TRIPLICATE

~~Reg. No. 5670~~

ATTESTATION PAPER.

No. ~~70~~

Folio. 521180

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? ..... James Eli Taylor
2. In what Town, Township or Parish, and in what Country were you born? ..... Cardiff, Wales.
3. What is the name of your next-of-kin? ..... (Wife) Rose Taylor
4. What is the address of your next-of-kin? ..... 1133, 22nd. Ave. E. Vancouver.
5. What is the date of your birth? ..... Sept. 3rd. 1875.
6. What is your Trade or Calling? ..... Hoisting Engineer.
7. Are you married? ..... Yes
8. Are you willing to be vaccinated or re-vaccinated? ..... Yes
9. Do you now belong to the Active Militia? ..... No
10. Have you ever served in any Military Force? ..... No
    If so, state particulars of former Service.
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

Jas. E. Taylor (Signature of Man).

Thos H Sayer (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, James Eli Taylor, do solemnly declare that the above answers made by me to the above questions 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.

Jas. E. Taylor (Signature of Recruit)

Date June, 15th., 1915. Thos. H. Sayer (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, James Eli Taylor, 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.

Jas. E. Taylor (Signature of Recruit)

Date June, 15th., 1915. Thos. H. Sayer (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 Esquimalt. B.C. this 15th., day of June, 1915

S. Oait (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

[signature] (Approving Officer)

Lieut. Colonel

O.C. NO. 5. "OVERSEAS" GENERAL HOSPITAL C.E.F.

200 M.—8-14.
H.Q. 1772-1-13.

Description of James Eli Taylor on Enlistment.

Apparent Age 39 years months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 6 ft. - ins.

Chest measurement: Girth when fully expanded 37½ ins.
Range of expansion 2½ ins.

Complexion Dark

Eyes Hazel

Hair Brown

Religious denominations:
- Church of England X
- Presbyterian
- Wesleyan
- Baptist or Congregationalist
- Other Protestants (Denomination to be stated.)
- Roman Catholic
- Jewish

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

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

Scar from Bubo
Left Groin.

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 June, 15th. 1915. Wallace Wilson Capt AMC

Place Esquimalt. B.C. W Clarke Capt AMC

H L Burns Capt AMC Medical ~~Officer~~ Board

*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.

James Eli Taylor. 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)
Lieut. Colonel
O.C. NO.5. "OVERSEAS" GENERAL HOSPITAL C.E.F.

Date July 23rd 1914.

Incomp.

NAME TAYLOR - James Eli REGT. NO. 521180 UNIT C.A.M.C. H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
1	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)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
1	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)					
1						
4	Misc					
1	C D 3					

03150

26-21
4-21
6-21

1

Fw Slam

Number 521180 Rank Cpl

Surname TAYLOR

Christian Name James Eli

Units C A M C Theatre of War France

Date of Service 16-11-15

Remarks

Latest Address ~~1263 Burrard St~~

Box 23, Courtenay

Vancouver Island B.C.

Roll No. B

Page 10259

200m.-2-21.M.

DESP. FEB 18 1922
REGN. No. 4/12369

SURNAME. Taylor

11

~~J10.~~ CARD NO.

S OS 15/4/19: Demob
FOLL.
86107. 17/4/19.
11 88-

CHRISTIAN NAMES James Eli

REGL. No. 521180 RANK Pte.

UNIT No. 5 General Hospital

FORMER CORPS Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Taylor, Mrs. Rose

RELATIONSHIP TO SOLDIER Wife 1263 Burrard St.

AD ~~1963.- 3rd ave. West.~~ Vancouver.

Vancouver. B.C..

SOAP ~~13-5-18~~ BW. ~~24/6/18~~ 25/10/18.

COUNTRY OF BIRTH Wales, Cardiff DATE

PLACE OF ATTESTATION Esqui Malt. B.C. DATE June 15, 1915.

O/S. 27 8/15. 205/6.

R/C. 10/4/19. 300/70. T. Cpl.

