C.E.F. REGIMENTAL DOCUMENTS

NAME COPPIN EDWIN JOHN HARRIS REGT. No. 542427 UNIT 18 BN H. Q. FILE No. 35677

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
	ATTESTATION PAPER (M.F.W. 23, 133 or 51)					DEATH
	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					CATEGORY
	TRAINING HISTORY SHEET (M.F.W. 113)					
	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 173)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					CATEGORY
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					M.U.
	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
	CARDS					
	PAY-SHEETS					

M.F.W. 2589
20M-4-46 (9113)
H.Q. 1772-39-1377

Cycle

Original

ATTESTATION PAPER.

No. 54247

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ..... COPPIN
1a. What are your Christian names? ..... Edwin John Harris
1b. What is your present address? ..... 1452 Dundas St. London Ont
2. In what Town, Township or Parish, and in what Country were you born? ..... Bodmin, Cornwall, England
3. What is the name of your next-of kin? ..... John Harris Coppin
4. What is the address of your next-of-kin? ..... St. Teath, Cornwall, England
4a. What is the relationship of your next-of-kin? ..... Father
5. What is the date of your birth? ..... Dec 14th 1891
6. What is your Trade or Calling? ..... Butcher
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? ..... No.
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? ..... Yes.
12. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force? ..... Yes.

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Edwin John Harris Coppin, 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.

H. Coppin (Signature of Recruit)

Date 11th Dec. 191 6 H. J. Myers (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Edwin John Harris Coppin, 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.

H. Coppin (Signature of Recruit)

Date 11th Dec. 191 6 H. J. Myers (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 London Ont this 11th day of December 191 6

W. H. Chittick (Signature of Justice)

M F. W. 23
750M—3-16
H. Q. 1772-89-341

Description of Edwin John Harris Coppin on Enlistment.

Apparent Age 25 years — 0 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height		5 ft. 6 ins.
Chest measurement.	Girth when fully expanded	35 ins.
	Range of expansion	3½ ins.
Complexion		Dark
Eyes		Hazel
Hair		D.K. Brown
Religious denominations.	Church of England	X
	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).

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 11th December 1916 H. H. Thompson

Place London Ont. Major C.A.D.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:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

Edwin John Harris Coppin 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.

Capt.
O. C. Divisional Cyclist Depot

~~Cyclist~~ (Signature of Officer)

Date Digby 23rd 1917.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

COPY ONLY

This is to Certify that No. 542427 (Rank) Private.

Name (in full) COPPIN, Edwin John Harris. enlisted in

the M.D. No.1 Cyclist Depot.

CANADIAN EXPEDITIONARY FORCE at London, Ont. on the 11th

day of December 19 16.

HE served in France with 18th Battalion

and is now discharged from the service by reason of Being medically unfit for further war service R.O. 693 d/19-6-18.

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

Age 26

Height 5-7

Complexion Ruddy

Eyes Brown

Hair Dark Brown

Marks or Scars

Clubbed end of little finger left hand.

Signature of Soldier

Issuing Officer

Lieut. Rank

O. C. Discharge Section, No. 1 D. D.

Appointment

Date of Discharge AUG 2 1918

LONDON, ONT.

Signed at this NINTH day of AUGUST 19 18.

in Military District No. One

File Reference No. 1. DD.10-C-121

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

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

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. 542427 (Rank) Private Name COPPIN, Edwin John Harris.

Unit Cyclist Corp & 18th Battalion.

Address on Discharge 1454 Dundas St., London, Ont.

Character and Conduct Very Good

Former Occupation BUTCHER

Special Qualifications of Value in Civil Life BUTCHER

Medals and Decorations NIL

Remarks NIL

Signed at LONDON, ONT. this NINTH day of AUGUST 1918.

Name of Officer

Lieut.
Rank

O. C. Discharge Section, No. 1 D. D.
Appointment

Laboratory Report. C.S.H. Lenham. 30-5-18.

No.542427.Pte.Coppin B.H.

To:- Officer i/c Lab.

Please carry out an examination of the accompanying specimen of sputum with special regard to T.B.

F.H. Pratten. Capt.CAMC.

T.B. Found.

R.McCulloch. N/S.
for O.i/c.Lab.

Army Form B. 103.

Regimental Number 542427 / 7.103

Casualty Form—Active Service.

Regiment or Corps Can. Res. Cyclist Coy.

Rank Pte. Surname Coppin Christian Name Edwin John Harris

Religion C. of E. Age on Enlistment 25. years mont

Enlisted (*a*) 11/2/16. Terms of Service (*a*) Duration of War. Service reckons from (*a*) 11/2/16.

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

Extended { } Re-engaged { } Qualification (*b*) Butcher

or Corps Trade and Rate

Signature of Offic

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army F B. 213, Army Form A. other official docume
Date	From whom received				
		Embarked	Halifax	3/3/17	H.M.T.
17/3/17	O.C. Can. Res Cyc.	Taken on Strength	Shorncliffe	14/3/17	Justicia
30/6/17	O.C. Unit	Transferred 4th C.R. Bn.	Chiseldon	30/6/17	100 et 11th
		4th Reserve Bn. Can Res Cyc Coy			155
2-7-17	O.C.4th Can. Res.Bn.	T.O.S.from Can.Cyclist Coy.Bramshott	30-6-17		Pt 2 orde No 155.
27-9-17	do	Having proceeded overseas to 18th Batn. is S.O.S. to 4th Res. Bn.	do	26-9-17	Pt 2 Order 230.
					Leave
28.9.17	2 Can I.B.Dep	Arr from 4 Can Res Bn	2 Can I.B.D.	27-9-17	Nom. Roll.
		Eng & T.O.S. 18 Can Bn	ETAPLES		Pt II Ord. 69. 11/10/17.

A. V. Lobban
ADJUTANT 4TH CANADIAN RESERVE BATTALION.

CERTIFIED CORRECT. 3-OCT-1917 CAPT. RESOBDS. 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*) Signaller, Shoeing-Smith, &c.

[M1101] W6135/M768 1000m 9/16s 153 G & S Forms/B.103/4. E./354.

OVER

[P.T.O

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
2-10-17	C.C.R.C	Arr Can Corps Reinf. Camp	In the Fld	2.10.17	Nom Roll
8-12-17	18 Bn	Joined 18th Can Bn	In the Fld	2.12.17	B.213
28-4-18	42 C.C.S.	Bronchitis Adm.	42 C.C.S.	28-4-18	A.36 (Ext. E.8124)
1-5-18	43 C.C.S	Phthisis Trans. to	29 Amb. Train	1-5-18	do (Ext. E.8748)
2-5-18	11 Stat.	Bronchitis Adm.	11 Stat.	2-5-18	W.3034 (Ext. E.8993)
4-5-18	do	Tubercle of lung. Trans. to	England	4-5-18	do (Ext. E.9317)
5-5-18	A.T. Panama	do do (severe) Adm.	A.T. Panama	5-5-18	W.3083 (Can. Sect. No. 5358) Pt. II Ord. 42, 13/5/18.
		Posted to Western Ontario Regtl. Depot, Witley.			
					for Lt.-Col., A.A.G. Canadian Section. G.H.Q. 3rd Echelon B.E.F.
13.5.18	W.O.R.D.	T.O.S. posted from 18 Bn	Witley	5.5.18	Dl 113
H.B.					H.P. Charters

INVALIDED TO CANADA FOR
FURTHER MEDICAL TREATMENT

HOSPITAL REPRESENTATIVE,
CANADIAN SPECIAL HOSPITAL, LENHAM,

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 Can. Res. Cyclist Corps.

