Duplicate 901213

ATTESTATION PAPER.

No.

193rd. BAT.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

C.E.F.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? Foster
1a. What are your Christian names? Charles Lynton
1b. What is your present address? Wallace Bay Cumb Co.
2. In what Town, Township or Parish, and in what Country were you born? Medicine Hat, Alta
3. What is the name of your next-of kin? Ada Foster
4. What is the address of your next-of-kin? Wallace Bay Cumb. Co. N.S.
4a. What is the relationship of your next-of-kin? Wife
5. What is the date of your birth? June 24th 1885
6. What is your Trade or Calling? Clerk
7. Are you married? Yes
8. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes
9. Do you now belong to the Active Militia? No
10. Have you ever served in any Military Force? 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, Charles Lynton Foster, 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.

Charles L Foster (Signature of Recruit)

Date March 14th 1916. G.S. Vincent (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Charles Lynton Foster, 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.

Charles L Foster (Signature of Recruit)

Date March 14th 1916. G.S. Vincent (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 Truro N.S. this 14th day of March 1916.

James P. LeBlanc (Signature of Justice)

A Justice of the peace in and for the County of Colchester, N. S.

M. F. W. 23.
400M.—1-15.
H. Q. 1772-39-841.

Description of Foster – Charles Lyston on Enlistment.

Apparent Age 30 years 9 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ... 5 ft. 9 ins.

Chest measurement.
- Girth when fully expanded ... 39 ins.
- Range of expansion ... 4 ins.

Complexion ... Clear

Eyes ... Blue

Hair ... Light 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).

165 pounds

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 March 14th 1916 — E. McLaughlan Capt.

Place Truro, N.S. — 193rd Batt. C.E.F.

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.

Charles Lyston Foster 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.

John Stanfield Lieut.-Col. (Signature of Officer)
Comd'g. 193rd. Overseas B'n. C. E. F.

Date March 16 1916.

MAR 16 1916

REGIMENTAL DOCUMENTS

NAME FOSTER CHARLES ~~TYRTON~~ LYNTON REGT. NO. 90 1213 UNIT 193rd Bn H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)				14859	Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
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)					
2	MEDICAL EXAMINATION (M.F.W. 129)					Demob.
1	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					1
	PARTICULARS OF CHARACTER (A.F.W. 3226)					4-11
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					4-11
1	A.F.W 3997					12-11
1	M.F.W 192					
1	C.A.D.C. 5009A					
1	M.F.W. 67					
1	R149					
1	Paycard					

W. 2539
100M-11-18

DUPLICATE

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.

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(1) Name of Overseas Unit which Soldier joins 193rd O.S. Bn. C.E.F.

(2) Regimental Number 901213

(3) Full Name of Soldier Charles Lynton Foster

(4) Place of Birth Medicine Hat, Alberta.

(5) Are you married, or not ? Yes.

(6) If married, state,
(a) Full name of your wife Ada Gertrude Foster

(b) Present Postal Address Wallace Bay, Cumb. Co. Nova Scotia

(7) Are you a widower ? No

(8) Have you any children ? Yes

If so, give number of boys and girls 1 boy.

Also their names and ages Malcolm Alden Foster. 10 mos. old.

M. F. W. 67.

300M.—5-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? No

If so, state name and address ———

(10) Is your Mother alive? No

If so, state name and address ———

———

(11) If your Mother is a widow ———

Are you her sole support, or not? ———

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

———

———

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

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

Receiving Separation Allowance now

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.

J. P. Langford

J. Stanfield, Lieut. Col.
Comd'g. 193rd. Overseas Battalion.
Officer Commanding.

Date 15 - 8 - 16

Original

MEDICAL HISTORY SHEET.

Surname Foster Christian Name Charles Lynton

Examined { on 14 day of Mar 1916 / at Truro, N.S.

Approved by E.D. McLean

Rank Capt. M.O.

Birthplace { City or Town Medicine Hat / County Alberta

Apparent age 30 — 9 Mos

Trade or occupation Clerk.

Height 5 Feet 9 Inches.

Weight 165 Lbs.

Chest measurement { Minimum 35 inches. / Maximum expansion 4 inches.

Physical development Extra

Small-Pox Marks None

Vaccination Marks { Arm Right. Left. / Number 0 3

When Vaccinated last years ago

(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection Slight Contraction of Flexor tendons of Digits toes left foot. 3.9.17. Jan

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

Date.	Result.	Vaccinations.
15.9.16		E.D. McLean M.O.
9.10.16		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
15.9.16		E.D. McLean M.O.
9.10.16		M.O.
24.10.16	Jab	M.O.

