

ATTESTATION PAPER.

No. 2203864

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... *Johnston*
- 1a. What are your Christian names?..... *Andrew Abraham*
- 1b. What is your present address?..... *Telegraph Creek B.C.*
- 2. In what Town, Township or Parish, and in what Country were you born?..... *Cape Breton, Nova Scotia.*
- 3. What is the name of your next-of-kin?..... *Kellie M Johnston*
- 4. What is the address of your next-of-kin?..... *Winchester Hospital, Massachusetts, U.S.*
- 4a. What is the relationship of your next-of-kin?..... *Sister*
- 5. What is the date of your birth?..... *Dec 21, 1870*
- 6. What is your Trade or Calling?..... *Logger*
- 7. Are you married?..... *no*
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... *Yes*
- 9. Do you now belong to the Active Militia?..... *no*
- 10. Have you ever served in any Military Force?..... *no*  
If so, state particulars of former Service.
- 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*
- 13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? .. *no*
- 14. If so, what was the nature of the disability? .. *no*
- 15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected? .. *no*
- 16. If so, what was the reason?..... *no*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Andrew Abraham Johnston*, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the Canadian Over-Seas Expeditionary Force, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Date *May 29<sup>d</sup>* 1917 *Andrew A Johnston* (Signature of Recruit)  
*Richard Simpson* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Andrew Abraham Johnston*, do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Date *May 29<sup>d</sup>* 1917 *Andrew A Johnston* (Signature of Recruit)  
*Richard Simpson* (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath

before me, at *Victoria B.C.* this *29* day of *May* 1917.

*W. H. Bishop* (Signature of Justice)

# Description of *Andrew Abraham Johnston* on Enlistment.

Apparent Age *46* years *5* months.  
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height ..... *5* ft. *10* ins.

Chest measurement { Girth when fully expanded..... *41* ins.  
 Range of expansion..... *5* ins.

Complexion ..... *Fresh*

Eyes ..... *Blue*

Hair ..... *Fair*

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

Vision R: D..... *20* L: D..... *20*  
 Hearing R..... *un*

## 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..... *May 29* ..... 191*7*.

Place..... *Victoria B.C.*

*J. D. Hunter*  
 Lieut. Col.  
 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:—

MOBILIZATION CENTRE  
 VICTORIA

Pres. *[Signature]*  
 Member *[Signature]*  
 Member *[Signature]*

## CERTIFICATE OF OFFICER COMMANDING UNIT.

*Andrew Abraham Johnston* 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.

Date..... *30th May* ..... 191*7* ..... *[Signature]* (Signature of Officer)  
*Major for the moment*

