REGIMENTAL DOCUMENTS

NAME BUTLER JOSEPH ROGER Sgt REGT. NO. 931570 UNIT 2nd Con. Bn H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)	8m 15/8/19.				DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)				55017	Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	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)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob'n.
2	MEDICAL EXAMINATION (M.F.W. 129)					
1	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
1	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	C.A.D.C 5009					
1	B.P.C. 167					
1	M.F.W. 192					
4	— 67					
4	P122					

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

ORIGINAL 931570

ATTESTATION PAPER.

No. 931570

No. 2 CONSTRUCTION, B'n. C.E.F.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Butler
1a. What are your Christian names?	Joseph Roger
1b. What is your present address?	351 – 11th Ave Calgary Alta
2. In what Town, Township or Parish, and in what Country were you born?	New York USA.
3. What is the name of your next-of kin?	Mary Butler
4. What is the address of your next-of-kin?	351 – 11th Ave. Calgary Alta
4a. What is the relationship of your next-of-kin?	Wife
5. What is the date of your birth?	Nov 22nd 1879
6. What is your Trade or Calling?	Baker
7. Are you married?	Yes
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9. Do you now belong to the Active Militia?	no
10. Have you ever served in any Military Force? If so, state particulars of former Service.	Yes. 3 years 9th Cavalry USA. 4 years in 25th Infl. USA.
11. Do you understand the nature and terms of your engagement?	Yes.
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?	Yes.

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Joseph Roger Butler, 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.

J R Butler (Signature of Recruit)

Date Sept 17th 1916. W R Reeves Captain (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Joseph Roger Butler, 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 R Butler (Signature of Recruit)

Date Sept 17 1916. W R Reeves (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 Edmonton this 17th day of Sept. 1916

O J Cooper (Signature of Justice)

M. F. W. 23.
600M.—2-16.
H. Q. 1772-39 841.

Description of Joseph Roger Butler on Enlistment.

Apparent Age 36 years 11 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 6 ft. 0 ins.

Chest measurement { Girth when fully expanded ..... 36 ins.
Range of expansion ..... 2½ ins.

Complexion Colored

Eyes Brown R.D.=20 L.D.=20

Hair Black

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

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

None

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 Oct 2 1916

Place Edmonton

H. Collins
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.

Joseph Roger Butler having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

C. H. Reis Capt (Signature of Officer)

Date Oct 24 1916

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 931570 (Rank) Sergeant

Name (in full) Joseph Roger BUTLER enlisted in

the Second Construction Battalion

CANADIAN EXPEDITIONARY FORCE at Edmonton, Alta. on the Seventeenth

day of September 19 16

HE served in FRANCE

and is now discharged from the service by reason of Demobilization

R.O. 1420, 12-12-18

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

Age 39 Years 2 Months

Height 6 Feet

Complexion Brown

Eyes Brown

Hair Black

Marks or Scars

J R Butler
Signature of Soldier

N. E. White capt.
Issuing Officer

Rank

Officer i/c Discharge Section District Depot M. D. 13
Appointment

Date of Discharge Feb. 21st, 1919.

Signed at Calgary, Alta. this Twenty First day of February 1919

in Military District No. 13

File Reference No. 13-D-B-415

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

M. F. W. 39a
200m.—2-18
H.Q. 1772-39-882

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. ..... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

.....

Medals and Decorations .....

.....

Remarks .....

.....

Signed at ..... this ..... day of 19

.....

Name of Officer

.....

Rank

.....

Appointment

Duplicate will not be completed.
This certificate will be produced by the person named therein on demand at the Militia Office or at any Recruiting Office.

SURNAME. Butler,

CHRISTIAN NAMES Joseph Roger.

REGL. NO. 931570. RANK Pte.

UNIT No. 2. Construction. Bn.

FORMER CORPS 9th. Cavalry. U.S.A. Regt. 25th Bn. Hy.

CARD NO.

S.O. 2. Dis. Demob
FOLL. 21/2/19.
D.O.S. 2 21/2/19.
20.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Butler, Mrs. Mary.

RELATIONSHIP TO SOLDIER Wife.

ADDRI Junkins, Alta. A.M.S.
A.Q.C. 593-1-12. 4-4-14.

COUNTRY OF BIRTH U.S.A. New York. N.Y. DATE Nov. 22nd. 1879.

PLACE OF ATTESTATION Edmonton, Alta. DATE Sept. 17th. 1914

9/S 28.3.17

R/C 17-1-19 254/174

L. L. 6045. M. & D. 6904.

M. F. W. 22. 100M.—8 1[illegible]. H. Q. 177-39-338.

From Halifax per S.S. "Scottsland" 28-3-17.

