

ATTESTATION PAPER.

Depot Artillery Brigade.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

No. ~~34477D~~ 3108191

Folio.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... L A R O C H E.
- 1a. What are your Christian names?..... William Joseph.
- 1b. What is your present address?..... Gravenhurst, Ont., Canada.
2. In what Town, Township or Parish, and in what Country were you born?..... Bartley, Ont., Canada.
3. What is the name of your next-of kin?..... Kate La Roche.
4. What is the address of your next-of-kin?..... Gravenhurst, Ont., Canada.
- 4a. What is the relationship of your next-of-kin?..... Mother.
5. What is the date of your birth?..... May 6th, 1899.
6. What is your Trade or Calling?..... Butcher.
7. Are you married?..... Single.
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?..... Yes 2nd Depot Bn 2nd C.O.R. 3 mos.
If so, state particulars of former Service. Pte. (22 D3108191)
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? ..
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, William Joseph La Roche., 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.

W J La Roche (Signature of Recruit)Date May 23rd 1918 191 . [Signature] (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, William Joseph La Roche., 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.

William J La Roche (Signature of Recruit)Date May 23rd 1918 191 . [Signature] (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 Toronto, Canada this 23rd day of May 1918 191 .

[Signature] (Signature of Justice)

Description of William Joseph LeRocho. on Enlistment.

Apparent Age.....19 years.....0 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.....34 ins.
Range of expansion.....4 ins.

Complexion.....Medium

Eyes.....Brown

Hair.....Brown

Religious denominations { Church of England.....
Presbyterian.....
Methodist.....
Baptist or Congregationalist.....
Roman Catholic.....R.C.
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.)

Scar on left knee capt, scar below left knee, mole right side abdomen

Hearing O.K. Nose & throat O.K.
Each eye D. 30 Rhinitis, slightly enlarged tonsils

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 23rd 1910.....191

Place.....Toronto, Canada.

*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:—

DECLARED FIT BY MEDICAL BOARD
TORONTO MOBILIZATION CENTRE
J. M. O'Sullivan, C.M. M. O.
Medical Officer. PRESIDENT

CERTIFICATE OF OFFICER COMMANDING UNIT.

William Joseph LeRocho......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. Gilbert, Lieut. (Signature of Officer)
Commanding 69 Battery, C. F. A., C. E. F.
Date.....May 25.....191

10 PRB

ORIGINAL

E

No. 2 M. D. 1st. Depot Battalion 2nd. C.O.R. Regiment

Regtl. No. 3108191

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class One.)

1. Surname LaRoche.
2. Christian name William Joseph.
3. Present address Gravenhurst, P.O. Ont.
4. Military Service Act letter and number 467540
5. Date of birth 3rd. May 1899.
6. Place of birth Victoria Road, Ont. Canada.
(town, township or county and country)
7. Married, widower or single Single.
8. Religion R.C.
9. Trade or calling Laborer.
10. Name of next-of-kin Harry LaRoche.
11. Relationship of next-of-kin Father.
12. Address of next-of-kin Gravenhurst, P.O. Ont.
13. Whether at present a member of the Active Militia --
14. Particulars of previous military or naval service, if any --
15. Medical Examination under Military Service Act:—
(a) Place Gravenhurst, Ont. (b) Date 29th. October (c) Category A-2

DECLARATION OF RECRUIT

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

William Joseph LaRoche

(Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 20 yrs. mths.
Height 5 ft. 4 1/2 ins.
Chest measurement } fully expanded 35 1/2 ins.
range of expansion 3 1/2 ins.
Complexion Fair.
Eyes Brown.
Hair Light.

Distinctive marks, and
marks indicating con-
genital peculiarities or
previous disease.
Hearing normal. Visual
acuity, both eyes D20.
One vaccination left
arm in childhood.

Wm. Stewart
O. C. 1st DEPOT BN., 2nd C. O. R.
Regt.

Place Hamilton, Ontario. Date 25th. February 1918.

C.E.F. REGIMENTAL DOCUMENTS
WAR SERVICE RECORDS D.V.A.

LA ROCHE WILLIAM JOSEPH

3108191

1ST D. BN 2ND COR

09975

DEMOB





LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

H. O. No. *2* M. D. No. *2*
 Surname *La Roche* T. O. S. *19*
 Christian names *William Joseph* D. O. Pt. II *19*
 Regt. No. *3158 191* S. C. S. *19*
 Unit *69th Bty C.F.A.* Reason *Dis 20/7/17*
Demol
 Auth. *Do 202/17/7/17*
#26 G. R.

Next of Kin *La Roche, Kate* Relationship *Not Stated*
 Address *Gravenhurst, Ont* Also notif / :

BORN-Place *Canada, Ontario* Date *May 6th 1899*
 ATTESTED-Place *Toronto, Ont* Date *May 23rd 1918*

O/S R/C
 Complexion *Medium* Eyes *Brown* Hair *Brown*

NAME

REGT. No.

