

ATTESTATION PAPER.

TRIPLICATE

No. 844695

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... *Kioshuk Kioshuk*
- 1a. What are your Christian names?..... *Joseph Walpole*
- 1b. What is your present address?..... *Walpole Island, Ontario, Canada.*
2. In what Town, Township or Parish, and in what Country were you born?..... *Walpole Island, Ontario, Canada.*
3. What is the name of your next-of-kin?..... *Mrs. Jim Kioshuk*
4. What is the address of your next-of-kin?..... *Walpole Island, Ontario, Canada.*
- 4a. What is the relationship of your next-of-kin?..... *Mother*
5. What is the date of your birth?..... *April 22nd 1894*
6. What is your Trade or Calling?..... *Farmer*
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*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Joseph Kioshuk*, 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 *9th Feb* 191*6*. *Joseph Kioshuk* (Signature of Recruit)
Samson Sands (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Joseph Kioshuk*, 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 *24 9th* 191*6*. *Joseph Kioshuk* (Signature of Recruit)
Samson Sands (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 *Walpole Island, Ontario*, this *9th* day of *February* 191*6*.

Chas. B. Boorman (Signature of Justice)

Description of Joseph Kioshuk on Enlistment.

Apparent Age 22 years 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 6 1/4 ft. ins.

Chest measurement { Girth when fully expanded 36 3/4 ins.
Range of expansion 3 1/4 ins.

Complexion Dark

Eyes Brown

Hair Black

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

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 Feb 14 1916

Place Port Lambton, Ontario, W.A. Cathert
Canada. 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.

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

W.W. Macvicar (Signature of Officer)

Date 9th Feb 1916 for O. G. 149th C.E.F.

NAME

CONTENTS

REGIMENTAL DOCUMENTS

REGT. NO.

844695

UNIT

149th

N. Q. FILE NO.

NON-EFFECTIVE BY

DEATH

Category

DISCHARGE

Category

DESERTION

15-3
18-3
29-3

/

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

11645

ATTESTATION PAPER (M.F.W. 23, 133, or 51)

CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

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)

DENTAL HISTORY SHEET (M.F.B. 465)

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)

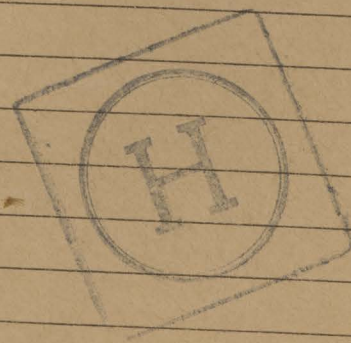
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)

