

B. 3890
B.C.M.R.
E. L.

ATTESTATION PAPER.

No. 085376

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... TAYLOR
- 1a. What are your Christian names?..... Emil Clarence PA.
- 1b. What is your present address?..... 131 South Ten St., Philadelphia, USA.
- 2. In what Town, Township or Parish, and in what Country were you born?..... Toronto, Canada.
- 3. What is the name of your next-of-kin?..... TAYLOR Richard Hugh
- 4. What is the address of your next-of-kin?..... 2021 Withnell Ave. St. Louis. USA.
- 4a. What is the relationship of your next-of-kin?..... Father
- 5. What is the date of your birth?..... Septemebr 30th. 1887.
- 6. What is your Trade or Calling?..... Shoe Worker
- 7. Are you married?..... Single
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... Yes
- 9. Do you now belong to the Active Militia?..... No
- 10. Have you ever served in any Military Force?..... No ~~xxx~~ *CAF.*
- 11. Do you understand the nature and terms of your engagement?..... Yes
- 12. Are you willing to be attested to serve in the } CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } Yes
- 13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? .. No
- 14. If so, what was the nature of the disability?..... Not Applicable
- 15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?..... No
- 16. If so, what was the reason?..... Not Applicable

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, TAYLOR Emil Clarence, 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.

Emil Clarence Taylor (Signature of Recruit)

Date..... June 5th. 191 8. *E. Howard* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, TAYLOR Emil Clarence, 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.

Emil Clarence Taylor (Signature of Recruit)

Date..... June 5th. 191 8. *E. Howard* (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 Montreal. P. Q. this 5th. day of June 1918. 191

E. Howard Capt. (Signature of Justice)

Description of TAYLOR Emil Clarence on Enlistment.

Apparent Age 30 years 8 months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer).

Height 5 ft 5 ins.

Chest measurement { Girth when fully expanded 34 1/2 ins.
 Range of expansion 3 1/2 ins.

Complexion Dark

Eyes Brown

Hair Dk. Brown

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

R. D. =	<u>30</u>
L. D. =	<u>30</u>
R. EAR	<u>OK</u>
L. EAR	<u>OK</u>

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 JUN 6 1918

Place MONTRÉAL P.Q.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

Declared **FIT** by MEDICAL BOARD
 MOBILIZATION CENTRE, M. D. #4

[Signature] Medical Officer.

"A" Fit for General Service

CERTIFICATE OF OFFICER COMMANDING UNIT.

TAYLOR Emil Clarence 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] Major (Signature of Officer)
 for O.C. 1st Depot Bn. 1st Quebec Regiment.

