

Unit 129th 15. Batt. Rank Lieut. Name Edward P. Taylor *and sub*

OFFICERS' DECLARATION PAPER.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

DUPLICATE

QUESTIONS TO BE ANSWERED BY OFFICER.

(ANSWERS.)

1. (a) What is your Surname? Taylor
- (b) What are your Christian Names? Edward Percy
2. (a) Where were you born? (State place and country) Birmingham England
- (b) What is your present address? 255 Victoria Ave North - Hamilton
3. What is the date of your birth? December 1 - 1885
4. What is (a) the name of your next-of-kin? Mr. Sarah E. Daniel
- (b) the address of your next-of-kin? 96 Aston Road North, Birmingham England
- (c) the relationship of your next-of-kin? sister
5. What is your profession or occupation? Banker
6. What is your religion? Congregationalist
7. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes
8. To what Unit of the Active Militia do you belong? 77th Kentworth Reg.
9. State particulars of any former Military Service. None
10. Are you willing to serve in the
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? Yes

The undersigned hereby declares that the above answers made by him to the above questions are true.

E. P. Taylor
Lieut (Signature of Officer.)

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider him* Fit for the CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Date December 27 1915

Place Dundas Ontario

H. C. Lauchland

Medical Officer, pt.

M. O. 129th O. S. Batt., C.E.F.

*Insert here "fit" or "unfit."

CANADIAN OVERSEAS EXPEDITIONARY FORCE

QUESTIONS TO BE ANSWERED BY CANDIDATE

1. State the name of the candidate and the name of the parent organization.

2. State the name of the candidate's sponsor and the name of the parent organization.

3. State the name of the candidate's sponsor and the name of the parent organization.

4. State the name of the candidate's sponsor and the name of the parent organization.

5. State the name of the candidate's sponsor and the name of the parent organization.

6. State the name of the candidate's sponsor and the name of the parent organization.

7. State the name of the candidate's sponsor and the name of the parent organization.

8. State the name of the candidate's sponsor and the name of the parent organization.

9. State the name of the candidate's sponsor and the name of the parent organization.

10. State the name of the candidate's sponsor and the name of the parent organization.

11. State the name of the candidate's sponsor and the name of the parent organization.

12. State the name of the candidate's sponsor and the name of the parent organization.

13. State the name of the candidate's sponsor and the name of the parent organization.

14. State the name of the candidate's sponsor and the name of the parent organization.

15. State the name of the candidate's sponsor and the name of the parent organization.

16. State the name of the candidate's sponsor and the name of the parent organization.

17. State the name of the candidate's sponsor and the name of the parent organization.

18. State the name of the candidate's sponsor and the name of the parent organization.

19. State the name of the candidate's sponsor and the name of the parent organization.

20. State the name of the candidate's sponsor and the name of the parent organization.

QUALIFICATE OF ANNUAL EXAMINATION

The undersigned hereby declares that the above answers and findings are true and correct.

Signature: _____

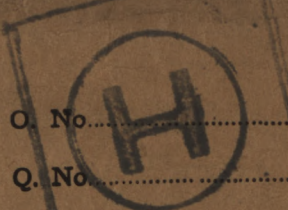
Date: _____

Signature: _____

Date: _____

Officers'
DISCHARGE DOCUMENTS

R. O. No.
H. Q. No.

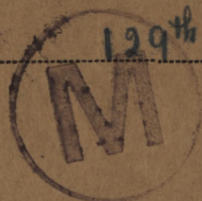


Doc taken on file 505
Ref No - 182 of 7319 MRC

Name Taylor, Edward Percy

Regt. No. Rank LIEUT

Corps 129th I/S. Battalion, C. E. F.



Camp 17/10/19
Ref 24/10/19

- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers.....
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet.....
- Compulsory Stoppages.....
- Casualty Forms..... *23*
- Proceedings on discharge.....
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- Parchment Certificate.....
- Medical Report for Invalids.....
- Medical History Sheet..... *3*
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet.....
- Clothing Transfer Certificate.....
- Inventory of Kit.....
- Last Pay Certificate.....

02422



- A. F. W. 3997* *1*
- Dental Certificate* *1*
- Med. Bd* *2*
- m. P.W. 67* *1*
- Misc* *5*

exp. sub.
R. 49
Photo copy of Form of will
Med. Law sheets

1
2-6
2-6

Ref. Sailing No. 17. S.S. "Lapland". 20-2-19.

1763
1763
1763

No.

RANK

Lieut.

NAME

Taylor E. P.