L. L. 94504. M. & D. 6512.

M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

MARRIED *yes.* SINGLE WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

No. 70 Rank Pte Name Taylor. J. E.
(3670 July paylist)
5 21180 Sept "

T. O. S. Unit No 5 General Hospital C E F.

Trnsfd from 18th Fld Amt.
(15-6-15 (D.O. 1 of 30-6-15)

M. D. 11

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915-	1915-			
June 15-	June 30	V		
July		V		
Aug.		V		
Sept.		V		

C.A.D.C. 5009A

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

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

NAME OF SOLDIER (Block Letters) TAYLOR J.F.

REGIMENT Can C. RANK Cpl No. 52 118

Date of Examination in England 14-3-19 Date of Examination in France

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 5.
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*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
- (*c*) In France

Signature of Dental Officer A V Sinclair Capt

ORIGINAL

336

MEDICAL HISTORY SHEET.

Surname Taylor *Christian Name* James Eli

Examined { on 15th day of June 1915 / at Esquimalt B.C.

Birthplace { City or Town Cardiff / County Wales

Apparent age 39 Years.

Trade or occupation Engineer.

Height 6 Feet 0 Inches.

Weight 158 Lbs.

Chest measurement { Minimum 35 inches. / Maximum expansion 37½ inches.

Physical development Fairly good

Small-Pox Marks 0

Vaccination Marks { Arm Right. 4 Left. / Number 4

When Vaccinated last Childhood

(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection

Scar from bubo - Left Groin

bubo

Approved by

Wallace Wilson

Rank Capt ame M.O.

Date	Fit or Unfit	Examined for Re-engagement,
		12 OCT. 1917 M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
2/8/15	Positive.	M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
28/6/15.		M.O.
9/7/15.		M.O.
20/7/15		M.O.
14/7/17		W.M.Robb

TAB.

Enlisted on 15th *day of* June 1915 *at* Esquimalt Bc

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment		~~3670.~~ 521180.		15th June 1915.
Transferred to..	C.A.M.C.			

CANADIAN

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

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.

M. F. B. 313.

100M.—1-15.
H. Q. 1772-39-439.

P.M.O.

Surname Taylor Christian Name James Eli

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	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.

6

R—122.

Rank Name TAYLOR, James Eli Reg'l No. 521180

Unit No. 5 Can. Gen. Hosp. If in perm. Corps, What Unit? Married or Single Married.

Place and Date of Enlistment Esquimalt, B.C. 15th June.1915. Place of Birth Cardiff, Wales.

Name and Address, Next-of-Kin Rose, Taylor, 1133, 22nd Ave., East, Vancouver.

Relationship Wife.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

MD 11

N/E. R.B. No. 6273

File R.L.

Category OR CAN

Cpl.

Report Date	Report From whom received	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
	Arrived	per R.C. Scandinavian	England	5/9/15	
17. 11. 15.	D.A.A.G.	Embarked for Overseas (Salonika – MEF)	Shampton	16. 11. 15.	Com. Roll
9 12 15	5 Jul.	als: W/h for ship: 1 days FP 202.	H.M.S. Asturias	9 12 15	2 8 " 27
13-9-17.	C.M.H.	T.O.S. on reptg: from No 5. C.G.H. Salonica.	Pte. L'Pool.	12-9-17	Pt. II Do. — " — 111.
19-8-17.	5th C.G.H.	Adm: to Hosp: (Sand Fly Fever)	3rd Ech G.H.Q. B.S.F.	7-8-17	Pt II Do 33.
19-8-17.	do.	Disch'd: from Hosp: (— " —)	do.	12-8-17	— " — 33.
26-9-17.	C.M.H.	Pt II Do 111-2 d/13-9-17 is amended to read:- Atted to this Unit & not T.O.S.	Liverpool	12-9-17	— " — 122.
2-9-17.	5th C.G.H.	S.O.S. of B.S.F. on proc'd: to U.K for duty	Salonica.	16-8-17	— " — 35
31.10.17	— " —	SOS to Camb Depot	Liverpool	31.10.17	— " — 1539 Camb. Dpt Pt II Do 307 d/13-11-17 (T.O.S.)

