ATTESTATION PAPER.

No. 54

Folio. A30240

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? ..... John Fowler,
2. In what Town, Township or Parish, and in what Country were you born? ..... Headingly, Manitoba
3. What is the name of your next-of-kin? ..... A. Fowler, Esq.,
4. What is the address of your next-of-kin? ..... Armstrong, B.C.
5. What is the date of your birth? ..... Jan. 17th 1894
6. What is your Trade or Calling? ..... Farmer
7. Are you married? ..... No.
8. Are you willing to be vaccinated or re-vaccinated? ..... Yes.
9. Do you now belong to the Active Militia? ..... Yes
10. Have you ever served in any Military Force? If so, state particulars of former Service. ..... Yes 102nd R.M.R.
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.

John Fowler (Signature of Man).

S.P. McMordie (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, John Fowler, do solemnly declare that the above answers made by me to the above questions 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.

John Fowler (Signature of Recruit)

Date March 3rd 1914. S. P. McMordie (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, John Fowler, 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.

John Fowler (Signature of Recruit)

Date March 3rd 1914. S. P. McMordie (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 Victoria B.C. this 3rd day of March 1914.

(Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

(Approving Officer)

200 M.—8-14.
H.Q. 1772-1-13.

Description of J. Fowler on Enlistment.

Apparent Age 21 years / months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 11 ins.

Chest measurement: Girth when fully expanded 39 5 ins.
Range of expansion ins.

Complexion Dark

Eyes Grey

Hair Black

Religious denominations:
Church of England Yes
Presbyterian
Wesleyan
Baptist or Congregationalist
Other Protestants (Denomination to be stated.)
Roman Catholic
Jewish

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

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer).

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him* fit for the Canadian Over-Seas Expeditionary Force.

Date March 3rd 1914. Jno O'Brien Capt Can C

Place Willows Camp Thos Cullen Hanna C
Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

John Fowler 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.

W H Hames Lt Col (Signature of Officer)

Date March 3 1914.

REGIMENTAL DOCUMENTS

NAME FOWLER JOHN (Cpl) REGT. NO. 430240 UNIT 48th Bn H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
1	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)					
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)				16294	
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)					Demobilization
1	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
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	Disposal Cert.					
1	Debit Cert for demob.					
1	Casualty					
1	AA 21237					2
1	AA 5181					4-13
1	R 122					4-13
1	Pay card					11-13
1	Police 5069					
1	Pat to Unit					

W. 2589
100M-11-18
1772-39-1227

Number 430240 Rank Cpl

Surname FOWLER

Christian Name John

Units 3rd Can Pnrs Bn Theatre of War France

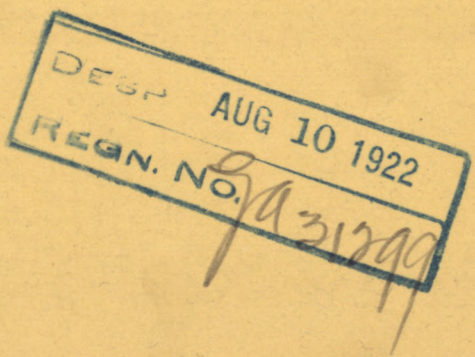
Date of Service 9-3-16

Remarks R.R. #2.

Latest Address Armstrong BC

Roll No. Blag 15665

.00 .-2-21. .


DEPT
AUG 10 1922
REGN. NO.
A31299

No. A30240 RANK Pte. NAME Fowler J.

T. O. S. 1-3-15.
(D.O. no 48) 4-3-15.) UNIT 48th Battalion C. E. F.

M. D. 11.

PAID FROM	PAID TO	SIG. OR REC'T
1915	1915.	
Mar 1	Mar 31	
April		
May		
June		
July		

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS	AUTHORITY

UNIT SAILED
JUL 1 1915

NAME Fowler John SOS. demob. 1-4-1910 D094 4-4-19

RANK & No. Pte. 430240

CORPS 48th No 10. D.D. Battalion.

ENLISTMENT, PLACE Victoria. B.C. DATE March 3. 1914 (S)

FORMER CORPS 102nd R.M.R.

COUNTRY OF BIRTH Canada Headingly Man.

NEXT OF KIN Fowler A. Esq.

ADDRESS OF NEXT OF KIN Armstrong. B.C. Can.

DISCHARGE, PLACE DATE

RIC 27.3.19 292/126 cpl

O/S 1-7-15 148/6.

L. L. 72591—M. & D.—5342.

M. F. W. 22. 50 m.—1-15.

H. Q. 1772 39-839.

REMARKS:

Form R. 149.

JOHN

Name FOWLER Rank Pte. Reg. No. 430240

Unit 123rd Pnrs.

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918						
23-1	2 C.F.A.		Tonsillitis	A125		12483
23-1-18	18 C.C.S.		do	A/135		13194
4-2-18	Discharged to duty		do	A/135	W	13194
	2 Please					

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

H. Q. FILE No. 649-

NAME Fowler J.

