Coboarg Heavy Battery Original

ATTESTATION PAPER.

No. 314750

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Fox.
1a. What are your Christian names?	Francis Edward
1b. What is your present address?	Cobourg
2. In what Town, Township or Parish, and in what Country were you born?	Cobourg Ont.
3. What is the name of your next-of kin?	William Fox.
4. What is the address of your next-of-kin?	Cobourg Ont. Canada
4a. What is the relationship of your next-of-kin?	Father.
5. What is the date of your birth?	Oct 10th 1897
6. What is your Trade or Calling?	Store Clerk
7. Are you married?	No.
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes.
9. Do you now belong to the Active Militia?	No
10. Have you ever served in any Military Force? If so, state particulars of former Service.	4 Mos. Mechanical Transport C.E.F.
11. Do you understand the nature and terms of your engagement?	Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?	Yes.

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Francis Edward Fox., 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.

Francis Edward Fox (Signature of Recruit)

Date April 15th 1916. J W Kinnon Maj' (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Edward Fox, 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.

Francis Edward Fox (Signature of Recruit)

Date April 15th. 1916. J W Kinnon Maj' (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 Cobourg this 15th day of April 1916.

J W Kinnon (Signature of Justice)

Major

M. F. W. 23.
100M.—1-15.
H. Q. 1772-39-841.

Description of Francis Edward Fox on Enlistment.

Apparent Age 19 years 6 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 36 ins.
- Range of expansion 3 ins.

Complexion Dark

Eyes Grey

Hair Brown

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

None

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 April 15 1916 L. H. Reed

Place Osborne Park 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.

Gr. Francis Edward Fox 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. Stinson (Signature of Officer)

Major

Date April 15th 1916.

REGIMENTAL DOCUMENTS

NAME Gnr Fox Francis Edward REGT. NO. 314750 UNIT 1st Batty CFA 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)				16588	
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
1	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
	MEDICAL EXAMINATION (M.F.W. 129)					HEMOB
1	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	BFC 871					
1	Disp Cert					
1	MFW 67					
1	[illegible]					
1	R49					
	[illegible]					
1	P. C.					

2
2-19
2-19
3-19
2

W. 2509
100M-11-19
1272-39-1377

To be made out in duplicate.

H.Q. 54-21-23-53

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

---

(1) Name of Overseas Unit which Soldier joins..... No. 1 Siege Battery

(2) Regimental Number 514750

(3) Full Name of Soldier..... Francis Edward Fox

(4) Place of Birth..... Cobourg, Ontario

(5) Are you married, or not ? ..... No

(6) If married, state,
(a) Full name of your wife..... —

(b) Present Postal Address..... —

(7) Are you a widower ? ..... —

(8) Have you any children ?..... —

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

Also their names and ages..... —

M. F. W. 67

200M.—2-16
1772-39-954

(SEE OTHER SIDE.)

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

If so, state name and address .....William Fox, William St, Cobourg, Ont.

(10) Is your Mother alive ?.....Yes.....

If so, state name and address..Emma Fox, William Street, Cobourg, Ontario

.....

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

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

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

.....

.....

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

.....

.....

.....

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

.....

(15) Are you insured ?.....Yes.....

If so, in what Company ?.....Prudential.....

Have you made arrangements for payment of your Insurance premium.....Yes.....

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

J. P. Kennedy Major
Officer Commanding.

Date.....May 31, 1916.....

Cobourg Heavy Batty

ORIGINAL. F

MEDICAL HISTORY SHEET.

M

Surname Fox *Christian Name* Francis Edward

Examined { on 15 day of April 191 6 / at Cobourg Ont

Birthplace { City or Town Cobourg / County Northumberland

Apparent age 19

Trade or occupation Clerk

Height 5 Feet 6 1/2 Inches.

Weight 130 Lbs.

Chest measurement { Minimum 33 inches. / Maximum expansion 36 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right. Left. / Number 0 1

When Vaccinated last 13.6.16

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

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

Approved by F. H. Fiset

Rank Capt M.O.

Date.	Fit or Unfit.	Examined for Re-engagement.
5.9.16	Fit	W A Shaun (Capt R Amc) M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
13.6.16		F. H. Fiset M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
18.5.16	+	F. H. Fiset M.O.
25.5.16	+	F. H. Fiset M.O.
31.5.16	+	F. H. Fiset M.O.

Enlisted on XX 15 *day of* April 1916 *at* Cobourg Ont

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment		314750		
Transferred to	1st C.H.A Group			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Witley	19-6-19	V.D.S	A A Wayler Capt RAMC

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

M. F. B. 313.
200M—11-15.
H. Q. 1772 39-479.

Surname Hall Christian Name Maurice Edward

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.

"M" Wing, C. C. C.

CANADIAN GENERAL LABORATORY

PARTICULARS OF CASE FOR WHICH WASSERMAN TEST IS REQUIRED.

The particulars below are required for statistical purposes and future reference.
Unless these are furnished, the test will not be carried out.

NAME Pte F E REGTL. NO 314750 RANK Pte

UNIT T. S. Date of first sore ..... if T Pallidium found ..... Secondaries if any .....

Other Symptoms ..... Treatment if any .....

Arsenical ..... Mercury .....

Station and date .....

- - - -o o o oOo o o o- - - - Major case.

RESULT OF WASSERMAN (ORIGINAL) QUARTER SYSTEM.

Date ..... Serial No ..... Result .....

WASSERMANN
NEGATIVE

Major.
Officer Commanding,
Canadian General Laboratory.

Witley, Surrey.
16—6—1919.

Canadian General Laboratory
18 JUN 1919
WITLEY

204

351 L.B 804

"M" Wing, C. C. C.

CANADIAN GENERAL LABORATORY

PARTICULARS OF CASE FOR WHICH WASSERMAN TEST IS REQUIRED.