Regimental No. 542427 Rank Pt Name Copping Edwin John Harris
C. E. F.

Enlisted (a) 11-12-16 Terms of Service (a) L. of W. Service reckons from (a) 11-12-16

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) Butcher

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				
26-6-18		Taken on strength No. 1 District Depot	London D.O. # 90		
			F. A. Herman Lieut. Ass. Adjt for O.C.		No. 1 DISTRICT DEPOT
LONDON, ONT. AUG 2 1918 DISCHARGED		Being medically unfit for further war service R. O. 693 .d/.19 .6 .18			
			Hann. M. Livingston Lt. O. C. Discharge Section, No. 1 D. D.		

(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				

Date.	Remarks.	Pt. 2 Order No.
24-7-18	Posted to Casualty Coy. from Hosp. Section	HSO. 100. 100
24-7-18	Transferred from Military Hpl. to Byroh San.	100 100
2-8-18	Discharged from H.M.S. Medically unfit for further war service. R.O. 693. d/19-6-18. (No P.D.P.)	104 CC 89

M.F.W. 192.
60M-3-18. (D.P.) 353.
1772-39-1243.

*Name COPPIN, Edwin John Harris. Rank Pte. Regtl. No. 542427

Fyle Depot 1 DD 10-C-121

Original unit C.R.C.C. Present unit 18th Bn. M. or S. S Age 25. Religion C. of E. Ref. H.Q.

Port, ship, and date of arrival Halifax, Areguay, 7-7-18.

Next of kin (Father) John Harris Coppin ST Teath, Cornwall, England.

Address on leave 1452 Dundas St., London, Ont.

Address on discharge Same as above.

Transportation issued Yes / No Date Character on discharge Very Good

Previous occupation Butcher Date and place of enlistment 11-12-16, London, Ont.

Diagnosis Tuberculosis of lungs Date of Medical Boards London, Ont. 18/7/18.

Date.	Remarks	Pt. 2 Order No.
T.O.S. 26-6-18	From Clearing Depot and posted	
12-7-18	To Hospital Section. Military Hospital, M.D. #1	90.
18-7-18	Has permission to wear 2 blue service chevrons Appendix DDO. 92	

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

(over)

D.M.S. 1300-50M-21-11-17.

URNAME	CHRISTIAN NAME OR NAMES	REG. NO.
COPPING	W.J.H.	542427.

RANK	UNIT	CO.	TROOP	BATTY.
Pte.	WO. 18.			

HOSPITAL	DATE OF ADMISSION
5 C.F.A.	26-4-18.
1. 43 C.C.S.	HOSP. 28.4.18
11 Stat Rouen.	2-5-18
2. Bermondsey Inf. Ladywell	6.5.18
16 C.G. Orpington.	22-5-18
3. C.S. Lenham	HOSP. 30.5.18.
4.	HOSP.

DIAGNOSIS

1. Bronchitis. a.f.
2. T.B. Pulmonary. add a.f.
T.B. Pneum. Advanced add a.f.

3.

DISPOSITION

DATE

CL. 1-5-18. A202.
3.5.18 A202.
9-5-18 A209.
10.5.18 B209(1)
24-5-18 B249
3.6.18 B227-1
3-).18 B250-I Invalided to Canada

REMARKS

26.6.18
D.TO C. PER HS. ARAGUAYA SAILING NO.61 FROM L'POOL 26-6-18.

A.M.D. 2 DEPT.
Boh. of D.G.M.S. O.M.F.C. London.

EPITOME OF HOSPITAL TREATMENT

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

Form DMS 1401
8289 100M 9/3/17.

CANADIAN SPECIAL HOSPITAL HOSPITAL.

A. & D. CARD

AT LENHAM, KENT.

A. & D. No. T288 Pk I PL. OF ACTION

542427 RANK Pte UNIT 18th Batt SICK OR WOUNDED

NAME Coppin E.H. AGE 26 RELIGION C of E.

PLACE IN HOSPITAL Section II

DIAGNOSIS Tubercle of Lung

ADMITTED 29-5-18 FROM 16 C.G.H. Orpington

DISCHARGED 26-6-18 TO Hosp-Ship Araguaya

TRANSFERRED

SERVICE AT HOME 8/12 IN FIELD 8/12

RESULTS Invalided to Canada

WORD
W.

(See Document Card for M.H. Sheet and other Documents.)

(P.T.O.)

REMARKS.

No. 542427 RANK Pte. NAME Coppin E. J. H.

T. O. S. 11/12/16 UNIT Dir. Cyclists Depot

Unit not stated Feb paylist 1917

Trans. f. London Out. 23/2/17 D.O. 54 of 23/2/17.

M. D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PARTICULARS	AUTHORITY
1917	1917			
Feb 23	Feb. 28	✓		
Mar.		✓		
Apr.		N.	Proceeded Overseas 26/4/17	(D.O. 117) of 27/4/17

No. Rank Pte Name Coppin. E. J. 26

T.O.S. 11-12-16 Unit Dth Cycle Corps. Divisional Cyclists
(D.O. 8 of 11-12-16)

M.D. 1

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
Dec 11 1916	Dec 31 1916	H	Sub alloc from 11/12/16	D.O. 1179-12-16.
	Jan	H	From Trod Sleigh 25-12-16	Do 307 Jan paylist.
	Feb	H	Transf to Div Cycle 22/2/17	Feb paylist.
			appa/Cpl 19-2-17	Do 50 of 19-2-17

Form R. 149.

Edwin John Harris

Name COPPIN Rank Pte Reg. No. 542427

Unit 18th Bn.

Next of Kin John Harris Coppin
St Teath, Cornwall,

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918						
26-4	5 C. F. A.		Bronchitis	A202		17391
28-4	43 CCS		do	A204		17457
2-5	N Sty Hsp Rouen		do	A209		1116/5
6-5	Birmondsey Mil. Hosp.		do			17674
	Ladywell R&SE.			B209		
22-5	Ont Mil Orpington		T.B. Pul. advanced	B210		18461
30-5	Can Spec Lenham		do	B227		18944
26-6	INVALIDED-TO-CANADA.			B250		317
				[illegible]		

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

COPPIN, Pte. E. J. H. (Edwin John Harris), #542427, 18th BN. H.Q. 649-C-23214.
Not Eligible for 14-15 Star,

18590

M. & D. (Sister) Mrs. Mary Ann Kingdon,
Poltraworgge, St. Kew,
Cornwall, England.

P. & S. (Father) John Harris Coppin,
Treveighan,
Pt. Teath, Cornwall, England.

(Ser. # 985.185.)

Mem. C. Nil.

Not married.

Scroll Desp. 23-2/3 Reqn. No 56085

Plague Desp. 23-2/3 Reqn. No 49333

9BB

Number 745956 Rank Pte

Surname COPPIN

Christian Name Frederick George

Units 116 Bn Can. Inf. Theatre of War England.

Date of Service 31-7-16.

Remarks 173

Latest Address ~~62~~ Celina St.,
Oshawa, Ont

Roll No. D Page 4075

200m.-6-21....

(This form to be filled in by all ranks on voyage to Canada.)

D.....

R	RANK	SURNAME	INITIALS	UNIT
.....	.....	.....	.....	.....

al address.....
(Street) (City or Town) (Province)

one person to be notified of arrival.....

.....

Station in Military District to which a furlough warrant is required.....