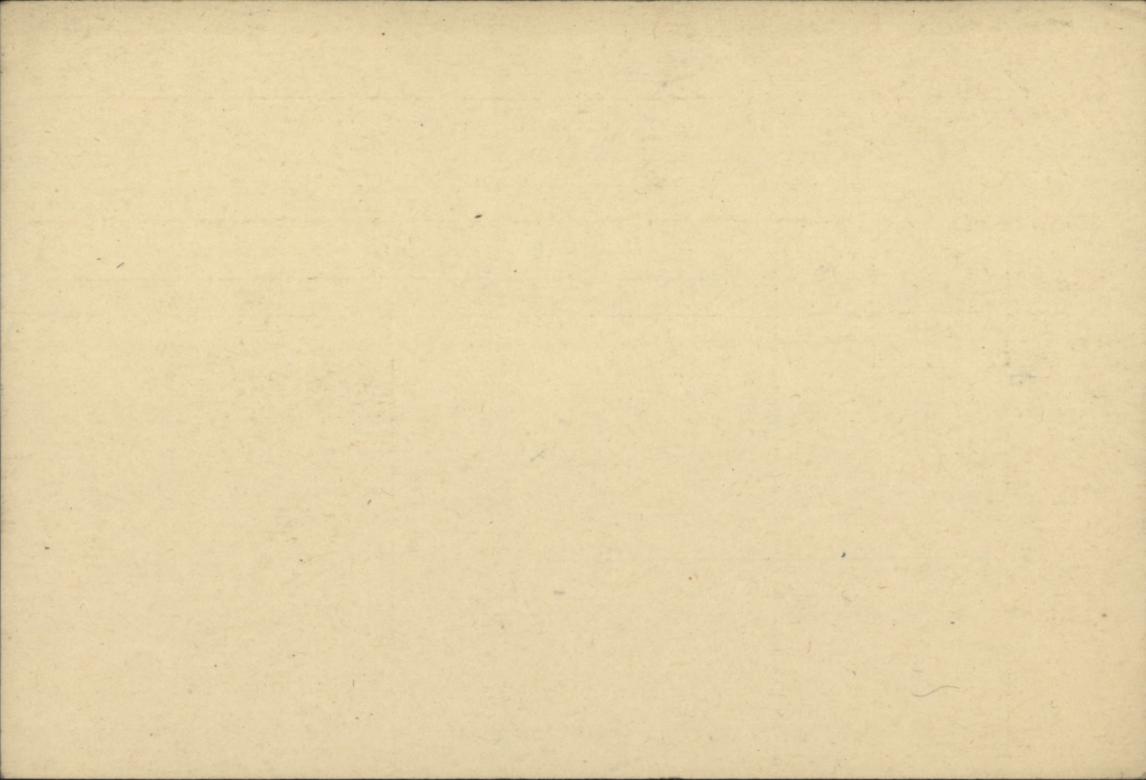
T. O. S. 27-12-15, UNIT

129th Battalion C. E. F.
(D. O. no 3 of 10-1-16)

M. D. 2

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
1915 Dec 27	1916 Jan 31	✓		
Feb.		✓		
Mar.		✓		
Apr.		✓		
May		✓		
June		✓		
July		✓		
Aug.		✓		

UNIT SAILED
AUG 22 1916



NAME

Taylor

J

P

REGT. NO.

RANK AND UNIT

Lieut

9th Bn C.E.

NEXT OF KIN

CABLE

NO.

DATE

NATURE OF CASUALTY

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
1086	20 New H Carriers	12-9-18	Boils s.t.
1097-1	Horton Co. (Lon.) War Exposed	26-9-18	Boils
1135-3	Can. Conv. Officers	Matlock	Bath. 23-10-18
1149-5	Discharged	29-10-18	Boils

Number Rank **LIEUT**

Surname **TAYLOR**

Christian Name **EDWARD PERCY**

Unit Theatre of War **FRANCE**

Date of Service **23. 8. 16. 9. 3. 17. 20. 2. 19**

Remarks **34 Gleester Rd. Moseley.**

Latest Address **68. ~~41 Charles St~~ Birmingham**

~~Hamilton~~ England

Roll No. **B.**

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SEP 1 1921

Handwritten text, possibly a signature or name, mostly illegible due to fading and bleed-through.

Surname. Christian Name.
 TAYLOR E. P.
 Rank. Unit.
 Lieut. 9th. C. E. Bn. C.E.T.C.

Date of admission.
 No. 20 General Hospital, Camiers 12-9-18.
 Hospital Horton Co. of London War, Epsom 26-9-18.
 Canadian Conval. Offs. Hosp. Matlock 23-10-18
 Canadian Conval. Offs. Hosp. Matlock 26-11-18.
 Canadian Conval. Offs. Hosp. Matlock 4-12-18
 Hosp.
 Hosp.
 Hosp.

Diagnosis. Boils slt.
 Influenza. ^{Rw.}
_{Rw.}

Later diagnosis.

Discharged: -29-10-18.
 do Date. 12-12-18

Disposition.
 14-9-18 1086.
 27-9-18 1097-..
 11-11-18 1135-3.
 27-11-18 1149-5.
 28-11-18 1150-10.
 7-12-18 1158-6.
 C. 16-12-18 1160-Remarks.

C.L.
 C.L.
 C.L.
 C.L.
 C.L.
 C.L.
 C.L.

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

Surname	Christian Name	Reg. No.
TAYLOR	E. P.	
Rank	Unit	
Lieut.	9th.Bn.C.E.	

MEDICAL BOARD held at	Date	Serial No.
Matlock Bath	25-10-18.	
(1) do.	9-12-18	

Other Medical Boards at	Date	Serial No.
(2)		
(3)		
(4)		
(5)		

Condition found by Board
Boils. Influenza.

Disposition Recommended

(1) Fit for General service.
Fit for General service.

(2)

(3)

(4)

(5)

PENSIONS & CLAIMS BOARD held at _____ Date.....

Disposition

Remarks

FORM OF WILL.

I, Edward Percy Taylor (Name in full)

Regimental Number Lieutenant serving in 129th O.S. Bn.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I bequeath all my real estate unto

George Taylor
Box 60 P. O.
Bloemfontein, South Africa

Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

George Taylor
Box 60. P. O.
Bloemfontein, South Africa

Name and Address of person or persons to receive personal estate* (See note).

IMPORTANT NOTE

This must be Signed and Dated by THE SOLDIER HIMSELF.

this 21st day of August A. D. 1916.

E. P. Taylor Signature of Soldier.

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

*W.A.
E.P.
cu*
I hereby appoint Samuel Taylor of Bloemfontein as my executor of this my last will and testament.

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

Signature of First Witness C. Nicholson

Address of Witness Dunoon, Dur

Occupation of Witness Lieut 129th O.S. Bn. C.E.F.

THE TWO WITNESSES MUST SIGN HERE

Signature of Second Witness E. P. Thomas

Address of Witness 79 Beaul St. W. Hamilton

Occupation of Witness Lieut 129th O.S. Bn.

CERTIFIED A TRUE COPY

H. Spencer Reep R.

OFFICER ¹/_c ESTATES, M. & D.

ESTATES BRANCH

NOV 20 1916

MILITIA DEPT.

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..... *129th OS Battalion CEF*

(2) Regimental Number

(3) Full Name of Soldier..... *Edward Percy Taylor Lieutenant*

(4) Place of Birth..... *Birmingham - England*

(5) Are you married, or not?..... *no*

(6) If married, state,
(a) Full name of your wife.....

(b) Present Postal Address..... *255 Victoria Avenue North
Hamilton - Ont*

(7) Are you a widower?..... *no*

(8) Have you any children?.....

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

Also their names and ages.....

(9) Is your Father alive? no
If so, state name and address _____

(10) Is your Mother alive? no
If so, state name and address _____

(11) If your Mother is a widow _____
Are you her sole support, or not? _____

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

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

Sister Mr S. E. Sanier
96. Aston - Road North
Birmingham - England

(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? yes

If so, in what Company? Prudential Assurance Coy. London. Eng

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

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

W. H. H. H. H. H. H.
Officer Commanding.

Date July 29/16

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 Lt. Name EDWARD P Surname TAYLOR
 Unit or Corps 2d L.I.B. (If a soldier) Regtl. No. _____
 Born at Birmingham Eng on, date Dec 1 1885
 Signature (for identification) E. Taylor

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

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

Weight 132 lbs.
 Height 5 ft 7 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.

normal

5. HEART?

Abnormal Sounds?

normal

Abnormal Size?

