C.E.F. REGIMENTAL DOCUMENTS

NAME COE, FREDK. REGT. No. 808293 UNIT 137 BN H. Q. FILE No. 27249

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
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FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
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MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
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M.F.W. 2589
20M-4-46 (9113)
H.Q. 1772-39-1377

1835

419-14 Ave E.

ORIGINAL

ATTESTATION - PAPER.

No. 808293

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

two years in Canada

1. What is your surname?	Coe
1a. What are your Christian names?	Frederick
1b. What is your present address?	Acme Alta Canada
2. In what Town, Township or Parish, and in what Country were you born?	Tullow Carlow Ireland
3. What is the name of your next-of kin?	Larissa Coe
4. What is the address of your next-of-kin?	Rath Rusk, Tullow Carlow Ireland
4a. What is the relationship of your next-of-kin?	mother
5. What is the date of your birth?	April 6th 1890
6. What is your Trade or Calling?	Labourer
7. Are you married?	no
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.	no
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, Frederick Coe, 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.

Fred Coe (Signature of Recruit)

Date January 26 1916 (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Frederick Coe, 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.

Fred Coe (Signature of Recruit)

Date January 26 1916. (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 Calgary this 26 day of January 1916.

H. J. Robie (Signature of Justice)

M. F W. 23.
200 M.—11-15.
H. Q. 1772-39-841.

Description of Frederick Coe on Enlistment.

Apparent Age 25 years ..... months.

(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height	5 ft. 8 3/4 ins.	
Chest measurement. Girth when fully expanded	38 ins.	
Chest measurement. Range of expansion	3 ins.	
Complexion	Dark	
Eyes	~~Blue~~ Gray	
Hair	Dark Brown	
Religious denominations. Church of England	Yes	
Presbyterian		
Methodist		
Baptist or Congregationalist		
Roman Catholic		
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).

(1) scar on palm of left hand
(4) Vaccination marks on left arm

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 January 26 1916 .....

Place Calgary Alta ..... 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.

Frederick Coe 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.

Geo. S. Mowatt Lt. Col. (Signature of Officer)

Date January 27 1916.

137th O. BN., C. E. F.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 808293 (Rank) PTE

Name (in full) COE FREDERICK E enlisted in

the 137TH BN.

CANADIAN EXPEDITIONARY FORCE at CALGARY on the 26TH

day of JANUARY 1916

HE served in FRANCE WITH THE 50TH CAN. BN.

and is now discharged from the service by reason of Demobilization.
~~Medical Unfitness.~~

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

Age 27 YRS

Height 5'- 9"

Complexion DARK

Eyes GREY

Hair DK. BROWN.

Marks or Scars SCAR ON PALM OF LT. HAND.

Frederick Coe
Signature of Soldier

Date of Discharge

Dispersal Station "R"
MAY 21 1919
Military District No. 13

Issuing Officer

Rank

Date MAY 21 1919 19

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.B. 39A.
1049-D.P.-300M-11-18.
H.Q. 1772-39-882.

War Service Badge, Class A No. 249024 Issued

(9) Is your Father alive? yes John Bos Ireland

If so, state name and address Rathmush Tallon Co Carlow

(10) Is your Mother alive? yes

If so, state name and address Mary L Bos

Rathmush Tullow Co Carlow Ireland

(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.

(15) Are you insured? No

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.

Geo A Shurtleff Lt. Col.
137th O. BN., C. E. F.
Officer Commanding.

Date July 24 1916

To be made out in duplicate. H.Q. 54-21-23-53

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 ... 137th O'Bn C.E.F.

(2) Regimental Number ... 808293

(3) Full Name of Soldier ... Frederick Coe.

(4) Place of Birth ... Aghold, Coolkenno Barony Wicklow Ireland

(5) Are you married, or not? ... No

(6) If married, state,
(a) Full name of your wife ... ✓

(b) Present Postal Address ... ✓

(7) Are you a widower? ... No

(8) Have you any children? ... No

If so, give number of boys and girls ... ✓

Also their names and ages ...

M. F. W. 67.

200M.—3-16.
I772-39-954.

(SEE OTHER SIDE.)

Surname Joe Christian Name Frederick

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	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 inoculations.	Signature of Medical Officer.
Calgary	Mil Hosp	11	4	16	7	5	16	Traumatic Orchitis	27	Apparently recovered	J. S. [illegible]
Fort Pitt Military Hosp. Chatham.		7	6	17	9	6	17	Mapmt. G. S. W. L. Elbow	3	Transferred to Rosherville	
ROSHERVILLE & INGRESS ABBEY V.A.D. HOSPITAL, GRAVESEND.	"	9	6	17	16	10	17	Flesh (sev) ----	129	Healed	H. A. Haines Colonel Officer i/c Military Hospital, Chatham [illegible]
CAMP DIV. FORT PITT. MIL. HOSP., CHATHAM.		16	10	17	22	10	17	" "	7	Transferred to Epsom.	[illegible] Capt
M. C. H. Epsom		22	10	17	30 JAN 1918			Do	101	O. A. Wound healed. Massage and Remedial Gymnastics here. Some improvement: S. M. B. recommends Do	P. Kray Capt-Comb

ORIGINAL.

127th O. BN. C.E.F.

808293.

Original

MEDICAL HISTORY SHEET.

Surname Coe Christian Name Frederick

Examined on 26 day of January 1916 at Calgary Alta

Birthplace City or Town Dullow County Carlow Ireland

Apparent age 25.

Trade or occupation Laborer

Height 5 Feet 8 3/4 Inches.

Weight 145 Lbs.

Chest measurement Minimum 35 inches. Maximum expansion 38 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks Arm Right. Left. Number D 4

When Vaccinated last 1898

(a) Marks indicating congenital peculiarities or previous disease None

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

Approved by L R Steuart Capt Rank M.O.

Date.	Fit or Unfit.	Examined for Re-engagement.
		M.O.
		M.O.
22/1/17	A	2nd CBD Mth M.O.
		M.O.
		M.O.
		M.O.
		M.O.