Date June 5th. 1918. 191

REGIMENTAL DOCUMENTS

NAME TAYLOR Emil Clarence REGT. NO. 3085376 UNIT 24th Bn. H. Q. FILE NO. _____

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

DEATH

Category

DISCHARGE

Category

Demol

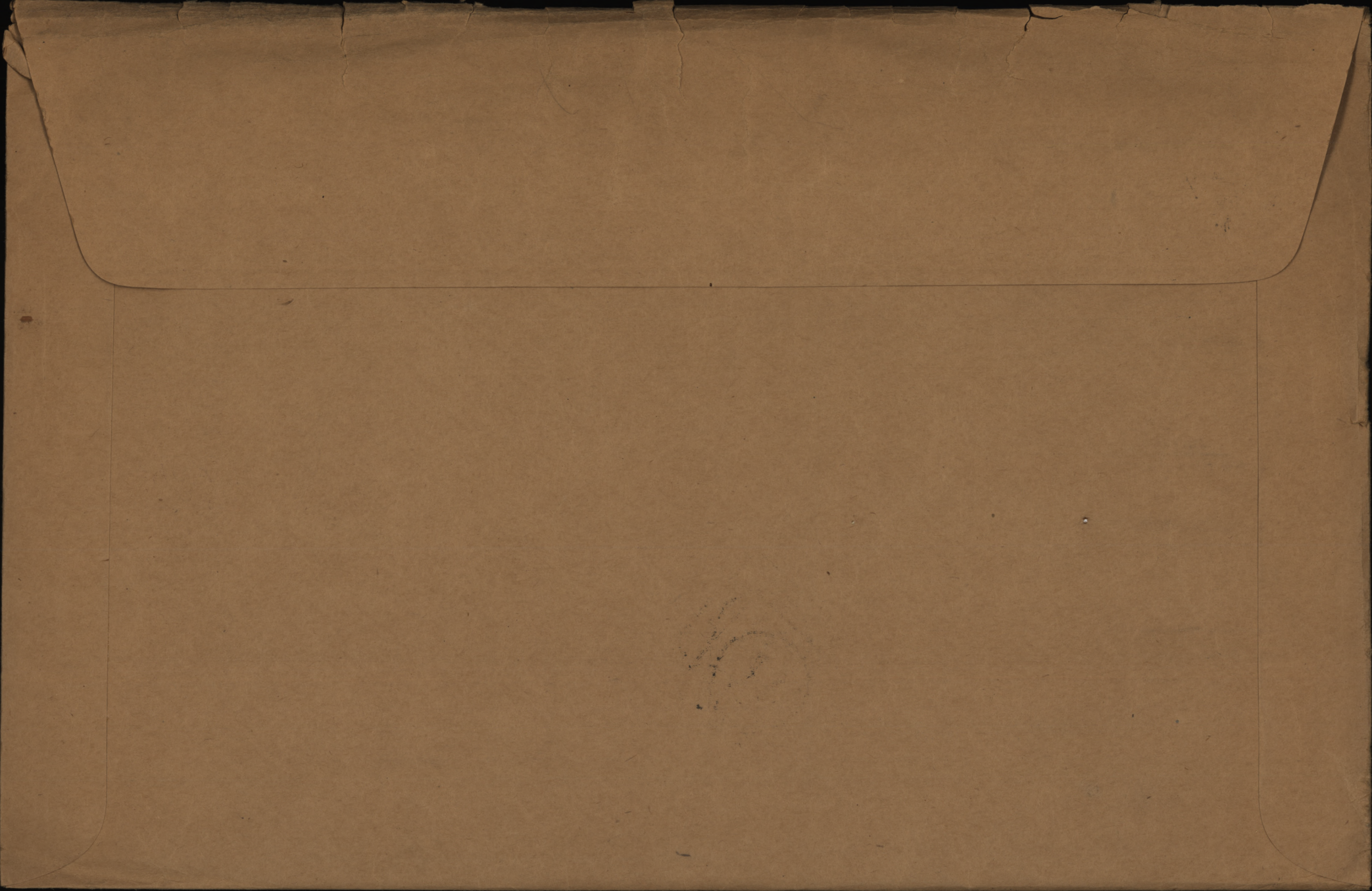
DESERTION

M

H

02458

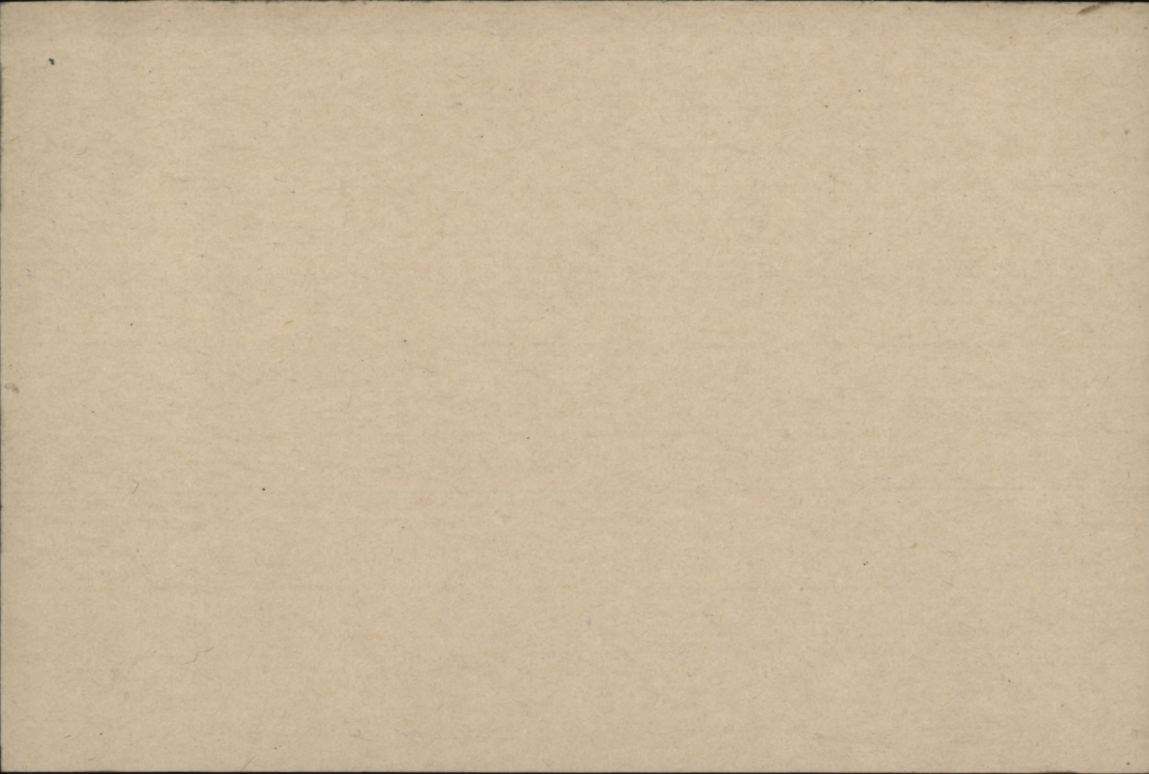
- 1 ✓ ATTESTATION PAPER (M.F.W. 23, 133, or 51)
- 2 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)
- 1 TRAINING HISTORY SHEET (M.F.W. 113)
- FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)
- REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)
- COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)
- 1 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)
- 1 DENTAL HISTORY SHEET (M.F.B. 465)
- MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)
- 1 MEDICAL EXAMINATION (M.F.W. 129)
- TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)
- PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)
- DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)
- LAST PAY CERTIFICATE (M.F.W. 44)
- PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)
- PARTICULARS OF CHARACTER (A.F.W. 3226)
- 1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)
- 4 misc
- 1 R 122
- 1 Card



Surname *Taylor* H. Q. ✓
Christian names *Ernest Clarence* M. D. No. *47*
Regtl. No. *3085376* Rank *Pte.* T. O. S. *June 5th 1918*
Unit *1st Que. Regt 1st Depo. Bn.* D. O. Pt. II *163* of *12-6-18*
S. O. S. *1-7 1919*
Reason *Demob.*
Auth. *D. 8. 186 of 5/2/19 4 SD.*

Next of kin *Taylor, Richard Hugh* Relationship *Father*
Address *2021 Withnell Ave,
St. Louis, Mo.,
U. S. A.* Also notify:

BORN—Place *Canada, Toronto, Ont.* Date *Sept. 30th, 1887.*
ATTESTED—Place *Montreal, P. Q.* Date *June 5th, 1918.*
O/S. *21/7/18* *1325-*
R/C. *28/6/19.* *353* *25-* *2/15*



es
ll

Number 3085376

Rank

L/Cpl

Surname

TAYLOR

Christian Name

Emil Clarence

Units

Q.R.