**FORESTRY DEPOT C.E.F.**  
 VANCOUVER, B.C.

REGIMENTAL DOCUMENTS

NAME JOHNSTON, ANDREW ABRAHAM

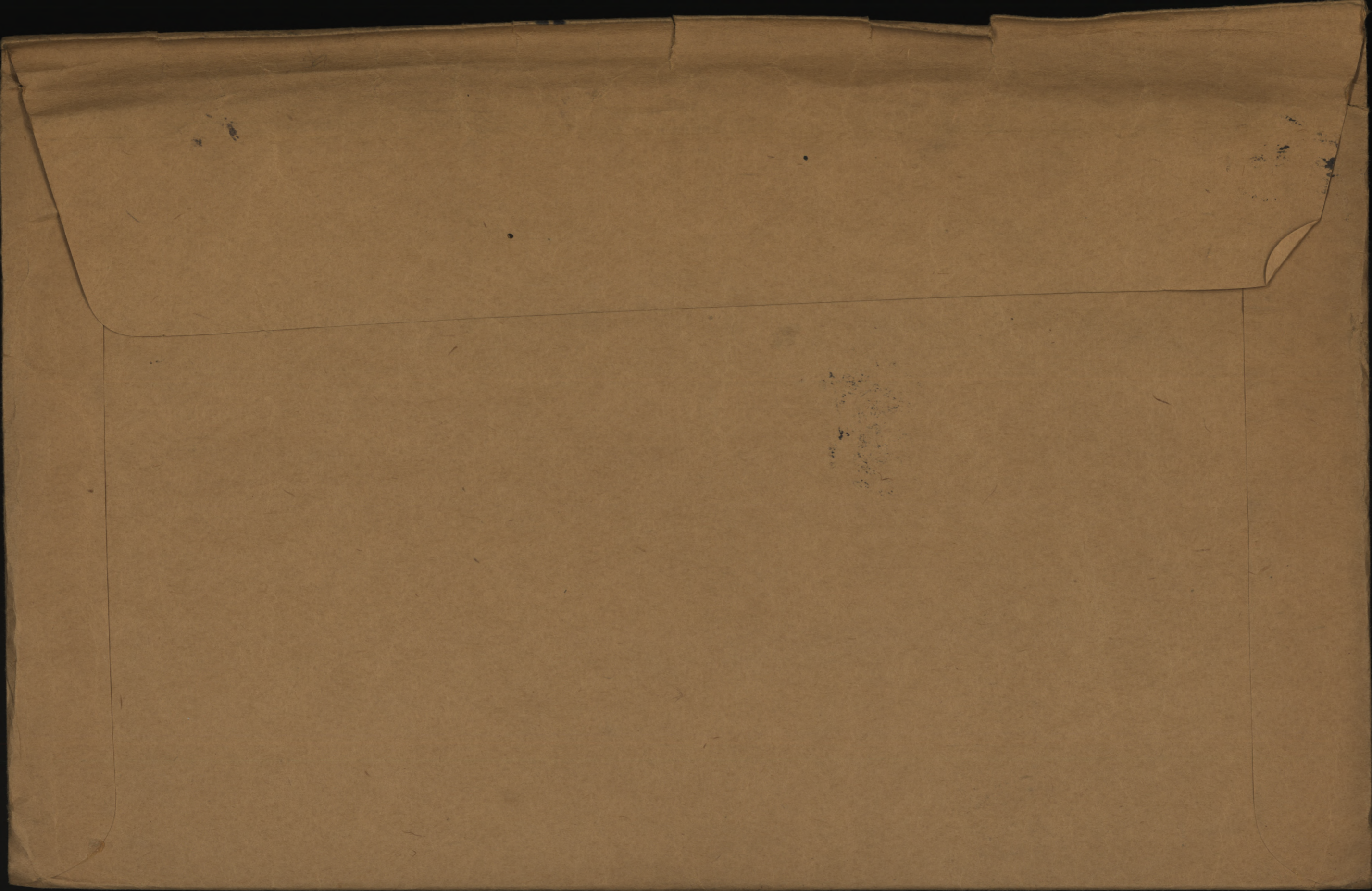
REGT. NO. 2203864 UNIT C.7.C.

H. Q. FILE NO. \_\_\_\_\_

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
2 ATTENTION PAPER (M.F.W. 23, 133, or 51)					<del>DEATH</del>
1 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
TRAINING HISTORY SHEET (M.F.W. 113)					
1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1 REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1 COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)				08633	DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					Category
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Dem.
1 MEDICAL EXAMINATION (M.F.W. 129)					
1 TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)					
1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1 Dent. Certif.					
3 F.C.B. 3					
1 m.f.w. 67					
1 Doc 17					
1 R 122					
1 Pay cards					

M

H



To be made out in duplicate.

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.

FORESTRY DEPOT C.E.F.  
VANCOUVER, B. C. CEF

- (1) Name of Overseas Unit which Soldier joins.....
- (2) Regimental Number..... 2203864
- (3) Full Name of Soldier..... Pte Johnston, Andrew, Abraham
- (4) Place of Birth..... Cape Breton, Nova Scotia
- (5) Are you married, or not?..... No
- (6) If married, state,
  - (a) Full name of your wife..... No
  - (b) Present Postal Address..... Telegraph Creek  
B-6
- (7) Are you a widower?..... No
- (8) Have you any children?.....

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

Also their names and ages.....

(9) Is your Father alive?..... *No* .....

If so, state name and address .....

(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.

*Sister, Nellie M. Johnston  
Winchester Hospital  
Winchester Mass U.S.A.*

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

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

*[Signature]*  
.....  
Officer Commanding.

Date..... *June 2<sup>nd</sup> 1917* .....

**FORESTRY DEPOT C. E. F.**  
**VANCOUVER, B. C.**

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block Letters) JOHNSTON. A.

REGIMENT 18 Fes RANK Sgt No. 2203864

Date of Examination in England 17-2-19 Date of Examination in France \_\_\_\_\_

1. This form will be made out for each individual at the time of Demobilization in England or France.

2. Figures as per chart will be used to designate teeth concerned.

3. In reference to Partial Dentures the numbers of teeth thereon will be stated.



PRESENT DENTAL REQUIREMENTS

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

HAS HE EVER REFUSED DENTAL TREATMENT? No

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

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

Signature of Dental Officer *J. M. M. [Signature]*

THE UNIVERSITY OF CHICAGO  
DEPARTMENT OF CHEMISTRY

JOHN E. HAYES

1900

RECEIVED  
JAN 10 1900  
DEPARTMENT OF CHEMISTRY  
UNIVERSITY OF CHICAGO



# CANADIAN EXPEDITIONARY FORCE

## DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 2203864 (Rank) Sgt.

Name (in full) Andrew Abraham Johnston enlisted in  
 the Canadian Forestry Corps  
 CANADIAN EXPEDITIONARY FORCE at Victoria B.C. on the 29<sup>th</sup>  
 day of May 19 17