Enlisted on 14th day of March 1916 at Truro. N.S.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	193rd Bn C.E.F.	951213		March 14 1916.
Transferred to	185th Bn 13th Bn CRT			Dec 29, 1916.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Kinmel Park.	8.1.19.	Sld. "A"	Ja Lock Capt RAMC

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

M. F. B. 313.

400M.—1-16.
H. Q. 1772-39-439.

Surname Foster Christian Name Charles Lynton

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.

D.M.S.-1375.

Medical Examination upon leaving the Service

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

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

Rank Cpl. Name Chas. L. Surname Foster

Unit or Corps 13 C.M.R.'s (If a soldier) Regtl. No. 901213

Born at Medicine Hat, Alta. on, date June 24, 1885.

Signature (for identification) Chas L Foster

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

1. **PHYSIQUE**—Any deformity, maiming or lameness? If so, describe. None.

Weight 163 lbs.

Height 5 ft. 9 ins.

2. **NUTRITION AND DIATHESIS?** Good.

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

3. **NERVOUS SYSTEM?** No.

4. **RESPIRATORY SYSTEM.** No.

5. **HEART?** No.

Abnormal Sounds? None.

Abnormal Size? No.

Pulse Rate? 72. Intermittence or irregularity? No.

6. **ARTERIES.**—Any hardening? No.

7. **DIGESTIVE SYSTEM?** No.

8. **GENITO-URINARY SYSTEM?** No.

Urinalysis—s.g.? 1018. Reaction? acid. Albumen? 0. Sugar? 0.

9. **SKIN, MIDDLE EAR, EYE** or any other part? No.

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe. None.

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

Examined at Kinmel Park Signed J.A. Locke Capt. M.O.

Date 28/1/19 Signed [illegible] Capt M.O.

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

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. 901213 Rank Cpl Surname Foster
(Give name in full) Charles Lynton
Unit or Corps D D #6 Birthplace Medicine Hat Alberta

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

1. GENERAL DESCRIPTION:

Physique Good Weight 167 lbs. Height 5 ft. 9 in. Colour of Eyes Blue.

Nutrition Good

Pulse 72

Condition of arteries Good

Vision Rt. 20/20 Left 20/20

Hearing (conversational voice) Rt. 15 ft.

Left. 15 ft.

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

Opinion as to general health and physical condition Good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)

Nervous System No. Genito Urinary System No. Cardio-Vascular System No.

Special Senses No. Integumentary System No. Respiratory System No.

Disturbance of mentality No. Muscular System No. Digestive System No.

Osseous and Joint System No. Any other general condition No.

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

Wallace Bay. Cumberland Co, N.S.

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

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at..... (Overseas)

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

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

Signature Chas. L. Foster.....

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

THIS SECTION FOR USE IN CANADA—

Examined at.....Halifax.....(Canada)

Date .....10/3/19..... Signed .....M.O.

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

Signature .....

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

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

[OVER]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-39-1142.

C.A.[illegible]5009 A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

N.D.6

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.

NAME OF SOLDIER (Block Letters) ~~Forestry~~ Foster b.L

REGIMENT ~~6 F.C. C.R.T.~~ RANK ~~6 pte~~ No. 901213

Date of Examination in England 27/1/19 | Date of Examination in France Jan 5/1919

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 14.
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 Yes
- (*c*) In France

KINMEL PARK,
NORTH WALES.

Signature of Dental Officer C C Graham Capt

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 901213 (Rank) Cpl.

Name (in full) Foster Charles Lynton enlisted in

the 193rd Battn

CANADIAN EXPEDITIONARY FORCE at Truro N.S. on the 14th

day of March 1916

HE served in France

and is now discharged from the service by reason of Demobilization

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

Age 33 yrs 9 mos

Height 5 ft 9 in

Complexion clear

Eyes Blue

Hair light Brown

Marks or Scars Scar on right knee

C. L. Foster

Signature of Soldier

for R. L. Christie LIEUT

O.C. DISCHARGE SECTION NO. 6 DISTRICT DEPOT

Issuing Officer

Rank

Appointment

Date of Discharge March 15, 1919

Signed at Halifax N.S. this 13th day of March 1919

in Military District No. 6

File Reference No.

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

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

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

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

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

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

.....

Medals and Decorations .....

.....

Remarks .....

.....

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

.....
Name of Officer

.....
Rank

.....
Appointment

On demobilization the particulars called for on the back of this certificate will not be completed.

Uniform not to be worn after Date of Discharge, unless authority has first been obtained from G.O.C. District.