REGT'L No. 430240

RANK AND CORPS Pte. 3rd. Pioneer Batt.

CABLE

NO.	DATE

NATURE OF CASUALTY

NO. 932 X

FOLL.

L. L. Job 87318—M. & D. 6106.

M. F. W. 42—25m.-10-15.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
79.	Moore Bks., Shorncl	10-2-16	Influenza.
B15-0	"	15-2-16	"
A125-1	2 Can. Fld. Amb.	23-1-18.	Tonsillitis
A135-1	18 Cas. Clg. Stn.	4-2-18.	"
A135-1	Disc to duty	4-2-18.	"

MOORE BARRACKS, CANADIAN HOSPITAL, SHORNCLIFFE.

Fowler

ADMITTING CARD.

Regt. No. H30240 A. & D. No. 10729

Rank Pte

Name FOWLER, J.

Corps 3. Can. Pioneer Batt 2 Coy.

Religion C of E Age 22

M. H. Rec'd 12 M. H. Requested M. H Ret'd 13-2-16

Disease Influenza

Admitted 9-2-16

Discharged 15 FEB 1916

Place in Hospital 16

Transferred

Results

11/12. Kamloops B.C. 20 2.20 P.T.O.

REMARKS:

Name Fowler. J. Rank Pte Reg. No. 430240

Unit 3rd Pioneers

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/KO.	W.O. List
10.2.16.	Moore Barks Hosp.	Shorncliffe	Influenza	79		
15.2.16	discharged	do	do	850		

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

Fowles ?

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
Fowler	J.	4302440

Rank	Unit	Co.	Troop	Batty.
Pte	3rd Pioneer Battn.	123	P	1 C.O.

Hospital — Date of Admission

Irlam Bks Mch Shorncliffe 16. 2. 16

Transferred 2 C. F. Amb. Hosp. 23 - 1 - 18.

18 Cas Clg Stat. Hosp. 4. 2. 18.

Hosp.

Hosp.

Diagnosis (1) Influenza.

Later Diagnosis (if changed) Tonsillitis

(2) Rw

(3)

Additional Diagnoses: If more than one state present

DISPOSITION — Date

Dis 15. 2. 16

REMARKS

Dis to Duty 4. 2. 18

C.L. 18. 2. 16. to 19.

" 15. 6. 16. @ 15/-

" 29. 1. 18 @ 125 O

9. 2. 18. @ 135.

A.M.D. 2 DEPT.

Bch. of D.G.M.S. O.M.F.C. London.

EPITOME OF HOSPITAL TREATMENT.

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

(9178)—Wt. W12165—2146.—1,250,000.—2-15.—C. & G. Forms B. 103-1.

Army Form B. 103.

CERTIFIED CORRECT. Canadian Record Office, Westminster House, Millbank, S.W.

Casualty Form—Active Service.

Regiment or Corps 4 8th Battalion C.E.F. (3rd Pioneer Bn)

Regimental No. 430240 Rank Pte Name Fowler. John.

Enlisted (*a*) 3.3.15 Terms of Service (*a*) 1 year or duration of war Service reckons from (*a*) 3.3.15

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

Extended 3.3.15 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 FOR FRANCE.		9/3/16	107/PNR/3/1 121/4542/S.D.2.
		Trsfd. to 123rd Bn.	Field	8.5.17	Pt.II O.65 d.18.6.17
23.6.17	O.C. 123rd	T.O.S. from 3rd Ans	Field	9.5.17	Part II-31.
11-8-17.	O.C. 123rd	Granted 10 day's Leave	U.K.	5-8-17.	B-213- Part-11-47-d 22-8-17.
25.8.17	"	Rejd from Leave	Field	18.8.17	B-213-D.C.S.38.
2.2.18	"	Sick.	N.S.	22.1.18	B-213.
23.1.18.	2.C.F.A.	Tonsillitis.	adm & Trans. 18.C.C.S.	22.1.18.	A36.-C.9710.
"	18.C.C.S.	"	Adm 18.C.C.S.	22.1.18	A-36-D-155
4.2.18	"	" Do Duty	Field	4.2.18	A-36-D-1443.
9.2.18	123rd	Rejd from Hosp.	"	4.2.18	B-213.
	"	S.O.S. OF 123 TO 8TH C.E BN	"	29.5.18	PT 2 NO 68 D 7 18
	8 Bn C.E	T O S 8TH C E BN FROM 123 BN	"	30.5.18	PT 2 NO 1.D.2.7.18
7.9.18.	do.	L.O.A. to U.K. from	7.9.18 to	21.9.18.	B.213 D.O. 19. d/14.9.18.
28.9.18	do.	Rejoined from Leave		21.9.18	B.213.
28.12.18	do.	To be Corporal from		10.12.18	B.213, D.O. 3 d/23.1.19.
		Proceeded To England		16.2.19	D.O. 8, 19.9.