..... Railway.....

d, is your wife on board..... ...Number of children on board.....

stination.....

(Sgd.).....

DEC 12 1922
DEC REGN. No 10827

9BP

Number 542427 Rank Pte

Surname COPPIN

Christian Name Edwin John Harris

Units 18Bn Can. Inf. Theatre of War France.

Date of Service 27-9-17 (D)

Remarks Died 3/12/19 BPC

Latest Address ~~1454 Dundas St.~~

Sister - Mrs Mary Ann Kingdon
Poltraworgge, St. Kevin (or St Kew) ~~London Ont~~
Cornwall, England

Roll No. B

200m.-6-21. Page 19297

(This form to be filled in by all ranks on voyage to Canada.)

D.....

R	RANK	SURNAME	INITIALS	UNIT
.....	.....	.....	.....	.....

al address.....
(Street) (City or Town) (Province)

one person to be notified of arrival.....

.....

Station in Military District to which a furlough warrant is required.....

..... Railway.....

d, is your wife on board..... ...Number of children on board.....

stination.....

(Sgd.).....

DESP. JUL 8 1924
REGN. NO. 5-800

CLINICAL CHART.

(To be pasted into Case Book opposite Patient's Case.)

Corps 2020 #1. Hospital Station London

No. 542427 Rank and Name Pte. Copkin, Edward J.H. Age 26 Service 6 5/12, E 6/12, F 8/12

Disease Obs. Bronchites Date of Admission 13-7-18 Date of Discharge 24-7-18 Result To Improvement Case Book 442 Folio

C 42539

Dates of Observation	14	15			20	21	22	23																						
Days of Disease																														
Temperature Fahrenheit	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.
107°	8 6 4 2																													
106°	8 6 4 2																													
105°	8 6 4 2																													
104°	8 6 4 2																													
103°	8 6 4 2																													
102°	8 6 4 2																													
101°	8 6 4 2																													
100°	8 6 4 2																													
99°	8 6 4 2																													
98°	8 6 4 2	98	98	98	98	98	98	98	98																					
97°	8 6 4 2																													
	8 6																													
Pulse per Minute		76 84	80 84	100 92	80 84	96 84	92 84	88 84	108 84																					
Respirations per Minute		20 20	16 20	16 20	24 20	20 20	20 20	16 20	18 20																					
Motions																														

M. F. B. 288.

50M—11-16.
H. Q. 1772-39-513.

Signature E.B. Barlane Capt CAMC In charge of case.

Form R 122
2353—100M—9-12-16.

J.C.O'N.

Rank | Name COPPIN Edwin John Harris, | Reg'l No. 542427.

Unit Dft Can Cyclists ~~xx~~ Toronto. to Can R~~xx~~ Cyclists Co. | If in perm. Corps, What Unit? | Married or Single Single.

Place and Date of Enlistment London. Ont. D ec 11th 1916 | Place of Birth Bodmin. Cornwall. England.

Name and Address, Next-of-Kin John Harris Coppin. St Teath, Cornwall. England. | 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 4248
File R.L.
Category Can M.U.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
ARRIVED IN ENGLAND 14 5 17 SS. JUSTICIA.					
17-5-17	Res Cyc	Taken on strength	Cheseldon	14-5-17	Pte Pt II O 118.
30.6/14.	-"-	S.O.S. to 4th Rse Btn	-"-	30.6/14.	Pte " " 156 4th Res. Pt II O. 155 d/2-7-17
27-9-17	4 Res.	Proceeded O/S. to 18 Bn.	B Scott.	Pte 26-9-17	Pt II O 230 18 Bn Pt II O 69 d/1 10/17
13.5.18	18th Bn	Inval. sick & fast to WORD	field	" 5.5.18	" 42 O6 & WORD # 113 a/ 13 5/18
3.7.18	W.O.R.	Invalided to Canada	Lenham	" 26.6.18	C.L. B. 250 & WORD Pt II O 159 d/8 7/18

WO

Checked 1.10.17 [illegible] 103

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.	
Date.	From whom received.					

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Forms I. 1237. 12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	542427		Coffin	E.

Year	Unit.	Age.	Service.

Station and Date.

Disease Pulmonary Tuberculosis

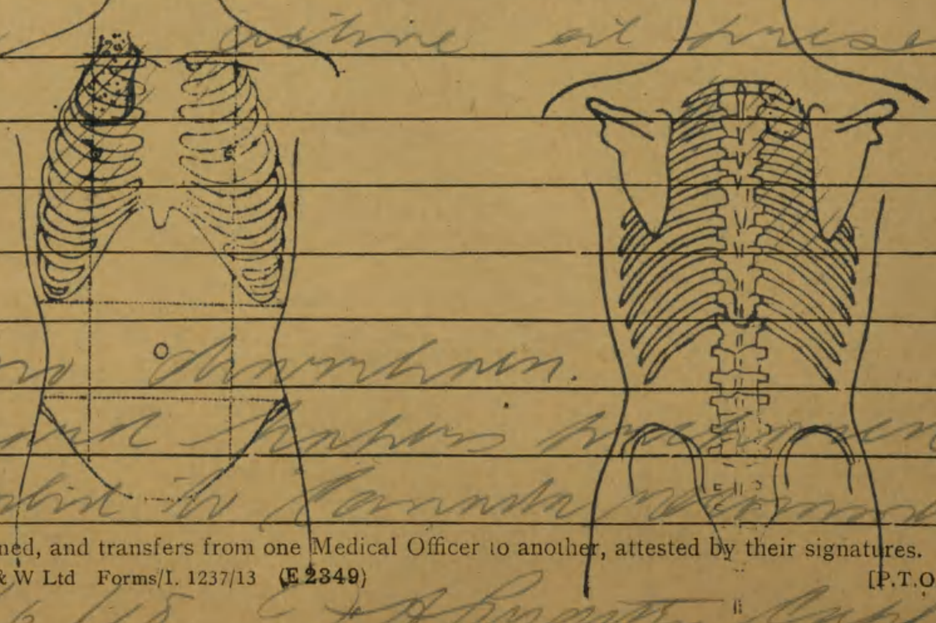
Complaint. weakness, loss of wt. dyspnoea on exertion. night sweats.

Duration.

F.H. Mother died pneumonia.

P.T. mumps & measles as a child.

Present. Enlisted in good health Dec 11/16. England May/17 - France Sept/17. Mar 1917 had a cough & soreness in chest. In Jan & Feb noticed he could not keep up with the others. Considerable diarrhoea March & April and lost much weight. Night sweats in April/18. No haemoptysis. Admitted to D. R. Camp - C C S - Bermansey Military Hosp. 6/5/18 - Orpington 21/5/18 - Lenham 29/5/18. Usual wt 140 - present 124. Temp. 100 pulse 80 - 100. Lesion as detected & more or less active at present.



10/6/18.

No diarrhoea.

Board papers prepared & invalid to Canada recommended.

10/6/18. F. H. Eyarty Capt.

CANADIAN SPECIAL HOSPITAL. REGISTRAR'S 29 MAY 1918 OFFICE, LENHAM, KENT.

T2-88 Bk I

* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

(6365) W2944/P438 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2349) [P.T.O.

Station
and Date.

ONTARIO MILITARY HOSPITALS
ORPINGTON, KENT.

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. 2 & T 6028
Year 1918

Regimental No. 542427 Rank. Pte Surname. Coppin Christian Name. Edwin. J. H.

Unit. 18th Cans Age. 26 Service. 18/12.

Station and Date. 21.5.18.

