

card  
& me!

160TH B

DUPLICATE

# ATTESTATION PAPER, B

No. 651431

Folio. V

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? *Martin*
- 1a. What are your Christian names? *John*
- 1b. What is your present address? *Chippawa Hill Ont*
2. In what Town, Township or Parish, and in what Country were you born? *Sauguen Reserve - Ont.*
3. What is the name of your next-of-kin? *Mathew Martin*
4. What is the address of your next-of-kin? *Chippawa Hill*
- 4a. What is the relationship of your next-of-kin? *Father*
5. What is the date of your birth? *July 27th 1894*
6. What is your Trade or Calling? *Sailor*
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?  
If so, state particulars of former Service. *No*
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, *John Martin*, 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 *January 18th* 1916. *John Martin* (Signature of Recruit)  
*G. A. Stout* (Signature of Witness)

### OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *John Martin*, 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 *January 18th* 1916. *John Martin* (Signature of Recruit)  
*G. A. Stout* (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 *Chippawa Hill Ont.* this *Eighteenth* day of *January* 1916.

*G. A. Stout* (Signature of Justice)  
*J. P.*



# Description of John Martin on Enlistment.

Apparent Age 31 years 6 months.  
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 5 3/4 ins.

Chest measurement { Girth when fully expanded 38 1/2 ins.  
Range of expansion 21 ins.

Complexion Dark

Eyes Hazel

Hair Black

Religious denominations. { Church of England  
Presbyterian GM  
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).

Scars on right side of neck below ear and angle of jaw

## 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 25 Jan 1916

Place Sourhampdon

Arthur J. Scott  
Surgeon Major RV  
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 Martin 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.

A. W. Air (Signature of Officer)  
Lt. Col

Date Jan 18th 1916



## ATTESTATION PAPER.

No. 651431

Folio.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

## QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? *Martin*
- 1a. What are your Christian names? *John*
- 1b. What is your present address? *Chippawa Hill Ont.*
2. In what Town, Township or Parish, and in what Country were you born? *Saugen Reserve*
3. What is the name of your next-of-kin? *Mathew Martin*
4. What is the address of your next-of-kin? *Chippawa Hill Ont. Canada*
- 4a. What is the relationship of your next-of-kin? *father*
5. What is the date of your birth? *July 27th 1894*
6. What is your Trade or Calling? *Sailor*
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?  
If so, state particulars of former Service. *No*
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, *John Martin*, 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 *January 18th 1916* *John Martin* (Signature of Recruit)  
*T. A. Stout* (Signature of Witness)

## OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *John Martin*, 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 *January 18th 1916* *John Martin* (Signature of Recruit)  
*T. A. Stout* (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 *Chippawa Hill Ont.* this *Eighteenth* day of *January* 1916.

*T. A. Stout* (Signature of Justice)



# Description of John Martin on Enlistment.

Apparent Age 21 years 6 months.  
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5-5 3/4 ft. 5 3/4 ins.

Chest measurement { Girth when fully expanded 36 1/2 ins.  
Range of expansion 4 ins.

Complexion Dark

Eyes Hazel

Hair Black

Religious denominations.  
Church of England.....  
Presbyterian.....  
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).

Scars on right side of neck below ear and angle of jaw

## 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 18 Jan 1916

Place Southern Ontario London Mass RV  
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 Martin 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.

[Signature] (Signature of Officer)  
Lt. Col.

Date Jan 18th 1916



## REGIMENTAL DOCUMENTS

NAME

Martin John

REGT. NO.

651431

UNIT

160th

Sgt

H Q. FILE NO.

9-5-17

S

## CONTENTS

DATE RECEIVED

M

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505  
REFERENCE

NON-EFFECTIVE BY

DEATH

Category

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)

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

C9795

DISCHARGE

Category

Med. Unfit

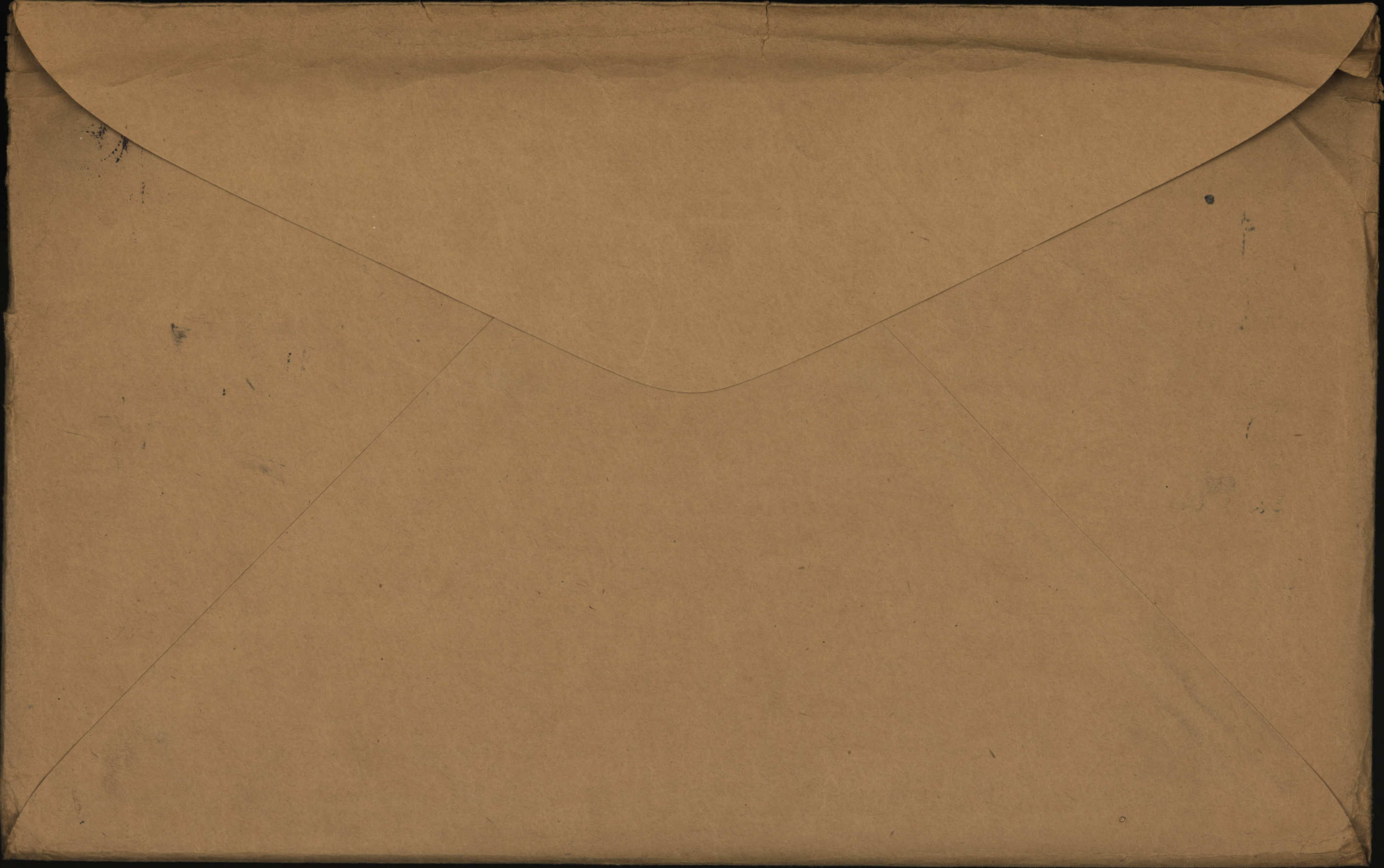
DESERTION

47	1
58	2
7	2
3	

H

407918







Number.

651431

Rank.

Pte.

Surname.

MARTIN

Christian Name

John

Units

18th Bn. Can. Inf.

Theatre of War.

France

Date of Service.

28-3-18

Remarks.

Chippewas Hill  
Ont.

Latest Address.

235 King St. E.

Toronto, Ont.

Roll No.

"B" Page 5657



No.

RANK

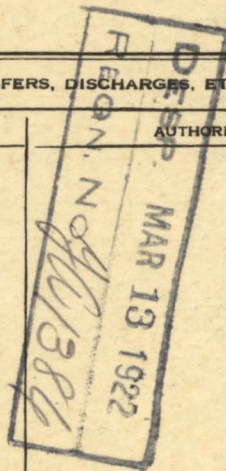
NAME

T. O. S.

UNIT

M. D.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY





NAME

C/ *Martin, John*

RANK &amp; NO.

