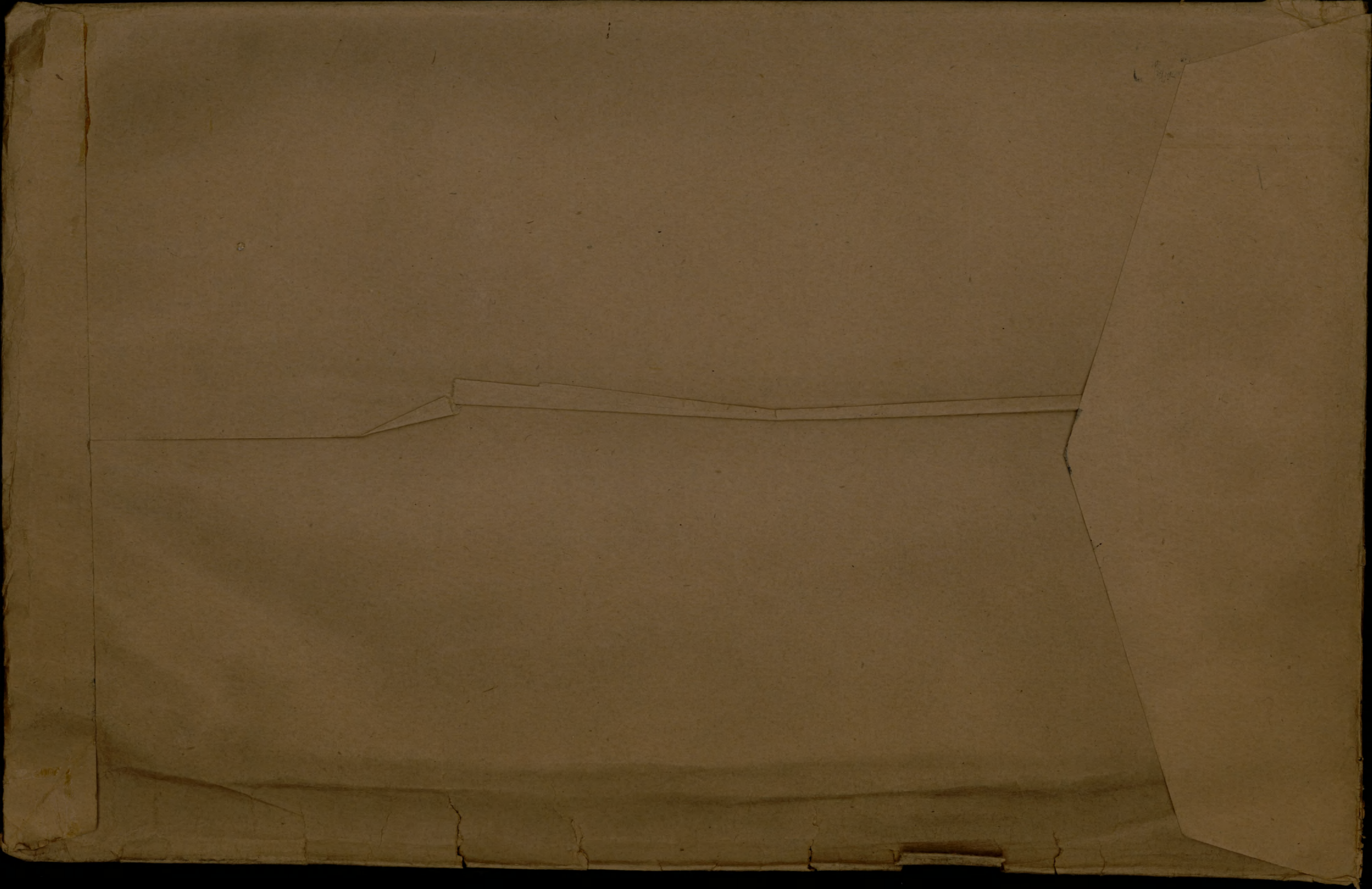
Qa 5-5-19

REGIMENTAL DOCUMENTS

NAME COPE JOHN WILLIAM Spr REGT. NO. 865476 UNIT 3rd Can Div Sig Co FILE NO. 4

	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)		~~[illegible]~~ 21.			DEATH
	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
S	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)		M		35407	
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1	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
1	MEDICAL EXAMINATION (M.F.W. 129)					
1	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)		H			
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
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	FCD #3					
1	CADC 5009A					
1	MFW 67					
2	Cascaded					
2	[illegible]					39 - 5
2	[illegible]					17 - 5
1	H+A Card					9 - 5
						1



Signal Training Depot

Canadian Engineers

181st Overseas Battalion C E F

ATTESTATION PAPER.