MARRIED Yes. SINGLE WIDOWER

TRADE OR CALLING Baker. RELIGION Roman Catholic.

DESCRIPTION.

APPARENT AGE 36. YEARS 11. MONTHS

HEIGHT 6. FEET 0. INCHES

CHEST MEASUREMENT 36. INCHES EXPANSION 2½. INCHES

COMPLEXION Coloured. EYES Brown. HAIR Black.

DISTINGUISHING MARKS Nil.

MEDICAL EXAMINATION. PLACE Edmonton, Alta. DATE Oct. 2nd 1916.

Present Address 351. 14th. Ave. Calgary. Alta.

No. 931570 RANK Pte. NAME Butler Joseph Roger

T.O.S. 17-10-16 UNIT No 2. Construction Battalion.

D.D. 51 14-10-16

M.D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Oct. 17.	Oct. 31.	✓		
	Nov.	✓		
	Dec.	✓		
1917	Jan. 1917	✓		
	Feb.	✓		
	Mar	✓	Prom. Lce Cpl. 17-9-16	D.O. 61 12-3-17

Number 931570 Rank Sgt.

Surname BUTLER

Christian Name Joseph Roger.

Units C.O.R.C.C. Theatre of War France

Date of Service 17-5-17

Remarks

Latest Address not available

Roll No. A.I.F. Sqn. 2/4 [illegible]

200m.-6-21.

Date.	Remarks.	Pt. 2 Order No.

M.F.W. 192
150M—6-18.
1772-39-1243.

LOCAL CARD

*Name BUTLER. Joseph R. Rank Sgt. Regtl. No 931510

Fyle Depot 13.D.B-415

Original unit 2nd Con. Present unit 2nd Con. M. or S. M Age 38 Religion R.C. Ref. H.Q.

Port, ship, and date of arrival Halifax. Olymoic. 17-1-19.

Next of kin Mary. Butler. Wife. Dunkin. Alta.

Address on leave Same.

Address on discharge Gen Del EdmontonAlta

Transportation issued Yes / No Date Character on discharge

Previous occupation Chef. Date and place of enlistment 13-8-16. Edm.

Diagnosis Fit Date of Medical Boards 8-2-19

Date T.O.S	Remarks	Pt. 2 Order No.
10-1-19.	Posted to Cas Co Ed. 23-1-19.	24
	Granted leave with subsistence to 6-2-19.	24
21-2-19	Discharged from H.M. Service	52

*—Name will be given in full; surname first.

(over)

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

M. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

~~Unit~~, Regiment or Corps No. 2 CONSTRUCTION, Bn. C.E.F.

9315-70

Regimental No. 93570 Rank Pte Name Joseph Roger Butler

C. E. F.

Enlisted (a) 17-9-16 Terms of Service (a) Duration & 6 Months Service reckons from (a) 17-9-16

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)

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Embarked, Canada	Halifax, N.S	25/3/17	
		Disembarked, England	Liverpool	8/4/17	
12/5/17	6 JUN 1917 CAN. RECORDS LONDON	Proceeded Overseas	Seaford	12/5/17	Pte 2 Qtr Master Capt for Capt & Adjt
	O62nd Coast Bn				
		Landed fn France 17-5-17 N.R.			
17/5/17	OC	appd a/Sgt Work Day Dd.		19/7/17	N/R. K.G. 16/25295 P27/135 d/= 30/10/17
5-1-18	OC	on command to 1 Dist C.T.C Almon		30/12/17	B213
7-9-18	do	Confirmed in rank of Sgt	Dued	19-7-17	B213 for 30-12-18

(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) 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				
5.10.18.	Hqs No 1 Fort 36	Granted 10 days leave ex	France.	27.9.18	B213 & 57 7 Oct 1918.
12.10.18	Do	Repat from Leave	Essex.	8.10.18	B213
11 12/18	Adjt	Leave to Eng Posted to N.S Reg Depot	Bramshott	14 12/18	A2344 & A.R. C.A. Hewett Lieut. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.
17.12.18	N.S.R.D.	T.O.S. and attd to 2nd C.B.D. for Rats & Rations	Bramshott	14.12.18	D.O.305
	N.S.R.D.	ON COMMAND TO 6 D.D. Kinmel Pk Rhyl	BRAMSHOTT		PART II D.O. N.S.R.D. 313 27/12/18
					C.A. Knight LIEUT, OFFICER i/c RECORDS, NOVA SCOTIA REGTL. DEPOT.
27-12-18	D.C. Coy.	T.O.S. att from C.B.D	K.P.C	27-12-18	P.C. 11
8-1-19	✓	Tfrd to C.E.F. Canada	✓	8-1-19	P.C. 7 A.C.M. Kenna Lt for OC

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-9-20.