A.F.B. 103 CHECKED 38 SEP 1917

A.F.B. 103 CHECKED 12 DEC. 1917

521180 Taylor. J.C.

Report Date	Report From whom received	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
9 4 18	#5 C.G.H.	ceases attached to C.M.H. L'pool	Pte	Liverpool	13.10.17	Pt 1 11/0 79
7-12-17.	Camb Dpt.	S.O.S. on procdg Overseas.	Pte.	S'cliffe	6-12-17	Pt II Do 341.
19-12-17.	Camb. Gen.	T.O.S. on arrival in France as reinf.	Pte.	Field.	7-12-17	—"— 81.
31 3 18	C.F.C. Det H	TOS from Camb Gen	Pte	Gerardmer	22.2.18	" 1 & Camb Gen Pt 11/0 19 d/27 3 18
31-1-19	do	Appt'd Act Corpl	Pte	"	14-12-18	-1.
25.2.19	do	Promoted Corporal	a/cpl	"	14-12-18	-2.
17.3.19	C.F.C. Det	SOS to Camb Gen	Cpl	"	15-2-19	-5.
11.3.19	Camb Cdy	TOS from Camb Gen	"	S'cliffe	7.3-19	-59.
Sailing no 35 date 30.3.19 disp area T. Emb Roll 69.						
28-3-19	Camccon	SOS To 11 MDW. ccc. Rhyl	Cp	Scliffe	28-3-19	Pt II Do 74
1-4-19	11 MDCCC	SOS To Canada	Cp	Rhyl	29-3-19	— 78
27-3-19	Camc Gen.	Sailing 35 T.O.S. from CFC Det Hp	Cpl	Gerardmer	16/2/19	— 13.
8-4-19	Do.	Posted to Camccc S'cliffe on despatch to Eng for Demob.	Cpl	Rouen.	5/3/19	— 18.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 521180 (Rank) CPL

Name (in full) Taylor James Eli enlisted in

the 5 Gen Hosp

CANADIAN EXPEDITIONARY FORCE at Vancouver B.C. on the 15th

day of June 19 15

HE served in 5 Gen Hospand F.C.Hosp 6 District

and is now discharged from the service by reason of Demobilization. / Medical Unfitness.

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

Age	51 years	Marks or Scars	Scar Left Groin.
Height	5FT 11½ins		
Complexion	Fair		
Eyes	Grey		
Hair	Brown.		

Jas E. Taylor
Signature of Soldier

Cecil M Roberts
Issuing Officer

Date of Discharge

April 15. 1919

Major
Rank

Date April 15 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.

M.F.B. 39A.
1049-D.P.-300M-11-18.
H.Q. 1772-39-882.

Class "A" Badge No. 174755 Issued

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. ..... (Rank) .....

Name (in full) ..... enlisted in

the .....

CANADIAN EXPEDITIONARY FORCE at ..... on the .....

day of ..... 19 .....

HE served in .....

and is now discharged from the service by reason of Demobilization, Medical Unfitness.

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

Age	Marks or Scars .....
Height	
Complexion	
Eyes	
Hair	

Signature of Soldier .....

Date of Discharge	Issuing Officer .....
	Rank .....
	Date ..... 19 ....

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.

H.F.R. 38A.
1040-D.P.-200M-11-18.
R.G. 1772-69-382.

Rank | Name TAYLOR, James Ell | Reg'l No. 521180

If in perm. Corps, What Unit?

Unit No. 5 Can. Gen. Hosp. | Married or Single Married.

Place and Date of Enlistment Esquimalt, B.C. 15th June.1915. Place of Birth Cardiff, Wales.

Name and Address, Next-of-Kin Rose, Taylor, 1133, 22nd Ave., East Vancouver.

Relationship Wife.

Assigned Pay Monthly $ ~~15~~ 20.00 (Feb 16) | Payable to Next of Kin as above.

Relationship

Separation Allowance $ | Payable to

Relationship

Discharge, Date and Place | Reason | Character

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc
	1915																
Sept	1-30	30	1.00	30.00	30	.10	3.00	10.00	43.00			4.87 12.16	15.00		32.03	10.97	
Oct	1-31	31	"	31.00	31	"	3.10	10.97	45.07			4.87 12.16	15.00		32.03	13.04	
Nov	1-30	30	"	30.00	30	"	3.00	13.04	46.04			4.87	15.00		15.00	31.04	
Dec	1-31	31	"	31.00	31	"	3.10	31.04	65.14			4.87	15.00	1.10	25.84	39.30	1 day F.P. No 1 R.O. No 27.
Jan	1916 1-31	31	"	31.00	31	"	3.10	39.30	73.40			9.74	15.00		24.74	48.66	
Feb	1-29	29	"	29.00	29	"	2.90	48.66	80.56			4.87	20.00		24.87	55.69	Cy Cases 1/2/16.
1/3	31/3	31	1	31	31	10	3.10	55.69	89.79			4.87	20		24.87	64.92	
				213.00			21.30	100.00	444.30			63.28	115	1.10	179.38	64.92	

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						

15 - 6 - 15

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

Name: Mrs. Rose Taylor

Address: ~~1733 22 Ave East.~~ ~~3711 Inverness St.~~ Vancouver ~~2735 Carolina St.~~ B.C. 1066 Hornby St.

