Original

4 A two British

ATTESTATION PAPER.

No. 3105521

1st Depot B. 2nd C O Regt. Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1.	What is your surname?	FOSTER
1a.	What are your Christian names?	Joseph Leo
1b.	What is your present address?	1510 N.18th St., Philadelphia Pa. US
2.	In what Town, Township or Parish, and in what Country were you born?	Pottsville, Pa. USA
3.	What is the name of your next-of kin?	Mrs Margaret Foster
4.	What is the address of your next-of-kin?	Ocean City, N.J. USA
4a.	What is the relationship of your next-of-kin?	Mother
5.	What is the date of your birth?	Appil 11th, 1885
6.	What is your Trade or Calling?	Salesman
7.	Are you married?	Single
8.	Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9.	Do you now belong to the Active Militia?	No
10.	Have you ever served in any Military Force? If so, state particulars of former Service.	naval or JLF No
11.	Do you understand the nature and terms of your engagement?	Yes
12.	Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?	Yes
13.	Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit?	No
14.	If so, what was the nature of the disability?	
15.	Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?	No
16.	If so, what was the reason?	

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Joseph Leo 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.

Joseph L Foster (Signature of Recruit)

Date October 24th 1917. C. Wood (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Joseph Leo 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.

Joseph L Foster (Signature of Recruit)

Date October 24th 1917. C. Wood (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 Toronto, Canada this 24th day of October 1917.

(Signature of Justice)

M. F. W. 23.
750 M.—1-17.
H. Q. 1772-39-841.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT.

Description of Joseph Leo Foster on Enlistment.

Apparent Age 32 years 7 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 6½ ins.

Chest measurement.
- Girth when fully expanded. 35½ ins.
- Range of expansion 4 ins.

Complexion Dark

Eyes Brown

Hair Dark

Religious denominations.
- Church of England
- Presbyterian
- Methodist
- Baptist or Congregationalist
- Roman Catholic RC
- 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).

scar on left leg.

Hearing good R.&.T.O.K.
each eye R 40 L 60.
Nasal spur right.

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.

DECLARED FIT BY MEDICAL BOARD
TORONTO MOBILIZATION CENTRE

Date October 24th., 191 7

Place Toronto, Canada.

R. H. Sheard
G. McC. Brereton M. O.
Medical Officer. PRESIDENT

*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.

Joseph Leo 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.

J. Hyde Bennett Major
(Signature of Officer)

OCT 26 1917

1st Depot Btn., 2nd C. O. R.

Date 191 .

REGIMENTAL DOCUMENTS

NAME FOSTER. Jos. Leo. (Cpl.) REGT. NO. 3105521 UNIT 1/2nd COR 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)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)				15249	
	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)					
1	DENTAL HISTORY SHEET (M.F.B. 465)					DISCHARGE
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Category
1	MEDICAL EXAMINATION (M.F.W. 129)					Demob'n.
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)					
	LAST PAY CERTIFICATE (M.F.W. 44)					DESERTION
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1.	C.A.D.C. 5009A.					
1	F.C.D.3.					

W 2589
500M-11-18
1732-39-1377

E.M.W.

Number 3105521 Rank a/Sgt

Surname FOSTER

Christian Name Joseph Leo

Units 2nd C.O.R. Theatre of War England

Date of Service 16/9/18

Remarks % H.D. Hilbert Esq. Grenloch N.J. U.S.A.

Latest Address ~~92 Power St~~ ~~Toronto Ont~~

19/2/40

Roll No A Page 3472

200m.-2-21.M.

DESP. MAR 21 40
REGN. NO. 363

No 3103-321 RANK Pte NAME Foster J L

T. O. S. UNIT M. C. O's Training Depot

M. D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918	1918			
Jan. 15	Jan 31	M.	Attached 15/1/18	(DO 21)
~~Feb.~~		M.		
Mar.		M.		
Apr. 1	Apr. 1	M.	Returned to Unit 1/4/18	(DO. 91)

SURNAME. Foster.

CHRISTIAN NAMES Joseph Leo.

REGL. No. 310552. RANK Pte

UNIT 1st Depot (2nd Can. Ont. Regt.) ~~Draft #48-B~~ Bn.

