Nursing Sisters Con't 1st

No. 7 General

ATTESTATION PAPER.

No. C

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS).
1. What is your name?	Myra Goodeve
2. In what Town, Township or Parish, and in what Country were you born?	Shelley Bruce Co N.B. Can.
3. What is the name of your next-of-kin?	A. Goodeve (Father)
4. What is the address of your next-of-kin?	Dominion Ry. Cum. Alberta
5. What is the date of your birth?	22 July, 1882
6. What is your Trade or Calling?	Nurse, auth. Can. Govt 1886
7. Are you married?	No
8. Are you willing to be vaccinated or re-vaccinated?	Yes if necessary
9. Do you now belong to the Active Militia?	Yes
10. Have you ever served in any Military Force? If so, state particulars of former Service.	Been in Hospital Station Hosp.
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

Myra Goodeve (Signature of Man).

C. Hemsley (Signature of Witness).

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DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Myra Goodeve, 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.

Myra Goodeve (Signature of Recruit)

Date Sept 28 1914. C. Hemsley (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Myra Goodeve, 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.

Myra Goodeve (Signature of Recruit)

Date Sept 28 1914. C. Hemsley (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 Quebec this 28 day of September 1914.

Edgar Bell (Signature of Justice)

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

J. R. Budge Lt Col (Approving Officer)

200 M.—8-14.
H.Q. 1772-1-13.

Nursing Sister Myra Goodeve

Description of ..... **on Enlistment.**

Apparent Age 27 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 — ft. 5 ins.

Chest measurement.
- Girth when fully expanded 37 ins.
- Range of expansion 4 ins.

Complexion Dark

Eyes Dark

Hair Black

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

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

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date Sept 21st 1914. Kenneth Lamont Lt Col

Place Quebec ..... 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.

Myra Goodeve having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

J. H. Hodges Lt. Col (Signature of Officer)

Date Sept. 28 1914.

N.S | GOODEVE | Myra Moffatt

I.D. number
No. d'identification

Surname
Nom de famille

Given names
Prénoms

deceased 06/01/66

NATIONAL PERSONNEL RECORDS CENTRE
CENTRE NATIONAL DES DOCUMENTS DU PERSONNEL

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location
Lieu

Box 3626

"CONTENTS CONFIDENTIAL"
"CONTENU CONFIDENTIEL"

ARC – 1048 (86/06)

Officers

REGIMENTAL DOCUMENTS

NAME GOODEVE: Myra Moffatt REGT. No. N. S. UNIT C.A.M.C. H. Q. FILE No.

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133 or 51)					DEATH
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.B.W. 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)				17206	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)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
CARDS					
PAY-SHEETS					

PUBLIC ARCHIVES CANADA

Box # 3626

405557

W. 2589
25m.—1-23
1772-39-1377

DVA CEF: Matron WSR 5A/MH

DEPARTMENT OF VETERANS AFFAIRS

RECORD OF SERVICE

IN THE

CANADIAN ARMED FORCES

DEPARTMENT OF VETERANS' AFFAIRS
JUL 5 1956
WAR SERVICE RECORDS
OTTAWA - CANADA
THIS REPORT IS NOT VALID WITHOUT THE IMPRINT OF THE OFFICIAL STAMP OF THE DEPARTMENT

Service Rank and/or Number Matron Name Myra Moffatt GOODEVE, R.R.C., A.R.R.C.

1. Branch of Service: CANADIAN EXPEDITIONARY FORCE
2. Date and Place of Birth: 27th July, 1886. Chesley, Ontario.
3. Date and Place of Appointment, Enlistment or Enrolment: 23rd September, 1914. Valcartier, Quebec.
4. Unit on Appointment, Enlistment, or Enrolment: Canadian Army Medical Corps
5. Theatres of Service: CANADA - ENGLAND - FRANCE - DARDENELLES - MALTA
6. Date and Place of Retirement or Discharge: 31st October, 1920. Toronto, Ontario.
7. Reason for Retirement or Discharge: "Demobilization"
8. Rank on Retirement or Discharge: Matron
9. Medals and Decorations: ROYAL RED CROSS 1st CLASS - ROYAL RED CROSS 2nd CLASS 1914 STAR - BRITISH WAR & VICTORY MEDALS - MENTIONED IN DESPATCHES.
10. Remarks: NIL.

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Box 526 Colborne, Ont.

DESCRIPTION AT TIME OF RETIREMENT OR DISCHARGE

Sex: Female Height: 5 Feet 8 Inches.

Eyes: Dark Hair: Black Complexion: Dark

Marks or Scars: Vaccination left arm.

Ottawa, Ont., Canada

July 5th, 1956.

for Director, War Service Records

DVA 812 (REV. 7-51)

COPY

BIRTH CERTIFICATE

NAME GOODEVE, MYRA MOFFATT

DATE OF BIRTH JULY 27th, 1886. SEX F.

PLACE OF BIRTH CHESLEY, BRUCE CO.

REGISTRATION AUGUST 13, 1886. 86-T5-A-423

ISSUED AT TORONTO ONTARIO

THE 19 day of JAN. 1949.

REGISTRAR GENERAL

2-6-GH.

Army Form B. 103 Regimental Number.....

Casualty Form—Active Service.

Regiment or Corps Canadian (R.A.M.C. Corps)

Rank Matron Surname Goodeve Christian Name Myra M. ~~F.R.C.~~

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

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

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

Extended ..... Re-engaged ..... Qualification (*b*).....

.... or Corps Trade and Rate.....

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

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked...			
10/7/17	Lden Gazette	To be Matron			
		Lden Gazette 30179 dy-10/7/17		1/1/17	Gaz 44 28/7/17
19/8/17	2 C.G. Hosp.	Granted 14 days leave.		17/8/17	B213 R-49 25/8/17
9/9/17	"	Rejoined from leave		2/9/17	" " 54 18/9/17
15/12/17	"	Granted 14 days leave		15/12/17	" " 13 21/12/17
5/1/18		Rejoined Unit		2/1/18	B213
1/1/18	Lden Gazette	Awarded the Royal Red Cross	P.T. Class		Gaz 3
		Gaz No 30450			
17/3/18	Can. / Rel.	Posted to C.A.M.C. Depot		5-4-18	RD 26040
		Shorncliffe. (Recalled)			P-019 2/3/4/18
		Can / Rep 2726 d/17-3-18			

Capt. for Lt.-Col. A.A.G.

Canadian Section, 6th Echelon, B.E.F.

(*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.

(6228) W.13863/M1477 2,400,000 [illegible] (E.886) P.T.O.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
28.3.18	A.M.C.	Mentioned in Despatches		30.10.17	
12-4-18	Canada	Sick from No 2 C.G.Hosp	Scliffe	6.4.18	Pte 102 (C.D.437)
16-4-18	do	Ceases to be attached to No 16 C.G.Hosp			
					O.C. Transd Lt
					CAPT. ASST. ADJUTANT
					FOR O.C. C.A.M.C. DEPOT
16.4.18	16 C.G.H.	Attached from Cans Depot	Orpington	17.4.18	Pt. II Do 90
15.5.18	16 C.G.H.	Ceases to be attached from Cans Depot	Orpington	11.5.18	Pt. II Do 115
					K Lewis Capt Cans
16.5.18	Canada	Ceases to be on Command to No 16 C.G.Hosp	Scliffe	11.5.18	Pte 136 (C.D.580)
14.7.18	Cans Con Depot	S.O.S. to Cans Con Depot Scliffe			
		Depot Group, (Home Canada)	Scliffe	26.6.18	O.C. Transd Lt
					CAPT. ASST. ADJUTANT
					FOR OFFICER COMMANDING C.A.M.C. DEPOT.
18.7.18	Can.C. Con. Dep.	T.O.S. from Can.C.T.D. (On leave in Canada)	Scliffe	26.6.18.	Pte II D061
17.8.18	—	On Command Hort C&H	—	14.8.18	Pte II D0. 87
					Lieut. O.i/c Records for O.C. Scliffe Depot Group.
14.8.18	No.4 C.G.H.	Attached for duty, Quarters, Rations from Can.R.D., Shorncliffe.	Basingstoke	14.8.18	Pt.2 D.O. 35/14.8.18
22.8.18	Do.	Ceases to be attached on proceeding Overseas	Do.	20.8.18	Pt 2 D.O. 40/22.8.18 Quebec H.O. Ord. (A.M.D.1) La. 58

Major Canc, Registrar
No. 4 Canadian General Hospital Basingstoke
19.8.18.