Disease

Complains of cough with purulent sputum, pain in right upper chest dyspnoea on exertion night sweats. loss of wt.

Previous Occpt – Farmer.
Enlisted in London Ont Dec 13/1916.
To England Apr. 1917.
To France Sept. 1917.
Reported sick Apr 25/18.
To No 6 Le Havre.
To Bermondsey Mil May 7/18.
To Ont Mil Hospt. 21.5.18.

Present Illness —
began about Jan 1918 with a cold and cough. Patient felt that he was not as strong as usual and could not keep up with the others. Had a rather severe diarrhoea which was persistent throughout March and April. and as a result lost considerable weight. First noticed pains in right chest in April. Has had one or two night sweats.

Past Illness
Operated for right Inguinal Hernia 8 yrs ago.

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(6365) W2944/P438 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2349) [P.T.O.

Station and Date.	
	Family History Mother died of Pneumonia.
22.5.18.	Patient Father Tuberculous. Pale. Teeth & Tonsils in good condt. Thorax — flattened antes.-post: slightly asymmetrical. Expansion diminished over upper. right. and left. At Lung — Percussion note impaired from 4th rib to apex, over Supra & Infra Scap and upper inter scap region. There is increased T. F & V. R. B.S. sounds tubular. Marked whispering pectoriloquy 1st and 2nd I.S. In these spaces there is a marked amphoric percussion note. On Auscultation these are over this particular area coarse cavernous Rales. fines moist rales over apex and supra & infra scapula and upper interscapular region. Over base B.S. & Rale distant. Left Lung — Slightly impaired note from 3rd rib to apex and over supra & infra scapula and upper interscap region. B.S. as tubular. V.R. and V.F increased over this area there are fine moist rales: moist crepts in interscap region.
22-5-18	Sputum No 2. B. found Transfer to Leyton

T. B Peacey Capt.

Forms
I. 1237
12

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Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	542427	Pte	Coppard	Edwin

Year	Unit.	Age.	Service.
1916	18 Co Canadians	26	1 4/12

Urine 1020. Acid. Nil Alb. Nil Sugar.

Station and Date.

Disease PT Sore throat Commenced

May 7 — Complained with cough and phlegm with [illegible] and fever, and pain of chest, for 5 months, worse for 2 days. Admitted No 11 Stat. Hosp. Camiers on May 7. Chest & Throat found to be inflamed.

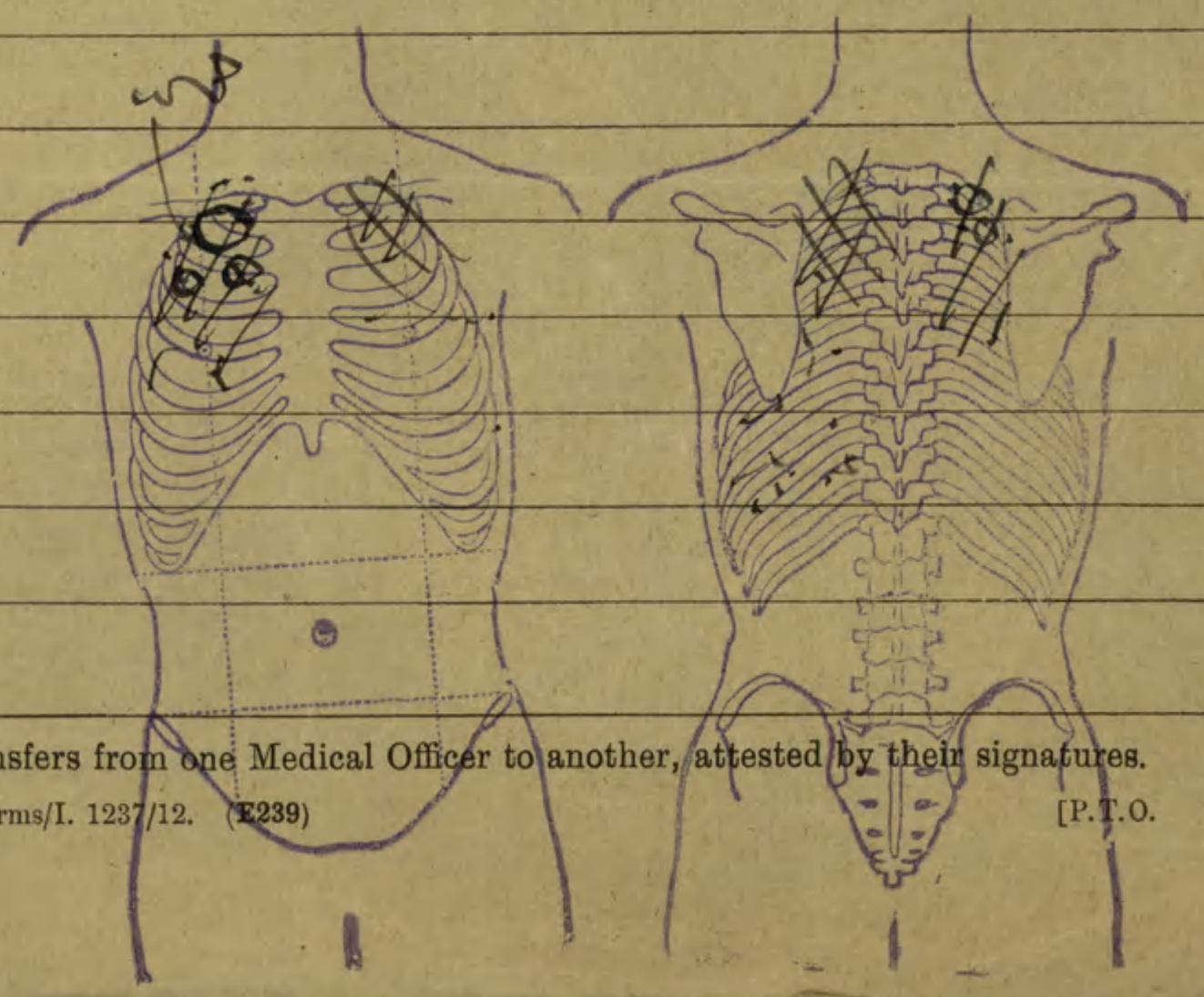
May 13 — No improvement.

8-1-4. — Temp 100° - 103°. Throat redder.

10 — Bowels open 3 times a day - loose

21 — Disch.

Red -
Admitted No 11 Stat. Hosp. Camiers on May 10 Complaining of Throat & Chest & has continued to do so.



* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

Wt. W 6604/M 2870—1,500,000—8/17—H. & Sp. (10938). Forms/I. 1237/12. (E239) [P.T.O.

Station and Date.	

5-9.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps 18th Bn

Military Hospital Can Spec Denham

No. 442427. Rank and Name Pte Coppin. F. H. Age 26. Service 10/12.

Disease D.B. Lung. Date of admission 29th May 1918 Date of discharge Result

Dates of Observation: May. June.

