Original

1st. M. D. Guelph, Ont. Depot Battalion 1st. Depot Bn. W.O.R. Regiment

Regtl. No. 3130005

# PARTICULARS OF RECRUIT

## DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class "A")

1. Surname: FRYER
2. Christian name: Joseph John
3. Present address: R.R. #1., Acton, Ont. Halton, Co.
4. Military Service Act letter and number: 442929
5. Date of birth: 21st. May., 1897
6. Place of birth (town, township or county and country): Ottawa, Ont. Canada
7. Married, widower or single: Single
8. Religion: Presbyterian
9. Trade or calling: Farmer
10. Name of next-of-kin: Thomas Fryer
11. Relationship of next-of-kin: Father
12. Address of next-of-kin: R.R. #2., Rockwood, Ont. Canada
13. Whether at present a member of the Active Militia: No.
14. Particulars of previous military or naval service, if any: No
15. Medical Examination under Military Service Act:—

(a) Place: Guelph, Ont. (b) Date: October 18th., (c) Category: "A"

## DECLARATION OF RECRUIT

I, Joseph John Fryer, do solemnly declare that the above particulars refer to me, and are true.

Joseph John Fryer (Signature of Recruit)

## DESCRIPTION ON CALLING UP

Apparent age: 20 yrs. 5 mths.

Height: 5 ft. 2 ins.

Chest measurement: fully expanded: 35½ ins.; range of expansion: 2 ins.

Complexion: Dark

Eyes: Brown

Hair: Dark Brown

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

Scar on right forear

N. L. Millyan Lt. Col.

O. C. 1st Depot Btln.

W.O. Regt.

Place London, Ont. Date 22-10-17

M. F. W. 133.
500 M.—8-17.
1772—39—1158.

REGIMENTAL DOCUMENTS

NAME Fryer Joseph J REGT. NO. 3130005 UNIT H. Q. FILE NO.

| CONTENTS | DATE RECEIVED | TO WHOM FORWARDED | DATE FORWARDED | M. F. W. 2505 REFERENCE | NON-EFFECTIVE BY |
|---|---|---|---|---|---|
| ATTESTATION PAPER (M.F.W. 23, 133, or 51) | | | | 21210 | DEATH |
| CASUALTY FORM (M.F.W. 54 or A.F.B. 103) | | | | | Category |
| TRAINING HISTORY SHEET (M.F.W. 113) | | | | | |
| FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122) | | | | | |
| REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120) | | | | | |
| COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121) | | | | | |
| MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178) | | | | | DISCHARGE |
| DENTAL HISTORY SHEET (M.F.B. 465) | | | | | Category |
| MEDICAL REPORT (M.F.B. 227 or A.F.B. 179) | | | | | |
| MEDICAL EXAMINATION (M.F.W. 129) | | | | | |
| TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2) | | | | | |
| PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2) | | | | | |
| DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115) | | | | | DESERTION |
| LAST PAY CERTIFICATE (M.F.W. 44) | | | | | |
| PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268) | | | | | |
| PARTICULARS OF CHARACTER (A.F.W. 3226) | | | | | 2 |
| COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A) | | | | | |
| | | | | | 14-27 |
| | | | | | 14-27 |
| | | | | | 11-28 |

W. 2589
100M-11-18
1772-39-1377

# MEDICAL HISTORY SHEET

*Surname* FRYER *Christian Name* Joseph John

Examined { on 18th day of October 1917 / at Guelph, Ont.

Birthplace { City or Town Ottawa, Ont. / County Carlton Co.

Apparent age 20 years 5 months.

Trade or occupation Farmer

Height 5 feet 2 Inches

Weight 114 lbs.

Chest measurement { Minimum 32½ inches / Maximum expansion 35½ inches

Physical development Good

Small-pox Marks Nil

Vaccination Marks { Arm Right Left / Number Nil

When Vaccinated last Nil

(*a*) Marks indicating congential peculiarities or previous disease Scar on right forearm.

(*b*) Slight defects but not sufficient to cause rejection Nil

Approved by C W Sinclair

Rank Capt & Adjt M.O.

| Date | Fit or Unfit | Examined for Re-Engagement | |
|---|---|---|---|
| | | | M.O. |
| | | | M.O. |
| | | | M.O. |
| | | | M.O. |
| | | | M.O. |
| | | | M.O. |
| | | | M.O. |

| Date | Result | Vaccinations | |
|---|---|---|---|
| 20/10/17 | | C W Sinclair Capt & Adjt | M.O. |
| | | | M.O. |
| | | | M.O. |

| Date | Result | Anti-Typhoid Inoculations, Etc. | |
|---|---|---|---|
| 20/10/17 | | C W Sinclair Capt & Adjt | M.O. |
| 26/10/17 | | | M.O. |
| 9/11/17 | | | M.O. |

~~Enlisted~~ on 18th day of Octpber 1917 at Guelph, Ont.

| | Corps | Regt'l Number | Habits | Date |
|---|---|---|---|---|
| Joined on enlistment | 1st Depot Bn W.O.R. | 3130005 | — | 18-10-17 |
| Transferred to | | | | |

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD

| Station | Date | Disease | Result |
|---|---|---|---|
| Guelph, Ont. | October 18/17 | Nil | Fit A2 |
| London Ont | Feby 11/1918. | — | A 2 |

Ed. Barnes Capt & Adjt

F G A Jenkin Capt & Adjt

Capt. C. A. M. C

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

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

Surname..... Christian Name.....