Theatre of War

England

Date of Service

8-8-18

Remarks

Latest Address

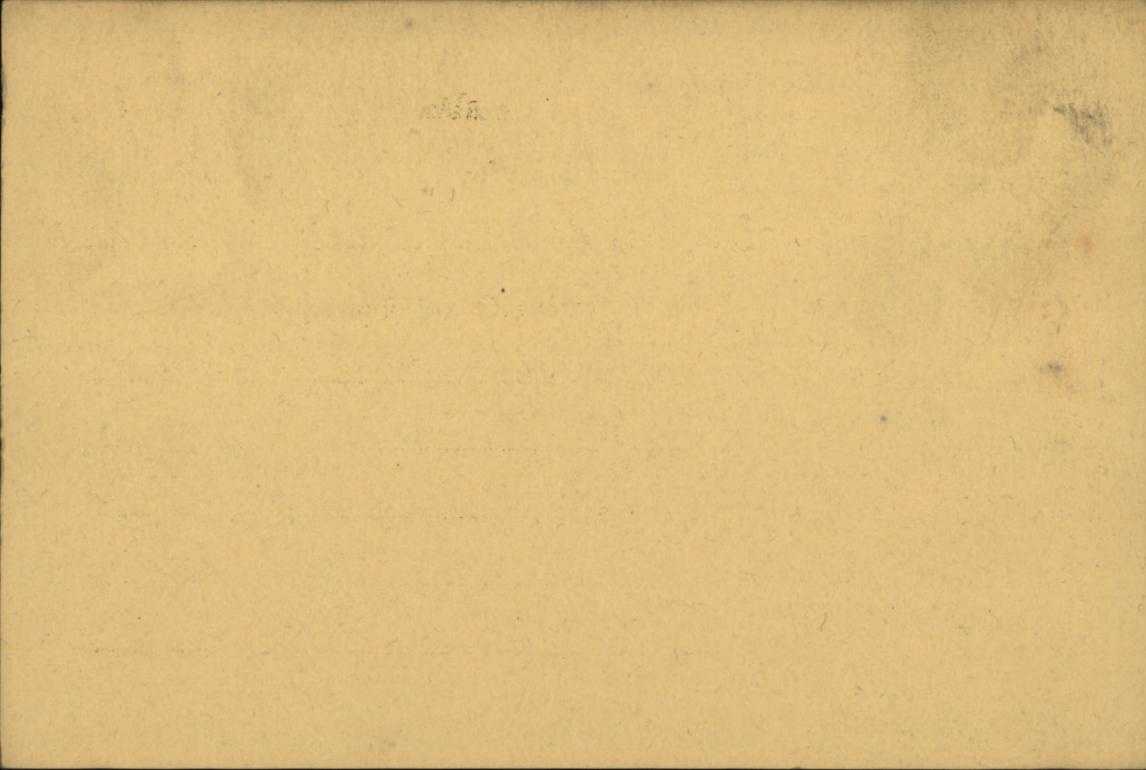
G.P.O Philadelphia
Penn.

Roll No.

A Page 2307

U.S.A.

200m.-2-21.M.



CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

WAR SERVICE BADGE
CLASS "A" NO

THIS IS TO CERTIFY that No. 3085 376 (Rank) L/cpl

Name (in full) Emile Clarence Taylor enlisted in
the 1st Depot Bn, 1st Quebec Regiment

CANADIAN EXPEDITIONARY FORCE at Montreal on the 5th

day of June 1918

HE served in 1st Depot Bn, Quebec Regt, 23rd Res Bn & 24th Bn

Demobilization.

and is now discharged from the service by reason of

Medical Unfitness

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

Age 31

Height 5'6"

Complexion Dark

Eyes Brown

Hair Dark Brown

E. C. Taylor
Signature of Soldier.

Marks or Scars

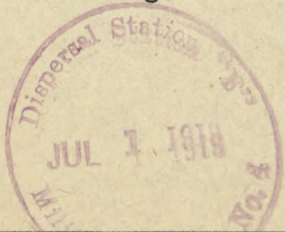
Dog Bite Left Forearm

J. Fisher
Issuing Officer.

Lieutenant,
Officer i/c Discharge Section, Dispersal Station "F"

Rank

Date of Discharge



Date July 1 1919

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.

4444

Rank *88th Dft 1st QUE* Name *Taylor Emil Clarence* Reg'l No. *3085376*
 Unit *88th Dft 1st QUE* If in perm. Corps, What Unit? *Montreal June 5th 1918* Married or Single *Single*
 Place and Date of Enlistment *Montreal June 5th 1918* Place of Birth *Toronto, Ont.*
 Name and Address, Next-of-Kin *Taylor Richard Hugh* Relationship *Father*
2021 Withnell Ave. St Louis, U.S.A.
 Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship
 Discharge, Date and Place Reason Character