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

(*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. 35, 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				
19 MAR 1919		8th Bde. S.O.S. O.M.S.C. to C.R.S.	D. B. Gardiner Capt. C.A.C.		
		Lieut. for O. C. 10 District Depot.			
		and Dispersed T.O.S. Dispersal Station for O. C. 10 District Depot. Lieut.		19.3.19 T.O.S. Dispersal Station "M" and Dispersed Mar-19 Lieut. for O. C. 10 District Depot.	Do 94 p2 Do 94 p3

C.A.D.C. 5009A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) FOWLER J.

REGIMENT 8th C.E. C. RANK Cpl. No. 430240

Date of Examination in England _____ Date of Examination in France 10-1-19

DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 5. 12. 13.
2. EXTRACTIONS 3. 14.
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
- (*b*) In England Yes.
- (*c*) In France

Signature of Dental Officer R. H. Marlatt
Capt

Moore Barracks Laboratory.

REQUISITION

Date. Feb 10.

Name. Pte Lowler.

Ser.No. 430240

Unit 3 Can. P. Batt.

Ward 16

Diagnosis Influenza.

Examination required.

Urine Exam
Routine

REPORT.

Urinalysis

Color yellow

S.G. 1031

Reaction acid

Sugar neg

Albumin neg

Microscopic.

Capt. Goulden
I. C.

L. Faunt Jones
Capt. C.A.M.C.
for O.i/c Laboratory.

10729

Forms
I. 1237
10

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
10729	430240.	Pte	Fowler.	J.
Year	Unit.		Age.	Service.
1916.	3rd Can. F. Battery.		22	4/12

Station and Date.

Disease Influenza

Moore Barracks Shorncliffe

Previous Health Sick with a cold last Nov. for 1 week (not in Hospital)

July 10th Present Illness.

Began with a cold & shivering 3 days since.

Signs & Symptoms.

Sore throat & pains of weakness. cough slight: Throat inflamed: Left tonsil enlarged. Urine Negative.

Exam: Lungs Negative Resp 18.

" Heart. Normal Pulse 72

Sodii Salicyl. grs X every 4 hrs.

Paint Tonsils with Tr. Iodine

" 11 Feeling much better: Lungs Normal. up 2-4. RE

" 14. Recovery & Discharge. RE.

DISCHARGED.
15/2/16.

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

Station and Date.	

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. 430240 Rank Cpl Surname Fowler
(Given name in full) John

Unit or Corps 8th C.E. Birthplace Headingly Manitoba

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

1. GENERAL DESCRIPTION:

Physique Good Weight 175 lbs. Height 5 ft. 11 in. Colour of Eyes Grey

Nutrition Good

Pulse 80 Regular

Condition of arteries Soft

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.)

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 Yes

Disturbance of mentality No Muscular System No Digestive System No

Osseous and Joint System No Any other general condition Yes

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

Tonsilitis 22/1/15 to 4/2/15. Incurred on duty.
Influenza 9/2/16 to 15/2/16 " "

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

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Bramshott (Overseas)

Date 29/2/19 Signed D. A. Mackenzie 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 F. Taylor

(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.

573

417 MENZIES ST.
VICTORIA, B. C.

FORM LETTER "D"

Dec. 30th. 1920

To Dr. C. D. Sumner,
Armstrong, B.C.

Dental treatment.
#430240 Cpl. J. Fowler, 8th. C.E., Armstrong, B.C.

The marginally named man has been authorized to receive dental treatment from you.

He is entitled to - Examination;
Cleaning of teeth; 5 extractions with local anaesthetic;
1 devit and root filling; 4 compound amalgams; 4 Silicates (synth

and the total amount authorized to be paid for this work is $ 39.00

In case the patient desires a different class of work to that specified above, the difference in cost must be borne by the patient. The Militia Department will in no case assume any responsibility for any expenditure in excess of that authorized by them.

Capt.

District Dental Officer
Military District No. 11

M.F.W. 2650.
21m-4-20.M.
H.Q.1772-39-1469.

573

417 MENZIES ST.

VICTORIA, B. C.

FORM LETTER "C"

Dec.30th.1920

To J.Fowler,

Armstrong, B.C.

Dental treatment.

You are hereby authorized to receive dental treatment from Dr. C.D.Sumner, Armstrong, B.C.

You are entitled to the following work: Examination; Cleaning of teeth; 5 extractions with local anaesthetic; 1 devit and root filling; 4 compound amalgams; 4 Silicates (synth);
and the amount allowed for this work is $ 39.00

You will please forward immediately on completion of this work, an account in quadruplicate, showing that the work for which payment is claimed has been performed, certified by the Dental Surgeon.

Capt.