M. F. W. 54. (A. F. B. 103:
500M.—9-16
H. Q. 1772-39-920.

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

Casualty Form—Active Service.

Unit, Regiment or Corps C.A.M.C.

Regimental No. ..... Rank Matron Name GOODEVE. MYRA.MOFFATT. (RRC)
C.E. F.

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

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

Extended ..... Re-engaged ..... Qualification (b) .....

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
31-10-20		S.O.S.B.O.H. on being posted to the AMCTD#2 with effect from 31-10-20	TORONTO	31-10-20	Auth.ADMS.DO. 246 dated 25-10-20
					CAPT. & ADJUTANT DOMINION ORTHOPAEDIC HOSPITAL
		S.O.S.,CAMC.,T.D.2. On General Demob'n.	Toronto.Ont.31-10-20.		ADMS.,D.O. #246 d/25-10-20.
					Lieut-Col.CAMC.
		O.A.,CAMC.,T.D.No.2.			

(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				

CERTIFIED CORRECT
20 DEC. 1916
CANADIAN RECORD OFFICE

2 C 41 H

2

(20379) W. C. 4862—540.—600,000.—9-14.—G. A. T. & S., Ltd. Forms B. 103/1.

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps No 1 Can. Stationary Hospital (Que.)

Regimental No. Matron Rank ~~Nurse-Sister~~ Name ~~Mrs Goudere~~ (RRC 1st Class) Goodeve

Enlisted (a) ~~Aug 1914~~ Terms of Service (a) ~~Sept 28. 1914~~ Dur. of War Service reckons from (a) GOODEVE, Myra M

Date of promotion to present rank 1.11.16 L.G. 30179 Date of appointment to lance rank Numerical position on roll of N.C.Os.

Extended Re-engaged Qualification (b) Nursing Sister

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				
3/8/15	D.G.M.S.	Embarked for England	Boulogne	29/7/15.	D.G. 8.9.16
31.7.15	D.M.S.	To Dardanelles			
3.6.16.	L. Gaz.	Awarded R.R.C. 2nd Class.			
26.9.16	O.C. 16 Can Stat Hp	Admitted to Hp Debility Malta 30/9/16	Salonika	3.6.16 / 26.9.16.	Corps Orders 246 31.7.15 No. 29608 D.G.O. R 15116.
22.10.16	Emb. Officer	Invalided to England from Malta per H.S. "Galeka"	Malta	11.10.16.	Inv. Return 13. 1198.

H.M.H.S. Galeka

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A.P.T.
OFFICER i/c RECORDS
CANADIAN SECTION G.H.Q.

MAJOR.
I/C R.A.M.C. RECORDS SALONIKA ARMY

(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.

Nursing Sister GOODEVE, Myra M

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.
From whom received					
23.10.16	D.M.S.	Transf. to C.A.M.C. T.S.		20/10/16	C.O. 1984
27.10.16	D.M.S.	Granted sick leave by Med Board from 24/10/16-		28/11/16	C.O. 1977
30.10.16	G.O.C.C.T.D.	Taken on strength CAMC'd		20/10/16	D.O. 5634
13.11.16	D.M.S.	Posted to Shorncliffe Mil Hosp.		7/11/16	C.O. 4064
14-12-16	D.M.S.	T.O.S. Military Hospl Shorncliffe		2-12-16	Part II D.O. 179.
27-1-17.	M.H.S.	S.O.S. to CAMC T.S.	Westerhanger	27-1-17.	Part II D.O. 31
31/1/17	CAMC T.S.	Taken on strength from Shorncliffe Mily. Hosp.	Westerhanger	27/1/17	Pt II D.O. 31
6/2/17.	C.A.M.C. T.S.	Struck off strength on transfer to 2nd E. Cav Gen. Hosp.	Westerhanger	28/1/17	Pt II D.O. 36. Capt. Adjutant. for O.C. C.A.M.C. Training School
27/1/17	2nd E.H.	Taken on strength as reinforcement. vide 2/D/834 (AMD4) dd- 18/1/17		27/1/17	B213 Pte 9 dd- 3/2/17.
29-4-19	C.A.M.C.	Transferred to MD 2	Toronto	29-4-19	P II O. No 7 of 30-4-19 HQ 392-7-1 ..... MJR CAMC A/O.C. SAVARD MIL. HOSP.

J S Burnham
MAJOR,
FOR COL. I/c RECORDS, C.E.F.

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M. F. W. 129.

50m.—7.17.
1772—39—1142.

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 Matron Name Myra Moffatt Surname Goodeve.

Unit of Corps C.A.M.C. (If a soldier) Regtl. No.

Born at Chesley Ont. on, (date) 1884. July 27th.

Signature (for identification) Myra Moffatt Goodeve.

DEPT. MILITIA & DEFENCE NOV 20 1918 H.Q. CANADA

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

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe.

Weight	Colour of eyes
200 lbs. ✓	Brown.
Height	**Identification Marks**
5 ft. 6 in.	None.

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2. NUTRITION AND DIATHESIS? Good.

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

3. NERVOUS SYSTEM? Is there a history of previous disability? Good.

4. RESPIRATORY SYSTEM? Is there a history of lung trouble? Good.

5. HEART?

Abnormal Sounds? None.

Abnormal Size? No.

Pulse Rate? 76. Intermittence or Irregularity? None. Muscular Tone? Good.

6. ARTERIES.—(a) Any hardening or nodulation? Nil.

(b) Blood Pressure. Normal.

7. DIGESTIVE SYSTEM? (Condition of teeth and tonsils to be included). Good.

8. GENITO-URINARY SYSTEM? Nil.

Urinalysis—S.G.? 10 20 Reaction? Acid Albumen? Nil. Sugar? Nil

9. SKIN, MIDDLE EAR, EYE or any other part? Nil.

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

21

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

Examined at Quebec. Mil. Hospital. Signed. D. E. Bussen M.D. M. O.

Date Nov. 13/18. Signed. E. Faulkner Lt. M. O.

Myra Moffatt Goodeve
Signature note of Soldier.

If any disease or impairment of health or physical condition is discovered or complained of by the soldier examined, 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 CASE-HISTORY SHEET.

Hospital Jeffrey Hale Station Quebec

No. ... Rank Lieutenant Name Goodeve Impra'm Age ...

Unit C.A.M.C. Service ...

Date of Admission 17/10/18 Date of Discharge 28/10/18

Diagnosis Influenza

Date of Origin 16/10/18 Place of Origin Quebec

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CAUSE OF ILLNESS OR INJURY: Infection

HISTORY OF PRESENT ILLNESS OR INJURY.
(Is Illness or Injury result of Service?) Began with headaches and sore throat. Temp was 102. Resp frequent quick Face flushed. Throat red & swollen.

CONDITION ON ADMISSION. Temp 99.. Pulse 100 Resp 22
All symptoms quickly subsided
28/10/18 Fit for discharge with a few days convalescence

TREATMENT.