ORIGINAL.

No. 865476.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Cope.
1a. What are your Christian names?	John William
1b. What is your present address?	424 14th Street. Brandon. Man, Canada.
2. In what Town, Township or Parish, and in what Country were you born?	Winnipeg. Man. Canada.
3. What is the name of your next-of kin?	Charles William Cope
4. What is the address of your next-of-kin?	424 14th Street Brandon, Man. Canada
4a. What is the relationship of your next-of-kin?	Father.
5. What is the date of your birth?	Jan 31st 1897.
6. What is your Trade or Calling?	Post Office Clerk.
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, John William Cope, 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 W Cope (Signature of Recruit)

Date 17th April 1916. W H Legge (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, John William Cope, 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 W Cope (Signature of Recruit)

Date 17th April 1916. W H Legge (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 Brandon. Man. this 17th day of April 1916.

A Hurley J.P. (Signature of Justice)

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

Description of John William Cope, on Enlistment.

Apparent Age 19 years -- months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height		5 ft 11 ins.
Chest measurement.	Girth when fully expanded	39 ins.
	Range of expansion	3 ins.

Complexion Fair

Eyes Brown

Hair Fair

Religious denominations.

Church of England	
Presbyterian	X
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).

Vision R. Eye 20/20

" L. Eye 20/20

Hearing R. Ear H

" L. Ear H

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 17th April 1916. J H Edmonds

Place Brandon. Man. Lieutenant. A M C

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:—

MOBILIZATION MEDICAL BOARD APPROVED

MAR 21 1917

J H Edmonds PRESIDENT

Member

Member

CERTIFICATE OF OFFICER COMMANDING UNIT.

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

(Signature of Officer)

Date 17th April 1916. Lieut: Col: 181st Overseas Battalion C E F

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge
Class "A" No. 155835

THIS IS TO CERTIFY that No. 865476 (Rank) Sapper

Name (in full) COPE John William enlisted in

the 181st Canadian Infantry Battalion

CANADIAN EXPEDITIONARY FORCE at Brandon, Man on the Seventeenth

day of April 1916

HE served in 3rd Canadian Divisional Signal Co.

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

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

Age 22

Height 5 ft. 11 in.

Complexion fair

Eyes brown

Hair fair

Marks or Scars Tattoo French Red Cross nurses head left forearm

J W Cope
Signature of Soldier

Date of Discharge

No. 2 DISTRICT DEPOT
MAR 30 1919
TORONTO

J Thos Capes
Issuing Officer

For
O.C. No. 2 District Depot.
Rank

Date MAR 30 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.

DISCHARGE CERTIFICATE

CANADIAN EXPEDITIONARY FORCE

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. 865476 Rank Spr. Surname Cope
(Given name in full) John William

Unit or Corps 3rd Can Div Sig Co Birthplace Winnipeg Man

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

1. **GENERAL DESCRIPTION:**

Physique Good Weight 150 2 Standard lbs. Height 5 ft. 11 in. Colour of Eyes Brown

Nutrition Good

Pulse 74 Reg

Condition of arteries Good

Vision Rt. 6/12 Left 6/12

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

Identification marks, scars, or deformities.
(Give cause and date of origin).
Tattoo. French Red Cross Insignia Left Forearm. France 1917

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 Sytem 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 Yes.

3. **If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.**

Gassed. Shell. 4-11-17. & 1-12-17.

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

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Halford Camp (Overseas)

Date 28-2-19 Signed [signature] 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 [signature]

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

THIS SECTION FOR USE IN CANADA—

Examined at .....(Canada)

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

I hereby certify that I have read, or have heard read, the above lescription 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 bv Medical Board.)

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

M.F.W. 129.
1088 (D.P.) 500M-11-18.
1772-39-1142.

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 ..... Signal Training Depot.
181st. Overseas Battalion, CEF.

(2) Regimental Number 865476

(3) Full Name of Soldier ..... Cope, John William,

(4) Place of Birth ..... Winnipeg, Man.

(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 ? .....

(8) Have you any children ? .....

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

Also their names and ages .....

M. F. W. 67
200M.—2-16
1772-39-954

(SEE OTHER SIDE.)

(9) Is your Father alive ? Yes. Charles William Cope,

If so, state name and address 424 14th. St. Brandon, Man.

(10) Is your Mother alive ? Yes.

If so, state name and address Mrs Elizabeth Cope,
424 - 14th. St. Brandon, Manitoba, Canada.

(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.

Father.

(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.

D W Beaubras Lt-Colonel
Officer Commanding.
181st Overseas Battalion C.E.F.