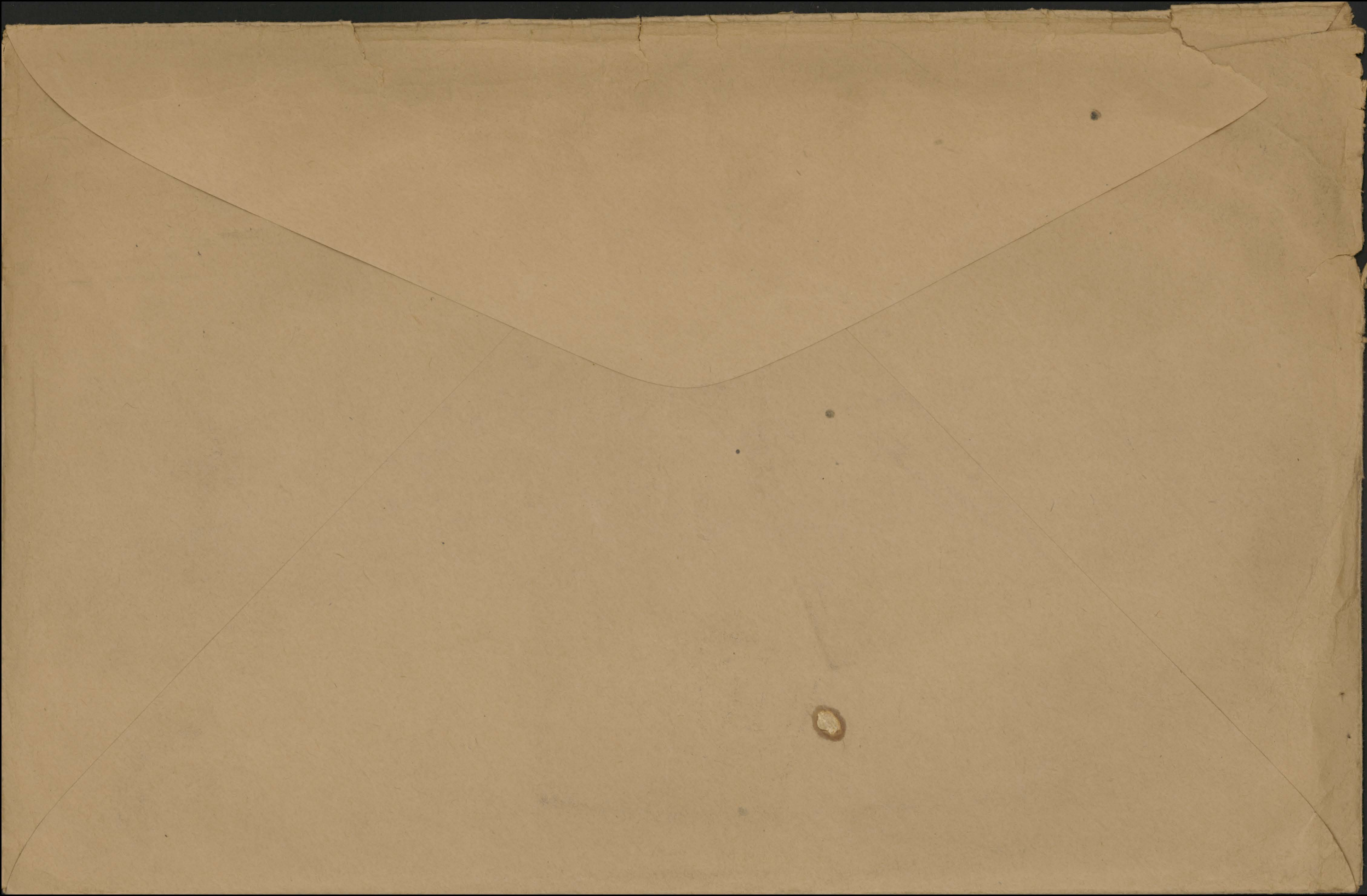
LAST PAY CERTIFICATE (M.F.W. 44)

PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 263)

PARTICULARS OF CHARACTER (A.F.W. 3226)

COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)





[illegible]

Surname

Christian Name or Names

Reg. No.

KIYOSHK.

J.

844695.

Rank
Pte.

Unit
B.C. 47.

Cas. List.

2-10-18.A333. 83.G.H.B'logne (Ser. Ill) 30-9-18.

G.S.W. Face.

9.10.18 A339 2. 83 G.H.B'logne 6.10.18.

11.10.18 A341 "Died of Wounds"

7.10.18 R.

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

D.M.S. 1300. 50M-30-8-18.

Cas. List.

NAME

RANK AND CORPS

REGT'L. No. 844693

H. Q. FILE NO 649

CABLE

NO.

DATE

NATURE OF CASUALTY

FOLLOWS

No.

FOLLOWS

NO.	DATE	NATURE OF CASUALTY
Nof 17	Mrs Jim	Kiyoshik, (Mother) Walpole Island Ont
#365	47-5 4-10-18	Ser ill 83 Gen # Boulogne Sept 30 th 1918 G.W. fare
#382	55-3 11-10-18	Prev rept ser ill now dang ill
#339 ²	9-10-18	83 Gen # Boulogne Oct 6 th /18
#386	4-8 13-10-18	D of W 83 Gen # Boulogne Oct 7 th /18

LIST NO.

HOSPITAL

DATE OF
ADMISSION

REMARKS

A 333(11)	83 gen. Boulogne	30-9-18	gsw. face. Ser. ill
A 341 ^L	83 " "	7-10-18	D. of wds. gsw. face

No. 844693- RANK *Pte.*NAME *Kioshk Joseph*T.O.S. 9-2-16 UNIT *149th Battalion**D.O. 48, 17-2-16.*

M. D. /

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916</i>	<i>1916</i>			
<i>Dec. 9</i>	<i>Dec. 29</i>	<i>✓</i>		
<i>mas.</i>		<i>✓</i>		
<i>apr</i>		<i>✓</i>		
<i>may</i>		<i>✓</i>		
<i>jun</i>		<i>✓</i>		
<i>July</i>		<i>✓</i>		
<i>Aug.</i>		<i>✓</i>		
<i>Sept.</i>		<i>✓</i>		
<i>Oct</i>		<i>✓</i>		
<i>Nov.</i>		<i>✓</i>		
<i>Dec.</i>		<i>✓</i>		
<i>1917</i>	<i>1917</i>			
<i>Jan.</i>		<i>✓</i>		
<i>Feb.</i>		<i>✓</i>		
<i>Mar.</i>		<i>✓</i>		