FORMER CORPS Nil.

CARD NO. 4

J 2.

Soldemob 14-5-19

FOLL.

D0134 14-5-19

No 2 D D

NEXT OF KIN.

NAMES IN FULL Foster Mrs. Margaret.

RELATIONSHIP TO SOLDIER Mother.

ADDRESS Ocean City, N.J. U.S.A.

~~CHANGE OF ADDRESS~~

Mrs J.L. Foster (Wife)
701 Spruce St,
Philadelphia, Pa.
U.S.A.

L. 16-11-16.

COUNTRY OF BIRTH U.S.A. Pottsville, Pa. DATE Apr. 11th 1885.

PLACE OF ATTESTATION Toronto, Ont. DATE Oct. 24th 1917.

O.S. 30-8-18-1407/10.

P/C 13-5-19. 316/52. Gle.

L. L. 10437. M. & D. 7253.

M. F. W. 22. 100M.—11-16. H. Q. 17 2-39-339.

MARRIED SINGLE yes. WIDOWER

TRADE OR CALLING Salesman. RELIGION Roman Catholic.

DESCRIPTION.

APPARENT AGE 32 YEARS 7 MONTHS

HEIGHT 5 FEET 6 1/4 INCHES

CHEST MEASUREMENT 35 1/2 INCHES EXPANSION 4 INCHES

COMPLEXION Dark. EYES Brown. HAIR Dark.

DISTINGUISHING MARKS Scar on left leg.

MEDICAL EXAMINATION. PLACE Toronto, Ont. DATE Oct. 24th 1917.

Present Address – 1510 N. 18th St.,
Philadelphia, Pa. U.S.A.

No. RANK Pte NAME Foster. J. L.

T. O. S. 24-10-17 UNIT Toronto Mobilization Centre
(to 298, 25-10-17)

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917 Oct 24	1917 Oct 28	m	Transfd to 1st Depl Co 2nd C.D.R. 25/10/17	AO 298 25/10/17

Form R 122.
2353—100M—9-12-16.

Rank | Name FOSTER, Joseph Leo | Reg'l No. 3105521

Unit B Sec-II 8th Drft, 1st Bn 2nd Central Ontario | If in perm. Corps, What Unit? | Married or Single Single

Place and Date of Enlistment Toronto Can. 24th Oct. 1917 | Place of Birth Pottsville Pa. U.S.A

Name and Address, Next-of-Kin Mrs Margaret Foster Ocean City N.J. U.S.A | Relationship Mother

N/E. R.B. No 8946
File R.L.
Category G.R. Can

Assigned Pay Monthly $ | Payable to | Relationship

Separation Allowance $ | Payable to | Relationship

Discharge, Date and Place | Reason | Character

H. W. & V., Ld.—9546-16.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
		Arrived in England		16.9.18	Saturnia
			a/sgt + amended by Do 3619/27.12.18		
4.10.18	8 Res	Taken on strength.	Pte Witley	16.9.18	Do 277
27.12.18	"	Reverts to Pte on arrival	" a/sgt	16.9.18	Do 361
27.1.19	"	Admitted a/Cpl. with hay fever & specially employed	" a/Cpl.	1.12.18	Do 27
31.3.19	"	S.O.L. to M.A. No 2 Rhyl	" a/Cpl	1.4.19	Do 90 after O.I. & M.D. Do 81 7/5.4.19 Cpl
		S.L. 54-1-28 a-3/4. 2/5/19.	Rhyl		
2.5.19	M.D.2.	S.O.L. to Canada	~~2.5.19~~	2.5.19	Do 104.

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.				

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

M. F. W. 54. (A. [redacted] 103.)
350M.—5-16
H. Q. 1772-39-9-20.

Casualty Form—Active Service.

Unit, Regiment or Corps ....

Regimental No. 3105-52 Rank Pte Name Foster J. L.
C. E. F.

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				
MAY 2 1919	O. S.	T. O. S. No. 2 DISTRICT DEPOT TORONTO 1919 PART II D. O. 137			
MAY 14 1919	S. O. S.	(DISCHARGED FROM H. M. S.) No. 2 DIS. DEPOT, PART II D. O. 137			

Lieut.
For O. C. No. 2 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.
500M.—9-1[illegible]
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps. 1st Depot Bn. 2nd C. O. R.