Pulse Rate?

90

Intermittence or irregularity?

none

6. ARTERIES.—Any hardening?

normal

7. DIGESTIVE SYSTEM?

good

8. GENITO-URINARY SYSTEM?

Urinalysis—S.G.?

1015

Reaction?

neutral

Albumen?

neg

Sugar?

neg

9. SKIN, MIDDLE EAR, EYE
or any other part?

normal

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

none

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

Healthy

Examined at

Seaford

Signed

J. W. Mackie Capt. M.O.

Date

6-1-19

Signed

J. Macaulay Capt. M.O.

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.

1000
L. J. 1913
L. J. 1913
L. J. 1913

1000

1000

1000

1000

1000

1000

1000

1000

1000

1000

1000

1000

1000

1000

MEDICAL BOARD REPORT ON A DISABLED OFFICER.

(ALSO TO BE USED FOR DISABLED NURSES.)

Station COH Market Bath Duly.
Date 25-10-18.

- 1. Rank and Name LIEUT. TAYLOR EDWARD PERCY.
- 2. Unit. 9 C.E. Depot Seaford.
- 3. Age 32. 4. Total Service 38. War Service { (a) at home 12
(b) abroad 26 France 18.
- 5. Address 34 Alcester Rd. Moseley, Birmingham.

STATEMENT OF CASE.

NOTE.—In answering the following questions the Board will carefully discriminate between the officer's statements and evidence recorded in his medical documents. When possible, a statement by his medical attendant should be attached.

- 6. Disability BOILS.
- 7. Date of origin of disability 9.9.18.
- 8. Place of origin of disability France:
- 9. Give concisely the essential facts bearing on the history of the disability (personal and family history, etc.):—

NOTE.—Boards subsequent to the first should record here the progress of the case since the officer's last appearance.

Began to have boils. chiefly in buttock. Aug. 19. 18.
Carried on until above date and reported sick.
Went to 20 Gen. P. ~~Rosen~~ Camiers 10.9.18. States
three boils were cut out. To Horton War P 25.9.18.
Under vaccine treatment. To COH 22.10.18.
Boils cleared up.

I concur in the findings
of the Board of Medical Officers
here recorded.

OPINION OF THE MEDICAL BOARD.

- NOTES.—(i.) The Board will on no account inform the officer of its opinion on any of the following questions.
- (ii.) Clear and decisive answers should be filled in by the Board to enable the Ministry of Pensions to come to a final decision on the officer's claim to pension, etc.
- (iii.) Expressions such as "may," "might," "probably," should be avoided, if possible.
- (iv.) When there is more than one disability the replies will distinguish between them.

- 10. Was the disability contracted (a) before entering the service? no
- (b) in the service? yes
- 11. Was it attributable to military service? yes
- If so, to what specific military conditions is it attributed? G.S. conditions

[Enteric Fever, Dysentery, Malaria, &c., contracted on service in countries where there is a special liability to the disease, are to be regarded as attributable to military service.]

- 12. If not attributable to, was it aggravated by, military service? n.a.
- If so, by what specific military conditions? n.a.

- 13. Is it attributable to, or aggravated by, the officer's own negligence or misconduct? If so, in what way, and to what extent? no.

14. What is the officer's present condition? _____

Boils now cleared up and general condition much better. Heart & lungs normal. Fit for G.S.

15. To what degree is the officer disabled at the present time? _____
(Degrees of disablement should be expressed in the following percentages—100, 80, 70, 60, 50, 40, 30, 20 under 20, or nil.)

16. Is the disability permanent? _____ *no*

17. If not permanent, how soon is re-examination recommended? _____ months.

18. Is it necessary that the officer should be re-examined by the same Board? _____ *no*

19. What treatment is the officer receiving, and where, and from whom? _____

Convalescent
C.C.H.

20. Is the officer in need of special medical treatment of any kind, and, if so, of what nature? _____

no

21. Does the officer require the constant attendance of another person? _____ *no*

22. Officers will be classified by the Medical Board under one of the following categories, the probable period of unfitness for the higher categories being stated. Explanation of these categories is in para. 5 of A.C.I. 158/1918. In case of nurses, omit B. and (i) and (ii) of E.

- A.—Fit for general service _____
- B.—Fit for service in a garrison or labour unit abroad _____
- C.—Fit for home service :—
 - (i) Active duty with troops _____
 - (ii) Sedentary employment only _____
- D.—For admission to a command depot _____
- E.—Requiring indoor hospital treatment :—
 - (i) In an officers' military or auxiliary convalescent hospital _____
 - (ii) In an officers' hospital _____
- F.—Permanently unfit for any further military service _____

Yes

n.a.

23. In the case of officers suffering from neurasthenia found permanently unfit, has A.C.I. 307 of 1918 been complied with? _____

A. Chauvin Lt. Col. C.C.H. President.
J. Miller Capt. C.C.H.
H. Mitchell Capt. Members.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. <i>T 1500</i>	Regimental No.	Rank.	Surname.	Christian Name.
	Year <i>1918</i>	Unit. <i>9 C Bny</i>	Age. <i>32</i>	Service. <u>CANADA. 12</u> <u>FRANCE 18</u> <u>TOTAL 30.</u>
Station and Date. C.C.O.H. MATLOCK BATH.	Disease <u>ONSET</u>	<i>Boils</i> <i>9-9-18</i>		
		<u>WILKES</u> <i>Francis.</i>		
<i>Oct 27</i>	<u>HISTORY OF DISABILITY.</u>			
	<i>Began to have Boils - noticed principally Aug 18</i>			
	<i>Carried on until above date reported ill.</i>			
	<i>Was in No 20 Gen. Hosp June 10-9-18. Still (3)</i>			
	<i>boils were cut out. To Holton War Hosp. 25-9-18.</i>			
	<i>Under vaccine treatment. To C.C.O.H. 22-10-18</i>			
	<i>Boils cleared up.</i>			
	<u>PERSONAL AND FAMILY HISTORY.</u>			
	<i>None for since Feb. 18.</i>			
	<u>PRESENT CONDITION.</u> <i>Feels much better.</i>			
	<u>DIGESTIVE SYSTEM.</u> <i>App. good. Bowels regular.</i>			
	<u>CIRCULATORY SYSTEM.</u> } <i>OK.</i>			
	<u>RESPIRATORY SYSTEM</u>			
	<u>NERVOUS SYSTEM.</u> <i>sleeps well</i>			
	<u>G.U. SYSTEM.</u>			
	<u>LOCAL CONDITION.</u>			
<i>25.10.18</i>	<i>Boarded A.</i>			

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

Station
and Date.