The particulars below are required for statistical purposes and future reference.
Unless these are furnished, the test will not be carried out.

NAME Hay T.E. REGTL. NO. 314752 RANK Pte

UNIT 17 Date of first sore.....if T Pallidium found.....Secondaries if any.....

Other Symptoms.....Treatment if any.....

Arsenical.....Mercury.....

Station and date.....

major cures

- - - -o o o oOo o o o- - - -

RESULT OF WASSERMAN (ORIGINAL) QUARTER SYSTEM.

Date.....Serial No.....Result.....

WASSERMANN NEGATIVE

Major.

Officer Commanding,
Canadian General Laboratory.

Witley, Surrey.
16—6—1919.

93.

Canadian General Laboratory
18 JUN 1919
WITLEY

Aug. 14th. 1919.

Rank Gunner. Date of att. April 51th. 1916

Regimental Number 314750 Date of Discharge July 12th. 1919.

Unit 1st. Bde. H.Q.

Name FOX Francis Edward.

Address Box 453 Cobourg. Ont.

B.P.C. District Office Montreal; D.D. No. 4.

Attestation Form:-

Weight on enlistment: 130 pounds

Marks of Identification: None.

Rank at attestation: Gunner.

Casualty Form:-

Disease: Syphilis due to infection. Active Service.

Rank when disease was incurred: Gunner.

Misel.: Specialist's Report attached.

Conduct:-

Venereal disease: Syphilis 5-2-19 Autho. A.F.B. 103.

Conduct: Good

Self inflicted wound: Nil

B.P.C. Form 871.
20M-2-19.

Number 314750 Rank Gnr

Surname FOX

Christian Name Francis Edward

Units C.G.A. Theatre of War France

Date of Service 30/12/16

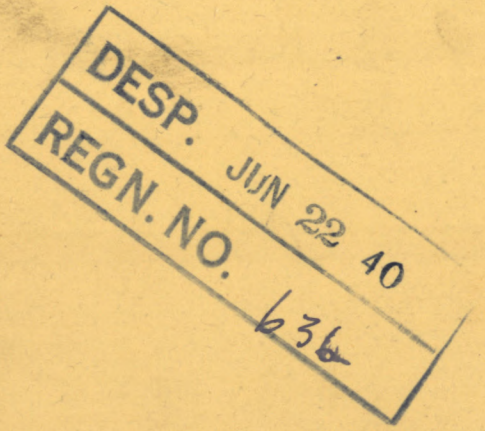
Remarks

Latest Address Box 455
Cobourg Cobourg
Ont.

Roll No. B Page 16355

200m.-2-21.M.

22/6/40


DESP. JUN 22 40
REGN. NO. 636

Form R. 149.

Francis Edward

Name FOX Rank Gnr Reg. No. 314450

Unit 1st Bde C.F.A.

Next of Kin Canada

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
15-6	42 Can Fld Hosp		Appendicitis	A774	31843	
20-6	2 Can Gen Base Boulogne		do	A259	11A 21401 13	
26-6	1 C.D.	do	do	A285		22481/6
28-6	10 C.D. Etaples		do	A215		23051/6
19-7	Dis 5 Rest Camp		do	A403	4A2 73319	
1-2-19	11 F Bty		20	A474		20381
6-2	7 F Bde Canadians		42	A479		41781
9-2	9 do		do	A482		42141
2-4	Discharged		do	A522		44261

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

No. 314750 RANK Gnr. NAME Sof. F. E.

T. O. S. UNIT Cobourg Heavy Battery

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Apr 15	Apr. 30	—		
	May	—		
	June	—		

NAME Fox Francis Edward

REGT'L. No. 314750

H. Q. FILE No 649

RANK AND CORPS Gnr. Can. Art.

FOLLOWS No.

FOLLOWS

CABLE

No.	Date

NATURE OF CASUALTY

OK

L. L. 31493. M. & D. 8476.

M. F. W. 42 -100M.—28-11-17.
H. Q. 1772-39-893.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
a274	# 42 Cas. Clg. Stat.	15-6-18	Appendicitis.
a277 3	# 2 Aus. Gen. Boulogne	20-6-18	" "
a283 (5)	# 1 Conv. Depot Boulogne	26-6-18	" "
a285 (7)	# 10 Conv. Depot Eclault	28-6-18	" "
a303 3	Disc. " " " "	19-7-18	" "
a474	1 Eas Cl. Station	1-2-19	20
a479	7 Can Stat Camiers	6-2-19	42
a482 2	9 " " "	9-2-19	"
a522 2	Disch.	2-4-19	42

SURNAME. Fox

CHRISTIAN NAMES Francis, Edward

REGL. No. 314750 RANK Gr.

UNIT Coboug 7th Heavy Bty. (2nd R.D.)

FORMER CORPS 4 mos. Mech. Transport C.E.F.

CARD NO. F 4

FOLL. 2-21-7-19 4D2

NEXT OF KIN.

NAMES IN FULL Fox, William

RELATIONSHIP TO SOLDIER Father

ADDRESS Coboug, Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada Coboug, Ont. DATE Oct 10th 1897

PLACE OF ATTESTATION Coboug, Ont. DATE Apr 15th 1916

O/S 18-6-16 459/1 RC. 9-7-19. 367/57 Gnr.

L. L. 6945. M. & D. 6994.

M. F. W. 22. 100M.—8-16. H. Q. 1772-39-339.

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING Store Clerk RELIGION Roman Catholic

DESCRIPTION.

APPARENT AGE 19 YEARS 6 MONTHS

HEIGHT 5 FEET 6½ INCHES

CHEST MEASUREMENT 36 INCHES EXPANSION 3 INCHES

COMPLEXION Dark EYES Grey HAIR Brown

DISTINGUISHING MARKS Nil.