Regimental No. 3105521 Rank Pte. Name FOSTER, Joseph Lee
C. E. F.

Enlisted (a) Oct. 24-17 Terms of Service (a) D. of W. Service reckons from (a) Oct. 24-17

Date of promotion to present rank } Date ~~of appointment~~ six months after to lance rank } Numerical position on roll of N. C. Os. }

Extended. Re-engaged. Qualification (b) Salesman

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				
					Transferred to Ops Drop. From 1st Depot Batt'n, 2nd C.O.R.
HMT SATURNIA.		Embarked AUG 30 1918	Montreal		
		Disembarked England SEP 16 1918			
[illegible]	8th Res. Bn	Taken on Strength 8th Res. Bn.	Witley	16.9.18	D.O., Pt. 2 277
27. 12. 18	8th Res	DO #277 should read a/Sergt.	Witley	4.10.18	DO # 361
27. 12. 18	8th Res	Reverts to rank of Pte on arrival from Canada	Witley	16.9.18	DO # 361

(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				
27.1.19	8th Res.	Appointed a/Cpl. with pay while specially employed	Witley	2.12.18	D.O.#27
31.3.19	— " —	Sos to M D 2 Ling Rhyl	— " —	1.4.19	DO 90 ..... Lieut. ASS'T ADJ'T FOR O.C. 8th CANADIAN RES. B.

Attached C.C.C Kinmel Park for return to Canada Part II Orders No _____. Ceases to be attached C.C.C. Kinmel Park on embarking for Canada, Part 11 Order No. 104 2.5.19

Commanding _____ Wing,
Kinmel Park Camp.

EMBARKED S.S. "CASSANDRA"
MAY 2 1919
DISEMBARKED

J. J. F. Allen
Capt & Adjt
for OC #23 P.C.L.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 310552 (Rank) Corp

Name (in full) Joseph Lee Foster enlisted in

the 1st Bn 2nd C.M.R.