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

M.S.A. 15.

# ORIGINAL

## MILITARY SERVICE ACT, 1917.

# MEDICAL HISTORY SHEET.

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

1. Surname FRYER Christian name Joseph John
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule
3. Consecutive number on schedule of men reporting for service (if he appears on it)
4. Address (including street and number, if any) R.R. No.1., Acton, Ont.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 18th day of October 1917, by the undersigned medical board sitting at Guelph, Ont.

5. Age as stated 20 Years 5 Months. 6. Apparent age 20 Years 5 Months
7. Height 5 Feet 2 Inches. 8. Weight 114 Pounds.
9. Chest measurement { Minimum 32½ Ins. / Maximum 35½ Ins. 10. Complexion Dark { Eyes Brown / Hair Dk. Brown
11. Physical development Good { Good / Fair / Poor 12. Smallpox marks Nil
13. Number of vaccination marks { Right arm / Left arm Nil 14. When vaccinated last Nil
15. Distinctive marks and marks indicating congenital peculiarities or previous disease Scar on right forearm. 7-6-18 A 7:66 F.H. Bonnycastle Capt.
16. Slight defects but not sufficient to cause rejection 14/6/18 A 2nd CCD Capt. Chme.

The man denies having had { Rheumatism / Tuberculosis / Syphilis (Strike out disease admitted or suspected.) We find no evidence of past { Rheumatism / Tuberculosis / Syphilis

Signature of Man J. Fryer

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

A. Whitmore Capt. A.M.C. President.
J. B. Jones Capt. A.M.C. Member.
E. Jones Lieut. A.M.C. Member.

| Date | Result | Vaccinations | | Date | Result | Anti-Typhoid Inoculations, Etc. | |
|---|---|---|---|---|---|---|---|
| 20-10-17 | | J. B. Munro Capt | M.O. | 20-10-17 Eyes | R.D. 20 | L.D. 20. | M.O. |
| | | | M.O. | 26-10-17 Hearing | R. 21 | L. 21. | M.O. |
| | | | M.O. | 9-11-17 | | | M.O. |

Joined 22nd day of October 1917 at London Ont.

| | Corps | Reg'tl Number | Habits | Date |
|---|---|---|---|---|
| Joined on enlistment | 12th Depot Bn MOR. | 3130005 | | 18-10-17 |
| Transferred to | 1 Bn | | | |

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

| Station | Date | Disease | Result |
|---|---|---|---|
| London Ont | Feby 11/1918 | — | A 2 Capt. C.A.M.C. |

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

| STATION. | Date of Arrival at the Station. | Dates of Admission into Hospital | | | Dates of Discharge from Hospital | | | DISEASE. | Number of days in Hospital. | Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations. | Signature of Medical Officer. |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Day | Month | Year | Day | Month | Year | | | | |
| № 12 CAN. GENERAL HOSPITAL. | | 12 | MAR | 1918 | 9 | 4 | 18 | Inflamd glands neck | 27 | Incision & packing. Cured | Adamson Capt Cadmee |
| Bearwood | | 9 | 4 | 18 | 26 | 4 | 18 | Inflam. glands neck | 17 | wound healed. G.C. good. Lady D.T. | R.L. Howan Capt CAMC |

Christian Name

Surname

No 4 Draft 1st Dep Bn W O R

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

4th CAN. RES. BATT.

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-9-20.

# Casualty Form—Active Service.

Unit, Regiment or Corps ~~1st Depot Bn W.O.R.~~

Regimental No. 313.000.5 Rank Pte. Name Fryer Joseph John

Enlisted (a) ~~4~~ 22-10-17 Terms of Service (a) C.E.F. O. of War Service reckons from (a) ~~4~~ 22-10-17

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) Farmer

| Report: Date | Report: From whom received | Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case | Place | Date | Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents |
|---|---|---|---|---|---|
| | | ~~EMBARKED~~ | ~~CANADA~~ | | ~~H. M. T.~~ |
| | | ~~DISEMBARKED~~ | ~~ENGLAND~~ | | ~~H. M. T.~~ |
| FEB 14 1918 | ~~1st D. Bn. Bn. W.O.R.~~ | ~~Transferred o/s~~ | ~~London, Ont.~~ | | ~~Authority H.Q.593-6-7 d/d FEB 4 1918~~ |
| | | EMBARKED 21-2-18 | CANADA | H. M. T. | |
| | | DISEMBARKED 4-3-18 | ENGLAND | H. M. T. | Cretia |
| 5-3-18 | O.C. 4th Res. Bn. | T.O.3. 4th Can. Res. Bn. | Branchott | 5-3-18 | Part 2 order no. 54. |
| 27-4-18 | O/C 4th Res. Bn | S.O.S. 4th Res. Batt. on posting to W.O.R.D. discharged from hosp. to 2nd CCD cat. D1 | Witley | 26-4-18 | Part 2 Order No 100 [signature] Lieut. ADJUTANT 4TH CANADIAN RESERVE BATTALION. |
| 27/4/18 | W.O.R.D. | Discharged from Hospital T.O.S. posting from 4th Res Bn. on command at the 2nd CCD Branshott | Witley | 26/4/18 | Do #100 [signature] CAPT., ADJ'T. WESTERN ONTARIO REG'T'L. DEPOT. |