Acetanilid & Salol aa gr V
Ammon Chlor gr V powder & wallow

CONDITION ON DISCHARGE FROM HOSPITAL.

Discharged convalescent

E. K. Robertson Capt
Medical Officer i/c Case.

Date 28/10/18

M. F. B. 313a.
30M—9-16.
39-439.

a11856

101°
105°
103°
°

CONFIDENTIAL.

117221

Army Form A. 45.

S. D. No.

MILITARY DISTRICT No. 3 CENTRAL REGISTRY NOV 21 1918

PROCEEDINGS OF A MEDICAL BOARD

assembled at 86, Strand. London. on 28-11-16.

by order of D.D.M.S. Canadians.

for the purpose of examining and reporting upon the present state of health of

(Rank and Name) N/S. Myra Goodeve. (Corps) C.A.M.C.

Age 30. Service 27 mos. Disability Debility.

Date of commencement of leave granted for present disability 24/10/16.

Date on which placed on half-pay for present disability

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that

this Nursing Sister has now recovered.

The opinion of the Board upon the questions herein is as follows:—

(1.) *a.* Is the officer fit for "General Service"? Yes.

b. If not so fit, how long is he likely to be unfit? Not applicable.

(2.) *a. If unfit for General Service, is he fit for service at home?* Not applicable.

b. If not so fit, how long is he likely to be unfit for service at home? Not applicable.

c. If unfit for General Service at home, is he fit for light duty at home? " "

d. If not so fit, how long is he likely to be unfit for light duty at home? " "

(3.) Was the disability contracted in the service? Yes.

(4.) Was it contracted under circumstances over which he had no control? Yes.

(5.) Was it caused by military service? Yes.

(6.) If caused by military service, to what specific conditions is it attributed? Strain of duties.

(7.) If the disability was not caused by military service, was it aggravated by it? Not applicable.

I concur in the finding of the Board of Medical Officers here recorded.

W. Macdermant
Captain, C.A.M.C.
For D.M.S.
Canadian Contingents.

29 NOV 1916

(Sgd) David Donald, Major., C.A.M.C. President.

Signatures G.M. Dacis, Capt., C.A.M.C. } Members.

G.O. Taylor, Capt., C.A.M.C.

(5725.) W16789/M2 0. 200M. 2/16. C. P., Ltd. Forms A.45 25

[P.T.O.

Instructions.

1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

CONFIDENTIAL. 109535 Army Form A. 45.

No. 4 DISTRICT No. 5 REGISTRY NOV 31 1916

PROCEEDINGS OF A MEDICAL BOARD

assembled at 86, Strand, London. on 24-10-16

by order of D.M.S. Canadians.

for the purpose of examining and reporting upon the present state of health of

(Rank and Name) N/S. Myra Goodeve (Corps) C.A.M.C.

Age 30 Service 2-2/12 Disability General Debility.

Date of commencement of leave granted for present disability 24-10-16

Date on which placed on half-pay for present disability

COPIED Archives COPIE

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that

this Sister as a result of long and continuous service, suffers from the above. Has been under treatment at Vincent Square since 20-10-16.

The opinion of the Board upon the questions herein is as follows:—

(1.) *a.* Is the officer fit for "General Service"? No.

b. If not so fit, how long is he likely to be unfit? Five weeks.

(2.) *a. If unfit for General Service, is he fit for service at home?* No.

b. If not so fit, how long is he likely to be unfit for service at home? 5 wks.

c. If unfit for General Service at home, is he fit for light duty at home? No.

d. If not so fit, how long is he likely to be unfit for light duty at home? 5 wks.

(3.) Was the disability contracted in the service? Yes.

(4.) Was it contracted under circumstances over which he had no control? Yes.

(5.) Was it caused by military service? Yes.

(6.) If caused by military service, to what specific conditions is it attributed? Strain of duty.

(7.) If the disability was not caused by military service, was it aggravated by it? /

Signatures (Sgd) DAVID DONALD, Major C.A.M.C. President.

G.M. DAVIS, Captain C.A.M.C. Members.

I concur in the findings of the Board of Medical Officers herein recorded.

W B MacAusland

24 OCT 1916 Captain, C.A.M.C.
For D.M.S.
Canadian Contingents.

(5725.) W16789/M2 0. 200M. 2/16. C. P., Ltd. Forms A.45 25

[P.T.O.

Instructions.

1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

ORIGINAL

Nursing Sister.

MEDICAL HISTORY SHEET.

ORIGINAL

Surname ~~Godeve~~ Goodeve Christian Name Myra

Examined { on 24th day of Sept. 1914
at Immigration Hospital

Birthplace { City or Town Quebec
County Quebec

Apparent age 27.

Trade or occupation Nurse

Height 5 Feet 6 Inches.

Weight 190 Lbs.

Chest measurement { Minimum 28 inches.
Maximum expansion 32 inches.

Physical development Complete

Small-Pox Marks None

Vaccination Marks { Arm Right. ~~Left.~~
Number 1

When Vaccinated last 1900

(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection

Approved by J. A. Clark

Rank Major M.O.

Date	Fit or Unfit	Examined for Re-engagement,
		25 OCT 1916 M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
12/10/14		J. A. Clark M.O.
Apr 8. 1919	Good	Navy marc major M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
23/2/14		M.O.
4/10/14		M.O.
		M.O.

CANADIAN

CANADIAN

Enlisted on 25 day of Sept. 1914 at Quebec P.Q.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	C. A. M. C.	Neg: Sb.		25-9-14
Transferred to..				

Lieut.-Col. In Charge of Records, Canadian Contingent

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

The Medical History Sheet of all men proceeding overseas must be returned by the Officer commanding their unit to Militia Council when they leave Canada.

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

M. F. B. 313.
5 M—8-14.
H. Q. 1772-39-429.

Entries in Red Ink made from Attestation Sheets.

R. M. Shaw for D. D. M. S.

AUG 13 1915

Surname Goodeve Christian Name Thos

STATION.	Date of Arrival at the Station.	DATES OF Admission into Hospital. Day	Month	Year	DATES OF Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
H. Sea Hosp	9/11/17							No Admissions			A E H Bennett Capt.

Miss Goodese to be shown in Quarters

CLINICAL CHART.

(To be pasted into Case Book opposite Patient's case.)

Corps CAMC Hospital Station Quebec.

No. Rank and Name Miss Goodese Age Service

Disease Influenza 17/10/18 Date of Admission 17/10/18 Date of Discharge 28/10/18 Result Convalescent Case Book Folio

Dates of Observation	Oct. 18	19	20	22	23	24	25	26	27	28	29	30	31	Nov. 1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Days of Disease																															
Temperature Fahrenheit	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.	TIME a.m. p.m.
107°																															
106°																															
105																															
1																															
1																															
100																															
99°																															
98°																															
97°																															
Pulse per Minute	96 92	100 100	80 88	72 88	68 100	68 80	84 80	78 80	80 80	88																					
Respirations per Minute	20 22	20 24	20 22	20 20	24 24	20 20	20 20	28 20	20 20	28																					
Motions	T T	T 0	T T	T 0	T 0	T 0	T T	T T	T 0																						

M. F. B. 288.

50m.—7-16.
H. Q. 1772-39-513.