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

Casualty Form—Active Service.

Unit, Regiment or Corps ....C. E. F.....

Regimental No. 031570 Rank Pte. Name Butler Joseph Roger

Enlisted (a) 17-9-16 Terms of Service (a) Dur. of War Service reckons from (a) 17-9-16

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) .....

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				
10-7-19		TAKEN ON STRENGTH OF DISTRICT DEPOT 13. PART 2 ORDER NO. 24 W. Williamson Lieut. Col, Officer Commanding District Depot No, 13			
21-2-19		DISCHARGED FROM THE SERVICE BY DISTRICT DEPOT NO. 13. PART 2 ORDER NO. D.O. 52 AUTHORITY R.O. 1420 Dated Ottawa 12-12-18 W. Williamson Lieut. Col. Officer Commanding District Depot No. 13			

(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				

C.A.D.C. 5009 A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) Buttler. J. R.

REGIMENT 2 Construction RANK Sgt. No. 931670

Date of Examination in England 25-12-15. Date of Examination in France

DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.

PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower 17, 18, 19, 21, 27, 28,

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 yes

KINMEL PARK, NORTH WALES.

Signature of Dental Officer W. Kennedy Capt

DUPLICATE

To be made out in duplicate.

I.Q., 51-21-20-53

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

INSTRUCTIONS.

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

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

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

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

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

---

(1) Name of Overseas Unit which Soldier joins No. 2 CONSTRUCTION, [illegible]

(2) Regimental Number 931570

(3) Full Name of Soldier Joseph Roger Butler.

(4) Place of Birth New York U.S.A.

(5) Are you married, or not? Married

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

(b) Present Postal Address 357 N. 11th St. Calgary, Alta.

(7) Are you a widower?

(8) Have you any children? Yes (3)

If so, give number of boys and girls ~~Boy 13~~ Two girls, one boy

Also their names and ages May 13
Ora 9
Roger 12

M. F. W. 67.

300M.—5-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ? No

If so, state name and address —

(10) Is your Mother alive ? No

If so, state name and address —

(11) If your Mother is a widow —

Are you her sole support, or not ? —

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

—

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

—

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

Yes

(15) Are you insured ? —

If so, in what Company ? —

Have you made arrangements for payment of your Insurance premium —

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

J. S. Lavoie Capt. for Lieut-Col.
No. 2 Construction Batt'n. C. E. F.
Officer Commanding.

No. 2 CONSTRUCTION BATTALION C.E.F. ORDERLY ROOM

Date MAR 17 1917

*PARTICULARS MARKED THUS TO BE OBTAINED FROM SOLDIER AND CHECKED FROM DOCUMENTS.

CONFIDENTIAL INFORMATION

CATEGORY

No. of Local File	No. of M. H. C. File	No. of R. C. V. P. No.

Unit

Surname
Permanent Address

Christian Name

M.D. No.

No.* Rank
Age* Height ft. ins. Complexion Original Unit
Date of enlistment Where enlisted
Ship returned by Date of arrival
Birthplace* Religion
Present disease or disability

Eyes Hair Service Unit* Conduct
Where been service*
Port of arrival
Cause of origin

Condition in detail which prevents the soldier from earning a full livelihood

Degree of Incapacity—Emp. Board. Canadian Board
Is disability due to or aggravated by Service?
Probable duration of incapacity
Does it render him unfit for Military Service?
Is further treatment or use of appliances recommended, if so, which?
Destination to which transportation issued
Members of Board
Place Date 19

Discharge, no pensionable disability.
Retiring Reclassification.
Discharge with claim for pension.

INFORMATION TO BE FURNISHED BY SOLDIER

DEPENDENTS	NAME	AGE	WHERE EMPLOYED	WAGES	STATE OF HEALTH
Wife					
Children 1					
2					
3					
4					
5					

Name and address next of kin
Notification of return to be sent to
Occupation prior to enlistment
Regular trade or occupation
Do you consider that your disability will prevent you from following your previous occupation.
Average earnings previous to enlistment
Name and address of last employer
Rent per month If owner of or purchasing property, amount due and annual payment $
Taxes If Homestead or Farm, where located
If carrying life or accident insurance, annual premium $ Name of Society
If work should not be available at old occupation, name preference.
I declare that the above statement is correct.
References
Witness
Date Place Signature

Remarks by Interviewer:

Last Pay Cert., Cr., $ Dr., $ Amount paid at Depot H.Q., $ L.P.C. leaving Depot, $
Amount forwarded to H.Q. Unit, $ Credit Clothing allowances, $
PENSION—Class Amount per year, $ Period granted for Dating from
Part paid to
Form I.S.C. No. 52.