*Pte.*

CORPS

*160<sup>th</sup>*

ENLISTMENT, PLACE

*Chippawa Hill*

DATE

*Jan. 18, 1916*

FORMER CORPS

*Nil*

COUNTRY OF BIRTH

*Canada, Saugueen Reserve*

NEXT OF KIN

*Martin, Mathew (Father)*

ADDRESS OF NEXT OF KIN

*Chippawa Hill, Ont.**Also Notify*

DISCHARGE, PLACE

*Mrs. R. H. Martin Pte. S.**auth. save Pte. 28-4-19 235 King St, E. Toronto, Ont.**MO. 2.  
Sas. 1130 of 25-4-19 742  
MO. 1130 of 25-4-19 742**651431**Batt.**"S"*



REMARKS:



Name \_\_\_\_\_

Тонн

Rank

PTE

Reg. No.

Unit

*Next of Kin*

Canada

14p

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
18-8-	106 H Rues.		"	B391	H263.	340070
20-8	3rd M. L. Cardiff	Sir L. Hauch		B311		24589
12-9	Woodcote PK & from		do	B311		26451
25-9	Discharged		,	B312		8237
RK 1259	Furling 25/9 to 7/10	P.L.H. 2500				



[illegible]



LEDGER No. 934

SERIAL No. 17.30191 7

REG. No. 651431 NAME Martin Jno

RANK Pte CORPS SD 2 AGE 24 SERVICE 6  $\frac{10}{12}$  6  $\frac{9}{12}$  7  $\frac{11}{12}$

HOSPITALS

DATE OF ADMISSION

1 Spadina Civil Toronto

12-4-19

2

3

DIAGNOSIS Tuberculosis

TRANSFERRED TO

DISPOSITION Disch 17.4.19 148 Treatment

CATEGORY

M.F.W. 2553.

1126-D.P.-50M-12-18.

1772-39-1832.

P.T.O.



REMARKS:



NAME

RANK AND CORPS

CABLE

NO.

DATE

NATURE OF CASUALTY

REG'T'L No.

H. Q. FILE No. 649.

FOLLOWS

No.

FOLLOWS

M of H.

5268

25-68. 23-8-18.

15-2.

H.L.B. 291 22-8-18

Matthew Martin (father)  
Chippawa Hill OnlyAdm 3rd West. Gen. Cardiff  
Aug 20th 1918. L.S.W.L. Hand



LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

B311 <sup>(2)</sup>	To Mil. Con. Wdeate - Pl. Epson	12-9-18	Slit. Lt. hand
B322 <sup>(2)</sup>	Discharged	25-9-18	" " "



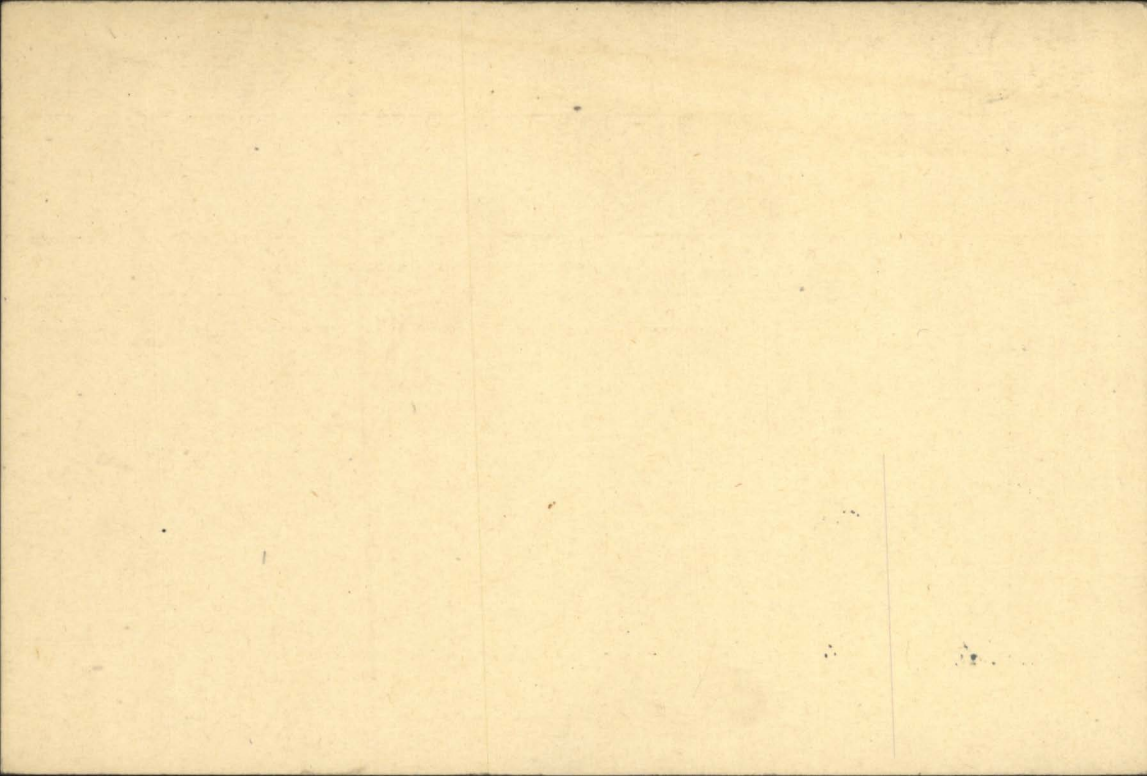
No 651431 RANK *Pfc.*NAME *Martin John.*T. O. S. *18-1-16.*  
*(00 20-24-1-16)*UNIT *160<sup>th</sup> Battalion*

M. D. /

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
<i>1916.</i>	<i>1916.</i>			
<i>Jan 18.</i>	<i>Jan 31.</i>	<i>n.</i>		
<i>Feb.</i>		<i>n.</i>		
<i>Mar</i>		<i>n.</i>		
<i>Apr.</i>		<i>✓</i>		
<i>May</i>		<i>✓</i>		
<i>June</i>		<i>✓</i>		
<i>July</i>		<i>n.</i>		
<i>Aug.</i>		<i>✓</i>		
<i>Sept.</i>		<i>✓</i>		
<i>Oct.</i>		<i>n.</i>		

UNIT SAILED  
OCT 17 1916







SURNAME

CHRISTIAN NAME OR NAMES

REG. NO.

MARTIN.

J.

651431.

RANK

UNIT

Co.

TROOP

BATTY.

Pte.

W.O. 18.

HOSPITAL

DATE OF ADMISSION

3rd. W.G.H. Cardiff.

20-8-18.

1.

*Woodcote Park. Epsom.*

HOSP. 12-9-18.

2.

HOSP.

3.

HOSP.

4.

HOSP.

DIAGNOSIS S.W. L. Hand.

1.

2.

3.

DISPOSITION

C.L. 22-8-18. B291.

*Dis. 25-9-18*

DATE

REMARKS

*14-9-18 B 311(2)**27-9-18 B 322-2*

A.M.D. 2 Dept.

Beh. of D.G.M.S. O.M.F.O. London.



# EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

2.

3.

4.

5.

6.

7.



Name L/J. MARTIN, John Rank Pte. Regtl. No. 651431  
 Fyle Depot 24- Ma- 653  
 Original unit 160th Bn Present unit 160th Bn M. or S. M. Age 24 Religion Meth Ref. H.Q.   
 Port, ship and date of arrival St. John Melita 2-3-19.  
 Next of kin Father Mathew Martin Chippewa Hill Ont.  
 Address on leave Same  
 Address on discharge 235 King St., E., Toronto  
 Transportation issued ☒ Yes ☐ No Date  Character on discharge   
 Previous occupation Sailor Date and place of enlistment Chippewa Hill Jan 18/16.  
 Diagnosis Tubercle of lung Date of Medical Boards 16-4-19

Date. T.O.S.	Remarks.	Pt. 2 Order No.
21-2-19	Posted to Cas. Co. (Ex. Camp) 2-3-19.	
	Leave & Subs. from 4-3-19 to 18-3-19.	67
9-4-19	Posted to Cas. Co (Park School)	99



Date.