Date 19-10-1916.

27

Signal Training Depot.

ORIGINAL

ORIGINAL

865476

MEDICAL HISTORY SHEET.

Surname Cope, *Christian Name* John William.

Examined { on 17th day of April 191 6
at Brandon. Man.

Birthplace { City or Town Winnipeg. Man.
County

Apparent age 19 years.

Trade or occupation Post Office Clerk.

Height 5 Feet 11 Inches.

Weight 145 Lbs.

Chest measurement { Minimum 36 inches.
Maximum expansion 3 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right. Left. X
Number 1

When Vaccinated last Childhood.

(*a*) Marks indicating congenital peculiarities or previous disease None

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

Approved by J W Edmison

Rank Lieutenant. A M C M.O.

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

MOBILIZATION MEDICAL BOARD APPROVED FIT

Date.	Result.	Vaccinations.	
27/3/17	Pos:	R Wrayton Capt	M.O.
			M.O.
			M.O.
			M.O.
			M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.	
1916			
June 21	positive	D W Wallace	M.O.
July 2	"	D Wallace	M.O.
TAB 27/3/17		R Wrayton Lt	M.O.
31-5-1917		TAB 2/6.	

Vision R. Eye 20/20
" L. Eye 20/20
Hearing R. Ear
" L. Ear

Enlisted on 17th *day of* April 191 6 *at* Brandon. Man.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	181st Overseas Battelion C E F	865476.		17.4.16
Transferred to CANADIAN ENGINEERS				8/3/17

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

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

S. M.O.

M. F. B. 313.
400M.—1-16.
H. Q. 1772-39-439.

Christian Name John William.

Surname Cope.

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 inoculations.	Signature of Medical Officer.

P. 880.

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 John William 2. Surname Cope

3. Rank Sapper 4. Original Unit 181 Bn. 5. Reg. No. 865476

6. Address, in full, to which future payments of gratuity are to be forwarded 424-14th St Brandon, Man.

7. ~~Date of enlistment in the C.E.F.~~ 17 April 16

8. Names of dependent, if any, to whom Separation Allowance is being issued or was being issued, immediately prior to your discharge not applicable

9. Relationship of such dependent not applicable

10. Address, in full, of such dependent not applicable

11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? not applicable

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.

16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department Yes Post Office Dept. Brandon.

17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? No

5434. Wt. /30P. 250,000(8). 2/19. S.O., F.Rd.

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?

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?

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

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?

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: J W Soper.

Place of Residence: Brandon

Declared before me at: Wetley Creek

This 24th day of Feby 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.

A Leavitt Maj

POST DISCHARGE PAY.

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

Certified Correct.

District Paymaster.

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) COPE J N.

REGIMENT Can Dent Corps RANK Capt. No. 6547

Date of Examination in England

Date of Examination in France 12/1/19.

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 6
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT ?

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
- (*c*) In France

Signature of Dental Officer [signature]

Signal Training Depot.

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

War Service Badge Class "A" No.

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

Casualty Form—Active Service.

Unit, Regiment or Corps 181st Overseas Battalion C E F

Regimental No. 865476 Rank Private. Name Cope, John William.

C. E. F.

Enlisted (a) 17-4-16. Terms of Service (a) War ~~&6mos. after.~~ Service reckons from (a) 17-4-16.

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) Post Office Clerk & Lineman

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.	29-4-17.	
		Disembarked.	England.	7-5-17.	
8-5-17	C.E.T.D.	Taken on Strength of C.E.T.D., from Canada.	Crowboro.	7-5-17.	Part II Order # 109.
12 JUL 1917	C.E.T.D.	Struck off Strength of C.E.T.D. having proceeded to Sig Pool France	CROWBOROUGH	12.7.17	Part II Order No. 164 F. Aitch Lieut. C.E. for Adjutant, C.E.T.D.
15-7-17.	6. B. N.	To D. A. Base in	France	13/7/17.	R/by Dy 20-7-17.
22/10/17	8C Pool	2/a to 3° Can Div Sig Co	Sig. Co	16/10/17	R.R. 70 P.82
"	Do.	T.O.S. 3rd Can Div Signal Co	Field.	15-10-17	Do. P.H. 1/S 13.1917
21-10-17	0C 3rd Coy	Joined Unit.		16-10-17.	B213.
4-11-17	Do	Gassed. To Hospital		3-11-17.	B213.
3-11-17.	6 C.C. Amb	Shell Gas W. adm + trans	to CJC	3-11-17.	A36/B24.
	Do.	Shell Gas W. adm + trans	to 44 CCS.	3-11-17.	Do.
4-11-17.	14 Gen H.	Gassed. W. M. adm.		4-11-17.	W3034/B2254
4-11-17.	3 Aust. CCS	Gassed Shell. adm 3-11-17. To 16 A.T.		4-11-17	A36/B2980.
1-12-17	Sig Dpt RE	arrived from Boulogne at abbeville		30-11-17.	R&R82.

(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.

CERTIFIED CORRECT. 23 JUL 1917 CANADIAN OVERSEAS EXPEDITIONARY FORCE

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				
16-11-17	1 Con Dep.	Wounded adm.		16-11-17	W3034/B8364.
8-12-17	Sig Dep R.E.	Left to CCRC		2-12-17	R+R86
27-11-17	1 Con Dep.	Fit. To 3 Rest Camp		27-11-17	W3034/B11.
9/12/17	OC 3rd Cy	Joined from CCRC		5-12-17	B213.
16/11/17	14 Gen H.	Gassed to 1 Con Depot.		16/11/17	W3034/Ex14.
10-8-18	OC Unit	Granted 8 days leave to France		5/8/18	B213. P.38.1918
24/8/18	Do	Rejd. Unit from leave Field.		18/8/18	B213.
7/12/18	Do	Gr. 14 days leave to UK.		7/12/18	B WS 857.
4-1-19	Unit	Rejoined from leave		2-1-19	B213.
10/2.19	Can Emb Ktn Camp Havre.	Proceeding to England on		10/2.19	N/R 10.2.19 P.2.O. No. 9 of 1919.

A Brander
Lieut.
for Lt. Col., A.A.G.,
Canadian Section

19/3/19. 3 Can Sec Com FC on
Div Sig Proceeding Canada
17/3/19

R B Smith
3RD CAN. DIV. SIGNAL CO.

MAR 19 1919 O.S. T.O.S. No. 2 DISTRICT DEPOT, TORONTO 1919 PART II D.O. 101

MAR 30 1919 S.O.S. (DISCHARGED FROM H.M.S.) No. 2 DIS. DEPOT, PART II D.O. 101

W C Cohen

For O.C. No. 2 Dis... Lieut.

Form R 122.
2353—100M—9-12-16.

LTR

Rank Name COPE, John William Reg'l No. 865476

Unit No.12.Sig.Dft.to CETD. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Brandon, 17th April 1916. Place of Birth Winnipeg. Man.

Name and Address, Next-of-Kin Charles William Cope.
424-14th Street, Brandon. Man. Canada. Relationship Father.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

H. W. V., Ld.—9546-16.

N/E. R.B. No. 7435
File R.L.
Catedr. CAN.OR

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 7-5-17 S.S. OLYMPIC.			
8-5-17	CE T.D.	T.O.S.	Crowboro	7-5-17	Pt II 109. A.F.B. 103 ckt 18-7-16 P.
12-7-17	"	SOS. to Can Signal. Pool	"	12-7-17	~ 164. Pt II 61 d/20 7/17 T.O.S. Sig Pool
26.10.17	3rd Sig Co	TOS from Sig Pool	Spr Field	15.10.17	-73 (SOS pt II 0.82 Can. Sig. Pool d/- 29 10/17
8.11.17	"	Adm. #3 Australian	Cas. Cleary Stat.	3.11.17	A.58. Shell Gas
12.11.17	"	" #14 Gen Hos Wimereux		4.11.17	A.61 " "
24.11.17	"	Adm #1 Conv. Dep.		16.11.17	A.72 " "
5.12.17	"	Discharged to Rest Camp		27.11.17	A.81 "
		M.M.			
18 3 19	Do	SOS to Canada	Spr Bram.	18.3.19	Do 30
		SL. 29 DA 'I. effect date		19 3.19	

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.	
15.8.19.	3. C.D.S.O.	Awd. M.M. Auth. L.G. 3144 30		d.13.7.19.	a.D.5.	

FORM D M S 1300

SURNAME: Cope -

CHRISTIAN NAME OR NAMES: J. W.

REG. NO: 865476.

RANK: Spr -

UNIT: 3 Sig -

CO.: C. E.

TROOP:

BATTY:

HOSPITAL

DATE OF ADMISSION

3 Aust Gas Clrg Stn — 3-11-17.
14 Gen. Wimereux 4-11-17.

1. # 1. Conv. Dep. B'logne. HOSP. 16-11-17.

2. HOSP.

3. HOSP.

4. HOSP.

DIAGNOSIS

Shell - Gas. RW.

1.

2-

3.

DISPOSITION

9-11-17 - a58(2) -
13-11-17 a61-2.
26.11-17. a72.
6.12.17. A81. 2.

Dis. to 3. Rest C. 27.11.17.

DATE

REMARKS

EPITOME OF HOSPITAL TREATMENT

	HOSPITAL	ADM.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

Name: Cope. J. W.

RANK 865476. Spr.

UNIT 3rd D.S. Coy. C.E.

AWARD M. M.

AUTH L.G. 31430. 3-7-19.

No. 863476 Rank Spr. Name Cope, J. W.

~~T.O.S.~~ Trans. from 181 st. Bn. 18-3-17 D.O. 80 of 21-3-17. Unit 2nd. Field Troop Can. Engineers

M.D. 10

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917	1917			
Mar. 18	Mar. 31	c		
Apr. 1	Apr. 5	m.	Trans to Sig Tr. Depot Ottawa.	D.O. 94 of 4. 4. 17.

Sailed from Halifax per S.S. Olympia 29/4/16.

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Post Office Clerk. RELIGION Presbyterian

DESCRIPTION.

APPARENT AGE 19. YEARS MONTHS

HEIGHT 5 FEET 11 INCHES

CHEST MEASUREMENT 39 INCHES EXPANSION 3 INCHES

COMPLEXION Fair. EYES Brown HAIR Fair

DISTINGUISHING MARKS Nil

MEDICAL EXAMINATION. PLACE Brandon, Man. DATE Apr, 14th, 1916

Present Address 424 - 14th St. Brandon, Man.

649-C-16/2

SURNAME. Cope.

M. M.
L.S. # 31430. 3-7-19

CARD NO. 92

SOS Dis 30-3-19
Q 0.101 Fol. 4-19
Demob. 2. P D

CHRISTIAN NAMES John William

REGL. NO. 865 476 RANK ~~Pte~~. Sapper

UNIT ~~181 st~~. Sig. Train. Depot (12th RD)

~~Bn~~

FORMER CORPS nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Cope Charles William

RELATIONSHIP TO SOLDIER Father.

ADDRESS 424 - 14th. St. Brandon Man

COUNTRY OF BIRTH Canada Winnipeg Man DATE Jan 31st. 1894

PLACE OF ATTESTATION Brandon Man. DATE Apr. 14th. 1916

Trans. from 181st to Sig. T. D (12th RD) Auth. Sig. T. D (12th RD) U.R. 24/4/17.

L. L. 94504. M. & D. 6512. M. F. W. 22. 250M.—2-16. H. Q. 1772-39-333.

R/6 27-3-19 292/15 Sgt.

Number 865476 Rank Pte

Surname COPE

Christian Name John William

Units C.E. Theatre of War France

Date of Service 13-7-17

Remarks

Latest Address ~~424 - 14th St~~ 312 - 20th St.
Brandon Man

Roll No B Page 19376

200m.-6-21.

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

868—D.P.—40M-1-12-19.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
158(2)	3 Aust C. C. Stn:	3/11/17	Shell Gas.
A61-2	No 14, Gen. Wimereux	4-11-17	" " (Can Engrs)
A72.	1 Leonwt. Depot Boulogne	16-11-17	" " 17.12.17
A81-2	Dis. to 3 Rest Camps	27-11-17	" " (Can Engrs)

NAME Cope John William

REGT'L No. 865476

H. Q. FILE No. 649.

RANK AND CORPS Spr. 3rd Div. Signal Co. (Form 181 C.

FOLLOWS 2 Bn

No.

FOLLOWS

CABLE NO.	DATE	NATURE OF CASUALTY
8-3 M 6324	11-11-17	Adm. to No 3 Aust. Cas. Clg. Stn. Nov. 3rd 1917 Shell Gas

L. L. 26138. M. & D. 8207.

M. F. W. 42—50M.—8-17.
H. Q. 1772-39-893.

No. 865-476 RANK Pte / L/Cpl NAME Cope, John William

T.O.S. 17-4-16 Des/ UNIT 181st Battalion C.C.D.

of 17-4-16

M.D. 10

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
apr 17	apr 30	—		
May		—		
June		—		
July		—		
Aug		—		
Sept		—		
Oct		—		
Nov		—	L/Cpl 1-11-16	A.O. 230 of 1-11-16
Dec		—		
1917	1917			
Jan		—		

(over)

Feb
Mar

UNIT SAILED

APR 1 8 1917

FORM R. 149.
7106—250m—7/2/17.

John William

Name COPE. Rank Spr Reg. No. 865476

Unit ~~7 C. I. B.~~ 3rd Signal Coy OSB

Next of Kin Canada.

Date		Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917							
3	11	No 3 Aust. C. C. S.		Shell Gas	A58	M6374	7161
4	11	No 14 G. H. Wimereux		do	A61	Dia	15939/3
16	11	No 1 Cond Dep Boulogne		do	A72	Dia	16421/2
27	11	Dis to 3 Rest Camp		do	A81	Dia	16809

WAGTRI

WAGTRI

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

No. 865496 RANK Pte. NAME Cope, J. W.

T. O. S. 6-4-17 UNIT 4th Div Signal Training Depot.
D.O 83 of 9.4.17

M. D. H. Q

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917 April 6	1917 April 30	✓	Provisls. 24-4-17	D.096 of 24-4-17

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

C 9772

Date of Assignment May 1st / 17

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

20			

8L-9C.20 BAH

ap 95

PARTICULARS OF SEPARATION ALLOWANCE

No. 865476.

Rank Sapper Promoted Reverted Discharge

Soldier's Name J. W. Cope.

Battalion Sig. Draft.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name C. W. Cope.

Address 424-14th St Brandon Man.

Change of Address

1

2

3

4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total	
Dec 31			160	160	
Jan	S 70673		20	20	Cu
Feby	D 98470		20	20	
March	A 116634		20	20	✓
Apr	O 8061		20	20	
May	M 15135		20	20	
June	G 26656		20	20	
July	S 30076		20	20	
Aug	G 39959		20	20	Mo
Sept	L 41760		20	20	
Oct	M 49673		20	20	
Nov	D 57729		20	20	
Dec	R 65664		20	20	
JAN	M 70264		20	20	
Feb	M 81456		20	20	
MAR-APR	H 88263		20	20	
			~~20~~	~~20~~	
			460	460	

3686 J 47

REMARKS

A/c Closed 31-3-19

Ret'd per Cedric

Date 26 3/19 F.X. 4 4/19

Mdl 2 Clerk Has

85673

AUDITED

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7993.

CONSOLIDATED

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400M—6-17—1772-39-1141
L. L. 22520—M. & D. 7483.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
18m.—4-17.
1772—39—819.

Sheet No. 2. C. W. Cope (Assignee)

Name of Soldier Cope, J. W.

PAYMENTS. 865476 - Sapper - Sig. Draft.

L. L. Job 19227—M. & D. 7814.

$20 MAY 1 1917

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June		D18104	40	B.
July		X20346	20	Cu 20
Aug.		D28239	20	D
Sept.		D. 35191	20	D D 35192 Cand'd E.S.
Oct.		E46461	20	
Nov.		W52353	20	160
Dec.		A45215	20	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

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.				

L.L. 19226—M. & D. 7814.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
25m—4-17.
H. Q. 1772-39-819.

To Whom C. W. Cope.

Address 424- 14th St.
Brandon
Man.

Rate $20-

MAY 1 1917

By Whom Assigned Cope. J. W.

Regtl. No. 865476-

Rank Sapper.

Corps Sig. Draft.

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 7

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-920.

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

Casualty Form—Active Service.

Unit, Regiment or Corps #12 Sig. Dft. to C.E.T.D.

Regimental No. 865476 Rank Spr. C. E. F. Name Cope. John William

Enlisted (a) ..... Terms of Service (a) ..... Service reckons from (a) .....

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				
-15. 8.19.	3.C.D.S.Co.	Awd. M.M. Auth. L.G. 31430 d./3.7.19.			A.O. 5.

O.C. Sanguinetti
~~For D. of R.~~

(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				

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. 89)
   (Enclosed in special envelope (260M)).
9. Copy of Dis. Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment Statement & M.G. Form (D.O.S. 2), and Clothing
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 13
Checked by No. 9
Date 12-3-19

War Service Badge
Class "A" No. 155835

7-7-39 DA-I
OG-6

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 865476
2. Rank. Spr.
3. Name. Cpl John William Cope
4. Unit. 3rd Edn Div Sig Co
5. Date of Discharge MAR 30 1919 Place Toronto
6. Reason for Discharge Demobilization
7. Authority. No. 2, D.D., Part II, D.O. No. 101
8. Proposed Residence after Discharge 424 - 14th Street Brandon Man

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. ?

J W Cope
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place No. 2 DISTRICT DEPOT
Date MAR 30 1919 TORONTO

For
Signature O.C. No. 2 District Depot.
(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY	* ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:-	1/5/17.	EFFECTIVE DATE:-	
AMOUNT:-	20 00	AMOUNT:-	

NAME:- COPE John William

NUMBER:- 86476

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 E.W Cope (Father)
424. 14 th St. Brandon Man.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Sapper

UNIT AND TRANSFERS

ORIGINAL UNIT:- C.E.T.D

DATE ACCOUNT FIRST OPENED:- 1/5/17

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
MR	1-6-18	19 6 18	3. D.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
30/1/19	Lewis	Falls.	9 33				
8/2/19	963		~~11~~ 66				
14/2/19	~~1204~~	~~Beamish~~	~~21 33~~ 38 32			2 P.C. Bal Rs. 10 97	28/2/19

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE:- Leam & Car. 28/2/19 - K-3178-MB-29-3-2nd Leg Co. MD 2. P. O.

MONTH 1918	PARTICULARS	CR 1	CR 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Jan 31	Bal fwd.								5 5 32		
Apr	P Pay	33		a.p.				20			
				SR 186 P/C 3 DDCO	3 5 7				64 25		
May	P Pay	33 34 10		a.p.	5 5 7			20 20			
				SR 713 P/S 3 DDCO	8 03						
				SR 919 P/S ✓	4 46				66 36		
		34 10			17 49			20			
June	P Pay	33		b.a.p.				20 -			
				AR 1282 2 D Sig 7/6	4 46						
				" 1533 " 9/6	3 57				71 33		
		33			8 03			20			
July	P Pay	34 10		b.a.p.				20			
				AR 1803 2nd D Sig 5/7	3 57						
				" 1790 " 9/7	4 46				77 40		
		34 10			8 03			20			
Aug.	S.P.	34 10		b.a.p.				20			
				AR 2288 3rd D Sig. 4/8/18	80 30						
				" 2482 " 25/8/18	7 14				4 06		
		34 10			8 7 44			20			
Sept	S.P.	33		b.a.p.				20			
				D'A R 3013 " 22/9/18	3 57				13 49	a/c agreed.	
		33			3 57			20			
OCT	S.P.	34 10		b.a.p.				20			
				AR 1722. 7 Can Inf Bgd. 4.10.18	7 46				20 13		
		34 10			7 46			20 -			
Nov	S.P.	33 -		Cap				20 -			
				AR 4374. 15/11/18 3 CA Sig.	16 79 -						
				" 4995 3 Can Mach Gn 5/12/18	18 64 -						
		33			35 45			20			

Reference

NUMBER 865476 RANK NAME Cope J.W

C.S R.O. DEPT.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1.	DR. 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
		33 .			35 45			20	20 13		
				ar 4898. 3 Aw Sq Co. 3/12/18	3 3 .						
Dec	Sgt	34 10		Capo				20			
Jan	Sgt	34 10		Capo				20	22 15		
		101 20			39 18			60			
Feb	Sgt.	30 80		C.A.P.				20	32 95		
				ar 5361 7 C.B 4/1/19	5 60				27 35		
				" 6450 " 24/1/19.	9 33						
				" 11704 CCC 14/2/19	24 33						
				" 963. C Sub C 10/2	39 24 4 66				10 97		
				" 5528. CCC 10/3 Club on L/Pc	2 43				13 40		
		30 60			46 35			20			

S.O.S. to Canada 2/3/19
SL 39.

38.32
27.34
10.9 7 Dr.

"CEDRIC" 27-3-19

DISPERSAL "I" 6.2624.

AUDITOR | PAYMASTER

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

M. OR S. S.

REGT. No. 665476 RANK Spr. NAME (IN FULL) HOPE, J.W.

30.

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE

Nil.

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. Can. Engrs. — IF IN P.F. WHAT UNIT? — (BLOCK LETTERS SURNAME FIRST)

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 17/4/16 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 20.00 — DATE EFFECTIVE Closed by Ottawa 31.3.19.

PAYABLE TO C.W. Hope — RELATIONSHIP - Father. — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS 424 - 14th St., Brandon, Man.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE Toronto — DATE 30-3-19 — REASON Demob — AUTHORITY DC 101 — IF ENTITLED TO POST DISCHARGE PAY Yes

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.			TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	ACQUITTANCE ROLLS COL. NO. 1 DATE	ACQUITTANCE ROLLS COL. NO. 2 NO.	ACQUITTANCE ROLLS COL. NO. 2 DATE	ACQUITTANCE ROLLS COL. NO. 3 NO.	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																																						T.O.S. 19/3/19 D.O. 1.0/-
28.2.19																									10	97					10	97	10	97			SUBS. TO D.O.
3/19 3 4/19	34	1.10	37	40																	Endorsed on L.P.C. 243															Bal. Emp. L.P.C.
					35	00																															1.3.19 - 3.4.19 - P&Q
					70	00																					20	00									Clothing Allowance
																	487	500																			1st Payment W.S.G.
									142	40	Cheque	D79511					99	13															131	43			A/P March 1919
																											70	00									Boat Train Expenses
																																					W.S.G. paid as above
	54																Watt												440								Overcredited 4 days S.R.
153/46	350								350								Wm 30																74	40	275	60			1st W.S.G. Paid by #2 D.D.
																	Apr 29	247849					70	-									144	40	205	60			W.S.G. PAID IN FULL
																	May 27	248187					70	-									214	40	135	60			CAPTAIN FOR PAYMASTER WAR SERVICE GRATUITY
																	AR 72 June 25	665817					70	-									284	40	65	60			
																	AR 91 July	1897892S					65	60									350	-					
					350	-																	345	60			4	40					350	-					

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1890.

P. 559

Married or Single: Single

Place of Birth: Winnipeg

Name and Address of Next of Kin: Charles William Cope.
424 - 14th St. Brandon Man Canada

Relationship of Next of Kin: Father

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. 865476 Rank Spr. Name Cope John William

If in Permt. Corps What Unit — Unit C.E.T.D. 12 Sig Dft — Transferred to — Date — Authority

Permanent Force Allowances — Transferred to — Date — Authority

Place of Attestation Brandon — Transferred to — Date — Authority

Date of Attestation 17th april 1916 — Transferred to — Date — Authority

Assigned Pay Monthly $ 20.00 Date Effective 1/5/1917.

Payable to Mr C.W. Cope. 424. 14th St. Brandon. man. Canada Relationship Father

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	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.	Acquittance Rolls 1 Date	Acquittance Rolls 2 No.	Acquittance Rolls 2 Date	Acquittance Rolls 3 No.	Acquittance Rolls 3 Date	Acquittance Rolls 4 No.	Acquittance Rolls 4 Date	Cash Payments 1	Cash Payments 2	Cash Payments 3	Cash Payments 4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
														17 49	17 49																17 49				L.P.C. Canada.
May	31	1.00	34	10											34 10													20		20	31 59				
June	30		33												33	412 15/5	549 31/5							9 73	4 87			20		34 60	29 99				
July	31		34	10											34 10													20		20	44 09				
Aug	31		34	10											34 10	243 41								4 86 4 87				20		29 73	48 46				
Sept	30		33												33													20		20	61 46				
			168	30										17 49	185 79									19 46	4 87			100		124 33					

May 1. 17 - 31.8.18.
— . @ 1.10 =

865476. Spr. Cope J. W.

DATE	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
MONTH					CR. 1			CR. 2			PARTICULARS			DR. 1	DR. 2
Oct. 1.					61 46										
											AR 5061 Can Sup Dep 22-8-17.			2 68	
											5007 Can Sup Dep 15/8/17			2 67	
											4905 " " " 1/8/17.			2 68	
											4950 Signal Depot RE 8/8/17.			2 68	
Oct.		PP.	34 10											10 71	
			34 10												
Nov.											5501. Can Sig Dep 26/9			2 68	
											5306 " " 23/9			2 67	
											5198 " " 5/9			2 68	
											14250 " " 31.10.17			2 68	
											5647 " " 10/10/17			2 68	
		PP.	33 00								A Pay.				
											356 CETO		17-7-17	2 44	
											5403 Sig Dept.		29-9-17	2 68	
											5134 " "		28-8-17	2 68	
											7435 ASB.		20-7-17	1 79	
											7439 "		25-7-17	2 68	
Dec 1918		PP.	34 10								A Pay.				
			67 00											25 66	
Jan		" "	34 10								A Pay.				
											6158. Boulogne		30-11-17	2 68.	
											5982. "		22-11-17.	11 60	
			34 10											14 28	
Feb.		"	30 80								Cash.				
											2338 3rd Div Sig Co		13-12-17	4 46	
											2210 "		7-12-17	3 57	
			30 80											8 03	
March		PPay	34 10								to Cash				
											SN 2996		3/2/18	3 27	
											SN 2934		3/1/18	4 46.	
											W99 3 D Sig		18/1/18	3 27	
											SN 2622		17/2/18	3 Dsig 8 03	
			34 10								SN 2237		9/2	3 27	
														23 20	

DATE	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 CR DIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
MONTH	DR3	DR4	BALANCE	DEFER PAY	SEE ALLOT ENG.				PARTICULARS				CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR3	DR4	BALANCE
			61 46								34 10					33 20			20	
											34 10		On 3626 21/3 33 Sig			4 46			20	55 32
																27 66				
			20 64 85																	
			20																	
			20 66 29																	
			40																	
			20																	
			66 11																	
			20 30 80																	
			20 96 91																	
			28 03																	
			6888																	
			20																	
			20																	
			20																	