A. Casual Service.
B. Service abroad, not at front.
C. Service in Canada
D. Treatment

*PARTICULARS MARKED THUS TO BE OBTAINED FROM SOLDIER AND CHECKED FROM DOCUMENTS.

CONFIDENTIAL INFORMATION

TO.

CATEGORY

Report No. 6942	Butler (Surname)	Joseph R. (Christian Name)	No. of M. H. C. File	No. of Local File	No. of H. Q. File
Unit Thirteen	Permanent Address C.P.O. Calgary	Alta.			
M.D. No.					

No.* 931570 Rank Sgt. Original Unit 2nd C. Service Unit* 2 C

Age* 38 Height ft. ins. Complexion Eyes Hair Conduct

Date of enlistment 13-9-16 Where enlisted Edmonton Where seen service* France.

Ship returned by Olympic Date of arrival 17-1-19 Port of arrival Halifax.

Birthplace* U.S.A. Religion R. C.

Present disease or disability — Cause or origin

For Demob Cat "A"

Condition in detail which prevents the soldier from earning a full livelihood

649-B-20624

E. 1. Discharge, no pensionable disability.
E. 2. Waiting Reclassification.
E. 3. Discharge with claim for pension.

Degree of Incapacity—Eng. Board. Canadian Board

Is disability due to or aggravated by Service?

Probable duration of incapacity

Does it render him unfit for Military Service?

Is further treatment or use of appliances recommended, if so, which?

Destination to which transportation issued Proceeded to Military District Thirteen.

Members of Board

Place Date 19

INFORMATION TO BE FURNISHED BY SOLDIER

DEPENDENTS	NAME	AGE	WHERE—IF EMPLOYED	WAGES	STATE OF HEALTH
Wife	Mary	19			
Children 1					
2					
3					
4					
5					

Name and address next of kin Wife - Mary - Junken Alta.

Notification of return to be sent to ...

Occupation prior to enlistment Chef And for how long followed 2½ yrs.

Regular trade or occupation -do-

Do you consider that your disability will prevent you from following your previous occupation. no.

Average earnings previous to enlistment $100.00 per wk. Any other income

Name and address of last employer G.T.P. Ry.

Rent per month If owner of or purchasing property, amount due and annual payment $ $

Taxes If Homestead or Farm, where located

If carrying life or accident insurance, annual premium $ Name of Society

If work should not be available at old occupation, name preference.

I declare that the above statement is correct.

References Last Emp.

Witness A.M. McGillicuddy

Date 19-1-19 Place Quebec, Que. Signature J. R. Butler

Remarks by Interviewer :

Last Pay Cert. Cr., $ Dr., $ Amount paid at Depot H.Q., $ L.P.C. leaving Depot, $

Amount forwarded to H.Q. Unit, $ Credit Clothing allowances, $

PENSION—Class..... Amount per year, $..... Period granted for..... Dating from.....

First payment date.....

Form I.S.C. No. 5c.

A. General Service. B. Service abroad, not general. C. Service in Canada. D. Treatment.

D.M.S. 1375.

Medical Examination upon leaving the Service

of an Officer fit for general service or a Soldier fit for duty.

☛ *Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.*

Rank Sgt. Name Butler Surname J.R.

Unit or Corps 2 C.G.G.A. (If a soldier) Regtl. No. 931570

Born at New York City on, date Nov 22. 1888.

Signature (for identification) J.R. Butler

The examination is to be made jointly by two Medical Officers.

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe. no

Weight 175 lbs.

Height 6 ft. — ins.

2. NUTRITION AND DIATHESIS? Good

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. NERVOUS SYSTEM? normal

4. RESPIRATORY SYSTEM. normal

5. HEART? normal

Abnormal Sounds? no

Abnormal Size? no

Pulse Rate? 80 Intermittence or irregularity? no

6. ARTERIES.—Any hardening? Good

7. DIGESTIVE SYSTEM? normal

8. GENITO-URINARY SYSTEM? normal

Urinalysis—S.G.? 1024 Reaction? Acid Albumen? nil Sugar? nil

9. SKIN, MIDDLE EAR, EYE or any other part? normal

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe. no

11. Opinion as to the health and physical condition of the one examined? Good

Examined at Kinmel Park Camp Signed [illegible] M.O.

Date Jan 2/19 Signed [illegible] M.O

☛ *If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.*

ORIGINAL

931570

MEDICAL HISTORY SHEET.

Surname Butler Christian Name Joseph Rogers.

Examined { on 17th day of Sept 1916
at Edmonton

Birthplace { City or Town New York
County U.S.A.

Apparent age 36 yrs 11 mos

Trade or occupation Baker

Height 6 Feet 0 Inches.

Weight ..... Lbs.

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

Physical development .....

Small-Pox Marks .....