HE served in France

and is now discharged from the service by reason of Demobilization.  
~~Medical Unfitness.~~

---

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

Age <u>48 yrs. 3 mos.</u>	Marks or Scars _____
Height <u>5' 10"</u>	_____
Complexion <u>Fresh</u>	_____
Eyes <u>Blue</u>	_____
Hair <u>fair</u>	_____

A. A. Johnston  
 Signature of Soldier

Cecil W. Roberts  
 Issuing Officer

Bray N  
 Rank

Date of Discharge April 3<sup>rd</sup> 1919

Date April 3<sup>rd</sup> 1919

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 2293764 (Rank) 1st Lt

Name (in full) William Herbert enlisted in

the Canadian Expeditionary Force

on the 27th day of March 1917

at London

and is now discharged from the service by reason of

Medical Unfitness

THE DESCRIPTION OR THIS SOLDIER ON THE DATE below is as follows:—

Age	<u>37 yrs 3 mos</u>
Height	<u>5' 10"</u>
Complexion	<u>Dark</u>
Eyes	<u>Blue</u>
Hair	<u>Brown</u>
Mark or Scars	

Date of Discharge 1917

Signature of Soldier W. H. Herbert

Rank 1st Lt

Issuing Officer W. H. Herbert

Date 1917

N.B. - As duplicates of this Certificate will be sent, any person finding same is requested to forward it in an unopened envelope to the Secretary, Military Control, Ottawa, Canada.

2203864  
**MEDICAL HISTORY SHEET**

FORESTRY DEPOT C. E. F.  
 VANCOUVER, B. C.  
 RAILWAY CONSTRUCTION & FORESTRY DEPOT

Surname Johnston Christian Name Andrew Abraham

Examined { on - 29 day of May 1917 Approved by J. D. Hunter  
 at Victoria Rank Lieut. Am. M.O.  
 Birthplace { City or Town Cape Breton  
 County Nova Scotia

Apparent age 46  
 Trade or occupation Logger  
 Height 5 feet 10 Inches  
 Weight 194 lbs.

Chest measurement { Minimum 36 inches  
 Maximum expansion 41 inches

Physical development Good  
 Small-pox Marks

Vaccination Marks { Arm Right Left  
 Number 2

When Vaccinated last 1909

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Slight Varicella lesion  
 Vision R: D...  
 Hearing R: D...

Enlisted on 29<sup>th</sup> day of May 1917 at Victoria BC

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	R.C. + F. Depot Vancouver	2203864		29-5-17
Transferred to	R.C. + F. Depot Ottawa CFC	2203864		10-7-17

**EXAMINED OR DISCHARGED BY A MEDICAL BOARD**

STATION	DATE	DISEASE	RESULT
<u>VICTORIA, B. C.</u>	<u>MAY 30 1917</u> <u>JUN 28 1917</u>	<u>B2 Fit</u>	<u>J. Madernst Capt</u> <u>Plew Luman Lt</u>

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.

J.M.C.



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

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 2203864 Rank Sgt Surname JOHNSTON  
(Given name in full)  
ANDREW. A.  
 Unit or Corps 18 RES Birthplace CAPE BRETON N.S.

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

**1. GENERAL DESCRIPTION:**

Physique good Weight 180 est. lbs. Height 5 ft. 11 in. Colour of Eyes Blue  
 Nutrition good  
 Pulse normal  
 Condition of arteries normal  
 Vision Rt. normal Left normal  
 Hearing (conversational voice) Rt. 20 ft.  
 Left 20 ft.

Identification marks, scars, or deformities.  
 (Give cause and date of origin.)

nil.

Opinion as to general health and physical condition good

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

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

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

Had gonorrhoea about 12 yrs ago. good recovery

# EXAMINATIONS.

## THIS SECTION FOR USE OVERSEAS—

Examined at Seaford.....(Overseas)

Date 18-2-49..... Signed A.E. Raleigh Capt......M.O.

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

Signature A.A. Johnston.....

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

## THIS SECTION FOR USE IN CANADA—

Examined at.....(Canada)

Date ..... Signed .....M.O.

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

Signature .....

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

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

[OVER]

WSR

NO 4 OTTAWA FOR DFT Fill in only. Unit, Number, Rank and Name.