13 JUN 1917

Date.	Result.	Vaccinations.
9/6/16		L R Steuart M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
24/2/16.		L R Steuart M.O.
1/4/16.		L R Steuart M.O.
26/9/16	T.A.B. 1	R.A.M.C. M.O.

T.A.B. 14-2-16 2 25-2-16

Enlisted on 26 day of January 1916 at Calgary Alta, Canada.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	137 Bn C.E.F.	808293.		26/1/16.
Transferred to	21st Res: Bn (Alberta).			10-1-17.
	50th Battn			

25 APR 17

CANADIAN

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Ripon	10-4-19	Adherent Scar L Elbow	B1 6 mths Home

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.

200M—11-15.
H. Q. 1772 39-439.

Form R & O 6046
1288-150M-29/1/18.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at M.C.H. EPSOM. JAN 22 1918.

No. 808293. Rank Pte. Name COE. F.

Local Unit..... Overseas Unit. 50th B'N. Age 26.

Examination held at EPSOM. SURREY.

DISABILITY. PAIN IN LEFT LUMBON JOINT
Overseas ~~Local~~
(scratch one out)

PRESENT CONDITION.

DT

ASTCS

BOARD RECOMMENDS:—

1. Fit for Duty.....
2. Fit for duty after.....weeks' physical training.
3. Fit for Temporary Base Duty.....weeks.
4. Fit for Permanent Base Duty .....
5. Discharge .....

Signatures:—

Members { .....President.
.....
.....

APPROVED

Dated at.....1916. .....

For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at M & H. EPSOM. 6th JAN. 19 45

No. 2/X/[illegible] Rank [illegible] Name [illegible]

Local Unit [illegible] Overseas Unit [illegible] Age [illegible]

Examination held at EPSOM SURREY.

DISABILITY.
Overseas—Present
(scratch one out)

PRESENT CONDITION.

BOARD RECOMMENDS:-

1. Fit for Duty.
2. Fit for duty after [illegible] weeks physical training.
3. Fit for Temporary Base Duty [illegible] Weeks.
4. Fit for Permanent Base Duty [illegible]
5. Discharge [illegible]

Signatures:-

[illegible] President.

[illegible] Members

[illegible]

APPROVED

Dated at [illegible] 19[illegible].

For A.D.M.S.

Gen. Del
Calgary.

P. 85.

FORM OF WILL.

98956

I, Frederick Coe (Name in full)

Regimental Number 808293 serving in 137th O. BN., C. E. F.

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

I bequeath all my real estate unto

Mrs. A. L. Coe
Rathennish Tallow
Ireland

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

absolutely, and my personal estate I bequeath to

Mrs. A. L. Coe
Rathennish Tallow
Ireland

} Name & Address of person or persons to receive personal estate* *(see note)*.

In Witness whereof I have hereunto set my hand this 16th day of February A.D. 1917.

Fred Coe Signature.

* 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.

Name of Witness W. J. Bennett

Address of Witness 12th Reserve Batt. (Alta)

Occupation of Witness Soldier

Name of Witness A Bethune

Address of Witness 21st Reserve Battalion (Alberta)

Occupation of Witness Soldier

P. 85. 10,000. 23-9-16.

C-1078

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

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

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, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

1. Christian names Frederick 2. Surname Cole
3. Rank Pte. 4. Original Unit 137th. Bn. 5. Reg. No. 808293
6. Address, in full, to which future payments of gratuity are to be forwarded Canadian Bank of Commerce Calgary, Alberta
7. Date of enlistment in the C.E.F. Jan 26th 1916
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge No.
9. Relationship of such dependent No.
10. Address, in full, of such dependent No.
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:—
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?
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service
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 137th from Jan to Aug 1916 in Canada 137th from Aug 1916 to Jan 1917 21st Res from Jan to April 1917 in Eng 50th Bn from april to june 1917 in France 21st Res in Eng till return to Canada
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.

548t. Wt. /30P. 150,000(8). 2/19. S.O.,F.Bd.

21 . 6 . 19.

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?

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

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

24. Are you now serving in the C.E.F.? If not, give:—(a) Date of discharge 21/3/19 (b) Reason for discharge Hfd

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

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit in which you served at the front, and dates of such service with that unit

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?

(b) If so, are you in receipt of full pay and allowances from that Department?

EXAMINED BY

REMARKS

ATTESTED 26/1/19

DISCHARGED 21/3/19

PUT ON PAY 21/6/19

INITIALS

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: Frederick Coe

Place of Residence: Calgary, Alberta

Declared before me at: Ripon, Yorkshire, England

This 8th day of April 19 19

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths under P.C. 2767, dated 11th Nov., 1918.

Questions 12. 13. 14. 20. 24. 25. 26 & 27 are unanswered.

H. D'Arcy Major

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
	Nil		420 00	

Certified Correct.

G. Edwards. Major

District Paymaster.

GENERAL AUDITOR'S DEPT. AUDITED JUN 18 1919 DISTRICT AUDITOR M. D. 13

H.C.N.