N.E. R.B. NO.
 File R.L. *OR Cal*
 Category

Misc.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents
Date.	From whom received.				
					<i>8 8 18 S S COMAIL</i>
<i>18.8.18</i>	<i>23rd Bn</i>	<i>TOS from Canada</i>	<i>Pte Bshot</i>	<i>8.8.18</i>	<i>P/O. 230</i>
<i>17-11-18</i>	<i>- " -</i>	<i>S.O.S. to 24th Bn</i>	<i>Pte</i>	<i>17-11-18</i>	<i>- 321 TOS DO 125. 23¹¹/₈ 24 Bn.</i>
<i>11-2-19</i>	<i>24th Bn</i>	<i>Post to 6th corps Recf Camp</i>	<i>Field</i>	<i>28-1-19</i>	<i>6010 (CERE Do 9 of 13/2/19)</i>
<i>11.4.19.</i>	<i>G.B.P.C.</i>	<i>Trans to I cleaning Plaul.</i>		<i>2.2.19</i>	<i>Do 22 (C.P. Do. 23. 4. 19)</i>
<i>28.4.19.</i>	<i>Clean Plaul.</i>	<i>Appointed h/corparal</i>		<i>3.2.19</i>	<i>Do. 1</i>
<i>24.5.19</i>	<i>-</i>	<i>Proceed to England</i>		<i>16.5.19</i>	<i>Do 5,</i>
				<i>18.6.19</i>	
<i>23.5.19.</i>	<i>O'Wing</i>	<i>90 S. pending return to Can.</i>	<i>Witley</i>	<i>17-5-19</i>	<i>- 38.</i>
<i>9.7.19</i>	<i>-</i>	<i>S.O.S. on trans to G. 4. Canada</i>		<i>18.6.19</i>	<i>Do 73,</i>

Index

2-11-18 2-11-18 2-11-18

S L 87-F-43 19/18.6.19

Los M O 4

FORM OF WILL

Gen Dely Philadelphia Penn-va

I, TAYLOR Emil Clarence (Name in full)

Regimental Number 3085376 serving in 1st DEPOT BN. 1st QUEBEC REG'T.

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

I devise all my real estate unto

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

absolutely, and my personal estate I bequeath to

Mrs. Julia TAYLOR Ave. 2021 Withnell St, St. Louis, USA.	Name and Address
.....	of person or
.....	persons to receive
.....	personal estate*
.....	(See note).

NOTE

This space for the appointment of Executor if necessary.

IMPORTANT NOTE

This must be signed and Dated by THE SOLDIER HIMSELF.

this 6 day of June A.D. 1918.

Emil Clarence Taylor Signature of Soldier.

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

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

Signature of First Witness [Signature]

Address of Witness Guy Street Barracks Montreal

THE TWO WITNESSES Occupation of Witness Soldier

MUST SIGN HERE Signature of Second Witness [Signature]

Address of Witness Guy St Barracks

Occupation of Witness Soldier

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				
18-11-18	C.I.B.D.	T.O.S. 24 th BN ON ARRIVAL	FRANCE	17-11-18	N. R. 819
20-11-18	C.I.B.D.	S.O.S. TO C.C.R.C.	FIELD	20-11-18	N. R. D. 1473
20-11-18	C.C.R.C.	T.O.S.	"	20-11-18	N. R. A. 1840
	C.C.R.C.	S.O.S. TO UNIT	"		N. R.
	UNIT	JOINED UNIT	"		B. 213
9-1-19	CCRC	On Command to b.b.c.	"	9-1-19	P228H
23-1-19	9 th Bn 1 st Ech.	S.O.S. 7 th Bn on transfer to CCRC	"	28 1/2 19.	Da 434 of 23-1-19 N.R.A. 1996 P20#10 of 19.
3.2.19	"	T.O.S. CCRC from 24 th Bn cc CCRC to no. 1 sec Cdn. Cleansing plant. T.O.S. do.	"	29-1-19	P00-9-19. K.A. 38235
				2-2-19	P.I.O. 22/19.
				3-2-19	1 23.4.19
12.4.19	Unit	App'd. Lt. Cpl. PROCEEDED TO ENGLAND		2-2-19	B 213. P12 ord 16 MAY 1919 / 23.4.19

DO. No. 125 of 1918

Capt. *McBain*
for Lt.-Col. A. A. G.
Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

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

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

Casualty Form—Active Service.

250M.—1-16.
H. Q. 1772-39-920.