R—122
8,401—50,000—21-10-16

JM.

Rank | Name FOSTER, Charles Lynton. | Reg'l No. 901213

Unit 193rd Bn. | If in perm. Corps, What Unit? | Married or Single Married.

Place and Date of Enlistment Truro N.S. 14th March 1916. | Place of Birth Medicine Hat, Alta

Name and Address, Next-of-Kin Ada Foster.

Wallace Bay, Cumb Co. N.S. Canada. | Relationship Wife.

Assigned Pay Monthly $ | Payable to

Relationship

Separation Allowance $ | Payable to

Relationship

Discharge, Date and Place | Reason | Character

N/E. R.B. No 7690
File A.L.
Category Can O R

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 S.S. Olympic, 18/10/16			
28 DEC 1916	193rd Bn, S O S	Trans to 185 Bn, Witley	29 DEC 1916		Pt11*DO*58
30 DEC 1916	185Bn-	T O S From 193'Bn-Witley		29 12 16	Pt 2·DO*67
9 3/18	..	Ldr to 14th Bn	Bn	23 2/18	Pte 21 17th Bn Pte 60 17/4/18
16 3/18	14th Bn	Ldr to Base T[illegible]	Base	16 3/18	Pte 64 {RRT Depot Pte DO 45 5/16 3/18 Depot
16-3-18	13 CRT	TOS from CRT Depot	Witley	16:3:18	4 Dep Pte DO 45 5/16 3/18 Dep
28-3-18	"	Prov C/S	"	—	28-3-18 16
19-4-18	"	Landed in France	Etaples	29-3-18	17
3-5-18	—"—	appt'd A/Cpl. with pay.	Spr	—"—	25-4-18 DO 22.
9-9-18	DO	confirmed in rank of Cpl A/Cpl.	DO		22-4-18 DO 74.

REGISTERED APR. 1918

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.
5/1/19.	13th CRT	~~F~~ SOS on posting from to CRTD.	Cpl. Field	1-1-19.	DO'I.
28-1-19	Comp. Bde C.R.A.	S.O.S. to M.D. 6 Rhyl.	" Bodan	23-1-19	— 28. D.O.27 d/27-1-19 & M.D.C.W.6
11.2.19	MDC	SOS to Canada	" Rhyl	8.2.19	— 12.

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

M. F. W. 54. (A. F. B. 10s.
500M.—9-16
H. Q. 1772-39-9?0.

Casualty Form—Active Service.

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

Regimental No. 901713 Rank Pte. Name Foster Charles Leyton

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				
8.7.19	O/Seas	To SOS 056 Posted Cas Coy	Hfx	17/7/19	DD 8 & B.C. Nicks need Record DOC.
15.3.19		DISCHARGED at Halifax, N. S DO #72	for	R.L. Burstall LIEUT O.C. DISCHARGE SECTION NO. 6 DISTRICT DEPOT	

(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				

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

M. F. W. 54. (A. F. B. 103.
3502. 5-16
H. Q. 1772-39-909.

Casualty Form—Active Service.

Unit, Regiment or Corps 193rd. BAT. C. E. F.

Regimental No. 900173 Rank Private Name Charles Lyston ~~Foster~~ FOSTER

Enlisted (a) 14/3/16 Terms of Service (a) ~~Period~~ Duration & 6 months Service reckons from (a) 14/3/16

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

Extended ..... Re-engaged ..... Qualification (b) .....

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
		Embarked Canada ~~Disembarked~~ England arrived	Halifax Liverpool	12-10-16 18-10-16	
29-12-16	193rd	Trans. to 185th Bn.	Witley	29-12-16	Part II Ord # 58. Capt. & Adjt. 193rd. Overseas Bn. C. E. F.
29-12-16	OC 185th Bn	Taken on the strength of the 185th Bn	Witley	30-12-16	Part II ord # 67
9/3/18	OC 185th Bn	S.O.S. on transfer to 17th Res Bn Bramshott	Witley	23.2.18	Part II. Ord # 21 Capt. & Adjt. 185th. Overseas Batt'n. C. E. F. [Cape Breton Highlanders]
12-3-18	O.C.17th	TOS on transfer from 185th. Battalion.	Bramshott	23-2-18	Part II Order 60
16-3-18	O.C.17th	S.O.S. to Railway Troops	Bramshott	16-3-18	PT.II.Order 63 Lieut., Asst. Adjt. 17th Canadian Res. Batt
16/3/18	C.R.D. Depot	Taken on Strength	Purfleet	16.3.18	Part II D.O. 75

(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.