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

When Vaccinated last .....

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

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

Approved by H. A. Collins

Rank Capt. M.O.

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

Date.	Result.	Vaccinations.
17/2/17		S. S. Sleeth M.O.
16/3/17		Dan Murray M.O.
		..... M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
16/3/17	1st	Dan Murray M.O.
3/4/17	2nd	Dan Murray M.O.
4/4/17	3rd	Dan Murray M.O.

Enlisted on 17 day of September 1916 at Edmonton Alta

Joined on enlistment	Corps.	Regt'l Number.	Habits.	Date.
	11th Can't Bn 6E1	931570		17/9/16
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Windsor, Ont.	FEB 5 • 1917	on enlistment	Fit
	S. C. Tuell Major, A.M.S.	A. Bruce Taylor Major C.A.M.S.	Rosser Lowe Capt.
Edmonton. Alta.	8/2/19.	M. F. W. 129.	H. L. McInnis CAPT. C. A. M. C.

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.

400M.—1-16.
H. Q. 1772-39-439.

Surname Butler Christian Name Joseph Roger

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

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at.....(Overseas)

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

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

Signature .....

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

THIS SECTION FOR USE IN CANADA—

Examined at Edmonton (Canada)

Date 8-2-19. Signed F. L. McInnis Capt. CAMC. M.O.

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

Signature .....

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

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

[OVER]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-39-1143.

ORIGINAL

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. 931570 Rank Sgt. Surname Butler.

(Give name in full)

Joseph Roger.

Unit or Corps 2nd Conc. Bn. Birthplace New York U.S.A.

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

1. **GENERAL DESCRIPTION:**

Physique Good Weight 175 lbs. Height 6 ft. 0 in. Colour of Eyes Blue.

Nutrition Good

Pulse 76

Condition of arteries Normal.

Vision Rt. 20/20 Left. 20/20

Hearing (conversational voice) Rt. 20 ft.

Left. 20 ft.

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

None.

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.**

Address; Gen. Del. Edmonton.

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

[OVER]

B 1481

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

OTTAWA, CANADA.

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

If the applicant will enquire at the local Branch of the Canadian Patriotic Fund he will be informed if there is an official who will take this Declaration free of charge.

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

On completion this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

1. Christian Names Joseph R. 2. Surname BUTLER
3. Rank Sgt 4. Original Unit No 2 Constra Bn 5. Reg. No. 931570
6. Address, in full, to which future payments of gratuity are to be forwarded General Delivery Edmonton Alberta
7. Date of enlistment in the C.E.F. 17/9/16 Edmd
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Mary Butler
9. Relationship of such dependent Wife
10. Address, in full, of such dependent Junkins Alberta
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? No
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:— No 2 Constra Bn 15/4/17 to 15/12/18
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? No
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service No
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served 2 Years 5 months Canada No 2 Constra Bn 17/9/16 England No 2 Constra Bn 15/3/17 to 15/4/17 France No 2 Constra Bn 15/4/17 to 15/12/18
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department No
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? No

M.F.W. 2595.
1772—39—1389.
1160—D.P.—250M-12-18.

MAR 5 1919

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

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid ... No ...

20. Have you been issued with a War Service Badge? If so, what class ? ... No ...

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

22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled ... No ...

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

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

24. Are you now serving in the C.E.F. ... No ... If not, give:—(a) Date of discharge 21-2-19 ... (b) Reason for discharge ... Demobilization ...

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit ... District Depot 13 ...

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit ... No 2 Constra Bn 15/4/17 to 15/12/18 ...

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? No

(b) If so, are you in receipt of full pay and allowances from that Department? No

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

Signature of Applicant: [signature]

Place of Residence: Edmonton · Alberta

Declared before me at: Edmonton

This Seventh day of February 1919.

~~Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace~~, or Commissioner for the Administration of Oaths. [signature]

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
	Nil.		150 00	
			150 00 S.A.	
			500 00	500 00

Certified Correct.

[signature] Capt.

District Paymaster.

DEMOBILIZATION
PAY DIVISION, M. D. No. 13

CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44.
1188 (D.P.) 250M.-12-18.
1772-89-903.

LAST PAY CERTIFICATE

Regimental No. 931570 Rank Sgt. Name BUTLER J.R.
(Surname first)

Unit 2nd. Con who was* discharged

On 21-2-19 191....., to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-1-19 to 21-2-19 191... the inclusive date of transfer or discharge.