CANADIAN EXPEDITIONARY FORCE at Toronto on the 24

day of Oct 1917

HE served in England

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

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

Age 34

Height 5' 6 1/4

Complexion Dark

Eyes Brown

Hair Dark

Marks or Scars Scar left leg

Joseph L Foster
Signature of Soldier

Date of Discharge

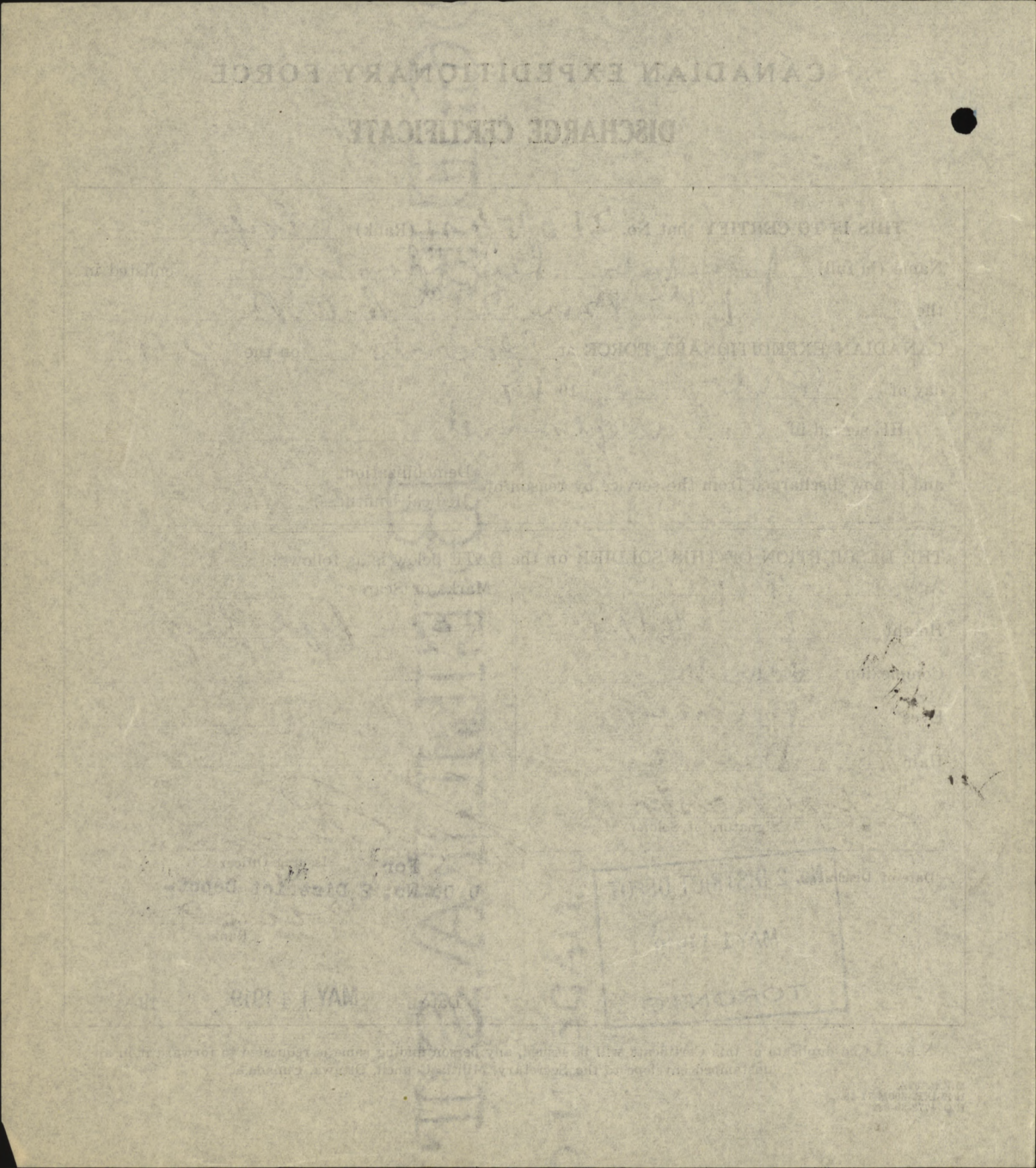
No. 2 DISTRICT DEPOT
MAY 14 1919
TORONTO

R. W. Rayner
For Issuing Officer
O.C. No. 2 District Depot.
Lieut
Rank

Date MAY 14 1919 19

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

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



FORM OF WILL

Joseph Leo Foster

I, Joseph L Foster (Name in full)

Regimental Number 3105-621 serving in "A" Coy 1st Depot Bn 2 C.O.R

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

I devise all my real estate unto

Nil

Philadelphia, Penn

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

absolutely, and my personal estate I bequeath to

Margaret A Foster. (Mother

835 Asbury Ave.

Ocean City N.J. U.S.A

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 19th day of August. A.D. 1918

(Sgt) Joseph L. Foster 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 E L C Green

Address of Witness 49 Victoria Aves Hamilton, Canada

Occupation of Witness Stenographer

Signature of Second Witness W Venator Sgt

Address of Witness 181 Charles St Hamilton Ont

Occupation of Witness Book keeper

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

M.S.A. 15.

Original

MILITARY SERVICE ACT, 1917.

3105521

MEDICAL HISTORY SHEET.

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

1. Surname Foster Christian name Joseph Leo

2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule

3. Consecutive number on schedule of men reporting for service (if he appears on it)

4. Address (including street and number, if any) 1570 N. 18th St. Philadelphia Pa US

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 24th day of October 1917, by the undersigned medical board sitting at Toronto Canada.

5. Age as stated 32 Years 7 Months. 6. Apparent age 32 Years 7 Months

7. Height 5 Feet 6¼ Inches. 8. Weight 143 Pounds.

9. Chest measurement { Minimum 31½ Ins. / Maximum 35½ Ins. } 10. Complexion Dark { Eyes brown / Hair dark }

11. Physical development Good { Good / Fair / Poor } 12. Smallpox marks Nil

13. Number of vaccination marks { Right arm 2 / Left arm } 14. When vaccinated last 1913

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

Nasal spur right.