Unit, Regiment or Corps _____

Regimental No. 3085376 Rank L/C. Name Taylor Emil Clarence
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				
23/5/19	24th Bn	S. O. S. of "O" Wing	Witley	17/3/19	D. O. P. T. 2 no 38.
	"O" WING	S. O. S., O. M. F. C., ON PROCEEDING TO CANADA	WITLEY		D. O. PT. 2 No

H. M. T. SATURNIA
EMB. GLASGOW 13 6-19
EMB. MONTREAL 28 6-19

G. H. Walker
Lieut.,
OFFICER I/c RECORDS,
"O" Wing C. C. C.

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

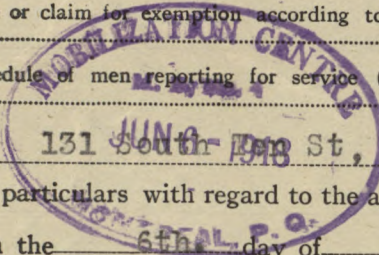
Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
5-7-19	O/S	TOS D.D.#4. Disp. Sta.	"F" Montreal	18-6-19	D.O. Ptl1. #186
5-7-19		SOS D.D.#4. Demob.	"	1-7-19	D.O. Ptl1. #186 R.O. 1420.
<p><i>E. H. G. Litcher</i> Lieutenant, of Assistant Adjutant, District Depot No. 4.</p>					

ORIGINAL MILITARY SERVICE ACT, 1917. MEDICAL HISTORY SHEET.

a

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

1. Surname TAYLOR Christian name Emil Clarence
 2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule B.C. M. R.
 3. Consecutive number on schedule of men reporting for service (if he appears on it) _____
 4. Address (including street and number, if any) 131 South 4th St, Philadelphia, PA. USA.



The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 6th day of June 1918, 1917, by the undersigned medical board sitting at Montreal, P. Q.

5. Age as stated 30 Years 8 Months. 6. Apparent age 30 Years 8 Months
 7. Height 5 Feet 3 Inches. 8. Weight 131 Pounds.

9. Chest measurement { Minimum 31 Ins. Maximum 34 1/2 Ins. 10. Complexion Dark { Eyes Brown Hair Dk. Brown

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

13. Number of vaccination marks { Right arm _____ Left arm 1 14. When vaccinated last Child

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

16. Slight defects but not sufficient to cause rejection _____ **DENTAL CORPS**
 The man denies having had { Rheumatism Tuberculosis Syphilis We find no evidence of past { Rheumatism Tuberculosis Syphilis
 (Strike out disease admitted or suspected.)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category **A²**
 17. (a) Vision R. 30 L. 30
 (b) Hearing. R. OK L. OK

J. P. [Signature] President.
L. M. Lindsay Capt Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
JUN 10 1918		<u>G. H. St</u> M.O.	JUN 10 1918		<u>G. H. St</u> M.O.
		M.O.	JUN 22 1918		<u>G. H. St</u> M.O.
		M.O.	JUN 27 1918		<u>G. H. St</u> M.O.

Joined 5th day of June 1918, 191 at Montreal, P. Q.

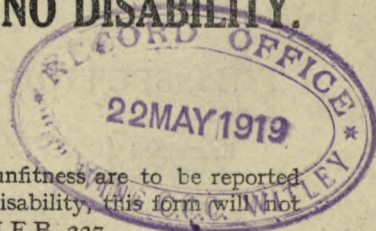
	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>1st DEPOT BN. 1st QUEBEC REG'T.</u>			
Transferred to.....	<u>24 Bn</u>	<u>3085376</u>		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT
<u>Volesters</u>	<u>20. 7. 18</u>	<u>a "</u>	<u>a. m. [Signature]</u>

Signature of Man

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.



Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 3085376 Rank 2 Lt Surname Taylor
(Given name in full)

Unit or Corps 24th Bn Birthplace Toronto Ont

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

I. GENERAL DESCRIPTION:

Physique fair Weight 135 lbs. Height 5' 5" Colour of Eyes brown

Nutrition good

Pulse good 72

Condition of arteries fair

Vision Rt. 6/12 Left 6/12

Hearing (conversational voice) Rt. 21 ft.

Left 21 ft.

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

Scars flexor & extensor surfaces of left forearm
Scar left thumb surface

Opinion as to general health and physical condition good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No") (Subjective evidence may be sufficient in certain cases.)