District Dental Officer,
Military District No. 11

M.F.W. 2649.
21m.-4-20.(M)
H.Q.1772-39-1468.

DEC 10 1920

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT xi

NAME OF SOLDIER Fowler J. RANK Cpl No. 430240

REGIMENT 8th C.E.

573

NOV 18 1920

M.F.B. 465.
200M.—6-18.
1772-39-950.

Please mark on this chart of the teeth the work required. Cross out (X) those to be extracted or those missing that are to be replaced by dentures, etc.

Where amalgam fillings are required please indicate if single or compound.

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						1		1											5.00			tooth #18
											5								5.00			teeth 3-5-13-14-17
Exam		4		2.00															10.00			compound #s 4-12-18-30
5 Extractions				5.00						4									12.00			teeth #s 8-9-9-10
Ref. & Comp. fillings				5.00															2.00			Examination
4 comp. amalgam				10.00															5.00			scale & polish teeth
4 Silicate				12.00																		gums in bad condition
cleaning				5.00																		should receive treatment
				39.00															39.00	Clayton D. Dunn Armstrong B.C. Dec 7th '20		

COMPLETED

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge
Class "A" No. 73505

THIS IS TO CERTIFY that No. 430240 (Rank) Cpl

Name (in full) Fowler John enlisted in

the 48th Battalion

CANADIAN EXPEDITIONARY FORCE at Victoria B.C. on the 3rd

day of March 1915

HE served in France with Pioneers and Engineers

and is now discharged from the service by reason of Demobilization. ~~Medical Unfitness.~~ Demobilization R.O. 1420 (c)

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

Age 25 yrs

Height 5' 11"

Complexion Dark

Eyes Grey

Hair Black

Marks or Scars

John Fowler
Signature of Soldier

Date of Discharge

Disposal Station "M" APR 1 1919 Military District No. 11

Jno. Cy Tobin
Issuing Officer

Lieut
Rank

Date Apr 1st 1919

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.

1.—That discharge certificate must be carried when [illegible].

2.—That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing, and

3.—That wearing of uniform renders him liable to usual military discipline, as if on the strength of a unit.

R—122.

Rank | Name FOWLER John. | Reg'l No. 430240.

Unit 48th. Bn. | If in perm. Corps, What Unit? | Married or Single Single.

Place and Date of Enlistment Victoria, B.C. March 3rd. 1915. Place of Birth Manitoba.

Name and Address, Next-of-Kin A. Fowler, Esq., Armstrong, British Columbia. Relationship

Assigned Pay Monthly $ | Payable to | Relationship

Separation Allowance $ | Payable to | Relationship

Discharge, Date and Place | Reason | Character

153

R26

N/E. R.B. No. 8873
File
Category
CAN.OR

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
"C"					
		Arrived	England	10/4-15	
9-2-16	D/C 48.	Adm to Hospital (Influenza)	D Sandwich	9.2.16	A. II 37. } same admission
18.2.16	C.L. 48.	" Moore Bks Hospital	Shorncliffe.	10.2.16	C.L. 49. }
		Embarked for France.		9 MAR 1916	
15-6-16	3rd Pion	Discharged from Moore Barracks Hosp	Shorncliffe	15-2-16	C.L. B 150.
18-6-17	" "	T.C.S. to 123 Pnrs	Field	8-5-17	Ptn C. 65
		Now known as 123rd Pnr			Ph II O 31 d/-23.6.17/(123)
		Rattn Can Eng 10-3-18			
5.7-18	8th Bn CE	TOS from 123 Bn CE	Spr	Field	29/5/18 DOI + DO 68 d 24/8
23-1-19	—"—	Promoted "Corpl	"	—"—	10.12.18 Ptn O. 3
		P. T. O.			

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				
19.3.19	8/Bn. C.E.	S. O. S. to Canada S/L 28 D.A. "M."	Bikott e/pl.	19.3.19 19.3.19	F.2.0.17

P—56

Rank Pte Name FOWLER, John. Reg'l No. 430240.

Unit 48th. Bn. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Victoria, B.C. March 3rd. 1915. Place of Birth Manitoba.

Name and Address, Next-of-Kin A. Fowler, Esq., Armstrong, British Columbia. Relationship

Assigned Pay Monthly $ 20.00 1 Apl 16 Payable to (Mother) Mrs. Mary Fowler Armstrong B.C. Canada Relationship