901213 Spt. Foster C.L.

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
16/3/18	C.R.T. DEPOT.	S.O.S. C.R.T.DEPOT ON POSTING TO 13 th.C.R.T.	PURFLEET	16/3/18	Part II D.O.75 Lieut for O.C. Canadian Railway Troops Depot.
16/3/18	O.C.13th. Bn.C.R.T.	TAKEN ON STRENGTH FROM C.R.T.DEPOT.PURFLEET	PURFLEET	16/3/18	Part II D.O.4.
28-3-18	13th. Bn.CRT	Proceeded Overseas	Purfleet	28-3-18	Part II D.O. 16 M. Meikle Lt for Capt.A.&.J. 13th. Bn. Can R'y Troops
		Landed In France			
		FIELD, 29-3-18			
		Pt II DO No. 17 dated 19.4.18			
22-4-18	CO, Bn.	Appt'd A/Corpl with pay	Field	22-4-18	B213 Pt II DO 22 dy 3-5-18
31-8-18	O.C. 13th CRT	Confirmed in rank of Corporal	do	22-4-18	B 213. Pt. II DO. 74. d/9-9-18
7-12-18	21 C.C.S.	Tapeworm	Adm. 21 C.C.S. To 15 A.T.	6-12-18 / 7-12-18	A 9321
8-12-18	22 Gen. Hosp	do	Adm 22 Gen. Hosp.	8-12-18	W 4748
14-12-18	O.C. 13th. CRT	Evacuated Sick	To 57 C.C.S.	6-12-18	B 213.
31-12-18	C.R.T.D.	Transferred to England and posted to C.R.T. Depot, Witley.		1-1-19	NR G20 RO 1.1/1919.
1-1-19	C.R.T.D.	S.O.S. to No. 6 Wing Kinmel Park Rhyl.	Bordon	1-1-19	B.O. pt 2 No.
1-1-19	C.R.T.D.	T.O.S. from Etaples			

Chas B. Chapwell
Lieut for Lt-Col. A.A.G.
Canadian Section, G.H.Q. 3rd Echelon, B.E.F.

Lieut. & Asst. Adjutant,
for Lt-Colonel Commanding,
Depot the Brigade, C.R.A.

B.C.Pt.2 No.8

Surname	Christian Name or Names	Reg. No.
FOSTER	C.L.	901213

Rank	Unit
Cpl.	CRT 13

Cas. List.	
	57CCS 6-12-18.
14-12-18 A397	Tapeworm
17.12.18 a 399-	3 22. G Camiers 8.12.18.
3.1.19 a 411-	3 6 6. W. E staples 22.12.18.
10.1.19 a 417 2	Dis 24.12.18

A.M.D. 2 Dept.

D.M.S. 1300. 50M- 30-8-18. Sch. of D.G.M.S.O.M.F.C. London

Cas. List.

SURNAME. Foster

CHRISTIAN NAMES Charles Lyntow

REGL. No. 901213 RANK Pte.

UNIT 193rd.

FORMER CORPS nil.

CARD NO. 6.

FOAL. 6

SOS Demob. 15-3-19

DO 72:13-3-19 #6 WA.

Bn

NEXT OF KIN.

NAMES IN FULL Foster, mrs. Ada

RELATIONSHIP TO SOLDIER Wife

ADDRESS Wallace Bay, Cumberland Co., N.S.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada Medicine Hat, Alta. DATE June 24th 1885.

PLACE OF ATTESTATION Truro, N.S. DATE Mar. 14th, 1916

From Halifax per S.S. Olympic 12-10-76

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

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

R/C. 14-2-19 267/30 Opl

MARRIED yes SINGLE WIDOWER

TRADE OR CALLING Clerk. RELIGION Church of England.

DESCRIPTION.

APPARENT AGE 30 YEARS 9 MONTHS

HEIGHT 5 FEET 9 INCHES

CHEST MEASUREMENT 39 INCHES EXPANSION 4 INCHES

COMPLEXION Clear EYES Blue HAIR Lt. Brown

DISTINGUISHING MARKS Not Stated.

MEDICAL EXAMINATION. PLACE Truro, N.S. DATE Mar. 14th, 1916.

Present address. Wallace Bay, Cumberland Co., N.S.

No 901213 Rank Pte Name Foster Chas Lynton

T.O.S. 14-3-16 Unit 193rd Battalion
(~~B~~# 12-14-3-16)

M.D. 6

PAID FROM 1916	PAID TO 1916	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
Mar 14	Mar 31	✓		
Apr		✓		
May		✓		
June		✓		
July		✓		
Aug		✓		
Sept		✓		
Oct		✓		

Form R. 149.