MEDICAL EXAMINATION. PLACE Cobourg, Ont. DATE Apr 15th 1916

Present Address Cobourg, Ont.

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

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
FOX.	F.F.	314750.

RANK	UNIT	CO.	TROOP	BATTY
Gnr.	C.A. 1BCGA.			

HOSPITAL: 42. C.C.S.

DATE OF ADMISSION: 15-6-18.

1. 2 Aust Gen Boulogne — HOSP. 20.6.18
   1 C.D. Boulogne — 26.6.18
2. 10 Con. Dep. Ecault. — HOSP. 28-6-18
   1.6.6. Rly — 1.2.19
3. 7 C. Stat. Camiers — HOSP. 6.2.19
   9 " " " — 9.2.19.
4. HOSP.

DIAGNOSIS

1. ~~V.D.S.~~
2. V.D.S. Hb.
3.

DISPOSITION	DATE
C.L. 21-6-18.	A274.
25.6.18	A277-III
3.7.18 a	283-5
" 5-7-18 a	285
26.7.18 a	303-3
13.2.19 a	434.
19.2.19 a	479 3
22.2.19 a	482-2.
10.4.19. A	522/2

REMARKS: Dio. 19.7.18 Dio-2-4.19.

A.M.D. 2 DEPT.
A.M.D. 2 D.G.M.S. London.

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

EPITOME OF HOSPITAL TREATMENT

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

C.A.D.C. 5009A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

367

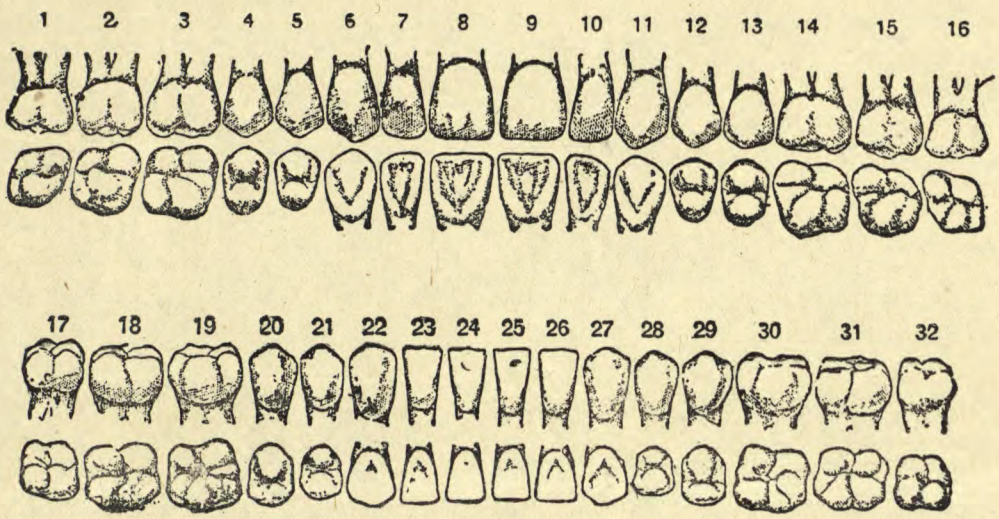
DIRECTIONS TO DENTAL OFFICERS

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) Fox · F. E.

REGIMENT C.A.R.D. RANK Gnr No. 314750

Date of Examination in England _____ Date of Examination in France _____



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 5. 13. 20. 21. 29.
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

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

- (a) In Canada
- (b) In England yes
- (c) In France

R Simpson Capt

A.D.D.S. M.D. No. 4

Signature of Dental Officer H A Simmons Capt

Now 1st Bdge C.G.A. (How) CANADIAN DEPÔT, SIEGE ARTILLERY

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps No. 1 Siege Battery C. E. F.

Regimental No. 31475 Rank Gunner Name Fox, Francis Edward

Enlisted (a) 15/4/16. Terms of Service (a) Duration of War Six Months. Service reckons from (a) 15/4/16.

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

Extended Re-engaged Qualification (b)

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 18/6/16. Halifax. Disembarked 28/6/16. Liverpool. Mobilized Lds.
6.10.16	6th Bde.	Transfd to Headquarters staff, Canadian Brigade, Horsham	Horsham	6/10/16	P.A.O. Orders 95.
7.10.16	O.C. Can. Depot S.A.	Taken on strength of Hqrs Staff, C.B.S.A.	Horsham	7-10-16	Part II P.O. 180
					Colin Mackay Capt. O.C. CANADIAN DEPOT, SIEGE ARTILLERY.
7-10-16	6th Can. Bde. S.A.	Taken on strength H.Q. Staff. C.B.S.A.	Horsham	7-10-16.	Part II P.O. 180.
					Adjutant Canadian Brigade Siege Artillery.
29.12.16	O.C. C.D.S.A.	Proceeded Overseas	Lydd, Kent	30.12.16	Pt 11 No. 259 Lieut. C.G.A., Adjutant, 1st Canadian Heavy Artillery Group.

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.

CERTIFIED CORRECT. 22 JAN. 1917 RECORDS LONDON.