Signature E K Robertson Capt In charge of case.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

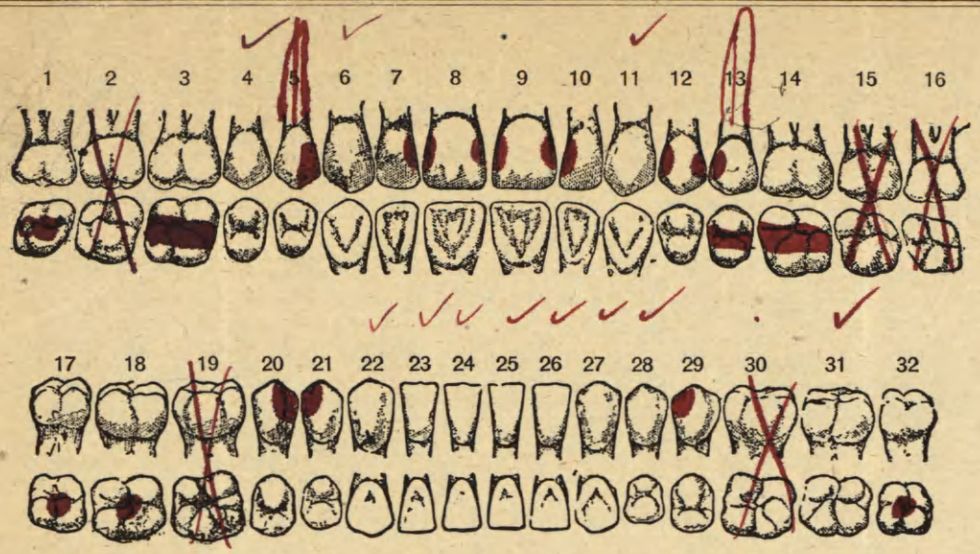
DISTRICT 2

NAME OF SOLDIER Gordeau

RANK Staff

REGIMENT Matron

No.



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	Pyrrhea	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination																						
Sept 16/19			Removed silver filling & Treatment																			
" 17/19			Removed 2 Nerves H/S																			
" 18/19						G.P.																
" 22/19			2 root canals.																			
Oct 11/20			Examination								Dentally fit.									H.J. Hodgins, Capt. A.D.C.		

M.F.B. 465.
200M.—6-18.
1772-30-950.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT M.D.5.

NAME OF SOLDIER Goodeve, Myra Moffatt.

REGIMENT C.A.M.C. RANK Matron. No.

INSTRUCTIONS

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

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

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

	Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination	11/4/19	13 / 1.3 / 5.12 / 13.14 / 16 / 17.18 / 20 / 21.29. / 32		1 / 5						1 / 12	4 / 2,15 / 19. / 31					2 / 8.9				H.S. Fortin Capt.	5.	No treatment required.

M.F.B. 465.
1500m.—1-
177-384

D. [redacted] 1347.

Surname	Christian Name	Reg. No.
GOODEVE	Myra	D.M.S. 10-G-6

Rank: Nursing Sister Unit: C.A.M.C.

MEDICAL BOARD held at	Date	Serial No.
(1) D.M.S.Office	24-10-16	
Other Medical Boards at	Date	Serial No.
(2) D.D.M.S. Office	28-11-16.	
(3)		
(4)		
(5)		

Condition found by Board

General Debility.

Disposition Recommended

(1) Unfit for any service - 5 wks.

(2) Fit for General Service.

(3)

(4)

(5)

PENSIONS & CLAIMS BOARD held at ..... Date .....

Disposition

Remarks

Indicate by a P.T.O. if continued on other side.

H. W. & V., Ld.—7025-16.

Goodeve. M. M.

N/S.tr. C.A.M.C. 1 CSH.

Disem. at Malta. ex Llandovery Castle. 30-9-16.
Embark. " " per Galeka. for
England. 11-10-16.

Debility.

C.L. 6-10-16. 488-2.
24-10-16. 503-2.

A.M.D. 2 DEPT.
Bch. of D.G.M.S. O.M.F.C. London.

REGT'L NO

NAME Goodwe M. M.

H. Q. FILE No. 649-

RANK AND CORPS N/Sr. C.a.M.C. / C.S.H.

FOLLOWS No.

FOLLOWS

CABLE

No. | Date

NATURE OF CASUALTY

L. L. Job 90581—M. & D. 6314.

M. F. W. 42—50M—1-16.
H. Q. 1772-39-893.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
H88 2	Ex H.S. Llandovery Castle		
	Disembarked at Malta	30-9-16	Debility
503 2	Embarked at Malta for	11-10-16	" "
	England per H.S. Galeka		

149.

Name GOODEVE Myra M. *Rank* Str. *Reg. No.*

Unit C.A.M.C. att. 1 C.S.H.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
30-9-16.	Disemb. at Malta ex H.S. "Llandovery Castle"		Debility.	488		
11.10.16	Malta for Hosp. HS Galeka			503		

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

SURNAME. Goodeve R.R.C. L.L. #30450 392-7-1. #2. CARD NO. 1-5-19. D.O. 1037 3/5/19.

CHRISTIAN NAMES Myra M

REGL. No. #1 Stat Hosp RANK Nursing Matron

UNIT C.A.M.C. (Nursing Sisters) Conducting Staff

FORMER CORPS Halifax M.H.

FOLL.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Goodeve, A.S.

RELATIONSHIP TO SOLDIER Father

ADDRESS ~~Dominion Railway Commission~~ 273 Wilbrod St Ottawa, Ont.

Auth. Mr Beard 26-11-17

COUNTRY OF BIRTH Canada

DATE

PLACE OF ATTESTATION Quebec, P.Q.

DATE Sept. 25th 1914

Date of Sailing 22/9/14.

R/C 20-5-18 - 176/1-3

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

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

R/C 28-8-18 196/3

MARRIED SINGLE WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATIO PLACE DATE

Present address

No. Rank N. S. Name Goodeve M.

T. O. S. Unit No 2 General Hospital. C. A. M. C.

M. D. Val.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914 Sept. 16	1914 Oct. 31	N		

UNIT SAILED
OCT 3 1914

No.

RANK Nursing Sister NAME Goodeve, M. M.

T. O. S. UNIT Army Medical Corps, Nursing Service

M. D. O. S.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914 Sept. 23	1914 Oct. 31	✓		

R.R.C. 1st ~~Matron~~ R.O 237. 1.19.1.14 JAN 7 1916

Rank and Name	Goodeve, Myra, M. (RRC 2nd) Nursing Sister.
Regimental No.	Matron
Unit	A.M.C.
Date of enlistment	Sept. 25. 1914.
Place of birth	Chesley Bence, Ont. Can.
Married (Yes or No)	No.
If in Permanent Force	
Promotions or appointments	

Name and Address of Next-of-kin
A.S. Goodeve, (Father)
Dominion Railway ~~Co~~ Commission
Ottawa.

Date and place of discharge
Reason for discharge
Character on discharge

11.12.16 Schiffe 2.1.17

A.F.B. 103

Report Date	From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case. ~~Ref Struck~~	Place	Date	REMARKS Taken from Official Documents
		Detailed for Duty with No 1 C/Hp Bulford Hants		9-11-14	R.O. 133.
		# Appt'd Actg Matron No 1 C/Hosp.		10-11-14	R.O. 237. d/19-11-14.
		NR. 13 Sty Hpl.	Boulogne	—	Reported 10/1/15
		No 1 Can Stat Hosp	France.		NR 3 CO246
		Proceeded to Dardinelles			No 1 Stat Hosp. N.R. 29.4.15
		awarded Royal Red Cross 2nd class			Pt II O.22. "10 Stat Hp Lon Gaz. 3/6/16. B.O. 968
15-10-16	I.C. Stat. H	Sick transfd to Malta & S.O.S. Disembarked at	1st Can H.	25-9-16	Pt II ord. 31.
6-10-16	W.O.	Malta ex. H.S. Haudovery Castle		30-9-16	B. L. 488. Debility
24-10-16	W.O.	Embarked at Malta p/ Eng. per. h.s Galeka.		11/10/15	C. L. 503. Pt II. ord 34. 15/11
23-10-16	D.M.S.	Transfd to C.Alld. C. T.S.		20/10/16	C.O. 1948
27-10-16	D.M.S. G.O.C	Granted Sick leave by Med Bd from 24-10-16 to		28-11-16	C.O. 1977.
30-10-16	C.T.D.	Taken on Strength C.A.M.C. T.D.		20-10-16	D.O. 5632. A.F.B. 103
13-12-16	D.M.S.	Posted to Shorncliffe Mil. Hosp.		2-12-16	B.O. 4064
12.7.17	W.O.	To be Matron C.A.M.C. Serv.		1-1-17	Lon. Gaz 30179 CD. 913. 1 DEC. 1916
12-12-16	Shorncliffe	Taken on Strength		2-12-16	Pt II ord. 179. Pt II ord. 204
31-1-17	C.A.M.C. T.S.	T.O.S.		27.1.17	Pt II ord 31
29-1-17	D.M.S.	Posted to Canc. T.S.		29/1/17	C.O. 142
31-1-17	Schiffe	S.O.S on proceeding overseas		27.1.17	Pt II ord. 31