Separation Allowance $ Payable to Relationship

Discharge, Date and Place Reason Character

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
								May balance									
1/6/15	30/6/15	30	1.00	30 00	30	10	3 00	10 00	43 00			30 10			30 10	12 90	
1/7/15	31/7/15	31	1.00	31 00	31	10	3 10	12 90	47 00			10 00			10 00	37 00	
1/8/15	31/8/15	31	1.00	31 00	31	10	3 10	37 27	71 37			55 96			65 96	15 41	Adjt $10 = .27
1/9/15	30/9/15	30	1.00	30 00	30	10	3 00		33 00			14 60 17 03			31 63	1 78	
1/10/15	31/10/15	31	1.00	31 00	31	10	3 10		34 10	366 329 383 437		14 60 14 60 14 60			43 80	7 08	
1/11/15	30/11/15	30	1.00	30 00	30	10	3 00		33 00	489		14 60 17 05			31 65	8 43	
1.12.15	31.12.15	31	"	31 00	31	"	3 10		34 10	611 629 692		14 60 17 05 7 30			14 60	27 93	
1.1.16	31.1.16	31	"	31 00	31	"	3 10		34 10	741		9 97			34 32	27 71	
1.2.16	29.2.16	29	"	29 00	29	"	2 90		31 90	817		7 30			7 30	52 31	
1-3-16	31-3-16	31	"	31 00	31	"	3 10		34 10			15 22			15 22	71 19	
				305			305 0	10 27	345 77			274 58			274 58	71 19	

BALANCE TRANSFERRED TO NEW LEDGER.

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						

L. L. Job 8877 M. & D. 6195.

M. F. W. 12.
20m.—11-15.
H. Q. 1772-39-8/9.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

To Whom (Mother) Mrs Mary Fowler

Address Armstrong

B.C.

Rate 20cc April 1/16

By Whom Assigned Fowler Jno.

Regtl. No. 430240

Rank Pte

Corps B Coy 48 Bth

2nd 9/3/16

PAYMENTS

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

CONSOLIDATED 2 ACCOUNT

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
60m.—12-15.
1772—39—819.

Sheet No. 2.

L. L. Job 89002.—Req. 6213.

Mrs Mary Fowler

Name of Soldier Pte Jno. Fowler
B Coy 48 Bn

Month.	Year.	Cheque No.	Amt.	Remarks.
			20 00	
April	1916	103	20	
May		5919	20	
June		8448	20	
July		84559	20	
Aug.		Q 14651	20	
Sept.		E 1467	20	
Oct.		E 20550	20	
Nov.		C. 25997	20	
Dec.		32265	20	
Jan.	1917	B. 38453	20	
Feb.		B44144	20	
March		U 46733	20	20
April		Y 1505	20	20
May		V 8369	20	
June		U 14569	20	20
July		C 21360	20	
Aug.		F 31897	20	
Sept.		J 36102	20	
Oct.		Y 41674	20	
Nov.		42981	20	
Dec.		57605	20	H20
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.

Found in " " K

L. LEDGER
AE.

K.H. Edmunds

ASSIGNED PAY. * ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1.4.16.	EFFECTIVE DATE:-
AMOUNT:- 20 00	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.

Mrs Mary Fowler (Mother) AZM
Armstrong B.C

4/4/S.
Cannot be found.

NAME:- FOWLER. John.
NUMBER:- 430240.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pioneer
Do 3 23/19 8/6/16.	10/7/18	Cpl.

UNIT AND TRANSFERS

ORIGINAL UNIT:- 48th

DATE ACCOUNT FIRST OPENED:-

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			123

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
25/1/19	2255	8.C.6	~~37~~				
5/2/19	2457	"	~~37~~				
18/2/19	7.147	4.C.C.C.	~~5~~				
			9046				
				4.			

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 10	- 10		
		8 6		
— L.P.C. Bal. £ -	18			

PARTICULARS OF RENDERING NON-EFFECTIVE — Transferred to Canada 28/2/19 - Ref. 99/15.2 Hdqrs. C.C.C Bat'n R.352 - Bisett - 2361 - 24-2-19 - 99/15.2

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mar 31	Bal Ford								156 41	45 00	
Apr.	P Pay	33		A Pay				20			
				aR41 123 4/4/18	4 46				164 95	45 00	
		33			4 46			20			
May	P. Pay	34 10		A Pay				20			
				aR137 123 4/5/18	8 03						
				193 " 18/5	3 57				167 45	45	
		34 10			11 60			20			
June	P Pay	33		A Pay				20			
				aR15 5/6 8 C & B	4 46						
				80 16/6 "	3 57				172 42	45	
		33			8 03			20			
July		34 10		CAP				20			
				AR120 1/7 8 C & B 1/5	4 46						
				272 15/7 " 17/5	3 57				178 49	45	
		34 10			8 03			20			
Aug	P a	34 10		C.A.P.				20			
				a. P. May 1917 not clyd. ca. cb. 7/11.8, 8 7/8				20	172 59		
				ah 543 8 C & R 16/8	7 14					45	
				~~1547 7 C & R~~ Should be 7/9 Fowler 14 14 34	~~xx 49~~				165 46		
		34 10			7 14			40			
Sept		33 -		C.A.P.				20 -			
				603 8 C & R 7/9	4 46						
				554 " 5/9	9 7 33						
				15229 Ldn 18/9	1 9 47				57 19	45	
		33 -			121 26			20			
Oct		34 10		C.A.P.				20	71 29		
				985 8 C C. 15/9/16	7 46				63 83		
		34 10		1st Nat Ft.	7 46			20			