RANK AND UNIT

NEXT OF KIN

CABLE

No.

DATE

NATURE OF CASUALTY

Surname

La Roche

Christian names

William Joseph

Regtl. No.

3108191

Rank

Ens.

Unit

69th 2nd Bty

H. Q.

M. D. No.

213

T. O. S.

May 23rd 1918

D. O. Pt. II

163 of 12-6-18

S. O. S.

19

Reason

Auth.

Next of kin

La Roche Mrs Kate

Address

Gravenhurst, Ont.

Relationship

Mother

Also notify:

BORN—Place

Canada, Barter, Ont.

Date

May 6th 1899

ATTESTED—Place

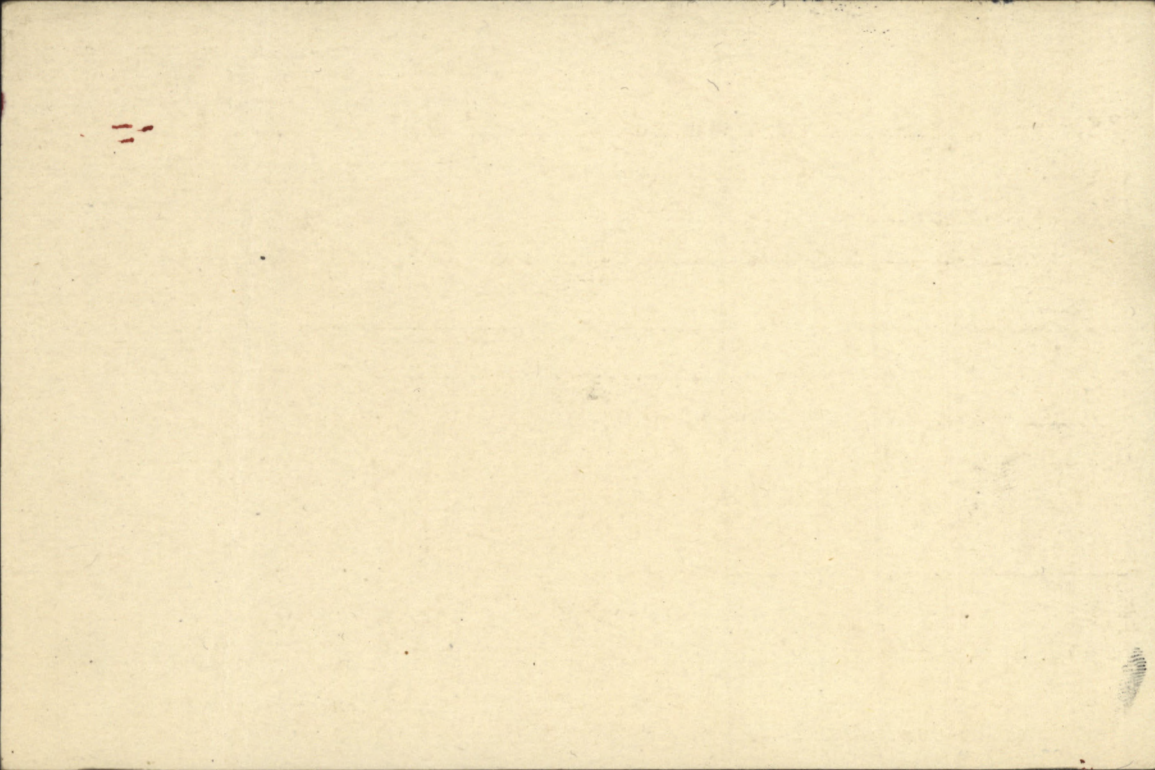
Toronto, Ont.

Date

May 23rd 1918

O/S

R/C



SURNAME. *La Roche*

2

CARD NO.

CHRISTIAN NAMES

William Joseph

FOLL.

REGL. NO.

310 8191

RANK

Pte.

UNIT

2nd Can. Ont. Regt. 1st Dep. Bn.

T. O. S. *Feb. 27 1918*

D.O. Part II No *58*

PMER CORPS

Nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

La Roche Harry,

RELATIONSHIP TO SOLDIER

Father,

ADDRESS

Gravenhurst, P. O. Ont.

COUNTRY OF BIRTH

Canada, Victoria Rd., Ont.

DATE

May 3rd 1899.

PLACE OF ATTESTATION

Hamilton Ont.

DATE

Feb. 25th 1918.

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

~~HA 913~~ ~~B~~
Number. 3108191 Rank Plc.

Surname. L A R O C H E

Christian Name. William Joseph

Unit. Can. Trench Corps Theatre of war. England

Date of Service. 18-10-18

Remarks. 40 Mrs. A. Stafford

Latest Address Gravenhurst. Ont.