R—122

J.M. Rank Name COE, Frederick. ✓ Reg'l No. 808293 ✓

Unit 137th Bn. If in perm. Corps, What Unit? Married or Single Single. ✓

Place and Date of Enlistment Calgary. 26th Jan 1916. ✓ Place of Birth Tullow, Carlow, Ireland. ✓

Name and Address, Next-of-Kin Louisa Coe. ✓

Rath Rush, Tullow, Co. Carlow, Ireland. ✓ Relationship Mother. ✓

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No. 11838
File R.L.
Category
CAN.OR

H. W. & V., Ld.—7165-16.

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.
C		Arrived in England H.M.T. 2810 30-8-16			
10 1 17	137 Bn	SOS to 21 RES Bn	SEAFORD	10,1,17	Pt.2 DO 9
10.1.17	21 Res Bn	T. O. S. fr 137 th. Bn.	Seaford	10-1-17	Pt 11, D.O.1
25.4.17	✓	SOS to 50th Bn Oscar	Bishott	25.4.17	Pt 11 DO 105/50th B. DO 77/1-5-17
12.6.11	50th Bn.	No 3 Can Gen Hospl.	Boulogne	4.6.17	CL 24 S.W. Left Elbow Slt
14.6.17	—	Central Mil Hospl. Fort Pitt	Chatham	8.6.17	CL 324
16.6.17	Ltr RD	T.O.S from 50th Bn	Bramshott	"	Pt 2 No 99 - 50th No 99 - 18/6/17
25.10.17	" " (50)	Mil Convl. Hos. W'cote	J.K. Epsom	23.10.17	CL B46 S.W.L. Elbow Slt
1.2.18	A R Dept	On cmd 2nd C C D	Pte Bram	30.1.18	DO 52 & DO 28 of 2.2.18 of 2nd CCD
26.3.19	"	Ceases of cmd and SOS to 21st Res Bn	" Ripon	24.3.19	DO 68, 21st DO 69, 25/3/19

A.F.B. 103 CHECKED
W.B. 2 - MAY 1917

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.
19.4.19.	21st	S.o.S. to MS 13. Rhyl.	Ripon	19.4.19.	D.O. 90. MS13 5093 22/4/19
7.5.19.	MS 13.	SoS to Canada.	Rhyl.	7.5.19.	W.O. 106
		50- R- 90		7.5.19	

C.A.D.C. 5009A

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

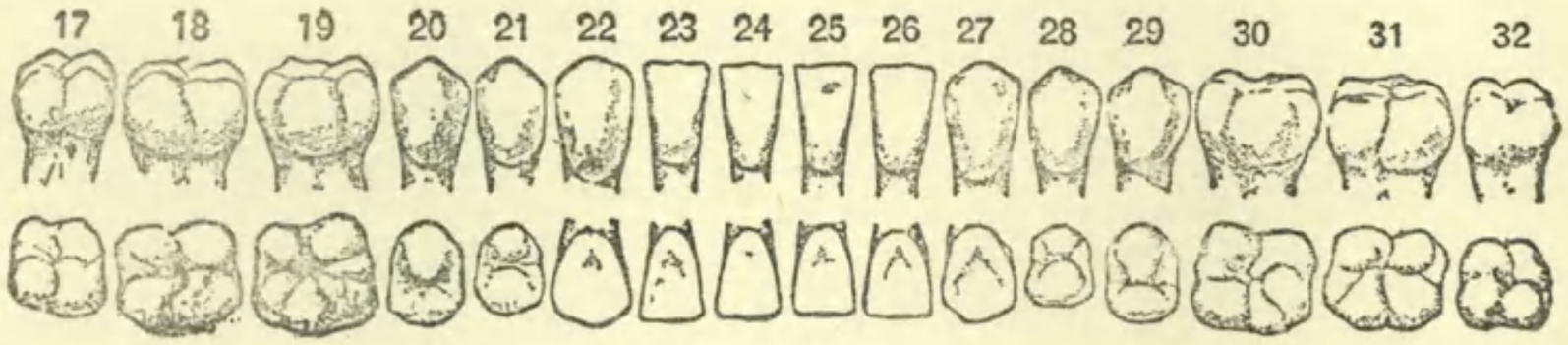
DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) COE. F.

REGIMENT 21ST. RES. BN. RANK PTE. No. 808293

Date of Examination in England 7-419 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.

DENTAL BOARD * RIPON * 7 APR 1919

PRESENT DENTAL REQUIREMENTS

1. FILLINGS. 7. 20.
2. EXTRACTIONS. —
3. CROWNS. —
4. DENTURES
   - (a) Full Upper —
   - (b) Part Upper 2-3. 4, 5. 11. 12. 14.
   - (c) Full Lower —
   - (d) Part Lower 18, 19. 30. 31

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 R. Roy Capt.

A D D. S., M D. 15

SERVICE AND CASUALTY FORM (Part I).

Army Form B. 103—I.
Part I.

(1)*Substantative rank *Acting rank *[To be entered in pencil to facilitate alteration.]	(2) Regiment or Corps	(3) Regtl. No.
(4) Surname		
(5) Christian Names		
(6) Army Form, number of, Attestation Form or Record of Service paper		
(7) Whether of British or of Alien origin [*vide* A.C.I. 578 of 1918]		
(8) Date of birth as stated on enlistment		
(9) (*a*)		

(10) Enlistment (*b*) (11) Engagement (*c*)

(12) Service reckons from (*date*) (13) Special conditions (if any) of enlistment (*d*)

(14) Any subsequent variations (if any) of conditions of service

Initials and Rank of an Officer.

(Authority) (*date*)

(15) Category	Date	Medical Authority	Initials and Rank of an Officer

(16) (Record of Occupation in Civil life (*vide* Army Order 93 of 1917)

Industrial Group No.
Trade or Calling
Married or Single
Particulars of Trade Test

Occupation Cards despatched on (*date*)
Second Occupation Card despatched on (*date*)

(17) Next of Kin
(18) Demobilizer (*f*) (Place)
(19) Pivotal-man (*f*) (Date)
(20) Qualifications (*g*) *or* (21) Corps trade and rate

(Signature of Posting Officer

(22) Extended { (23) Re-engaged {

(24) Miscellaneous entries:—

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [*vide* A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoeing-smith, &c.

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W1889—PP1150 1M 5/18 G.W.P.Co (3490)

808293 Pte. Coe - F.

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer

T.O.S. C.C.C. Kinmel Park for return to Canada. Part 11 Orders No. 74 S.O.S.
C.C.C. Kinmel Park on embarking for Canada, Part 11 Order No: 107

Commanding 13 Wing,
Kinmel Park Camp,

A. C. McKenna Lieut.
O i/c DISPATCH OFFICE M.D. 13.

Embkd Lv'pl-Celtic May 7 1

TAKEN ON STRENGTH OF NO. 13 DISTRICT DEPOT PART 2 ORDER NO. 143 DATED 7-5-19 AND DISCHARGED FROM H. M. SERVICE BY NO. 13 DISTRICT DEPOT PART 2 ORDER NO. 143 DATED 21-5-19

AUTH. RO 1420

for W. C. Baker Lieut. Col.
Officer Commanding No. 13 District Depot

Nothing to be written in this margin.