ORIGINAL

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Taylor Christian Name Edward Percy

Examined on 27 day of December 1915 at Dundas Ontario

Approved by R.C. Lauchland Capt. M.O. 129th O.S. Batt., C.E.F. Rank M.O.

Birthplace City or Town Birmingham County England

Apparent age 30

Trade or occupation Banker

Height 5 Feet 6 3/4 Inches

Weight 124 Lbs.

Chest measurement Minimum 30 inches Maximum expansion 3 1/4 inches

Physical development fair

Small-Pox Marks

Vaccination Marks Arm Right Left Number 1

When Vaccinated last 1886

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Vision R II = 30 L II = 40

Table with columns: Date, Fit or Unfit, EXAMINED FOR RE-ENGAGEMENT. Results: M.O., M.O., M.O., M.O., M.O., M.O.

Table with columns: Date, Result, VACCINATIONS. Results: M.O., M.O., M.O.

Table with columns: Date, Result, ANTI-TYPHOID INOCULATIONS, ETC. with Para-Typhoid A & B. Results: M.O., M.O., M.O.

Enlisted on 27 day of Dec 1915 at Dundas Ont.

Table with columns: CORPS, REG'TL NUMBER, HABITS, DATE. Rows: Joined on enlistment (77th Regt, 27.12.15), Transferred to (129th Batt CEF, 123rd Batt, P.O.S., 27.12.15, 18.10.16, 8-3-17).

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Table with columns: STATION, DATE, DISEASE, RESULT.

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.

CANADIAN

CANADIAN EXPEDITIONARY FORCE

2.R. 2-27.
S.S.

Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

This is to Certify that (Rank) Lieutenant.....

(Name in full) Edward Percy TAYLOR,.....

Enlisted in the 129th Battalion,.....

CANADIAN EXPEDITIONARY FORCE, on the XXXXXXXXXXXXXXXXXXXXXXXXXXXX.....

day of XXXXXXXXXXXXXXXXXXXX 191..... AND WAS APPOINTED to COMMISSIONED RANK

in The 129th Battalion,.....

CANADIAN EXPEDITIONARY FORCE on the Twenty-seventh..... day

of December..... 1919.

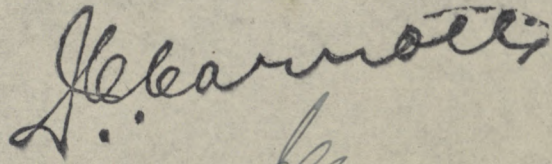
He SERVED in CANADA, 129th Bn and 129th CEF with the 129th Bn.,
123rd Pioneer Bn., 9th Pioneer Bn., Canadian Engineers
Engineering Pool, Canadian Engineers Reserve Depot......

and was STRUCK OFF THE STRENGTH on the eighteenth..... day

of March..... 1919 by reason of General Demobilization......

Dated at Ottawa, this Twenty-sixth..... day

of October..... 1919.



.....
192 Director of Personal Services.

CANADIAN EXPEDITIONARY FORCE

Certificate of Service

ISSUED TO OFFICERS AND NURSING STAFF

This is to certify that

Name in full

Rank in

CANADIAN EXPEDITIONARY FORCE

is/are and was/were appointed to COMMISSIONED RANK

CANADIAN EXPEDITIONARY FORCE on the

day

at

and was struck off the strength on the

day by reason of

being

at

for the purpose of

Casualty Form - Active Service.

Regiment or Corps *9th Bur. C.C.*
 Rank *Lieut.* Surname *Taylor* Christian Name *Edward Percy*
 Religion Age on Enlistment years months
 Enlisted (a) Terms of Service (a) Service reckons from (a)
 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...		
<i>1-10-18</i>	<i>C.C. C.C.R.D.</i>	<i>T.O.S. C.C.R.D. on paper from Service Unit & shown in Hoop.</i>	<i>Seaford.</i>	<i>26-9-18</i>	<i>Pt. II D.O. 260.</i>
<i>4-11-18</i>	<i>C.C. C.C.R.D.</i>	<i>T.O.S. C.C.R.D. on paper to C.C.T.C.</i>	<i>Seaford.</i>	<i>29-10-18</i>	<i>Pt. II D.O. 289.</i>
			<i>Widely.</i>	<i>28-10-18</i>	<i>C.C. C.C.R.D.</i>
<i>7-11-18</i>	<i>2nd B.C.R.B.</i>	<i>T.O.S. free C.C.R.D.</i>	<i>Leamford?</i>	<i>29-10-18</i>	<i>Pt II 166.</i>
<i>29-1-19</i>	<i>2nd B.C.R.B.</i>	<i>S.O.S to 1st B.C.R.B.</i>	<i>Seaford</i>	<i>28-1-18</i>	<i>Pt II 23.</i>
<i>29-1-19</i>	<i>1st B.C.R.B.</i>	<i>T.O.S. from 2nd B.C.R.B.</i>	<i>Seaford</i>	<i>28-1-18</i>	<i>Pt II 24.</i>
	<i>1st B.C.R.B.</i>	<i>S.O.S to C.C.F in Canada</i>	<i>Seaford.</i>		
			<i>Ch Low Cold</i>		

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

CERTIFIED CORRECT
 20 MAR 1917
 CANADIAN RECORD OFFICE

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

M. F. W. 54. (A. F. B. 103)*
 250M.—I-16.
 H. Q. 1772-39-920.

Casualty Form—Active Service.

129th O. S. BATT'N. C. E. F.

Unit, Regiment or Corps

Regimental No. _____ Rank *Lieut* Name *Lieut E. D. Edward Percy*
 C. E. F.