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.
30.6.16	6 R. Sad.	SIS. R.6. from bar.	Horsham	29.6.16	B II Orders 13. W. C. Warner Lieut. for Officer i/c Records. C.E.F.
		LANDED IN FRANCE	HAVRE	31/12/16	LR 7227
15/6/18	42 CCS	Appendicitis	42 CCS	15/6/18	F7634
22/6/18	1 Bdetg	Sick	to Hospital	15/6/18	B213
20/6/18	2 Aust	P.W.6.	2 Aust Gen	20/6/18	F80244
22/6/18	42 CCS	do 15/6/18	to 15 A.T.	20/6/18	F 8951
26/6/18	1 CS.	Sick	1 Conv Dep	26/6/18	F9124
26/6/18	2 Aust	P.W.6.	to 1 Conv Dep.	26/6/18	F9122
28/6/18	1 CS	do	to 10 Conv Dep	28/6/18	F9404
28/6/18	10 CS.	do	10 Conv Dep	28/6/18	F9628
19/7/18	10 CS.	do	to 5 Rest Camp	19/7/18	L3295
21/7/18	CCRC	Y.D.S. a	CCRC	21/7/18	LR 1049.
5/8/18	do	Left for CCRC	Field	5/8/18	LR 1336
5/8/18	CCRC	Arrived CCRC	do	5/8/18	LR 1215
2/9/18	do	Left for Unit	do	2/9/18	LR 1565
7/9/18	1 Bdetg	Joined Unit.		7/9/18	B213
6.12.18	do	Granted 7 days leave	Paris	6.12.18	B213 Pt II 100 10/14-12-18
21/12/18	do	Rejoined from leave		17/12/18	B213
5/2/19	do	V.D.S.	to A.T. 12	4/2/19	B 5976
8/2/19	do	Sick	to Hospital	26/1/19	B213

Army Form B. 103. Buff Regimental Number 314750

Casualty Form—Active Service.

Regiment or Corps 1st Brigade CFA

Rank Gnr Surname Fox Christian Name Francis Edward

Religion ..... Age on Enlistment ..... years ..... months

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

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

Extended { ..... / ..... } Re-engaged { ..... / ..... } Qualification (*b*) .....

or Corps Trade and rate .....

Occupation ..... Signature of Officer .....

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked ...			
		Disembarked ...			
9/2/19	9 C Staty	V.D.S.	9 Can Staty	9/2/19	R 7769
1/4/19	K 38/1	To Arty Pool	1/4/19		K 38/1
		T.O.S. Mdn. Duty. Pool	2.4.19		P.T. 4 0.42 4/19
31.3.19	9 C. Sty.	2/Lt. pd allow 4 5 Cents per day			0.1643/15554
		from 6.2.19 to 31.3.19 (54 days)	31.3.19		P.T. 20.464/19
2.4.19.	9 C. Sty.	V.D.S. To C.G.B.D.	2.4.19		W.856/8774
190	C.G.B.D.	T.O.S. to S.S.B. per 9 C Sty A.	2.4.19		P 2235/2363
23.4.19	C.B.R.C. Off.	Proceeded to England			K 4 - C A.
	Havre	20.4.19 posted to BARE			A.A.G. file 50059
		South Lipon	England 20.4.19		P.T. 1/C 50 4/19 19.

(*a*) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(*b*) Signaller, Shoeing-Smith, &c.

W. 8635—M2733 2000m 9/17 (3) C. & S. Ltd. Form A. 103 G./1807. P.T.O.

Captain & Adjutant
Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
23.4.19	C.R.D.	105/mm Art Bde	Rhein	22.4.19	P.W.O. 113.

W. Lowell

FOR LT. COL.

ADJUTANT
D.S. C.O.M.F.

Army Form B. 103. Sheet II Regimental Number 314750

Casualty Form Active Service.

Regiment or Corps 1 Brigade CFA

Rank Gnr. Surname Fox Christian Name Francis Edward

Religion ..... Age on Enlistment ..... years ..... months

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

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

Extended { ..... / ..... } Re-engaged { ..... / ..... } Qualification (b) ..... or Corps Trade and rate .....

Occupation ..... Signature of Officer .....

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked ...			
		Disembarked ...			
9/2/19	9 C Staty	V D S	9 C Staty	9/2/19	R 7769
6/2/19	7 C Staty	V D S	7 do	6/2/19	R 7715
1/4/19	K 38/1	Transto Arty Pool		1/4/19	K 38/1
		A V Bruce Lieut. for Lt. Col., A.A.G., Canadian Section			
23.4.19	G.A.R.O.	Tos from 1 Bde	Ripon	23.4.19	D.O. 113

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) Signaller, Shoeing-Smith, &c.

W. 3635—M2733 2000m 9/17 (35611) C. P. & S., Ltd., Form B./103 E/1807. P.T.O.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
1/7/19		S.O.S. OF D.M.F.C. ON PROCEEDING TO CANADA J.H. Duchaux EMBKD. SOUTHAMPTON 2.7.19 ARR HALIFAX JULY 8 19		D.O. 82 d/1-7-19 J. McLaren Lieut for O.C. M' Wing CCC	
21-7-19		O-S T.O.S D.D.#4 Dis.Sta. "F"	Montreal	2-7-19	D
21-7-19		S.O.S D.D.#4 Demob.	"	12-7-19	D. R

E.H. Fletcher Lieutenant,
A/Assistant Adjutant,
District Depot No. 4.

War Service Badge
Class "A" No.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 314750 (Rank) Gunner

Name (in full) Ford, Francis Edward enlisted in

the 1st Battery C.F.A.

CANADIAN EXPEDITIONARY FORCE at Cobourg on the Fifteenth

day of April 1916

HE served in 1st Bde H.Q. France

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 21 yrs 8 mo

Height 5' 6"

Complexion Dark

Eyes Blue

Hair Brown

F.C. Ford

Signature of Soldier.

Marks or Scars Nil

Date of Discharge

Dispersal Station "D" JUL 12 1919 Military District No. 2

Issuing Officer.

Lieutenant.

Officer i/c Discharge Section, Dispersal Station "D"

Rank

Date July 12 19 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.

R—122

A.C.

Rank Gr Name FOX, Francis Edward. Reg'l No. 314750

Unit No. 1. Siege Batty If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Cobourg. April 15th. 1916. Place of Birth Cobourg,

Name and Address, Next-of-Kin William Fox.