NUMBER 430240 RANK NAME FOWLER J.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1/11/18	Bal B/F								63 83	45	
Nov	PRA	33		Cap				20	76 83		
				1788 866. 15/11/18	7 46				69 37		
Dec		34 10		Cap				20	83 47		
				1643. " 21/1/18	13 06				70 41		
Jany		34 10		Cap				20	84 51		
		101 30			20 52			60			
	Cr diff w pay 10 Tns 31/12/19. 53 @ 16	5 30		1820 18/12/18 8 CE.	7 46				82 51		
	Tax:	33 60		2084. 7-1-19 ✓	3 77				78 74		
	Int. on Def. Pay.	6 93		Cap				20	92 22	45.	
				2286. 25/1/19. ✓	3 73				88 49		
				2457. 5-2-19. ✓	3 73				92 22		
				F/47 18-2-19 666	73				19 49		
				2.1630. 8/3/19. ✓	9 73 End.				8 96		
		458 3			101 38			20			

S.O.S. to Canada 19/3/19
P.D. 10. S.E. 27 C.E.

MARRIED OR SINGLE S

PLACE OF BIRTH Manitoba Canada

NAME AND ADDRESS OF NEXT OF KIN A. Fowler Esqr
Armstrong B.C. Canada

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No. 430240 RANK Pioneer NAME Fowler John

IF IN PERMT. CORPS WHAT UNIT 48th Bn UNIT 3rd C.E.F. Bn

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION Victoria B.C.

DATE OF ATTESTATION March 2nd 1915.

TRANSFERRED TO — DATE — AUTHORITY

TRANSFERRED TO — DATE — AUTHORITY

TRANSFERRED TO — DATE — AUTHORITY

TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY MONTHLY $ 20.00 DATE EFFECTIVE 1st April 1916

PAYABLE TO Mrs Mary Fowler, Armstrong. B.C. Canada RELATIONSHIP Mother

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) 123 Lon Bn B065 TJ

DATE 1916	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY ✓	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
31.3.16		1.00	30 5	00		10	30	50						10 27	345 77											274 58			274 58	71 19			
30.4.16	30	1.00	30	00	30	10	3	00							33 00	88	15/4/16							262			2000		2262	8157			
31.5.16	31	1.00	31	00	31	10	3	10							34 10	109 143				180				256	255		2000	53	2826	8741			Last his SD C 612
30.6	30	1.00	30	00	30	10	3	00							33 00	207	12/6							255			2000		2255	9786			
31.7.16	31	1.00	31	00	31	10	3	10							34 10	131	96	265						255 261			2000		2255	10941			
31.8	31	1.00	31	—	31	10	3	10							34 10	305	17/7	396	14/8					262	262		20 —		2785	11566			
30.9	30		30	—	30		3	—							33 —	475	29/8	871	15/9					262	261		20 —		2533	12343			
31.10	31		31		31		3	10							34 10	546	27/9							261			20		2261	13492			
30.11	30		30		30		3	—							33 —	673 623	31/10 19/10							262 261			20		2523	14269			
Dec 1917	31		31		31		3	10							34 10	735	15.11	764	7.12					262	13 95		20 160		3657	14022	45 —		
			58	00			58	00																										
Jan	31	1.00/10	34	10											34 10												20 —		20 —	15432			
Feb	28		30	80										53	31 33										262		20		2262	16303			Was 21.3 pmw May/16 JOR charged in error to May/16
Mar	31		34	10											34 10	965 945	23/2 14/2	1033	24/3			9047 30/3		261 262	523	261	20	15	3307	16410			
			737	00										10 80	747 80									3634	2696	523	274 58	240	53	583 74				

Back 10th on total debits in month of May/16 - Adjustment making pay Sheet 27/7 Records show a R109 as 262 which corrects adjustment.

430240 Pvr Fowler J.

Mrs Mary Fowler
Ass'n $20.00 Armstrong B.C.

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
			737											10 80	747 80
Apr	30	100/10	33												33 00
May	31	"	34	10											34 10
June	30		33												33
July	31		34	10											34 10
~~+20~~ Aug	20		22											~~22~~	22 00
" 31	11		12	10											12 10
Sept	30		33												33
			938	30										10 80	949 10

ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date
108	28/1						
27	7/4						
130	14/5			228	28/5	123 Br	
253	2/6						
324	4/6						
427	6/8						
476	27/7			533	1/9		
370	3/7						

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
36 34	26 96	523	274 58	240	53	583 74	164 06		45		Bal fwd
				20		20	177 06		45		
262											
262						5 24	205 92		45		
268		268		20		25 36	213 56		45		
				20		20	227 66		45		~~Error in total Dr's May 1916. Amount 25.26 Should be 28.46~~
				20		20	229 66		45		Trsf to 123rd Pnr Bn effect 21/5/17. Bo 65
268											
268						5 36	236 40		45		
536											
393	268			20		36 07	233 33		45		
268											
6381	2964	791	274 58	340	53	715 77	233 33		45	188 33	

Eng Canv.