Enlisted (a) *27-12-15* Terms of Service (a) *War and 6 months* Service reckons from (a) *27-12-15* *vs 8/16*

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) *(Banker)*

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				

	<i>Embarked Canada.</i>	<i>Halifax</i>	<i>27.8.16.</i>	<i>"Olympic"</i>
	<i>Disembarked England</i>	<i>Liverpool</i>	<i>30.8.16.</i>	<i>"</i>
	<i>Transferred to 123rd Batta. Can: Infantry. Authority RO 479.</i>	<i>Bramshott</i>	<i>18.10.16</i>	<i>Part 2 orders #217</i> <i>19.10.16</i> <i>W. H. M. M. M.</i>

16-10-16 123rd Bn T.C.S., 123rd Bn
 8-3-17 123rd Bn. Proceeded Overseas for Service
 Bramshott Witley 16-10-16 Pt 11-243-21-10-16,
 8-3-17 Pt. II -66-8-3-17

10-3-17	M.L.O.	Disembarked France	Boulogne	10-3-17	M.L.O. R.-10. K.R. 2/172
15.9.17	O.C. 123rd	To 3rd. Cadw En Bn	Field	8.9.17	B-213-D.C.S-42
9.9.17	3. En Bn	Joined 3rd En Bn	Field	8.9.17	E.B-1337. R+R-43.
16.9.17			"	8.9.17	B-213-D.C.S-42
1.12.17	C.C.R.C.	Left for "Unit"	"	1.12.17	M.R-D-123-8-R+R-54
19.1.18	123. Bn.	Sept. from C.C.R.C.	"	12.1.18.	B213.-K.J-17-145
6.2.18	C.C.R.C.	Comm. to C.C.T.Co.	"	9.9.17	15-2948-K.J-17-145

(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties.

Disembarked...
 Embarked...
 Name of ship...
 FEB 20 1917
 LAPLAND
 Lieut. Col.
 Royal Grenadiers

Name of Ship... **LAPLAND**
 Embarked... **FEB 21 1919**
 Disembarked.....

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				
9.2.18	C.L.R.O.Co	Gtd 14 days Leave	H.S.	12.12.17	D-46-Pt 11-16 - ²⁰⁻²⁻¹⁸ a.a.G.K.R-23188
"	"	Rejd from Leave	Field	26.12.17	D-46 a.a.G.K.R-23188
20.7.18	9 Bn C.F.	Comd Cdn Cps Sch	"	17.7.18	B-213-3rd Div G-652-10-7-18
17.8.18	"	Rejd fr " "	"	10.8.18	B-213
24.8.18	"	Gtd 14 days Leave	"	20.8.18	B-213-Pt 11-87-d.-49.18
14-9-18	do	Rejoined from leave	"	7-9-18	B-213
25-8-18.	A.C.&.R	S.O.S. 123rd Cdn Pnr Bn on Transfer to 9th BN.C.E	Field	24-5-18	List NO-202-Part-11-88-dated 5-9-18. <u>4630902 d/12.9.18</u>
do.	do	T.O.S.-9 th Batta, Can Engrs, on trans from 123 rd Can Pioneer Batta		24-5-18	List No 202 1 st NO 16 of 9-9-18
11-9-18	9 Bn C.F.	Sick	to Hosp	9.9.18	W 17-2002
11-9-18	20 Gen	Boils	adm 20 Gen	11-9-18	W 3084-3988
10-9-18.	13 C.F.A.	do.	adm 13 C.F.A	9-9-18	} a36-8999
			10 14 do	9-9-18	
15.9.18	4666 S.	do	adm 466 S	10.9.18	} a36-9496
"	"	"	10 Base	10.9.18	
25.9.18	20 Gen	do	10 Engr.	25.9.18	W 5645
25-9-18.	H.S. Brighton.	Struck off strength 9th Battalion, Can. Engrs. on transfer to C.E.R.Pool. on being invalidated to England sick.		24-9-18.	W.3083-6077. Pt.11.Ord.25 dated 4-10-18.
do	do	T.O.S. of C.E.R. from 9 th Batta. C.E. being Engr to Engr.		25-9-18	W.3083-6077 Pt " A.O.No 101 d/1918.
do	do	Sick. Invalided to England Detached to C.E.R. Depot.	Seaford	25-9-18	W 3083-6077 Part " Daily Orders No 101 d/5-10-18.

Ed Hewett
 Lieut. for Lt.-Col., A. A. G.
 Canadian Section, G. H. O. 3rd Echelon, B. E. F.

ASSIGNED PAY.

UNIT. RANK. NAME OF RATE OF P. AND A.

Mess. DATE AUTHORITY

NAME.

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.....

123 Brv.
9th Rm 6E

Pay 2.00
F.A. .60
Messing 1.00
3.60

Lieut.

30⁹/₁₆ Pr. Canada
24⁵/₁₈ BR. On CTD. 1⁹/₁₆
ab L202 25⁸/₁₈

Name Taylor
Initials E. P.
Bank of Montreal.

Adm Office 1st fl.

1918-19

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
1918								
Apr. 16	Pay R.		108.					
24	Bank	1173.		108.		—		
May 13	Pay R.		111 60					
23	Bank	7623		111 60		—		
June 11	June Pay R.		108 00					
22	Bank	4047		108 00		—		
July 14	Pay R.		111 60					
26	Bank	5625.		111 60		—		
Aug. 16	Pay R.		111 60					
26	Bank	7207		111 60		—		
Sept. 15	Pay R.		108 -					
26	Bank	9162.		108 -		—	Transfr. fr. Led. 23 & Led. 4. 5 th 78.	
Oct. 23	Pay R.		111 60					
29	Bank	10430		111 60		—		
	Add. Outfit Allow. 1 st fl.		100					
	Bank	10930		100		—		
Nov. 21	Pay R. 6. F.A. fr 12 th fl.		140					
26	Bank	12615		140		—		
Dec 9.	Pay R.		124					
16	Bank	13791		124		—		
1919	Pay R.		124					
Jan 1	Bank	14613		124		—		
10	Also for Feb.							

RETURNED TO CANADA
L.P.C. TO 31/1/19
TRANSFER TO N.E. LEDGER

Notes to be an Yfd to L 12 fr L 23 & 24

ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF

RATE OF P. AND A.

DATE

AUTHORITY

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.....

Pay
F.A.
Messing

Name
Initials
Bank

DATE

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

SPECIAL AUTHORITIES
To be initialed by P.M. in every case.

INITIALS

ASSIGNED PAY.

UNIT.

RANK.

NAME.

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.....

NAME OF DATE AUTHORITY

123rd Bn

Pay 2nd
F.O. 6.
Mess 100
360

Mess.
DATE

30th 6

AUTHORITY

2nd Canada
380.121 650 1%

Name

Initials

Bank

Taylor
E.P.
of No

DATE

1917

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

SPECIAL AUTHORITIES
To be initialed by P.M. in every case.