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

[P.T.O.

| Report | | Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case | Place | Date | Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents |
|---|---|---|---|---|---|
| Date | From whom received | | | | |
| 27/4/18 | 2CCD | at 2CCD | B'shot | 27/4/18 | D 0100 |
| 5 JUN 1918 | OC. 2ndCCD | Ceases to be attached to 2nd C. C. D. on return to 4th Res. Bn. | Bramshott | 14 JUN 1918 | Pt. 2 D. O. No. 141 for OC. 2nd CCD. |
| 14-6-18. | O/C 4th Res Bn | T.O.S. 4th Res Battn on posting from W.O.R.D. | Witley | 14-6-18 | 4 Pt 0 142 WORD Part 2 Order No 140 |
| 30-8-18 | 4th. Can. Res. Bn. | Having proceeded O'seas to 1st Battalion, is S.O.S. 4th. Res. Battn. | Witley | 29-8-18 | Part 2 order No. 205. A. B. Noble Lieut. Adjt., for O.C. 4th. Can. Res. Bn |
| | C. B. D. | ARRIVED C. B. D. | FRANCE | 31.8.18 | N. R. D 1368 PART II ORDERS No 85 D 8.9.18 |
| | C. B. D. | LEFT C. B. D. FOR Arrived | CCRC. do. | 2.9.18. do | N. R. D 1368 do A 1872. |
| | O. C. ..... BN | ARRIVED ..... BN. | FIELD | | B. 213 D |
| 5.9.18. | CCRC | Left for Unit | | 5.9.18. | NRD 1543 |
| 7.9.18. | 1st CAN BN. | JOINED UNIT | | 6.9.18. | B 213 |
| 7.10.18 | Clearing Sta Battlefield | Reported Buried | | 2.10.18 | Burial Report KA 18-243 |
| 10.10.18 | O.C. 1st Bn. | Killed in Action | | 27.9.18. | Tel T. 19486 Pt II O O 1074 of 12.10.18. |

M.F.B. 465
200M-1-17
1772-39 950

# DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

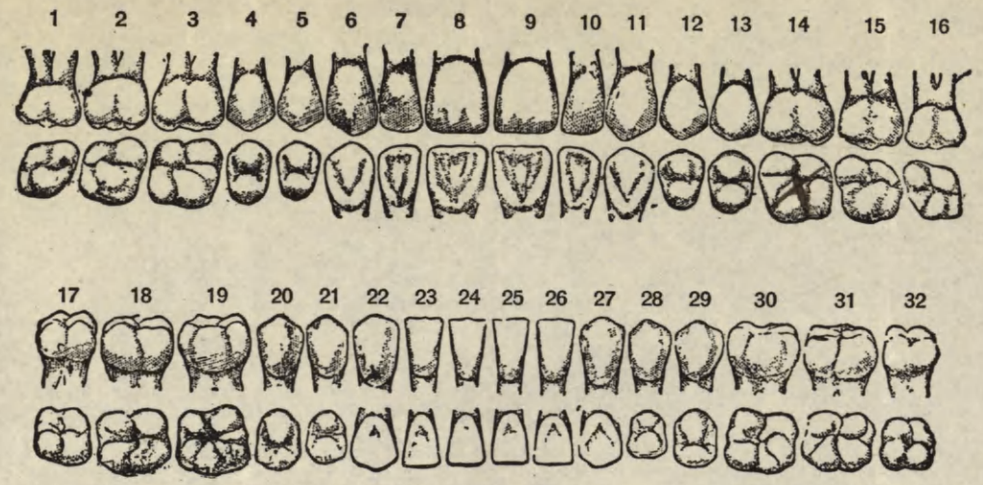
DISTRICT 1

NAME OF SOLDIER Fryer J.

REGIMENT #1 Wpg.

RANK Gr

No. 320005




## INSTRUCTIONS

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

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

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

| | Date | Amalgam | Temporary Filling (a) G.P. (b) Cement | Cement | Treatment Putrescent Pulp | Root Filling | Pulp Cap | Devitalization | Pyrrhœa | Synthetic Porcelain | Extracting | Dentures U | Dentures L | Dentures P | Gold Clasp | Gold Filling | Crowns Gold | Crowns Porcelain | Bridge Work | OPERATOR | Military Dist. | REMARKS |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | 1917 | | | | | | | | | | | | | | | | | | | | | |
| Condition on first Examination | Oct 23 | | | | | Nil | | | | | | | | | | | | | | J M Brand | 1 | Ext. 14. |
| | Oct 23 | | | | | | | | | | 14 | | | | | | | | | J M Brand | 1 | Completed 23/10/17 |

Duplicate

To be made out in duplicate.

H.Q. 54-21-23-53

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

INSTRUCTIONS.

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

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

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

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

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

---

(1) Name of Overseas Unit which Soldier joins 1st Depot. Bn W.O.R.