Charles Syngton

Name FOSTER Rank Cpl. Reg. No. 901213

Unit 13th. C.F.A. T.

Next of Kin Canada

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
6-12	57 C.C. Stn	Japelwerm		A397		40282
8-12	22 C. Hsp. Camiers	-do-		A399		6273-9
22-12	6 B. Dep. Etaples	-do-		A411		6561-10
14-12	Discharged		15	A417		65721

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

a.d.z.

Number 901213 Rank Capt.

Surname FOSTER

Christian Name Charles Lynton

Units 13th Can Rly Tps Theatre of War France

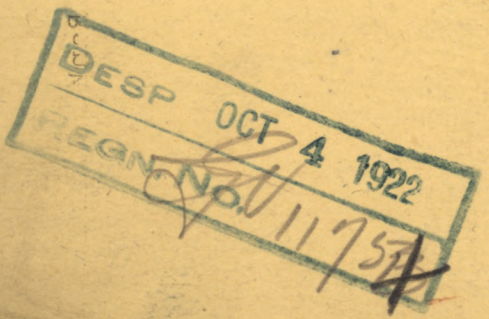
Date of Service 28-3-18

Remarks

Latest Address R.R.# 6 Wallace Bay
Cumberland Co
N.S.

Roll No B Page 17059

200m.-2-21.M


DESP OCT 4 1922
REGN. No. 11757

NAME Foster, C. McLyndon REGT. No. 90/213

RANK AND UNIT Cpl. Can. Rly. Trps.

NEXT OF KIN

CABLE		NATURE OF CASUALTY
No.	DATE	

OK

M. F. W. 42—100M.—8-18.
H.Q. 1772 39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
a 394 111	67 C.C.S.	6-12-18	La Peuvoirt
a 394 (3)	22 Gen. Camiers	8-12-18	" "
a 411 (3)	6 Corps. Dep. Etaples	22-12-18	" "
a 417 (2)	Sick.	24-12-18	

L. L. Job 310—M. & D. 6574.

14. 3. 16

MILITIA AND DEFENCE

M. F. W. 11.
50m.—4-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Ada G Foster

Address Wallace Bay
Cum Co
N.S.

Relation to Soldier wife, child or mother } wife

Name of Soldier Foster, Chas. L.

Regtl. No. 901213

Rank Pte

Corps 193 Bn

To what Corps belonging when called out } ✓

PAYMENTS

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

CONSOLIDATED 5 ACCOUNT

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
15m.—3-16.
H. Q. 1772-39-818.

Sheet No. 2. Ada G. Foster. (wife)

Name of Soldier Foster Chas L. Pte

L. L. Job 95618—M. & D. 6555.

Month.	Year.	Cheque No.	Amt.		Remarks.
April	1916	S12082	31		31
May		D6288	20		20
June		M9137	20		20
July		E7443	20		20
Aug.		S12290	20		20
Sept.		15341	20		20
Oct.		M19511	20		20
Nov.		Q21553	20		20
Dec.		Q25137	20		20
Jan.	1917	R28587	20		20
Feb.		W31601	20		20
March		R34994	20	291	20
April		9889	20		20
May		R4304	20		20
June		V23443	40		10
July		V 9955	20		20
Aug.		Z13526	20		20
Sept.		Z 17604	20		20
Oct.		F. 20787	20		20
Nov.		A 13623	20		20
Dec.		M2 [illegible]	20		20
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

431. Ed

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier .....

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

L. L. Job 4503.—M. & D. 6332.

Wge

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
50m.—6-16.
H. Q. 1772-39-819.

To Whom Mrs Ada G. Foster

Address ~~Wallace Bay~~
R-R.#3 ~~Col Co N. S.~~
Pugwash N. S.

Rate 20 OCT 1 1916 10 7/17

By Whom Assigned Foster Chas. L.

Regtl. No. 901213

Rank Pte

Corps 193 Bn

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				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—6-16.
1772—39—819.

Sheet No. 2. Ada G. Foster Wife

L. L. Job 4503.—Req. 6332.

Name of Soldier. Foster C. L.

90213 193 Ken Rle

20[00]

OCT 1 1916

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		T26713	20	
Nov.		O29295	20	
Dec.		S33946	20	
Jan.	1917	Q40177	20	
Feb.		A45156	20	20 R
March		V46426	20	20 M.
April		F1567	20	20 25
May		U7989	20	
June		T[illegible]052	20	20 15
July		B23258	20	20 K R[d] 3 Pugwash, N.S 10 7 17 R15
Aug.		N28826	20	20 B
Sept.		T35762	20	20 D 30
Oct.		H34044	20	
Nov.		A27451	20	
Dec.		I54099	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.				

