

ATTESTATION PAPER.

No. 132537

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your name? *Fraser John William*
- 2. In what Town, Township or Parish, and in what Country were you born? *Riviere du Loup, Que.*
- 3. What is the name of your next-of-kin? *Archibald Fraser (Father)*
- 4. What is the address of your next-of-kin? *Riviere du Loup, P. Que.*
- 5. What is the date of your birth? *Apr 10 1896*
- 6. What is your Trade or Calling? *Clerk*
- 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? *no*
- 10. Have you ever served in any Military Force? *no*
- 11. Do you understand the nature and terms of your engagement? *yes*
- 12. Are you willing to be attested to serve in the } CANADIAN OVER-SEAS EXPEDITIONARY FORCE? *yes*

Sufficient address *[initials]*

[Signature] (Signature of Man.)
[Signature] (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *John William Fraser*, 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.

Date *Sept 16* 1915. *[Signature]* (Signature of Recruit)
[Signature] (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *John William Fraser*, 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.

Date *Sept 16* 1915. *[Signature]* (Signature of Recruit)
[Signature] (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 *Amqui* this *16* day of *Sept* 1915.
[Signature] (Signature of Justice)

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

[Signature] (Approving Officer)
Lieut. Col. Royal Highlanders of Canada, C.E.F.

Description of Fraser, John William on Enlistment.

Apparent Age.....18 years.....4 months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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).

Height.....5 ft. 4 ins.

Chest measurement. { Girth when fully expanded.....33 1/2 ins.
 Range of expansion.....1 1/2 ins.

Circular scar on L. knee

Complexion.....fair

Eyes.....blue

Hair.....light brown

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

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.....10 / 9 / 15.....191.....

Place.....Montreal.....L. S. Forsyth
 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.

J. W. Fraser.....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.

Davidson.....Lieut. Col. (Signature of Officer)

Date.....SEP 16 1915.....O. C. 73rd Bn. Royal Highlanders of Canada, C.E.F.
 191.....

B.S.
-3-19

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms.....

Proceedings on discharge.....

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Discharge Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

M.F.W 129 — 2

M.F.W 192 — 1



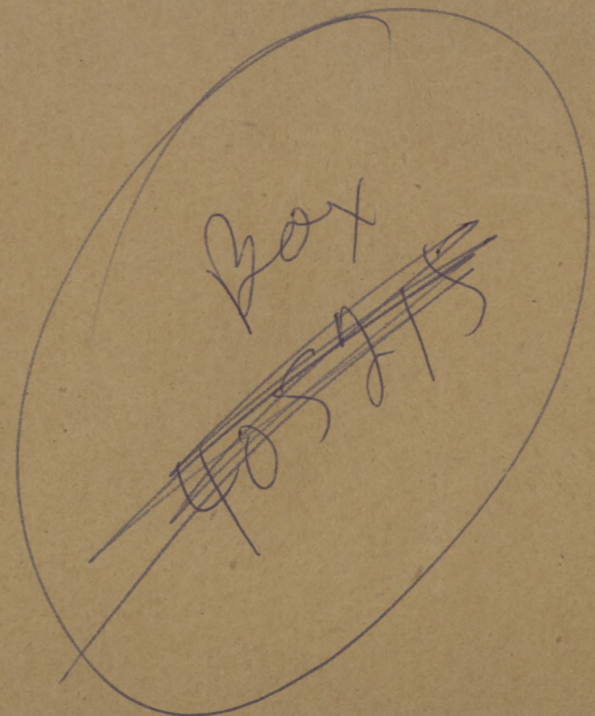
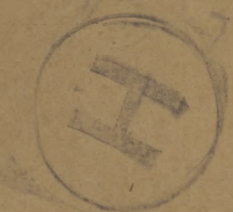
Name FRASER John WM.

18648

Regt. No. 132537 Rank Cadet

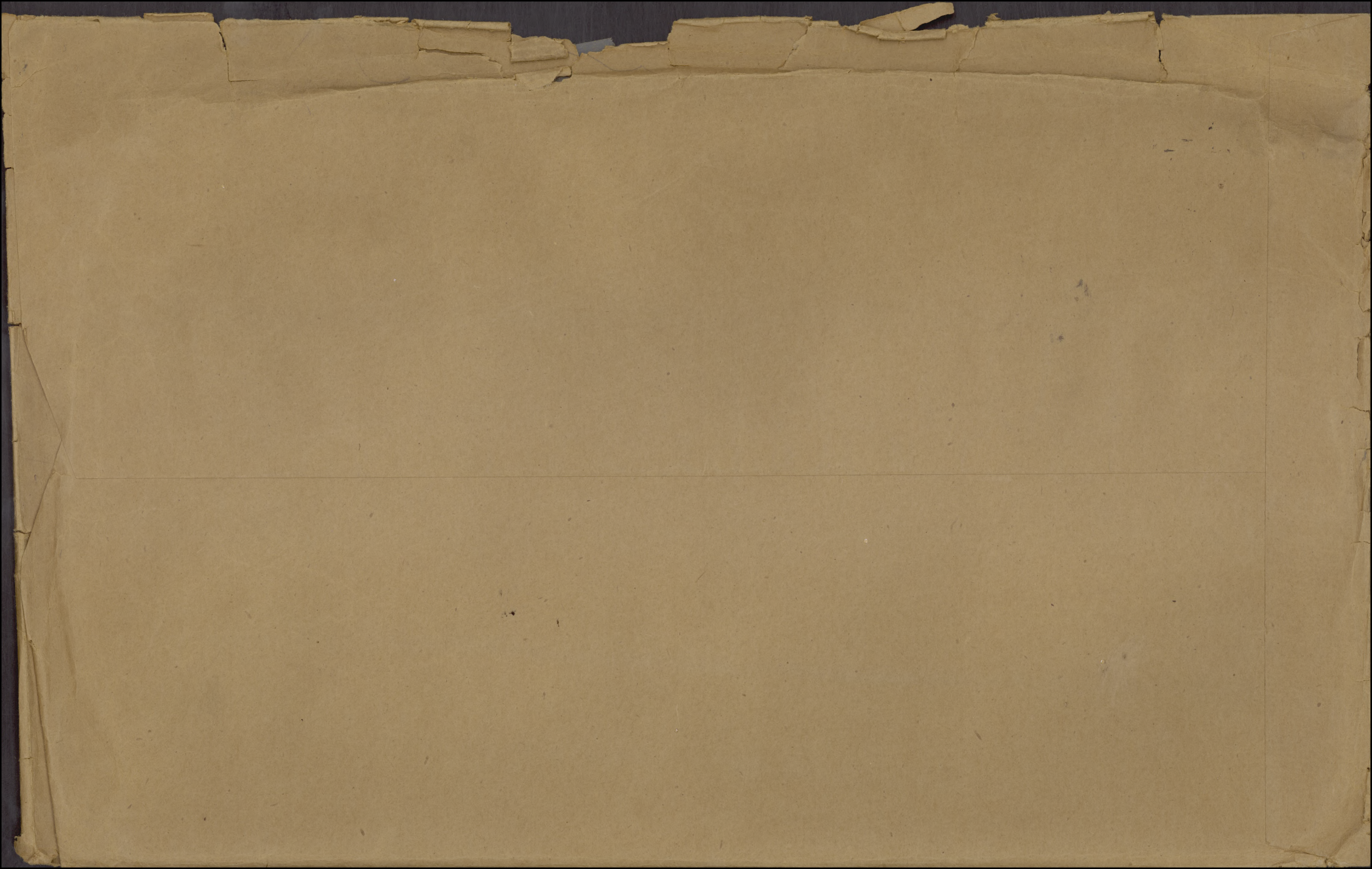
Corps 73rd Bn R.F.C.