INITIALS

1917-18

Apr 23	Pay R.		108						
27	Bank	3010		108					
May 24	Pay R.		111 60						
24	Bank	6029		111 60					
June 19	Pay R.		108						
21	Bank	7999		108					
July 17	Pay R.		111 60						
25	Bank	13071		111 60					
Aug 21	Pay R.		111 60						
23	Bank	17080		111 60					
Sep 18	Pay R.		108						
22	Bank	21908		108					
Oct 15	Pay R.		111 60						
22	Bank	26282		111 60					
Nov 17	Pay R.		108						
21	Bank	30733		108					
Dec 11	Pay R.		111 60						
13	Bank	35096		111 60					
Jan 16	Pay R.		111 60						
21	Bank	39441		111 60					
Feb 14	Pay R.		100 80						
18	Bank	40953		100 80					
Mar 14	Pay R.		111 60						
22	Bank	42598		111 60					

ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF

DATE

AUTHORITY

DATE

AUTHORITY

Beneficiary

Address

Name

Initials

Bank

Amount. \$

Separation Allowance issued. Yes or No.....

DATE

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

SPECIAL AUTHORITIES
To be initialled by P.M. in every case.

INITIALS

ASSIGNED PAY.	UNIT.	RANK.	NAME.
Beneficiary	NAME OF		
Address	DATE	AUTHORITY	
Amount. \$			
Separation Allowance issued. Yes or No.....			
	129 th Bn	Lieut.	Name Taylor
			Initials E. P.
			Bank of Montreal.

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS.
1916								
Sept 8	Balford St. Bank.			75 35				
21	do do		75 35					
21	Sep Pay R Montreal. 2/18/16		110					
26	Bank			110				
Oct 9	Oct Pay		111 60					
16	Bank			111 60				
Nov 20	Nov Pay.		108					
24	Bank			108				
Dec 12	Dec Pay R.		111 60					
15	Bank			111 60				
1917								
Jan 23	Jan Pay R.		111 60					
25	Bank	19289		111 60				
Feb 17	Feb Pay R		100 80					
22	Bank	21943		100 80				
March 21	Pay R.		111 60					
26	Bank			111 60				

1950

Paymaster
Auditor

M. or S. *S.*

Name and Address of Next of Kin *Mr. Ida Taylor (Mother)*
127 2nd Ave. Maisonneuve. Montreal.

Separation Allowance \$ Effective Date

By Whom Paid

Payable to Relationship

Address

CASUALTIES, AFFECTING PAY AND ALLOWANCES

PARTICULARS	EFFECTIVE DATE	AUTHORITY

Regimental No. *2738555*

Rank *Spr.*

Name *Taylor, Edward Kingsley*

If in P.F. What Unit

P. F. Allowances

Original Unit C.E.F. *6th Signal Co.*

Place of Attestation *Montreal, Quebec*

Transferred to

Date

Authority

Date of Attestation *15.11.18*

Transferred to

Date

Authority

Assigned Pay \$ *15.00* ✓

Date Effective *1.1.19* ✓

Authority *M. F. W. 2583*

Payable to *Mrs. Ida Taylor* ✓

Relationship *Mother*

Address *127 2nd Ave. Maisonneuve. Montreal, Que.*

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

Effective

Discharged. Date and Place

Authority

L.L. 51643 M. & D. 9587
25-11-18-5m.

MONTH	PAY				OTHER CREDITS	ASSIGNED PAY CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS								ASSIGNED PAY CANADA	ASSIGNED PAY OTHER COUNTRIES	OTHER CHARGES	Regimental Charges	TOTAL DEBITS	BALANCE		DEFERRED PAY	PAY AVAILABLE FOR ISSUE	SEP. ALL'CE	REMARKS		
	No. of Days	RATE	AMOUNT					COL. No. 1				COL. No. 2				COL. No. 3				COL. No. 4									DEBIT						CREDIT	
			\$	c				No.	Date	No.	Date	No.	Date	No.	Date	No.	Date	No.	Date	No.	Date	\$	c						\$	c					\$	c
<i>Jan</i>	<i>31</i>	<i>1.10</i>	<i>34</i>	<i>10</i>	<i>33</i>	<i>50</i>	<i>67</i>	<i>60</i>	<i>87</i>	<i>23</i>	<i>13</i>	<i>99</i>	<i>29</i>	<i>17</i>	<i>163</i>	<i>31</i>	<i>10</i>	<i>00</i>	<i>13</i>	<i>00</i>	<i>5</i>	<i>14</i>	<i>15</i>	<i>00</i>	<i>57</i>	<i>00</i>	<i>10</i>	<i>60</i>	<i>10</i>	<i>60</i>	<i>✓</i>	<i>C. bal. 31.12.18</i>				
<i>Feb.</i>	<i>28</i>	<i>1.10</i>	<i>30</i>	<i>80</i>	<i>25</i>	<i>31</i>	<i>05</i>	<i>18</i>	<i>2</i>	<i>10</i>	<i>187</i>	<i>28</i>	<i>155</i>	<i>27</i>	<i>500</i>	<i>980</i>	<i>15</i>	<i>00</i>	<i>25</i>	<i>30</i>	<i>05</i>	<i>1</i>	<i>1500</i>	<i>38</i>	<i>64</i>	<i>4</i>	<i>54</i>	<i>1</i>	<i>11</i>	<i>60</i>	<i>✓</i>	<i>Trans. M. C.</i>				
<i>Mar</i>	<i>31</i>	<i>1.10</i>	<i>34</i>	<i>10</i>	<i>34</i>	<i>10</i>	<i>216</i>	<i>31</i>	<i>194</i>	<i>20</i>	<i>14</i>	<i>98</i>	<i>866</i>	<i>15</i>	<i>00</i>	<i>38</i>	<i>64</i>	<i>4</i>	<i>54</i>	<i>1</i>	<i>1500</i>	<i>45</i>	<i>31</i>	<i>82</i>	<i>3</i>	<i>118</i>	<i>8</i>	<i>24</i>	<i>✓</i>	<i>88.512</i>						
<i>Apr.</i>	<i>30</i>	<i>1.10</i>	<i>33</i>	<i>00</i>	<i>33</i>	<i>00</i>	<i>229</i>	<i>19</i>	<i>236</i>	<i>30</i>	<i>6</i>	<i>37</i>	<i>10</i>	<i>00</i>	<i>15</i>	<i>00</i>	<i>45</i>	<i>25</i>	<i>172</i>	<i>51</i>	<i>27</i>	<i>34</i>	<i>19</i>	<i>10</i>	<i>27</i>	<i>34</i>	<i>27</i>	<i>34</i>	<i>✓</i>	<i>2734</i>						
<i>May</i>	<i>31</i>	<i>1.10</i>	<i>34</i>	<i>10</i>	<i>34</i>	<i>10</i>	<i>166</i>	<i>10</i>	<i>33</i>	<i>75</i>	<i>199</i>	<i>85</i>	<i>36</i>	<i>35</i>	<i>4</i>	<i>146</i>	<i>5</i>	<i>00</i>	<i>14</i>	<i>00</i>	<i>7</i>	<i>500</i>	<i>45</i>	<i>25</i>	<i>172</i>	<i>51</i>	<i>27</i>	<i>34</i>	<i>✓</i>	<i>2734</i>						
											<i>Boat Exp. at 15%</i>				<i>10.00</i>																					