Relation to Soldier wife, child or mother: Wife

Name of Soldier: Taylor, James, E

Regtl. No.

Rank: Pte.

Corps: No. 5. Gen'l Hospital

To what Corps belonging when called out

PAYMENTS

42229 M. CO.

	Month	Year	Cheque No.	Amt.	REMARKS
23.3.16.-	Aug.	1914			
	Sept.				
	Oct.				
	Nov.				
	Dec.				
	Jan.	1915			
	Feb.				
	March				
	Apl.				
	May				
	June			-	
	July				
	Aug.		N3028	50	50
	Sept.		M6086	20	20
	Oct.		L6729	20	20
	Nov.		J16605	20	20
	Dec.		M15697	20	20
	Jan.	1916	M20223	20	20
	Feb.		Q23931	20	20
	March		K32508	20	20

CONSOLIDATED 2 ACCOUNT

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

M. F. W. 11a.
60m.—12-15.
1772—39—818.

Sheet No. 2 Rose Taylor Wife

Name of Soldier Taylor James E.

PAYMENTS.

L. L. Job 89002.—Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	J 3900	20	20
May		R 4946	20	20
June		V 6736	20	20
July 28		P 1585	20	20
Aug.		B 13350	20	20
Sept.		F 17632	20	20
Oct. 21		N 20743	20	20
Nov.		Q 23144	20	20
Dec.		Q 26676	20	20
Jan.	1917	M 28874	20	20
Feb.		M 32628	20	20
March		M 36909	20	20
April		L 2695	20	20
May		N 6032	20	20
June		N 9315	20	20
July		N 12509	20	B
Aug.		Y 16285	20	R
Sept.		E 19874	20	M
Oct.		Q 21821	20	T
Nov.		X 24003	20	T
Dec.		O 28229	20	B $610 Mck
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

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

PAYMENTS.

M. F. W. 12a.
60m.—12-15.
1772—39—819.

Sheet No. 2.

L. L. Job 89002.—Req. 6213.

Mrs R. Taylor (Wife)

Name of Soldier Taylor J.E.
5th Gen Hosp

20.00

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	A/1665	20.	
May		Q5262	20	
June		L7727	20 -	
July		Q8244	20	
Aug.		H55570	20	
Sept.		B18665	20	
Oct.		B23248	20	
Nov.		L28098	20	
Dec.		X31258	20	
Jan.	1917	Z42735	20	
Feb.		B47805	20	
March		L53720	20	20
April		H5508	20 -	
May		H12006	20	
June		H18909	20	
July		R25654	20 -	
Aug.		H32866	20	
Sept.		K40015	20	
Oct.		P45526	20	
Nov.		2-11-5-2	20	
Dec.		L63386	20	535
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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.				

L. L. Job 80137—M. & D. 5683.

M. F. W. 12.
20m.—5-15.
H. Q. 1772-39-819.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Wife

To Whom Mrs R. Taylor

Address ~~3911 Inverness St~~ ~~1133 Twenty Second Ave. E.~~

1066 Hornby St. Vancouver. B. C.

24/10/16
1 JB

Rate ~~$15.00~~ SEP 1 1915

20.00 Feb 1/16 2m 19 1/16 JSG

By Whom Assigned Taylor. J. E.

Regtl. No. 521180

Rank Pte.

Corps #5 General Hospital C. E. F.

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.		N6952	15 —	
Oct.		O8162	15 —	
Nov.		Q9837	15	
Dec.		S9170	15	
Jan.	1916	U 11915	15	
Feb.		W 11138	20	
March		Y 14896	20	

CONSOLIDATED ACCOUNT 6

MARRIED OR SINGLE Married

PLACE OF BIRTH Cardiff S. Wales

NAME AND ADDRESS OF NEXT OF KIN Rose Taylor

1133 22nd Ave. East Vancouver B.C.

RELATIONSHIP OF NEXT OF KIN Wife

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF

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. 521180 RANK Gte NAME Taylor J.E.

IF IN PERMT. CORPS WHAT UNIT UNIT 5 Gen Hosp. TRANSFERRED TO Cance'd DATE 1/1/18 AUTHORITY 310 6/11/17

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION Esquimalt TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION June 15th 1915 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 75 20 DATE EFFECTIVE 1/9/15 1/2/16

PAYABLE TO Mrs Rose Taylor, 1133 - 22nd Ave E. Vancouver BC RELATIONSHIP Wife

ASSIGNED PAY MONTHLY $ 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 No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
			213				21	30						10	2HH	30											63	28	115	1 10	179	98	64	92			
Feb 1/30	30	1 00	30	00	30	10	3	00							33		92	2/14						H 87				20		24	87	73	05			
Mar 1/31	31		31		31		3	10							34	10	108	2/15	100	28/14				2H 34		H 87		20		49	21	57	94			
Apr 1/30	30		30		30		3								33				116	2/6						H 87		20		24	87	66	07			
May 1/31	31		31		31		3	10							34	10	124	3-7-16	153	17-7-16				9 73		H 87		20		34	60	65	54			
June 1/30	30		30		30		3								33				143	2/8						H 84		20		24	84	44	80			
July 1/31	31		31		31		3	10							34	10	153	17-8-16	162	29-8-16				H 86		H 87		20	2 13	33	03	74	77			3 days P2F.P. 11/5/18
																	181	2-10-16						19 47											
Aug 1/31	31		31		31		3	10							34	10	17	7-9-16						H 86				20		44	33	64	54			
															34	10	194	2-11-16						H 86						41	3 16				
Sept 1/30	30		30		30		3								33		190	17-10-16						H 87				20		29	73	67	81		20	47 81
Oct 1/31	31		31		31		3	10							34	10	208	7-11-16						H 87				20		24	87	77	04			
			248	80													226	18/12						4 87											
Jan	31		34	10											34	10	217	2/12	235	2/1				24 33		H 87		20		57	07	57	07			
																		17/1																	
Feb	28		30	80											30	80	243	2/1						4 87				20		24	87	63			
																	260	16/12						4 87											
Mar	31		34	10											34	10	251	2/12	278	17/3				4 87		4 87		20		39	48	57	62			
			635	80										10	645	80								131 41		34 07		23 23		355		440	588	18			
			635	80										10	645	80								131 41		34 07		63 28		355		440	588	18			

1/10

5-21180. Pte. Taylor J.E.

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS
1917			535	80										10	645 80
			635	80										10	645 80
Apr	30	1.1/10	33												33
May	21		34	10											34 10
June	30		33												33
July	31		34	10											34 10
Aug	31		34	10											34 10
Sept.	30		33												33
			637	10										10	847 10

ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date
		286	2/4				
		294	17/4				
		302	2/6				
		317	2/6				
		310	17/5				
		325	1/6				
		333	29/6				
		341	7/7				
		633	2/7				

CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
131 41	34 09	63 28		355 --	4 40	585 18	59 62		Nil		
				20		20	79 62		- -		
4 87 -											
4 87 -				20		29 74	74 98		- -		
4 87 -				20		24 87	83 11		- -		
4 87 -											
4 87 -				20		29 74	87 47		- -	87 47	
4 87 -								96 73			
4 87 -				20		24 87	96 70	1 03	Nil		
4 86 -								8 67			
4 87 -			5-8 40	20		97 87	31 83				
180 10	34 09	63 28	5-8 40	475 --	4 40	815 27	31 83				