(2) Regimental Number 313 0005

(3) Full Name of Soldier Joseph John Fryer

(4) Place of Birt Ottawa Ont

(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? No

(8) Have you any children? —

If so, give number of boys and girls —

Also their names and ages —

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes, Thomas Fryer

If so, state name and address R.R.#2 Rockwood Ont

(10) Is your Mother alive? No

If so, state name and address —

—

(11) If your Mother is a widow —

Are you her sole support, or not? —

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

—

—

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

—

—

—

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

No —

(15) Are you insured? No

If so, in what Company? —

Have you made arrangements for payment of your Insurance premium —

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

S. L. Milligan Lieut. Colonel
O. C. 1st Depot Battalion, W. O. R.
*Officer Commanding.*

Date 22-10-17

Form R 122
2353—100M—9-12-16.

4th Dft 1St, Bn W.O.R

LTR

Rank | Name FRYER, Joseph John | Reg'l No. 3130005

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

Place and Date of Enlistment London, 22nd, Oct. 1917. | Place of Birth Ottawa. Ont. Can.

Name and Address, Next-of-Kin Thomas Fryer

R.R. No.2. Rockwood Ont. 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. 4733
File R.L. 25 7 22314 23.10.18
Category KA

m x 8-3-21 ac.

H. W. V., Ld.—9546-16.

| Report. Date. | Report. From whom received. | Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case. | Place. | Date. | REMARKS Taken from Official Documents. |
|---|---|---|---|---|---|
| C | | Arrived in England | | 4-8-18 S/S CRETIC | |
| 5.8.18 | 4th Res | T.O.S, From CANADA | BSHOTT | 5,3,18, | PTii 54 |
| 27.4.18 | W.O.R.D | Posted from 4th Res. Bn. + On bdn at 2nd b.b.D | Witley Camp | 26.4.18 | – 100, 4 Res. 100 d/27 4/18 2nd b.b.D 100 d/27.4.18 |
| 14.6.18 | 4 Res | T.O.S. from W.O.R.D. | Witley Camp | 14.6.18 | DD 140 W.O.R.D. DD 142 D/18 6/18 |
| 15.6.18 | 2nd b.b.D | Ceased on leave from W.O.R.D. Bshott | | 14.6.18 | DD 141 —— do —— |
| 30.8.18 | 4 Res. | S.O.S to 1st Bn ops | Witley Camp | 29.8.18 | " 2056 1st Bn 85048 9/18 |
| 12.10.18 | 1st Bn | Killed in action field – 27.9.18 | | | " 107. |

WO

| 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. | | | | | |

45. G

# FORM OF WILL

I, Joseph John Fryer (Name in full)

Regimental Number 313000 5 serving in 1st Depot Bn W.O.R.

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

I devise all my real estate unto

| | |
|---|---|
| ~~\~~ | Name and Address of person or persons to whom it is to go. |

absolutely, and my personal estate I bequeath to my friend

| | |
|---|---|
| Mr. Walter Lamb<br>R.R. #1 Acton<br>Ont. | Name and Address of person or persons to receive personal estate* (*See note*). |

NOTE

This space for the appointment of Executor if necessary.

IMPORTANT NOTE

This must be signed and Dated by THE SOLDIER HIMSELF.

this 22 day of October A.D. 1917

Joseph John Fryer Signature of Soldier.

*N.B. Personal estate includes ~~pay, effects, money in bank, insurance policy, in fact~~ everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness R. C. Clinger

Address of Witness London Ont

Occupation of Witness Soldier

Signature of Second Witness E K Norman

Address of Witness London Ont

Occupation of Witness Soldier

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

Fryer, J.J., Pte. 3130005 1stBn. 649-F-11425

Med. & Dec. ( Friend ) Walter Lamb, Esq.,
R. R. No. 1,
Acton, Ont.

Scroll Desp. _____ Reqn. No 744572

Plague Desp. NOV 29 1921 Reqn. No 018430

P. & S. ( Father ) Thomas Fryer, Esq.,
R. R. #2,
Rockwood, Ont.

(Ser # 757225.)

Mem. Cross. ( NIL )

50870

not elig. for 14-15 Star
E. " D m
E. " B W m

-B-

ac

Number 3130005 Rank Pte

Surname FRYER

Christian Name Joseph John.

Units 1st Bn C.E.F. Theatre of War France

Date of Service 29-8-18 II

Remarks

Latest Address Mr Walter Lamb (friend)
R.R. #1
Acton, Ont.

Roll No. B Reg 15863

200m.-2-21.M.

D.M.S. 1313.

D1

# ADMITTING CARD.

Regt. No. 3130005 A. & D. No. MK 6718

Rank Pte

Name Fryer. Joseph. John.

Corps W Ont Reg D.

Religion R.

Age 20

M. H. Rec'd M. H. Requested 6/12 M. H. Ret'd –

Disease Inflam Glands of neck

Admitted 9 APR 1918 Bdr Gen Bramshall

Discharged 26 APR 1918 2nd C.C.D. Bramshott

Place in Hospital 230 D.

Transferred

Results Wd healed. G. C. fair D I

P.T.O.

REMARKS:

REGT'L. No. 313805

NAME Fryer Joseph John

H. Q. FILE No. 649

RANK AND CORPS Pte 1st Bn Form 1st Depot Bn W.O.R. 4th Rd

FOLLOWS No.