UNIT SAILED

MAR 28 1917



Kiyoshk M. Joseph #844695 47th 649K-7087
Name & Address of Legatee
James Kiyoshk (father)
Walpole Island, Ont.
To Secy. of Indian Affairs Ottawa
Name & Address of Next of Kin
as above
(Serial no. 774709.)
Name & Address of Female Next of Kin
Not married
Mrs. Christina Kiyoshk (mother)
Same address
P.V.
13. 2. 20
Resp. C. 761

MEDALS
&
DEC.

P & S

C OF S.

Our letter for Scroll

3-2-21

Supplemt

Scroll Desp. 5.2.21 Reqn. No 2-17.291

Plague Desp. DEC 14 1928 Reqn. No P 20600

AD
RS
Number

844695

Rank

Plt ~~1st~~
~~2nd~~

Surname

KIYOSHAKI

Christian Name

Joseph

Units

47th Bn Can Inf

Theatre of War

France

Date of Service

8-3-18

D

Remarks

(Father) James Kiyoshaki

Latest Address

Walpole Island, Ont.

Roll No.

B Page 16500

200m.-2-21.M.

Next of kin _____

Address on leave _____

Address on discharge.....

Transportation issued	Yes	Character on
	No	discharge
Date		

Previous occupation _____ Date and place of enlistment _____

Diagnosis _____ Date of Medical Boards _____

Date _____

Remarks

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

Q. 17/18

Surname Kiyoshk H. Q.
Christian names Joseph M. D. No.
Regtl. No. 844695 Rank Pl T. O. S. 19....
Unit 149th Bn D. O. Pt. II. of
Reason S. O. S. 19....
Auth.

Next of kin Kiyoshk, Mrs Jim Relationship mother
Address Walpole Island, Ont. Also notify:
.....
.....
.....

BORN—Place Canada, Walpole Is Ont. Date April 22nd 1894.
ATTESTED—Place Port Lambton Ont. Date Feb 9th 1916.
O/S. 28-3-17. R/C.



WEST ONT. RECT.

J.P.Rank

Name

KIYOSHK, Joseph.

Reg'l No. 844695.

Unit Dft 149th Bn.

If in perm. Corps,
What Unit?

Married or Single Single.

Place and Date of Enlistment Port Lambton. 9th Feb. 1916.

Place of Birth Walpole Island.
Ont.

Name and Address, Next-of-Kin Mrs Jim Kiyoshk.

Walpole Island. Ont.

Relationship Mother.

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason

Character

H. W. & V., Ld.-9546-16.

N/E. R.B. No. 11,585
File R.L. 25-K1534
Category 800

Report.

Date.

From whom
received.

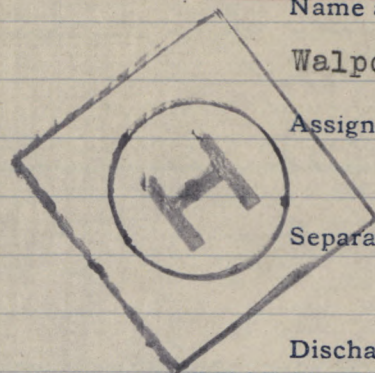
Record of promotions, reductions, transfers,
casualties, etc., during active service.
The authority to be quoted in each case.

Place.

Date.

REMARKS
Taken from Official Documents.

20 4. 17	25th Bn T O S from CANADA	ARRIVED IN ENGLAND 7 4 17	S. S. LAPLAND.
1.6.17	" - S.O.S. to 161st Bn.	1.6.17	PT 153 + 161st Bn PT 152 47 Bn
8.3.18	161st BN, S.O.S. TO 47th, BN. O/S, WITLEY	8 3. 18, PTii 41	20 x 18-3-18
2-10-18	47 Bn Wounded Seriously Ill	30-9-18	PT A333
11-10-18	" " Died of Wounds	7-10-18	PT A341 + 109 x 12-10-18 47 Bn



RECEIVED 103 CHECKED
12 MAR 1918

[illegible]

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

M. F. W. 54. (A. F. B. 103.)

250M.—1-16.

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps Dpt 149 Bn. C E 7
 Regimental No. 844695 Rank Pte Name Joseph Kiejoshk
 Enlisted (a) 9-2-16 Terms of Service (a) Duration of War Service reckons from (a) 9-2-16
 Date of promotion to } Date of appointment } Numerical position on }
 present rank. } to lance rank } roll of N. C. Os. }
 Extended _____ Re-engaged _____ Qualification (b) (Civil) Farmer

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			
	Embarked Canada	Halifax	25.3.17	"Lapland"
	Debarked England	Liverpool	7.4.17	✓
	T.O.S. Segregation Camp	Bramshott	7.4.17	
	<u>J. A. Henderson Lt for</u>			Capt. & Adj.
	<u>For C.C. Segregation Camp, Bram.</u>			
	25th. Res Taken on Strength from <u>ban</u>	Bramshott.	7-4-17	Part 11 D.O. 111
1-6-17	25th. Res. Posted to 161st. Battalion	Bramshott	1-6-17	Part 11 D.O. 155
	O.M.F.C.			Captain, Adjutant, 25th. Reserve Battalion.
2-6-17	161st Bn. Taken on Strength of 161st Bn	Witley	1-6-17	Part II Orders #152
	<u>with D.O. 161st 73/117</u>			
8.3.18.	161st Bn. Proceeded Overseas to 47th Bn, and struck off strength 161st Cdn Inf Bn.	Witley.	8.3.18.	Pt II No 41.
		Lieut. a/Ass Adjutant, for O.C. 161st Canadian Infantry Battalion.		
8-3-18	4 C.B.D. Arr. in France & T.O.S.	47th Bttn.	8-3-18	N.R. D.O. 20.
10-3-18	" S.O.S TO C.C.R.CAMP.	FIELD.	10-3-18	:
10-3-18	C.C.R.C. T.O.S. C.C.R.Camp.	do.	10-3-18	" 135

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

[P.T.O.]

CERTIFIED CORRECT.
 15 MAR 1918
 CANADIAN RECORDS, LONDON.

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				
14-3-18	<i>q. cec?</i>	Left to join unit	<i>Lille</i>	14-3-18	<i>un</i>
18-3-18	<i>q. cecis-</i>	Joined unit	"	14-3-18	<i>213.</i>
28-9-18	<i>do</i>	wounded		27-9-18	<i>KI 17-1144</i>
<i>do</i>	<i>30ccs</i>	<i>to 10 T.T.</i>		<i>do</i>	<i>154613</i>
<i>do</i>	<i>838en</i>	<i>adun</i>		28-9-18	<i>155489</i>
8-10-18	<i>do</i>	Died Wounds Received in action		7-10-18	<i>W 3745</i> <i>MOS 3740/1.</i> <i>DO. 109 d/12-10-18</i>
		<i>Indonesian</i> <i>Lieut</i> <i>for Lt Col de ce gldn Lutar</i>			

57.K

FORM OF WILL.

I, Joseph Kuyoshk (Name in full)
Regimental Number 844695 serving in 149th Battalion
of the Canadian Expeditionary Force, do hereby revoke all former Wills by me
made and declare this to be my last Will.

I bequeath all my real estate unto

Mr James Kuyoshk
Walpole Island
Ontario } Name and Address
of person or
persons to whom
it is to go.

absolutely, and my personal estate I bequeath to

Mr James Kuyoshk
Walpole Island
Ontario } Name and Address
of person or
persons to receive
personal estate*
(See note).

**IMPORTANT
NOTE**
This must be Signed
and Dated by
THE SOLDIER
HIMSELF.

this 21 day of March A. D. 1917
Joseph Kuyoshk Signature of Soldier.

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

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

THE TWO
WITNESSES
MUST
SIGN HERE

Signature of First Witness W. Jamieson
Address of Witness 257 Lochiel St. Sarnia
Occupation of Witness Clerk
Signature of Second Witness W. L. Larnie
Address of Witness 309 London Rd Sarnia
Occupation of Witness Banking

ORIGINAL
MEDICAL HISTORY SHEET ORIGINALSurname Kioshek Kiyoshk Christian Name JosephExamined { on 14th day of February 1916
at Port Lambton, Ontario Approved by W. B. BathurstBirthplace { City or Town Walpole Island, Ontario Rank MP M.O.
County Lambton County, OntarioApparent age 22Trade or occupation Farmer M.O.Height 5 Feet 6 1/2 Inches. M.O.Weight 150 Lbs. M.O.Chest measurement { Minimum 33 1/4 inches. M.O.
Maximum expansion 3 1/2 inches. M.O.Physical development Good M.O.Small-Pox Marks none M.O.Vaccination Marks { Arm / Right. Left.
Number one M.O.When Vaccinated last 6 years ago 10.5.16 + 255 Mitchell M.O.(a) Marks indicating congenital peculiarities or previous disease M.O.
M.O.(b) Slight defects but not sufficient to cause rejection
slight varicella + flat feet 14.9.16 255 Mitchell M.O.
Both Eyes 20/30 21.9.16 255 Mitchell M.O.
20 29.9.16 255 Mitchell M.O.
29.9.16 TAB 255 Mitchell M.O.Enlisted on 9th day of February 1916 at Walpole Island, Ontario, Canada

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>149th</u>	<u>844695</u>		<u>9-2-16</u>
Transferred to	<u>25th RESERVE BATTALION C.E.F.</u> <u>167th Canadian Infantry Battalion.</u> <u>47Bn</u>			<u>- 7. APR. 1917</u> <u>1-6-17.</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>London, Ont.</u>	<u>JAN. 29. 1917.</u>	<u>On Attestation</u>	<u>considered..... fit</u>
<u>W. B. Bathurst</u>	<u>L. S. Douglas</u>	<u>Capt. A. M. C.</u>	<u>Capt. A. M. C.</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.

Knock

Christian Name.

4924

Date of Arrival
at the
Station.

DATES OF

Admission
into Hospital.

Discharge
from Hospital.

Day

Mor

Year

Day

Mo

th	Y
----	---

DISEASE.

Number of days in Hospital.	Number of cases.
1	1
2	1
3	1
4	1
5	1
6	1
7	1
8	1
9	1
10	1
11	1
12	1
13	1
14	1
15	1
16	1
17	1
18	1
19	1
20	1
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85	1
86	1
87	1
88	1
89	1
90	1
91	1
92	1
93	1
94	1
95	1
96	1
97	1
98	1
99	1
100	1

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.

MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12
 50m.—7-16
 H. Q. 1772-39-819

E
 Mrs

To Whom

Christina Kigoshk
 Address *Walpole Island. Ont*

By Whom Assigned

Regtl. No. *844695*

Rank *Pte*

Corps *149" Battrn*

Kioshk

per. N.R.

Rate *15.*

APR 1 1917

PAYMENTS

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



89551 2

81 11 3

ASSIGNED PAY

50m.—7-16

1772—39—819.

Sheet No. 2. (Assignee)

L. L. Job 5470—Req. 6888.

OVERSEAS CONTINGENTS

PAYMENTS.

Name of Soldier

Kioshk per A.R.

Kioshk Joseph
8446967 P.G. 149. Balton

Month.	Year.	Cheque No.	Am't.	Remarks.
			15.	APR 1 1917
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		L 6092	15	
May		W. 10811	15	15 Cu
June		17708	15	20
July		C 22350	15	20
Aug.		M 32536	15	
Sept.		D 37298	15	D. 37298 } Retd. & Cancelled 7-11-17
Oct.		M 44475	15	M. 44475 }
Nov.		O 50225	15	O 50225 Cancelled (u)
Dec.				Suspended pending advice from
Jan.	1918			C.P.M. deceased file 10132-C-5
Feb.				not 7-11-17.
March				
April				
May				
June				
July				

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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.					

RELATIONSHIP OF DEPENDANT

Mrs Christina Kioski
Walpole Island.

mother

EFFECTIVE (DATE)

AUTHORITY

Joseph.

AUTHORITY

AUTHORITY

AUTHORITY

AUTHORITY

DATE EFFECTIVE

Walpole Island. Out:

RELATIONSHIP

~~Another~~

DATE EFFECTIVE _____

RELATIONSHIP

REASON

REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

[illegible]

844695 PK Kiosk J.

[illegible]

424

ASSIGNED PAY. EFFECTIVE DATE: <u>1-9-17</u> AMOUNT: <u>15⁰⁰</u>	ENGLAND or CANADA. SEPARATION ALLOWANCE. EFFECTIVE DATE: <u>11.18</u> AMOUNT: <u>11.18</u>	NAME: <u>KIOSHK Joseph</u> NUMBER: <u>844695</u> PARTICULARS OF RANK OR APPOINTMENT AUTHORITY: DATE EFFECTIVE: RANK OR APPOINTMENT: <u>Pte</u> UNIT AND TRANSFERS ORIGINAL UNIT: <u>149th Bn</u> DATE ACCOUNT FIRST OPENED: <u>8-11-17</u> AUTHORITY: DATE EFFECTIVE: DATE LEDGER SHEET T'S F'D: UNIT TRANSFERRED TO: <u>Do 153 7/6/17</u> <u>21/7/17</u> <u>161st Bn</u> <u>NR 8-3-18</u> <u>1-4-18</u> <u>26/4</u> <u>47 Bn.</u>									
NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE. <u>Merr Jas P. Kioshk Sacher</u> <u>Walpole Island, Ontario</u>											
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK DATE OF PAYMENT NUMBER OF A.R. UNIT PAID BY AMOUNT DATE OF PAYMENT NUMBER OF A.R. UNIT PAID BY AMOUNT <u>Statement of R rendered 6/3/19</u> <u>L.P. fr. Bal.</u> <u>11087</u> <u>Ledger fr. Bal.</u> <u>11087</u>		DAILY RATES OF PAY AND ALLOWANCES AUTHORITY: PAY: F.A.: P.F.A.: SUBS'CE ALL'CE: <u>1-</u> <u>10</u>									
PARTICULARS OF RENDERING NON-EFFECTIVE: <u>Do of NR 7.10.18. b.L. a341. 11.10.18</u>											
MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
31/3/18	Brought Forward								2691		
Apr	Pte. P.A.	3300		AP Can				15			
				AR 21 7/4/18 47 Bn	357						
				AR 89 21/4/18 47 Bn	446				3690		
May	Pte. P.A.	3410		AP Can	802			1500			
				AR 187 21-5-18 47 Bn	357			15			
June	Pte. P.A.	3410		A JOK 574 26/2/18	061			15	5237		
				AP Can	363			15			
				AR 242 5/6/18 47 Bn	446						
				AR 136 10/5/18 "	446						
				AR 326 22/6/18 "	357				5788		
July	P. Pay	3410		Can. P.A.	1249			15			
				AR 390 27/7/18 47 Bn	446						
				" 445 28/7/18 "	357			15	6895		
Aug	P. Pay	3410		Can. P.A.				15			
				AR 491 11/8/18 10 b. Bde	357						
				" 527 27/8/18 "	357			15	8091		
Sept	P. Pay	3410		Can. P.A.				15			
				AR 646 14/9/18 10 b. Bde	357						
				" 598 8-9-18 "	357			15	9177		
Oct.	P. Pay	3410		b.A.P.				15	11087		
								15			
June				Dfn 8913 b. Bal. transp to Ottawa	11087						
					11087						

NON EFFECTIVE ACT

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

K

3480

Date of Assignment

* 1-9-17

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

15			
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PARTICULARS OF SEPARATION ALLOWANCE

No. 844695
 Rank Pte Promoted Reverted Discharge
 Soldier's Name Joseph Kiyoshk Kioshk.
 Battalion 149 Batta.
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name Mrs Christina Kiyoshk
 Address Walpole Island Ont.
 Change of Address
 *1 James P. Kiyoshk (Father)
 2 Walpole Island Ont.
 3
 4

	Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
	1917					
	Dec.			75	75 00	
1918	Feb	78362 U		90	90 00	Suspended pending advice from ltrm deceased file 10132-C-5
	Mar	95302 Y		15	15 00	last ltr Aug 17, 1917.
	Apr	10469 H		15	15 00	* acct transferred to Father 2M 7-2-18.
	May	19391 J		15	15 00	Effective 1-9-17. C 4-3-18.
	June	17339 F		15	15 00	Adj at \$90.00 to adj from 1-9-17 to 28-2-18 to new
	July	28486 P		15	15 00	assignee ordered 4-3-18. C. Mailed 5-3-18.
	Aug	40327 H		15	15 00	New Stencil ordered 4-3-18. C
	Sept	42940 K		15	15 00	
	Oct	53970 N		15	15 00	
				285	285	

10036-8-6-

KILLED IN ACTION
 DIED OF WOUNDS DATE 7/10/18.
 C. L. No. 331-1 DATE 19/10/18.
 M. R. O. 11917 TO DESTROY RENDERED 23/10/18.
 B. P. C. FORM 1 & C. F. X. COMPLETED ON FILE
 10036-8-6-
 CLERK Webb DATE 23/10/18.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

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PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name _____

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date _____

Cheque
No.

Amount
S/A

Amount
A/P

Total

REMARKS

M. F. W. 128
400M.—6-17-1772-39-141
L. L. 22320—M. & D. 7993.