Nervous System no Genito Urinary System no Cardio-Vascular System no

Special Senses no Integumentary System no Respiratory System no

Disturbance of Mentality no Muscular System no Digestive System no

Osseous and Joint System no Any other general condition no

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at *Witley*.....(Overseas)

Date *22.5.19*..... Signed *P. Hoey*..... M.O.

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

Signature *Emil C. Taylor*.....

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

THIS SECTION FOR USE IN CANADA—

Examined at(Canada)

Date Signed M.O.

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

Signature

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

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

Jine

CANADIAN ARMY DENTAL CORPS, O.M.F.C. DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) Taylor E.U.

REGIMENT 24th C.I.B. RANK L/C No. 3085376

Date of Examination in England 19-5-19 Date of Examination in France _____

DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 14,
2. EXTRACTIONS _____
3. CROWNS _____
4. DENTURES
 - (a) Full Upper _____
 - (b) Part Upper Right
 - (c) Full Lower _____
 - (d) Part Lower _____

HAS HE EVER REFUSED DENTAL TREATMENT? No

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)

- (a) In Canada _____
- (b) In England Yes
- (c) In France _____

R. Simpson Capt
A.D.D.S.M.D. No. 4

Signature of Dental Officer E.S. Millett Capt.

1948

1948

1948

1948

1948

Faint, illegible text, possibly bleed-through from the reverse side of the page.

Faint, illegible text at the bottom of the page, possibly bleed-through or a signature.

* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.	NAME:- TAYLOR, Emil Clarence				
EFFECTIVE DATE:-		EFFECTIVE DATE:-		NUMBER:- 3085376.				
AMOUNT:-		AMOUNT:-		PARTICULARS OF RANK OR APPOINTMENT				
NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.								
				AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT		
				L.P.C. from Canada	1-8-18	Plt.		
				Do-1-23-4-19-23rd Reg	3-2-19	a/c pl (with pay)		
				UNIT AND TRANSFERS				
				ORIGINAL UNIT:- 88, 1-1 st Div Regt				
				DATE ACCOUNT FIRST OPENED:- 1-8-18				
				AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S F'D		
						23rd Regt		
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK								
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	
1919 6/25		Zulu	9 12	20/5/19		ZPC Plt 21/5 C & S	161 64	
23/5	4716	Wiley	73 -					
			82 10					
				DAILY RATES OF PAY AND ALLOWANCES				
				AUTHORITY	PAY	P.A.	P.F.A.	SUBS'CE ALL'CE
					1 -	10		
				Do-1-23-4-19-23rd Reg	1 05	10		

PARTICULARS OF RENDERING NON-EFFECTIVE: Dis Can 31/5/19 No 9866 20/5/19 Wiley to B White MWD compiled 30/5/19

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
1918	Bal. from Canada								4470		
Aug	P.P.	34 10							78 80		
				AR 3580 7 th Reg 17/8	487				73 93		
				- 4866 - 30/8	487				69 06		
		34 10			9 74					15	
SEP	P.P.	33							102 06		
				AR 1884 23 rd Reg 14-9-18	487				97 19		
				" 1885 " 20-9-18	9 73				87 46	30	20/5/18
		33			14 60						
Oct.	P.P.	34 10							121 56		
				AR 1721 23 rd Reg 12-10-18	7 30				114 26		
				" 1871 " 31-10-18	9 73				104 53	45	
		34 10			17 03						
Nov.	P.P.	33							137 53		
				AR 1997 23 rd Reg 15-11-18	9 73				127 80		
				" 3243 2 nd Div S.L.R. 28-11-18	13 06				114 74		
Dec.	P.P.	34 10							148 84		
				" 3670 " " 9-12-18	3 73				145 11		
				" 4247 " " 17-12-18	3 73				141 38		
1919	P.P.	34 10			30 25				175 48	90	
Jan		101 70			30 35						
Feb	P.P.	30 80							171 75		
				AR 5232 " " 5-1-19	3 73				202 55		
				" 2576 " " 21-1-19	3 73				198 82		
				" 3037 C.M.R.C. Depot 1-2-19	3 73				195 09		
				AR 825 Ent. Camp de Haver 5-2-19	3 73				191 36		
				AR 1429 " " 15-2-19	7 46				183 90	120	
				ban. Forwd.					22 38		