M. F. W. 54. (A. F. B. 103.)  
350M.-5-16  
H. Q. 1772-39-920.

# Casualty Form - Active Service.

RAILWAY CONSTRUCTION & FORESTRY DEPARTMENT  
VANCOUVER, B. C.

Unit, Regiment or Corps

Regimental No. 2203864 Rank Private Name Johnston, Andrew Abraham  
C. E. F.

Enlisted (a) May 29/17 Terms of Service (a) 5 Y. D. 1/4 Service reckons from (a) May 29/17

Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }  
Military } Civil }  
none } Sapper }

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				

CERTIFIED CORRECT.  
27-8-17  
25-10-17  
CAN. RECORDS, LONDON.

*Embarked*  
*Army Transp Coy*  
*Disembarked*

*Halifax 10-8-17*

*Swire 23-8-17 ✓*

*BASE DEPOT C.F.C. SUNNINGDALE 23-8-17 PT. II. DO. NO 104*

*Mr B Grassie, Capt. M.*

*O.C. C.F.C. S.O.S. Base Depot, C.F.C. Sunningdale 25-10-17 Pt. 11. D.O. 155*

*on posting to 33 Coy, C.F.C., France.*

*Mr Walker Capt. for O.C.*

*33rd Coy. C.F.C.*

H.M. 7. MINNEK  
EMBARKEED 19 MAY 1917  
DISEMBARKEED 26 MAY 1917

*33rd Company C.F.C. Disembarked HAVRE 28-10-17*

*24-11-17 033 appld a/c/cpl with pay Field 29-10-17 B213 p150 7-d-1917*

*12-1-18 do " a/corporal " " field 1-1-18 B213 p150 7-d-1917*

*16-2-1918 33rd Coy. " of Sergeant Field 1-2-1918 B213 p150 7-d-1917*

(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.

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				
4-5-1918	33rd Coy.	Confirmed in the rank of Sergeant	Field	1-2-1918	B213 PTO no 17 of 14-5-1918
23. 11. 1918.	33 Coy.	Granted 14 days Leave to the M.A.		21. 11. 18	B213. PTO no 40 of 1918
7-12-18	53 Coy	Rejoined Unit from Leave	Field	7-12-18	15213

1-2-19

O.C. Cdn. S.O.S. for demobilisation to C.F.C.  
 Conc. Camp.  
 Le Havre

Depot, *Sunningdale*, N.B. *d/1-2-19*  
 Pt. 2, C/S, 5  
*Ed. Hewitt*  
 Liéut. for Lt. Col A.A.G.  
 Cdn. Sect. G.H.Q.

4. 2. 19. Of 18 Res Bn. T.O.S. C.F.C.  
 S.O.S. mD wing. 11  
 Kimmel Park for R.F.C.

1-2-19  
 22. 19 18 Res. C.F.C. Ph II O. 1  
 James Dr. Liéut.  
 for. Adjutant. 18th Res. Bn.

FEB 25 1919 ✓

FEB 25 1919

Attached C.C.C. Kimmel Park for return to Canada. Part II Orders No. \_\_\_\_\_. Ceases to be attached C.C.C., Kimmel Park on embarking for Canada, Part II Order No. \_\_\_\_\_

Commanding \_\_\_\_\_ Wing,  
 Kimmel Park Camp.

T.O.S. No 11 DD 19 Mch 19  
 S.O.S C.E, F Apr 3 19 T Area  
 No II DD do 98 Apr 8 -19

*W. MacLean Capt*



LTR Rank Name JOHNSTON, Andrew Abraham Reg'l No. 2203864  
 Unit If in perm. Corps, }  
 What Unit? }  
 No 2 Forestry Dft. Ottawa, to Base Depot CFC Married or Single Single.  
 Place and Date of Enlistment Victoria, B.C. May 29th, 1917. Place of Birth Cape Breton, N.S.  
 Name and Address, Next-of-Kin Nellie M. Johnston  
 Winchester Hospital, Winchester Massachusettes, US. Relationship Sister.

Assigned Pay Monthly \$ Payable to Relationship  
 Separation Allowance \$ Payable to Relationship

N/E. R.B. No. 9258  
 File R.L.  
 Category ORGan

Discharge, Date and Place Reason Character  
 H. W. & V., Ltd.-9546-16.