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR 3	DR 4	BALANCE	DEFER-RED PAY	SER. ALLCE. ENG.
1917 Feb.	bal b/f ~~Ford~~	~~233 33~~							233 33	45	
Oct	P. Pay	34 10		a/Pay					20 247 43	45	
		34 10							20		
Nov.	P. Pay	33		a/Pay					20		
				AR 705 123rd Bn 3/10/17	4 46						
				AR 645 123 1/10/17	3 57						
				AR 590 123 16/9/17	2 68						
				Arr 3946 l AR 482 do 6/8/17	8 76 0						
				Arr 3946 r AR 482 do 6/8/17	9 7 84						
Dec.	P. Pay	34 10		a/Pay					20 166 48	45	
		67 10			108 05				40		
1918 Jan.	P. Pay	34 10		a/Pay					20		
				AR 809 123 18/11/17	12 49						
				AR 753 123 4 11/17	4 46						
				AR 864 123 2 12/17	4 46						
				AR 920 123 17 12/17	3 57				153 60	45	
		34 10			24 98				20		
Feb.	P. Pay	30 80		a/Pay					20		
				AR 968 123 2 1/18	4 46						
				AR 1031 do 17/1/18	3 57				158 37	45	
		30 80			803				20		

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR 3	DR 4	BALANCE	DEFER-RED PAY	SER. ALLCE. ENG.
1918 Feb.	bal forward								158 37	45	
Mar.	PP	34 10		a/Pay					20		
				AR 1146 123 12 7/18	8 03						
				AR 1200 do 4/3/18	4 46						
				AR 1326 123 17/3/18	3 57				156 41	45	
		34 10			16 06				20 156 41	45	

War Service Badge
Class "A" No. 73505

D.A. M 157.
O.G. I

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 430240.
2. Rank. Corpl.
3. Name. Fowler John
4. Unit. 8th Batt. Can. Engineers.
5. Date of Discharge APR 1 1919 Place
6. Reason for Discharge Demobilization
7. Authority. D094
8. Proposed Residence after Discharge Armstrong B.C.
   Stopover at Winnipeg

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.?

John Fowler
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

Date APR 1 1919

Dispersal Station "A" Military District No. 10

Signature Jno. Ogilvy Lt
(O. C. 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

1. Triplicate Attestation Paper (M.F.W. 23), or
   Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A,F,B,103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings Med. Board (M.F.B. 227 or A.F.A. 45 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5005).
6. Field Conduct Sheet (A.F.B. 122.)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 89)
   (Recorded in special envelope (P.O.4))
9. Copy of Discharge Certificate (M.F.W. 35).
10. Dispersal Certificate (C.D.S)
11. Equipment and Clothing Statement (C.M.G. Form (illegible)).
12. Last Pay Certificate (P.851).
13. Pay Book (A.B.64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group B

Checked by No. 5

Date 18/3/19

MC. 430240.

DUPLICATE

ARMY FORM B. 178.

To be used (*a*) for recruits enlisting direct into the Regular Army, and (*b*) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname FOWLER. *Christian Name* J.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish _____ County _____

Examined ... ... on _____ day of _____ 191 ,
at _____

Declared Age ... ... _____ years _____ days.

Trade or Occupation ... _____

Height ... ... _____ feet _____ inches.

Weight ... ... _____ lbs.

Chest Measurement { Girth when fully Expanded _____ inches.
Range of Expansion _____ inches.

Physical Development ... _____

Vaccination Marks { Arm ... Right _____ Left _____
Number _____

When Vaccinated ... _____

Vision ... ... { R.E.—V=
L.E.—V=

(*a*) Marks indicating congenital peculiarities or previous disease ... { (*a*) _____

(*b*) Slight defects but not sufficient to cause rejection ... ... { (*b*) _____

Approved by (*Signature*) _____
(*Rank*) _____
Medical Officer.

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

Joined on Enlistment ...	Corps.	Regtl. No.
	3rd Can. pion. Bn.	430240.
Transferred to		

Became non-effective by _____

This Medical History Sheet has been compared with the Corresponding Attestation Paper, and entries made in red have been taken from the Attestation Paper.

on _____ day of _____ 191 .
(*Signature*) _____
(*Rank*) _____

(B 99129.) W. 15297/M127. 500M. 1/16. J. P. & Co., LTD. Forms B. 178 39 P.T.O.

LT.-COL.
In Charge of Records,
Canadian Contingent.