16. Slight defects but not sufficient to cause rejection Hearing good N.&. T. O.K. V:R 40L 60

The man denies having had { Rheumatism / Tuberculosis / Syphilis } We find no evidence of past { Rheumatism / Tuberculosis / Syphilis }

(Strike out disease admitted or suspected.)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category A2

DECLARED FIT BY MEDICAL BOARD
TORONTO MOBILIZATION CENTRE
M.O.
PRESIDENT

Signature of Man

President. Member. Member.

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
23-11-17		T.H.F. Adams Lt. M.O.	16-11-17		M.O.
		M.O.	23-11-17		T.H.F. Adams Lt. M.O.
		M.O.	30-11-17		M.O.

Joined 24th day of October 1917 at Toronto Canada.

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	1st Depot Bn	3105521		
Transferred to.....	2nd C O Regt.			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
NIAGARA CAMP	1/8/18.		A-2. J.K. King. capt.
Witley Camp	26.3.19	nil	A. M. Rogers Capt S.M.B.

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

Christian Name Joseph Leo

Surname Foster

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital			Dates of Discharge from Hospital.			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.
		Day	Month	Year	Day	Month	Year				

A.F. B.178

Regional No.....

MEDICAL HISTORY of—

Regimental No. 3105521

Region.....

Surname Hosler

Christian Names Joseph Lee

TABLE I.—General Table.

Birthplace { Parish Pottsville
County PA U.S.A

Examined { on 24 day of October 1917,
at Toronto Canada

Declared Age 32 years 7 months days.

Trade or Occupation Salesman

Height 5 feet 6½ inches. Weight ..... lbs.

Colour of Hair Dark Complexion Dark

„ Eyes Brown

Chest Measurement { Girth when fully expanded 35½ inches.
Range of expansion 4 inches.

Physical Development .....

Vaccination Marks { Arm, RIGHT | LEFT
Number ..... | .....

When Vaccinated .....

Vision { R.E.—V= ..... With Glasses { R.....
L.E.—V= ..... L.....

Identification Marks, such as Tattoo, Moles, Scars, etc :—

.....

.....

Defects or Ailments :—

.....

.....

Examined and found—

Fit for Grade { I. / II. / III. / IV.

(Strike out those which do not apply.)

Signature Lt Col A A Sheard

Chairman of Medical Board.

Re-examined for posting at.....

On.....day of.....191....

Enlisted { at.....
on.....day of.....191....

	Corps	Regtl. No.
Joined on enlistment		3105521
Transferred to		

TABLE III.—Boards, Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service; Extension, Re-engagement, or Prolongation of Service, Issue of Surgical Appliances, Particulars of Dental Treatment, etc.

Date	Brief details and Signature

Special Remarks: state if a discharged Soldier

.....

.....

.....

.....

TABLE IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

Became non-effective by .....

on.....day of.....191....

(*Signature*) .....

(*Rank*) .....

(29056) W3751/P1398. 800m. 7/18. M.R.Co.,Ltd. E 3540.

TABLE II.—Only for admissions to Hospital or to the Sick List in Case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 2

NAME OF SOLDIER Foster Joseph Leo 19-8-18

REGIMENT 1-2 C.D.O.R. RANK Sgt. No. 3105521

INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

	Date	Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination	1918			missing Filled			7.18.	3.4.5			12.14.	19.	30.31.					9		B.R Gardiner		
Aug. 27.																						

Partial upper Denture

L 465.
10M—6-18.
1772-30-950.

C.A.D.C. 5009A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

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) FOSTER J. L

REGIMENT 8th Can. Res. Bn. RANK Corporal No. 3105321

Date of Examination in England 28-3-19 Date of Examination in France

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 7.
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? No

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "*Yes*" where applicable to any or all of *a*, *b* or *c*.)

- (*a*) In Canada Yes
- (*b*) In England
- (*c*) In France

Signature of Dental Officer J. W. Ross Capt

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

A.D.M.S. HEADQUARTERS CANADIAN TROOPS. 29 MAR 1919 WITLEY, SURREY.