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.				
		Arrived in England		23-8-17	S/S Grampian
27.8/17	C.F.C.B.D.	T.O.S from Canada	S. dale	23.8.17	Pt II 10 1/2 wsl
25.10.17	" "	S.O.S to 33 Coy CFC France	16 "	25.10.17	155. Replied France 28.10.17 33 Coy Pt II O.I. 10 1/2 Pt
22-12-17	33 Coy CFC	Appointed A/L/cpl with pay	" Field	29-10-17	Pt II 7
22.1.18	" - "	app. of Corp with pay	" "	1.1.18	— 3
28.2.18	" "	" - of Serjt - "	" "	1.2.18	— 9.
14-5-18	" "	Confirmed in Rank Serjt. app. Serjt	" "	1-2-18	— 17
SOS to BDCFC, 12.19					
33 Coy DO. 5.d.5:2.19					
TOS BDCFC					
18th Res DO 1,d 4 2 19					

T4  
 B103 CHECKED  
 1 OCT 1917

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.				
25.2.19	<sup>18 Res</sup> C. F. E. Leman	S.O.S. to C.E. Kyle MD 11	Thru Seaford	25.2.19	Phidol
19.3.19	11 M DOW see X 1 m. R	S.O.S. to C.E. & Dan. Sailing 27	<sup>27-7.4</sup> Thru Kyle	<sup>19-3-19</sup> 19.3.19	- 67

No. 220 3864 RANK

*Pte*

NAME

*Johnston a a*

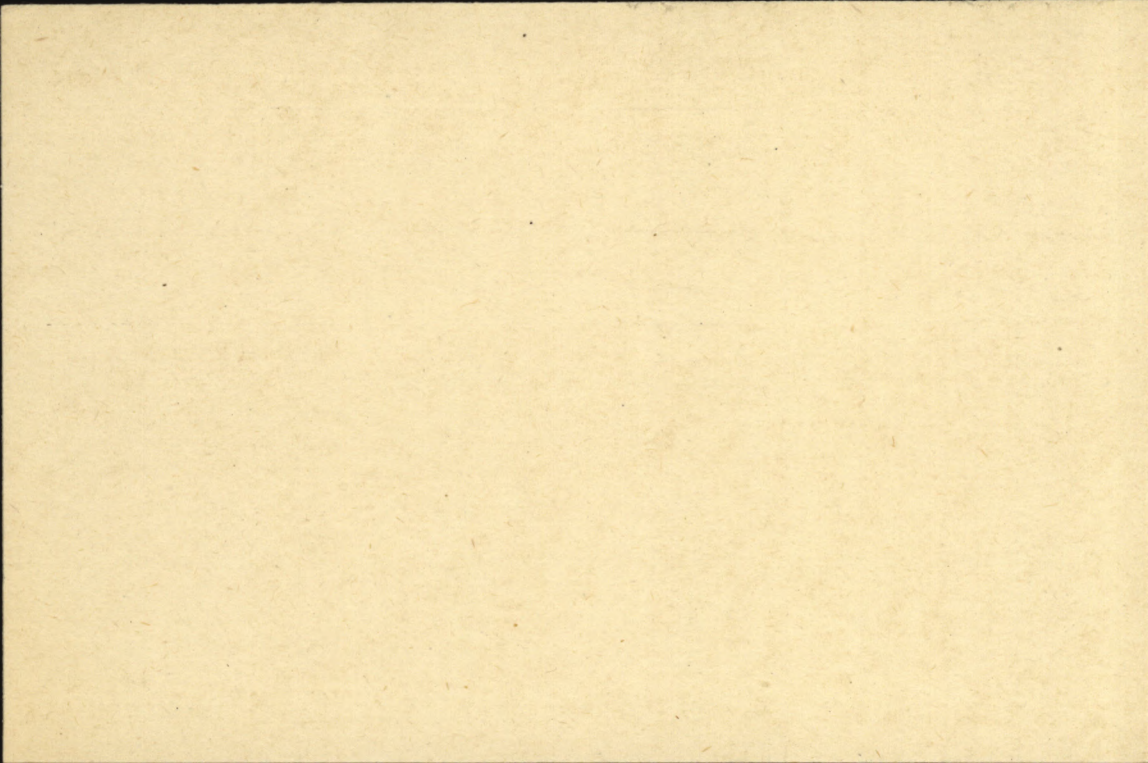
T. O. S.

UNIT

*Forestry Reinforcement.*

M. D.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1917 June 1</i>	<i>1917 June 30</i>	<i>n</i>		



SURNAME.

*Johnston*

*J. II* CARD NO. *4*

CHRISTIAN NAMES

*Andrew Abraham*

*Soldier's 9-4-19.*  
Demo FOLL.  
*auth 2098-3-4-19*  
*11220*

REGL. NO.