Table II.—Only for Admissions to Hospital or to the Si

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Re
	Day	Month	Year	Day	Month	Year			
Moore Barracks.C.H.	9.	2.	16.	15.	2.	16.	Influenza.	6.	

ck List in the case of Warrant Officers treated in quarters.

marks 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
lothing special to note, Recovery and discharge.	R.Goulden, Capt.CAMC.

Table III.—Boards; Courts of Inquiry, 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

Table IV.—Service Table.

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

I certify the foregoing to be a true copy of an original entry on the Medical History Sheet of this man.

for the Officer in Charge of Records
Canadian Contingents.

D.A.M.C.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps 3rd Can. F. Battery

Military Hospital Moore Barracks, Shorncliffe

No. 430240 Rank and Name Pte Fowler J. Age 22 Service 1 1/12

Disease Influenza. Date of admission 9/2/16 Date of discharge 15-2-16. Result Recovered Discharged

Dates of Observation	7 Feb. 9.	10.	11.	12.	13.	14.	15.	16.	17.	18.	19.	20.
Days of Disease												

Temperature Fahrenheit — Time A.M. P.M. (8 6 4 2 8 6 4 2)

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

on admission

Pulse per Minute	76	60 76	60 76	60 62	60 54							
Respirations per Minute		20 20	20 20	20 20								
Motions per 24 hours		1	1									

(3253) W7204—1542. 750,000. 8/15. McA. & W. Ltd. Forms/B. 181/3.

Signature R. Goulden Capt In charge of case.

AUDITOR | PAYMASTER

M. OR S.

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

Cedric

REGT. No. 430240 RANK Cpe NAME (IN FULL) Fowler, L

(BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE

TO WHOM PAID Nil. — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
	1	

ORIGINAL UNIT C.E.F. — 66th. — IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO 25 Fin M. — DATE 19-3-19 — AUTHORITY 2904 at

DATE OF ATTESTATION 3.3.15 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 20.00 — DATE EFFECTIVE 1.4.19.

PAYABLE TO Mrs Mary Fowler — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Armstrong B.C.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED M 19 10. — PLACE — DATE 1.4.19. — REASON 29. — AUTHORITY 2904 — 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.	$	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																																					BAL. ENG. L. P. C.
28/7/19					35 70				18 69								9 73																		18 69		1st 18 69
																																					Clothing Allce. 1st payment W.S.G.
1/3 8/4	39	1/-	46	80					170	49	D80367						5 40		130	59							20				170	49					Advances - Boat - Train
																																				1st ched on Eng. L. P. C. to clear
			68	80																			68	80											20 00
																																				Soldiers Dependent
183 days at minimum	420								420							War Service Gratuity							70									350				1st Payment W. S. G. as above
																											70					342	30			7 days at minimum @ 1.67
May 1																	55 8 169		70	-													272	30			2nd Page W.S.G.
May 29																	57 8 285		70	-													202	30			3rd " " "
June 27																	77 7 511		70	-													132	30			4th " " "
																	120 32 15		70	-													62	30			5th " " "
						Appl'd Sept 1-19			122 70														62	30													6th " " "
			420	-																			412	30			770				420						
						Cancelled Sept-1-19.																																	

AUDITED — 1919 — Audit Clerk M.F.W. 10

183

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

Date of Enlistment

8 L10 # 10 S.R.

MILITIA AND DEFENCE

Separation and Assigned Pay Branch F

OVERSEAS CONTINGENTS

4642
~~4753~~ 3

Date of Assignment apri—16

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

20			

PARTICULARS OF SEPARATION ALLOWANCE

No. 430240

Rank Pte Promoted Reverted Discharge

Soldier's Name Jno Fawler

Battalion 48 Battn. "B" Coy

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT mother

Name Mrs Mary Fawler

Address Armstrong B. C.

Change of Address

1

2

3

4

	Date 1914	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
	Dec 31			420	420	
1918	jan.	A 59171		20	20	P
	feb	Z 96192		20	20	H
	mar.	A/36003		20	20	H
	apr.	C 13261		20	20	S.
	May	S 12196		20	20	
	June	M 22727		20	20	C.
	July	M 30086		20	20	C
	Aug	M 38127		20	20	C
1914	Sept	R 49836		20	20	C
	oct	R 54376		20	20	
	Nov	R 57183		20	20	L
	Dec	V 66923		20	20	C
	Jan	Q 75693		20	20	
	FEB	Y 72722		20	20	C
	Mar	Q 85386		20	20	C
	~~April~~			~~20~~	~~20~~	C
				720	720	

M.R.O 87126 - "Destroy" 4.4.19

A/c Closed 31.3.19

Ret'd per Cedric MD 10

Date 27.3.19 F.X. 4.4.19

Clerk S. Chambers

AUDITED.

CONSOLIDATED ACCOUNT

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 1933.

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. 22320—M. & D. 7993.