Days of Disease: 29 30 31 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26

Temperature, Fahrenheit — Time A.M. P.M.: 4 8 8 12 4 8 8 12 4 8

107°
106°
105°
104°
103°
102°
101°
100°
99°
98°
97°

4 a.m. 31 pm

Weight 124

Weight 133

Pulse per Minute: 120 98 120 90 88 92 120 104 92 122 78 80 80 88 86 88 88 92 80 88 90 92 80 80 86 86 88 - 88 88 90 80 88 88 100 52 90 92 80 84 102 80 100

Respirations per Minute: 20 22 20 20 20 18 20 20 22 24 20 18 20 18 20 18 20 20 24 20 18 20 20 18 20 18 18 20 20 18 - 20 22 18 18 20 20 18 18 20 20 18 18 20 20 18 20 20 18 18 20

Motions per 24 Hours

Wt. W3728/M2313—2,000,000—6/17—H. & Sp. (10693)—A.F.B. 181/5 (E. 735)

Signature F H Coppin Cpl. In charge of case.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps_____ Military Hospital_____

No._____ Rank and Name_____ Age_____ Service_____

Disease_____ Date of admission_____ Date of discharge_____ Result_____

Dates of Observation

Days of Disease

Temperature, Fahrenheit — Time A.M. P.M.

107° 106° 105° 104° 103° 102° 101° 100° 99° 98° 97°

Pulse per Minute

Respirations per Minute

Motions per 24 Hours

Wt. W3728/M2313—2,000,000—6/17—H. & Sp. (10693)—A.F.B. 181/5 (E. 735)

Signature_____ In charge of case.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps 18th Can Bn Military Hospital

No. 5422427 Rank and Name Coppin E J. Age 26 Service 6/12

Disease Date of admission May 20 21 Date of discharge Result

Dates of Observation	May								
Days of Disease	21	22	23	24	25	26	27	28	29
Temperature, Fahrenheit	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.
Pulse per Minute	90	100	92	88	96	100	106	102	104
Respirations per Minute		22		20		32		30	
Motions per 24 Hours									

107° 106° 105° 104° 103° 102° 101° 100° 99° 98° 97°

Wt. W3728/M2313—2,000,000—6/17—H. & Sp. (10693)—A.F.B. 181/5 (E. 735)

Signature Dr Kilpatrick N/S In charge of case.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps_____ Military Hospital_____

No._____ Rank and Name_____ Age_____ Service_____

Disease_____ Date of admission_____ Date of discharge_____ Result_____

Dates of Observation

Days of Disease

Temperature, Fahrenheit — Time A.M. P.M.

107° 106° 105° 104° 103° 102° 101° 100° 99° 98° 97°

Pulse per Minute

Respirations per Minute

Motions per 24 Hours

Wt. W3728/M2313—2,000,000—6/17—H. & Sp. (10693)—A.F.B. 181/5 (E. 735)

Signature_____ _____ In charge of case.

ORIGINAL

Original

MEDICAL HISTORY SHEET.

Surname COPPIN *Christian Name* Edwin John Harris

Examined { on 11th day of Dec. 1916
at London, Ont.

Approved by St Alexander
Rank Major C.A.M.C. M.O.

Birthplace { City or Town Bodmin Cornwall
County England

Apparent age 25

Trade or occupation Butcher

Height 5 Feet 6 Inches.

Weight 139 Lbs.

Chest measurement { Minimum 31½ inches.
Maximum expansion 35 inches.

Physical development Good

Small-Pox Marks nil

Vaccination Marks { Arm Right. Left. 1
Number 1

When Vaccinated last 1912

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection R. Eye D 20/20 L. Eye D 20/30

INVALIDED TO CANADA FOR FURTHER MEDICAL TREATMENT
CANADIAN SPECIAL HOSPITAL REPRESENTATIVE LENHAM.

Date.	Fit or Unfit.	Examined for Re-engagement.
		10 MAY. 1918
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
28/3/17		J.A. Gilchrist Lieut M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
20/3/17		J.A. Gilchrist Lieut M.O.
28/3/17		M.O.
2/4/17		M.O.

Enlisted on 11th *day of* December 1916 *at* London, Ont

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	Provisional Cyclist Depot	542427		11/12/16.
Transferred to	4th CAN. RES. BATTALION 18th Bn			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
London, Ont.	DEC 11 1916	On Attestation considered	Fit
London, Ont.	14/6/18.	Tubercle of Lung.	Invalid to Canada
London, Ont.	18/7/18.	Pulmonary T.B. Cat. "E" recommended	F.H. Bartley Capt. Pres. S.M.B.

CANADIAN

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 39-4-9.

Surname Coppin Christian Name Edwin J.H.

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.
HERMONDSEY MILITARY HOSPITAL LADYWELL, S.E.		6	5	18	21	5	18	Pulmonary Lung	15	An advanced case. to Canadian Hosp.	
ONTARIO MILITARY HOSPITAL ORPINGTON, KENT.		21	5	18	29	5	18	T.B. Lung	9	Advanced T.B. of Both Lung. with Cavity formation upper right lobe. Transfer to Cenham.	H. D. Jones Thompson Capt.
C.S.H. Lenham		29	5	18	26	6	18	Do.	29	Shortness analysis T.B. pos. Temp. 100 pulse 80-100. Above findings concurred with Board hopers prepared and invalid to Canada recommended 10/6/18.	P.A. Lowry Capt Cam
Araguaya		26	6	18	5	7	18	Do		Condition the same	F.H. Pratten Capt. Cam.
London		13	7	18	24	7	18	~~Bro~~ T.B.	12	Complains bad cold, soreness in chest. Shortness of breath. occas. night sweats followed being glasses. Sputum ~~neg~~ positive Rales at apex of Right & Left chest blowing Breathing. T.B. Disc to Oxyn.	E. C. McFarlane Capt Cam

CANADIAN CONTINGENT EXPEDITIONARY FORCE

idd 10-C-121
ID

LAST PAY CERTIFICATE

DUPLICATE

District Depot No. 1

EN.

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 542427 Rank PTE. Name COPPIN Edwin, Jno. Harris

Corps 18th Bn. who was* Discharged R.O.693 d/19-6-18

On 2-8-18 191..., to .....

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-7-18 191..., to 2-8-18 191..., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Bal. Cr. from prev. month L.R.O. 19-7-18	17.	31
Advances by Cheques No.			Regt'l Pay 33 days at $1. c	33	
Advances by Cheques No.			Field Allow 33 days at $ .10	3.	30
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges			Other Allowances* Clothing	35.	
Payment on transfer or discharge No. Cloth. B.C. Re-Est. 3145 3146	35. 53.	61	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	88.	61	Total	88.	61

*Give particulars.

OVERSEAS SERVICE

A monthly stoppage of $ 15. (†) has (‡) been paid on account of Assigned Pay for the month of pd. to 30-6-18 (in England) 191... and Sep'n Allce. for month of nil 191... (to) Assignee In England

(Address) .....

.....

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

On Transfer of an Officer

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

REMARKS:—

State (1) date of enlistment 13-12-16

(2) if married and if a Separation Allowance Card has been submitted no

(3) cause of discharge Med. unfit authority D.O. 104, Disch.

(4) authority for transfer 2-8-18

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date JULY 31 1918.

Place LONDON, ONT.

Captain
Paymaster, District Depot No. 1
for
Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay-list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.

300M.—2-18.
H. Q. 1772-39-903.

134930

FORM OF WILL.

I, Edwin John Harris Coppin (Name in full)
Regimental Number 542427 serving in Divisional Cyclist
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 M. A. Kingdon
St. Ives. Cornwall
England

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

absolutely, and my personal estate I bequeath to

Mrs M.A. Kingdon
St. Ives. Cornwall
England

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

IMPORTANT NOTE
This must be Signed and Dated by THE SOLDIER HIMSELF.

this 24th day of March A. D. 1917

H. Coppin Signature of Soldier.

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

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

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness H. Robertson
Address of Witness 308-26th Avenue West, Calgary, Alberta.
Occupation of Witness Lieut. B.E.F.
Signature of Second Witness Roy L. Wilson
Address of Witness Div. Cyclist Depot, Exhibition Camp, Toronto, Ont
Occupation of Witness Lance Corporal in C.E.F.