FOLLOWS

| CABLE No. | DATE | NATURE OF CASUALTY |
|---|---|---|
| H397 | 17-10-18 | C K. in A Sept. 27th 1918. |
| Next of kin Fryer Thomas (Father) PR #2 Rockwood Ont. | | |
| A342 H.L. | 16-10-18 | |

FK

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 |
|---|---|---|---|
| ~~C 1 (7) 1~~ | ~~#12 Can Gen Bramshott~~ | ~~12-3-18~~ | ~~Inflamed Glands neck~~ (W/O R) |
| C. 181 | 10 Can Gen. Bramshot | 10-4-18 | Inf. Glands Neck. |
| C 1981 | " " " " Disc | 26-4-18 | " " " |

D 22/9/18 2

SURNAME. Fryer

CARD NO. 4

CHRISTIAN NAMES Joseph John

FOLL.

REGL. No. 313005 RANK Pte.

UNIT 1st Depot (West. Ont Regt.) (4th R.D.) Bn.

FORMER CORPS Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Fryer, Thomas

RELATIONSHIP TO SOLDIER Father

ADDRESS R. R. #2, Rockwood, Ont.

COUNTRY OF BIRTH Canada Ottawa, Ont. DATE May 21st 1897

PLACE OF ATTESTATION London, Ont. DATE Oct. 22nd 1917

From Halifax Per S.S. "Cretic" 22-2-18.

1101/5

L. L. 10437. M. & D. 7253. M. F. W. 22. 100M.—11-16. H. Q. 1772-39-339.

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING Farmer RELIGION Presbyterian

DESCRIPTION.

APPARENT AGE 20 YEARS 5 MONTHS

HEIGHT 5 FEET 2 INCHES

CHEST MEASUREMENT 35½ INCHES EXPANSION 2 INCHES

COMPLEXION Dark EYES Brown HAIR Dk. brown

DISTINGUISHING MARKS Scar on rt. forearm.

MEDICAL EXAMINATION. PLACE Guelph, Ont. DATE Oct. 18th 1917

Present Address R. R. #1, Acton, Ont.

Form R. 149.

Name FRYER Joseph John Rank Pte Reg. No. 3130005

Unit 4th Res. 1st Bn

Next of Kin Thomas Fryer RR No 2 Rockwood. Ont Canada 257 2234

| Date 1918 | Movement | Place | Casualty | List No. | Notified N/K O. | W.O. List |
|---|---|---|---|---|---|---|
| 12-3 | to 12 Can G Bstalt | | Inflam Glands neck | C67 | | 14296 |
| 10-4 | EC Bernwood | | do | C181 | | 16019 |
| 26-4 | discharged | | do | C198 | | 4745 |
| 27-9 | Killed in Action | | | A342 | A397 | 4457 |
| | Ht. O | 107 | 12/10/18 | | | |

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

"Ø" UNVERIFIED.

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

| Surname | Christian Name or Names | Reg. No. |
|---|---|---|
| FRYER | J.J. | ~~3130000~~ |

| Rank | Unit | Co. | Troop | Batty |
|---|---|---|---|---|
| Pte. | ~~4 Res~~ W.O. | | 3/30 | (1) |

Hospital — Date of Admission

1. 12 Can Gen Bramshott Hosp. 12.3.18.
Can. Conv. Bearwood 10-4-18.
2. Hosp.
3. Hosp.
4. Hosp.

Diagnosis
1. Inflamed Glands Neck.
2. R.T.S. Killed in Action. 27.9.18.
3.

Disposition — Date

| | |
|---|---|
| 25.3.18. C167. | D.D. 26.4.18. |
| 12-4-18 | C181. |
| 2.5.18 | 6198. |
| 16.10.18. a. 342. | |

Remarks
correct Regt. No by letter from R.O. 18.5.18.

# EPITOME OF HOSPITAL TREATMENT

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

Army Form B. 181.

# CLINICAL CHART.

(*To be attached to Case Sheet.*)

Corps 113 O.R. Military Hospital Bramshott

No. 3130505 Rank and Name Pvt. Fryer J. Age 20 Service 2/12

Disease Inf. Glands neck Date of admission 12-3-18 Date of discharge 9/4/18 Result

| Dates of Observation | 12 mch | 13 | 14 | 15 | | | 16 | | | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Days of Disease | 12 | 13 | 14 | 15 | | | | | | | | | | | | | | | | | | | | | Opn | | | | | | |
| Temperature, Fahrenheit (Time A.M. P.M.) | | | | | 6 10 | 2 6 | 10 2 | 6 | 10 2 | 6 | | | | | | | | | | | | | | | | | | | | | |
| Pulse per Minute | 98 | 76 | 94 78 | 100 | 108 90 | | 98 96 | 72 | 84 84 | | 84 84 | 84 82 | 96 | 94 | 90 80 | 84 | 78 | 80 | 78 | 72 | 78 | 72 84 | 84 78 | 72 | 72 80 | 84 88 | 84 76 | | 80 | 84 72 | 70 70 | 64 72 | 70 78 |
| Respirations per Minute | 20 | 22 | 20 20 | 20 | 22 22 | | 22 22 | 22 | 22 20 | | 22 22 | 20 20 | 20 | 20 | 20 18 | 16 | 16 | 18 | 18 | 16 | 16 | | 20 | 20 | 20 18 | 20 | 18 | | 20 | 18 20 | 18 | 18 |
| Motions per 24 Hours | | | | | | | | | | | | | | | | | | | | | | | | | 1 | 2 | | | 1 | 1 | |

Operation

Accident

Wt. W3728/M2313—2,000,000—6/17—H. & Sp. (10693)—A.F.B. 181/5 (E. 735)

Signature [illegible] In charge of case.