Demob.



2
19-19
19-19
3-19
2

AO-128-3286



ORIGINAL ^{D. Co}

MEDICAL HISTORY SHEET.

D

Surname Fraser Christian Name John William

Examined { on 16th day of Sept 1915
at Montreal
Birthplace { City or Town Riviere-du-Loup
County Quebec

Approved by L. S. F. O. S. K.
Rank Captain M.O.

Apparent age 18
Trade or occupation Clerk
Height 5 Feet 4 Inches.
Weight 118 Lbs.
Chest measurement { Minimum 32 inches.
Maximum expansion 35 1/2 inches.
Physical development Good
Small-Pox Marks none

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		<u>11 DEC. 1918</u> M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right Left.
Number 2
When Vaccinated last childhood

Date	Result	VACCINATIONS.
<u>DEC 17 1915</u>		M.O.
		M.O.
		M.O.
		M.O.

(a) Marks indicating congenital peculiarities or previous disease Circular Scar L. knee
(b) Slight defects but not sufficient to cause rejection none

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>SEP 24 1915</u>	<u>Good</u>	<u>V.S.F.</u> M.O.
<u>NOV 5 1915</u>		M.O.
<u>NOV 19 1915</u>		M.O.
<u>JUL 20 1916</u>		<u>TAB V.S.F.</u> M.O.

Enlisted on 16 day of SEP 16 1915 191 at MONTREAL

	CORPS.	REG'T. NUMBER.	RANK.	DATE.
73rd (Overseas) Bn. Royal Highlanders of Canada, C.E.F. Joined on enlistment		<u>132537</u>		
Transferred to.....	<u>17th Res.</u>	<u>132537</u>		<u>14/11.18</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

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.

CANADIAN

Surname Fraser Christian Name John William

STATION.	Date of Arrival at the Station.	DATES OF						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.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
<u>Malindi</u>		<u>27</u>	<u>Nov</u>	<u>15</u>	<u>1</u>	<u>Dec</u>	<u>15</u>	<u>Bronchitis Pharyngitis</u>	<u>4</u>	<u>Sore Throat. Pain in chest with back chon. Mild fever - Rest in bed mild course</u>	<u>E.R. Bourne</u>

Duplicate Medical History Sheet posted to here. *W.G.*

CERTIFIED CORRECT.

28 AUG. 1916

CAN. RECORDS, LONDON.

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

Casualty Form—Active Service.

M. F. W. 54.
150M. 10-15.
H.Q. 1772-39-920.

73rd (Overseas) Bn. Royal Highlanders of Canada, C.E.F.

Unit, Regiment or Corps

Regimental No. 132537 Rank Private Name of War Fraser, John William

Enlisted (a) 16/9/15 Terms of Service (a) Service reckons from (a) 16/9/15

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) Clerk

Date	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.
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Embarked at Halifax on R.M.S. "Adriatic", March 31st, 1916.
Arrived at Liverpool, April 9th, 1916.

Proceeded for service overseas 12/8/16
Adj. 73rd Bn. Canadian Infantry
Captain

DISEMBARKED

HAVRE

11/16	OB 73rd Bn	To 12th Bde Pigeons	Field	13/8/16	Royal Highlanders of Canada
2-12-16	13th B Flamb.	Diarrhoea	Adm 13th B Flamb	4/16	B213, OB 43, d/- 18 1/2
2-12-16	9 B.L.Str	do	Trays B.L.Str.	30-11-16	A 36, OB 64, d/- 15-12-16
9-12-16	OB 73rd Bn.	Rejoined Unit from Bde Pigeons	Adm 9 B.L.Str	30-11-16	A 36, OB 64, d/- 15-12-16
2-12-16	5th Gen Hosp.	Diarrhoea	Trans A. J. "	1-12-16	B213, OB 65, d/- 20-12-16
16-12-16	2 Gen. Depot	Class "J.B"	Adm 5th Gen Hosp	29-11-16	WS034/342
21-12-16	B.L.S.	Taken on strength class "A"	Adm 2 Gen. Depot	2-12-16	WS034/135
23-12-16	B.L.S.	Left for 4th B.L.S.	Trans B.L.S.	16-12-16	WS034/140
28-12-16	4th B.L.S.	Arrived 4th B.L.S.	Field 4th B.L.S.	21-12-16	N.R.
1-1-17	4th B.L.S.	Still at 4th B.L.S.	Field 4th B.L.S.	23-12-16	N.R.
6-2-17	4th B.L.S.	Still at 4th B.L.S.	Field 4th B.L.S.	29-12-16	N.R.
3-3-17	4th B.L.S.	Rejoined unit	Field 4th B.L.S.	31-12-16	Letter N. 215/1708, OB 86
		Transferred 85th Bn.	Field	6-2-17	B213 OB 99
		Taken on strength	Field	3-3-17	Pt. 11 O. 65 d/- 10-5-17.
28.4.17	O.B. 85 Bn	Attd 12th Bde Pigeons	Field	19-4-17	B213, OB 29
28.4.17	OB 85 Bn	Granted 10 days leave of absence	Field	20-4-17	B213, Pt. II O. 96 d/- 6.8.17
11.8.17	-do-	Rejoined from leave	Field	25.4.17	B213, Pt. II O. 96 d/- 6.8.17
			Field	6.8.17	B213, Pt. II O. 96 d/- 6.8.17

(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.