19 FEB. 1917

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
	Duplicate	S.O.S.			
3/2/17	Dms.	Posted to No 2 Can Gen H		28/1/17	C.O. 141
3.2.17	2C Gen H	S.O.S.		24/1/17	Pt II ord. 9
25.8.17	Do	Granted 14 days leave of absence from.		17.8.17	Pt II Ord 149
21.12.17	do	Granted 14 days leave		15.12.17	Pt II 973
1.1.18	W.O.	Awarded R.R.C. 121.			L.G. 30450. A.F.B. 103. 16 APR. 1918
10-4-18	D.M.S.	Posted to CAMC D from 2 C.G. Hp		6-4-18	C.O. 437
15-4-18	do	~~Posted~~ 2nd to 1669 Hp from Depot	Ceases to be attd.	11.5.18 12-4-18	C.O. 580. C.O. 457
30.5.18	D.M.S.	Mentioned in Despatches			C.O. 687. L.G. 30706 4/28.5.18
18-7-18	CAMC. Cas. Dep. Sec.	T.O.S. from CAMC. 19.	Granted leave in Can on Trans. Duty	26-6-18	Pt II 761 S.O.S. CAMC. R.T.D. Pt II ord 195
14-8-18	4 C.G.H.	attached for duty. Q & R. from CAMC Reg D		14-8-18	Pt II. ord. 38
22-8-18	- do -	Ceases to be att. on proceeding O/Seas to Can		20-8-18	Pt II ord. 140 Cas Dep Pt II ord 95 A.F.B. 103. 29 AUG. 1918
27-8-18	Cas. Dep. Sec.	Ceases Command to 4 Can. Gen. Hosp.		20-8-18	Pt II ord. 95
6-9-18	Cas. Dep. Sec.	S.O.S. on transfer to C.E.F. in Canada for duty		21-8-18	Pt II ord. 104
3-9-18	Hq. O.M.F.C.	S.O.S. on transfer to C.E.F. in Canada for duty		21-8-18	R.O. 4599

SOS 31.10.20

8441

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

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

Sheet No. 2.

L. L. Job 89002.—Req. 6213.

A. S. Goodere—

Name of Soldier Goodere. M. N.S.

Month.	Year.	Cheque No.	Amt.
April	1916	C 813	50 —
May		D 1814	50
June		U 7495	50
July	✓	H 9671	50
Aug.	✓	A 14759	50
Sept.		O 18429	50
Oct.		M 20282	50
Nov.		~~Cancelled~~ ~~B 26021~~	~~50~~
Dec.			
Jan.	1917		
Feb.			
March			
April			
May			
June			
July			
Aug.			
Sept.			
Oct.			
Nov.			
Dec.			
Jan.	1918		
Feb.			
March			
April			
May			
June			
July			

Remarks.

#50.00 #2 Gen. Hosp.

~~#500 Refund Requested. 30/4/17 F.L.~~ (2)
~~& P. M. L. O.S. dated apl 2nd/17. F.L.~~
~~#175.00 Recovery by Stoppage 1/11/16 to 31/5/17~~
~~Extra Pay Act 71 & 1 m-1~~
~~See Notation below for recovery of balance.~~
DM'cn 6/7/17

Pay Stopped Nov. 1/16
per cable Nov. 11/16
C 8805 overpaid #500

D.R.W

Acct overpaid 500.00 A.P. from Jan 1/16 to Oct 31st

Refund will be requested upon receipt of proper authority for same

Cheque for 325.00 recovered per C. S. 2355. R. Masterton 5/7/17.

Writing A.S.D.M. for Authy amount and notice to return payment A.P. - DM'cn 6/7/17

M. F. W. rend. 9-8-18
A.P.P. 750. N. S. retd to Canada on leave

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.				

29370 THE MORTIMER SYSTEMS,
OTTAWA, CANADA

Ent

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

To Whom Goodeve, A. S.

Address Supreme Railway Commission
Ottawa, Ont.

By Whom Assigned Goodeve, M.

Regtl. No.

Rank N. S.

Corps 2 Genl. Hospl

Rate 50 00

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.		E		✓
Oct.		E 6917	50	
Nov.		B 1523	50	
Dec.		F. 2663	50	
Jan.	1915	E 3861	50	
Feb.		D 5776	50	
March		b 6255	50	a/c Stopped Nov. 1/16
Apl.		B 7570	50	per cable Nov. 11/16 Pay 805
May		a 8390	50	over paid $500
June		J 3687	50	(recover from Assignee)
July		J 4661	50	
Aug.		H 4663	50	
Sept.		G 13069	50	
Oct.		H 12392	50	
Nov.		D 15147	50	
Dec.		C 15452	50	
Jan.	1916	B 16237	50	
Feb.		A 18438	50	
March		J 14321	50	

E. M. Hambley - Dec. Sec'd.

M. F. W. 41
1 0M—7-16
1772-39 889.

Name Goodeve M M Mabon

392-7-1

Regimental No.

Unit C.A.M.C.

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin H.P. ~~392-7-163~~
c/o A. S. Goodeve
Dominion Railway Commissioner
Leave May 25 to June 5/918

Date and place discharged Returning first sailing

Reason for discharge MD 3

Character on discharge

Mauretania 13/8 arr 20/8 Pub. Exp. 2. L.P.C. clear @ 31.5.18

5b 5351—M. & D. 6880.

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
										350	27/5/18	50 00				
Dr Balance								150 00	150 00	454	13/6/18	100 00			150 00	H.P. Casualty Branch
Returned overseas 25-6-18 vide folio 6																
Returned to England. and L.P.C.														150 00		as above
Ret. " " vide folio 150 00																
Returned to Canada. Agentoned 21/8/18. - 28/8/18 P.E. Duty D.P.A.																
1 L.P.C. clear 31-7-18																
Duty at Quebec, Mil. Hosp. 18-9-18. R.O. 1079																
Refunded by Cheque No 9492 Dep Cas Br. 9-10-18								150 00		687	31/8/18	150 00		150 00		H.P. 31-8-18- amended L.P.C
L.P.C. & M.D. 3 folios 68-70								5 00					5 00			
								*100 00								*This outfit allowance
Referred to M.D. 3 27/12/18													100 00			

Name.....

M. F. W. 41
1 0M—7-16
1772-39 889.

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

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

29247 THE MORTIMER SYSTEMS
OTTAWA, CANADA

NAME Goodeve, H.C.

Regimental No.