	Dr.		Cr.	
Bal. Dr. or Cr. from prev. ~~month~~ Eng. LPC			1.75	.54
Regimental Pay 52 days at $1.35 c			.70	.20
Field Allowance 52 days at $ .15 c			7	.80
Separation Allowance 21 days Feb.			21	0.0
Clothing Allowance			35	0.0
Post Discharge Pay				
*Other Credits Sub DO 24 23-1 to 6-2-19 15 days @ 80¢			12	00
Advances Jan Pay List	100	00		
Separation Allowance and Assigned Pay Cheque No. A.3432	21	00		
*Other Charges A.P. Jan paid by Ottawa	15	00		
Balance on transfer or on discharge, cheque No. A.3431	185	54		
Total	321	54	321	54

*Give particulars.

A monthly stoppage of $ 15.00 (†) has ~~paid~~ chgd (‡) been on account of

Assigned Pay for the month of Jan 191...
and Separation Allce. for month of Feb 1-21 191...

(to) Assignee Mrs. M. Butler
Junkins, Alta.

(Address)

(†) Insert amount to be assigned, whether it has been paid or not. (‡) Insert "not" if amount has not been paid for period of account.

ON TRANSFER OF AN OFFICER.

Outfit Allowance of $.....has been paid by Paymaster, Military District No. .....

REMARKS:—

State (1) date of enlistment ..... married or single married

(2) Separation Allowance, entitled or not .....(3) Reason for discharge.....

(4) Authority for discharge or transfer DD 13

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer or soldier.

Date 21-2-19

Place Calgary

L G Jeddard
PAYMASTER— DEMOBILIZATION PAY DIVISION, M. D. 13 LIEUT.
Paymaster.

N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916.
(B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.
(C) For purpose of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. As payment of the balance will have been made, the words "on transfer or" will be deleted.
(D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificates will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.

LGW.

CREDITS, ADVANCES, Etc.

Credits, Advances, Forfeitures, Issues on Repayment, etc., since issue of this L.P.C. are to be entered hereunder:

Date	Place	Cheque No. A.R. No. or Other Particulars.	AMOUNT Dr.	AMOUNT Cr.	Signature of Officer Making Payment.
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....

Form R 122.
2353—100M—9-1 '-16

JM Rank Name BUTLER, Joseph Roger. Reg'l No. 931570

Unit No. 2 Const. Bn. If in perm. Corps, What Unit? } Married or Single Married.

Place and Date of Enlistment Edmonton. 17th Sept 1916. Place of Birth New York, U.S.A.

Name and Address, Next-of-Kin Mary Butler.
351 - 11th Ave., Calgary, Alta. Relationship Wife.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

N/E. R.B. No 5934
File R.L.
Category OR CAN

Discharge, Date and Place Reason Character

H. W. & V., Ld.—9546-16.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
		Arrived in England vis S.S. Southland		7.4.17	A.F.B. 103 CHECKED 28 MAY 1917 A.W.V.W.
14-6-17	#2 C.C.C.	Arrived in France	Field	17-5-17	— 115
20-10-17	"	Appid a/Sgt with pay	Pte	"	19.7.17 — 135
21.9.18.	..	Promoted Sergeant	A/Sgt	..	19.7.17. D052.
16-12-18	NSRD	TOS from 2nd C.C.Coy	—	Bshott	14.12.18 + 30 5 71 d/ 19-12-18. 2nd C.C.Coy
27.12.18	N.S.R.D	O/C to C.D.D Rhyl	—	—	27.12.18 - 313.
19 JAN. 1919	NSRD	SOS to CEF in CANADA	Pte	Bshott	9 JAN. 1919. PT2DO 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.					
					–	

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

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.				

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
50m.–6-16.
1772—39—818.

Sheet No. 2. Mary Dunbar Wife

Name of Soldier Dunbar Jas. R.
Pte

L. L. Job 4503.–Req. 6832.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.		7 24245	49	49
Dec.		V 27465	20	20
Jan.	1917	O 27783	20	20
Feb.		N 31539	20	20
March		N 34687	20	20
April		2 B. P 355	20	20 Junkins alta
May		03523	20	169 20
June		Q 7051	20	20
July		Q 9882	20	20
Aug.		S 13571	20	W
Sept.		R 17106	20	B
Oct.		Q 22952	20	T
Nov.				269
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

17-9-16

83

L. L. Job 4503.– M. & D. 6832.

MILITIA AND DEFENCE

M. F. W. 11.
50m.—6-16.
H. Q. 1774-39-813.

SEPARATION ALLOWANCE

Name Mary A Butler

Address ~~351 11th Ave E~~ Jenkins Alta. ~~Calgary~~ Alta

Relation to Soldier wife, child or mother } wife

Name of Soldier Butler Jos. K.