Roll No. A Page 769

OCT 10 1926

Y 60023 - Lfsh

Reg. No. 3018191 Name Lea Roche C. H.
Rank Corps 1st Cavalry Brigade Age 19 Service 6 2/12
Ledger No. Serial No.

HOSPITALS**DATE****DIAGNOSIS**

M. F. W. 2553.

75M.—9-19.

1772-39-1332.

Original not
Fill in only.—Unit, Number, Rank and Name.

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

500M.—9-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps. 1 D. Bn 2 C.O.R.

Regimental No. 3108191 Rank Pte Name La Roche William Joseph

C. E. F.

Enlisted (a) 25.2.18 Terms of Service (a) 20. of War Service reckons from (a) 25.2.18

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)

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
27.2.18.	1/2 C.O.R.	M.S.A. Draftees reporting for duty	Hamilton	25.2.18.	D.O. 57.
10.5.18.	do.	S.O.S. "C.O.R." (Draftees under M.S.A.)	do.	9.5.18.	D.O. 130.
18.5.18.	do.	D.O. 130 of 10.5.18. Para. 3. should read 16.5.18. instead of as therein stated	do.	16.5.18	D.O. 138.
19.7.19.	20.9.19.	S.O.S. "in demob" w/c.	Loronto	20.9.19.	D.O. 262.
		2nd. C. Form			

Chas. Scott

Capt. for D.O. of P.

(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				

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

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

1. Surname LaRoche Christian name William Joseph2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 167540

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

4. Address (including street and number, if any) Gravenhurst P.C.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 29 day of October 1917, by the undersigned medical board sitting at Gravenhurst M.B.C. #15

5. Age as stated 20 Years 5 Months. 6. Apparent age 20 Years 5 Months7. Height 5 Feet 4½ Inches. 8. Weight 126 Pounds.9. Chest measurement { Minimum 32 Ins. Maximum 35½ Ins. 10. Complexion Fair { Eyes Brown Hair Light11. Physical development Good { Good Fair Poor 12. Smallpox marks none13. Number of vaccination marks { Right arm none Left arm 1 14. When vaccinated last childhood.15. Distinctive marks and marks indicating congenital peculiarities or previous disease none

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 A2 Eyesight Both D.20 Hearing normal.

A.R. Farrell Capt. President.A.B. Holmes, M.B. Member. S.S. Ball, Capt. Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>1-3-18</u>	<u>[Signature]</u>	<u>M.O.</u>	<u>26-2-18</u>	<u>[Signature]</u>	<u>M.O.</u>
		<u>M.O.</u>	<u>1-3-18</u>	<u>[Signature]</u>	<u>M.O.</u>
		<u>M.O.</u>	<u>5-3-18</u>	<u>[Signature]</u>	<u>M.O.</u>

Joined _____ day of _____ 191 _____ at _____

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment				
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT

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.

Signature of Man William Joseph LaRoche

CERTIFIED TRUE COPY

CAPT.

FOR: LT-COLONEL

O. C. Mobilization Centre
HAMILTON, ONT.

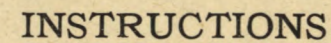
Christian Name.

Surname..

[illegible]

RANK..... 9/2-

No. 3108191



- ### 3. Condition on discharge.

[illegible]

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 2108101 Rank Pto. Name La Roche W. J.

Corps 1/2 C.O.B. who was Discharged

On 16.5.18 191... to Under no EWK

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1.5.18 191...
to 16.5.18 191..., the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month.....			Bal. Cr. from prev. month.....	10.25	
Advances } No.....			Reg'tl Pay..... 16 days at \$ 1 c.	16.00	
by } No.....			Field Allow. 16 days at \$.10	1.60	
Cheques } No.....			Separation Allowances* (Monthly)		
Assigned Pay and Sep'n Allee. No.....			Other Allowances*		
Other charges <u>Laundry</u>		50	Other Credits*.....		
Payment on transfer or discharge No.....	27.35		Bal. Dr. (to be deducted by new unit).....		
Balance Cr. (to be paid by the new unit).....					
Total.....	27.85		Total.....	27.85	

* Give particulars.

A monthly stoppage of \$.....(†) has.....(‡) been paid on account of Assigned
{ Pay for the month of.....191... }
{ and Sep'n Allee. for month of Nil 191... } (to) Assignee.....
(Address)

(†) Insert amount to be assigned, whether it has been paid or not.

(‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer

Outfit Allowance of \$..... has been paid by Paymaster, Military District No.....

REMARKS:—

State (1) date of enlistment 25.2.18
(2) if married and if a Separation Allowance Card has been submitted No No
(3) cause of discharge Under no authority D.O. 137
(4) authority for transfer

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date 16.5.18

Place Hamilton, Ontario

Capt.

Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay-list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

CONFIDENTIAL - EYE ONLY

LAST MAY CONFIDENTIAL

100-100000

100-100000

100-100000

100-100000

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 3108191 (Rank) Private -----
Name (in full) LA ROCHE, William Joseph, ----- enlisted in
the Sixty-ninth Overseas Battery, Depot Artillery Brigade, -----
CANADIAN EXPEDITIONARY FORCE at TORONTO, ONT., on the twenty-third
day of May, 19 18.

HE served in ----- CANADA AND ENGLAND -----
and is now discharged from the service by reason of -----

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

Age 20 years, 4 months.
Height 5 feet, 6 inches.
Complexion Medium.
Eyes Brown.
Hair Brown.

Marks or Scars Mole, right side,
abdomen.

William Joseph La Roche
Signature of Soldier

R. A. Plab Capt., Adj.
for O. G. 2nd Dep., Can. Garr. Regt., C. E. F.

Date of Discharge September 20th, 1919.

Rank -----

Appointment -----

Signed at TORONTO this twentieth day of September, 19 19.

in Military District No. 2.

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.

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

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

RE. P. W. 222
1919
RE. P. W. 222

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

350M.—5-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

78TH DEPOT BATTERY, C.F.A., C.E.F.

Unit, Regiment or Corps. 69th Battery, C.F.A. C.E.F.

Regimental No. 13108191 Rank Private Name LaROCHE, William Joseph

C. E. F.

Enlisted (a).....23/5/18. Terms of Service (a).....C.E.F. *NOT* Service reckons from (a).....23/5/18

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 - Butcher
Military - Gunner

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 <i>Oct. 4/18</i>			<i>AMF</i>
		Arrived England <i>Oct-18-18</i>			<i>Victoria</i>
		Transferred from to 78th Battery, C.F.A., C.E.F. with effect from August 28th 1918. Authority. C.D.O. # 973 of the 28-8-18.			
		<i>Shriffitts</i> Lieut. O.C., 69th Battery, CFA., CEF.			
		Transferred to 2nd Tank Batt with effect from Sept 2 auth. C.O. 1236.			
		22-11-18 Embarked Eng.			
		29-11-18 Debarked Canada			
					<i>O.C. 2nd Lt. Capt.</i> 78TH DEPOT BATTERY, C.F.A., C.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) 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				
NOV 22 1918	O/S	T.O.S. No. 2 District Depot, Part II, D.O. No. 237			<i>[Signature]</i> Lieut. Capt For O.C. No. 2 District Depot
26-12-18	S.O.S.	#2.D.D. on Transfer to 2nd Det. Bu C. G. R. PT II D.O. 253			<i>[Signature]</i> Capt for O.C. # 2.D.D.
	2nd Det. Canadian Garrison Regt., C.E.F., S.O.S. on transfer to No. 2 District Depot "Demobilization" Toronto 20-9-19 Part 2, D.O. # 262 dated 19-9-19, R.D. 1420, para. 3,			SEP 20 1919	discharge <i>[Signature]</i> Capt., Adjt. for O. C. 2nd Det., Can. Garr. Regt., C. E. F.

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.

M.S.A.

Unit, Regiment or Corps 1st Depot Btn., 2nd C. O. R.

Regimental No. 3108191 Rank Pfc Name La Roche William Joseph

Enlisted (a) 25-2-18 Terms of Service (a) Doft (pro-apt) Service reckons from (a) 25-2-18

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) Sabrier

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				
		Transferred to <u>Opdraft</u> From 1st Depot Batt'n, 2nd C. O. R.			
		Discharged - Erroneously ordered to report.			16/5/18

(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				

MILITARY SERVICE ACT, 1917.

69th Overseas Battery.

MEDICAL HISTORY SHEET.

ORIGINAL

D 310819112

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 LaRoche Christian name William Joseph
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule. Not available
3. Consecutive number on schedule of men reporting for service (if he appears on it) Not available
4. Address (including street and number, if any) Gravenhurst, Ont., Canada.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 23rd day of May 1918 1917, by the undersigned medical board sitting at Toronto, Canada.

5. Age as stated 19 Years 0 Months. 6. Apparent age 19 Years 0 Months
7. Height 5 Feet 5½ Inches. 8. Weight 130½ Pounds.

9. Chest measurement { Minimum 32 Ins. Maximum 36 Ins. 10. Complexion Medium { Eyes Brown Hair Brown

11. Physical development Good { Good Fair Poor 12. Smallpox marks Nil

13. Number of vaccination marks { Right arm None Left arm 2 14. When vaccinated last 2 mths ago

15. Distinctive marks and marks indicating congenital peculiarities or previous disease Nil rhinitis, slightly enlarged tonsils

16. Slight defects but not sufficient to cause rejection nil

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

A2

Hearing O.K. Nose & throat O. Each eye D. 30

John Dalrymple President. Earl Barclay Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
28.6.18		<u>W.M. Buttle</u> M.O.	11.6.18		M.O.
		M.O.	21.6.18		M.O.
		M.O.	28.6.18		M.O.