P 820
12474--375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- October 1st. 1916.	EFFECTIVE DATE:-
AMOUNT:- $20=	AMOUNT:-

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

Ada. G. Foster, (Wife.)
Wallace Bay. N.S.

Stopped 1/4/19

Book 1416
Rhyl 1456

NAME:- FOSTER-Charles Linton.
NUMBER:- 901213.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private.
D.O. 22 3/5/18 13 CMT.	22.4.18	A/Cpl Paid
Do 74 3/9/18 "	"	RANK CONFIRMED

UNIT AND TRANSFERS

ORIGINAL UNIT:- 193 2nd Bn.
DATE ACCOUNT FIRST OPENED:- Nov 1st 1916

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			185TH BATTN CAN.
CRTdl. 75-14/3/18	1.4.18	31.3.18	C-R. T.dl.

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 =	= 10		
D.O. 22 3/5/18 13 C.M.T.	1 10	. 10		36

Dis. to Canada 31/1/19 CR. 2146 Bord. 23/1/19 Rhyl. - - L.R.C. 60/10

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
~~24/12/18~~	~~2070~~	Field	~~4 66~~				
~~2/4/19~~	~~2330~~	CRA	~~24 33~~				
~~8/4/19~~	~~2339~~	"	~~24 33~~				
~~21/4/19~~	~~2404~~	Bdm.	~~4 87~~				
			58 19				

PARTICULARS OF RENDERING NON-EFFECTIVE:- Dis. to Cam 31/1/19 CR. 2146 Bord. 23/1/19 Rhyl. - - L.R.C. 60/10

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mar.	Balance Forward.								16 86		
April	P. P.	33		AR. 37 9/4/18 13 CMT	3 57						
				C. A. P.				20			
				" 257 27/4/18 "	2 68				23 61		
MAY	Appt Rhyl 27/4/18 - 30/4/18 9 days @ 10d	33			6 25			20			
	Do. 22 3/5/18 13 C.M.T.	90		" 331 10/5/18 "	2 68						
	C. P.	37 20		C. A. P.				20			
				" 411 25/5 "	3 57				35 46		
		38 10			6 25			20			
June		36		C. A. P.				20			
				" 489 22/6 "	3 57						
				570 25/6 "	3 57				44 32		
		36			7 14			20			
July		37 20		" 666 20/7 "	3 57						
				C A P				20	57 95		
		37 20			3 57			20			
Aug'		37 20		C. A. P.				20			
				" 753 4/8 "	7 14						
				" 831 23/8 "	3 57				64 46		
		37 20			10 71			20			
Sep		36		" 908 9/9 "	3 57						
				C A P				20	76 87		
		36			3 57			20			
Oct.		37 20							114 07		
				C A P.				20	94 07		
				" 1004/17 5/10 "	3 73				90 34		
				" 1096/26 29/10 "	3 73				86 61		
		37 20			7 46			20			

Agreed

COMPILED BY V. Holland
CHECKED BY

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
				Forward					86 61		
Nov		36.		A.A. C.A.P				20.	102 61		
				AA 1190/13 7/11 13 CAT.	3 73				98 88		
				" 1276/32 25/11 "	11 19				87 69		
Dec.		37 20		" C.A.P.				20	104 89		
				" 1362/53 3/12 "	3 73				101 16		
JAN		37 20		C.A.P.				20	118 36		
		11040			1865			60			
				" 2339/8 8/1 CAA	24 33				94 03		
				" 2339/8 8/1 "	24 33				69 70		
				" 9070/10 24/12 "	4 66				65 04		
				" 3104/35 24/1 "	4 87				60 17		
				" 1305/63 1/2 K'Pk	9 73				50 44		
		- -			6792			- -			

S.O.S 8/2/19 5L 5 17 Rec

MARRIED OR SINGLE M.

PLACE OF BIRTH Medicine Hat. Alberta.

NAME AND ADDRESS OF NEXT OF KIN Ada G. Foster
Wallace Bay. Nova Scotia

RELATIONSHIP OF NEXT OF KIN wife.

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. 901213 RANK Pte. NAME Foster, Charles Linton

IF IN PERMT. CORPS WHAT UNIT UNIT 193 B/n TRANSFERRED TO 185th Bn DATE 31/12/16 AUTHORITY O.70.59

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION Truro. N.S. TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 14-3-16 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 20. DATE EFFECTIVE Oct. 1/16

PAYABLE TO Ada G. Foster, Wallace Bay, Nova Scotia RELATIONSHIP Wife.

