

ORIGINAL

Fourth M. D. First Depot Battalion 1st. Quebec Regiment

Regtl. No. 8080885

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

JAM

(Class First)

C Coy

- 1. Surname CLUNE
2. Christian name William Cornelius
3. Present address 142 Chateauguey St., Montreal, Que.
4. Military Service Act letter and number 53017 DR.
5. Date of birth August 28th 1896
6. Place of birth Montreal, Que.
7. Married, widower or single Single
8. Religion Roman Catholic
9. Trade or calling Electrician
10. Name of next-of-kin Michael Clune
11. Relationship of next-of-kin Father
12. Address of next-of-kin 142 Chateauguey St. Montreal, Que.
13. Whether at present a member of the Active Militia No
14. Particulars of previous military or naval service, if any No \*\*\*\*\*
15. Medical Examination under Military Service Act:—
(a) Place Montreal, Que. (b) Date January 5th 1918 (c) Category A

DECLARATION OF RECRUIT

I, William Cornelius CLUNE, do solemnly declare that the above particulars refer to me, and are true.

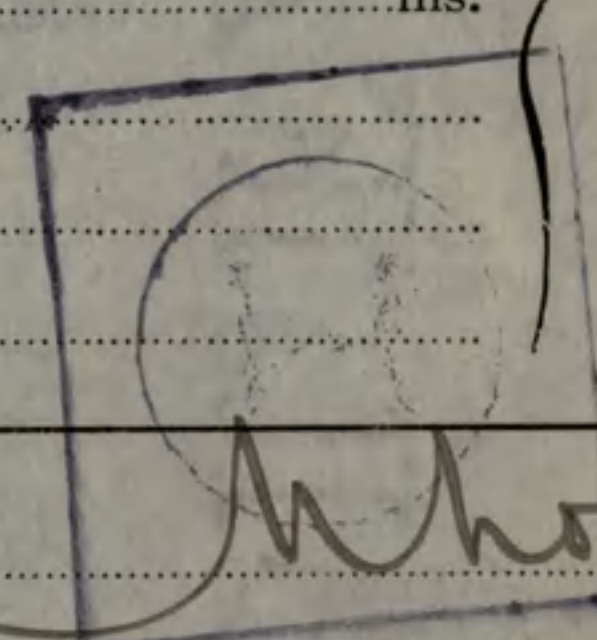
William C. Clune (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 21 yrs 5 mths
Height 5 ft 8 ins
Chest measurement fully expanded 32 1/2 ins
range of expansion 3 ins
Complexion Medium
Eyes Grey
Hair Dk. Brown--- mixed with grey

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

RD 20
LD 20
RG 20
LG 20



O. C. First Depot Btl. 1st. Quebec. Regt.

Place Montreal, Que. Date January 5th 1918.

649. 625170

2288

✓ #3080885, Pte. <sup>William</sup> W.C. CLUNE <sup>Smelies</sup>

✓ 14th Bn.

Name & Address of Legatee

*not elig. for 1914-1915 Star*

Medals & DECORATIONS

Mrs. Catherine Clune (M)

142 Chateauguay St.

Point St. Charles

Montreal, Que

Name & Address of Next of Kin

P.&S.

Michael Clune (F)

*As above*

*(Serial no. 765567)*

Name & Address of Female Next of Kin

Memorial Cross

Mrs. Catherine Clune (M)

840

*As above*

Res. APR 28 1920 65733

JAN 5 1921

Scroll Desp.-----

Reqn. No.-----

77813

DEC 21 1921

Plague Desp.-----

Reqn. No.-----

P 21633

W

William Cornelius

Name Glume

Rank Lie

Reg. No. 3080885

Unit 14<sup>th</sup> B<sup>n</sup>.

Next of Kin Michael Glume 142 Chateauguey St Montreal Quebec

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1	10	missing after action		A 350	H 416	4277
		Killed in action		A 355		26/10



6D <sup>10</sup>/<sub>18</sub>

SURNAME.

*Clune*

CARD NO.

4

CHRISTIAN NAMES

*William Cornelius*

FOLL.

REGL. No.