A. F. W. 82
00M-5-16.
1772-39-983.

FORM OF WILL

I, Edwin John Harris Coppin (Name in full)

Regimental Number 542427 serving in Divisional Cyclist.

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

I bequeath ~~devise~~ all my real estate unto

Mrs. M. A. Kingdon
St. Kew, Cornwall,
England.

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

absolutely, and my personal estate I bequeath to

Mrs. M. A. Kingdon,
St. Kew, Cornwall,
England.

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

NOTE

This space for the appointment of Executor if necessary.

IMPORTANT NOTE
This must be signed and Dated by THE SOLDIER HIMSELF.

this 24th. day of March A.D. 1917.

H. Coppin Signature of Soldier.

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

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

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness H. Robertson,

Address of Witness 308-26th. Avenue West, Calgary, Alberta.

Occupation of Witness Lieut. C.E.F.

Signature of Second Witness Roy L. Wilson,

Address of Witness Div. Cyclist Depot, Exhibition Camp, Toronto, Ont.

Occupation of Witness Lance Corporal in C.E.F.

M. F. W. 82.
300M.-12-16.
1772-39-983.

FORM OF WILL

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.....Divisional Cyclist Depot, C.E.F.

(2) Regimental Number.....542427

(3) Full Name of Soldier.....Coppin, Edwin John Harris.

(4) Place of Birth.....Brisland Co. Cornwall England.

(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.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ?..... Yes. .....

If so, state name and address ..... Coppin, John Harris, St. Teath, Cornwall, Eng.

(10) Is your Mother alive ?..... No. .....

If so, state name and address.....

.....

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

Are you her sole support, or not ?.....

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

.....

.....

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

.....

.....

.....

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

.....

(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.

..... Capt.

Officer Commanding.

Divisional Cyclist Depot, C.E.F.

Date..... March 15th 1917. .....

H. J. H.

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name Coppin E. J. H.
Surname Christian Name

Regimental Number 542427 Rank Pte.

Unit Cyclist. Corps

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Address (in full)

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

L.L. 53961—M. & D. 9721

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

M. F. W. 127
300M-1-19
1772-20-1140

Remarks:

File No. 3683-E-17.

WAR SERVICE GRATUITY.

Register No. Spec-Reg 72/2149

Reg. No. 542427 Pte

Name Coppin E. J. H.

Address (deceased)

Pay Soldier $ 350.00

White & Neville

Clerk W. M. Phillips 25-10-20

Dependent Eric

Address

Cheque drawn in favor of Dept. of S. C. R. Ottawa Cent

Pay Dependent $

Days 153 Rate 70 Due 350.00

Less P.D.P. credited ✓

Less further Dr. Bal. or overpayment. ✓

Net 350.00

R W112 27-10-20

Date	Ck. Order	Ck. No.	Amount	Remarks.	Date	Ck. Order	Ck. No.	Amount.
1	64886	25-10-20 1881980	350.00		1			
2					2			
3					3			
4					4			
5					5			
6			350.00		6			

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

GEN'L AUDITOR
Posting checked by
[signature]
Date 25/10/20

R. Evans 14/10/20.

Condensed copy

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
T288 Bk F	542427	Pte	Coppin	E. H.

Year	Unit.	Age.	Service.
1918	18th Batt	26	16/12 8/12

CANADIAN SPECIAL HOSPITAL, LENHAM, KENT

Station and Date

Disease Tubercle of Lung.

Enlisted Dec/16. England May/17.
France Sept/17. Chest symptoms
since X-mas 1917. Invalided to Eng.
6-5-18. Sputum analysis T.B. pos.
Advanced case of Pulmonary
Tuberculosis with excavation
right upper lobe. Boarded and
Invalided to Canada.

Signed.
H. H. Cutler
Capt C. A. M. C.

* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

(6365) W2944/P138 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2349)

[P.T.O.

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	Attestation Paper,	Militia Form B. 235.
Squadron / Battery / Company } Conduct Sheet,	" B. 263a.	Proceedings on Discharge	" B. 218.
Copies of Convictions, by C. P.	in MS.		
Med. Hist. Sheet,	Militia Form B. 313		
Medical Report for Invalid*	" B. 227.		
Statement of Man's Account on Transfer and Last Pay Certificate,	" D. 877.		

*Only if discharged "Medically unfit."

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet (in the event of such having been prepared.)

N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

This space to be for numbers

Proceedings on Discharge.

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page).

No. 542427

Rank Private

Surname COPPIN

Christian Name Edwin John Harris.

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) Cyclist Corps & 18 th Battalion

Date of Discharge AUG 2 1918

Place of Discharge LONDON, ONT.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

		Descriptive Marks
Age	26 years	Clubbed end of little finger left hand.
Height	5 feet 7 inches.	
Complexion	Ruddy	
Eyes	Brown	
Hair	Dark Brown	
Trade	Butcher	
Intended place of residence (To be given as fully as practicable.)	1454 Dundas St., London, Ont.	

2. The above-named man is discharged in consequence of

Being medically unfit for further service

R. O. 693 .d/.19 .6 .18

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

3. Conduct and character while in the service have been, according to the records, etc.

Very Good

N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

BUTCHER.

M. F. B. 218.

100M.—1-17.
H. Q. 1772-39-113.

(OVER)

5. He is in possession of the following number of G. C. Badges:

nil

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations..... nil

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (*Squadron or Battery*), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place) LONDON, ONT. Harry M. Livingstone Lt

(Date) AUG 2 1918 *Commanding* O. C. Discharge Section, No. 1 D.D.

8. **Certificate to be signed by the Soldier on Discharge**

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place) LONDON, ONT. E. Coppin X (*Signature of Soldier.*)

(Date) AUG 2 1918 G. Reddon 50 ms (*Signature of Witness.*)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. **Additional Certificate in the case of a Soldier who takes his discharge on his own request.**

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

E. Coppin X (*Signature of Soldier.*)

10. **Statement of Service.**

Service toward Engagement to.....(the date to which the Record of Service is completed) 1 years 233 days.

Total 1 years 233 days.

11. **Confirmation of Discharge.**

The discharge of the above-named man is hereby confirmed.

(Place) LONDON, ONT. Harry M. Livingstone Lt

(Date) AUG 2 1918 (*Signature*) O. C. Discharge Section, No. 1 D.D.

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

none E. Coppin X

(OVER)

OPINION OF THE MEDICAL BOARD—*Continued.*

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

On accordance with P.C. 433 board recommends discharge and transfer to the I.S.C. for the necessary Sanatorium treatment.

Before signing the President of the Medical Board will read the certificate signed by the soldier, to the soldier, and if no change is indicated will initial the certificate.

SGD- C.W. Sinclair, Capt. *President.*
J. M. Jones, Lieut.
R. W. Rankin, " } Members.

PLACE London, Ont.

DATE 18-6-18

APPROVED BY

SGD- W. F. Gallow, Capt.
for *Assistant Director of Medical Services.*

DATE 20-7-18

APPROVED BY

Director-General of Medical Services.