132534

Travers J. W.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
6.10.17	O.C. 85th Bn.	Rejoined from Bde.	Field	4.10.17	B.213.
27.10.17	"	To Bde as Pigeon man	"	24.10.17	B.213.
23.8.18	"	Rejoined from Bde.	"	18.8.18	"
16.3.18	"	To 12th Bde as Pigeon man	"	10.3.18	"
21.3.18	156.7 Amb	Seabee	admt 156.7 Amb	21.3.18	5056/69555.
13-4-18	O.C. 85th Bn.	Rejoined from F.O.	Field	24.3.18	B.213.
13-4-18	"	To 12th Bde Pigeons	"	10-4-18	B.213. 12th Bde. S.C. A. 27/566. 29.4.18.
11-5-18	"	Rejoined from Bde	"	6-5-18	"
8/6-18	DO	One Good Conduct Badge	"	16-9-17	" D.O. 63 d/21-6-18.
20-7-18	DO	To 12th Bde Pigeons.	Field.	19-7-18	" D.O. 31 d/18-7-18.
5-10-18	12 Bde HQ.	Granted 14 days leave	U. K.	2-10-18	" D.O. 12 d/19-10-18.
26-10-18	DO	Rejoined 14 leave	Field	20-10-18	B.213.
26-10-18	O.C. 85th Bn.	Transferred to England on being accepted for probation for course of instruction in Bramshott. The R. A. Ward is posted to N. S. R. 10		22-10-18	B.213. A. 92148/649(6) d/27-9-18. Pt. K. C. 25714/151. Pt. II D.O. 130 d/6-11-18.
<p>Canadian Section: G. H. Q. - 3rd, Ech.</p> <p>Lieut. for Lt. Col. A. A. G.</p>					
5.12.18	NSRD Jr	S.O.S from 85th Bn On Command R.A.F. Hampstead.	Bramshott	23.10.18	212, 295
14-12-18	N.S. R. 10	S.O.S. to 17th Res. Bn.	Bramshott.	14-11-18	D.O. 295/15-12-18.
27/11/18	17 Res	208. from NSRD	Bskett	14/11/18	Pt II 291
19/12/18	do	To be at Sqd with pay	do	23/10/18	Pt II 300.

A. H. Holmes LIEUT.
OFFICER i/c RECORDS,
NOVA SCOTIA REGTL. DEPOT.

Casualty Form - Active Service

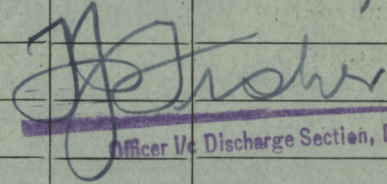
Regiment or Corps 73rd Oceano Bn R.A. of Canada Regimental Number 132537
 Rank Capt Surname Spencer Christian Name John William
 Religion _____ Age on Enlistment _____ years _____ months.
 Enlisted (a) 16/9/15 Terms of Service (a) 16/9/15 Service reckons from (a) 16/9/15
 Date of promotion to present rank _____ Date of appointment to lance rank _____
 Extended { _____ } Re-engaged { _____ } Qualification (b) clerk
 or Corps Trade and Rate _____

Signature of Officer i/c Records.

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...			
<u>28/12/18</u>	<u>17th Cav Reg</u>	<u>on Command</u>	<u>10th Cav Reserve</u>	<u>28/12/18</u>	<u>OK II 307</u>
		<u>maneray</u>			<u>Lieut., Asst. 17th</u>
					<u>17th Canadian</u>
<u>13-1-19</u>	<u>OC. 10th Res. Bn.</u>	<u>to be on Command</u>	<u>10th Res. Bn. and 10th</u>	<u>12-1-19</u>	<u>NO. Pt. II</u>
					<u>70-9</u>
<u>13/1/19</u>	<u>Embarked England</u>	<u>from O.M. Prof 6 to O.C. 2</u>			

(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.

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				
12-2-19	SO S Discharged	Q A A Demole			DD 4/00/46.


 Lieutenant
 Officer in Charge, Discharge Section, District Depot No. 4

TLH. Rank Name FRASER, John William. Reg'l No. 132537. ✓
 Unit 73rd. Battn. If in perm. Corps, }
 What Unit? } Married or Single Single.
 Place and Date of Enlistment Montreal, Sept. 16th. 1915. Place of Birth Riviere Du Loup, Que.
 Name and Address, Next-of-Kin Archibald Fraser, Riviere De Loup, P.Q. Canada. Relationship Father.
 Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship
 Discharge, Date and Place Reason Character

N/E. R.B. No. 5889
 File R.L. OR CAN
 Category

F/Sgt.

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.			
<i>auth</i> S. R. O. 594 11 8-16	10.4.16.	73rd.	Arrived in England Embarked For France Bramshott	10 APR 1916 12-8-16	<i>Adm. 103. CKd. 17. P. 16</i> Part 2 D. O. 201
17.12.16			Adm. No 5 General Wash Trans. No 2 Convalescent Depot	2.12.16 16.12.16	B.L. 9-83. Diarrhoea ✓ ✓ 96. ✓
2.1.17			Discharged to Can. Base Depot	21.12.16	✓ ✓ 101 ✓
7.5.17			S.O.S to 85 th Bn	19.4.17	<i>PL 11 118</i>
10.5.17	85 th Bn		T.O.S. from 73 rd Bn	In Field. 20.4.17	65
21.6.18			A awarded 1gc. badge	16.9.17	Rec 63
6.11.18.	85 th Bn		Transferred to N.S.R.D. band for Can in R.A.F.	22.10.18.	DD. 130. <i>2. 295 d/ 5.12.18 N.S.R.D.</i>

132537 Fraser J. W.

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.				
27-11-18	17 th Res.	Having Rpt from Cadet Dist. Dist. London is the T.O.S from NSRD.	Pte Bishott	14-11-18	50.281.C MS N 5-12-18 NSRD
19.12.18	17 th	To be. of Sgt. with pay.	Pte Bishott	23.10.18.	40 300.
14.1.19	17 th Res	S.O.S. on proceeding to Canada	Pte Bishott	12.1.19	Pte Do 11

CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44.
1183 (D.P. 250M-12-18.
1772-89-908.

LAST PAY CERTIFICATE

Regimental No. 132537 Rank Cadet Name Fraser John W.
(Surname first)
Unit 73 Bn. who was* Discharged
On 12-2-19 191....., to.....
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-12-19 to 12-2-19 191...
the inclusive date of transfer or discharge.

LPC.	Dr.	Cr.
Bal. Dr. or Cr. from prev. month.....	92 05	7 20
Regimental Pay..... <u>12</u>days at \$ <u>1.35c.</u>		16 20
Field Allowance..... <u>12</u>days at \$ <u>15c.</u>		1 80
Separation Allowance.....		35 00
Clothing Allowance.....		70 00
Post Discharge Pay.....		6 40
*Other Credits <u>Subs. DO. 30</u>		
Advances		
Separation Allowance and Assigned Pay Cheque No.....		
*Other Charges		
Balance on transfer or on discharge, cheque No..... <u>21267</u>	37 55	
Total	<u>136 60</u>	<u>136 60</u>

*Give particulars.