Unit Nursing Sister. Acting Matron

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					
73/9	31/10/14	39	2	78	39	6d	73 40		101 40			51 40	50		101 40	
1/11/14	30/11/14	30		60	30		18		78			78	50		78	
1/12/14	31/12/14	30		62	31		18 60		80 60			30 60	50		80 60	
1/1/15	31/1/15	31		62	31		18 60		80 60			30 60	50		80 60	
1/2/15	28/2/15	28		56	28		16 80		72 80			72 80	50		72 80	
1/3/15	31/3/15	31		62	31		18 60		80 60			55 60	25		80 60	

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

AUDITOR | PAYMASTER

M. OR S. S

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

REGT. NO. ..... RANK N.S. NAME (IN FULL) Matron GOODEVE M.M.

NEXT OF KIN ____ RELATIONSHIP ____

ADDRESS ____

IS SEPARATION ALLOWANCE PAID? ____ DATE EFFECTIVE ____

TO WHOM PAID ____ RELATIONSHIP ____

ADDRESS ____

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Reg 3.00		
Field 1.00		
Subs 1.20		

ORIGINAL UNIT C.E.F. AMC — IF IN P.F. WHAT UNIT? ____ (BLOCK LETTERS SURNAME FIRST)

PLACE OF ATTESTATION ____ TRANSFERRED TO ____ DATE ____ AUTHORITY ____

DATE OF ATTESTATION 31-7-13 — TRANSFERRED TO M.H. #2 — DATE 30-4-19 — AUTHORITY 93/96 / 3887

ASSIGNED PAY $ ____ DATE EFFECTIVE ____

PAYABLE TO ____ RELATIONSHIP ____ ANY CHANGE IN ASSIGNEE OR ADDRESS ____

ADDRESS ____

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE ____ EFFECTIVE ____

DISCHARGED PLACE ____ DATE ____ REASON ____ AUTHORITY ____ IF ENTITLED TO POST DISCHARGE PAY ____

MONTH 1919	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.			TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	COL. NO. 1 DATE	COL. NO. 2 NO.	COL. NO. 2 DATE	COL. NO. 3 NO.	COL. NO. 3 DATE	CASH PAYMENTS COL. NO. 1 $	COL. NO. 1 C.	COL. NO. 2 $	COL. NO. 2 C.	COL. NO. 3 $	COL. NO. 3 C.	ASSIGNED PAY $	ASSIGNED PAY C.	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C.	OTHER CHARGES $	OTHER CHARGES C.			TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					Transferred from March
April																																					Transferred to No 2
April	30	4.00	120	00	51	00			171	00	2060	7									171	00											171	00					H.D. 392-7-1 No 5-17 G 391
																																					Transferred to No 2
																																					Part H.D. 7

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-89-1390.

AUDITOR | PAYMASTER

M. OR S. | PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES | REGT. No. | RANK Matron NAME (IN FULL) Goodeve M. M. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

C.A.M.C., M.D. No. 2

ORIGINAL UNIT C.E.F. | IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 31-7-13. | TRANSFERRED TO JUL 1 - 1920 | DATE | AUTHORITY

ASSIGNED PAY $ | DATE EFFECTIVE

No. 2 DETACHMENT, C.E.F. 56

PAYABLE TO | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED PLACE Ypr. DATE 31.10.20 REASON Demob AUTHORITY Memo 96 IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.			TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.			TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	BALANCE CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					
April	30	4	120		15				135				S320164 AR9	10/Mar20	S320547	27/4			65		70										135						
May	31	4 -	124	-	15	50			139	50	323946	32-12.5	324057	44-26.5			65	-	74	50											139	50					
June	30	4	120		15	-			135	-	324256	167-11.6			334136	63 25/6	65	-			70										135	-					
July	31	4.00	124	-	15	50			139	50	10/7	22 5/7					65	-	74	50											139	50					
Aug.	31	4.00	124	-	35	70			167	20	11/8	25 4/6					140	-	27	20											167	20					Granted leave of absence from 16-8-20 to 5-9-20 inc. Auth. No. 411 Memo 25 7-50 M.A 1-8-20 to 15-8-20 35.70 Subs 16-8-20 to 5-9-20.
Sept	30	4.00	120	-	12	50			132	50							65	-	67	50											132	50					
Oct	31	4.00	124		15	50			139	50							65	-	74	50											139	50					
			856	-	132	20			988	20							465	-	383	20	100	-									988	20					

CAPTAIN
PAYMASTER, No. 2 DETACHMENT, C.E.F.

		WSG		Acquittance roll No		Cheque No		Other Charges	WSG			Amount due Soldier		
183 days	H	732 / 59	732	AR 135A	Nov-10	S92397			244 / 183		244	488		m.t.w. 259 on file.
				170A	Dec 1	S92599			124		368	364		
				192 a	21/1/20	S93299	30/1		120		488	244		
				213A	2/2/20	S318584			124		612	120		
				233 A	1/3/20	S31402			120		732			
			732						732		732			

200M-3-19.—L. — 5878—... & L. 9985.
M. F. W. 2:96.
1772-39-1390.

PB 1-11-19

AUDITOR | PAYMASTER

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

M. OR S. | REGT. No. | RANK Matron | NAME (IN FULL) GOODEVE M. M. (BLOCK LETTERS SURNAME FIRST)

S.B. issued.

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? No | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
From M.D.5	1-5-19	MDHQ 00103

C.A.M.C., M.D. No. 2

ORIGINAL UNIT C.E.F. | IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 31-7-13 | TRANSFERRED TO | DATE JUL 1 - 1920 | AUTHORITY No. 2 DETACHMENT C.E.F. 56

ASSIGNED PAY $ | DATE EFFECTIVE

PAYABLE TO | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE Toronto | DATE 31/10/20 | REASON Demob | AUTHORITY Memo O.C. | IF ENTITLED TO POST DISCHARGE PAY

BALANCE FROM PREVIOUS ACCOUNT

MONTH	3 PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.			TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.			TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
																																						L.P.C. from M.D.5 Nil Balance
May	31	4.00	124		15	50			139	50	3	03	X		1	A43	60				79	50									139	50					15.50 M.A. May
June	30		120		15				135		2	A53			S68 573 ~~A38 256~~ ~~A39 296~~		60				75										135						Ma June 15.00
July	31		124		15	50			139	50	S69 914 25 A3 10-7				S70 396 84A 24-7		70				69	50									139	50					15.50 MA July
Aug	31		124 ~~93~~		15	50			139	50 ~~108~~ 50	S70 870 97A 13-8				S71 109 106 A28-8		65				74	50									139	50					15.50 MA 1-31 Aug
Sept.	30		120		15				135		S71 428 ~~114A~~ ~~H~~ 11-9				S71 861 13A 25-9		70				65										135						15 MA 1-30 Sept
Oct.	31	4.00	124		15	50			139	50	S91 106 134A 10-10				S91 014 144A 29-10		70				69	50									139	50					15.50 MA 1-31 Oct
Nov	30	4.00	120		15	96 60			144	60					S91 894 148A 27/11						143	40							1	20	144	60					L.O.A. 3 to 23 Nov 21 HQ Auth HQ 274 L.O.A. Amended to Read to 10 Nov HQ 296 21 Nov 15 MA 1-30 Nov - 9.60 Subs less MA 3-10 Nov L.O.A. Amended to Read to 9 Nov 21 HQ Auth HQ 299 dtd 9/1/20 1 Day Subs less MA
Dec.	31		124		15	50			139	50	S92 737 1808 15/12				S93 233 185A 22/12		70				69	50									139	50					15.50 MA 1-31 Dec
						25				25																						25					xmas all
1920. Jan	31	4.00	124		15	50			139	50	S93 151 201A 15/1				S93 938 22A 30/1		65				74	50									139	50					15.50 MA - 1-31 JAN.
Feb.	29	4	116		14	50			130	50	S94 741 232A 16/2				S95 926 231A 27/2		65				65	50									130	50					14.50 MA 1-29 Feb.
March	31	4	124		15	50			139	50	S95 193 ~~Y2~~ 234 16/3				S95 995 ~~15A~~ 27/3		65				74	50									139	50					

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1300.