Remarks

Pt. 2  er No.

12-4-19 POSTED FROM CAS.CO. PK.SL. TO HOSPITAL SECTION

104

Cas.Co. to S.M.H. 12-4-19

H.S. 105

19-4-19 S.O.S. HOSPITAL SECTION TO CASUALTY COY. PARK SCHOOL.

111.

25-4-19 SOS DISCH.MED.UNFIT( TO TAKE FURTHER IN PATIENT  
TREAT'T WITH THE DEPT OF S.C.R.)(NOT ENTITLED TO WS.G.  
OR C.A.)

113.



CERTIFIED CORRECT.  
Date 24 APR 1918  
CAN. RECORDS DIVISION.

Report

Date

From whom received

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.

18-7-8 1600pm

Awarded 1st Bdg.

Witley

18.1.18

Pt II #24 JdB

*W. B. Charter*

LIEUT.

FOR LT: COL: I/C RECORDS, C.O.M.F.

29-3-18

2 Can I.B. Arr from 4 Can Res Bn

2 Can IBD

29.3.18

Nom Roll

Depot

Eng & T.O.S. of 18 Can Bn

ETAPLES

Pt II Ord 27 d-5.4.18

3-4-18

C.C.R.C.

Arr at Can. Corps Reinf. Camp

3.4.18

Nom Roll

17-8-18

18 Bn

Joined 18th Can Bn

In the Fld

13.8.18

AF.B.213

24-8-18

18th Bn.

Wounded.

In the Fld.

16-8-18

B. 213.

18-8-18

10 Gen.

GLW. hand L. (s)

Adm.

10 Gen.

18-8-18

W. 3034

(No. W. 603)

19-8-18

do

GLW. hand L.

Trans. to England

19-8-18

do

(bat. H. 1056)

do

A.T.  
ESSIQUIBO

GSW. hand L.  
(severe)

Adm. A.T. ESSIQUIBO

19.8.18

AF.W. 3083

(Can. Sect. No 5797)

Posted to Western Ont

Regtl Depot, WITLEY

Pt II Ord. 79, 2/9/18.

*Whogan*

Major  
Canadian

for Lt.-Col., A.A.G.

Section. G. H. O. 3rd Echelon B.E.F.



*Al. S. B. Class A.*

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

# Casualty Form—Active Service.

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

250M.—1-16.  
H. Q. 1772-39-920.

Unit, Regiment or Corps 160th O. S. Battalion, C. E. F.

Regimental No. 651431 Rank Pte Name Martin, John

C. E. F.

Enlisted (a) 18-1-16 Terms of Service (a) 6 E. 7 Service reckons from (a) 18-1-16

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

**Duration of War.**

Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) (Sailor)

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 38, 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. 38, or other official documents.
Date	From whom received				
		Embarked-Canada	Halifax	17-10-16.	
		Arrived - England	Liverpool	28-10-16.	
23/2/18	O.C. 160th Bn	S.O. Hon transfer to 4th Bn Reserve Bn	Witley	23/2/18	D.O. Parts 28 RB Whitehead FOR O.C. 160th CANADIAN INFANTRY BATTALION
26-2-18	O.C. 4th Res. Bn.	T.O. S. 4th Res. Battalion	Bramshott	24-2-18	Pt. 2 Order No. 48.
29-3-18	O.C. 4th Res. Bn.	Having proceeded overseas to 18th Bn. is S.O. S. 4th Res. Bn.	Bramshott	28-3-18	Part 2 Order No. 55.
					<i>W. D. Barlow</i> A/Adj. 4th Canadian Res. Battalion.

(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.]

OVER



To be made out in duplicate.

H.Q. 54-21-23-53

## PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

## INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

- (1) Name of Overseas Unit which Soldier joins..... **160th Bruce Battalion**
- .....
- (2) Regimental Number..... **651431**
- (3) Full Name of Soldier..... **MARTIN, John**
- .....
- (4) Place of Birth..... **Saugeen Reserve, Ont.**
- .....
- (5) Are you married, or not?..... **No**
- (6) If married, state,
- (a) Full name of your wife.....
- .....
- (b) Present Postal Address.....
- .....
- (7) Are you a widower?..... **No**
- (8) Have you any children?.....
- If so, give number of boys and girls.....
- Also their names and ages.....
- .....
- .....
- .....
- .....



(9) Is your Father alive?.....Yes.....

If so, state name and address.....Mathew Martin, Chéppewa Hill, Ont......

(10) Is your Mother alive?.....No.....

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

(11) If your Mother is a widow.....

Are you her sole support, or not?.....

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

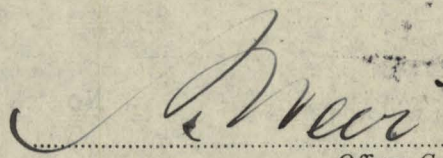
(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

(15) Are you insured?.....No.....

If so, in what Company?.....

Have you made arrangements for payment of your Insurance premium?.....

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

.....Lt.Col.  
Officer Commanding.

Date.....June 6th 1916.....

160th Os. Battalion. C.E.F.



# **Medical Examination upon leaving the Service** **of an Officer fit for general service or a Soldier fit for duty.**

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank PRIVATE Name JOHN Surname MARTIN  
 Unit or Corps 18<sup>th</sup> BATTN. (If a soldier) Regtl. No. 651431  
 Born at SAUGREEN RESERVE on, date July 27<sup>th</sup> 1894  
 Signature (for identification) John Martin

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

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

Weight 145 lbs.  
 Height 5 ft. 5 1/2 ins.

**2. NUTRITION AND DIATHESIS?**

Good

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

**3. NERVOUS SYSTEM?**

Normal

**4. RESPIRATORY SYSTEM.**

nor.

**5. HEART?**

Abnormal Sounds? no.  
 Abnormal Size? no.  
 Pulse Rate? 92 Intermittence or irregularity? no.

**6. ARTERIES.**—Any hardening?

no.

**7. DIGESTIVE SYSTEM?**

nor.

**8. GENITO-URINARY SYSTEM?**

Urinalysis—s.g.? 1.018 Reaction? neut Albumen? nil Sugar? nil

**9. SKIN, MIDDLE EAR, EYE**

or any other part?

V.R.C. 4/6

V.S.C. 4/6

skin nor.

ears & hearing

normal.

V. Thaler Capt. came

**10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe.**

no.

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

Good

Examined at Witley

Date 27-11-18

Signed L. Wagner Lt. Col. M.O.

Signed Gen. F. L. Fuller Capt. came

If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.



Medical Examination upon leaving the service

Office of the Surgeon General, Department of the Army

MARTIN

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1914

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65-1431. Ple

20 / 3 / 19

Martin J.

A fairly well formed chest

Expansion 32 - 35 1/2 -

<sup>several</sup> Scars on Right side of neck due to removal of glands in 1910

Several hard calcified glands are present above the right clavicle.

Resonance is impaired over the right upper lobe & the breath sounds are of a bronchial character. Coarse dry clicking

sounds are heard above the level of the second rib - <sup>these disappear on cough</sup> wheezing bronchial & medium sized moist rales are heard in the axillary region.

7/4/19. <sup>See Roy report</sup> Dry. medium rales are heard below & above clavicle on right side - Coarse Rales heard in left axilla.

In view of Physical findings & Roy report, would recommend this man for 3 months sanitarium treatment under DCR.

Diagnosis Semi active Tuberculosis with Fibrosis -  
Origin before enlistment, aggravated by service.

H. H. Hinesey Capt

14/4/19 Above Findings confirmed cpx  
H. H. Hinesey  
Major.







NAME OF SOLDIER.....  
MARTIN, John

REGIMENT.....18th Bn

RANK

Pte

No. 651431

Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhoea	Synthetic Porcelain	Extracting	DENTURES			Gold Clasp	Gold Filling	CROWNS		Bridge Work	OPERATOR	Military District	REMARKS	
											U	L	P			Gold	Porcelain					
Condition on first Examination	<i>Dental History 28-11-18. Fit.</i>																					
APR 17 1919	<i>Bischarge examination at SPADINA M.H.</i>																					
	<i>Dentally fit.</i>																					
	<i>MAJOR J. G. ROBERTS</i>																					
	<i>SPADINA M.H.</i>																					

## 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.







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URINALYSIS REPORT  
(for Board)

Regtl. No. 6514361.....