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)

C.I.

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
31 10/16														13 85	1385															1385				Bal from Canada
30 11/16	30	1.00	30		30	.10	3								33	4 26 10/16							974											
																51 15 5/16	103	30 4/16					486	487			20		3947	738		7	38	
31 12/16	31	1.00	31		31	.10	3	10							34 10	151 15 5/16	216	20 12/16					244	973			20		3217	931		931		Trans to 185th Bn 31/12/16 O.70.59
1917 Jan 31	31	"	31	9 20	31	"	3	10							34 10	230	13/1/17						487				20		2457	1854		1854		
Feb 28	28	1.10	30	80											30 80	350	15/2/17						486				20		2486	2448		20	448	
Mch 31	31	"	34	10											34 10							476	24/3/17		1946			20		3946	1912				
															1 19 95															16 0 83				
Apl 1/30	30	1.10	33	-											33 -												20		20 -	3912				
May 1/31	31	1.10	34	10											34 10	76	24/4/17						7 30											
																45	16/4/17						487				20		3217	3406				
June	30	1.10	33	-											33 -	189	3/5/17						7 30											
															28 0 05	128	14/5/17						486				20		3216 2450 16	3489				
July	31		34	10											34 10												20		20 -	4899				
Aug	31		34	10											34 10	217	12/6/17						486											
																257	26/6/17						7 30				20		3716	5093				
															348 25	344	30/7/17	386	14/8/17				487	730					29732					
Sept 1/30	30		33	00											33 00	297	12/7/17	424	27/8/17				730	487			20		4434	3959				
			367	40										13 85	381 25								7543	4623			22000		34166					

901213 Pte Foster, Charles Linton a/P 20cs

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																																		

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SER. ALLCE. ENG.
Oct 1	Balance Forward ~~39 59~~ 20th								39 59		
	Ptes pay	34 10		Can. A.P.				20cs			
				AR 4447 185th Batt 10.9.17	9 73				43 96		
		34 10		Can A.P.	9 73			20cs			
8 w	Ptes pay	33 00		Can A.P.				20cs			
	" " Dec	34 10		AR 5249 185th Batt 15.10.17	7 30						
				AR 591 " " 29.10.17	4 87						
				AR 509 " " 24.9.17	4 86						
				AR 630 " " 12.11.17	7 30						
				Can A.P. Dec				20cs			
				Railway Trans "A" 9.9.17							
				Torch 55/608374. Waterloo to Guilford	73				46 00		
1918		67 10			24 061			40cs			
Jan	Pte Pay	34 10.		Can. A.P.	100			20			
				AR 668 185th Bn 26-11-17	9 73						
				" 706 " 5-12-17	4 87						
				" 747 " 18.12.17	9 73				35 77		
		34 10			24 33			20			
Feby	Pte Pay	30 80		Can. A.P.				20			
				AR 788 185th 10.1.18.	7 30						
				" 829 " " 28.1.18	4 87						
				" 867 " " 12.2.18	7 30				27 10		
		30 80			19 47			20			
Mar	Pte Pay	34 10		Can. A.P.				20			
				A.R. 904 185th Bn 28.2.18	4 87						
				DN. AR. 1924 CRT. 22.3.18	14 47				16 86		
		34 10			24 34			20			

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SER. ALLCE. ENG.

Date of Enlistment 14/3/16

MILITIA AND DEFENCE

Separation and Assigned Pay Branch F

OVERSEAS CONTINGENTS

4272 ~~4283~~

Date of Assignment Oct 1/16

6 L 24 S.K.

RATE OF SEPARATION ALLOWANCE

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

P.C. 3267 1.9.18
P.C. 2753
M.O. 83484

RATE OF ASSIGNMENT

20			

PARTICULARS OF SEPARATION ALLOWANCE

No. 901213

Rank Pte Promoted Reverted Discharge

Soldier's Name Chas. L. Foster

Battalion 193rd Battn.

Beneficiary Ada G. Foster.

Relationship Wife.

Address ~~Malden Bay, Cum. Co. N.S.~~

M.9.W.2554 - 2.8.18

PARTICULARS OF ASSIGNMENT

Name Mrs Ada G. Foster (wife)

Address R.R. #3 Pugwash, N.S.