NAME Goodeve. Myra ✓ Sister.

DATE OF APPOINTMENT

MARRIED (YES OR NO)

NEXT OF KIN:— NAME A.S. Goodeve

ADDRESS Dom Rly Comm Ottawa

DATE NON-EFFECTIVE AND CAUSE

PERIOD From 1915	To	No. of Days	Regtl. Rate	PAY Amount of Regimental	Command	Adjutant	Cr. from Prev. Account	Total Pay	Rate of Field Allowance	Amount Field Allow
1/4	30/4	30	✓	60				60	60	18
1/5	31/5	31		62				62		18 6
1/6	30/6	30		60				60		18.
1/7	31/7	31		62				62		18
1/8	31/8	31		62				62		18
1/9	30/9	30		60				60		18
1/10	31/10	31		62				62		18 6
1/11	30/11	30		60				60		18
1/12 1911	31/12	31		62				62		18 6
1/1	31/1	31		62				62		18 6
1/2	28/2	29		58				58		14
1/3	31/3	31		62				62		18

366 days @ 3.60 = 1317.60
59 " missing 59.00
1376.60
300.00
200.43
876.17
1376.60

Ass Pay
Debits
Deposits

DATE 1915		CHEQUE No.	PARTICULARS
August	18	171.	Indemnification. Kit lost on active Service 15 6/15

UNIT Nursing Sisters. No 1. C. Stat H. Mudros.

ASSIGNED PAY:—

MONTHLY AMOUNT ~~$50.00~~ to 25.00

TO WHOM PAYABLE Next of kin.

1915-16

BANK IN WHICH PAY & ALLOWANCES DEPOSITED Bank of Montreal.

WANCES			TOTAL PAY AND ALLOWANCES	ASSIGNED PAY	SUNDRY DEDUCTIONS	NET P. A.	PAID IN CASH	DEPOSITED IN BANK	CARRIED FORWARD	REMARKS
ESSING	SUBSISTENCE	TOTAL								
		79	139	30.		109	Balance	114		Incl Incl
		49 60	111 60	25		86 60		86 60		
		48.	108	25.	59.	24.		24		o/s Mess.
	1° 28	77 60	139 60	25		114 60		114 60		Messing allce. Overcharged refund on June Pay Lists
		49 60	111 60	25	48 64	34 93		34 93		Adv. by C.L.M. Proc. to Dar'nelles.
		48	108	25		25 TOTAL DEBITS		83	17-1-1	
		49 60	111 60	25		25	86 60	86 60		
		48	108	25		25		83		
							13.		13.	(advances) Subs. aboard SS Asturias to Alexandria. 13 days @ 1 per d (Adm.) (Co 1413).
		49 60	111 60	25	13	38. —		73 60		
		49 60	111 60	25	(1) 6-44 (2) 24-33 (3) 24-33 (4) 24-33 (5) 36	25		86 60		(1) Miss G. Netherwood (2) Sister Blood (3) Sister Craddock (4) Sister Peak (5) Dr Balfour (V03775) (V03777) (V03779) (V03781)
		46 40	104 40	25.		104 46			-36	
		49 60	111 60	25		25 36		86 24		
			300		200.43			876.17		

ORY PAYMENTS

	AMOUNT					REMARKS
	$	C.	£	S.	D.	
	48	91	10	1	0	24 25 12 5 4 6 24 1 25 7 54

P—15.

ASSIGNED PAY. **UNIT.**

NAME OF DATE AUTH

Beneficiary A. L. Goodeve No 1 C. S. H.

Address Dom Rly Comm
Ottawa

Amount. $ ~~25.00~~ Cancelled 1/4/16.

Separation Allowance issued. Yes or No. Leave 24/10/16 - 28/11/16 DN

1916-17

DATE 1916	PARTICULARS		CK. NO.
apl 24	A.P. Can		
	Pay apl (R)		
		Bank	
may 22	May Pay		
	A.P. Can		
		Bank	
June 19	Pay June (R)		
20	A.P. Can		
		Bank	3874
July 17	A.P. Can		
20	Pay July (R)		
25		Bank	4997
Aug 16	A.P. Can		
17	Pay Aug (R)		
23		Bank	7299
Sept 20	Sept Pay (R)		
20	A.P. Can		
25		Bank	9510
Oct 21	A.P. Can		
23	Pay Oct (R)		
27		Bank	11000
Nov 16	A.P. Can		
17	Pay Nov (R)		
22	Ass. Pay Pd in Can. d 50 pm Chgd a 25 pm fr 1 3/15 - 31 10/16 V04102		Ass. P Canada
24		Bank	

Crd ford to new sheet

Sheet 1.

UNIT. NAME OF DATE AUTHORITY

RANK. DATE AUTHORITY

NAME.

No 1 C. S. H. — Nursing Sister

Name Goodeve
Initials Myra
Bank Bofm.

6.

Leave 24/10/16 - 28/11/16 DMS. 1977. 27/10/16

S	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case	INITIALS
				25.			
		108			83		
Bank			83				
		111 60					
				25	86 60		
Bank			86 60				
		108 ..					
				25 .			
Bank	3874		83				
				25			
R)		111 60					
Bank	4997		86 60				
				25			
R)		111 60					
Bank	7299		86 60				
		108 ..					
				25			
Bank	9510		83				
				25			
		111 60					
Bank	11000		86 60				
				25			
		108					
on fr 1/3/15 - 31/10/16 V04102 Ass't Canada			500 ..				
Bank			83		D 500		

new sheet

D appears over draft until further inclusion ne need.

FORM P. 15. H.W.V.Ld.—3717-18.
12519—16M—1-3-18

ASSIGNED PAY.

UNIT.

NAME OF

RATE OF P. AND A.

Beneficiary

Address

Amount. $

Separation Allowance issued. Yes or No.....

Ko 1 b S H

Pay 3.. pd

F.A. .75.

Messing/ xx.

Adjutant General Quebec

S.O.S 21/8/18 Do Canada

1918-19

DATE 1918	PARTICULARS	CK. NO.	CR.
apl 20	apl Pay R		142 50
24	Bank	1187 ~~943~~	
May 10	Adv May P & A. Cash	1818	
	May Pay (R)		147 25
21	Trav allce. 5-6 4/15: 10 4/15	2358	
June	June Pay (R)		142 50
July	July Pay R		147 25
25	Bal June July P a Cash	5569	
29	Sick Leave 20 5/18 - 25 6/18 a/c L P b.	5170	
Aug 8	Mess while on transport duty to Can at Pub Exp 13-20 5/18 + 25 6/18-15 2/18	V 055	
	✓ Adv in Can a/c L P b	V 054	
Aug	Aug Pay R		147 25
24	Bank	7258	
Sept 13	Overct. P & A Aug/18 L P C 6 31 7/18 b.f. P C V. 646		
14	Trav allce. 25-26 6/15	7154	
19	Aug P a dep. in Error Rec. fr. B. of Mtl. Trf. Sgt. L 30-5-1 Cash. Ref. V. 213		147 25
19	Trav. Allce 25-26 6/18 (L 10-6) Cred. to Pay Yc Pmc. 7184 Gl Yc V. 188		5
" 30	Ct. Bal. chgd. to Can. V. 3182		

UNIT. NAME OF: Hosp S#

RANK. RATE OF P. AND A.: Pay 2.00 pd; F.A. .75; Messing/ xx.

DATE AUTHORITY: Matron.

NAME.