Rank..

Rank..

Name..

Unit..

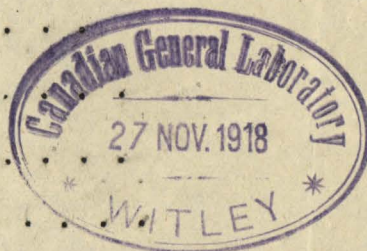
Sp. Gravity.....

Reaction.....

Albumen.....

Sugar.....

Microscopic.....



*Admission*

Captain, C. M. C.,  
for Major, C. M. C.,  
C. G. Gen. Laboratory







JM.

Rank

Name

MARTIN, John.

Reg'l No.

651431

Unit 160th Bn.

If in perm. Corps,  
What Unit?

Married or Single Single.

Place and Date of Enlistment Chippawa Hill, Ont. 18th Jan. Place of Birth Saugeen Reserve.  
1916.

Name and Address, Next-of-Kin Mathew Martin.

Chippawa Hill, Ont, Canada.

Relationship Father.

Assigned Pay Monthly \$

Payable to

Separation Allowance \$

Payable to

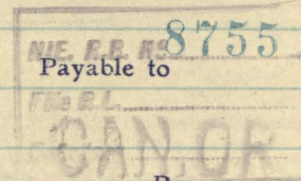
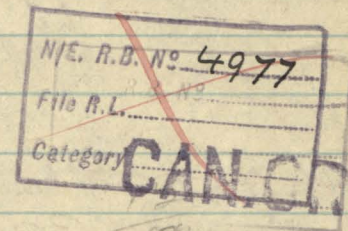
Relationship

Relationship

Character

Discharge, Date and Place

Reason



Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
ARRIVED IN ENGLAND "S.S. METACAMA 28-10-16					
10-1-17	160 Bn	Adm. to Gen Hosp.	Bramsholt.	10-1-17	Pl II D.O. 10 mumps.
12-1-17	"	Disch. from Gen Hosp.	"	11-1-17	" 12 "
18.2.18	"	Awarded G.B. Badge	Witley Pt	18.1.18	" 24
23.2.18	160th BN	S.O.S., TO 4th RES	WITLEY	23.2.18	FT II 28 4th RES 48 d/26/18
29.3.18	4th Res	Posted TO 18th BN.	O/S BSHOTT	28.3.18	Pl II 75 d/18 HEN 27 d/5/18
24.8.18	WORD	WOUNDED	France	18.8.18	P223 No 3405-11
26.8.18	WORD	T.O.S from 18 Bn	Witley Pt	20.8.18	Pl II 0200
3.9.18	18 Bn	SOS to WORD	field "	19.8.18	" 79 O.C.
30.9.18	WORD	on leave to 2660	Witley "	25.9.18	" 230 d/2660 23/0/30 9/18

Wo



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.				
7.11.18	WORD.	off boat to 1st 66D	Witley Pt	3.11.18	5/1st 66D 306 of 5.11.18 D0263
		and 505 to 4Res.			+4Res 263 of 6.11.18
4.12.18	4Res.	S.O.S to WORD	-	4.12.18	- 287#WORD 287 of 5.12.18
6-12-18	<del>H.C.R.D.</del>	<del>S.O.S to G.F. in Canada</del>	<del>-</del>	5-12-18	<del>- 288</del>
7-12-18	<del>WORD</del>	<del>P28 288. insofar</del>	Witley	7-12-18	P28 289
		as it refers to this			
		man is now cancelled	Pt -	30.11.18	- 307.
31.12.18	-	on board EDD BuxT		30.12.18	- 307.
8.2.19	4Res. B.	Was Married with perm	Pt. Witley	28.9.18	" 33
		of S. Albans			
1-3-19	WORD.	S.O.S to C.E.F. Canada	" "	21-2-19	" 51



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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.

Unit, Regiment or Corps. ....

Regimental No. 651431 Rank plc Name Martin John  
C. E. F.

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

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).. ..

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				

FEB 21 1919 O. S. T. O. S. No. 2 DISTRICT DEPOT, TORONTO. 1919 PART II D. O. 67

Dis. #2.D:D. April. 25th. 1919. Pt. 11# 113

*Graham Roberts*

O. C. Discharge Sections,  
No. 2 District Depot

*G. Roberts* Lieut.  
For O. C. No. 2 District Dep.

(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				



Army Form B. 103.

Regimental Number 651431**Casualty Form—Active Service.**Regiment or Corps 160 BN CEFRank PTE Surname MARTIN Christian Name John

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

Enlisted (a) 18.1.16 Terms of Service (a) DO W Service reckons from (a) 18.1.16

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

Extended { ..... } Re-engaged { ..... } Qualification (b) .....  
or Corps Trade and Rate .....

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

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked...			
<u>26.8.18</u>	<u>WORD</u>	<u>TOS from 18 Bn</u>	<u>Witley</u>	<u>20.8.18</u>	<u>PL II 0200</u>
			<u>Charter</u>		
<u>30-9-18</u>	<u>2nd G.O.D.</u>	<u>attached to 2nd G.O.D.</u>	<u>Bramshott</u>	<u>25.9.18</u>	<u>PL II No. 231</u>
<u>8 - OCT 1918</u>	<u>OG. 2nd CCD</u>	<u>Ceases to be attached to</u>	<u>8 - OCT 1918</u>	<u>PL. 2 D.O. No. 238</u>	
		<u>2nd G.C.D.</u>	<u>Bramshott</u>		
		<u>on return to 1 CCA Reg. Bn.</u>			<u>for OG. 2nd CCD</u>

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) Signaller, Shoeing-Smith, &amp;c

(17591.) Wt. W 1887-P 1124. 1,000,000. 6/18. D &amp; S. Form B/103. (E. 1256.)

[P.T.O.]



Date	From whom received	Report Record of promotions reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
5-11-18.		Transferred to 1st C.O.D. from 2nd CCD D.O. Pt. II. No. 279 D 9.10.18			
		Ceases to be attached on proceeding to H <sup>rd</sup> Res Bnlt D.O. No 306 D 5.11.18			
					Lieut For Adjutant Canadian Command Depot,
5-11-18	H <sup>th</sup> Res. Bn.	T.O.S. on posting from Witley W.O.R.D.	Witley	5-11-18	Pt 2 DON° 263.
4-12-18	do.	S.O.S. on posting to Witley for return to Canada	Witley	4-12-18	Pt 2 DO No 287 Lieut
					ADJUTANT 4TH CANADIAN RESERVE B
5-12-18	W.O.R.D	T.O.S. from H <sup>th</sup> Res. Bn & attch Depot Coy	Witley	4-12-18	D.O. 287
<del>6-12-18</del>	<del>do</del>	<del>S.O.S. to E. G. J Canada</del>	<del>do</del>	<del>5-12-18</del>	<del>D.O. 288</del>
31-12-18	W.O. R. D	"ON COMMAND" 1st C.O.D., BUXTON.	Witley	30-12-18	Do 307 I/c Records, W.O.R. Depot.
31.12.18.		Attached C.D.D. Buxton for return to Canada, Part II Order No. 309 Ceases to be attached C.D.D. Buxton on embarking for Canada.			Lt. for Lt. Col. Commanding Canadian Discharge D. pot.



# CANADIAN EXPEDITIONARY FORCE

## Discharge Certificate

This is to Certify that No. 651431 (Rank) Pte.

Name (in full) MARTIN John. enlisted in  
the 160th Bn.

CANADIAN EXPEDITIONARY FORCE at Southampton, Ont. on the 18th  
day of JANUARY. 19 16.

HE served in England and France.  
and is now discharged from the service by reason of  
" Medically Unfit."

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

Age 23.  
Height 5' 6 1/2"  
Complexion Dark  
Eyes Hazel  
Hair Black

Marks or Scars  
Vacc. scars on left arm.  
C.S.N. Left Hand. 18-8-18.  
Gold Stripe One. ----- 1.

Martin  
Signature of Soldier

D. E. Roberts  
Issuing Officer  
O. C. Discharge Sections  
No. 2 District Depot

Date of Discharge April. 25th. 1919.

Appointment

Signed at Toronto, Ont. this 25th day of April. 19 19

in Military District No. 42

File Reference No. No. 2  
APR 25 1919

R.L.