Regtl. No. 93157-6

Rank Pte

Corps #2. Con Bn

To what Corps belonging when called out } ✓ ✓

PAYMENTS

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

CONSOLIDATED 5 ACCOUNT

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.				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2 Mrs Mary Butler Wife (Assignee)

Name of Soldier Butler Joseph Roger

No 93157 Pte No 2 Coy 6th Bn

L. L. Job 5470—Req. 6888.

15 00 1917 April

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		Z 4714	15	
May		J 6981	15	15 W Junkins Alta 18/5/17 R.L.A
June		F 13753	15	15. S
July		W 23064	15	B
Aug.		Z 29655	15	Cu
Sept.		Z 36646	15	03
Oct.		I 48259	15	
Nov.				105
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

J&R

CANADIAN
ASSIGNED PAY AUDITED
A Blaop
AUDIT CLERK
DATE 23rd 19

L-L.Job 5470—M. & D. 6388

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

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

Wife

To Whom Mrs. Mary Butler

Address ~~351 11th Ave~~ Junkins Alta ~~Calgary~~ Alta

Rate 16 00

By Whom Assigned Butler Joseph Rogers

Regtl. No. 93150

Rank Pte

Corps No 2 Const Bn.

APR 1917

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				

CONSOLIDATED 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.—6.17—177-39-1141
L. L. 22320—M. & D. 1693.

Date of Enlistment

17-9-16

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

16597

Date of Assignment

9/s 1/17

RATE OF SEPARATION ALLOWANCE

~~20~~	25 1/12/17	30 00	

1.9.18
RG 37 B3
MO 40/161

B

RATE OF ASSIGNMENT

15			

PARTICULARS OF SEPARATION ALLOWANCE

No. 931570

Rank ~~Pte.~~ Promoted Sgt. Reverted Discharge

Soldier's Name Joseph Roger Butler

Battalion No 2 Const. Battn.

Beneficiary Mary Butler.

Relationship wife. M.F.W. 2554—26/1/18

Address MSW 2554 Removed 22/1/18 RR

PARTICULARS OF ASSIGNMENT

Name Mrs Mary Butler wife

Address Junkins Alta

Change of Address

1

2

3

4

Date	Cheque No.		Amount S/A	Amount A/P	Total		REMARKS
							02596-J-10.
Oct 31-17			269	105	374		
Nov	F	54406	20	15	35		
Dec	B	62623	20	15	35		
Jan-18	C	68607	30	15	45	X	
Feb	A	59252	47	15	62		M 79162 mailed 8-3-18
Mar	M	84411	25	15	40	✓	Ka# 3127 mailed 26-3-18
April	A	4121	25	15	40	X	
May	H	18488	25	15	40	G	
June	E	17816	25	15	40	G	
July	V	33447	25	15	40	✓	
Aug.	E	30296	25	15	40	✓	
Sept.	N	44581	25	15	40	✓	
Oct	F	48116	25	15	40	✓	
Nov	B	59625	25	15	40		
Dec	D	62161	45	15	60	✓	
1919 JAN.	A	75721	30	15	45	✓	
			696	330			

Promoted a/Sgt with pay 19/7/17. per opml. 20/10/17. pds. 19/11/18.

MRO 63014 -

CANADIAN
ASSIGNED PAY AUDITED
AUDIT CLERK
DATE 23/1/19

M.D. 13.

A/c Closed 31-1-19.

Ret'd per Olympic

Date 17/1/19 F.X. 24/1/19

Clerk W.H. Ferris

CONSOLIDATED ACCOUNT

M. F. W. 128
400M—6-17—1774-39-1141
L. L. 22320—M. & D. 1.93.

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ENGLAND OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1st August 1917.	EFFECTIVE DATE:-
AMOUNT:- ~~20.00~~ 15.00	AMOUNT:-

NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

Mrs Mary Butler wife
351- 11th ave Calgary alta
Stopt T.I.19

NAME:- Butler Jos Rogers.
NUMBER:- 931570.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
Do 135. 20/7/17	19.7.17	Sgt
Do. 52 (Lons) 21/9/18	19/7/17	Confirmed Rank of Sgt

UNIT AND TRANSFERS

ORIGINAL UNIT:- 2 Construction Bn
DATE ACCOUNT FIRST OPENED:- 1st April 1917

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			Canada

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
8/11	3096	Field 35 fr	~~6 50~~ ✓				
25/11	3303.	✓ 110 fr.	~~20 53~~ ✓				
9/12	6607.	✓ 40 fr.	~~7 16~~				
18/12	3565	B R & F. £2	~~9 73~~				
			44 25				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 35 - 15			

PARTICULARS OF RENDERING NON-EFFECTIVE:- Dis/Canada 31/12/18 (161.17/12) Led: Bal ~~£39 66~~ L/C Bal ~~£39 44~~