Empress of Russia

Carried Forward

Name of Ship **LAPLAND**

Embarked **FEB 21 1919**

Disembarked

Army Form W3987

(2000) Wt. W. 1910—FORMS 6-18 J.F.W. (20007)

Regtl. No. Rank **Lieut** Military District

Name **Edward Percy** **Taylor**
(Christian Names in full) (Surname)

Unit **6 C.A.B** Regt. **129**
or Corps

Category **INT 2** Next of Kin **Sister**

REASON FOR RETURN.

Bank Clerk

Intended place of Residence **Hamilton**

COVER

FOR

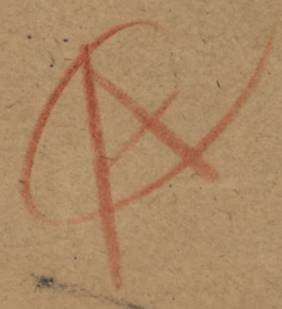
DISCHARGE DOCUMENTS.

Edward Percy
6 C.A.B.
Taylor

Serial



Authority: HQ. O.A.F.C. Tol. I.G.3a - 3302.



1912

100

12

100

100

100

100

100

100

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

Corps 9th Cav Eng

Horton ^{War} ~~Military~~ Hospital Epsom

No. Rank and Name Lieut. Taylor

Age 32 Service 3 1/2 yrs

Disease Bols

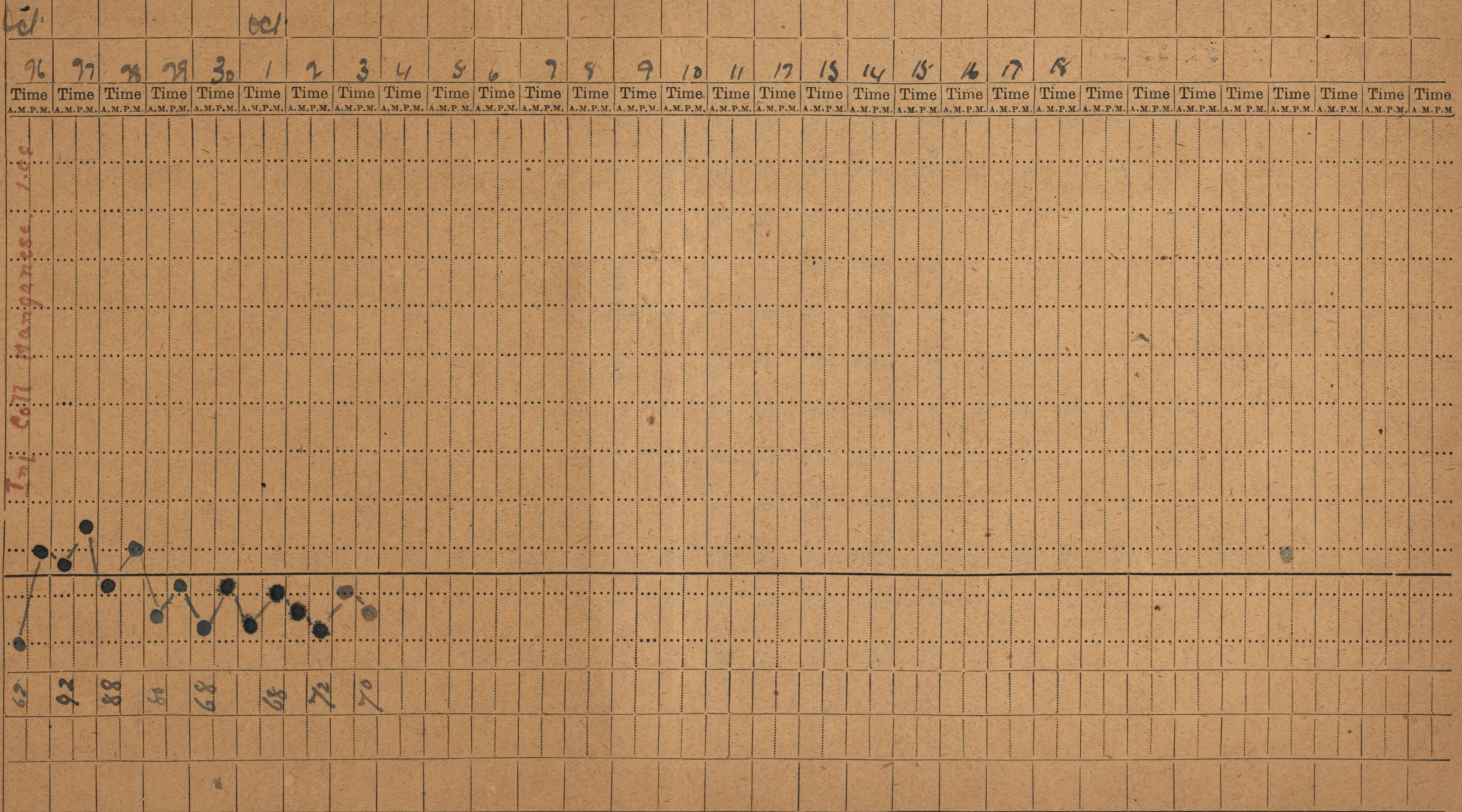
Date of admission 28. 9. 19

Date of discharge

Result

Dates of Observation																														
	Days of Disease																													
Temperature, Fahrenheit																														
	Time																													
107°	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.
	107°																													
106°																														
105°																														
104°																														
103°																														
102°																														
101°																														
100°																														
99°																														
98°																														
97°																														
Pulse per Minute																														
Respirations per Minute																														
Motions per 24 Hours																														

Tyl Coll Manganese 1.08



Signature _____

In charge of case _____

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B 181.