*2203864*

RANK

*Pt*

UNIT

*Forestry Coy. M. D. no. 11. to M D 3 (2nd R.D.)*

FORMER CORPS

*nil*

NEXT OF KIN.

NAMES IN FULL

*Johnston, Nellie M*

RELATIONSHIP TO SOLDIER

*Sister*

ADDRESS

*Winchester Hospital  
Winchester, Mass., U. S. A*

CHANGE OF ADDRESS

COUNTRY OF BIRTH

*Canada* *Cape Breton N.S.*

DATE

*Dec. 21<sup>st</sup> 1890*

PLACE OF ATTESTATION

*Victoria, B. C.*

DATE

*May 29<sup>th</sup> 1914*

*R/c 27.3.19 2/11 sp. II*  
*74*

MARRIED

SINGLE *yes*

WIDOWER

TRADE OR CALLING

*Logger*

RELIGION

*Presbyterian*

DESCRIPTION.

APPARENT AGE

*46* YEARS

*5* MONTHS

HEIGHT

*5* FEET

*10* INCHES

CHEST MEASUREMENT

*41* INCHES

EXPANSION

*5* INCHES

COMPLEXION

*Fresh*

EYES

*Blue*

HAIR

*Fair*

DISTINGUISHING MARKS

*nil*

MEDICAL EXAMINATION.

PLACE

*Victoria, B. C.*

DATE

*May 29<sup>th</sup> 1914*

*Present Address - Telegraph Creek,  
B. C.*

M&A.

Number 2203864 Rank Sgt

Surname JOHNSTON

Christian Name Andrew Abraham

Units C I C Theatre of War France

Date of Service 28-10-17

Remarks

Latest Address ~~Canadian Bank of Commerce Vancouver~~

Roll No. B Page 18125 B.C. Prudens Crossing

200m.-2-21.M. Alta.

DESP OCT 24 1922  
REGN. NO. *11624*

*2*



No. 2203864 FRANK P. E.

NAME Johnston, A. A.

T. O. S.

UNIT Forestry Depot

M. D. 11

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS

AUTHORITY

PAID FROM

PAID TO

SIG. OR REC'T

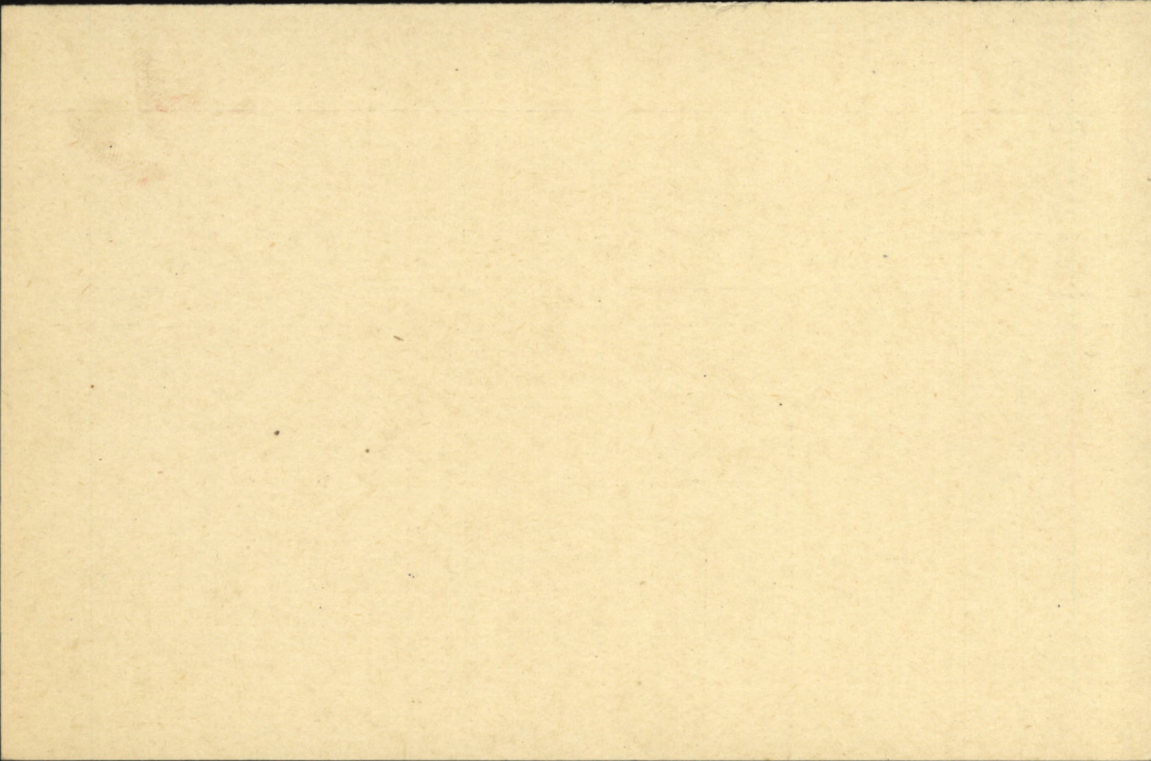
1917  
May 29  
1917.  
May 31.  
June.

n.  
✓

shown as d.o.b. 29-5-17.  
S.O.s left the District 6-7-17.