Army Form B. 181.

# CLINICAL CHART.

*(To be attached to Case Sheet.)*

Corps________________ Military Hospital________________

No.__________ Rank and Name____________________ Age______ Service__________

Disease__________ Date of admission__________ Date of discharge__________ Result__________

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Dates of Observation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Days of Disease | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Temperature, Fahrenheit | Time<br>A.M. P.M. | Time<br>A.M. P.M. | Time<br>A.M. P.M. | Time<br>A.M. P.M. | Time<br>A.M. P.M. | Time<br>A.M. P.M. | Time<br>A.M. P.M. | Time<br>A.M. P.M. | Time<br>A.M. P.M. | Time<br>A.M. P.M. | Time<br>A.M. P.M. | Time<br>A.M. P.M. | Time<br>A.M. P.M. | Time<br>A.M. P.M. | Time<br>A.M. P.M. | Time<br>A.M. P.M. | Time<br>A.M. P.M. | Time<br>A.M. P.M. | Time<br>A.M. P.M. | Time<br>A.M. P.M. | Time<br>A.M. P.M. | Time<br>A.M. P.M. | Time<br>A.M. P.M. | Time<br>A.M. P.M. | Time<br>A.M. P.M. | Time<br>A.M. P.M. | Time<br>A.M. P.M. | Time<br>A.M. P.M. | Time<br>A.M. P.M. | Time<br>A.M. P.M. | Time<br>A.M. P.M. |
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| Pulse per Minute | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Respirations per Minute | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Motions per 24 Hours | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Wt. W3728/M2313—2,000,000—6/17—H. & Sp. (10693)—A.F.B. 181/5 (E. 735)

Signature____________________In charge of case.

Forms
I. 1237
.11

Army Form I. 1237.

# MEDICAL CASE SHEET.*

| No. in Admission and Discharge Book. | Regimental No. | Rank. | Surname. | Christian Name. |
|---|---|---|---|---|
| 1806 | 3130505 | Pte. | Fryer | J. |
| Year 1918 | Unit. W.O.R. | | Age. 20 | Service. 3/12 |

| Station and Date. | Disease Inflamed Glands neck. |
|---|---|
| Bramshott 12-3-18 | T.H. negative. |
| 2302 | Past History: Never been ill on his life. |
| | Present Illness. About two weeks ago, noticed that left side of neck was swollen, and slightly painful. It remained about this way for one week when the swelling got worse & more painful. It was painted with Iodine once, & he came to Hospital. He does not feel sick. Never has had V.D. His T is 100° P 94. The swelling fluctuates somewhat on palpation, & the skin over it is quite reddened. |
| | His Circulatory, Nervous Respiratory & Alimentary Systems are negative. G.U. syst negative. |
| March 14 | Fluctuation increasing. |
| " 15 | Incision. Multiple pus examined. Packed. |
| April 1 | Very little discharge. |
| 7 | Practically healed. Discharged to Convalescent Hosp. |

Lieut. Capt. Corps

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

(23205) Wt. W 4234—M 627. 1,000,000. 8/16. C.F.&S. Forms/I. 1237/11.

P.T.O.

| Station and Date. | |
|---|---|

Forms
I. 1237
12

Army Form I. 1237.

# MEDICAL CASE SHEET.*

Res

| No. in Admission and Discharge Book. | Regimental No. | Rank. | Surname. | Christian Name. |
|---|---|---|---|---|
| T 6718 ek | 3130005 | Pte | Fryer | J John |
| Year 1918. | Unit. WO. RD | | Age. 20 | Service. 6/12 |

| Station and Date. | Disease Inflam. glands neck |
|---|---|
| Bearwood | |
| 9/4/18 | P.C. Wounds in neck still open. G.C. fair |
| 2 30 A | Dressings daily. |
| 15/4/18. | Wd healing. Dressings. |
| 22/4/18. | Wd healed G.C. fair Cat. D I |
| 26 APR 1918 | Discharged 2nd cd Haslemere Cat. D I. |

R L Clowan Capt.
Captain,
Med. Off., Canadian Convalescent Hospital,
Bear Wood, Wokingham, Berks.

28 APR 1918
Registrar, Canadian Convalescent Hospital,
Bear Wood, Wokingham, Berks.

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

Wt. W 6604/M 2870—1,500,000—8/17—H. & Sp. (10933). Forms/I. 1237/12. (E239)

[P.T.O.

Station
and Date.

Date of Enlistment

18 10 17

MILITIA AND DEFENCE

# Separation and Assigned Pay Branch F

OVERSEAS CONTINGENTS

Date of Assignment

Feb 1st 1918

6a 5 / 6162

RATE OF SEPARATION ALLOWANCE

| | | | |
|---|---|---|---|
| | | | |

RATE OF ASSIGNMENT

| | | | |
|---|---|---|---|
| 15.00 Too | | | |

11 2 19 / 19

## PARTICULARS OF SEPARATION ALLOWANCE

No. 3130005

Rank Pte Promoted Reverted Discharge

Soldier's Name Joseph John Fryer

Battalion 1st Depot Bn. W.O. Regt 4th Draft.

Beneficiary

Relationship

Address

## PARTICULARS OF ASSIGNMENT

Name Walter Lamb

Address R.R. No 1. Acton. Ont.