Joined 23rd day of May 1918 at Toronto, Canada.

JOINED ON ENLISTMENT	CORPS	REG'TL NUMBER	HABITS	DATE
Transferred to	<u>Depot Artillery Brigade.</u>	<u>3108191</u>		<u>May 23/18</u>
	<u>69th Battery</u>	<u>auth: C.O.A. 913 of 28/8/18.</u>		<u>3/19/18</u>
	<u>78th Battery</u>	<u>2nd Canadian Artillery</u>		<u>August 28th 1918.</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT
<u>Pekwawa Out</u>	<u>Sept 4/18</u>	<u>nil</u>	<u>Att</u>
<u>Exhibition Camp</u>	<u>Dec 20/18</u>	<u>nil</u>	<u>Att</u>

Signature of Man

Christian Name.

Handwritten signature: *[Signature]*

Vertical text on the right margin:

第 一 卷
第 二 卷
第 三 卷
第 四 卷
第 五 卷
第 六 卷
第 七 卷
第 八 卷
第 九 卷
第 十 卷
第 十一 卷
第 十二 卷
第 十三 卷
第 十四 卷
第 十五 卷
第 十六 卷
第 十七 卷
第 十八 卷
第 十九 卷
第 二十 卷

STATION.	Date of Arrival at the Station.	DATES OF						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.
		Admission into Hospital			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
KAPUSKASING		8	9	19	19	9	19	Tachycardia.	2	Precordial Pain - Pulse 120 Breath - difficult - rapid. Recovered.	<i>[Signature]</i> Capt. Medical Officer, Internment Station KAPUSKASING, ONT.

P. 9.

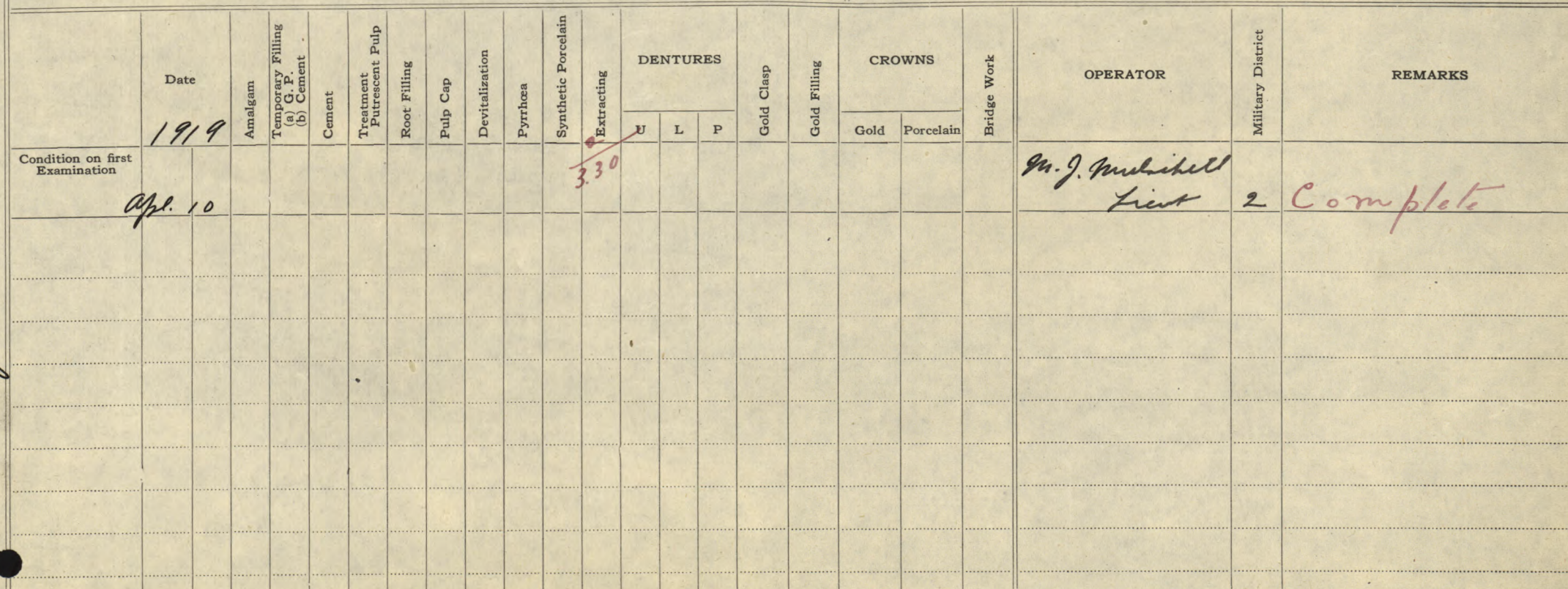
RANK *p/c*.....

RANK.

p/c:

No.

3108191



INSTRUCTIONS

1. The number of specimens of each species should be marked on the label as follows: 100 for the first 100, 200 for the next 100, and so on. The number of specimens of each species should be marked on the label as follows: 100 for the first 100, 200 for the next 100, and so on.

100 200 300 400 500 600 700 800 900 1000

100 200 300 400 500 600 700 800 900 1000

THESE ARE THE SHEETS OF THE COLLECTION

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. 3108190 Rank Private Surname LA ROCHE
(Give name in full)
William Joseph

Unit or Corps Garrison Regiment Birthplace Gravenhurst, Ontario

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

1. GENERAL DESCRIPTION:

Physique Fair Weight 130 lbs. Height 5 ft. 5 1/2 in. Colour of Eyes Brown
Nutrition Fair
Pulse 78
Condition of arteries normal
Vision Rt. 20/30 Left 20/30
Hearing (conversational voice) Rt. 25 ft.
Left 25 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 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.

APPROVED
SEP 19 1910
A. D. M. S., M. D. Z.

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at.....(Overseas)

Date SignedM.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.....(Canada)

Date SignedM.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]

Name

Gur. LaRoche W. J.

M. F. W. 41

100M-1-18.

1772-39-889.

Regimental No. 3108191

Unit

69 Btty 2 Tank Bn

Name and address of next-of-kin

Arr. 28/11/18

S.S. Agutannis

Date of enlistment

Place of

Married (yes or no)

No

Date and place discharged

Amount of pay assigned monthly \$

20⁰⁰

Reason for discharge

1/1/19 Pay

To whom payable

Mrs. K.

Character on discharge

Gravenhurst, Ont.

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					
Dec. 1	26	26	1	26	26	10	260	12	4060							J.O.S. reported to Cas. Subd 7/12 - 15/12 D.O. 232
									Dr Bal. 672							47.32 Dr. L.P.C. 2fd CLK DO 253.

M. F. W. 41
100M-1-18.
1772-39-889.

Name and address of next-of-kin

Date of enlistment

Place of “

Married (yes or no)

Date and place discharged

Amount of pay assigned monthly \$

Reason for discharge

To whom payable

Character on discharge

[illegible]

M. F. W. 41a.
120m. 1-18
1772-39.1213

Name. Laroché, W. J.

Regt'l No. 3108191 Rank Enr. File Numbers { WM-25-85
B-2

Former Units 69 Btry: Original Unit 2nd Tank Bn

Date of arrival in Canada 28.11.18 Boat "Aquitania" Port of Disembarkation Halifax

Rates of Pay:—Regt'l. 8/00 Field: 10/4 Date of arrival in M.D. 2

Separation Allowance. Date paid to Nil Rate Nil If continued by Chief Paymaster, England

Assigned Pay. Date paid to 31.12.18 Rate 20.00 If continued by Chief Paymaster, England

Name and address of Beneficiary { Mrs. Kate Larosche
Gravenhurst, Ont.

Pay claimed on English L.P.C. to 30.11.18 to be paid by new Unit from 1.12.18

Name of new Unit. # 2 District Depot Date L.P.C. forwarded to new Unit. 13/12/18

A/C charged on Eng. L. P. C. & 30-11-18.

L.L. 34682—M. & D. 8645.

Credit Balance shown on English L.P.C.		OTHER CREDITS DUE		TOTAL CREDITS		Charges to be made on account of advances since English L.P.C. made out <i>a.p.</i> On Boat At Cl. Depot &c.		OTHER CHARGES		TOTAL DEBITS		BALANCE TO NEW UNIT		REMARKS	
\$	c.	\$	c.	\$	c.	\$	c.	\$	c.	\$	c.	\$	c.	\$	c.
12	68			12	68										
						20	00								
						20	00								
								20	00						
Debit Balance				47	32					60	00				
				60	00					60	00			47	32
10.12.18. E.C.W. Rgs. 1/12/18 Boat 24.11.18 Quebec 1.12.18. Dec. 1918.															

M. F. W. 41a.
120m. 1-18
1772-39-1213

[illegible]

Rank **I79 Dft No2 Tank Bn**
Unit

Name **LAROCHE William Joseph**
If in perm. Corps, }
What Unit? }

Reg'l No. **3108191**

Married or Single **Single**

Place and Date of Enlistment **Toronto May 23/18.** Place of Birth **Bartley, Ont.**

Name and Address, Next-of-Kin **Kate La Roche**
Gravenhurst, Ont. Can.

Relationship **mother.**

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

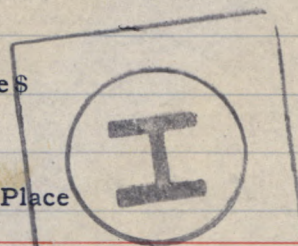
Relationship

Discharge, Date and Place

Reason

Character

H. W. & V., Ld.—9546-16.



N/E. R.B. No.	4247
File R.L.	
Category	OR C/N

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.				
		<i>Arrived in England.</i>		18 10 18 S S VICTORIA	
28.1.19,	CTDC,	TOS. from 2nd-Tks	Bvgtor	18 10 18	Pt2 O's '28
5.2.19,	CTDC,	SO. O CEF	Bvgton	22 11 18	1st O's '28
		in CANADA			

[illegible]

[illegible]

34-Lo-851

L# 1121
3-10-19

This space to be for numbers

Proceedings on Discharge.



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

No.	3108191
Rank	Private
Surname	BAROCHE
Christian Name	William Joseph
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	2nd Det., Canadian Garrison Regiment.
Date of Discharge	September 20th, 1919.
Place of Discharge	TORONTO, ONT.
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age.....20..... years.....4..... months.	Descriptive Marks Mole, right side, abdomen.
Height.....5..... feet.....6..... inches.	
Complexion Medium.	
Eyes Brown.	
Hair Brown.	
Trade Butcher.	
Intended place of residence	Gravenhurst, Ont.
(To be given as fully as practicable.)	
2. The above-named man is discharged in consequence of	
"ON DEMOBILIZATION."	
AUTHORITY R. O. 1420, para. 3.	
N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified 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 soldiers and the Officer Commanding his Squadron, Battery or Company.
	4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

M. F. B. 218.

100M.—1-17.
H. Q. 1772-39-113.

(OVER)

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. (*Squadron or Battery*), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place).....

(Date).....

Commanding

8. Certificate to be signed by the Soldier on Discharge

I hereby acknowledge that I 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.

(Place) TORONTO, ONT. Ensign L. K. K. (Signature of Soldier.)

(Date) Sept. 20th, 1919. (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) TORONTO, ONT.

(Date) Sept. 20th, 1919.

(Signature)

R. A. Plab Capt. Adjt.
for C. G. 2nd Det., Can. Garr. S. E. F.

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.)

John LaRue

Reg. Conduct Sheet, Militia form B. 203.	Attestation Paper, Militia Form B. 232.
Squadron } Battery } Company }	Proceedings on Discharge, B. 203.
Copies of Convictions by C. F. in MS.	
Med. Hist. Sheet, Militia Form B. 313.	In the case of recruits who are rejected on final approval, the discharge documents will consist of:
Medical Report for Invalid, B. 227.	(a) Proceedings on Discharge.
Statement of Man's Account on Transfer and Last Pay Certificate, D. 877.	(b) Attestation.
*Only if discharged "Medically unfit."	(c) Medical History Sheet on the event of such having been prepared.

N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	Attestation Paper,	Militia Form B. 235.
Squadron } Battery } Company }	Conduct Sheet, " B. 263a.	Proceedings on Discharge	" B. 218.
Copies of Convictions, by C. P.		in MS.	
Med. Hist. Sheet,	Militia Form B. 313	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.)	
Medical Report for Invalid*	" B. 227.		
Statement of Man's Account on Transfer and Last Pay Cer- tificate,	" D. 877.		
*Only if discharged "Medically unfit."			

N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

Additional Certificate in the case of a Soldier who takes his discharge on his own request.

I hereby declare that I am a free man and will request to be discharged from His Majesty's Service.

Statement of Service.

Service from the 1st day of 18 to the 1st day of 18, which the Record of Service is completed.

Total years and months.

Registration of Discharge.

The discharge of the above named man is hereby confirmed.

(Place Stamp Here)

(Signature)

Date

ORIGINAL

2nd Det., C.G.R.

AUDITOR WJH PAYMASTER JH

M. OR S. Single.

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

REGT. No. 3108191, RANK Pte. NAME (IN FULL)