DATE

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 soldier 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 .....
DATE ..... } *Members.*

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 soldier 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 soldiers' statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statement not resulting from their personal observation; it must be made clear whether such statements are obtained from the soldier concerned, from witnesses, or from documents.
4. Special care is required in answering question 13. Please read the questions carefully. All questions must be answered.
5. If space provided under any sections is insufficient use blank space, page 4 or add another sheet. Such entries or 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 8, 9 and 10 be communicated to the soldier, 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 London, Ont. DATE 18-7-18

1. 1 (a) Unit D.D. #1 (b) Regimental No. 542427 (c) Rank Pte.

(d) Surname COPPIN (e) Christian name Edwin John Harris.

2. Age last birthday 26 Date of birth Dec. 14, 1891

3. Enlisted at London, Ont. on Dec. 13/16

4. Personal description:—

(a) Height 5'7" (b) Weight (stripped) 140 (c) Complexion Ruddy

(d) Colour of hair d. Brown (e) Colour of eyes Brown. (f) Identification marks

Clubbed end of little finger (left Hand)

5. Address after discharge (for use of the Board of Pension Commissioners)

1454 Dundas St., London, Ont.

6. Former trade or occupation Butcher.

7. (a) Service	Years	Days	Periods From	Periods To
Cycle Coops 4th. Reserve 18th Bn. D.D. #1			Dec. 13/16	18-7-18

(b) Has he been overseas? Yes. 8. Original disease or disability Tuberculosis of lungs.

(a) Date of origin Dec. 1917 (b) Place of origin France.

(c) Cause* Infection.

(d) Present disease or disability Debility of Tuberculosis of lungs.

9. Present condition (a) (Important to be a full description of the present disabling condition or conditions only.) "History" must be recorded in Section 10.
[After describing all abnormalities, anatomical and functional, contributing to present disability (see section 11) state whether such disability is directly due to (*a*) weakness, (*b*) loss (complete or partial) of any organ or member of its functions, or (*c*) to the necessity for rest of the body or of some of its parts.]

Complains of soreness of chest, occasional night sweats, shortness of breath. Easily fatigued on exertion. considerable cough. No bloody expectoration. Trouble started in Dec. 1917 after being gassed and a heavy cold. Sputum positive T.B. fairly good expansion Pere. normal. Ausc. Blowing breathing and few rales at right apex. rales at left apex.

M. F. B., 227
2M.—9-18

9. Present condition.—(*Continued.*)

(b) Are the following systems normal? If not state briefly abnormality.....

Nervous Yes Digestive Yes. Respiratory as stated Cardiac Yes.

Genito-Urinary Yes. Skin, Middle Ear, Eye or any other part Yes.

10. History: (*a*) of Condition referred to in "a" section 9.

No.T.B. in amily. No serius illness, Operation 10 years ago for herni a.

(*b*) Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination.

As in 4 (f)

11. If the disabling condition had its origin before enlistment, has it been aggravated on service?

not applicable.

12. Was the disability caused or aggravated by negligence, by vice or by misconduct, or 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? Indefinite.

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

Hospital in England and Canada

OPINION OF THE MEDICAL BOARD

14. (*Continued.*)

15. Is furthur treatment in hospital, convalescent home, etc., likely to be of material benefit?
(If the answer is "yes" state nature of treatment required and probable duration.)

Yes.

16. Can the former trade or occupation be resumed? No.
(If not, briefly state why.)

17. Recommendations Sanatorium treatment.

E. C. McFarlane Capt. CAMC
Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

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

I, the undersigned E. Coppin 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.....

(Sgd) E. COPPIN
Signature of soldier examined.

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 criticized.

Agree board would add that it is a case of marked Pulmonary Tuberculosis, most marked in right upper lobe where there is cavitation.

19. Is the soldier fit for

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

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

(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.)

PART III

Proceedings of the Pensions and Claims Board on the Soldier mentioned in Part I.

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the day of 191

Members of the Board :—

The Board having considered the evidence of the soldier marginally named, together with the documents submitted, recommend :—

Dated at this day of 191

Signatures of the Board

President.

PART I. Form (D.M.S. 1312). A.F.B. 179 Canada (Revised). 3737. 50M.

Reserved for M.H.C.

Regt. No. 542427. Rank Pte. Surname Coppin Christian Name Edwin J.H.

Unit or Corps—(a) Overseas from United Kingdom 18th Bn. (b) In United Kingdom 4th Res.

Born at—Town Bodmin County or Province Cornwall Country England

Date of Birth—Day 14 Month Dec. Year 1891 Age 25 yrs. 6 months.

Joined at London, Ont. Date Dec. 11. 1916.

Former Trade or Occupation Butcher

Permanent marks or peculiarities that will serve for future identification :—

N I L

Height—feet 5 inches 6 Colour of eyes Brown

Signature of Soldier (*for identification purposes*) E. Coppin

INVALIDED TO CANADA FOR FURTHER MEDICAL TREATMENT. HOSPITAL REPRESENTATIVE, CANADIAN SPECIAL HOSPITAL, LONDON.

Medical Report.

☞ *The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully discriminate between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents bearing on the case. He will plainly state the existence of any of the disability prior to the soldier joining for the present war.*

1. DISABILITY (*State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted*). (*Follow the official nomenclature as far as possible.*)

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (*a*) Tubercle of Lung.

Disabilities Group (*b*) N I L

Disabilities Group (*c*) N I L

2. CAUSE OF DISABILITY. (*Follow the official nomenclature in stating the disease or injury.*)

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	Infection	France	1917
(*ii.*) As to Group (*b*) above.	Not App		
(*iii.*) As to Group (*c*) above.	Not App		

NOTE.—By Active Service is meant Service with the Colours in Canada, United Kingdom, or elsewhere during the present war (since August 4th, 1914).

3. Is the disability due to disease contracted or injuries received prior to Active Service ? No

(*i.*) As to Group (*a*) above ? No If yes, has Active Service aggravated it ? Not App

(*ii.*) As to Group (*b*) above ? If yes, has Active Service aggravated it ?

(*iii.*) As to Group (*c*) above ? If yes, has Active Service aggravated it ?

4. Is the disability due to disease contracted or injuries received while on Active Service—

(*i.*) As to Group (*a*) above ? Yes

(*ii.*) As to Group (*b*) above ?

(*iii.*) As to Group (*c*) above ?

5. If a cause of disability was an injury received on Active Service, was it received— Not App

(i.) While on duty? (ii.) While off duty?

(iii.) Was a Court of Inquiry held? (iv.) Where? (v.) When?

(vi.) Opinion of the Court?

6. HISTORY OF THE CASE. (*State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records*).

Mother died Pneumonia at an old age, no history of contact, Enlisted in good health Dec/16, England May/17, France Sept/17, cough developed with soreness in chest Xmas/17, in Jan and Feb/18 noticed he could not keep up with the others on a route march, suffered much with persistent Diarrhoea March and April/18 when he began to lose weight, a few night sweats in April/18. To D.R.S. - C.C.S. - Bermansey Mil'Hosp'Ladywell S.N. 6-5-18 Orpington 21-5-18. Lenham 29-5-18.

7. PRESENT CONDITION. (*Give previous and present weight if likely to indicate progress of disability.*)

Usual wt.140. Present 124. General condition very poor, dyspnoea and weakness marked, cough and sputum (fii z purulent.) troublesome, sputum analysis T.B.pos. Temp.100 pulse 80-100.
Chest Findings. Right chest lags, particularly the upper dullness as low as the 4th i.s. with increase V.F. and V.R. amphoric breathing consonating Rales, whisper sounds and explosive cough over area as low as 4th i.s. anteriorly. Advanced case of Pulmonary Tuberculosis with cavity formation more or less active.