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. 310521 Rank Cpl. Surname Foster.
(Given name in full) Joseph Leo.
Unit or Corps 7th Can. Bn. Birthplace Pottsville Penn. U.S.A.

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

1. GENERAL DESCRIPTION:

Physique good Weight 160 lbs. Height 5 ft. 7 in. Colour of Eyes brown.
Nutrition good
Pulse 72
Condition of arteries good
Vision Rt. 6/12 Left. 6/12
Hearing (conversational voice) Rt. 20 ft.
Left. 20 ft.

Identification marks, scars, or deformities. (Give cause and date of origin.)
Nil.

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.

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

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Witley (Overseas)

Date 22/3/19 Signed [signature] M.O.

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

Signature Joseph L Foster

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

THIS SECTION FOR USE IN CANADA—

Examined at ..... (Canada)

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

I hereby certify that I have read, or have heard read, the above 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.

CERTIFICATE OF SERVICE

(Issued following loss of Permanent Discharge Certificate)

This is to certify that No. 3105521 (Rank) Acting-Corporal

Name in full FOSTER, Joseph Leo

Enlisted in 1st Depot Battalion, 2nd C.O.Regt.

Canadian Expeditionary Force on the 24th Day

of October 19 17

He served in CANADA & ENGLAND

with the 8th Reserve Battalion

and was discharged at Toronto, Ont.

on the 14th day of May 19 19

by reason DEMOBILIZATION

His conduct and character while in the service were Good

Medals and Decorations BRITISH WAR [redacted] MEDAL

DESCRIPTION ON DISCHARGE

Age 34 Years

Height 5'6½"

Complexion Dark

Eyes Brown

Hair Dark

H.Q. 649-F-14102

(W.E.L. Cotterell), Major,
Officer i/c Records,
for Adjutant-General.

9th November 34

Ottawa, day of, 1

Note.- This Certificate, if lost, will not be replaced.

Re signature

Certified this document checked with Regimental documents.

P. 880.

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

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

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

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

1. Christian names Joseph Leo 2. Surname Foster

3. Rank a/Sgt 4. Original Unit 2nd C.D.R.D. 5. Reg. No 3/85521

6. Address, in full, to which future payments of gratuity are to be forwarded C/o J. Hornbergen
92 Power St
Toronto Ontario

7. Date of enlistment in the C.E.F. 22nd October 1917

8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge N.A.

9. Relationship of such dependent N.A.

10. Address, in full, of such dependent N.A.

11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? N.A.

12. ~~Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—~~ DD

13. ~~Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States?~~ DD

14. ~~Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service~~ DD

15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served 17 months
10 mon. with 1st of 2nd C.D.R.D. in Canada
7 mon. " 8th Can Res Bn in England

16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department No

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

5484. Wt. /80P. 50,000(3). 2/19. S.O.,F.Rd.

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units. No

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid No

20. ~~Have you been issued with a War Service Badge? If so what class?~~ DD

21. Have you, during the present war, served in the Imperial Forces? No

22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled No

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? Sgt.

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

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

MAY 14 1919

(b) ~~Reason for discharge~~ DEMOBILIZATION

25. ~~Are you at present a member of and in receipt of pay and allowances from any~~ Canadian naval or land ~~forces? If so, give unit~~ DD

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

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

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

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant:

Place of Residence:

Declared before me at:

This ..... day of ..... 19.....

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

POST DISCHARGE PAY.

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

Certified Correct.

District Paymaster.

P 820
12474—375M—13-2-18.

FRENSHAM

* Strike out whichever inapplicable.

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

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

NAME:– FOSTER Joseph Leo B

NUMBER:– 3105521

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
L.P.C. from Canada	1·9·18	a/~~Sgt.~~
D0361. 27/12/15 8Res	16·9·18	reverts Pte
Do 27. 27/1/19 ✓	1·12·18	appt'd a/Cpl. (Paid)

UNIT AND TRANSFERS

ORIGINAL UNIT:– Draft No. 118B 1–2nd CORPS

DATE ACCOUNT FIRST OPENED:– 1·9·18

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			8 Res Bn
			Canada

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
24/3/19	9092	Welby	~~12 17~~				
25/3/19	9322	✓	~~9 73~~				
				L.L. Bal. Cr.			118·89
				L.R.C. Bal. Cr.			96·99

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
L.P.C. from Canada	1/~~3 5~~	~~7 5~~ 10		
D0361. 27/12/18. 8Res.	1/10	10		
Do 27. 27/1/19				

PARTICULARS OF RENDERING NON-EFFECTIVE:– Dis. Canada. 31/3/19. NR. 5474. Welby to Welby 28/3/19 M.D.