1919

NUMBER 3085376

RANK

Sgt

NAME

Taylor

E. C.

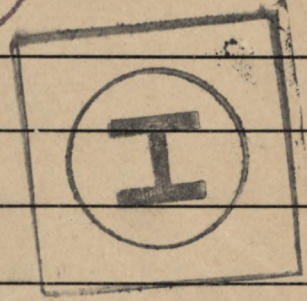
MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
July	Brot. Forw.	30	80		22	38			183	90	120
March	S. P.	34	10						218	-	
				DNAR-3134 Emb. Camp Home 25.2.19	7	46			210	54	
				" " 7462 " " 14.3.19	7	46			203	08	
		64	90		37	30					
April	P.P.	33							236	08	
				AR-9029 Emb. Camp R. Home 28.3.19	7	46			228	62	
				- 1288 " " 12.4.19	7	30			221	32	
				- 2182 " " 17.4.19	13	69			207	63	
	a/cpl pay 3.2.19-30.4.19 = 87dy @ 059 Do. 1 - 23.4.19 - 23rd Res (19238)	4	35		28	45			211	98	
May	1/2 cpl P.	35	65						247	63	
				AR-1708 C.E.C. Home 29/4/19	7	30			240	33	150
	Int on deff pay	3	43		35	75			243	76	
		76	43		35	75					
				AR-4716 O' Home 23.5.19	73				170	76	
				- 8196 " " 10.6.19	9	77			161	03	L.P.C. 2nd
				- 6239 C.E.C. Home 13.5.19	8	72			152	31	
					91	45					
South Cam 54-87-18.6.19-ARRD-4											

PROCEEDINGS ON DISCHARGE.

(Demobilization.)



Discharge Area *F.A.*
Occupational Group *14*



1. No. *3085376*

2 Rank. *Lt Cpl.*

3. Name. *Emiel Clarence Taylor*

4. Unit. *24th Bn.*

5 Date of Discharge *1-7-19* Place *Montreal, P. 2*

6 Reason for Discharge *Demobilization*

7. Authority. *R.O. 1420. D.D.#4. D.O. Pt 11. #186*

8. Proposed Residence after Discharge *Philadelphia, Penn. U.S.A.*
Gen. Delly

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.? *B 39 Montreal*

July 7/19
E. C. Taylor

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place *Montreal* *July 1/19*
U. S. M. I. SATURNIA

Date *1 EMB. GL' SGOW 13 6-19*

1 DICEMB. MONTREAL 28 6 19

Signature *[Signature]*
Official Discharge Secy (O. C. Discharging Unit.)

PROCEEDINGS ON DISCHARGE
(Transmittal)

1. No.	
2. Rank	
3. Grade	
4. Title	
5. Date of Discharge	
6. Reason for Discharge	
7. Authority	
8. Proposed Discharge after Discharge	
CERTIFICATE TO BE SIGNED BY SOLDIER	
I, the undersigned, certify that the above named man and date I received my discharge Certificate	
Signature of Soldier	
EXPLANATION	
The discharge of the above named man is hereby confirmed.	
Date	
Signature	
(O. C. Recruiting Unit)	

LIST OF DISCHARGE DOCUMENTS

Attestation Paper, Triplicate	Medical Form W. 20
or Particulars of Receipt	Medical Form W. 122
Field Conduct Sheet	Medical Form W. 118 or A. R. 122
Company Form	Medical Form W. 104 or A. R. 102
Last Pay Certificate	Medical Form W. 44
Certificates that missing documents are noted inside	
Medical History Sheet	Medical Form W. 218 or A. R. 218
Proceedings of Medical Board	M. T. O. 101, A. R. 101 or A. R. 102
Dental History Sheet	Medical Form W. 147
Medical Report	M. T. O. 102, A. R. 102 or A. R. 103
Regimental Conduct Sheet	Medical Form W. 204
Company Conduct Sheet	Medical Form W. 204

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

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122.)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
(Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a),
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing } Statement Q.M.G. Form (D.O.S. 2),
12. Last Pay Certificate (P. 851). *& dup*
13. Pay Book (A.B.G-4).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group *B*

Checked by No. *9*

.....

Date *13 JUN 1919*