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.



War Service Badge,

Class A

No. 148337 issued

30-4-19

## 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 the  
particulars called for on  
the back of this cer-  
tificate will not be com-  
pleted



## ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.

*Lizzie Martin*

## PAYMENTS.

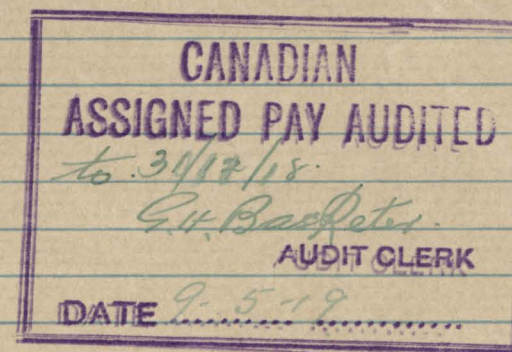
Name of Soldier

*Martin John*

L. L. Job 4503. - Req. 6832

*15.00**OCT 1 - 1916**pte*

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>#651431</i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		<i>W # 27100</i>	<i>15</i>	
Nov.		<i>A30317</i>	<i>15</i>	
Dec.		<i>N 35040</i>	<i>15</i>	
Jan.	1917	<i>C41377</i>	<i>15</i>	
Feb.		<i>C 46490</i>	<i>15</i>	
March		<i>V 49527</i>	<i>15</i>	<i>15.00</i>
April		<i>Q 4327</i>	<i>15</i>	<i>15.8</i>
May		<i>Q 10075</i>	<i>15</i>	<i>15 T.</i>
June		<i>P 16201</i>	<i>15</i>	<i>Ca</i>
July		<i>Q 29653</i>	<i>15</i>	<i>6</i>
Aug.		<i>E 30878</i>	<i>15</i>	
Sept.		<i>D 38247</i>	<i>15</i>	<i>6</i>
Oct.		<i>Q 44153</i>	<i>15</i>	
Nov.		<i>R 50183</i>	<i>15</i>	
Dec.		<i>K 58056</i>	<i>15</i>	
Jan.	1918			<i>225.00 Aho</i>
Feb.				
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.						



MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

M. F. W. 12.  
 50m.—6-16.  
 H. Q. 1772-39-319.

To Whom

Address

*Lizzie Martin*  
*Chippawa Hill*  
*Ont*

By Whom Assigned

Regtl. No.

Rank

Corps

*Martin John*  
*651431*  
*Pte*  
*160 Bn CEF*

Rate *15.00**OCT 1 - 1916***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				





11-58-11

2/55

11-58-11



# MILITIA AND DEFENCE ASSIGNED PAY.

To whom *Mrs R.H. Martin*  
Address *1 Derwent Cottage*  
*Allen St. Peace Church End*  
*Finchley London*

By whom assigned *MARTIN J*  
Regtl. No. *651431*  
Rank *Pte*  
Corps, &c. *160 Bn. D.O.R.*

Rate *15<sup>00</sup> 30<sup>00</sup>*  
Date to commence *1.1.19 28.9.18*

ASSIGNED PAY AND SEPARATION ALLOWANCE  
BEING PAID IN ENGLAND UNTIL ADVISED  
FROM OFFICE OF DISCHARGE OF SOLDIER  
NAMED HEREIN.

## PAYMENTS.

Month.	Year.	Cheque No.	ASSIGNED PAY	SEPARATION ALLOWANCE	Pay Sheet Deduction.	REMARKS.
Jan	1918					DISCHARGED TO CANADA
Feb.						<i>W.O.R. 2nd. 2. 28.11.18</i>
Mar.						
April						
May						
June						
July						
Aug.						
Sept.						
Oct.						
Nov.						
Dec.	<i>Nov Sup</i>	<i>6.31648</i>	<i>15</i>			
Jan	<i>1917</i>	<i>6.96530</i>	<i>15</i>			
Feb.	<i>1919</i>	<i>6.56421</i>	<i>=</i>			
Mar.						
April						
May						
June						
July						
Aug.						

*S.A. granted by Genl Auditor as from 28th Sept 1918*

*153 - S.A. from 28-9-18 to 28-2-19 £31-8-9*  
*1st. to adjust.*  
*Sailed to Canada.*  
*21-2-19*



# ASSIGNED PAY.

By whom assigned

Regtl. No.

Month.	Year.	Cheque No.	Amount.	Pay Sheet.	REMARKS.
Sept.	1917				
Oct.					
Nov.					
Dec.					
Jan.	1918				
Feb.					
Mar.					
April					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1919				
Feb.					
Mar.					



ASSIGNED PAY EFFECTIVE DATE: <u>1-10-16</u> <u>1.1.19</u> AMOUNT: <u>\$15.00</u>	ENGLAND OR CANADA. * CANADA.	SEPARATION ALLOWANCE. EFFECTIVE DATE: <u>1.1.19</u> AMOUNT: <u>15.00</u>	ENGLAND OR CANADA. * CANADA.								
NAME: <u>MARTIN John</u> NUMBER: <u>651431</u>		PARTICULARS OF RANK OR APPOINTMENT AUTHORITY: <u>Pt</u> DATE EFFECTIVE: <u>1.1.19</u> RANK OR APPOINTMENT: <u>Pt</u>									
NAME, ADDRESS, RELATIONSHIP & AUTHORITY <u>Leggie Martin (Sister)</u> <u>Chippawa Hill - Ont</u> <u>Mrs. Rachel H. Martin (Wife)</u> <u>1 Derwent Cottage, Albert Place,</u> <u>Church End, Finchley, London</u> <u>Stopped off 1.12.18.</u>		WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE. <u>Married with permission 24/9/18. A/O 33</u> <u>8/1/19. 4 Res</u>									
ASSIGNED PAY AND SEPARATION ALLOWANCE BEING PAID IN ENGLAND UNTIL ADVICE FROM OTTAWA OF DISCHARGE OF SOLDIER NAMED HEREIN		UNIT AND TRANSFERS ORIGINAL UNIT: <u>160th Batta</u> DATE ACCOUNT FIRST OPENED: <u>1-11-16</u>									
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK		AUTHORITY: <u>27</u> DATE EFFECTIVE: <u>29.3.18</u> DATE LEDGER SHEET T'S'D: <u>25.4.18</u> UNIT TRANSFERRED TO: <u>18th Bn</u> <u>200 26/3/18 1/3/18 20/1</u> <u>11/19</u> <u>Canada Dec</u>									
DAILY RATES OF PAY AND ALLOWANCES AUTHORITY: <u>100</u> PAY: <u>100</u> F.A.: <u>10</u> P.F.A.: <u>10</u> SUBS'CE ALL'CE: <u>10</u>											
PARTICULARS OF RENDERING NON-EFFECTIVE: <u>Transferred to Canada 1.12.18. W.O.R.D. NR. 2. 28/1/18 R.P.C. Bal. = 22.33</u>											
1918 MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
31 March	Bal Fwd								24.64		
April	Pte. Pay	33		CAP.				15			
				A.R. 94 9/4/18 2nd C.C.R.C.	4 46						
				A.R. 210 22/4/18 "	3 57				34 61		
May	Pte. Pay	33		Com. AP.	8 03			15.00	53 71		
June	Mr. Pay	34 10		Com. AP.				15			
		33		A.R. 620 6/6/18 2nd 66 Rb.	3 57						
				A.R. 832 19/6/18	4 46				63 68		
July	Pte. Pay	33		Com. AP.	8 03			15			
		34 10		A.R. 1053 4/7/18	14 46						
				A.R. 1290 16/7/18	3 57				74 75		
Aug.	Pte. Pay	34 10		Com. AP.	8 03			15			
		33		A.R. 1542 3-8-18	3 57			15	90 28		
					3 57				33 28		
Sept	P P	33		C.A.P.				15	73 40		
				A.R. 2352 12/9/18 1st 1st	2 9 73				49 88		
				5595 25/9/18	6 48 67				49 88		
		33			58 40			15			
Oct.		34 10		C.A.P.				15			
	S-F. 25-9-18 to 7-10-18 = 12 days D.O. 231 30/9/18 2 eck	8 76		4656 17.10.18 1 C.C.D.	5 28				62 73		62 73
				5141 25-10-18	9 73			15	80 73		95 73
Nov.	P.P.	33		C.A.P.				15			
				2995 16.11.18 4 Res	9 73				2 2 23		2 86
				B230 28 11-18	34 07						
				5183 28 11-18	14 60						
				11518 6/12/18 C.G.D. End.	19 47			15	2 86		
		33			27 87				2 86		
Dec.				8176 7/1/19. 1st 1st	9 73						
					9 73						

Checked Algh  
29.11.18



NUMBER 651421

RANK

NAME MARTIN

John

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Feb	Sal. Lord Bndt ✓				9.23				2.86		
				447. 21/1/19. 4490. End	9.73				16.60		
					19.46						
				S.O.S. to Canada 5/12/18.							
				DOZES 6/12/18 WARD							

CANADIAN  
ASSIGNED PAY AUDITED

OK to 30/11/19

E. Bradley  
AUDIT CLERK

DATE

9/5/19



P. 559  
MARRIED OR SINGLE

PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$

EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS

EFFECTIVE DATE

AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED

DATE DISCHARGED

V. OR A.

NAME OF HOSPITAL

REG'L NO.

RANK

NAME

IF IN PERMT. CORPS  
WHAT UNIT

UNIT

TRANSFERRED TO

DATE

AUTHORITY

PERMANENT FORCE ALLOWANCES

TRANSFERRED TO

DATE

AUTHORITY

PLACE OF ATTESTATION

TRANSFERRED TO

DATE

AUTHORITY

DATE OF ATTESTATION

TRANSFERRED TO

DATE

AUTHORITY

ASSIGNED PAY MONTHLY \$

DATE EFFECTIVE

PAYABLE TO

DATE EFFECTIVE

PAYABLE TO

RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE)

EFFECTIVE

REASON

DISCHARGE DATE AND PLACE

REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1	2	3	4	1	2	3	4	CREDIT	DEBIT										
			\$	C.			\$	C.			\$	C.														No.	DATE				No.	DATE			
Nov-1															1410	1410																		His pay paid by all Branch for Oct and recovered on Oct pay list (Canada)	
1-30-16	30	1 <sup>00</sup>	30		30	10	3								33	24	8116	49	301116	1946	487	15			39	33	777	750	27				Balance from Canada		
Dec 1-31-16	31	1 <sup>00</sup>	31		31	10	310								3410	114	19-12-16	130	201216	244	730	15			24	74	1713	1550	163						
1917															3410		226	31117			17	63	15			32	03	1920	1600	320					
Jan 31	31	1 <sup>00</sup>	31		31	10	310								3080	264	16/21	303	281217	486	1460	15			34	46	1554	1554							
Feb 28	28	1 <sup>00</sup>	28											1410	1410	3410	405	263117	353	163117	2676	4380	15		130	56									
Mar 31	31	1 <sup>00</sup>	31												3410					1460	487	15			34	47	1517			1517					
Apr 30	30		32												32					486		15			15		3317								
May 31	31		3410												3410	62	3014			1217	6327	15		32	32	35	3492						147194005 #15-2/4/11		
June 30	30		33												33	91	1615			486		15			34	46	3346								
July 31	31		3410												3410							15			15		5256								
Aug 31	31		3410												3410	205	1716			730		15			32	03	5463								
Sep 30	30		33												33	340	1917	551	318	730	1460	15			52	94	3264								
			36740												3410	422	3117	483	1418	974	730	15			34	781									



651431. Martin Jno.





War Service Badge

Class A

No. 140337 issued 30-4-19

SHORT FORM.  
PROCEEDINGS ON DISCHARGE.  
(Demobilization.)

R.I.

1. No.	651431		
2. Rank	Pte.		
3. Name	MARTIN John.		
4. Unit	160th. Bn. (#2.D.D.)		
5. Date of Discharge	APR 25 1919	Place	TORONTO, ONT.
6. Reason for Discharge	" Medically Unfit."		
7. Authority	#2.D.D. April. 25th. 1919. Pt. 11# 113.		
8. Proposed Residence after Discharge	235 King St. E. Toronto, Ont.		
9.	CERTIFICATE TO BE SIGNED BY SOLDIER. I hereby acknowledge that at the undernoted place and date I received my discharge Certificate M. F. W. ?  651431 Pte John Martin. Signature of Soldier.		
10.	CONFIRMATION. The discharge of the above named man is hereby confirmed. Place <u>TORONTO, ONT.</u> Date <u>APR 25 1919</u>  Signature <u>A. C. Mackay</u> A. C. Mackay (O.C. Discharging Unit) No. 2 District Depot		

K.C.P.  
28.11.19





STATE FORM  
PROCEEDINGS OF DISBURSE  
DISBURSEMENT



17

CERTIFICATE TO BE SIGNED BY SOLDIER

I hereby acknowledge that at the indicated place and date I received my discharge

The subject of the above named shall be deemed







## LIST OF DISCHARGE DOCUMENTS.

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



ORIGINAL  
MEDICAL HISTORY SHEET.

Surname Martin Christian Name John

Examined { on 18th day of January 1916  
at Chippewa Hill, ONT.

Birthplace { City or Town Saugeen Reserve  
County Bruce, Ontario

Apparent age 21 yrs. 6mos

Trade or occupation Sailor

Height 5 Feet 5 $\frac{3}{4}$  Inches.

Weight 138 Lbs.

Chest measurement { Minimum 32 $\frac{1}{2}$  inches.  
Maximum expansion 4 inches.

Physical development good

Small-Pox Marks none

Vaccination Marks { Arm Right Left  
Number none

When Vaccinated last X

(a) Marks indicating congenital peculiarities or  
previous disease none

(b) Slight defects but not sufficient to cause rejection  
none

Approved by [Signature]  
Rank Captain M.O.

Date. 17-9-18 Fit or Unfit. Fit EXAMINED FOR RE-ENGAGEMENT. 22 AUG 1918

[Signature] M.O.  
[Signature] M.O.  
[Signature] M.O.  
[Signature] M.O.  
[Signature] M.O.  
[Signature] M.O.  
[Signature] M.O.

Date. 16/1/16 Result. Fit VACCINATIONS. [Signature] M.O.  
7-7-16 [Signature] M.O.  
9-3-18 [Signature] M.O.

Date. 16-3-18 Result. Fit ANTI-TYPHOID INOCULATIONS, ETC. [Signature] M.O.  
22/8/16 [Signature] M.O.  
30/8/16 [Signature] M.O.  
6/9/16 [Signature] M.O.  
13/1/18 [Signature] M.O.

Enlisted on 18th day of January 1916 at Chippewa Hill, ONT.

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>160th B'n.</u>	<u>651431</u>		
Transferred to	<u>4th Res. Bn.</u> <u>18th Bn</u>			<u>FEB 23 1918</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>London Ont</u>	<u>5-X-16</u>	<u>Med. Board</u>	<u>Fit</u> <u>L. Gilbert Capt</u>
<u>1 CCS</u>	<u>1-11-15</u>	<u>Fit</u>	<u>[Signature]</u>
<u>ex Camp Inmate</u>	<u>20-5-19</u>	<u>Fit</u>	<u>[Signature]</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.

M. F. B. 313.

200m—11-15.  
H. Q. 1772 29-4-9.

"Spadina Military Hospital" Toronto APR 17 1919 Tubercle of lung  
[Signature] [Signature] [Signature]

CANADIAN



# NEATH SECTION

No. \_\_\_\_\_  
 DATE \_\_\_\_\_  
 3rd WESTERN GENERAL HOSPITAL.

Surname *Martin* Christian Name *Epse*

STATION SECTION	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				
GENERAL HOSPITAL.		20	8	18	11	9	18	Ship W <sup>d</sup> Lt. Hand.	23	Clean. Some slight swelling. Trauma. X Ray shows no injury to Bone.	
C.C. Hosp Epsom.		11	9	18	25	SEP	1918	Ship w <sup>d</sup> . Lt. Hand.	15	Fit for Duty. Cat. III.	
Spadina Military Hospital	Toronto	12	4	19	17	4	19	Inbred Throat	5	Dry medium notes heard below & above clavicle right side. Coarse notes in left axilla. Resonance expanses over right upper lobe. Breath sounds bronchial in character. Boarded for discharge to S.R. for bronchitis treatment	

*Robert*  
*Spadina*



THIS FORM WILL BE USED FOR ALL RANKS  
**MEDICAL HISTORY OF AN INVALID**

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialed by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

**SPADINA MILITARY**

STATION.....**HOSPITAL**.....DATE.....

1. 1 (a) Unit # 2 D.D. (b) Regimental No. 651431 (c) Rank Pt.  
(d) Surname MARTIN (e) Christian name John  
(f) Home address 40 Hutchins St. Toronto  
(g) Next of Kin Mrs Rachael Martin (h) Relationship wife  
(i) Address of Next of Kin Same
2. Age last birthday 23 Date of birth July 27 1894
3. Enlistment, or Appointment (if an Officer) (a) Place Southampton (b) Date Jan 18 1916
4. Personal description:  
(a) Height 5' 5 1/2 (b) Weight 129 (c) Complexion Dark  
(d) Colour of hair Black (e) Colour of eyes Hazel (f) Identification marks, Scars, etc. Scar on Right Side of Neck  
Sailor
5. Former trade or occupation.....

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).

	PERIODS	
	From	To
Canada	Jan 18. 1916	Oct. 1916
England	Oct. 1916	Mar 1918
France or other theatres of War	Mar 1918	Aug 1918
	Aug 1918	to date

7. Original disease, or injury TUBERCLE OF LUNG

- (a) Date of origin Pre-Enlistment (b) Place of origin Canada  
(c) Cause Infection and Exposure



8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—light, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

(Inferior of hands) Partial loss of function both hands.

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Objective - See Specialists Report attached

Subjective - Coughing Cough. Expectoration 2 times daily - thick, yellowish color. Has night sweats. No haemoptyses.

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above?  
(Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System.....No..... Cardio-Vascular System.....No..... Genito-Urinary System.....No  
(If pulse rate is abnormal, B. P. will be taken.) (Albumen and Sugar will be excluded.)  
Special Senses.....No..... Respiratory System.....No..... Integumentary System.....No  
Disturbances of Mentality.....No..... Digestive System.....No..... Muscular System.....No  
Osseous and Joint Systems.....No..... Any other general condition.....No

10. (a) History (of the condition referred to in Section 9 (a).)

Cough present for a year prior to enlistment. Became worse during service in France. Was not sent to hospital for this disability. Condition found to be present when examined for demobilization.



10.—(b) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (a).)

Wid wounded in left hand by shrapnel in August 1918. The disability. Absence of need. Operation in 1910.

(c) (Here give a description of wounds, scars and deformities.)

Scar left wrist. Operation from right side of neck

11.—(a) Did the disabling condition have its origin before enlistment? Yes

(b) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

Yes - Condition permanent at time of enlistment

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? (a) No (b) No

The regimental documents will be referred to.

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? Three months.

14. Treatment (Case reports, general or special, should be secured and attached where possible.)

None

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

(If the answer is "yes" state nature of treatment required and probable duration)

Yes. Sanatorium treatment. Three months.

16. Can the former trade or occupation be resumed?

(If not, briefly state why)

Not at present

17. Recommendations.

Discharge to I.C.R. for Sanatorium treatment

Treatment

Medical Officer by whom the case is brought forward.

#### STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned..... have heard the description of my disability and present condition read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.)

I complain in addition of.....

Signature of invalid examined. Rank.



# OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticised.

*we concur*

19. Is the invalid fit for

- (a) General service,
- (b) Service abroad, not general service,
- (c) Home service (Canada only),
- (d) Temporarily unfit.
- (e) Unfit for service in Categories A, B and C

(Category A)	(Yes or No.)	<i>Yes</i>
( " B)	(Yes or No.)	<i>Yes</i>
( " C)	(Yes or No.)	<i>Yes</i>
( " D)	(Yes or No.)	<i>Yes</i>
( " E)	(Yes or No.)	<i>Yes</i>

20. It is certified that the invalid

(a) Does require treatment. (Give the nature of the condition and of the treatment required and its probable duration.)

- (b) ~~Does not require treatment.~~
- (c) ~~Should pass under his own control.~~
- (d) Should not pass under his own control.  
(Strike out condition not applicable.)

21. It is recommended that the invalid be discharged. (When not for discharge add special recommendation.)

*We recommend his discharge as medically unfit for service; for further treatment with S.C.R. as an "In-patient"*

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

"Spadina Military Hospital" Toronto

PLACE.....

DATE *APR 17 1919*

*C. E. ...* President.

Members

## TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned.....understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness.....Signed.....

Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

PLACE.....President

Members

DATE.....

APPROVED BY  
**APPROVED**  
Assistant Director of Medical Services.

DATE *APR 22 1919*  
*[Signature]*  
CAPT.  
FOR A. D. M. S. M. D. 2

APPROVED BY  
Director-General of Medical Services.

DATE.....



# CASE HISTORY SHEET.

SPADINA MILITARY HOSPITAL  
TORONTO

Hospital.

Toronto

Station.

No. 651431 Rank Pte Name MARTIN, Jno. Age 24

Unit #2 D.D. Completed years of service 6 10 8 9 7 4  
Where and how long 12 12 12 12

Date of admission 12-4-19 Date of discharge

Diagnosis Tuberculosis Place of origin

CONDITION ON ADMISSION AND PROGRESS OF CASE Adm. from Cas. Co. Park School

APR 12 1919 Adm. to Ward H. -

man's board was evidently completed when a "boil" appeared on his abdominal wall, so he was sent to hospital without appearing before board. Should have sputum analysis for T.B. States he has no sputum.

He should be reviewed by Major Pratten & then boarded for Jan if he concurs. REG

16/4/19 Board prepared for discharge to SER for Pauline Reuter.

## FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

## TREATMENT

(Especially any specific or special form.)

## CONDITION ON DISCHARGE

(and disposal made of case.)

Date

Capt. R. E. Johnston, M.O.

Medical Officer i/c case.



24

MARTIN, Jno.

17th

881431

S. D. D.

12-4-19

Tuberculosis

Adm. from Cas. Co. Park School

APR 12 1919

Capt. R. E. Johnston, W.O.



MEDICAL CASE SHEET.\*

MIL CNV. H.P.  
WOODCOCK  
Army Form I. 1237.  
EPSOM.

*misplaced D on*

No. in Admission and Discharge Book. *2104*  
Year *1918*  
Regimental No. *651431* Rank. *Pte.* Surname. *Martin* Christian Name. *J.*  
Unit. *18<sup>th</sup> Cdn.* Age. *24* Service. *2 5/12*

Station and Date.

*20/8/18*

Disease *S.W. Hand, Left.*

*TOT Bulbi*

*hand - Enrol - Evaldilly,  
Dark in hand.*

*T. & T. Wam L Hand*

*Pain, etc. are less  
than when L Hand*

*Pain, etc. -  
Less when L Hand  
Finger & Thumb*

*Clean: Some slight swelling. No pain*

*May show no injury to Bone.*

*1/2 inch*

TETANUS ANTITOXIN  
 INOCULATED.  
 Date *15/8/1918* 500 units  
 Date *22/8/1918* 500 D1329

TETANUS ANTITOXIN  
 INOCULATED.  
 Date *30/8/18* D1330 500 units  
 Date *6/9/18* " "



Station  
and Date.



# CLINICAL CHART.

(To be attached to Case Sheet.)

Corps 18<sup>th</sup> Cdn.

No. 65. 1431.

Rank and Name

Martin J. [Signature]

Age 24.

Military Hospital

Service 2 8 1/2

Disease

Date of admission 20. 8. 18.

Date of discharge

Result

Dates of Observation

Days of Disease

Temperature Fahrenheit

107°

106°

105°

104°

103°

102°

101°

100°

99°

98°

97°

Pulse per Minute

Respirations per Minute

Motions per 24 hours



CLINICAL CHART.  
(To be attached to Case Sheet.)