8. OPERATION. (i.) Was one performed? No

(ii.) If so, state what. Not App

(iii). Was one advised and declined? No

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto unless there is evidence to the contrary.

9. (i.) Is there loss or decay of teeth attributable to Active Service? No

(ii.) If so, describe. Not App

10. DO YOU RECOMMEND:—

(a) Fit for duty? No

(b) Fit for base duty? No

(c) Invalid to Canada? Yes

(d) Discharge from the Service as permanently unfit? No

Date of Report 10-6-18. 191 Signed F.H.Pratten.Capt.CAMC.
Officer in medical charge of case.

Station C.S.H. Lenham.

I have satisfied myself of the general accuracy of the above Report, and concur therein *except

Wm.M.Hart. Major.CAMC. (Officer i/c Hospital / S.M.O. Brigade) Strike out one of these.

O.C. Canadian Special Hospital, Lenham. Kent.

Dated at Station, on 12.June.1918. 191

* Delete if inapplicable.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

☞ *Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.*

11. Is the disability fully indicated in Part I. (1)? Yes
If not, indicate it.

12. Is the cause of the disability fully indicated in Part I. (2)? Yes
If not, indicate it.

13. Was the disability caused or aggravated by— (a) Negligence of the Soldier: Caused? No; Aggravated? No (b) Misconduct of the Soldier: Caused? No; Aggravated? No

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour? (*Estimate at none, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, or 100%.*) Not App

15. THE PENSIONABLE DISABILITY.—*see Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate*).
What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (*Estimate at none, 1/5, 2/5, 3/5, 4/5, or all.*) Not App

16. Permanency of the Pensionable Disability estimated next above in (15).
(i.) Is it permanent? Not App
(ii.) If not permanent, what is its probable minimum duration (*in months*)?

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable? Not App

18. Remarks.

N I L

19. Recommendation:—(a) Fit for duty? No
(b) Fit for base duty? No
(c) Invalid to Canada? Yes
(d) Discharge from service as permanently unfit? No

Classification Military Hospital Commission. F

Date of Board 14-6-18.

Signatures of the Board. T.R.Welwood.Capt.CAMC. F.H.Pratten.Capt.CAMC. Thomas Campbell.Capt.CAMC. President.

Station C.S.H. Lenham.

A.D.M.S. CANADIANS, LONDON AREA, LONDON.

Approved [signature] A.D.M.S.

Dated at Station 17 JUN 1918 191

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ENGLAND ~~OR CANADA.~~	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1-5-1917	EFFECTIVE DATE:-
AMOUNT:- 15 00	AMOUNT:-

NAME:- COPPIN H. J. H.

NUMBER:- 542427

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 F. A. Kingdon
St. Kew.
Cornwall.

Stopped Effective 1.7.18

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private

UNIT AND TRANSFERS DEC 5 1918

ORIGINAL UNIT:- Cyclist Dépat

DATE ACCOUNT FIRST OPENED:- 1-5-1917

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			C Cyclist Co
113	6/5/18		16th 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
7.5.18		Lenham £3.00	14 60				
16.6.18	365	Lenham £5-0-0	24 33				
			38 93				

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE:- Invalided to Canada 1.7.18 Lenham 23/47 d/14.6.18 L.P.G. £72.31

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
March 31	Balance forward.								67 74		
April	P.P.	33		A 46605			15				
				Dn. ah. 1259. 18/3/18 18 Bn	3 57	X					
				" 91 17/4/18 ✓	3 57	X			78 60		
		33			7 14		15				
				B 15562			15				
May	PP	34 10		39 18 Bn 7.4.18	4 46	X			93 24		
		34 10			4 46		15				
June	P.P	33		A.R. L53555 £3-1-8.			15				
				A.R. P.300 5/6/18. 6 Dft Lenham	14 60						
				✓ P.365. 18/6/18. " "	24 33				72 31		—
					38 93						
		33			38 93		15				
Oct.				Dft. 6842 Bal to Canada	72 31				Nil		
					72 31						

Checked Brideboutly.

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION

P. 559.

MARRIED OR SINGLE: Single

PLACE OF BIRTH:

NAME AND ADDRESS OF NEXT OF KIN: Mr. J. H. Coppin
St. Teath, Cornwall, England

RELATIONSHIP OF NEXT OF KIN:

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. 542427 RANK Pte NAME Coppin H. J. H.

IF IN PERMT. CORPS WHAT UNIT | UNIT Cyclists Depot TRANSFERRED TO Can Res Cyc DATE AUTHORITY

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION London, Ont. TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 11th December 1916. TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 15.00 DATE EFFECTIVE 1.5.17

PAYABLE TO Mrs. N.A. Kingdon, St. Tew, Cornwall, Eng. RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

DEC 5 1919

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)

E

E

6.J.

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	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
1917 1-5-17 to 30-6-17														22	22															22				Balance from Canada
June 30	61	1.10	67	10											67.10	127	31/5					a28420	25/6	7 30				30		37 30	51 80				A.P. May + June
July	31		34	10											34.10							a109143						15		15	70 90				
Aug	31		34	10											34.10	166	30/6					a/30277		9 73											
																126	15/6							7 30				15		32 03	72 97				
Sept	30		33												33							A206365						15		15	90 97				
																												15							
																												75							
																												135							

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
Oct	Bal c/f	30.5	90.97						90.97		
Oct	O.P.	34.10		Cq No 222141			15				
				AR 557 4/7 45 Res	34.07				67 10		
		34 10			34.07		15		76 00		
Nov	P/P	33		B 18216 1/2 3.1.8			15		143.10		
				DMAR 895 26/9 4 Res	4.87				75.83		
	P/P	34 10		" 842 17/8 "	14.60						
				" " 783 29/8 "	12.17						
				" " 702 12/8 "	4.86						
				B 81418 1/2 3.1.8			15				
				DMAR 640 26/9 "	4.87						
				" 148 6/10 2nd Trans	4.46				67.27		
		67.10			45.83		30				

542427 Pte Coppin H.J.H.

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
MONTH	PARTICULARS				CR. 1			CR. 2	PARTICULARS					DR. 1	DR. 2	DR. 3	DR. 4	BALANCE		DEFER-RED. PAY	SER. ALLCE. ENG.	MONTH	PARTICULARS			CR. 1	CR. 2	PARTICULARS			DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER-RED. PAY	SER. ALLCE. ENG.
																		67	27																		
Jan									C47555 £3-1-8							15																					
		P.P.			34	10			DNAR.207. 16/11. 4.C.M.G.N.					4	46																						
									" " 189. 30/10 "					3	57			78	34																		
					34	10								8	03	15		109	14																		
Feb									C99207 £3.18							15		39	98																		
		P.P.			30	80			DNAR895 18 Bn 21.12.17					4	46																						
									✓ 955 ✓ 28.12.17					3	57																						
									✓ 173 4 C.M.G.G. 17.10.17					4	46																						
									✓ 459. 2 Div Wing CCRC. 23-11-17					12	49			69	16																		
					30	80								24	98	15																					
March		P.P.			34	10			D.69561 £3-1-8							15																					
									DNAR1049 18 Bn. 29.1.18					8	03																						
									✓ 1093 ✓ 5.2.18					4	46																						
									✓ 1148 ✓ 21.2.18					3	57																						
									1199 ✓ 7/3					4	46			67	74																		
					34	10								30	52	15																					

Carried forward to Large Ledger sheet