Cobourg, Ont., Canada. Relationship Father.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

NIE. R.B. No. 27795
File R.
Category

H. W. & V., Ld.—7165-16.

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.
C		Arrived in England	28 JUN 1916		Empress of Britain A.F.B. 103 Ch. 1.8
30.6.16	CR Sal	T.O.S. RC from Can	Horsham	29-6-16	Pte II - 80 # 13
6.10.16	CDSA.	S.O.S. on transfer to Hqrs Staff C.B.S.A.	Horsham	6.10.16	Pte II - 95
7-10-16	C.B.S.A.	T.O.S. on ftd from C.D.S.A.	"	7-10-16	Pte II D.O. 180
29.12.16	12 C Hdqrs.	Proceed Overseas	Lydd	30.12.16	Pte II D.O. 259
25-3-18	" "	Transferred as 1st Bde C.F.A.	Field	20.3.18	10 1st Bde C.F.A. 10/19.4.18
7.4.19	1 C.F.A.	S.O.S. to A. Pool	—	1.4.19	- 25 A Pool 43 14/4/19
23 4 19	C.A.R.II	T.O.S from C.G.A.	"	Repin 22.4.19	- 113 A Pool 50 29/4/19
27-5-19	Mewing	S.O.S proc R.C.	—	Witley 27-5-19	- 47 Hqrs D.O. 156 6/5/19

A.F.B. 103 CHECKED 17 JAN 1917

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.
		To Canada 99-F-64		2-7-19	
		S.O.S To CANADA O i/c R P.2.D.O,		25.7.19	

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
50m.—4-16.
1772—39—819.

Sheet No. 2. McEmma Ford PAYMENTS. Name of Soldier Ford F E.

L. L. Job 310.—Req. 6574. Gt. 314750. #, Lg. Bty.

$15.00

JUL 1 1916

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July		W11720	15	
Aug.		Q14695	15	
Sept.		E 16215	15	
Oct.		E 20602	15	
Nov.		C 26050	15	
Dec.		337317	15	
Jan.	1917	B 38522	15	
Feb.		X44213	15	
March		U 46807	15	15
April		G 1577	15	15
May		V 8442	15	
June		U 14639	15	15
July		C 21437	15	
Aug.		F 31973	15	
Sept.		J 36177	15	
Oct.		Z 43128	15	
Nov.		V 47566	15	
Dec.		G 53970	15	
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.				11,000
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

L- L. Job 310—M. & D. 6574.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
50m.—4-16.
H. Q. 1772-39-819.

To Whom Mrs. Emma Fox

Address William St., Cobourg, Ont.

Rate $1.50

By Whom Assigned Fox F. L.

Regtl. No. 314750

Rank Gr.

Corps #1 Sqn. Bldg.

JUL 1 1916

PAYMENTS

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

CONSOLIDATED ACCOUNT 2

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ~~ENGLAND OR~~ CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.	NAM
EFFECTIVE DATE:- 1/7/16.	EFFECTIVE DATE:-	NUM
AMOUNT:- 15⁰⁰	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 Emma Fox. Mother
William St Cobourg Ont.
Stopped Ctt 1/6/19

ORIG
DAT

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
1/4	5+1	Depot Stab.	32 10			Ledger Cr.	91 85
15/4	2161		4 5 6			Ledger Cr.	30 56
25/4		Repat	9 7 3				
6/5			14 6 0				
			61 29			31/5/19	

PARTICULARS OF RENDERING NON-EFFECTIVE:- Dr Toboug Auth 8/1/33 Repat to Repat

MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS
31-3-18	B/F			
Apl	Cy P	33		a/F
				AR 21 1 Cy A 3/4
				163 " 15/4
		33		
May	Cy P	34 10		a/F
				AR 749 " 16/5/18
				AR 1513 " 31/5/18
		34 10		
June	Cy P	33		a/F.
				751 " 15/6/18
		33		
				1172 " 30/6/18
		33		
July	Cy P	34 10		a/F.
				AR 5265 " 22/7/18
		34 10		
Aug	Cy P	34 10		a/F
				AR 6783 " 31/7/18
				895 " 17/8/18
		34 10		
Sept	Cy P	33		a/F
				1383 " 5/9/18
				1429 " 11/9/18
				1463 " 16/9/18
		33		

COMPILED BY [signature]
CHECKED BY [signature]

* ENGLAND ~~OR~~ CANADA.	SEPARATION ALLOWANCE,	* ENGLAND OR CANADA.
16.	EFFECTIVE DATE:-	
	AMOUNT:-	

NAME:- Fox Francis Edward

NUMBER:- 314750

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Gnr

ATIONSHIP & AUTHORITY | WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

Fox. Father
Cobourg Ont
A 1/6/19

UNIT AND TRANSFERS

ORIGINAL UNIT:-

DATE ACCOUNT FIRST OPENED:- 1/7/16.

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
	1-1-17.		1st HAG Hgrs.

TIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

IT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A R	UNIT PAID BY	AMOUNT
~~do Hob.~~	32 10.			Ledger Br	91 85
	4 56.			Little Br.	30 56
Repor	9 73.				
	14 60				
	61 29	31/5/19			

DAILY RATES OF PAY AND ALLOWANCES

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

M.D.4.

ENDERING NON-EFFECTIVE:- Dr to Cobourg Auth 8/133 Repor to Repor 6/5/19.

PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
								64 92		
33			a/f				15			
			aR 21 1 Cdn A 3/4	446						
			263 " 15/4	357				74 89		
33				803			15			
34 10			a/f				15			
			aR 7449 " 16/5/18	803						
			aR 7573 " 24/5/18	446				81 50		
34 10				1249			15			
33			a/f.				15	99 50		
			251 " 15/6/18	357				9593		
33				357			15			
			4172 " 30/6/18	268				93 25		
33				625			15			
34 10			a/f.				15			
			aR 5265 " 22/7/18	446				107 89		
34 10				446			15			
34 10			a/f				15	1266 99		
			aR 6783 " 31/7/18	535						
			895 " 17/8/18	357				118 07		
34 10				892			15			
33			a/f				15	136 07		
			1383 " 5/9/18	357						
			7429 " 11/8/18	446						
			11463 " 16/9/18	357				1214 14		
33				1160			15			

NUMBER 31/150 RANK Gnr NAME Fox. Francis E.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.
				Bal Fwd.			
Oct.	Gunlay.	3 4 10		Allay.			
				Dr Ack 1671 1 6 Sa 18/10/18	3 13		
				✓ ✓ 1898 1 6 Sa 31/10/18	3 13		
		3 4 10			7 16		
Nov	G. Ray	33 -		Lab			
				1757 2 6 Sa 10/11/18	3 13		
Dec	✓	3 4 10		Lab			
				1764 1 6 Sa 18/11/18	B 06		
				1752 Del'd 9/12/18	46 64		
				1759 2 6 Sa 4/12/18	3 13		
				1716 Del'd 11/12/18	46 64		
				8003. ✓ 18/12/18	41 91		
Jan	✓	3 4 10		Lab			
		101 7 10			156 71		
Feby	✓	30 80		2281. 1 6 Sa 17/1/19.	7 16		
Mar	✓	3 4 10		Box ✓ 6/2/19.	3 13		
				Lab			
				✓			
		64 90			11 19		
				Nfy. C&BD 3/4/19.	4 56		
Apr	✓	33 .		Lab			
May	✓	3 4 10		✓			
				R&Q 4/4/19 - 3/5/19. 5 days @ 60 P. Do 46 at Boat 27/4/19		32 4 5	
				3016 2 K Dly 25/4/19.	9 73		
				2461 C & C 18/4/19.	4 56		
				5003. 2 K Dly 6/5/19.	14 85 14 60		
		67 10			32 45	32 40	
				Hosty. Nursing 3/6/19 C&BD	29 80		
				5338 ✓ 19/6/19 ✓	9 73		
					38 93		

NAME Fox. Francis E.

CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
	bal fwd.					124 47		
	Alay.				15	143 57		
	Dwak 1671 1 Bfa 18/10/18	3 73				139 84		
	✓ ✓ 1598 1 Bfa 8/10/18	3 73				136 11		
		7 46			15			
	bal				15			
	1757 2 Bfa 10/11/18	3 73						
	bal				15			
	1764 1 Bfa 18/11/18	8 06						
	7352 Del Land 9/12/18	46 64						
	1759 2 Bfa 4/12/18	3 73						
	7716 Del Land 11/12/18	46 64						
	8003. ✓ 18/12/18	42 91						
	bal				15	35 60		
		156 11			45			
	2281. 1 Bfa 12/1/19.	7 46						
	Bal ✓ 6/2/19.	3 73						
	bal				15			
	✓				15	59 31		
		11 19			30			
	my. C B D 3/4/19.	4 56				54 65		
	bal				15	72 65		
	✓				15	91 85		
	189 3/4/19 - 31/3/19. 5 days @ 6 P. 20 46 at bal 27/4/19		32 46			61 39		
	3016 2 R Dy 25/4/19.	9 73				30 46		
	2461 6 E C 18/4/19	4 56						
	5003. 2 R Dy 6/5/19.	14 85 14 60				30 56		
		33 45	32 46		30.			
	Hosty. Illovic 3/6/19 C/F 16	29 20				1 36		
	5338 - 19/6/19 ~ ✓	9 73				8 37		
		38 93						

2 Co Lan 1/7/19 Dy 9 1

59 31
6 4 10
12 6 41
3 4 5 6
91 85

MARRIED OR SINGLE Single

PLACE OF BIRTH Cobourg Ont.

NAME AND ADDRESS OF NEXT OF KIN Wm. Fox
William St. Cobourg Ont.

RELATIONSHIP OF NEXT OF KIN Father.

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

DATE	PAY NO. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE NO. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY NO. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 NO.	1 DATE	2 NO.	2 DATE	3 NO.	3 DATE	4 NO.	4 DATE
														21	21								
July	1-31	31	1.00	31	31	.10	3	10							34	10				40	15	7/16	
Aug.	1-31	31		31	31		3	10							34	10	49	30	7/16	56	15	8/16	
Sept.	1-30	30		30	30		3								33		65	30	8/16	73	15	9/16	
Oct.	1-31	31		31	31		3	10							34	10	80	30	9/16	1	15	10/16	
Nov.	1-30	30		30	30		3								33		2	30	10/16	3	15	11/16	
Dec.	1-31	31		31	31		3	10							34	10	4	30	11/16	5	15	12/16	
				18	40			18	40														
1917																							
Jan.	1-31	31	1.00	34	10										34	10	7	28	1/12				
																	6	21	2/12				
Feb.	1-28	28	1.00	31	80										30	80	12	31	1/1				
																	9	15	1/1				
Mar.	1-31	31		34	10										34	10	15	15	1/2				
																	19	2	1/3	23	14	1/3	
Apr.	1-30	30		33											33								
May	1-31	31		34	10										34	10	1	17.4					
																	9	17.5					
June	1-30	30		33											33		18	17-5					
				401	50									21	422	50							

OMOTIONS, &c.

Effective Date	Authority

HOSPITAL, &c.