A monthly stoppage of \$ 20.00 (†) has..... (‡) been paid on account of
Assigned Pay for the month of Jan. 191...9. }
and Separation Allee. for month of Nil 191..... } (to) Assignee A. Fraser
Riviere du Loup Que.
(Address)

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

ON TRANSFER OF AN OFFICER.

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

REMARKS:—

State (1) date of enlistment.....16-9-15.....married or single.....
(2) Separation Allowance, entitled or not.....Nil..... (3) Reason for discharge.....
(4) Authority for discharge or transfer.....D.D.4 19-F-270.....

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer or soldier.

Date
Place

[Signature]
CAPTAIN PAYMASTER
C-1-C—Demobilization Pay Division Military Dist. 4
Paymaster.

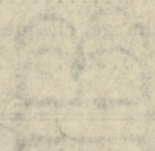
- N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916.
(B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.
(C) For purposes of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. As payment of the balance will have been made, the words "on transfer or" will be deleted.
(D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificate will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.

CREDITS, ADVANCES, Etc.

Credits, Advances, Forfeitures, Issues on Repayment, etc., since issue of this L.P.C. are to be entered hereunder:

Date	Place	Cheque No. A.R. No. or Other Particulars.	AMOUNT		Signature of Officer Making Payment.
			Dr.	Cr.	

6878
100-50-1001



is hereby paid in full to the credit of
 The Government of Canada
 The undersigned Officer of the
 Department of Finance,
 Ottawa, Ontario, Canada.

BY THE OFFICER OF THE OFFICE

10-1-01

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

THIS SECTION FOR USE OVERSEAS

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. 132537 Rank Cadet Surname Graser
(Given name in full)
John William
 Unit or Corps DDY Birthplace Haseriville PA

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

1. GENERAL DESCRIPTION:

Physique Good Weight 130 lbs. Height 5.6 ft. in. Colour of Eyes Blue
 Nutrition Good
 Pulse 68
 Condition of arteries Normal Identification marks, scars, or deformities.
(Give cause and date of origin.)
Scars inside both knees
 Vision Rt. OK Left OK
 Hearing (conversational voice) Rt. OK ft.
 Left OK ft.

Opinion as to general health and physical condition... Good

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

Nervous System No Genito Urinary System No Cardio-Vascular System No
 Special Senses No Integumentary System No Respiratory System No
 Disturbance of mentality No Muscular System No Digestive System Yes
 Osseous and Joint System No Any other general condition No

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

Had Dysentery in France in winter of 16
No disability

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at (Overseas)

Date Signed M.O.

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

Signature

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

THIS SECTION FOR USE IN CANADA—

Examined at Montreal (Canada)

Date 10/2/19 Signed J. Spier M.C.D. 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 J. Spier

(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]

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) FRASER, J. W.

REGIMENT N S R D RANK Cadet No. 132537

Date of Examination in England 2-1-19. Date of Examination in France



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 6 9 10

2. EXTRACTIONS

3. CROWNS

4. DENTURES

- (a) Full Upper
- (b) Part Upper
- (c) Full Lower
- (d) Part Lower



HAS HE EVER REFUSED DENTAL TREATMENT? No.

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

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

Signature of Dental Officer P. M. Morrison Capt

CANADIAN ARMY MEDICAL CORPS UNIT
MEDICAL CERTIFICATE FOR DEMOBILIZATION

FRASER, J. W.
Cable 135537

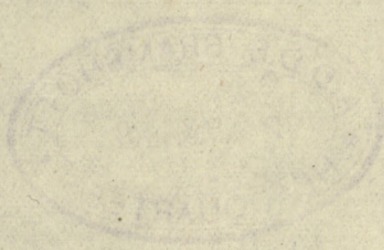
2-1-19

THE MEDICAL OFFICER
OF THE MEDICAL CORPS

OF THE CANADIAN ARMY
CERTIFICATE FOR DEMOBILIZATION

UNIT MEDICAL REPORTS

1910



- (a) The Unit
- (b) The Corps
- (c) The Service
- (d) The Branch

100

- (e) The Division
- (f) The Army

Medical Examination upon leaving the Service of an Officer fit for general service or a Soldier fit for duty.

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

Rank (Cadet) acting Sgt. Name JOHN WILLIAM Surname FRASER.
 Unit or Corps N.S.R.D. (If a soldier) Regt. No. 132537
 Born at FRASERVILLE, Quebec on, date April 10th 1898.
 Signature (for identification) [Signature]

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

1. **PHYSIQUE**—Any deformity, maiming or lameness? If so, describe. no.

Weight 126 lbs.

Height 5 ft. 7 in.

2. **NUTRITION AND DIATHESIS?** good.

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

3. **NERVOUS SYSTEM?** no.

4. **RESPIRATORY SYSTEM?** no.

5. **HEART?**

Abnormal Sounds? no.

Abnormal Size? no.

Pulse Rate? 80

Intermittence or irregularity? no.

6. **ARTERIES.**—Any hardening? no.

7. **DIGESTIVE SYSTEM?** no.

8. **GENITO-URINARY SYSTEM?**

Urinalysis—s.g. 1015 Reaction? neutral Albumen? none Sugar? none

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

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe. no.

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

Examined at Bramshott Signed [Signature] MAJOR C.A.M.C. M.O.
 Date 31 DEC 1918 Signed [Signature] CAPT C.A.M.C. M.O.

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

Medical Examination upon leaving the Service

of an Officer or for general service or a Soldier in the Army

The following report is to be made by the examining physician to the Surgeon General and the Surgeon in Charge of the Medical Department, and to be forwarded to the Surgeon General by the Surgeon in Charge of the Medical Department.

Name of the Soldier or Officer: *John W. Linn*

Rank: *Private*

Company: *1st Regt. U.S. Cavalry*

Regiment: *1st U.S. Cavalry*

1. PHYSICIAN (to be filled in by the examining physician)

2. NUTRITION AND DRAINAGE

3. NERVOUS SYSTEM

4. RESPIRATORY SYSTEM

5. HEART

6. URINE

7. DIGESTIVE SYSTEM

8. GENITOURINARY SYSTEM

9. SKIN, NAILS AND EYES

10. TEETH

11. PROGNOSIS OF THE CASE

12. REMARKS

Surname **Fraser** Christian Name or Names **J.W.** Reg. No. **132537**
 Rank **Pte.** Unit **73rd Bn.** Co. **N.S. 85.** Troop Batty

Hospital **5 Gen. Rouen** Date of Admission **2.12.16**
 Transferred **no 2. Com. Dep. Rouen** Hosp. **16-12-16**

San. Bas. Dep. Havre. Hosp. **21.12.16.**
126. 4 Amb. Hosp. **21.3.18.**

Hosp.

Diarrhoea.

Diagnosis

(1) **Diarrhoea**
 Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Date

C.L. 11.12.16 A83

" 27-12-16 A96

2-1-17 A101

27. 3. 18 A173.

28. 3. 18 A174 same as on A173.

25. 3. 18 A248.

Dis. 23. 3. 18,

REMARKS

Disc 23.3.18

A.M.D. 2 DEPT.

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

RW

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm

1.

2.

3.

4.

5.

6.

7.

*Name FRASER John Wm. Rank Cadet Regtl. No. 132537
 Original unit 73rd Bn. Present unit DD 4 M. or S.S. Age 22 Religion R.C. Fyle Depot 19-F-270
 Ref. H.Q. _____

Port, ship, and date of arrival Halifax. Emp. of Br. 22-1-19

Next of kin Archibald Fraser (F) Riviere du Lout Que.

Address on leave _____

Address on discharge _____

Transportation issued Yes _____ Character on discharge _____
 No Date _____

Previous occupation Clerk Date and place of enlistment 10-9-15 Montreal

Diagnosis _____ Date of Medical Boards _____

Date.	Remarks	Pt. 2 Order No.
30-1-19	T.O.S. from O/S 12-1-19 posted to Cas. Coy. 23-1-19	
	Fur. W/S to 8-2-19	30

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

Date.

Remarks.

Pt. 2 Order No.

14-2-19. S.O.S. Discharged R.O. 1420 Para. C. Demob.

effect. 12-2-19. Cat A

45

Name **FRAZER.**Rank **Private.**Reg. No. **132537***85th B'n.*
John, William,*role*
Unit **73rd. Battalion.**Next of Kin **Canada.**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1916						
2-12	NO. 5 Gen. Hsp.	Rouen	Diarrhoea.	A83		
16-12	No. 2 Conv. Depot	Rouen	-do-	A96		
21-12	Dis. to Can. Base Depot	Havre	-do-	A101		
	<i><u>85th Battalion</u></i>					

No

132539

RANK

Pte.

NAME

Fraser, John Gm

T. O. S.

UNIT

Toronto Recruiting Depot
(36th Regt.)

74 Bn

M. D. 2

PAID
FROMPAID
TOSIG.
OR
REC'T

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS

AUTHORITY

1915
Sept. 21915
Sept. 13 ✓Transfd. to 74th Bn.
13-9-15.

Sept. payroll



2nd Contingent

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTSM. F. W. 12-
20m.—11-15.
H. Q. 1772-39-819.To Whom *A. Fraser*
Address *Riviere du Loup.
P.Q.*By Whom Assigned *Fraser* *J. W.*
Regtl. No. *132537*Rank *pte*
Corps *D. Coy. 73rd Bata RMC. O.C.F.*#
Rate *20.⁰⁰/₁₀₀*

APR 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				



M. F. W. 11
100-112
H. O. 112-112

MILITIA AND DEFENSE
ASSIGNED PAY
OVERSEAS CONTINGENTS

100-112-112

100-112-112

By Whom Assigned

Regt. No.

Rank

Corps

To Whom

Address

Rate

PAYMENTS

REMARKS

Amt.

Order No.

Year

Month

Aug

Sept

Oct

Nov

Dec

1912
Jan

Feb

March

April

May

June

July

Aug

Sept

Oct

Nov

Dec

1910
Jan

Feb

March

1. 32

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 15m.-3-16.
 H. Q. 1772-39-819.

Sheet No. 2.

A. Fraser.

PAYMENTS.

Name of Soldier

Fraser, J. M.

L. L. Job 95618-M. & D. 6555.

#132537, D. Coy 73rd Batta R.A.C.

Month.	Year.	Cheque No.	Amt.	Remarks.
				#2000
April	1916	V1755	20	
May		V5986	20	
June		J8608	20	
July		H8617	20	
Aug.		213761	20	
Sept.		A17231	20	
Oct.		721639	20	
Nov.		D25999	20	
Dec.		932239	20	
Jan.	1917	A38744	20	
Feb.		D44251	20	70P
March		B50052	20	20 Cu
April		I1505	20	20 B
May		X7960	20	
June		X14739	20	20 B.
July		F21919	20	B.
Aug.		F32141	20	L
Sept.		L35726	20	J
Oct.		B41960	20	
Nov.		W47659	20	
Dec.		H54239	20	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

HP

✓

W.B.

2000

420. AD

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.				

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 152537 (Rank) CADET

Name (in full) FRASER, John William enlisted in

the 73rd Battalion, Royal Highlanders of Canada

CANADIAN EXPEDITIONARY FORCE at Montreal, QUEBEC on the 16th

day of September 1915.

HE served in FRANCE

and is now discharged from the service by reason of DEMOBILIZATION

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

Age 22 years 9 months

Height 5 feet 6 inches

Complexion Fair

Eyes Blue

Hair Light Brown

John Fraser
Signature of Soldier

Marks or Scars

Scar inside of both knees.

W. J. [Signature]
Issuing Officer Lieutenant,

Officer i/c Discharge Section, District Depot No. 4.

Rank

Date of Discharge February 12th, 1919.

Appointment

Signed at Montreal, QUEBEC this 12th day of February 1 1919

in Military District No. 4

File Reference No. DDG 1-P-270

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.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. (Rank) Name

Unit

Address on Discharge

Character and Conduct

Former Occupation

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks

Signed at this day of 19

.....
Name of Officer

.....
Rank

.....
Appointment

On demobilization the
particulars called for on
the back of this cer-
tificate will not be com-
pleted.

E.M.H.

Number 132537 ✓

Rank

✓ a/Sgt B

Surname FRASER ✓

Christian Name John William ✓

Units 73rd Bn Can Div Theatre of War France ✓

Date of Service 13/8/16 ✓

Remarks

Latest Address Fraserville ✓
P. Que

Roll No. B. Page 15497.

200m.-2-21.M.

DESP JUL 21 1922

REGN. NO GA28497

NAME

Frazer, J. W.

RANK AND CORPS

Pte. 73rd Bn.

REGT'L NO 132537

H. Q. FILE NO. 649-

FOLLOWS

No.

FOLLOWS

CABLE

No.

DATE

NATURE OF CASUALTY

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A 83-	No 5 Gen. Pomen -	2-12-16	Diarrhea
A. 96.	No. 2. Conv. Depot Rouen	16-12-16	Diarrhoea
A. 101	Disch. to Can. Base Depot Havre	21-12-16	Diarrhoea

Name

FRASER John William

Rank

Reg. No. 132537

Unit

85th Bn.

Next of Kin

Canada.

Date

1918

Movement

Place

Casualty

List
No.Notified
N/K O.

W.O. List

21-3

12. 67a

Diarrhea

173

23-3

To Duty

15752

A 173

MARRIED

SINGLE

Yes.

WIDOWER

TRADE OR CALLING

Clerk.

RELIGION

Roman Catholic

DESCRIPTION.

APPARENT AGE

18 YEARS

4 MONTHS

HEIGHT

5 FEET

4 INCHES

CHEST MEASUREMENT

33½ INCHES

EXPANSION

1½ INCHES

COMPLEXION

Fair.

EYES

Blue

HAIR

Lt. Brown.

DISTINGUISHING MARKS

Circular scar on L. knee.

MEDICAL EXAMINATION.

PLACE

Montreal.

DATE

Sept. 16th, 1915.

CARD NO.

4

S.O.S. 12-2-19
D.O. 45 FOLL. 14-2-19
domest. 480

Batt.

SURNAME. *Frazer.*

CHRISTIAN NAMES *John William Pl.*
REG. NO. *132537*
RANK

UNIT *13rd*

FORMER CORPS *mil.*

NEXT OF KIN.

NAMES IN FULL *Frazer, Archibald*
RELATIONSHIP TO SOLDIER *father.*

ADDRESS *Riverside Barracks, P.O.*

COUNTRY OF BIRTH

Canada, Riverbank Barracks, P.O.

DATE

Apr. 10th, 1896.

PLACE OF ATTESTATION

Montreal.

Raised from Stratford

Canis's Education

LIST NO.

HOSPITAL

DATE OF
ADMISSION

REMARKS

A173 12 Can fld Amb. 21-3-18 Diarrhoea

A 173 Dis 21-3-18 "

A.174 12 21-3-18 "

A248' Disc. ex # 12 C.F.O. 23-3-18 "

NAME

Fraser J

W.

REG'T'L. No.

132537

RANK AND CORPS

Pte

H. Q. FILE NO 649

FOLLOWS

No.

85 Dn

FOLLOWS

CABLE

NO.

DATE

NATURE OF CASUALTY

No. 132539; RANK *pte* "

NAME *Tracer J. W.*

T. O. S. 16-7-15 (20-420) UNIT 73rd. Battalion C. I. F.
 (16-9-15)

M. D. 4.

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
1915- Sept. 16.	1915. Sept. 30.	✓		
	Oct.	✓		
	Nov.	n.		
	Dec.	✓		
1916 Jan.	1916.	✓		
	Feb.	✓		
	Mar.	✓		
	Apr.	✓		

UNIT SAILED
 MAR 31 1916



ASSIGNED PAY. ENGLAND or CANADA.	SEPARATION ALLOWANCE. ENGLAND or CANADA.	NAME: FRASER John William
EFFECTIVE DATE: May 1st 1916	EFFECTIVE DATE: -	NUMBER: 137537
AMOUNT: 20.00	AMOUNT: -	PARTICULARS OF RANK OR APPOINTMENT

NAME, ADDRESS, RELATIONSHIP & AUTHORITY Mr A Fraser. Father Rivers du Loup. P. 2	WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.	AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Bo 300	19/11/18	1st Lt

UNIT AND TRANSFERS			
ORIGINAL UNIT: 7300 Bn. AF			
DATE ACCOUNT FIRST OPENED: May 1st 1916			
AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
Bo 48	3/5/17		85th. Canada

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
20-12-18	4213	Branscott.	19 47				
23-12-18		London.	14 60				
21-12-18		NO	4 87				
30-12-18	2965	10th Res Bn	9 13				

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS (UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK)

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
1918	Jan Balance Forward								50 70		
	Apr R. Pay	33		cap				20			
				AR 19. 6/4/18 85 Bn.	803						
				✓ 235 18/4 38 Bn	357				57 10		
		33			11 60			20			
	May " "	34 10		cap				20			
				AR 145 8/5 85 "	4 46						
				" 206 18/5 " "	4 46				57 56		
		34 10			8 92			20			
	June " "	33		cap				20			
				AR 273 3/6 " "	3 57						
				" 334 19/6 " "	4 46						
				" 375 28/6 " "	4 46				57 77		
		33			12 49			20			
	JUL " "	34 10		cap				20			
				" 396 2/7 " "	3 57						
				" 459 18/7 " "	4 46				63 86		
		34 10			8 03			20			
	Aug " "	34 10		ap				20			
				AR 1057 1/8 12 C. 1 B.	3 57						
				✓ 1195 19/8 " "	3 57				70 82		
		34 10			7 14			20			
	Sept " "	33		cap				20			
				180 v " 8/9	3 57						
				697 " 14/9	5 35						
				1355 " 16/9	3 57				71 33		
		33			12 49			20			

COMPILED BY **W. H. Stoddard**
CHECKED BY **W. H. Stoddard**

* Strike out whichever inapplicable.

NUMBER 132537

RANK

NAME

FRASER

J. W.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
Sept				Brot forward					71 33		
Oct	OP	34	10	can AP				20			
				AR 70 @ 1077 2/10 1-12 C 9B	63 27						
				AR. 1391 4/10 12 Can 2B.	373						
				CP 45466 11/10 London	973						
				CP 44931 10/10 ✓	243						
				AR 2124 2/10 12 Can 8B	18 65				12 38		
		34	10		97 81			20			
Nov		33		AR 3905 - 17 th Res - 26/11/18	24 33			20			
Dec		34	10	AR 4313 - " - 20/12/18	19 47			20			
				CP 89560 - 22/12/18	14 60						
				CP 88159 - 21/12/18	4 87						
Jan	2.p.	34	10					20	114 48		
	under credited 101 days @ 40 ^d	40	40	AR 4313 17 th Res. 20/12/18	19 47			60	595		
		141	60		53 27						
				AR 2969 17 th Res. 30/12/18	9 73						
				" 3625 6-1-19 10 th Res	14 87				865		
					14 60						
					14 60						
				S.O.S. Canada Boy 18/1/19							

MARRIED OR SINGLE *Single*
 PLACE OF BIRTH *Riviere Du Loup, Quebec, Canada*
 NAME AND ADDRESS OF NEXT OF KIN *Mr Archibald Fraser
Riviere Du Loup, P.Q. Canada*
 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

REG'L. No. *132534* RANK *Pte* NAME *Fraser John William* ✓ E
 IF IN PERMT. CORPS } UNIT *43rd Bn* TRANSFERRED TO *85 Bn* DATE *3/15/17* AUTHORITY *B0487/6*
 WHAT UNIT }
 PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY
 PLACE OF ATTESTATION *Montreal Canada* TRANSFERRED TO DATE AUTHORITY
 DATE OF ATTESTATION *September 16th 1915* TRANSFERRED TO DATE AUTHORITY
 ASSIGNED PAY MONTHLY \$ *20.00* DATE EFFECTIVE *1/2/16*
 PAYABLE TO *W. A. Fraser, Riviere de Loup, P.Q.* RELATIONSHIP *Father*
 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)

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS		
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE				AMOUNT											CREDIT	DEBIT					
			\$	c.						\$	c.	1	2	3	4	1	2									3	4
<i>1916</i>																											
<i>1-31</i>								<i>17 36</i>	<i>17 36</i>																		
<i>May</i>	<i>31</i>	<i>1.00</i>	<i>31</i>	<i>00</i>	<i>31</i>	<i>10</i>	<i>3 10</i>		<i>34 10</i>	<i>15/16</i>	<i>110</i>	<i>31/16</i>		<i>4 87</i>	<i>4 87</i>		<i>20 00</i>		<i>29 74</i>	<i>21 72</i>					<i>to/from previous a/c.</i>		
<i>June</i>	<i>30</i>	<i>1.00</i>	<i>30</i>	<i>00</i>	<i>30</i>	<i>10</i>	<i>3 00</i>		<i>33 00</i>	<i>17 1/16</i>	<i>229</i>	<i>31/16</i>		<i>7 30</i>	<i>7 30</i>		<i>20 00</i>		<i>34 60</i>	<i>20 12</i>							
<i>July</i>	<i>31</i>	<i>1.00</i>	<i>31</i>	<i>00</i>	<i>31</i>	<i>10</i>	<i>3 10</i>		<i>34 10</i>		<i>296</i>	<i>15/16</i>			<i>7 30</i>		<i>20 00</i>		<i>27 30</i>	<i>26 92</i>							
<i>Aug</i>	<i>31</i>	<i>1.00</i>	<i>31</i>	<i>00</i>	<i>31</i>	<i>10</i>	<i>3 10</i>		<i>34 10</i>	<i>336</i>	<i>31/7</i>			<i>7 30</i>		<i>20 00</i>		<i>27 30</i>	<i>33 72</i>								
<i>Sep</i>	<i>30</i>	<i>1.00</i>	<i>30</i>	<i>00</i>	<i>30</i>	<i>10</i>	<i>3 00</i>		<i>33 00</i>	<i>47</i>	<i>27/6</i>	<i>122</i>	<i>12/9</i>	<i>2 61</i>	<i>2 61</i>		<i>20 00</i>		<i>25 22</i>	<i>41 50</i>							
<i>Oct</i>	<i>31</i>	<i>1.00</i>	<i>31</i>	<i>00</i>	<i>31</i>	<i>10</i>	<i>3 10</i>		<i>34 10</i>	<i>275</i>	<i>1/10</i>	<i>354</i>	<i>14/10</i>	<i>2 62</i>	<i>2 61</i>		<i>20 00</i>		<i>27 85</i>	<i>47 75</i>							
<i>Nov</i>	<i>30</i>	<i>1.00</i>	<i>30</i>	<i>00</i>	<i>30</i>	<i>10</i>	<i>3 00</i>		<i>33 00</i>	<i>432</i>	<i>4/11</i>			<i>2 62</i>			<i>20 -</i>		<i>22 62</i>	<i>58 13</i>							
<i>Dec</i>	<i>31</i>		<i>31</i>		<i>31</i>		<i>3 10</i>		<i>34 10</i>	<i>562</i>	<i>14/11</i>			<i>2 62</i>			<i>20 -</i>		<i>22 62</i>	<i>69 61</i>							
<i>1917</i>			<i>24</i>	<i>50</i>			<i>24 50</i>																				
<i>Jan</i>	<i>31</i>	<i>1.00</i>	<i>31</i>	<i>10</i>					<i>34 10</i>					<i>22 56</i>	<i>24 69</i>		<i>20 -</i>		<i>1307</i>	<i>261</i>	<i>35 68</i>	<i>68 03</i>					
<i>Feb</i>	<i>28</i>		<i>30</i>	<i>80</i>			<i>30 80</i>		<i>320 96</i>					<i>114</i>					<i>12 68</i>	<i>252 93</i>	<i>69 24</i>						
<i>March</i>	<i>31</i>		<i>34</i>	<i>10</i>			<i>34 10</i>		<i>30 80</i>					<i>1004</i>	<i>7 2 1/2</i>	<i>C.B.B.</i>			<i>698</i>	<i>261</i>	<i>29 69</i>	<i>69 24</i>					
			<i>362</i>	<i>50</i>			<i>362 50</i>		<i>325 86</i>		<i>1192</i>	<i>2/3</i>	<i>182</i>	<i>182</i>	<i>32 56</i>	<i>262</i>	<i>5 23</i>	<i>20 -</i>		<i>268</i>	<i>261</i>	<i>30 46</i>	<i>72 88</i>				
			<i>368</i>	<i>50</i>			<i>368 50</i>	<i>17 36</i>	<i>385 86</i>	<i>17 36</i>	<i>385 86</i>			<i>32 56</i>	<i>27 31</i>	<i>33 11</i>	<i>220</i>		<i>312 98</i>	<i>312 98</i>							

AUDITOR *[Signature]* PAYMASTER *[Signature]*

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

M. OR S. REGT. No. **132537** RANK **Cdt.** NAME (IN FULL) **FRASER JOHN W.**

ORIGINAL UNIT C.E.F. **73rd pm** IF IN P.F. WHAT UNIT?