LA ROCHE, Wm. Joseph

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C. E. F.	IF IN P. F. WHAT UNIT	TRANSFERRED TO	DATE	AUTHORITY				
ADDRESS					PLACE OF ATTESTATION								
					DATE OF ATTESTATION								
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				ASSIGNED PAY, \$	\$20.00	DATE EFFECTIVE						
TO WHOM PAID	RELATIONSHIP				PAYABLE TO	Mrs. K. La Roche, Gravenhurst, Ont.	RELATIONSHIP	ANY CHANGE IN ASSIGNEE OR ADDRESS					
ADDRESS					ADDRESS								
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE		EFFECTIVE						
					DISCHARGED	Toronto	DATE	20-9-19	REASON	Demol.	AUTHORITY	DO. 262	IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A.			OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL		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				DEBITS	DEBIT	CREDIT									
																		\$		C.	\$	C.	\$	C.	\$	C.
1919.																										
Jan.	31	1 ¹⁰	34 10	8 80	-	42	90	32 85	33 240	33 588	5	✓	4 48	20	✓	2 20	1 22	32 90	✓	10	✓	Subs. 21.1.19 while o/c #2 D.D. Park School D.O. 21. A.W.L. m.m. 15.1.19 to 17.1.19, 2 days D.O. 21. Retd. from o/c 4.2.19. D.O. 37. Subs. fr. to 3.2.19. MFC 512.				
Feb.	28	✓	30 80	2 40	✓	33	20	35 516	36 127	36 439	5	✓	8 20	20	✓			33 20	✓	-						
Mar.	31	✓	34 10			34	10	38 0292	58 1580	58 2000	5	✓	7 72	20	✓	1 38		34 10	✓	-						
			99 00	11 20	-	11	020			15	-		20 40	60	-	3 58	1 22	100 20	-	10						
Apr.	30	11 ¹⁰	33 -	✓	10 -	✓	43 -	✓	58 3209	58 3636	58 4085	5	✓	8 -	20 -	✓			33 -	✓	10	✓				
May	31	1 ¹⁰	34 10			10 -	✓	44 10	52 07	85 638	5	✓	20			2 61	514	27	33 02	✓	11 08	✓	M.F.C. 512 ✓ M.F.C. 512 ✓ M.F.C. 512 ✓			
June	30	1 ¹⁰	33 00	✓	11 08	✓	44 08	67 034	67 332	72 276	5	00	✓	7 53	20 00	✓	1 55	✓	34 08	✓	10 00	✓	M.F.C. 512			
July	31	1 ¹⁰	34 10	10 00	✓	44 10	85 716	89 010	89 222	5	00	✓	8 58	20 00	✓	52	✓	34 10	✓	10 00	✓	M.F.C. 512				
Aug	31	1 ¹⁰	34 10	10 00	✓	44 10	89 792	90 110	90 217	5	00	✓	4 31	20 00	✓	09	2 20	1 20	1 30	34 10	✓	10 00	✓	AWL 5/8/19 - 6/8/19. Forfeits 2 days P.A. DO 230 M.F.C. 512 M.F.C. 512 M.F.C. 512		
Sept	20	1 ¹⁰	22 00	35 00	✓	67	00	90 497	90 731	90 731	5	00	✓	12 20	00	✓			137 00	✓	70 00	✓	Wm. J. La Roche Captain Paymaster, 2nd Det. Canadian Garrison Reg't.			
100 days			280 -	✓	280 -																					
																							</			

[illegible]

Date of Enlistment

23-5-18

MILITIA AND DEFENCE

L-11342

Date of Assignment

Separation and Assigned Pay Branch

1st Oct. 18

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

20			
----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. 3108191

Rank

Promoted

Reverted

Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

2nd Tank Battr.

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

MRS. KATE LAROCHE,
GRAVENHURST,
ONT.20 20.00
% 3108191 GNR. WILLIAM JOSEPH LAROCHE
TWENTY DOLLARS

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Nov.	N. 656		40.	40.	
Dec.	O 65782		20	20	

10679-10-19

31-12-18

A/c Closed

Ret'd per.....

Date.....

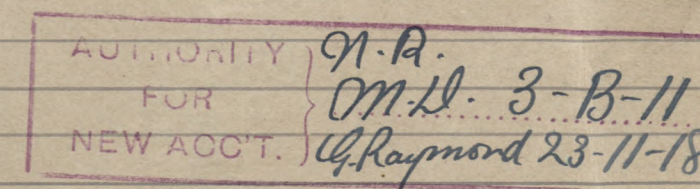
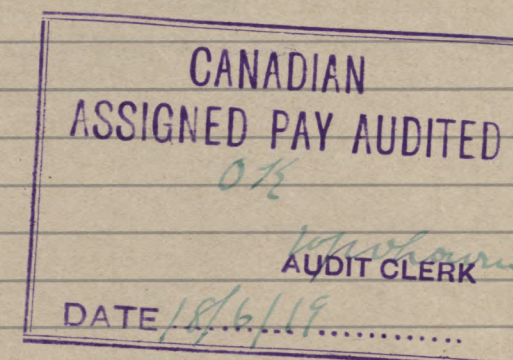
Clerk.....

Acquitancia

28-11-18 F.X. 3-12-18

Clerk.....

M.R. DeLong 29564



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

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/AAmount
A/P

Total

REMARKS

M. F. W. 128.
400M. 47-1772 89-1141
L. L. 2320-M. & D. 7993.

AUTHORITY
FOR
NEW ACC'T.