Name of Hospital

Reg'l No. 314750 Rank G. Name Fox. Francis Edward

If in Permt. Corps What Unit } Unit Can Res Siege Transferred to 1st Heavy Art. Grp. Date 1-1-17 Authority

Permanent Force Allowances Transferred to Date Authority

Place of Attestation Transferred to Date Authority

Date of Attestation April 15th 1916. Transferred to Date Authority

Assigned Pay Monthly $ 15.00 Date Effective

Payable to Mrs Emma Fox, William St, Cobourg Ont. 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)

C

Acquittance Rolls 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
										C							
													21 —				Bal from June
40	15/7/16						12 16.			15		27 16		27 94			
56	15 8/16						973.	973.		15		34 46		27 58		1 00	26 58
73	15 9/16						972.	730.		15		32 03		28 55			
1	15 10/16						973.	730.		15		32 03		30 62			
3	15 11/16						973.	730.		15		32 03		31 59		1 50	30 09
5	15 12/16						1217.	973.		15		36 90		28 79			
							730.										
							244.			15		24 74		38 15			
							262.										
							262.			15		20 24		48 71		2 50	46 21
							261.										
23	14/3						262.	262.		15		22 85		59 96		3.	56 96
										15		15		77 96			
							5 23										
							268.			15		22 91		89 15			
							267.			15		17 67		104 48			
							8188	5614		180		318 02					

3147750 Gnr. Fop F. E. Ao. P.

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS			
	No. of Days	Rate	Amount $	Amount c.	No. of Days	Rate	Amount $	Amount c.	No. of Days	Rate	Amount $	Amount c.				1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	1	2	3	4
			401	50										21	422 50								8188	5614		
July	31	10/100	34	10											34 10											
Aug	31		34	10											34 10	24 34 41 57 47 68	30/5 16/6 13/6 31/7 15/7 17/7							268. 268. 446. 268. 268. 268.			
Sept	30		33												33 –											
			502	70										21	523 70								9974	5614		

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	CR. 3	DR. 4	BALANCE	DEFER. PAY	SER. ALLCE.	ENG.
		1482							1482			
Oct.	G.P.	34 10					15					
				QR255 13/7	2 68				159 24			
		34 10			268		15					
Nov	G.P.	33 –		QR635. 18/7	3 57							
				QR511. 8/7	4 46							
				QR356 20/7	2 68							
					10 71							
				QP			15					
				QR154. 29/7	268							
Dec.	G.P.	34 10		QP.			15		182 95			
1918		67 10			13 39		30					
Jany	G Ray	34 10		QR883. 2 1/7	1695							
				QR973. 16 1/7	357							
					20 52							
				CQ.6394. 10 1/8.	7300							
				QP.			15		108 53			
		34 10			9352		15					
Feb	G P	30 80		QR2545. 1 CHAR. 7 1/8	973							
				" " "	4380							
				QP.			15					
				QR70. 1 CHAR. 6 1/8.	446							
				QR3231. CQA. 5 3/8	446							
				2 QR738 CC HQ. 6 1/7	446						57 42		
		30 80			6691		15					

Ao. P. 15.00

CASH PAYMENTS 2	CASH PAYMENTS 3	CASH PAYMENTS 4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
56 14			180		318 02					
			15		15	123 58				
			15		24 82	132 86				
			15		23 04	142 82				
56 14			225		380 88					

PARTICULARS | CHG | PARTICULARS | CRT | DR3 DR4 BALANCE

DEPOT DISB. RED. ACCT. PAY ENL.

57.42.

ff	34 10		419.	16/2		3 57			15	750
			606	4/3		4 46				64 92
			641	15/3		3 57				64.92.
						14 60				
	34 10					11 60			15	

War Service Badge
Class "A" No. 195824

25.2

P.A. F
OG-3
1817/30

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

M

1. No. 314750
2. Rank. Gunner
3. Name. Ford, Francis Edward
4. Unit. 1st Bde H.Q.
5. Date of Discharge 12-7-19 Place Montreal
6. Reason for Discharge Demobilization

I

7. Authority. R.O 1420 D.D.#4 D.O Pt II-202
8. Proposed Residence after Discharge Box 453
Cobourg
Ont.

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. ? 39 Montreal

July 12. 19

F. C. Ford.

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Montreal

Date July 12 19

Signature (O. C. Discharging Unit.)

Officer I/c Discharge Section Dispersal Station

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).
   Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
   (Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing } Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851). + Dupl
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group..... B

Checked by No..... 17

.....

Date..... 29-8-19

1. No.
2. Rank
3. Nam
4. Unit.
5. Date
6. Reas
7. Auth
8. Prop
9. I h
   M. F
10.
   Place
   Date

7/1020 AHK

AUDITOR | PAYMASTER

M. OR S.

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

REGT. NO. 314750 RANK Pte NAME (IN FULL) FOX. FRANCIS EDWARD.

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Nil. — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
1 05	2/7/19	Do 2022 25upp N/R94 P23 B.

ORIGINAL UNIT C.E.F. — IF IN P.F. WHAT UNIT? 1st Bde C.R.H. — BLOCK LETTERS SURNAME FIRST

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 15-4-16 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 15.00 — DATE EFFECTIVE 1/8/19

PAYABLE TO Mrs Emma. Fox — RELATIONSHIP W. Sis. — ANY CHANGE IN ASSIGNEE OR ADDRESS Dominion Bank Cobourg Ont.

ADDRESS William St. Cobourg Ont.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE Montreal — DATE 12/7/19 — REASON Demob. — AUTHORITY Do 202 25upp. N/R94. P23 B — IF ENTITLED TO POST DISCHARGE PAY

MILITARY DIST. No. 2 AUG 4 1919

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	$	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																													8	37			8	37		Olympic Battle Medal 8 37
1.7.19					70	00																														350 Bar to 1.a. 700 W.S.G.
17.7.19	17	1½	18	70	35	00			123	70	Bord		Train		O.K. 164647		4	87	5	00	75	46	30	00			5	50			120 83		5	50			3000 a.p. June & July.
					33	00					23000	17-7-19						33	00												1258						350 Pte 07 pd 13/7/1919 17/7/19.
																														129 20						June P.A. Not credited on Leg 206
			Other Credits	W.	S.	C.	S.	A.	Total		War Service Gratuity														Other Charges	W.	S.	G.	S.	A.	Total		Balance Soldier		Dependant		
					420				420																		70				70		350				
																									5	50					5	50	344	50			
1.8.19																											70				70		274	50			1279201 2
12.9.19																											64	50			64	50	210	00			1529395 3
12.10.19																											70				70		140	00			1637305 4
12.11.19																											70				70		70	00			1651284 5
12.12.19																											70				70						1796587 Final
																														470						

200M-3-19.—L. L. 58786-M. & D. 9985.
M. F. W. 2596.
1772-39-1298.