May payroll  
No 50 of 9.7.17.

of a closed inv. payment. C





NUMBER

2203864 RANK

Sgt NAME

JOHNSTON, Andrew A.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									351.02	298.50	
Feb	Def Pay	42		Ac. 3007. 11/19 10 Dist	560						
	Int on Def Pay	12	10	- 3122. 24/19	560						
				" 3637 6/2/19 18 <sup>th</sup> Reg.	68 13						
				Ac. 32314 12/2/19	730						
				Ac. 3777. 17/2/19 18 <sup>th</sup> ✓	973						
				- 2630. 3/3/19 Kimmel	973				299.03		
				- 3710. 17/3.	973				289.30		
			5410		11582						
A 3 M. FORM REN'G. EFFEC. DISCHARGED TO Canada DATE 28/2/19 PAY BOOK VERIFIED 20.2.19 BAL 308.76 L.P.C. REN'G. 20.2.19 AUTHY MR 3282. 18/2/19. Lenford M.D. 11 CHAS J GATE S. H. WILLIAMS		S.O.S. to Canada 19/3/19 S. 27									
Ac. 2630. 3/3/19 endorsed on L.P.C. corrected Bal 299.03 - 3710 - - - - 289.30											

351.02  
 54.10  
 405.12  
 11.20  
 393.92  
 85.16  
 308.76

APPOINTMENTS.  
PROMOTIONS AND REVERSIONS

MARRIED OR SINGLE *S.*  
 PLACE OF BIRTH *Cape Breton, N.S.*  
 NAME OF NEXT OF KIN *Helle M. Johnston* RELATIONSHIP  
 ADDRESS *Winchester Hosp. Winchester Mass. U.S.A.*  
 NAME OF NEXT OF KIN RELATIONSHIP  
 ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
<i>Appntd. 7/2/18 pl. with pay</i>	<i>29-10-17</i>	<i>007-33B-22-11-17</i>
<i>" 2/6 pl "</i>	<i>1-1-18</i>	<i>-3- " 22-1-18</i>
<i>" 7/2 pl "</i>	<i>1-2-18</i>	<i>" 9 " 28-2-18</i>

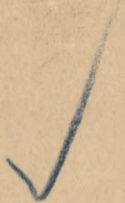
REG'L No. *2203864* RANK *1st Lt* NAME *Johnston Andrew Abraham*  
 PLACE OF ATTESTATION *Victoria, B.C.* DATE OF ATTESTATION *29/5/17* ORIGINAL UNIT *CS*

SEPARATION ALLOWANCE MONTHLY \$	EFFECTIVE (DATE)	STOPPED EFFECTIVE (DATE)	REASON	AUTHORITY	REMARKS

ASSIGNED PAY			PRESENT UNIT		
PER MONTH \$	DATE EFFECTIVE	AUTHY.	STOPPED EFFECTIVE	CAUSE	DATE A3M FORMS REND.

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.
								1	2	3	4				CREDIT	DEBIT			
<i>AUG 5 1917</i>														<i>15.50</i>					<i>CS</i>
<i>6/8 30/9</i>	<i>56 - 61 60</i>					<i>61 60</i>								<i>7710</i>					





blg

# DISPERSAL STATION J

SHORT FORM.  
PROCEEDINGS ON DISCHARGE.  
(Demobilization.)

War Service Badge  
Class "A" No. 239834

1. No. 2203864

2. Rank. Spt

3. Name. Andrew A. Johnston

4. Unit. 18th Can Res Canadian Forestry Corps 33rd Coy

5. Date of Discharge 3-4-19 Place Vancouver B.C.

6. Reason for Discharge Demob  
a 3 Sister Vancouver

H.M.T. M. M. K. A. H. D. F.  
EMARKED 19 MAR 1919  
DISMARKED 26 MAR 1919

(M) (H)

7. Authority.

8. Proposed Residence after Discharge % Canadian Bank of Commerce  
Vancouver B.C.

25/9/17

9. CERTIFICATE TO BE SIGNED BY SOLDIER.  
I hereby acknowledge that at the undernoted place and date I received my discharge Certificate  
M. F. W.? 39

*A. A. Johnston*  
Signature of Soldier.