Corps _____

No. _____

Rank and Name Major Wettsale

Age _____

Military Hospital _____

Service _____

Disease _____

Date of admission _____

Date of discharge _____

Result _____

Dates of Observation	Sept																													
	20 21 22 23 24 25																													
Temperature, Fahrenheit	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time
	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.
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, _____

T 33

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

M. OR S. _____ REGT. No. _____ RANK *Lieut.* NAME (IN FULL) *TAYLOR, Edward Percy*

NEXT OF KIN _____ RELATIONSHIP _____ ORIGINAL UNIT *9th Co.* IF IN P.F. WHAT UNIT? _____ (BLOCK LETTERS, SURNAME FIRST)

ADDRESS _____ PARTICULARS *Subs 4-3-19 D071* EFFECTIVE DATE *4-3-19* AUTHORITY *✓* PLACE 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 *18-3-19* REASON *Demob* AUTHORITY *WSP* IF ENTITLED TO POST DISCHARGE PAY *✓*

*34 Alcester Road
Moseley
Birmingham. Eng.*

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	
	NO. OF DAYS	RATE	AMOUNT		CREDITS		COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3				DEBIT	CREDIT	DEBIT	CREDIT		
			\$	C.	\$	C.	\$	C.	\$	C.	\$	C.									\$
Balance from previous account																					
<i>31-1-19</i>																					<i>17/11</i>
																					<i>19</i>
																					<i>19 00</i>
<i>July 1 to</i>	<i>46</i>	<i>3⁰⁰</i>	<i>138</i>	<i>✓</i>	<i>2550</i>	<i>19 00</i>	<i>18250</i>	<i>108334</i>													<i>18250</i>
<i>incl 18</i>																					<i>18250</i>
<i>183 days</i>	<i>3-</i>				<i>549</i>	<i>✓</i>	<i>549 00</i>														<i>9300</i>
									<i>Apr 9</i>	<i>281599</i>											<i>93 00</i>
									<i>May 7</i>	<i>388664</i>											<i>90 00</i>
									<i>June 3</i>	<i>387584</i>											<i>93 00</i>
									<i>61</i>	<i>Jul 9</i>	<i>750645</i>										<i>90 00</i>
									<i>90</i>	<i>Aug 14</i>	<i>704438</i>										<i>183</i>
									<i>110</i>	<i>Sept 8</i>	<i>1026950</i>										<i>90</i>
																					<i>639</i>
																					<i>639</i>

FOR PAYMASTER WAR SERVICE GRATUITY

4-30-119

20 1833

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.

Temp. original not available

Unit, Regiment or Corps..... C.E.....

Regimental No..... Rank Lieut. Name TAYLOR, Edward Percy
C. E. F.

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

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				
	U.M.F.C.	T.O.S. #2 D.D.	Toronto	4-3-19	Auth. R.O. 763 Pt. 2 D.O. 71 <i>A. M. Turner</i> Major, For Lieut.-Colonel, O.C. No. 2 District Depot.
		S.O.S. on gen. demob.	Toronto	18-3-19	Auth. 2MD 4-30-119 dated 20-3-19. Pt. 2 D.O. 85. <i>M. 77 Regt/15.10.20</i> <i>A. M. Turner</i> Major, For Lieut.-Colonel, O.C. No. 2 District Depot.

(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.]

ET?

Rank and Name

TAYLOR, Edward Mercy.

Lieut, ✓

A.F.B. 158
123rd Bn. 7.3.17
" 5.17.
" 1.16.14.

Regimental No.

Name and Address of Next-of-Kin

Sister. ✓

Unit 129th Battn.

Mrs Sarah E. Daniel

Date of enlistment

34. ~~Alcester Road.~~
~~96. Aston Road North.~~

Place of birth Birmingham, England ✓

Mosley, Birmingham.
Birmingham, England. ✓

Married (Yes or No)

Date and place of discharge

Unit R.L.G-T-354.

If in Permanent Force

Reason for discharge

Character on discharge

Promotions or appointments

Lieut 25.8.15 C.M.

SAILED 23 8 16 H Q 5936.1

Handwritten initials: O, F, E

Large handwritten letter: M

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				
1	21.10.16	123. Bn. T.O.S. on Transfer from 129th - Bram - do Proceeded O/Sias.		16.10.16	17 PT 217 PT 243, 9.3.17 (NR) R.L. 1-126-95
	20.2.18	123 Bn. Granted 14 days leave		12.12.17	PT 16
2	25.5.18	ack. Trans from 123 T. Bn to 9 Bn Co. Eng		24.5.18	PT 202. Tos 6 1/2 of 16
3	16.9.18	W.O. Supte Camp Lieut C.E. to C.O. Regt		24.5.18	LT 30902
	4.9.18	123 Bn. Granted 14 days leave to U.K.		20.8.18	PT 2 of 87
4	12.9.18	A.M.S. Adm 20 Gen Hqs Camiers		12.9.18	Cf 1086 Boils pt.
	4.10.18	9 Bn Co. E. SOS on tram to C.E.R. Pool on being invalided to Eng		24.9.18	PT 25.
	1-10-18	C.E.R. Dept. Tos as posted to 9 Bn CE on cract & trans & shown patient in hospital.		26.9.18	PT 2 of 260
4	27.9.18	A.M.S. Adm Horton (County of Lon) 16. Hqs		26.9.18	Cf 1097. Boils
	5-10-18	C.E.R. Pool. T.O.S. for 9 Bn CE. on being cract to Eng		25.9.18	PT 2 of 101 ✓
4	11.11.18	am.S. Adm. Cambou Off. Hqs. Matlock Bath		23.10.18	Cf 1135 Boils
5	4.11.18	C.E.R.D. sent to hospital in hospital SOS to C.E.R.C.		29.10.18	Cf 1149
				29.10.18	PT 20.259 Tos 1156. 144 2. CERs
6	28.1.19	2 C.E.R. Bn. S.O.S. to 2 C.E.R. Bn		28.1.19	PT II of 23.

A.F.B. 106,

20 MAR. 1917

A.F.B. 103,

15 OCT. 1918

Rank and Name

Name and Address of Next of Kin

Regimental No.

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

11.3.19 1st C.F.R.P. S.O.S. on transfer to C.E.F. in 20/2/19 Pt. II of 58
Canada

Sailed for Canada 20.2.19 Sailing No 17

12925

OR YOUR INFORMATION

please dispose of this
M.S. in accordance to
my Council instruction
to 479 of 1910 para 19.