"M" Wing

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Whitby DATE June 19 1917

1. 1 (a) Unit C.G.A. (b) Regimental No. 3/47350 (c) Rank Gunner

(d) Surname Fox (e) Christian name Francis Edward

(f) Home address Cobourg Ont.

(g) Next of Kin Mrs. Fox (h) Relationship Mother

(i) Address of Next of Kin Cobourg Ont

2. Age last birthday 22 Date of birth Oct 10. 1897

3. Enlistment, or Appointment (if an Officer) (a) Place Cobourg (b) Date 12/4/16

4. Personal description:

(a) Height 5.6 (b) Weight 135 lbs (stripped) (c) Complexion Dark

(d) Colour of hair Brown (e) Colour of eyes Blue (f) Identification marks, Scars, etc. nil

5. Former trade or occupation Clerk

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	3	2

	Periods	
	From	To
Canada	12/4/16	15/6/16
England	25/6/16	~~16~~ 27/12/16
France or other theatres of War	28/12/16	22/5/19

7. Original disease, or injury V.D.S

(a) Date of origin 5.2.19 (b) Place of origin France

(c) Cause Self-abuse

M. F. B. 227.

400M.—11-18.
1772-30-117.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (*a*) Weakness—slight, moderate, marked, etc; (*b*) Loss, complete or partial, of an organ or member, or of its functions; (*c*) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (*d*) Any other restrictions in choice of occupation.)

(V. D. S) no disability

9. Present condition—(*a*) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Objective Genl condition good
C.B.H. Nulley 18.6.19
Wassermann negative
[illegible]
Capt. Major

Examination negative

Subjective — no complaint

(*b*) Has the invalid now any affection of the following systems, not described in Section 9 (*a*) above?
(Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System no Cardio-Vascular System no (If pulse rate is abnormal, B. P. will be taken.) Genito-Urinary System no (Albumen and Sugar will be excluded.)

Special Senses no Respiratory System no Integumentary System no

Disturbances of Mentality no Digestive System no Muscular System no

Osseous and Joint Systems no Any other general condition no

10. (*a*) History of the condition referred to in Section 9 (*a*).

Sore on Glans Penis 5.2.19
admitted 9th Can. Stationary Hosp.
Had full course of
606 & H.G. Was last
no symptoms since

10.—(*b*) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (*a*).)

15.2.18. Appendicitis - recovery
20.6.18. P.U.O. Recovery

(*c*) (Here give a description of wounds, scars and deformities.

See 4(f)

11.—(*a*) Did the disabling condition have its origin before enlistment? no

(*b*) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

na

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? (a) yes (b) no

The regimental documents will be referred to.
(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 6 months

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

See 10 (a)

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

Suggested that the patient be dealt with on arrival in Canada in accordance C.R.O. 42, dated 20.1.19

16. Can the former trade or occupation be resumed? yes
(If not, briefly state why)

17. Recommendations

[illegible]
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned Pte Fox have heard the description of my disability and present condition read, and am satisfied ~~(or not satisfied)~~ with it. (If dissatisfied, statement should follow.)

I complain in addition of

nil

[illegible] Rank.
Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticised.

Yes

19. Is the invalid fit for

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

20. It is certified that the invalid

(*a*) Does require treatment. (Give the nature of the condition and of the treatment required and its probable duration.)

suggested that he be dealt with annually in Canada in accordance P.C. 447 20-7-19

(*b*) ~~Does not require treatment.~~

(*c*) Should pass under his own control.

(*d*) ~~Should not pass under his own control.~~

(Strike out condition not applicable.)

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

R T C Auth Ltr Gel 4053 11-11-18

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

President.

PLACE Witley

DATE 19-6-19

Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned.....understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....

Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

President

PLACE.....

DATE.....

Members

APPROVED BY

Assistant Director of Medical Services.

DATE.....

APPROVED BY

Director-General of Medical Services.

DATE.....

A.D.M.S. HEADQUARTERS
CANADIAN CORPS CAMP.
19 JUN 1919
WITLEY SECTION.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

~~4842~~ F 4731

Date of Assignment Jul. 1 - 1916

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15			

PARTICULARS OF SEPARATION ALLOWANCE

No. 314 750

Rank Gnr. Promoted Reverted Discharge

Soldier's Name F. E. Fox

Battalion #1 Sqe. Bdge. Bty.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Emma Fox

Address William St. Cobourg. Ont.

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
1917 Dec 31			240	240		06284-F-28
1918 Jan	a 59764		15	15		
Feb	7 96285		15	15		
Mar.	a 136092		15	15		
Apr.	g 13351		15	15		
May	S 12291		15	15		
June	m 22857		15	15		
July	m 30175		15	15		
Aug	m 38216		15	15		
also 1914 Sept	R 49956		15	15		
Oct.	R 54465		15	15		
Nov	N. 57278		15	15		
Dec	V 66982		15	15		
Jan	Q 75779		15	15		
FEB	Y 72804		15	15		
Mar	Q 85465		15	15		
April	Q 125		15	15		
May	R 6930		15	15		
June	m 10074		15	15		
July	m 12481		15	15		
			555	555		

A/c Closed 31-7-19

Ret'd per Olympic

Date 1-1-19 M.F.W.187 m.p 4

Clerk A. J. B 21-7-19

m R0 100160

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22820—M. & D. 7063.

AUDITED.

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—1772-39-141
L. L. 22320—M. & D. 7993.