18.
7-8-18.	A.D.M.S. L.A.	Detailed for duty at the Canadian Pay Office, London.	London.	18-7-18.	Part II D.O. No. 157 of 3-8-18. T.M. Knight Capt & Adjt