Change of Address

1

2

3

4

REMARKS 06252-C-41

1917 Date	Cheque No.		Amount S/A	Amount A/P	Total	
Dec. 31 1918			431	300	731	M.D.H. Reld. SR.
Jan.	O	67703	30	20	50	S
Feb	L	95842	25	20	45	
Mar	a	135675	25	20	45	S
Apr.	B	12937	25	20	45	S.
May	2	19094	25	20	45	
June	M	22377	25	20	45	C
July	M	29735	25	20	45	C
Aug	M	37751	25	20	45	C
Sept.	R	49434	25	20	45	C
Oct	R	53972	25	20	45	C
Nov	N	56779	25	20	45	C
Dec	N	65471	45	20	65	C ✓
Jan	Q	75320	30	20	50	C
Feb	Y	72378	30	20	50	W
			816	580		

A/c Closed ~~28/2/19~~

Ap 580 Ret'd per Princess Juliana

SA 816 Date 17/2/19 F.X. 20/2/19

Clerk J. Maher

MD.6
MRO-70264

M. F. W. 128
400M.—6-17—177-39-141
L. L. 2220—M. & D. 1193.

CONSOLIDATED COUNCIL

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. 22330—M. & D. 7993.

Toronto. 8-2-19 20050 Princess Juliana 14.2.19

AUDITOR | PAYMASTER

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

M. OR S. | REGT. No. 901313 | RANK a/Bdr. | NAME (IN FULL) Foster B.L.

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Yes 30.00 | DATE EFFECTIVE 1.3.19

TO WHOM PAID | RELATIONSHIP

ADDRESS Same as A.F.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. B.R.D. | IF IN P.F. WHAT UNIT? | (BLOCK LETTERS, SURNAME FIRST)

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY. $ 30.00 | DATE EFFECTIVE 1.3.19

PAYABLE TO Ada G. Foster | RELATIONSHIP wife | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS R.R.#3 Wallace Bay Cumb. Co. N.S.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED Toronto | PLACE | DATE 15-3-19 | REASON Demob | AUTHORITY Clo 72 | IF ENTITLED TO POST DISCHARGE PAY

English
L.P.B

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	Credit B.L.P.B. $	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
Balance from previous account																																				
adjusted to 31.1.19		1.70							60	14																	9 13									
																											34 84									
																											20 00									
																															64 60		4 43			
Feb	28	120	33 60		11 20				44 80																		443				443			40 37		
Mar	15	120	18		40 37																															
					30																															
					30				123 37								18367 93 37														123 37					
																	18369 70												18368 30				40		70	
	183		WDG Hro	Da 180	600.00																															
					15		615																														
			Hro		180		615																														

War Service Gratuity 70.00

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

This space to be for numbers.

War Service Badge Issued,
Class...A..No..233594

Proceedings on Discharge.

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

B'

No. 901213

Rank Cpl

Surname Foster

Christian name Charles Leyton

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

Corps (Squadron, Battery or Company) 193 Batty

Date of discharge March. 15. 1919.

Place of discharge Halifax N.S.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 33 years 9 months.

Height 5 feet 9 inches.

Complexion clear

Eyes blue

Hair light brown

Trade clerk

Intended place of residence (To be given as fully as practicable.) R.R. #3 Wallace Bay Cumberland Co N.S.

Descriptive marks

Scar on right knee

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

Authority for discharge demobilization

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.

—

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.)

M. F. B. 218.

200M.—5-18.
H. Q. 1772-39-113.

(OVER)

GA 3-4-19

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

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

6. Medals and Decorations.....

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) Halifax N.S. .....

(Date)..... *Commanding*.....

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, and that I have received my permanent discharge certificate.

(Place) Halifax N.S. C.L. Foster ..... *(Signature of Soldier.)*

(Date) March 13th 1919 L.T. Pentz ..... *(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.

..... *(Signature of Soldier.)*

10. **Statement of Service.**

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

Total.....years.....days.

11. **Confirmation of Discharge.**

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

(Place) Halifax N.S.

(Date) March 15/1919

(Signature) [illegible] LIEUT. COL.
No. 6 DISTRICT DEPOT.

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.)

Nil

Chas L. Foster.

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form	B. 263
Squadron / Battery / Company } Conduct Sheet,	"	B. 263a
or Field Conduct Sheet	"	W. 178
Copies of Convictions, by C. P.		in MS.
Med. Hist. Sheet,	Militia form	B. 313
Casualty Form	"	W. 54
Medical Report for Invalid§	"	B. 227
Dental History Sheet	"	B. 465
Last Pay Certificate	"	W. 44
Duplicate Discharge Certificate	"	W. 39A
‡Form of Will	"	W. 82

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

Attestation Paper	Militia Form	W. 23
or Particulars of Recruit	"	W. 133
Proceedings on Discharge	"	B. 218

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.

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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.