Change of Address

1 WALTER LAMB,

2 R.R.#1., ACTON,ONT. 15 15.00

3 % 3130005 JOSEPH JOHN FRYER FIFTEEN DOLLARS

4

| Date | Cheque No. | Amount S/A | Amount A/P | Total | | REMARKS |
|---|---|---|---|---|---|---|
| Mar. 4 | 1438 | | 30 | 30 | W | A/C. 1235 mailed 4-4-18. H.W. |
| Apr. 4 | 14535 | | 15 | 15 | W. | |
| May | P 13587 | | 15 | 15 | ✓ | |
| June | M 24048 | | 15 | 15 | ✓ | |
| July | M 31418 | | 15 | 15 | ✓ | |
| Aug | M 39498 | | 15 | 15 | ✓ | |
| Sept | T 42166 | | 15 | 15 | ✓ | |
| Oct | R 55823 | | 15 | 15 | ✓ | |
| | | | 135 | 135 | | |

KILLED IN ACTION / ~~DIED OF WOUNDS~~ DATE 27-9-18

C. L. No. 338 8126 DATE 21-10-18

M.R.O. 19352 TO DESTROY RENDERED 28-10-18

B. P. C. FORM 1 & C. F. X. COMPLETED ON FILE

6506-J-11

CLERK Elliott DATE 25-10-18

AUTHORITY FOR NEW ACCT. A.R. 700 A / Mr. Beaudoin 27 3 18

M. F. W. 128.
40M. 6-7-1-72-39-1141
L. L. 22320—M. & D. 1931.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

| | | | |
|---|---|---|---|
| | | | |

RATE OF ASSIGNMENT

| | | | |
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| | | | |

## 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. 123.
400M.-17-1772 29-1141
L. L. 22320—M. & D. 7593.

FORM P. 559
8248-150M.-7/9/17

Reg'l. No. 3130005 Rank Pte Name Fryer, Joseph John.

Place of Attestation London, Ont. Date of Attestation 22/10/17. Original Unit 1st Depot Btn. W.O. Reg. Present Unit 4th Can. Res.

Married or Single: Single.

Place of Birth: Ottawa, Ont.

Name of Next of Kin: Thomas Fryer. Relationship: Father.

Address: R.R. #2, Rockwood, Ont.

Name of Next of Kin: Relationship:

Address:

## APPOINTMENTS. PROMOTIONS AND REVERSIONS.

| Particulars | Effective Date | Authority |
|---|---|---|
| | | |

| Date Admitted | Admissions Date Disch'd | V. or A. | To Hospital, &c. Name of Hospital. |
|---|---|---|---|
| | | | |

## ASSIGNED PAY

(1) Per Month $ 15.00 Date Effective 1/7/18 Authy.

Payable to Walter Kaint. RR#1 Orton, Ontario Relationship

(2) Per Month $ Date Effective Authy.

Payable to Relationship

(3) Per Month $ Date Effective Authy.

Payable to Relationship

(4) Per Month $ Date Effective Authy.

Payable to Relationship

Discharge date and place

Reason and Authority

(1) Stopped Effective

Cause

Date A3M Forms rend.

(2) Stopped Effective

Cause

Date A3M Forms rend.

(3) Stopped Effective

Cause

Date A3M Forms rend.

(4) Stopped Effective

Cause

Date A3M Forms rend.

Account Transferred to N.E. Branch (date)

Account Transferred to Officers' Pay Branch (date)

## PARTICULARS OF TRANSFERS

| To Unit | Effective Date | Authority |
|---|---|---|
| | | |

## SEPARATION ALLOWANCE.

Separation Allowance Monthly $ Effective (Date) Stopped Effective (Date)

Payable to Reason

Relationship Authority

Authority for Issue Remarks

Separation Allowance Monthly $ Effective Date Stopped Effective (Date)

Payable to Reason

Relationship Authority

Authority for Issue Remarks

New Paybook Issued New Paybook Issued

| Period From | Period To | Pay and Field Allowance No. of Days | Pay and Field Allowance Rate | Pay and Field Allowance $ c. | Working Pay No. of Days | Working Pay Rate | Working Pay $ c. | Separation Allowance $ c. | Assigned Pay Credits $ c. | Any Other Credits $ c. | Total Credits $ c. | Separation Allowance $ c. | Cash Payments During the Month 1 $ c. | 2 $ c. | 3 $ c. | 4 $ c. | Assigned Pay $ c. | Other Charges $ c. | Total Debits $ c. | Balance Carried Forward Credit $ c. | Balance Carried Forward Debit $ c. | Number of Acquittance Rolls 1 | 2 | Number of S.A. and A.P. Cheque | Remarks. All Casualties, Promotions, &c., to be Noted, also Particulars of "Other Credits" or "Other Charges" |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 28 FEB 1918. | | | | BALANCE FROM CANADA. | | | | | | | | | $21.00 | | | | | | | | | | | | |
| | | | | | | | | | | | | | 34.10 | | | | | | | | | | | | |
| Mar 31 | P.P. | | | 34.10 | | | | | | | | 15 | 55.10 | | | | | | | | | | | | Ass. Pay for the month of February has been deducted on Pay List for that ~~account~~ month. |
| | | | | | | | | | | | | | 35.23 | | | | | | | | | | | | |
| | | | | | | | | | | | | 15 | | | | | | | | | | | | | |
| | | | | 34.10 | | | | | | | | | | | | | | | | | | | | | |

Cap.