*3080885*

RANK

*Pte.*

UNIT

*1<sup>st</sup> Que. Regt. 1<sup>st</sup> Depo. Bn 5<sup>th</sup> R.I.O.*

FORMER CORPS

*Mil.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

*Clune, Michael*

RELATIONSHIP TO SOLDIER

*Father*

ADDRESS

*142 Chateauguay St.,  
Montreal, P.Q.*

COUNTRY OF BIRTH

*Canada*

*Montreal P.Q.*

DATE

*Aug. 25<sup>th</sup> - 1896*

PLACE OF ATTESTATION

*Montreal, P.Q.*

DATE

*Jan. 5<sup>th</sup> - 1918*

*1088  
1/3. 21-2-18. 3.*

*S.S. Sarnia fr. Halifax 18-2-18*





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

NAME

RANK AND CORPS

REGT'L. No.

H. Q. FILE No.

FOLLOWS

NO.

FOLLOWS

NO.

DATE

NATURE OF CASUALTY

No 1  
 24-8  
 H 416  
 H 431  
 15-6

Cluse  
 20/10/18  
 27-10-18

Cluse Michael (father) 142 Chateauguay<sup>St</sup>  
 Montreal. P. Q.  
 Rept miss Oct 1st/18.  
 After rept. miss. now. rept kind  
 Oct 1st/18.

3080885

14th Form 12-R-5th R

LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

U350

Rep. from Base

1-10-18

Miss

U355

Pw Rep Miss

1-10-18

Kina





105B

Number 3080885- Rank Plt

Surname CLUNE

Christian Name William Cornelius

Units 14th Canadian Theatre of War France

Date of Service 29-5-18.

Remarks (M) Mrs. Catherine Clune,

Latest Address 142 Chateauguay St,  
Point St. Charles,

Roll No. B. Page 2 1792. Montreal, Que.

200m.-6-21.M.

STATION ..... \* CROSS OUT CONDITION NOT APPLICABLE.

ADDRESS .....

CONDITIONS DIAGNOSED .....

(WHERE TO) .....

INVALID .....

IN CATEGORY .....

(WHERE FROM) .....

HOSPITAL AS AN ADMISSION .....

\* DUE TO SERVICE  
\* NOT DUE TO SERVICE

DATE AND PLACE OF ORIGIN .....

DESP. JAN 10 1923  
REGN. NO. 221414

Surname

Christian Name or Names

Reg. No.

CLUNE

W. C

~~3080085~~

Rank

Unit

3080885

Pte.

Que.14.

Cas. List.

21-10-18.A350.

RFB. MISSING.

1-10-18. R.

26.10.18 A 355

Now Killed in action 1.10.18.

A.M.D. 2 DEPT.

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





Date of Enlistment

MILITIA AND DEFENCE *Enlisted 5-1-18*

Date of Assignment

# Separation and Assigned Pay Branch

**C** 7055  
~~7380~~

*Feb. 1st 1918.*

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

20 <sup>00</sup>			
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AUTHO *N.B.* 7055  
NEW

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No. 3080885

Name *Mrs Catherine Clune,*

Rank *Pte.* Promoted Reverted Discharge

Address *142 Chateaugay St., Montreal, P. Q.*

Soldier's Name *Clune, W. C.*

Change of Address

Battalion *1st Depot Bn., 1st Quebec Regt.*

- 1
- 2
- 3
- 4

Beneficiary

Relationship

Address

*M. P. O. A. I. S. S.*

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Mar 1918</i>	<i>M 77346</i>		<i>40</i>	<i>40</i>	<i>R ✓</i>
<i>April</i>	<i>N 7338</i>		<i>20</i>	<i>20</i>	<i>✓ ✓</i>
<i>May</i>	<i>M 12337</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>June</i>	<i>S 23996</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>July</i>	<i>T 34022</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Aug</i>	<i>S 37196</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Sept</i>	<i>J 45634</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Oct</i>	<i>I 54844</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Nov</i>			<i>140</i>	<i>180</i>	