Corps \_\_\_\_\_

No. \_\_\_\_\_

Rank and Name \_\_\_\_\_

Age \_\_\_\_\_

Military Hospital \_\_\_\_\_

Service \_\_\_\_\_

Disease \_\_\_\_\_

Date of admission \_\_\_\_\_

Date of discharge \_\_\_\_\_

Result \_\_\_\_\_

NEATH SECTION  
Army Form B. 131.  
No. \_\_\_\_\_  
DATE \_\_\_\_\_  
Result \_\_\_\_\_  
Sgt. WESTERN GENERAL HOSPITAL

Dates of  
Observation

Days of Disease

Temperature  
Fahrenheit

107°

106°

105°

104°

103°

102°

101°

100°

99°

98°

97°

Pulse per Minute

Respirations per  
Minute

Motions per 24  
hours

Signature \_\_\_\_\_

In charge of case. \_\_\_\_\_



France

## MEDICAL CASE SHEET.\*

Div III

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	651431	Pte	Marten	J.
Year	Unit.	Age.	Service.	
	18 Batt.	24		
Station and Date.	Disease			
12-9-18	Gsw. Lt. Hand. flesh.			
C.C. Hosp.	Wound of Lt. hand is healed.			
Epsom.	but hand is slightly weak.			
	79			
16.3.18	290064	J. Blumming Capt. Camm		
17-9-18	LT Hand is now fairly strong			
	Sub. S.			
		J. Blumming Capt.		



Station/  
and Date.



"MELITA" 1-3-19

No. 2 DISTRICT DEPOT

M 2827

AUDITOR

PAYMASTER

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

REGT. No. 651431

RANK

Pte. NAME (IN FULL)

MARTIN, J.

M. OR S.

NEXT OF KIN

RELATIONSHIP

PARTICULARS

EFFECTIVE  
DATE

AUTHORITY

ORIGINAL UNIT  
C. E. F.

IF IN P. F.  
WHAT UNIT?

(BLOCK LETTERS, SURNAME FIRST)

ADDRESS

PLACE OF  
ATTESTATION

TRANSFERRED TO

DATE

AUTHORITY

DATE OF  
ATTESTATION

TRANSFERRED TO

DATE

AUTHORITY

IS SEPARATION ALLOWANCE PAID?

DATE EFFECTIVE

ASSIGNED PAY

DATE EFFECTIVE

TO WHOM PAID

RELATIONSHIP

PAYABLE TO

RELATIONSHIP

ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS

ADDRESS

STOP PAYMENT FORM  
ASSIGNED PAY  
RENDERED, DATE

EFFECTIVE

DISCHARGED

PLACE

DATE

REASON

AUTHORITY

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  
DEBITS

BALANCE

PARTICULARS OR REMARKS

Balance from  
previous  
account

30-11-18

\$1.10

22 33

22 33

1017 612  
8176 149  
447 217  
1485 439  
2583 1829  
4 2229  
1 29  
25 129

19471  
973  
973  
973  
973  
487  
300  
20 00

45 00

133 26 110 92

1-12-18

90 12 99

12

111

134 277

135 830

10

912

15 00

110 93

110 93

34 17

444 1/3/19

31 12 34 10

07

34 17

131 864

135 830

10

912

15 00

1.4.19

25 12 27 50

35

62 50

136 966

137 526

137 525

10

35

17 50

62 50

183 dyp

420

180

655

May 15

361 657

55 00

55 00

58 694 16 31 180

155 00 35 00 00 150

OR 212 Dec 11 1732950

66 3M 30 1732951

" 262 Feb 10 1744663

280 - 120 1744664

" 274 " M 1745251

70 - 30 1745252

" 274 " M 1745251

41631235 00 369

655

655 00



[illegible]



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

## Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

M  
14202

13202

Oct 1/16

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

15			
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## PARTICULARS OF SEPARATION ALLOWANCE

No. 651431  
 Rank *Pte* Promoted Reverted Discharge  
 Soldier's Name *John Martin*  
 Battalion *160 Battrn*  
 Beneficiary  
 Relationship  
 Address

## PARTICULARS OF ASSIGNMENT

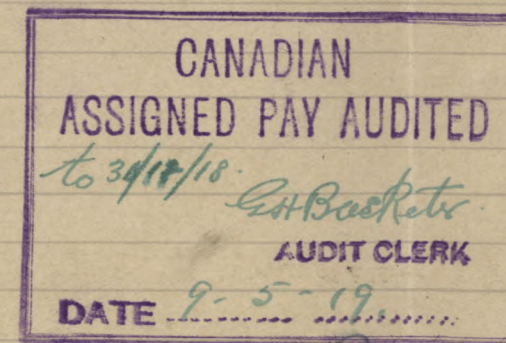
Name *Lizzie Martin*  
 Address *Chippawa Hill, Ont*  
 Change of Address  
 1 *Mrs Rachel Hanna Martin (Wife)*  
 2 *1 Derwent Cottage*  
 3 *Albert Place Church End*  
 4 *Finchley London*

ENGLISH

Date	Cheque No.	Amount S/A	Amount A/P	Total
Dec 31 1917			225	225
Jan 18	65449 L		15	15
Feb.	74534 R		15	15
March	92078 O		15	15
April	10403 L		15	15
May	18926 P		15	15
June	23262 L		15	15
July	31520 J		15	15
Aug	41142 M		15	15
Sept	45105 S		15	15
Oct.	55870 V		15	15
Nov	61451 R		15	15
Dec	64554 Y.		15	15
			405	\$405

011916-J-131 REMARKS 011916-J-230

✓ A/c closed 31-12-18 Transferred to wife in England per 2 m. 6.11.18  
 Lyle 011916-J-131, Jals 23-12-18  
 St. taken into gear by ops P.M.G. 20/9/18  
 ops P.M.G. 19/4/19 Cancel 6/4/19



W.R.D. Dackay, 23-12-18  
 Sheets mailed 6/1/19

M. F. W. 128  
 400M.-6-17-1772-38-1141  
 L. L. 22220-M. & D. 7993.

M.I.# 2

A/c Closed in Eng 28-2-19  
 Ret'd per. *Melitta*  
 Date 1-3-19 M.F.W. 187 10-3-19  
 Closed *J.A. Baskette*





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

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



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

15			
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## PARTICULARS OF SEPARATION ALLOWANCE

No. 651431

Rank *Pte* Promoted Reverted DischargeSoldier's Name *John Martin*Battalion *160 Bn*

Beneficiary

Relationship

Address

## PARTICULARS OF ASSIGNMENT

Name *Mr Rachel Hannah Martin*Address *1 Derwent Cottage, Albert Place,*Change of Address *Church End,**Finchley, London, Eng.*

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>1917</i>					
<i>Dec 31</i>			<i>225</i>	<i>225</i>	
<i>Jan 1918</i>	<i>L 65449</i>		<i>15</i>	<i>15</i>	<i>acc transfd to Eng. to wife</i> <i>Auth 2m. mailed 14/12/18.</i> <i>Effective 1-1-19</i>
<i>Feb</i>	<i>R 74534</i>		<i>15</i>	<i>15</i>	
<i>Mar</i>	<i>O 92079</i>		<i>15</i>	<i>15</i>	
<i>Apr</i>	<i>L 10403</i>		<i>15</i>	<i>15</i>	
<i>May</i>	<i>P 18926</i>		<i>15</i>	<i>15</i>	
<i>June</i>	<i>L 23262</i>		<i>15</i>	<i>15</i>	
<i>July</i>	<i>L 31520</i>		<i>15</i>	<i>15</i>	
<i>Aug</i>	<i>N 41442</i>		<i>15</i>	<i>15</i>	
<i>Sept</i>	<i>S 45105</i>		<i>15</i>	<i>15</i>	
<i>Oct</i>	<i>V 55870</i>		<i>15</i>	<i>15</i>	
<i>Nov</i>	<i>R 61451</i>		<i>15</i>	<i>15</i>	<i>Account checked &amp; found correct. B. Blackmore, P. Sgt</i> <i>11/2/19</i>
<i>Dec</i>	<i>Z 64554</i>		<i>15</i>	<i>15</i>	



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.				
Rank	Promoted	Reverted	Discharge	
Soldier's Name				
Battalion				
Beneficiary				
Relationship				
Address				

Name	
Address	
Change of Address	
1	
2	
3	
4	

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
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M. F. W. 128  
400M-617-1772-39-1141  
L. L. 22320-M. & D. 7883.

Canadian Pay Office.  
Received by Pay II.  
FEB 7 1919  
and Passed for Action to  
Sub-Div.  
A. ☒ B. ☐ C. ☐ D. ☐ E. ☐ F. ☐ G. ☐ H. ☐ I. ☐ J. ☐  
Accts. Bank Disc. Invest. Sps. F. Bks. P. n S. S. Sep. C.

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