1918 MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
MAR	Bal Ford								164 07		
apl	Pay to	45 -		Ass Pay				20.			
				a/R 114 6/4 C7C201	24 09						
		~~45~~ -		a/R 296 20/4 -"-	6 25				158 73		
May	Sgt Pay	46 50		ass Pay	30 34			20 - 20 -			
				a/R 491 7/5 C7C1	6 25						
				✓ 719 22/5 -"-	~~4 16~~ 6 25 C				172 73		
		46 50			12 50			20 -			
June	Sgt Pay	45 -		ass Pay				15 - 50 - C			
	Cr Note 7430. obs. a/r. 02596 5-10. 23/5/18		52 00	Can a/r. o/kg. 19/7/17 to 31/5/18 a/R 906 7/6 CF6 1	6 25						
				✓ 1102 22/6 ✓	6 25				242 23		
		45	52		12 50			15			
July	Sgt's Pay	46 50		ass Pay				15			
				a/R 1292 6/7 CF6 1 ✓	6 25						
				a/R 1501 22/7 ✓	24 09				243 39		
		46 50			30 34			15			
Aug	Sgt Pay	46 50		Can a/r				15			
				a/R 1696 6/8 CF6 1	6 25						
				a/R 1941 22/8 ✓	6 25				262 39		~~4 00~~
		46 50			12 50			15			
Sep	S.P.	45 00		Can a/r.				15			
				a/R 2199 6/9 CF6 1	6 25						
				a/R. 2566 22/9 ✓	8 92						
				a/R 2740. 23/9 ✓	6 25						
				a/R 9161 28/9 Can Details Bn	44 61				226 36		
		45 00			66 03			15			

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1.	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									226 36		
Oct	Sgt Pay	46 50		Canada				15			
				AR9529 - Pass - 1-10-18	46 64						
				2677 6856*1 7/10	6 53						
				2929 ✓ 23/10	6 53				198 16		
NOV		46 50			59 70			15			
	Sgt ✓	45		Can				15			
				3096 ✓ 11/11	6 53						
Dec	✓ ✓	46 50		3303 ✓ 25/11	20 53						
				Can.	27 06			15	232 60		
		~~46 50~~		6607 10/12 Bee	7 46				215 41		
				3565 19/12 NSR	9 73				215 41	✓	
		91 50			44 25			30			

S O S Canada 9/1/19
B 16 9/1/19 NSR

CANADIAN
ASSIGNED PAY AUDITED
A. R. Smith
AUDIT CLERK
DATE 23/1/19

215.41
6.53
20.53
242.47

198.16
91.50
289.66
57.06
232.60

AUDITOR | PAYMASTER

M. OR S. ~~Single~~ married

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

REGT. No. 931570 RANK Sgt. NAME (IN FULL) BUTLER J.R.

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Yes — DATE EFFECTIVE 1-2-19

TO WHOM PAID Mrs Mary Butler — RELATIONSHIP Wife

ADDRESS Junkins Alta

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 2nd Bde. — IF IN P.F. WHAT UNIT? — (BLOCK LETTERS SURNAME FIRST)

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 15.00 — DATE EFFECTIVE 1-2-19

PAYABLE TO Mrs Mary Butler — RELATIONSHIP Wife — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Junkins Alta.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE CALGARY, ALTA. — DATE FEB 21 1919 — REASON — AUTHORITY — IF ENTITLED TO POST DISCHARGE PAY

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.	TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1	ACQUITTANCE ROLLS COL. NO. 1 DATE	ACQUITTANCE ROLLS COL. NO. 2	ACQUITTANCE ROLLS COL. NO. 2 DATE	ACQUITTANCE ROLLS COL. NO. 3	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.	TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																	C/ 215 41 Emg & P.C.
31/12/18							215	41	Boat	10/1/19	Train	16/1/19	Chq	16/1/19	4	87	5	00	30	00													
							215	41	Emp		Emp																		39	87			175	54	
1/1/19																																	
21/2/19	52	1.50	78	00	12	20	175	54				3/2/19	3/2/19				185	54	21	00			100	00					321	54					2/- 15.00 C.P. Paid by Ottawa Jan: 8 Gal 100.00 from 8th Jan 19
					32	00																	15	00									
					21	00																											8024 Subsistence 15 13.00 23/1/19 - 6/2/19
							146	00																									Clothing Allowance 33.00
	178	-	68	-	215	41	361	41							4	87	5	-	215	54	21	-		115	-				361	41					DISCHARGED FEB 21 1919
																																		By Headquarters

MONTH	PAY AND F.A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGIMENTAL CHARGES		OTHER CHARGES				TOTAL DEBITS		BALANCE				PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT								COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3												DEBIT		CREDIT		
			$	C.	$	C.	$	C.	$	C.	NO.	DATE	NO.	DATE	NO.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	