ADDRESS **T.O.S.** EFFECTIVE DATE **12/1/19** AUTHORITY **D.O. 30.4**

ADDRESS **Bas. Co** EFFECTIVE DATE **23/1/19** AUTHORITY **D.O. 36.4**

IS SEPARATION ALLOWANCE PAID? **nil** DATE EFFECTIVE

TO WHOM PAID **nil** RELATIONSHIP

ADDRESS

PLACE OF ATTESTATION **Montreal** TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION **16-9-15** TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY, \$ **20.00** DATE EFFECTIVE **1-2-19**

PAYABLE TO **J. Fraser** RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS **Fraserville P. Q.**

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE REASON **AD. 45 Pay** AUTHORITY

DISCHARGED **Montreal** DATE **12-2-19** REASON **DD4-19-7270** AUTHORITY IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F. A.			OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS			
	NO. OF DAYS	RATE	AMOUNT	\$	C.	\$	C.	NO.	DATE	NO.	DATE	NO.	DATE	\$	C.	\$	C.	\$	C.	\$		C.	\$	C.
1919																								
Jan.																								L.N/523/1/19 to 8/2/19 D.O. 30-4
																								7 20
Feb. 19	12	1.50	18 00																					640 sub. D.O. 30 P4 99.05. St. L.P.C. ✓
12.2.19																								99 05 ✓ 99 05 ✓ 32 45
																								37 55 ✓ 90 00 W S 9
																								136 60
																								66 60 ✓ 37 55 ✓ WAR. SERV. GR. GRATUITY
																								other Credits W.S.S. S. a
																								420.00 ✓ 420.00 ✓ other Debit: H.S.S. S. a
12.2.19.																								Soldier Dept. D.P. 4.
12.11.19																								40.00 ✓ 40.00 ✓ 40.00 ✓ 40.00 ✓ 40.00 ✓ 40.00 ✓ 40.00 ✓ 40.00 ✓ 70 ✓ 70 ✓ 70 ✓ 70 ✓
12.5.19																								230168 ✓
12.6.19																								301213 ✓
12.7.19																								805749 ✓
																								1065328 ✓
																								420.00 ✓
																								now call # 06356-2-153 B.O. 300-19/12/18-17 Res. Appl. 454 with pay 23/1/18
																								40 40 ✓ 40 40 ✓

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

F

5348
~~5459~~

Apr 1/16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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20

RATE OF ASSIGNMENT

20			
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PARTICULARS OF SEPARATION ALLOWANCE

No. 132537
 Rank pte Promoted Reverted Discharge
 Soldier's Name J. W. Fraser
 Battalion 73rd Battrn "D" Co. R.H.C.
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name A. Fraser
 Address Riviere du Loup P.O.
 Change of Address Que.
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<u>1917</u>					
<u>Dec. 31</u>			<u>420-</u>	<u>420-</u>	
<u>Jan</u>	<u>R 66874</u>		<u>20</u>	<u>20</u>	<u>P</u>
<u>Feb.</u>	<u>F 96884</u>		<u>20</u>	<u>20</u>	
<u>Mar</u>	<u>H 136683</u>		<u>20</u>	<u>20</u>	<u>✓</u>
<u>Apr</u>	<u>G 13915</u>		<u>20</u>	<u>20</u>	<u>W</u>
<u>May</u>	<u>A 12908</u>		<u>20</u>	<u>20</u>	<u>W</u>
<u>June</u>	<u>M 23395</u>		<u>20</u>	<u>20</u>	<u>✓</u>
<u>July</u>	<u>M 30754</u>		<u>20</u>	<u>20</u>	<u>✓</u>
<u>Aug.</u>	<u>M 38807</u>		<u>20</u>	<u>20</u>	<u>✓</u>
<u>Sept.</u>	<u>R 50538</u>		<u>20</u>	<u>20</u>	<u>✓</u>
<u>Oct</u>	<u>R 55079</u>		<u>20</u>	<u>20</u>	<u>✓</u>
<u>Nov.</u>	<u>N 57889</u>		<u>20</u>	<u>20</u>	<u>✓</u>
<u>Dec</u>	<u>V. 67382</u>		<u>20</u>	<u>20</u>	<u>✓</u>
<u>Jan 19</u>	<u>T 69116</u>		<u>20</u>	<u>20</u>	

06356-9-153

H.P.O. 66210 "Destroy" 28.1.19

A.P. 680 A/c Closed 31.1.19
 Ret'd per Empress of Britain
 Date 22.1.19 F.X. 28.1.19
 Clerk S. Chambers

M. F. W. 128
 400M-6-17-1772-38-141
 L. L. 22320-M. & D. 7583.



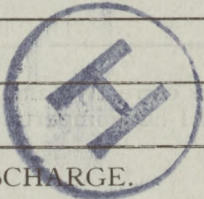
This space to be for numbers.



Proceedings on Discharge.

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

No.	
132537	
Rank	Cadet
Surname..... <u>FRASER</u>	
Christian name..... <u>John Wm</u>	
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company) <u>73rd Bn RHC</u>	
Date of discharge <u>Feb. 12th/19</u>	
Place of discharge <u>Montreal, QUE</u>	
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age..... <u>22</u> years..... <u>9</u> months.	Descriptive marks
Height..... <u>5</u> feet..... <u>6</u> inches.	
Complexion <u>Fair</u>	
Eyes <u>Blue</u>	
Hair <u>Light Brown</u>	
Trade <u>Clerk</u>	
Intended place of residence <u>Montréal</u> (To be given as fully as practicable.) <u>P. Québec</u>	
2. The above-named man is discharged in consequence of	
<u>RO 1420 Para (C) Cat.A. Demob.</u>	
Authority for discharge.....	
N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.	
To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.	3. Conduct and character while in the service have been, according to the records, etc.
	N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.
To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.	4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)



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

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

6. Medals and Decorations.....

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

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

(Place).....

(Date).....

Commanding.....

8. Certificate to be signed by the Soldier on Discharge

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

(Place)..... Montreal, QUE (Signature of Soldier.)

(Date)..... Feb. 12th / 19 (Signature of Witness.)

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

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

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

..... (Signature of Soldier.)

10. Statement of Service.

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

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

11. Confirmation of Discharge.

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

(Place)..... Montreal, QUE

(Date)..... Feb. 12th / 19

(Signature)..... Lieutenant, Officer i/c Discharge Section, District Depot No. 4.

Reservations referred to at Para. 8.

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

List of Discharge Documents

NO RESERVATIONS

J. W. Mason

Attention Report
Particulars of Service
Proceedings on Discharge
Field Order Sheet
Medical Report for Discharge
Discharge History Sheet
Certificate of Discharge
Final History Sheet

Field Order Sheet
Proceedings on Discharge
Particulars of Service
Attention Report
Final History Sheet
Certificate of Discharge
Medical Report for Discharge
Discharge History Sheet
Final History Sheet
Proceedings on Discharge

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are available:

(Where Document)

In the case of a man discharged by purchase, the date and number of Federal Receipt will amount of same be to be noted here.

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263

Squadron }
 Battery } Conduct Sheet, " B. 263a
 Company }

or
 Field Conduct Sheet " W. 178

Copies of Convictions, by C. P. in MS.

Med. Hist. Sheet, Militia form B. 313

Casualty Form " W. 54

Medical Report for Invalid§ " B. 227

Dental History Sheet " B. 465

Last Pay Certificate " W. 44

Duplicate Discharge Certificate " W. 39A

‡Form of Will " W. 82

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

Attestation Paper Militia Form W. 23

or
 Particulars of Recruit " W. 133

Proceedings on Discharge " B. 218

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

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet.

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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