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
31-8	Bal. from Canada								11 85		
Sept.	30 L.P.	45–		AR6382- 20/9/18- FRENSHAM	4 87						
		45			4 87				51 98		
Oct	Sgt (P)	46 50		7135 4/10 " Frensham (3)	4 87					15–	
				5640 15/10 8Res (18)	4 87						
				5705 28/10 ✓ (19)	4 87				83 87	30	
		46 50			14 61						
Nov	Sgt (P)	45–		6294 14/11 ✓ (1)	4 87						
				6565 27/11 ✓ (12)	9 73						
Dec	✓	46 50		AR 6955 ~~Oct~~ 13/12 ✓ (5)	38 93						
				Differ Sgt & Pte Pay 16/9/18–31/12/18 @ 40d. 107d.		42 80			113 14	75	
Jan 1919	Pte Pay	34 10									
		125 60			53 53	42 80					
Feb.	✓	30 80		7445. 10/1/19. 8Res. (1)	14 60						
	Corporal Rate 1/12/18 to 28/2/19 = 90 @ 10.	9 00		AFO. 1687 No 634 18/12/18 C.P. Dublin Irish Com. (5)	4 87						
				AR 7759 28/1/19 8Res. (5)	14 60						
				8020 12/2 ✓ (13)	9 73						
				725 ? Dublin (15)	4 87				104 27		
March	Cpl Pay	37 20		8206 26/2 8Res (19)	14 60						
	Def. Pay Int.	1 75		8513. 12/3 ✓ (27)	9 73				118 89	105–	
		78 75			73–						
a/pl.		—		9092. 24/3 ✓ (1)	12 17				106 72		
				9322 25/3 ✓ (1)	9 73				96 99		
				235 4/4 Kninmel End (1)	9 73				87 26		
				3872 7/4 ✓ End (3)	9 73				77 53		
				7759. 1/5 ✓ End (8)	9 73				67 80		
		—			51 09	—					
				S.o.S. to Canada 3-5-19. SL 57. 8Res. MD2							

A.R. Craighead
Capt

NUMBER 3/105521 RANK Capl. NAME FOSTER J.L.

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

WAR SERVICE BADGE CLASS A

SERVICE GROUP 33

OCCUPATIONAL GROUP 19

M.D.2

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

Toronto
Mother
Salesman

A

M

EMBARKED S.S. "CASSANDRA"
MAY 2 1919
DISEMBARKED

1. No. 3105521

2 Rank. Corpl

3. Name. Foster Joseph Leo

4. Unit. 8th Res 2nd C.O.R

5 Date of Discharge MAY 14 1919 Place TORONTO, ONT

6 Reason for Discharge DEMOBILIZATION

7. Authority. No. 2, D.D., Part II, D.O. No. 137

8. Proposed Residence after Discharge Philadelphia Penna

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

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

M. F. W.?

Joseph L Foster
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

Date

No. 2 DISTRICT DEPOT
MAY 14 1919
TORONTO

Signature R Reynolds For
O.C. No. 2 D.D. (Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

LIST OF DISCHARGE DOCUMENTS.

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

Group,

Checked by No.

Date 14 APR 1916

Certified Correct
J. Amyot

-25-Fo-393.

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

OTTAWA, CANADA.

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

If the applicant will enquire at the local Branch of the Canadian Patriotic Fund he will be informed if there is an official who will take this Declaration free of charge.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

1. Christian Names Joseph Leo 2. Surname Foster
3. Rank a/Cpl. 4. Original Unit 1/2nd C.O.R. 5. Reg. No. 3105521.
6. Address, in full, to which future payments of gratuity are to be forwarded 92 Power Street Toronto Ontario
7. Date of enlistment in the C.E.F. October 24. 1917.
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge None
9. Relationship of such dependent Not Applicable
10. Present address, in full, of such dependent Not Applicable
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? No.
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
Not Applicable
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? 8th Res. Bn. only England.
14. Were you on active service only in Canada or the United States? If so, give particulars of units and dates of such service 1st & B. 2nd C.O.R. from Oct 24. 1917 until Leaving for Overseas Aug. 28. 1918
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served 1 Depot Bn. 2nd C.O.R. from Oct. 24. 1917 Until Aug 28. 1918. 8th Canadian Res. Witley Camp. Surrey Eng. from Aug 28. 1918. Until May 14. 1919
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department No
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? No

M.F.W. 2595.
1772—39—1389.
122—D.P.—250M-2-19.

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units. No

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid 1st payment W. S. Gratuity on check #. 97169 at time of Demobilization May 14. 1919, Amount $7.00

20. Have you been issued with a War Service Badge? If so, what class? C. # 17107.

21. Have you, during the present war, served in the Imperial Forces? No

22. Are you entitled to received, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled No

23 (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England Yes

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

24. Are you now serving in the C.E.F. No If not, give:—(a) Date of discharge May 14. 1919 (b) Reason for discharge Demobilisation

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit No

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit No

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? No.

(b) If so, are you in receipt of full pay and allowances from that Department? Not Applicable

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: Joseph L Foster

Place of Residence: 92 Power St Toronto Ont

Declared before me at:

This 13th day of June 1919.

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner of the Administration of Oaths.

Harry J. Tasy
NOTARY PUBLIC,
N. W. COR. 18th & STILES STS.,
My Commission Expires March 9, 1923

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent

Certified Correct.

District Paymaster.

War Service Gratuity	Amount due

"CASSANDRA" 12-5-19

DISPERSAL "T" | AUDITOR | PAYMASTER

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

M. OR S. | REGT. No. 3105521 | RANK Cpl. | NAME (IN FULL) 71736 FOSTER J.L.

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F. 8th Res. Bn.
ADDRESS					IF IN P.F. WHAT UNIT? 192 Lower St Toronto Ont.
					PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY
IS SEPARATION ALLOWANCE PAID? No	DATE EFFECTIVE				1510 N. Gratz St 19-5-19
TO WHOM PAID	RELATIONSHIP				DATE OF ATTESTATION 22/10/17 — TRANSFERRED TO — DATE — AUTHORITY
ADDRESS					Philadelphia Pa USA
					ASSIGNED PAY $ Nil — DATE EFFECTIVE
					PAYABLE TO — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS
					ADDRESS
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE
					DISCHARGED — PLACE Toronto. — DATE 14-5-19 — REASON Demob. — AUTHORITY D.O. 137 — IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	C.	TOTAL CREDITS $	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.	BALANCE CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																						
31.3.19							96	99	96	99																									96	99	Bal. brot. fwd.
17.5.19	47	20/	56	40																	19	46	Ltd. on LPB												1.4 & 17.5 Pds
					35	00																															Clothing
					70	00																															1st W.S.G.
																	4	87	50																		Boat & train
							161	40									229	06													258	39					Cheque
																											W.S.G. 70 00										
																											3 60										
	W.S.G.																																				
122 days	28	00					280	00				14/5/19																			73	60	206	40			W.S.G. Paid by #2 D.D.
					60	27	340	27			AR 71	June 24	536763				66	40													140		140				
											AR 83	July	694543				60	27									97	3			210		70				W.S.G.
											" 118 Cmy 20						—														210	-	130	27			Our voucher
											118 Cmy 20		876309				130	27													340	27	—				64846 reinstated 24-7-19
	280				60	27	340	27									256	94									83	33			340	27					W.S.G. PAID IN FULL

AMOUNT DUE SOLDIER DEPENDENT

T.O.S. 2-5-19 D.O. 137

SUBS.....TO.....D.O.....

W.S.G. Paid by #2 D.D. No. 973 dR 7759 1-5-19 K.L.P.R. our voucher

CAPTAIN
FOR PAYMASTER WAR SERVICE GRATUITY

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