10. CONFIRMATION.  
The discharge of the above named man is hereby confirmed.

Place.....

Date.....

*Cecil Roberts*  
Signature.....  
(O. C. Discharging Unit.)

20-1-20

major ant.

DISPENSARY STATION 1

PROCEEDINGS ON DISCHARGE

(Demobilization)

1. Name of the Soldier		[Faint handwritten name]	
2. Rank		[Faint handwritten rank]	
3. Component		[Faint handwritten component]	
4. Date of Discharge		[Faint handwritten date]	
5. Reason for Discharge		[Faint handwritten reason]	
6. Authority		[Faint handwritten authority]	
7. Proposed Residence after Discharge		[Faint handwritten address]	
8. Remarks		[Faint handwritten notes]	
CERTIFICATE TO BE SIGNED BY FORMER			
I hereby acknowledge that at the indicated date and time I received my discharge Certificate			
[Faint signature]			
CONFIRMATION			
The discharge of the above named man is hereby confirmed			
Date		[Faint handwritten date]	
Place		[Faint handwritten place]	
Signature		[Faint handwritten signature]	







**LIST OF DISCHARGE DOCUMENTS.**

Attestation Paper, Triplicate.....	Militia Form W. 23
or Particulars of Recruit.....	Militia Form W. 133
Field Conduct Sheet.....	Militia Form W. 178 or A.F.B. 122
Casualty Form.....	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate.....	Militia Form W. 44
Certificate that missing documents are unobtainable.....	
Medical History Sheet.....	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board.....	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet.....	Militia Form B. 465
Medical Report.....	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet.....	Militia Form B. 263
Company Conduct Sheet.....	Militia Form B. 263a

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122.)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)  
(Enclosed in special envelope (260M) ).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3)
11. Equipment and Clothing Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851).
13. Pay Book (A.F. 64).
14. War Service Gratuity (Form M.F.W. 2595),
15. Sundry Documents.

Group A  
 Checked by No. 1288  
 Date 10-3-49

MINNEKAHDA. 28.3.19

AUDITOR *30* PAYMASTER *X*

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

M. OR S. REGT. No. *2203864* RANK *SGT* NAME (IN FULL) *JOHNSTON A.A.*  
 IF IN P.F. WHAT UNIT? (BLOCK LETTERS SURNAME FIRST)

ORIGINAL UNIT C.E.F. PLACE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY \$ *Nil.* DATE EFFECTIVE

PAYABLE TO *Nil.* RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS *Can Bank of Commerce Vancouver B.C.*

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE *M.D.XI* DATE *3.4.19* REASON AUTHORITY IF ENTITLED TO POST DISCHARGE PAY *Yes*

MONTH	PAY AND F.A.		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY		REGIMENTAL CHARGES		OTHER CHARGES		TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT				COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3								DEBIT	CREDIT		
<i>28.2.19</i>		<i>1.50</i>			<i>308.76</i>	<i>308.76</i>																<i>308.76</i>	
<i>8.4.19</i>	<i>39</i>	<i>1.50</i>	<i>58.50</i>	<i>35</i>	<i>308.76</i>	<i>402.26</i>	<i>28/3/19</i>	<i>28/3/19</i>	<i>28/3/19</i>	<i>9.73</i>	<i>9.73</i>	<i>4.87</i>	<i>5</i>	<i>442.93</i>			<i>74.50</i>	<i>70</i>	<i>74.50</i>	<i>74.50</i>	<i>74.50</i>	<i>MSF</i>	<i>35¢ other or clothing</i> <i>4.30 other chg. also paid 5 days</i>
<i>122 days</i>			<i>280</i>		<i>280</i>												<i>77.50</i>		<i>77.50</i>	<i>202.50</i>			
					<i>280</i>					<i>May 15. 1918</i>	<i>77.50</i>	<i>62.50</i>							<i>62.50</i>	<i>140</i>			
										<i>June 3</i>	<i>70</i>	<i>70</i>							<i>70</i>	<i>70</i>			
										<i>July 3</i>	<i>70</i>	<i>70</i>	<i>4</i>						<i>70</i>				
					<i>280</i>														<i>280</i>				

BALANCE FROM PREVIOUS ACCOUNT

I certify that all payments of War Service Gratuity have been made on this account according to the period of Service shown on the H. F. W. 2895 received.

*[Signature]*  
 Officer in Charge War Service Gratuity  
 M.D. No. 11

14 year WAR GRATUITY