AR 1475 7/3/18 Det Bkatt H.89 4.89

| Period | | Pay and Field Allowance | | | Working Pay | | | Separation Allowance | Assigned Pay Credits | Any Other Credits | Total Credits | Separation Allowance | Cash Payments During the Month | | | | Assigned Pay | Other Charges | Total Debits | Balance Carried Forward | | Number of Acquittance Rolls | | Number of S.A. and A.P. Cheque | Remarks. All Casualties, Promotions, &c., to be Noted, also Particulars of "Other Credits" or "Other Charges" |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| From | To | No. of Days | Rate | $ c. | No of Days | Rate | $ c. | $ c. | $ c. | $ c. | $ c. | $ c. | 1 $ c. | 2 $ c. | 3 $ c. | 4 $ c. | $ c. | $ c. | $ c. | Credit $ c. | Debit $ c. | 1 | 2 | | |

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

| ASSIGNED PAY | * ~~ENGLAND~~ OR CANADA. | SEPARATION ALLOWANCE. | * ENGLAND OR CANADA. |
|---|---|---|---|
| EFFECTIVE DATE:- 1/2/18. | | EFFECTIVE DATE:- | |
| AMOUNT:- 15.00 | | AMOUNT:- | |

NAME:- FRYER: Joseph John

NUMBER:- 3130005

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.

Walter Lamb.
R.R. 1. Acton Ont

Stopped off 1/10/18

PARTICULARS OF RANK OR APPOINTMENT

| AUTHORITY | DATE EFFECTIVE | RANK OR APPOINTMENT |
|---|---|---|
| | | Pte |

UNIT AND TRANSFERS

ORIGINAL UNIT:- 1 Depot Bn W.O.R.

DATE ACCOUNT FIRST OPENED:- 1/3/18

| AUTHORITY | DATE EFFECTIVE | DATE LEDGER SHEET T'SF'D | UNIT TRANSFERRED TO |
|---|---|---|---|
| | | | 4 Res Bn. |
| | 1/9/18 | 20/8 | 1 Bn |
| | 1-11-18 | 25-11-18 | B.E.F. Kin a |

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 |
|---|---|---|---|---|---|---|---|
| | | | | | | | |

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE:- Killed in Action 27/9/18 & FA 342 16/10/18

| MONTH | PARTICULARS | CR 1 | CR. 2. | PARTICULARS | DR. 1 | DR 2. | DR. 3. | DR. 4. | BALANCE | DEFERRED | SEPARATION |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 31/3/18 | Bal Fwd. | | | | | | | | 35 23 | | |
| Apr. | 30 P.P. | 33 | | Can AP | | | | 15 | 53 23 | | |
| | | 33 | | | | | | 15 | | | |
| May. | 31 PP | 34 10 | | " | | | | 15 | | | |
| | | | | AR. 902. 13/5/18. (10) 2 C.C.D. | 29 44 | | | | | | |
| | | | | ✓ 1457. 28/5. (27) ✓ | 14 84 | | | | 28 05 | | |
| | | 34 10 | | | 44 28 | | | 15 | | | |
| June | 30 P.P. | 33 | | C.A.P. | | | | 15 | | | |
| | | | | AR 1733. 13/6. (2) ✓ | 14 84 | | | | | | |
| | | | | ✓ 1123. 28/6 (26) 4 Res | 14 60 | | | | 16 61 | P.S.C. agreed 10-9-19 | |
| July | 31 P.P | 33 | | | 29 44 | | | 15 | | | |
| | | 34 10 | | C.A.P. | | | | 15 | | | |
| | | | | ✓ 1360. 18/7 (3) ✓ | 9 73 | | | | 25 98 | | |
| | | | | | | | | | 34 10 | | |
| | | 34 10 | | | 9 73 | | | 15 | | | |
| Aug | 31 P.P. | 34 10 | | C.A.P. | | | | 15 | 60 06 | | |
| | | | | AR. 1663 2/8. (2). 4 Res. | 9 73 | | | | | | |
| | | | | ✓ 1768 15/8 (2) ✓ | 9 73 | | | | | | |
| | | | | awarded 5 days F.P. 2. 16/8/18. for awl tattoo till 11.40 pm 13/8/18. B.O. 193. 16/8/18 4 Res | | 5 50 | | | | | |
| | | | | AR 2010 30/8 (11) 4 Res | 4 87 | | | | 15 25 | | |
| | | 34 10 | | | 24 33 | 5 50 | | | | | |
| Sept | ✓ | 33 | | C.A.P. | | | | 15 | 33 25 | | |
| | | | | 1265 3.9.18 [redacted] | 3 57 | | | | 26 11 | | |
| | | | | 586 14.9.1 [redacted] 18 4 Res | 3 57 | | | | 26 11 | | |
| | | 33 | | | 7 14 | | | 15 | | | |

NON EFF AC

Compiled 4/3/19 [illegible]
P.C. & Bal. 26 11

NUMBER RANK NAME

| Month | Particulars | Cr. 1. | Cr. 2. | Particulars | Dr. 1 | Dr 2 | Dr. 3. | Dr. 4. | Balance | Deferred | Separation |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | |