74th. Battery CFA. CEF.

Original.

ATTESTATION PAPER.

No. 3452253

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Knox.
1a. What are your Christian names?	John Munro
1b. What is your present address?	111 Florence St. Ottawa, Ont.
2. In what Town, Township or Parish, and in what Country were you born?	Carleton Place, Ont. Canada.
3. What is the name of your next-of kin?	Mrs. Sarah A. Knox.
4. What is the address of your next-of-kin?	111 Florence St. Ottawa, Ont.
4a. What is the relationship of your next-of-kin?	Mother.
5. What is the date of your birth?	January 8th. 1898.
6. What is your Trade or Calling?	Clerk.
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? ....or Navy	No.
10. Have you ever served in any Military Force? If so, state particulars of former Service.	No.
11. Do you understand the nature and terms of your engagement?	~~No.~~ 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?	--
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?	--

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, John Munro Knox, 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.

John Munro Knox (Signature of Recruit)

Date April 18th., 1918. D.K. Dashney (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, John Munro Knox, 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.

John Munro Knox (Signature of Recruit)

Date April 18th., 1918. D.K. Dashney (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 Ottawa, Ont. this 18th day of April 1918.

Thomas Comer (Signature of Justice)

M. F. W. 23.
750 M.—1-17.
H. Q. 1772-39-841.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT.

345253.

Description of KNOX, John Munro on Enlistment.

Apparent Age 20 years 3 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 6½ ins.

Chest measurement.
- Girth when fully expanded 34 ins.
- Range of expansion 3 ins.

Complexion Fair.

Eyes Blue

Hair L.Brown

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

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).

Vac. Mk. Right arm Childhood.
Mole - dorsal region back.

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 April 19th. 1918.

Place Ottawa, Ont.

N Macleod Major
A.M. Lawson Major
A.P. Bruce Capt.
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.

John Munro Knox 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.

Thomas Louis Captain,
(Signature of Officer)
O.C. 74th. Battery CFA.CEF.

Date Apl. 20th. 1918.

REGIMENTAL DOCUMENTS

NAME Knox John Munro (Gunner) REGT. NO. 345255 UNIT [illegible]-154 H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE
2	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.F.B. 263 or A.F.B. 120)				
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)				
/	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)				
/	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. 268)				
	PARTICULARS OF CHARACTER (A.F.W. 3226)				
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)				
1	m Thr- 71				

NON-EFFECTIVE BY

DEATH

Category

DISCHARGE

Category

Deserter

13062

DESERTION

407167

W. 2589
100M-11-18
1772-39-1877

3

CARD No. 4/5

SOS. Dis 22-3-19.
Demob. FOLL.
auth 6181 22-3-19

SURNAME. Knox

CHRISTIAN NAMES John Munro

REGL. No. 345253 RANK Gr

UNIT 74th Dpo Bty.

FORMER CORPS Nil.

T. O. S. Apr. 20 1918

D. O. Part II No. 113

NEXT OF KIN.

NAMES IN FULL Knox, Mrs. Sarah A.

RELATIONSHIP TO SOLDIER mother

ADDRESS 111 Florence St., Ottawa, Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Carleton Place, Ont. DATE Jan. 8th. 1898

PLACE OF ATTESTATION Ottawa Ont. DATE Apr. 20th. 1918

L. L. 25989 M. & D. 8191.

M. F. W. 22. 100M.—8-17. H. Q. 1772-39-339

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 EXAMINATION. PLACE DATE

M. F. W. 71.—500M.—5-16.
1772—33—961.

NAME Knox. John Myaro.

REGIMENTAL NO. 345253.

RANK Gunner

ENLISTED AT Ottawa, Ont.

PROMOTIONS, &c. AND DATE

DATE 18th April 1918

IF SERVED PREVIOUSLY, STATE UNIT, &c.

MARRIED, WIDOWER, OR SINGLE Single

NEXT OF KIN Mrs. Sarah A. Knox

RELATIONSHIP Mother

ADDRESS OF

ASSIGNMENT OF PAY $ C. TO

ADDRESS

SEPARATION ALLOWANCE, ENTITLED OR NOT

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR

CASUALTIES, &c.

NATURE E.G. ABSENCE, PROMOTION, &c.	PART II, D. O.		REMARKS IF IN HOSPITAL, NOTE NAME &c.
	NO	DATE	
Taken on Strength	70	11-3-19	
Discharged	81	22-3-19	Demobilization. R.O. 328 Italy. 3rd D.G. K.72. 15-3-19

74th BATTERY, C. F. A., C. E. F.

MILITARY SERVICE ACT, 1917. 345253 Original.

MEDICAL HISTORY SHEET.

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

1. Surname KNOX. Christian name JOHN MUNRO.

2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule.....

3. Consecutive number on schedule of men reporting for service (if he appears on it).....

4. Address (including street and number, if any)... 111 FLORENCE ST., OTTAWA, ONT.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 19th. day of APRIL. 1918 by the undersigned medical board sitting at Ottawa.

5. Age as stated 20 Years 3 Months. 6. Apparent age ..... Years ..... Months

7. Height 5 Feet 6½ Inches. 8. Weight 117. Pounds.

9. Chest measurement { Minimum 31 Ins. / Maximum 34 Ins. } 10. Complexion Fair. { Eyes Blue. / Hair L. Brown. }

11. Physical development. Good. { Good / Fair / Poor } 12. Smallpox marks. None.

13. Number of vaccination marks { Right arm 1. / Left arm ..... } 14. When vaccinated last Childhood.

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

Mole Dorsal region back.

16. Slight defects but not sufficient to cause rejection.....

The man denies having had { Rheumatism / Tuberculosis / Syphilis } We find no evidence of past { Rheumatism / Tuberculosis / Syphilis }

(Strike out disease admitted or suspected.)

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

17. (a) Vision R. 6/6 L. 6/6

(b) Hearing. R. Normal. L. Normal.

A. M. Mockford Major President.

Member. Member.

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
24.4.18	Dr Shillington M.O.		24.4.18	Dr Shillington M.O.	
	M.O.		29.4.18	Dr Shillington M.O.	
	M.O.		4-5-18	Dr Shillington M.O.	

Joined 20th day of Apl 191 8 at Ottawa Ont

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	74th BATTERY, C.F.A., C.E.F.	345253		apl 20/18
Transferred to.....	65th Battery	345253		16-9-18

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
Petawawa	Sept 7		Fit for duty Capt
Kingston Ont	21-3-19	None	A. M. Mockford Major Medical Officer

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

M. F. B. 313.

300M.—10-17.

1772-39-439.

Signature of Man

Surname Ford Christian Name John Mercer

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

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

District 3

Name of Soldier Knox J. W.

Rank Gnr

Regiment 74th Battery

No. 314552

INSTRUCTIONS

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

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

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

	Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	Dentures U	Dentures L	Dentures P	Gold Clasp	Gold Filling	Crowns Gold	Crowns Porcelain	Bridge Work	OPERATOR	Military Dist.	REMARKS
Condition on first Examination	1918 Apl 25	3 / 3.29 31									2 / 1.16									Exam by Lieut Manseau		1 Cavity #14
	" 25										1 / 19									" "	3	

M.F.B. 465
2-'18. 1-17
1772-89 950

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

Regimental No. ..... Rank ..... Name ..... Unit .....

Date of Birth ..... Address to which letters are to be sent .....

Date of Enlistment ..... Date of Discharge .....

Date	Operator	Remarks

Condition on Enlistment		Condition on Discharge	
Gen.	Dent.	Gen.	Dent.

Defects		
	L.	R.
Teeth missing		
Teeth to be extracted		
Teeth to be filled		
Teeth to be crowned		
Teeth to be bridged		
Pyorrhoea		
Gingivitis		
Malocclusion		
Other defects		

Condition on Return from Expedition

Date	Surgeon	Teeth extracted	Teeth filled	Teeth crowned	Teeth bridged	Teeth scaled	Teeth X-rayed	Other treatment

INSTRUCTIONS

1. On examination the condition of patient's mouth to be noted 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.

Address
111 Florence St.
Ottawa Ont

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. 3415253 Rank Gunner Surname Munro
(Given name in full) John Munro

Unit or Corps "C" Battery RCHA Birthplace Carleton Place, Ont

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

1. GENERAL DESCRIPTION:

Physique Good Weight 132 lbs. Height 5 ft. 6 in. Colour of Eyes Blue

Nutrition Good

Pulse 80

Condition of arteries Good

Vision Rt. 20 Left Normal

Hearing (conversational voice) Rt. ft.

& Left Normal

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

Nil

Opinion as to general health and physical condition. Good as subject to A.T.

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 Sytem No. 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.

Man has no complaints. Satisfied to be discharged in category A T.

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at ..... (Overseas)

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

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

Signature .....

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

THIS SECTION FOR USE IN CANADA—

Examined at Kingston Ont. (Canada)

Date March 21/1919 Signed H Augsor 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 .....

(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]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-39-1142.

This space to be left blank for Number at Headquarters.

Proceedings on Discharge.

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

No.	345253
Rank	Gunner
Name NOTE.—The name must agree strictly with that on enlistment unless changed subsequently by authority.	Knox, John Munro
Corps (Regiment, Battalion or Battery).	"C" Battery, R.C.H.A.
Date of Discharge	March 22nd 1919.
Place of Discharge	Kingston, Ont.

1. *Description at the time of Discharge.*

Age	21 years ..... months.	Descriptive Marks.
Height	5 feet 6 inches.	
Complexion	Fair	
Eyes	Blue	
Hair	L.Brown	Nil
Trade	Clerk	
Intended place of Residence. (To be given as fully as practicable)	111 Florence St. Ottawa, Ont.	

2. The above named man is discharged in consequence of Demobilization

Authority 3MD 99-K-72, dated 15-3-19.

N. B.—The causes of discharge must be worded as prescribed in the King's Regulations and be identical with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

3. Conduct and character while in the service have been, according to the records, etc.

N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the officer Commanding his troop or company.

4. Special qualifications for employment in civil life. (Vide para. 1838, K.R.)

N. B.—See para. 2188, King's Regulations, regarding the Register for Civil Employment.

MILITIA FORM B. 99.

[OVER]

O.M.K. 29-3-19

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

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

6. Medals and Decorations.....

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

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

(Place).....

(Date).....

Commanding.....*Battn*.....*Regiment*.

8. *Certificate to be signed by the soldier on Discharge.*

I hereby acknowledge that I have received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page, and I understand that if I re-enlist I shall never get back my former service.

(Place) Kingston, Ont. J. M. Knox (*Signature of Soldier.*)

(Date) March 22nd 1919. W. Lancaster (*Signature of Witness.*)

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

9. *Additional Certificate in the case of a soldier who takes his Discharge on his own request.*

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

.....(*Signature of Soldier.*)

10. *Statement of Service.*

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

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

11. *Confirmation of Discharge.*

The discharge of the above named man is hereby confirmed.

(Place) Kingston, Ont.

(Date) March 22nd 1919.

(*Signature*) for W. Lancaster Lieut.-Colonel, C.E.F.
O.C. R.C.H.A. Depot.

RESERVATIONS REFERRED TO AT PARA. 8.

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

J M Knox

LIST OF DISCHARGE DOCUMENTS.

Court Martial Sheet

Reg. Def. Sheet

Comp Def. Sheet

Copies of Convictions, by C.P.

Med. Hist. Sheet

Medical Report for Invalid*

Copy of Receipt for purchase money †

Last Pay Certificate

Attestation

Register Sheet

Proceedings on Discharge

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

(*a*) Proceedings on discharge

(*b*) Attestation

(*c*) Medical History Sheet (in the event of such having been prepared).

*Only if discharged as "Medically unfit."
†Only if discharged by purchase.

Instructions regarding the despatch of Discharge Documents.

1. When a soldier is to be discharged the documents named above, arranged in the same sequence, are to be put inside this form. Should any of his documents be missing, an explanation of the deficiency, signed by the Commanding Officer, must be substituted, which will remain until such documents are transmitted.

2. Discharge documents are to be transmitted by Commanding Officers to the Adjutant General at Head-Quarters.

3. Postage need not be paid, and receipts for the documents are not required.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 345253 (Rank) Gunner

Name (in full) Knox, John Monro enlisted in

the 74th Battery, C.E.F.

CANADIAN EXPEDITIONARY FORCE at Ottawa. on the 18th

day of April 1918

Transferred to "C" Battery
R.C.H.A. 10-3-19.

HE served in Canada only

and is now discharged from the service by reason of Demobilization

Authority 3MD 99-K-72, dated 15-3-19.

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

Age	21	Marks or Scars	
Height	5 ft 6 ins.		
Complexion	Fair		Nil
Eyes	Blue		
Hair	L.Brown		

J. M. Knox
Signature of Soldier

For Lieut-Colonel
Issuing Officer

for Colonel, C.E.F.
Rank

Date of Discharge March 22nd 1919.

O.C. R.C.H.A. Depot
Appointment

Signed at Kingston this 22nd day of March 1919

in Military District No. 3

File Reference No.

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.

M. F. W. 39a
200m.—2-18
H.Q. 1772-39-882

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. ..... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

.....

Medals and Decorations .....

.....

Remarks .....

.....

Signed at ..... this ..... day of 19

.....
Name of Officer

.....
Rank

.....
Appointment

On Demobilization, particulars called for on back of discharge certificate will not be completed. Auth. H.Q. 16-L-240, dated 18-11-18, 5MD.66-L-501, dated 21-11-18.

Paymaster

Auditor

M. or S.

Name and Address of Next of Kin Mrs S. A. Knox mother
111 Florence St
Ottawa, Ont.

Separation Allowance $ Effective Date

By Whom Paid

Payable to Relationship

Address

CASUALTIES, AFFECTING PAY AND ALLOWANCES

PARTICULARS	EFFECTIVE DATE	AUTHORITY

Regimental No. 345253 Rank Gunner Name Knox, John Munro

If in P.F. What Unit P.F. Allowances Original Unit C.E.F. S. 85th Battly

Place of Attestation Ottawa Transferred to Date Authority

Date of Attestation 20-4-18 Transferred to Date Authority

Assigned Pay $ 20.00 Date Effective 1-10-18 Authority M. H. W. 2583

Payable to Mrs Sarah Annie Knox Relationship Mother

Address 111 Florence St. Ottawa, Ont.

Stop-Payment Form (Assigned Pay) Rendered (Date) Effective

Discharged. Date and Place Authority

L. L. Job 48205
M. & D. 20-9-18-12M

MONTH	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT C	OTHER CREDITS $	OTHER CREDITS C	ASSIGNED PAY CREDITS $	ASSIGNED PAY 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	COL. No. 4 No.	COL. No. 4 DATE	CASH PAYMENTS COL. No. 1 $	COL. No. 1 C	COL. No. 2 $	COL. No. 2 C	COL. No. 3 $	COL. No. 3 C	COL. No. 4 $	COL. No. 4 C	ASSIGNED PAY CANADA	ASSIGNED PAY OTHER COUNTRIES	OTHER CHARGES $	OTHER CHARGES C	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C	TOTAL DEBITS $	TOTAL DEBITS C	BALANCE DEBIT $	BALANCE DEBIT C	BALANCE CREDIT $	BALANCE CREDIT C	DEFERRED PAY $	DEFERRED PAY C	PAY AVAILABLE FOR ISSUE $	PAY AVAILABLE FOR ISSUE C	SEP. ALL'CE	REMARKS
1918																																										
Sept	30	1.00	30	00					32	00																																		
Oct.	31	1.10	34	10	10	90			45	00	1	16	8	31					5	00	10	00					20	00					35	00		10	00						
Nov.	30	1.10	33	-					33	00	3	18							1	0							20	00					30	00		13	00						
Dec	31	1.10	34	10					34	10	6	21	11	84	24				10	00	7	00					20	00															

Carried Forward

Regimental No. ..... Rank ..... Name .....

MONTH	PAY				OTHER CREDITS	ASSIGNED PAY CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS								CASH PAYMENTS								ASSIGNED PAY CANADA	ASSIGNED PAY OTHER COUNTRIES	OTHER CHARGES		REGIMENTAL CHARGES		TOTAL DEBITS		BALANCE				DEFERRED PAY		PAY AVAILABLE FOR ISSUE		SEP. ALL'CE	REMARKS
										COL. No. 1		COL. No. 2		COL. No. 3		COL. No. 4		COL. No. 1		COL. No. 2		COL. No 3		COL. No. 4										DEBIT		CREDIT							
	No. OF DAYS	RATE	AMOUNT $	AMOUNT C	C	$	C	$	C	No.	DATE	No	DATE	No.	DATE	No	DATE	C	$	C	C	C	$	C			$	C	$	C	$	C	$	C	$	C	$	C	$	C		

Carried Forward

Paymaster

Auditor

M. or S.

Name and Address of Next of Kin: Mrs S. A. Knox mother, 111 Florence St, Ottawa, Ont

Separation Allowance $ — Effective Date

By Whom Paid

Payable to — Relationship

Address

CASUALTIES, AFFECTING PAY AND ALLOWANCES

PARTICULARS	EFFECTIVE DATE	AUTHORITY

Regimental No. 345253 Rank Gunner Name Knox, John Munro

If in P.F. What Unit — P.F. Allowances — Original Unit C.E.F. S. 85 Batt'y

Place of Attestation Ottawa — Transferred to — Date — Authority

Date of Attestation 20-4-18 — Transferred to M.P. #3 — Date 2-3-19. — Authority D.O. #61

Assigned Pay $ 20.00 ✓ Date Effective 1-10-18 ✓ Authority A. F. W. 2583

Payable to Mrs Sarah Annie Knox Relationship Mother

Address 111 Florence St. Ottawa, Ont.

Stop-Payment Form (Assigned Pay) Rendered (Date) ~~mured~~ 11-3-19 Effective 28-2-19.

Discharged. Date and Place — Authority

L. L. Job 48205
M. & D. 20-9-18-12M

MONTH 1918	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT C	OTHER CREDITS $	OTHER CREDITS C	ASSIGNED PAY CREDITS $	ASSIGNED PAY 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	COL. No. 4 No.	COL. No. 4 DATE	CASH PAYMENTS COL. No. 1 $	CASH PAYMENTS COL. No. 1 C	CASH PAYMENTS COL. No. 2 $	CASH PAYMENTS COL. No. 2 C	CASH PAYMENTS COL. No. 3 $	CASH PAYMENTS COL. No. 3 C	CASH PAYMENTS COL. No. 4 $	CASH PAYMENTS COL. No. 4 C	ASSIGNED PAY CANADA $	ASSIGNED PAY CANADA C	ASSIGNED PAY OTHER COUNTRIES $	ASSIGNED PAY OTHER COUNTRIES C	OTHER CHARGES $	OTHER CHARGES C	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C	TOTAL DEBITS $	TOTAL DEBITS C	BALANCE DEBIT $	BALANCE DEBIT C	BALANCE CREDIT $	BALANCE CREDIT C	DEFERRED PAY $	DEFERRED PAY C	PAY AVAILABLE FOR ISSUE $	PAY AVAILABLE FOR ISSUE C	SEP. ALL'CE
Oct	31	1.10	34	10					45	00	1	16	831						5	00	10	00					20	00					35	00			10	00					
Nov	30	1.10	33	—					33	00	37	18							10	—							20	00					30	00			13	00					
Dec	31	1.10	34	10					34	10	62	11	842						1000		700						20	00					37	—			10	10					
Jan	31	1.10	34	10					34	10	124	15	166	31					5	00	900						20	00					34	00			10	20					
Feb	28	1.10	30	80		25			31	05	189	15	200	27			148	27/1	500		6	—					20	00				25	31	25			10	00					
Mar	2	1.10	2	20					2	20																							167	25			12	20					
			168	30					179	45																							179	45									

REMARKS

Dr Balance to 30/4/18. ✓

Amos alley.
D. O #61 Trans M. D. #3
2-3-19.

OK

Blanket L.R.C. to.
M. D. 3. 10-3-19.

Carried Forward

Regimental No.....Rank.....Name.....

MONTH	PAY				OTHER CREDITS	ASSIGNED PAY CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS								CASH PAYMENTS								ASSIGNED PAY CANADA	ASSIGNED PAY OTHER COUNTRIES	OTHER CHARGES		REGIMENTAL CHARGES		TOTAL DEBITS		BALANCE				DEFERRED PAY		PAY AVAILABLE FOR ISSUE		SEP. ALL'CE	REMARKS
										COL. No. 1		COL. No. 2		COL. No. 3		COL. No. 4		COL. No. 1		COL. No. 2		COL. No 3		COL. No. 4										DEBIT		CREDIT							
	No. OF DAYS	RATE	AMOUNT							No.	DATE	No	DATE	No.	DATE	No	DATE		C		C		C		C				C		C		C		C		C		C		C			
			$	C	C	$	C	$	C											$	C							$	C	$	C	$	C	$	C	$	C	$	C		

Carried Forward

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps. 74th BATTERY, C. F. A., C. E. F.

Regimental No. 345253 Rank Gunner Name Knox, John Munro

Enlisted (a) ~~20~~ 18-4-18. Terms of Service (a) C. E. F. Service reckons from (a) ~~20~~ 18-4-18.

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

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

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				
Rwd Camp	25-9-18	Transfd to 85th Bty C.F.A.		16-9-18	TF HAS BEEN CHECKED WITH ATTESTATION PAPERS
		Auth. C.A. 1137			
					Major
					O.C. 85th Bty C.F.A.
		EMBARKED AT ..... ON H.M.T.			DATE .....
		DISEMBARKED AT ..... FROM H.M.T.			DATE .....
2-3-19	85 Bty	A.O.2-85 Bty C.F.A.	N. Westminster	2-3-19	Auth. Tel # 106 2-A.G. 26-2-19
3-3-19		T.O.S. Posted to Coy by			
11-3-19		S.O.S. to R.C.H.A.	Kingston		Graham Roberts Lt for MAJOR
					C.O. Artillery Bde., C.F.A., C.E.F., (Siberia)
		'Taken on Strength Part II Orders #70 dated 11-3-19			H.Q. 69
		Discharged on demobilization Auth. 3 M.D. 99-K-72 d/ 15.3-19			H.Q. 70
		Part II Orders #87 d/ 22.3.19			

Commanding "C" Battery R.C.H.A., C.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 en
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				

AUDITOR | PAYMASTER

M. OR S.

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

REGT. No. 345253 RANK Gnr NAME (IN FULL) Knox J. M. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? No — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
$1.10		

ORIGINAL UNIT C.E.F.: C.F.A. — IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO: R.C.H.A. Depot — DATE: 11.3.19. — AUTHORITY: D.O.70

DATE OF ATTESTATION: 20.4.18 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $: 20.00 ✓ — DATE EFFECTIVE: 1.3.19.

PAYABLE TO: Mrs. Sarah Annie Knox — RELATIONSHIP

ADDRESS: 111 Florence St. Ottawa Ont

ANY CHANGE IN ASSIGNEE OR ADDRESS: K-603

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE: Kingston — DATE: 22-3-19 — REASON: Demobilization — AUTHORITY: 3111.11 dated 99-Kr-72 15/3/19 — IF ENTITLED TO POST DISCHARGE PAY: No

A.P.

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.	ACQUITTANCE ROLLS COL. NO. 1 DATE	ACQUITTANCE ROLLS COL. NO. 2 NO.	ACQUITTANCE ROLLS COL. NO. 2 DATE	ACQUITTANCE ROLLS COL. NO. 3 NO.	ACQUITTANCE ROLLS COL. NO. 3 DATE	CASH PAYMENTS COL. NO. 1 $	CASH PAYMENTS COL. NO. 1 C.	CASH PAYMENTS COL. NO. 2 $	CASH PAYMENTS COL. NO. 2 C.	CASH PAYMENTS COL. NO. 3 $	CASH PAYMENTS 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							12	20	12	20															20										12	20	Cr. L.P.C. 2.3.19. El. 180.
2.3.19																																						
Mar	9	1.10	9	90					9	90																											22	10	Do. 69. Det. C.E.F.
12-22	11	1.10	12	10	35 00 22	10			69	20											49	20	20	00	✓						69	20	(49.				CK 203
											Discharged March 22nd 1919																										
											Lieut. Paymaster, Misc. Units, M. D. 3.																										

100M-1-19.—L. L. 53962-M & D. 9723.
M. F. W. 2596.
1772-39-139.

Date of Enlistment 20-4-18

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

R-4661

Date of Assignment 1-10-18

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

$20.00			

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion Siberian Draft

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1 MRS.SARAH ANNIE KNOX,
111 FLORENCE ST.,
OTTAWA,ONT. 20 20.00

2 % 345253 GNR JOHN MUNRO KNOX
TWENTY DOLLARS

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
						1023-J-40 Mrs Pechey 1029 14/3/19
Nov	M 4746		20	20	✓	L-H-11196-8-11-18 M-12-11-18
Nov	G 58960		20	20	✓	M/C closed 18/2/19 per telegram 11/3/19 from P.M. Liverpool
Dec	O 63071		20	20	✓	Vancouver BC
Jany	K 74561		20	20	✓	
Feby	K 77270		20	20	✓	
Mch	G ~~89231~~		~~20~~	~~20~~	-	G. 89231 ord^d Can 14/3/19. # L.C.O. 5099 Can 7/3/19

M. F. W. 128.
4'Om. 6-7-17-79-39-1141
L. L. 22320—M. & D. 7903.

AUTHORITY FOR NEW ACC'T. File 10236-J-40 J.D. Giles 7-11-18

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch E

OVERSEAS CONTINGENTS

2360

CANCELLED

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS

M. F. W. 128.
4'0M. 6-17—1772-39-1141
L. L. 22820—M. & D. 7933.

AUTHORITY FOR NEW ACC'T. .....