*3339-W-b-9 1/4*

KILLED IN ACTION }  
 DIED OF WOUNDS } DATE *1-10-18*  
*C.L. No. 344 for 4* DATE *31-10-18*  
 M.R.O. *21243* TO DESTROY RENDERED *5-11-18*  
 B. P. C. FORM 1 & C. F. X. COMPLETED ON FILE  
*7022-C-2*  
 CLERK *R. Chupin* DATE *5-11-18*

*J. A. Thucany 7-3-18*  
 M. F. W. 138  
 4000-6-17-1772-38-1141  
 L. L. 2320-M. & D. 1986

*9/8/18*

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

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## 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
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M. F. W. 128.  
 40m. 6-17-172-38-1144  
 L. L. 23320-M. & D. 1953.

# Casualty Form—Active Service.

Unit, Regiment or Corps <sup>5th Det</sup> 1st DEPOT BN. 1st (CINDEC) BATT.

Regimental No. 3080885 ✓ Rank Private ✓ Name William Cornelius CLUNE

Enlisted (a) 5-1-18 ✓ Terms of Service (a) 3 Yrs ✓ Service reckons from (a) 5-1-18

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) Electrician

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				

CERTIFIED CORRECT,  
 5 JUN 1918  
 CAM. RECORDS, LONDON.

Embarked Canada 18-2-18 Saxonia

DISEMBARKED England 4-3-18

15.3.23rd. Res. Taken on strength from Bramshott. 5.3.18. D.P. 11 I. 74  
Batt'n. Canada

do Posted to 14th Battalion do 24/5/18  
W. J. Palmer Lt. 1st Bn. 23rd. Res. Batta.

C. B. D. ARRIVED C. B. D. FRANCE 30/7/18  
N. R. D. 30/7/18 675  
PART II ORDERS  
No. 72 D. 4.6.18

30/7/18 C. B. D. LEFT C. B. D. FOR Leerb 6/6/18  
N. R. D. Leerb

7.6.18 O. C. .... BN ARRIVED Leerb C BN. FIELD 6.6.18  
B. 213 D. Leerb

22.7.18 CERC Joined do 22.7.18 RTH 1264  
27.7.18 Unit Joined do 23.7.18 B213

(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]

Casualty Form - Active Service

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				
4/10/18	Unit	Missing	Italy	1/10/18	B213 140/1918
7/10/18	CCBo	Killed in action	do	1/10/18	Report KA 18/2/18 R 11/15/1918
		<i>John Row</i>		Lt. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.	

15.4

C.

# FORM OF WILL

I, William Cornelius CLUNE (Name in full)

Regimental Number 3080885 serving in 1st DEPOT BN. 1st QUEBEC REG'T.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I devise all my real estate unto

Mrs. Catharine Clune (Mother)  
142 Chateauguay St.  
Montreal P.Q.

Name and Address  
of person or  
persons to whom  
it is to go.

absolutely, and my personal estate I bequeath to

Mrs. Catharine Clune (Mother)  
142 Chateauguay St.  
Montreal P.Q.

Name and Address  
of person or  
persons to receive  
personal estate\*  
(See note).

### NOTE

This space for the  
appointment of  
Executor if  
necessary.

### IMPORTANT NOTE

This must be signed  
and Dated by  
THE SOLDIER  
HIMSELF.

this twelfth day of January A.D. 1918

William Cornelius Clune Signature of Soldier.

\*N.B. Personal estate includes ~~pay, effects, money in bank, insurance policy, in fact~~ everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

Signature of First Witness J. Thigam

Address of Witness Guy St. Barracks Montreal

THE TWO  
WITNESSES

Occupation of Witness Soldier

MUST  
SIGN HERE

Signature of Second Witness A. R. Berry

Address of Witness Guy St. Barracks Montreal

Occupation of Witness Soldier

FORM OF WILL

3

1900

I, *John D. Smith*

do hereby certify that the foregoing is a true and correct copy of the original and last will and testament of the above named person, as the same appears from the records of the County of *Franklin*, State of *Ohio*.

Witness my hand and seal this *10th* day of *April* 1900.

*John D. Smith*

*John D. Smith*

*John D. Smith*

Subscribed and sworn to before me this *10th* day of *April* 1900.

*John D. Smith*

*John D. Smith*

*John D. Smith*

NOTE

The State of Ohio  
Department of  
Internal Affairs  
Columbus, Ohio

IMPORTANT

NOTE

The State of Ohio  
Department of  
Internal Affairs  
Columbus, Ohio

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OCT 23 1917

M.S.A. 15.

MILITARY SERVICE ACT, 1917.

DR 53017

MEDICAL HISTORY SHEET.

341

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached to him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar.

1. Surname Clune, Christian name William  
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule.....  
3. Consecutive number on schedule of men reporting for service (if he appears on it).....  
4. Address (including street and number, if any)..... 142, Chateauguay St., Montreal.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the \_\_\_\_\_ day of \_\_\_\_\_ 1917, by the

undersigned medical board sitting at \_\_\_\_\_

5. Age as stated 21 Years 2 Months. 6. Apparent age 21 Years \_\_\_\_\_ Months

7. Height 5 Feet 8 Inches. 8. Weight 112 Pounds.

9. Chest measurement { Minimum 29 1/2 Ins. Maximum 32 1/2 Ins. 10. Complexion Dark Eyes Gray Hair Black

11. Physical development Good 12. Smallpox marks None

13. Number of vaccination marks { Right arm \_\_\_\_\_ Left arm 1 14. When vaccinated last Child

15. Distinctive marks and marks indicating congenital peculiarities or previous disease \_\_\_\_\_

16. Slight defects but not sufficient to cause rejection \_\_\_\_\_

The man denies having had { Rheumatism Tuberculosis Syphilis We find no evidence of past { Rheumatism Tuberculosis Syphilis (Strike out disease admitted or suspected.)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category **FIT "A"**

J. de Martigny President. A. M. M. M. M. Member.

Date	Result	VACCINATIONS	CAP	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
17/11/18	FROM MEDICAL BOARD			13.1.18	M.O.	J. G. Jaine Capt
					M.O.	A. B. T. T. T.
				27/1/18	M.O.	A. B. T. T. T.

Joined \_\_\_\_\_ day of \_\_\_\_\_ 191 at \_\_\_\_\_

CORPS	REG'TL NUMBER	HABITS	DATE
<b>1st DEPOT BN. 1st QUEBEC REG'T.</b>	<b>3080885</b>		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT
<u>Montreal</u>	<u>Jan 5/18</u>	<u>None</u>	<u>Ant H. Clune</u>
<u>"</u>	<u>6-2-18</u>	<u>Ind</u>	<u>A. B. T. T. T.</u>

N. B.—This sheet is 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.

The copy of this document which is delivered to the man examined will be attached by him to the report for service or claim for exemption made by him or on his behalf after the proclamation under the Military Service Act calling out classes has been issued.

Signature of Man William Clune

Eyesight R. D. = 20  
" L. D. = 20  
Hearing R. Ear  
" L. "





3011 LIVERMORE, 1st Quebec

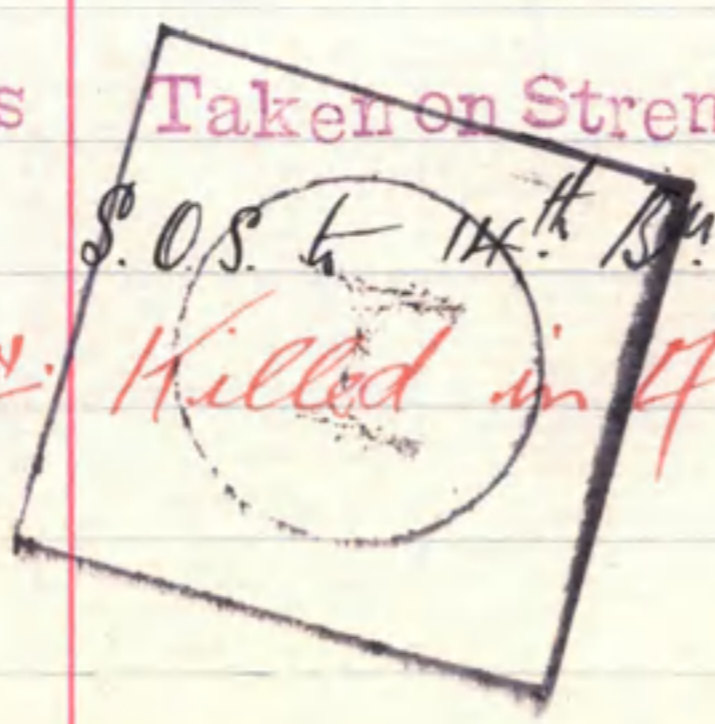
W.W. Rank Name CLUNE. William Cornelius. Reg'l No. 3080885.  
 Unit If in perm. Corps }  
 What Unit? } Married or Single Single.  
 Place and Date of Enlistment Montreal. 5-1-18. Place of Birth Montreal. Que.  
 Name and Address, Next-of-Kin Michael Clune.  
 142, Chateauguey St. Montreal. P.Q. Relationship Father.

Assigned Pay Monthly \$ Payable to Relationship  
 Separation Allowance \$ Payable to Relationship

N/E. R.B. No 14930.  
 File R.L. 25 C. 5446  
 Category Kin A.

Discharge, Date and Place Reason Character  
 H. W. V., Ld.—9546-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Reason	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
	©	Arrived in England	Place	4-3-18	S/S SAXONIA
15 3 18	23 Res	Taken on Strength	B hott	5 3 18	Pt 2 D O 74
30. 5. 18	"	S.O.S. to 14th BN	pt	29. 5. 18	SO #72 2/4. 6. 18 14th 150
22. 10. 18	14th BN	Killed in action	Field.	1. 10. 18	D.O. 144



303 CHECKED  
 JUN 1918



MARRIED OR SINGLE *Single*  
 PLACE OF BIRTH *Montreal Que.*  
 NAME OF NEXT OF KIN *Michael Blume* RELATIONSHIP *Father*  
 ADDRESS *142 Chateauguay St. Montreal. Que.*  
 NAME OF NEXT OF KIN \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_  
 ADDRESS \_\_\_\_\_

APPOINTMENTS  
PROMOTIONS AND REVERSIONS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

DATE ADMITTED	ADMISSIONS DATE DISCH'D	V. OR A.	TO HOSPITAL, & C. NAME OF HOSPITAL.

REG'L. NO. *3080885* RANK *Pte.* NAME *Blume William Cornelius.*  
 PLACE OF ATTESTATION *Montreal. Que.* DATE OF ATTESTATION *5/1/18.* ORIGINAL UNIT *1st Depot Bn. 1st Que. Regt. 23rd Can. Regt.*  
 ASSIGNED PAY

PER MONTH \$ *20<sup>00</sup>* (1) DATE EFFECTIVE *1/2/18* AUTHY. \_\_\_\_\_ STOPPED EFFECTIVE \_\_\_\_\_  
 PAYABLE TO *Mrs. Katherine Blume, 142 Chateauguay St. Montreal, Que.* CAUSE \_\_\_\_\_  
 RELATIONSHIP *Mother's*  
 PER MONTH \$ \_\_\_\_\_ (2) DATE EFFECTIVE \_\_\_\_\_ AUTHY. \_\_\_\_\_ STOPPED EFFECTIVE \_\_\_\_\_  
 PAYABLE TO \_\_\_\_\_ CAUSE \_\_\_\_\_  
 RELATIONSHIP \_\_\_\_\_  
 PER MONTH \$ \_\_\_\_\_ (3) DATE EFFECTIVE \_\_\_\_\_ AUTHY. \_\_\_\_\_ STOPPED EFFECTIVE \_\_\_\_\_  
 PAYABLE TO \_\_\_\_\_ CAUSE \_\_\_\_\_  
 RELATIONSHIP \_\_\_\_\_  
 PER MONTH \$ \_\_\_\_\_ (4) DATE EFFECTIVE \_\_\_\_\_ AUTHY. \_\_\_\_\_ STOPPED EFFECTIVE \_\_\_\_\_  
 PAYABLE TO \_\_\_\_\_ CAUSE \_\_\_\_\_  
 RELATIONSHIP \_\_\_\_\_  
 DISCHARGE DATE AND PLACE \_\_\_\_\_ ACCOUNT TRANSFERRED TO N.E. BRANCH (DATE) \_\_\_\_\_  
 REASON AND AUTHORITY \_\_\_\_\_ ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE) \_\_\_\_\_

SEPARATION ALLOWANCE.

SEPARATION ALLOWANCE MONTHLY \$	EFFECTIVE (DATE)	STOPPED EFFECTIVE (DATE)

PERIOD	PAY AND FIELD ALLOWANCE	WORKING PAY	SEPARATION ALLOWANCE	ASSIGNED PAY CREDITS	ANY OTHER CREDITS	TOTAL CREDITS	SEPARATION ALLOWANCE	CASH PAYMENTS DURING THE MONTH				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CARRIED FORWARD		NUMBER OF ACQUITTANCE ROLLS		NUMBER OF S.A. AND A.P. CHEQUE	REMARKS.
								1	2	3	4				CREDIT	DEBIT	1	2		

MONTH	PARTICULARS	DR.1	CR.1	DR.2	CR.2	TOTAL
28 FEB 1918.	BALANCE FROM CANADA					10.80
	pp. 34.10					
	ad. 1438. Robert 873	4.87				
	2080. 23 Reo 2 1/2	14.60				
	ap.	19.47				
	34.10			20	5.43	

ASSIGNED PAY: ~~ENGLAND~~ CANADA. SEPARATION ALLOWANCE. ENGLAND OR CANADA.

EFFECTIVE DATE: 1-2-18 EFFECTIVE DATE: -

AMOUNT: 920 AMOUNT: -

NAME, ADDRESS, RELATIONSHIP & AUTHORITY: Mrs Catherine Blune (Mother)  
142 Chateauguay St  
Montreal P Q

WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

NAME: CLUNE, William Bonelius  
NUMBER: 3080885

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT: 10p Am 1 Que Regt

DATE ACCOUNT FIRST OPENED: -

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
72	4/6/18	1/7/18	10p Am "D"
		1/1/18	10p Am "D"

EXTRACTS FROM ACTIVE SERVICE PAY BOOKS

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS CE ALL CE
	1	10		

PAY BOOK CHECKED.  
Date: 11-2-19  
By: [Signature]  
P.Q. BRANCH

PARTICULARS OF RENDERING NON-EFFECTIVE:-

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
1918	Apr Bal fwd.								543		
	PP.	33		ap.				20	1843		
				AR. 54-23 Res. 15.4.18	243				1600		
				✓ 157 ✓ 20/4/18	243				1357		
		33			486			20			
May				Qual				20	643		
	PP	3410		AR 335 23 <sup>rd</sup> hus Br.	487				1130		
									2280		
		3410		AR 540 ✓ 31/4/18	243				2037		
					730			20			
JUN				Qual.				20	37		
				Q4005/204 23 Res. 20.5.18	25				12		
				AR 546 1 <sup>st</sup> succe. 13/6/18	357				348		
				✓ 623 ✓ 20/6/18	446				791		
	PP	33			828			20	2509		
		33									
July	P.P.	34 10		A.P. ban (July)				20	39 19		
				AR. 705-1 <sup>st</sup> w.b.r.b. 5.7.18	3 57				35 62		
				" 822 "	20.7.18	446			31 16		
					803			20	45 26		
Aug	P.P.	34 10		A.P. ban (Aug)				20	41 69		
				AR 314 - 3 <sup>rd</sup> Exp Ad. 1.8.18	3 57				38 12		
				" 516 "	24.8.18	3 57			51 12		
Sept	P.P.	34 10		A.P. ban				20	47 55		
				AR 572 - 1 <sup>st</sup> D. Retal. 5.9.18	3 57				43 98		
				" 619 - 3 <sup>rd</sup> Exp Ad. 14.9.18	3 57				58 08		
		33			7 12			20	58 08		
Oct	PP	34 10		Qual				20			
		3410									

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\* Strike out whichever inapplicable.

*MW*

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