W S B Class A

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

M. F. W. 54.
150M. 10-15.
H.Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 137th O. BN., C. E. F.

Regimental No. 808293 Rank Private Name Frederick Coe

Enlisted (a) 26/1/16 Terms of Service (a) ~~C. E. F.~~ Duration of War ~~and 6 months~~ Service reckons from (a) 26/1/16

Date of promotion to present rank. Date of appointment to lance rank Numerical position on roll of N. C. Os.

Extended Re-engaged Qualification (b) Labourer, Bombing

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	21/8/16	H.M.T. "Olympic"
		Arrived England	Liverpool	30/8/16	
10-1-17	~~H.Q.~~ ~~Seaford~~ ~~R.O. 136~~ O.C. 137th Bn.	Transferred to 21st Reserve Bn (Alberta)	Seaford	10-1-17	Pt. II D.O. #9 d/10-1-17 A.D. Murison Lt. a/ ADJUTANT 137th BATTALION CAN. INF.
8-1-17 10	~~H.Q.~~ ~~Seaford~~ ~~R.O. 136~~ O.C. 21st Res. Bn.	Taken on strength of 21st Res. Bn. from 137th Bn. C.I.	Seaford	10.1.17	Pt. II D.O. 1, d/10-1-17 A.D. Murison Lt. a/ ~~Capt.~~ Adjt 21st Res. Bn. Alberta
25 APR. 17	21st RES. BN.	PROCEEDED OVERSEAS FOR SERVICE WITH 50th BATTALION.	BRAMSHOTT.	25 APR. 17	Pt. II D.O. No. 105 25 APR. 17 A.D. Murison Lieut. & Asst. Adjt. 21st Reserve Battalion
26-4-14	O.C. CBD	Arrived T.O.S. 50th Bn	Havre	26-4-14	N.R. Pt II D.O. 44 d/1-5-14
10-5-14	Do	Left to join Unit	Field	10-5-14	N.R.
2-6-14	O.C. 50th	Joined Unit	Do	23-5-14	B 213 DCS 181

CERTIFIED CORRECT. 19 MAY 1917 CAN. REC. BN. LONDON.

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
9-6-14	O.C. 50th	wounded.	Field	3-6-14	Gr. I. 16/9644 Abs 183.
4-6-14	No 3 Can Genl	S.W. Lt. elbow. Adm	Do	4-6-14	W3034-2082.
7-6-14	"Jan Breydel"	Invalided (wounded) and posted to Alta Regn. Depot.	Bramshott.	7-6-14	W3083 A 7048 Pt II 99 d/18.6.1
					J M Anderson Lieut. for Lt-Col., A. A. G. Canadian Section. G. H. Q. 3rd Echelon. B. E. F.
16.6.17 M 1.2.18	A R Wyst	T.O.S posted from 50th Bn	Bram	8.6.17	Pt II Do 99 H P Charter LIEUT: FOR LT: COL: I/C RECORDS, C.O.M.F.
2-2-18	2 CCD	attached to 2 CCD	Bramshott.	30-1-18	Pt 2 II 28.
25.3.19	OC. 2nd CCD	Ceases to be attached to 2nd C.C.D. on return to 21st Res. Bn.		24.3.19 RIPON	Pt. 2 D.O. No. 69 C Ryan Lt for OC. 2nd CCD.
25/3/19	21st Res	T.O.S. from A.R.D.	Ripon	24/3/19	Pt II D.O. 69
		TRANSFERRED TO KINMEL PK. CAMP, RHYL.	RIPON		Pt. II D.O. No. W N Sullivan Lieut. & Asst. Adjt. 21st Reserve Battalion (Alberta.)

Unit 21st Can Res Bath

MORNING SICK REPORT
MEDICAL INSPECTION REPORT*

Army Form B 256

Squadron, battery or company E

Station and Date APR 5 - 1919 191

Regtl. No.	Rank and Name (Christian name in full; Surname first; M under name if married).	Completed Years of Age	Completed Years of Service	Religion.	If for duty†	Whether a Defaulter.	Lines or Barracks.	Room.	Disease.	Disposal. Medical Officer's Remarks and Signature.
808293	Pte COE. F.	28	3½ yrs.	C/E					old fracture left elbow	X-Ray.

This marks for board on M.F.B 227 & claims a disability of left elbow.—

MEDICAL OFFICE.
5 - APR.1919
21st Can. Res. Bn.

D. Wiley Capt: C.A.M.C.
Medical Officer 21st Can: Res. Bn.

†State nature of duty for which warned. In the case of men for medical inspection, the reason, such as, "Soldiers for trial by Court-Martial," or "joining the station," &c., should be stated against their names.
*Strike out whichever is not applicable.

Orderly N.C.O.

(6425) W.6868/P1765 4,500,000 10/18 McA & W Ltd (E.4061.)

To be Discharged from Hospital to-morrow.

Unit.	Squadron battery, or company	Regtl. No.	Rank and Name.	

FORM D.M.S. 1300.
8137—50m—28/2/17.

Surname: Coe
Christian Name or Names: F.
Reg. No.: 808293
Rank: Pte.
Unit: 50 Batt.
Co.:
Troop: Alta Regt
Batty.:
Hospital:
Date of Admission:

Transferred 3 Can. Gen. B'logne Hosp. 4.6.17
Fort Pitt Milit. Chatham Hosp. 8.6.17
Can. Conv. Woodcote Pk Hosp. 23-10-17
Hosp.

Diagnosis

(1)
Later Diagnosis (if changed) Sw. L. Elbow. (slt) R.

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Dis. 30.1.18. Date

C.L. 12.6.17 A241
" 14.6.17 B324(1)
= 26-10-17 B46(2)
4.2.18 B129.

REMARKS

A.M.D. 2 Dept.
Bch. of D.G.M.S. O.M.F.C. London

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

830. CS 186. W.503/P.36. 20,000 Pads. 10/17. N.P.A. Ltd. E. 1955.

Army Form W. 3172.
(In pads of 50)

Ripon Military Hospital.

Ward _____ No. of Bed _____ Date 5.4.19.

Regt. No.	Rank and Name.	Corps.	Part to be X-Rayed.
80293	Pte Coe T.	21st Con Res.	Lt Elbow.

SHORT HISTORY OF CASE.
(To be completed by M.O. i/c case.)

G.S.W. L elbow 4/6/17.

Signature of M.O. _____

Date _____

REPORT ON RESULT OF X-RAY EXAMINATION.
(To be completed by Radiographer.)

No. of Plate 8166.

No evidence of fracture

P. W. Hamilton
Major RAMC

Signature of Radiographer _____

Date 6.4.19.

13 "R" CARD NO.

SURNAME. Coe.

CHRISTIAN NAMES Frederick.

S O S 21-5-19. FOLL.

REGL. No. 808293. RANK Pte.

D 014 3 of 23-5-19 DD/13

UNIT 137 th. Batt:

FORMER CORPS Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Coe, Mrs. Louisa.

RELATIONSHIP TO SOLDIER Mother.

ADDRESS Rath Rush, Tullow, Carlow, Ireland.

COUNTRY OF BIRTH Ireland. Tullow, Carlow. DATE April 6, 1890

PLACE OF ATTESTATION Calgary, Alta. DATE Jan: 26, 1916.

O/S 22-8-16 5.23/5.

R/C 15-5-19 323/92. Pte

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

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

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Labourer RELIGION C. of E.

DESCRIPTION.

APPARENT AGE 25 YEARS ——— MONTHS

HEIGHT 5 FEET 8 3/4 INCHES

CHEST MEASUREMENT 38 INCHES EXPANSION 3. INCHES

COMPLEXION Dark. EYES Grey. HAIR D. Brown.

DISTINGUISHING MARKS Scar on palm of left hand.
4 vacc: marks on left arm.

MEDICAL EXAMINATION. PLACE Calgary. DATE Jan: 26, 1916.

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

R. 149.

Name Coe. Frederick Rank Pte. Reg. No. 8082 93

Unit 50th Battn.

Next of Kin Louisa Coe, Rath Rush. Tullow Co Carlow Ireland

Date 1917	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
4-6	To 3 Can. G.H. Boulogne	SW.	L.E. Blow Slt	B 241	M 5558	12-6
8-6	Cent. M. H. Fort Pitt	Chatham	do	B 324	11-6	
23-10-	Mil. Con. Epsom		do	B 46		4248
30-1-18	Discharged		do	B129		2879
	WK.					

GRATUITY (IMPERIAL)

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

DESP JAN 3 1923
REGN. NO. 11754

·68—D.P.—40M-1-12-19.

HCB

Number 808293 Rank Pte.

Surname Coe

Christian Name Frederick

Units 5th Can Inf Theatre of War France

Date of Service 25-4-17

Remarks

Latest Address N. S.

Hythe,

Alta.

Roll No. "B" Page 21748

200m.-6-21.

REGT'L. NO. 808293.

NAME Coe, Frederick.

H. Q. FILE NO. 649

RANK AND CORPS Pte. 55th Bn. Form 137 4th Bn.

FOLLOWS NO.

FOLLOWS

CABLE NO.	CABLE DATE	"Ire" NATURE OF CASUALTY
M5558.	12-6-17.	Adm. No. 3 Can. Gen. Hosp., Boulogne June 4th/17. G.S.W. Abdo.

L. L. 18950—M. & D. 7789

M. F. W. 42—30M.—4-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 241	#3 Can Gen Boulogne	4-6-17	SW L. Elbow Slg
B 324-1	adm Cant: Mil Fort-Pitt Chatham	8-6-17.	" " " L.-7-7-17
B 46.(2)	Mil. "Conv." Woodcote Pk. Epsom	23-10-17.	SW. Lt., Elbow Slight (Alberta)
B 129	Disch	30-1-18	" " " " "

REG. NO. 508293 NAME (SURNAME FIRST) Coe F.

RANK Pte. CORPS 137th Bn

AGE 25 SERVICE

NAME OF HOSPITAL Military PLACE Calgary

DATE OF ADMISSION 11-4-16

DISEASE Orchitis

DISCHARGE 7-5-16

OPERATION

DISCHARGED TO DUTY Yes

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD

100M—9-17—H.Q. 1211-8-30.

REMARKS .....

No 808293 RANK Pte NAME Coe F.

T. O. S. 26-1-16 UNIT 137th Battalion.
D.O. 23 of 27-1-16

M. D. 13

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Jan. 26	Feb. 29	✓		
	Mar.	✓		
	Apr.	✓		
	May	✓		
	June.	✓		
	July.	✓		
	Aug.	✓		

UNIT SAILED
AUG 22 1916

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY * ENGLAND OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:–	EFFECTIVE DATE:–
AMOUNT:–	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.

5880 Ripon 1013 L PC

NAME:- COE. Frederick

NUMBER:- 808293.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte.

UNIT AND TRANSFERS

ORIGINAL UNIT:- 137 Bn

DATE ACCOUNT FIRST OPENED:- 1.9.16.

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

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
1.4.19	5	2nd Res.	$ ~~24 33~~ 32				
						2nd Aust Bltr.	£ 777 69
						2 R&G.	£ 753 36

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE:- Canada 30.4.19. Mk 5880 Ripon Ripon. 3.4.19. Mk. 13

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
Mar 31	Balance forward								379 04	285	
April	P Pay.	33 ..		AR 2244. 11.4.18. 2662	5 11					300	
				AR 6395. 24.4.18. do	9 97				396 96	360	
		33			15 08						
May	P Pay	34 10		AR 6720. 13.5.18. do	24 33				406 73	315	
		34 10			24 33						
June	P Pay.	33 ..							439 23	330	
		33			.. ..	.. ..					
July	P. Pay	34 10							473 83	345	
		34 10									
Aug.	P. Pay	34 10		AR 3411 15.8.18 2 blds.	24 57				483 36	360	
		34 10			24 57						
SEP	P. Pay	33 -							516 36	375	
		33 -			- -						
Oct	P P	34 10									
		34 10	- -	651.66 64.90 716.56 4.87 711.69	- -	- -	- -	- -	550 46	390 -	
Nov	P P	33 -									
Dec	✓	34 10									
Jan	✓	34 10									
		101 20	- -						651 66	435 -	
Feb	✓	30 80		AR 9207. 26/2/19 2 Cds.	4.87						
Mch	✓	34 10							~~711 69~~		
		~~64 90~~			4 87 - - - - - -				711.69		
				AR. 5. 3/4 2 Res.	24 33						
April	✓	33 -								480	
	Def. Pay Mtr. 30.11.19.	33 -									
		~~150 90~~ - -			~~4 87~~ - - - - - -						
		66 -		over	24 33						

Sgt Woodhead
A

NUMBER 808293. RANK NAME COE. F. LPC

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
		66.			24 33				711 69		
				AR. 1085 23/4 End. K P	9 73				66		
				" 2023 6/5 " "	9 73				777 69		
		66.			43 79				733 90		
					43 79				733 90		
				SOS 56 7/5. AFD							

P. 559.
MARRIED OR SINGLE S

PLACE OF BIRTH Tullow, Carlow, Ireland.

NAME AND ADDRESS OF NEXT OF KIN Mrs. Louisa Coe,
Rath Rush, Tullow Carlow, Ireland

RELATIONSHIP OF NEXT OF KIN Mother

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L. No. 808293 RANK Pte NAME Coe Frederick

IF IN PERMT. CORPS WHAT UNIT UNIT 137th Batt TRANSFERRED TO 21st Res Bn DATE 1.2.17 AUTHORITY Dis orders 69-22/1/17

PERMANENT FORCE ALLOWANCES TRANSFERRED TO 58th Bn DATE 21/7/17 AUTHORITY D.O. 165-29/9/17.

PLACE OF ATTESTATION Calgary Alta TRANSFERRED TO Mth Reg Dep DATE 21.8.17 AUTHORITY CL 324 14/6

DATE OF ATTESTATION 26/1/16 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE 1916	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No	1 Date	2 No	2 Date	3 No	3 Date	4 No	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
														34 10	34 10															34 10				Bal from Canada
Sept	30	1.04	30		30	10	3								33	8	6/9	49 92	15/9 30/9					19 47	4 87 19 47				43 81	23 29			
Oct	31	1.00	31		31	10	3	10							34 10	136	14/10	174	31/10					9 73	4 86				14 59	42 80			
Nov	30	1.00	30		30	10	3								33	234	15/11	329	30/11					4 87 34 07	4 86				9 73	66 07		45 50	20 57
Dec	31	1.00	31		31	10	3	10							34 10			355	22/12						31 65 63 69				31 99 63 76	68 54		61 00	7 54
1917			12	20			12	20																									
Jany	15	1.10	16	50											16 50															85 04				Hosp to 21st Res Bn 9/1/17 L.O. 69-22/1/17
" 16/31	16	1.00 1.10	17 16	60 30											17 20	80	30-1-17							14 60						102 64		75 00	27 64	
Feb	28	1.00	30	80											30 80	8	17-1-17							4 87 4 84					19 47	113 97		90	23 97	
March	31	"	34	10											34 10	203	26-2	332	29-3					9 73	1947				34 06	144 01		105	9 01	
Apl	30	"	33												33															147 01		120	27 01	
May	31	"	34	10											34 10	11 69	4/4 30/4							4 86 9 73					14 59	166 52		135 -	31 52	
June	30	"	33	—											33 —															199 52				
			333	30										34 10	367 40									82 72	85 16				167 88					

808293 : Pte Coe Frederick

DATE 1917	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
Forwd			333	30										34 10	367 40									82 72	85 16					167 88	199 52				
July	20	1 10	22	-											22 -																221 52				Transfd to 5th Bolo 25/4/17
	11		12	10											12 10																233 62				
Aug	20		22												22.					Chatham 5103 2/7						85				85	254 77				Trfd to ARD. 21/8/17
															423 50														168 73					
Aug	11	1 10	12	10											12 10																266 87				
Sept	30		33												33.					429 excd. 7/6	Dec 19 " 1/7					1 79	4 87			11 53	288 34		195 -		
																											4 67							

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	CR 3	DR 4	BALANCE
Oct.		~~288 34~~							288 34 195
	1 May	31 4 10		Dr. CR. 487 - 10.5.17 GBB Rowell	4 46				317 98
		34 10			4 46				
Nov	1 P	33.		A/C 5353. 66H & Bdsm 23/11/17	4 87				
Dec:	P.	34 10		A701823A Fort Litt 5.11.17	- 85				
				" " Aug 14/17	- 70				
				" " 30.7.17	- 95				
				" " 10-10-17	- 83				
				" " 11-9-17	1 71				
				" " July	- 93				
		67 10			10 87				371 21 240
Jan	P.	34 10		A/C 6905. 66H & Bdsm 18.12.17	9 73				
				Dr A/C 3843. do. 23.10.17	9 73				388 85 253
		34 10			19 46				
				A/C 4012. 66H & Bdsm 9/1/18	4 87.				
Feb.	P Ray.	~~30~~ 80		A/C 6031. do. 30/1/18	48 67				366 11 270
		30 80			53 54				
Mar	P Ray	34 10		A/C 2358. 2660 27.2.18	24 57				285
	Do. 28.1.18 660 2.2.18								
	Ptt. 30.1.18 to 11.2.18 12 days	8 76		A/C 2796 do. 19.3.18	5 36				379 04
		42 86			29 93				

Belgic 23.2.19 Halifax 1.3.19

AUDITOR [illegible] | PAYMASTER

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

M. OR S. M

REGT. No.

RANK Major NAME (IN FULL) COE Allan Pardee (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP —

ADDRESS

IS SEPARATION ALLOWANCE PAID? Yes DATE EFFECTIVE 1.4.19

TO WHOM PAID Assignee RELATIONSHIP Wife

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
c/o Bk of Montreal Edmonton		

Certified opening entries on this Ledger Sheet have been audited by [illegible] Date 8/3/19

ORIGINAL UNIT C.E.F.

IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 60.00 DATE EFFECTIVE 1.3.19

PAYABLE TO Mrs. E. D. Coe RELATIONSHIP

ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Banff Alta.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED PLACE Calgary DATE 31.3.19 REASON Demob AUTHORITY D/O 92 IF ENTITLED TO POST DISCHARGE PAY

MONTH	No. of Days	Rate	Pay and F.A. Amount	Other Credits		Total Credits	Acq. Col. No. 1 No.	Date	Col. No. 2 No.	Date	Col. No. 3 No.	Date	Cash Col. No. 1	Cash Col. No. 2	Cash Col. No. 3	Assigned Pay	Regimental Charges	Other Charges		Total Debits	Balance Debit	Balance Credit	Particulars or Remarks
Balance from previous account 28.2.19		5.00			- .	- .	#7	21/1/19	Bank	27/1/19			24 33	73 .				6 .		103 33	103 33		Missing chgd back 6 days @1.00 p Di
							a	a					a							110 00			at med. pd. by Ottawa
1.3.19 31.3.19	31	-	155	52 70		207 70	481	10/3					50					68	103 33	213 33	5 63		7 Subsistence from 1/3/19 to 31/3/19 31 d 1.70
																		.50					10 days P.A. overpd incl. $50.00
																		.17		82 00			10 days S.A. overpd " 15.00
1.4.19																		.15	5 63	87 63	87 63		10 days Sub " " 17.00
			155	52 70		207 70							74 33	73 -				148 00		295 33	~~5 63~~		S.O.A. 21.3.19
																							Dr 87.63 Carried fwd to W.S.G.
																DR. BAL. TO BE COLLECTED BY P. D. P. BRANCH					87 63		[signature]
				W.S.G.	S.A.	12-5-19							War Service Gratuity			W.S.G.	S.A.		S.A. Charges		Soldier	Dependt	
183 days				915 00	300 00	1215 00										305 00	100 00	87 63		492 63	522 37	200 00	Cheques 605122 & 605123 1.5.19
																67 37	50 00			117 37	455 00	150 00	Cheques 613910 & 613911 30.5.19
																150 00	50 00			200	305 00	100 00	Cheques 854815 & 854816 30.6.19
																155 00	50 00			205	150 00	50 00	Cheques 867236 & 867237 21.7.19
																150 00	50 00			200	—	—	Cheques 1097305 & 1097306 21.8.19
				915 00	300 00	1215 00										627 37	300 00	87 63		1215 00			

Certified opening entries on this Ledger Sheet have been audited by [illegible] Date

All Payments Due on This Account have been completed.

[signature]

Lt. Paymaster War Service Gratuity M. D.

754

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

Disp "R" S S Celtic 15.5.19.

M. OR S.

AUDITOR | PAYMASTER

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

REGT. No. 808293 RANK PTE NAME (IN FULL) COE. FRED. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? No | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Bank of Commerce Beaverlodge, Alta		

Certified opening entries on this Ledger Sheet have been audited by JEK Date 4-10-19

ORIGINAL UNIT C.E.F. 137th. | IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ — | DATE EFFECTIVE

PAYABLE TO — | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS —

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE Calgary | DATE 21.5.19 | REASON Demob. | AUTHORITY D.O. 143. | IF ENTITLED TO POST DISCHARGE PAY

BALANCE FROM PREVIOUS ACCOUNT

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	$	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
30.4.19							753	36	753	36																									753	36	Bal. Eng. L. P. C.
1/5/19 to 27/5/19	27	1.10	29	70	35 / 70	— / —					BOAT Rhyl.		TRAIN		CK.	117935	4 / 19	87 / 46	5		858	73															Clothing Allowance $35.00. 1st Payment W. S. G. $70.00
									134	70																					888	06					C. Reddall
			29	70	105	—	753	36	888	06							24	33	5	—	858	73									888	06					
					W.S.G.		S.A.								War Service Gratuity								W.S.G.		S.A.								Soldier		Dependt		
183 days					420	00			420	00																	70	—									1st Payment W. S. G. $70.00 Paid
																											6	60			76	60	343	40			Dr 6 days Tod 1st 22 – 27.5.19.
																							63	40							63	40	280	00			Cheque 854530 21.6.19.
																							70	00							70	—	210	00			Cheque 867235 21.7.19.
																							70	00							70	—	140	00			Cheque 1097304 21.8.19.
																							70	00							70	—	70	00			Cheque 1107804 21.9.19.
																							70	—							70	—					Cheque 1470337 21.10.19
					420	—			420	—													343	40			76	60			420	—					

Certified opening entries on this Ledger Sheet have been audited by JEK Date 18/6/19

All Payments Due on This Account have been completed.

C. Reddall Lieut.
Paymaster War Service Gratuity M. D.

1008

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

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticised.

Yes

19. Is the invalid fit for

(a) General service,	(Category A)	(~~Yes or No.~~)
(b) Service abroad, not general service,	(" B)	(Yes or ~~No.~~) Bi 6 months.
(c) Home service (Canada only),	(" C)	(~~Yes or No.~~)
(d) Temporarily unfit.	(" D)	(~~Yes or No.~~)
(e) Unfit for service in Categories A, B and C	(" E)	(~~Yes or No.~~)

20. It is certified that the invalid
(a) ~~Does require treatment.~~ (Give the nature of the condition and of the treatment required and its probable duration.)

(b) Does not require treatment.
(c) ~~Should pass under his own control.~~
(d) ~~Should not pass under his own control.~~
(Strike out condition not applicable.)

21. ~~It is recommended that the invalid be discharged.~~ (When not for discharge add special recommendation.)

Boarded for return to Canada
"Authority A.G. Telegram 9083 dated 11-11-18."

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

Thos Lyon Maj President.

PLACE Ripon — W H Willson Capt } Members

DATE 10-4-19

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned ..... understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness ..... Signed .....

Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

..... President

PLACE ..... } Members

DATE .....

APPROVED BY E Shouldice
Assistant Director of Medical Services.

APPROVED BY .....
Director-General of Medical Services.

DATE CAPTAIN, C.A.M.C., For A.D.M.S., CANADIAN TROOPS, [illegible] CAMP, [illegible]
10 APR 1919

DATE .....

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Ripon Yorks DATE Apr 10th 1919

1. 1 (a) Unit 21st Res (b) Regimental No. 808293 (c) Rank Pte
(d) Surname COE (e) Christian name FREDERICK
(f) Home address Calgary Alta
(g) Next of Kin Mrs M Louisa Coe (h) Relationship Mother
(i) Address of Next of Kin C TULLOW Co Carlow Ireland
2. Age last birthday Twentyeight Date of birth Apr 6th 1890
3. Enlistment, or Appointment (if an Officer) (a) Place Calgary (b) Date Jan 26th 1916
4. Personal description:
(a) Height 5 feet 8¼ inches (b) Weight Est. 160 lbs. (stripped) (c) Complexion dark
(d) Colour of hair brown (e) Colour of eyes grey (f) Identification marks, Scars, etc. On enlistment, old scar on left thumb. 4 large vaccine marks left arm.
5. Former trade or occupation Laborer.

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	Three	74

	Periods From	Periods To
Canada	Jan 26th 1916	Aug 15th 1916
England	Aug 25th 1916	Apr 15th 1917
France or other theatres of War	Apr 15th 1917	June 7th 1917
England	June 7th 1917	To Date

7. Original disease, or injury Flesh wound left ELBOW.

(a) Date of origin 3rd June 1917 (b) Place of origin France.
(c) Cause Shrapnell

M. F. B. 227.
400M.—11-18.
1772-30-117.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

(OLD ADHERENT SCAR LT. ELBOW) Slight Loss of function Left arm.

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

objective – Patient has 1¼ inch scar on external aspect of left Elbow. Scar ~~deeply~~ adherent to underlying tissues & on full extension of arm is put on tension at its middle. Scar slightly tender on pressure on external aspect. All movements in arm & elbow normal. "X Ray Report, Ripon 5-4-19. G. Sw. L. Elbow. 7-6-17 No evidence of fracture" sgd. P.W. Hampton Major Ramc

Subjective. Patient has pain in Left Elbow when left arm gets tired. Also when lifting heavy weights – above say 15 lbs. L. arm tires more quickly than the right.

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above?
(Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System no Cardio-Vascular System no (If pulse rate is abnormal, B. P. will be taken.) Genito-Urinary System no (Albumen and Sugar will be excluded.)

Special Senses no Respiratory System no Integumentary System no

Disturbances of Mentality no Digestive System no Muscular System no

Osseous and Joint Systems no Any other general condition no

10. (a) History (of the condition referred to in Section 9 (a).) Man says was wounded June 3/1917, M.S.S. Fort Pitt M.H. 7-6-17 To 9-6-17, G.S.W.L. Elbow, Thence to Rochesville, Travesend 9-6-17 " 16-10-17, do, do, Thence to Fort Pitt, 16-10-17 To 22-10-17, To Epsom 22-10-17 To 30-1-18, Boarded BT.

10.—(b) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (a).)

Calgary M.H. 11-4-16 To 7-5-16, Traumatic Architis. no disability.

(c) (Here give a description of wounds, scars and deformities.

old 1½ inch adherent scar Left Elbow.

11.—(a) Did the disabling condition have its origin before enlistment? No.

(b) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

Not applicable

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? No –

The regimental documents will be referred to.
(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 6 months.

14. Treatment (Case reports, general or special, should be secured and attached where possible.)

Shrapnel Removed, + Medical & Surgical Hospital Treatment.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? No –
(If the answer is "yes" state nature of treatment required and probable duration)

16. Can the former trade or occupation be resumed? Yes –
(If not, briefly state why)

17. Recommendations BT –

T. M. Ross Capt. Cam. C
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned F. Coe have heard the description of my disability and present condition read, and am satisfied (~~or not satisfied~~) with it. (If dissatisfied, statement should follow.)

I complain in addition of

Frederick Coe Rank.
Signature of invalid examined.

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

1. Triplicate Attestation Paper (M F W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122.)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39) (Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing } Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group a
Checked by No. 28
BHS.
Date 25/4/19

6355

War Service Badge
Class "A" No. 249024

6355
27/1/39
BPC 131829
M

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 808293
2. Rank. Pte
3. Name. COE Frederick
4. Unit. 21st 50th 137th
5. Date of Discharge MAY 21 1919 Place CALGARY
6. Reason for Discharge Demobilization

25 B1 7
Mother C of E

7. Authority. D.D. Order #165 d/23-5-19
8. Proposed Residence after Discharge Calgary

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W.?

Fred Coe
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place CALGARY

Date MAY 21 1919

MEDICAL DOCUMENTS FORWARDED TO S. C. R. OR B. P. C. —ON— 29. 5. 19

Embkd Dept-Calgary May 7
Debkd Halifax MAY 14 19

Signature J H Colville Lieut
(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.