Name Goodeve.
Initials Myra.
Bank of Montreal Trafalgar Sq

Additional Qualifications allowed 1/8 $ 100.00
S.O.S 21/8/18 To Canada for duty H.Q.R.O. H899 d/3-9-18

8-19

CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
	142 50				transport daily to Can Exp to 31/8/18	
Bank 1187 ~~943~~		142 50		0		
Cash 1818		147 25			Tra to Le cancels	
	147 25			0	forwd London return	
2358					4-10-0 $21.90	
	142 50			142 50	25/7/18 2 fold $ 150.00 qdrs in lieu	
	147 25			289 75	allce. 29.00 for Mess which on transport	
					at Sub. Exp. 13-20 5/18 - 25 5/18 - 15 7/18	
Cash 5569		110 75		179 00	Dep Tra 179.00 in respect of	
6/18 5170					£5.6.5 25.90	
ant £ P.B.						
Exp 13-20 5/18 + 25 5/18 - 15 7/18 V055		29.00		0	Exp to Mess	
P.B V05H		150 00		0	£ P.B to 31/7/18	
	147 25.			0	Tpr to Nt Ledger	
Bank 7258		147 25		0	From Ledger & to £ 12.5 9/18	
7/8 b.f. P.B° V. 646		147 25	~~147 25~~	147 25	$	
7154					5-0-0 1-0-7	
Traf. Sqr. £30-5-1 Cash Ref. No. 213	147 25				16/9/18 Amended £ P.B to	
& Yc PMC. 7184 Gl Yc V. 188	5			5	to $ 5.00 to	
No. 3182		5				

5/8/18 Ottawa advised the Pay additional Credit allce of $ 100.00 See Letter on file 11-4-1

FORM P. 15.
12519—16M—1-3-18 H.W.V.Ld.—3717-18.

ASSIGNED PAY.

UNIT.

NAME OF

RATE OF P. AND A.

RANK.

DATE

Beneficiary

Address

Amount. $

Separation Allowance issued. Yes or No.....

Pay

F.A.

Messing

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BAL

ND A.	RANK. DATE	AUTHORITY	NAME.
			Name Initials Bank

CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS

FORM P.15
2227—10M—1/1/17

ASSIGNED PAY.

UNIT.

RANK

NAME OF | DATE | AUTHORITY

Beneficiary — No 1 C.S.H — Pay $3.00 pd 7 a .75 mess 1.00

Address

Amount. $

Separation Allowance issued. Yes or No.....

DATE	PARTICULARS	CK. NO.	CR.		DR.
1917					
april 1	Dr Balance forward f. 31/3/17.				
21	april Pay. R.		108		
26	Bank	3003			83
May 22	may Pay. R.		111	60	
25	Bank	5986			86
June 14.	June Pay. (R)		108		
22	Bank.	9004	0		83
July 19.	July Pay. (R)		147	25	
" 14.	Promoted Matron 1/7. Auth D.G. 206, 2/7. Vr. 5931. Diff: m Pte p 1/7-30/9/17. 181 days @ $1.15		208	15	
	Bank.	11106			208
" 20.	Bal of payment Assigned Pay as at May 31/17, record from Assignee Vr Auth Ottawa cable T 5010. 5/7/17. File 11-G-1.	338.	325.		
24	Bank.	13092			172
Aug. 18	Aug. Pay. (R)		147	25	
22.	Bank.	17361			147
Sept 17	Sept Pay (R)		142	50	
12	~~A. P. Bawada~~ :				
21	Bank	21863			142.
Oct 9	October Pay — (R)		147	25	
20	Bank	26074			147
Nov. 16	November Pay R.		142.	50	
20	Bank.	30763			142.
26	Mess accct. 1/8/15 - 31/3/16	9405			
Dec 7	Dec Pay (R)		147	25	
14	Bank	35096			147

carried for.

E OF	DATE	AUTHORITY	RANK.	DATE	AUTHORITY	NAME.
S.H		Pay $3.00 pd Fa .75 Mess 1.00	~~N/S~~ Matron.			Name Goodere Initials Myra Bank of Montreal Trafalgar Sq 1/18

1917-18

	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
					Dr 375	To be recovered at the rate of 25.00 per Month Lib 11-G-1 Original overdraft $500.00	
		108					
ank	3003		83		Dr 350		
		111 60					
nk	5986		86 60		Dr 325		
		108					
Bank.	9004		83		Dr 300		
		147 25					
Apr 17-30/19 Daily @ $1.15 Bank.	11106	208 15	208 16				
Engineer Vm Lib 11-G-1 Bank.	338. 13092	325.	172 25				
		147 25					
Bank.	17361		147 25				
		142. 50			142. 50		
Bank	21863		142. 50				
		147 25					
Bank	26074		147 25				
		142. 50					
Bank.	30763 9405		142. 50			£19-16-3	
		147 25					
Bank	35096		147 25				
r.							

FORM P.15
2227—10M—1/1/17

ASSIGNED PAY.

UNIT.

NAME OF | DATE | AUTHORITY

Pay $3 pd
Fa 75
Mess 1.00

RANK.

DATE | AUTHORITY

Matron

Beneficiary

Address

Amount. $

Separation Allowance issued. Yes or No.....

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE
Jan	Jan Pay (R)		147 25			
22	A. P. ~~Loan~~	Bank	39501	147 25		
Feb 14	Feb Pay (R)		133 00			
20		Bank	40996	133 00		
Mar 12	March Pay (R)		147 25			
22		Bank		147 25		

RANK. NAME.

DATE AUTHORITY

Matron

Name Goodeve.
Initials Myra.
Bank of Montreal
Trafalgar Sq 1/18

DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
	147 25			
	133 00			
	147 25			

P—15.

ASSIGNED PAY.

UNIT.

NAME OF | DATE | AUTHORITY

RA

Beneficiary

Address

Amount. $

Separation Allowance issued. Yes or No.

1916-17

DATE	PARTICULARS	CK. NO.	CR.	
1916				
	Brot ford from old sheet			
Dec 11	A.P. Can			
12	Pay Dec		111 60	
18	Bank			8
1917				
Jan 23	Pay Jan		111 60	
23	A.P. Nov & Dec chgd in error		50	
25	Bank			8
Feb 22	Pay Feb		100 80	
22	Bank			7
March 20	March Pay R.		111 60	
23	Bank	24818		8

Sheet 2.

ATE	AUTHORITY	RANK.	DATE	AUTHORITY	NAME.
		M/S			Name Goodeve Initials Mgrd Bank of Montreal

CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case	INITIALS
eet				Dr 500.	Not to be collected until instructed	
			25			
	111 60					
		86 60		Dr 500	File 11-G-1 Recover $500 at rate of $25 per mn. from Nov 1/16 AWB 20-12-16	
	111 60 50					
		86 60		Dr 425	Reduce $50 to $25 Jan	
	100 80					
		75 80		Dr 400		
	111 60					
24818		86 60		Dr 375		

UNIT

ASSIGNED PAY:—

MONTHLY AMOUNT

TO WHOM PAYABLE

BANK IN WHICH PAY & ALLOWANCES DEPOSITED

PERIOD		No. of Days	Regtl. Rate	PAY				
From	To			Amount of Regimental	Command	Adjutant	Cr. from Prev. Account	TOTAL

DATE	CHEQUE NO.

NAME

DATE OF APPOINT

MARRIED (YES OR

NEXT OF KIN:—

DATE NON-EFFECT

EPOSITED

AND CAU

PAY				Rate of Field Allowance	ALLOWANCES					TOT
Command	Adjutant	Cr. from Prev. Account	TOTAL PAY		Amount of Field Allowance	P. F. Allowance	Messing	Subsistence	TOTAL	ALLO

SUNDRY PAYMENTS

PARTICULARS