Loan 13/9

Date	MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER-RED PAY	SER. ALLCE. ENG.
30.9.		br Bal	31 8/3							31 83		✓
Oct		C. P	34 10		A.P.C.				20			
					S.10. A.R. Chalk Lge. 29/9 5th Gen Hosp.	9 73				36 20		✓
			34 10			9 73			20			
Nov		P.P.	33						20			
Dec		P.P.	34 10		A.58. 5th Gen Hosp 29/10	4 87						
					A.38 " 17/10	7 30						
					A.53 " " 26/10	4 87						
									20			
					905 cancd. 15/11	4 87						
					1001 " 28/11	7 30			40	34 09		
1918			67 10			29 21						
Jany		A Ray	34 10		A Ray				20			
					AR 1012. 4/3/17 Cancd (26)	4 87						
					A.R. 1. 14/9/17. Chalk Lge from 48	14 60						
			34 10			19 47			20	28 72		
Feb		" "	30 80		Can A.P.				20	30 80		
					AR 369 C.F.C. Draft No 6 (19) 28/1/18	4 46				59 52		
					Draft R 254 do (37) 14/1/18	12 49				41 01		
					" " 5809 C.E./3 Dep. (30) 22/12/17	4 46				18 11		
			30 80			21 41			20			
Mar		" "	34 10		Can A.P.				20	34 10		
					AR 483 C.F.C. Draft No 6, 16/2/18 514	3 57				52 21		✓
					" 892 do 28/2/18 519	4 46				37 06		
					Draft R. Stk Exch Relief Fund. C.F.C. Issue 14/1/18 533	1 00				15 15		
					AR 698 C.F.C. Draft No 6 23/3/18 535	8 03						
			34 10			17 06			20	15 15	Nil	Transfer to new Ledger

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ~~ENGLAND OR~~ CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:- 1-2-16		EFFECTIVE DATE:-	
AMOUNT:- 20.00		AMOUNT:-	

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.

Mrs Rose Taylor (wife)
1133, 22nd Avenue, E Vancouver BC.

Stopped 1-4-19

NAME:- TAYLOR J.E.
NUMBER:- 521180

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte.
DOI 31/1/19	14-12-18	Attached Jan
DOI 25/2/19	14-12-18	Struck off Strength

UNIT AND TRANSFERS

ORIGINAL UNIT:- 5 Gen Hosp.
DATE ACCOUNT FIRST OPENED:-

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			C.A.M.C.D.

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
~~1-1-19~~	~~2136~~	~~C a m c~~	~~3 73~~			~~Leave Bal~~	~~84 76~~
~~2-1-19~~	~~2147~~	~~"~~	~~5 68~~			~~Leave II~~	~~4 93~~
~~2-15~~	~~2177~~	~~"~~	~~7 46~~			Leave Bal 8476	~~37 83~~
~~13-3~~	~~4041~~	~~"~~	~~7 30~~			Lab C. " 4599	
~~18-3~~	~~4512~~	"	14 68			3877	
		3877 ~~3844~~					

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	10		
	1 10	10		

PARTICULARS OF RENDERING NON-EFFECTIVE: Trans Pummel 31/3/19 M.G. 484 Schiffe-Schiffe 24/3/19 M.D. 11

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mar 31	Balance forward.								15 15	NIL	
Apr	P pay	33		Can a.f.				20	28 15		
				a/f 97. C.F.C. Dist hos 15/4/18 S6	3 57				24 58		
				" 183 " " 30/4/18 S18	8 92				15 66		
		33			12 49			20	49 76		
May	P pay	34 10									
				Can a.f.				20	29 76		
				a/f 281 C.F.C. Dist hos, 17/5/18 S10	3 57				26 19		
				" 381 " " 31/5/18 S18	4 46				21 73		
		34 10			8 03			20			
June	"	33									
				Can a.f.				20	33 43		
				a/f 478 C.D.C. Frame 15/6 5	3 57				29 16		
				" 495 " 22/6 9	3 57				27 59		
				" 581 " 30/6 11	5 35				22 24		
		33			12 49			20	56 34		
July	A.P.	34 10									
				Can a.f.				20	36 34		
				a/f 734 15/7 C.D.C. Frame 5	3 57				32 67	✓	
				" P84 31/7 " 13	5 35				27 42		
		34 10			8 92			20	61 52		
Aug	A.P.	34 10									
				Can a.f.				20	41 52		
				a/f 998 15/8. C.D.C. 8	3 57				37 95		
				" 1223 31/8 " 13	5 35				32 60		
		34 10			8 92			20			
Sept	"	33		C.A.P.				20	45 60		
				a/f 1366. 17/9 C.D.C. 14	3 57				42 03		
				" 1550 30/9 " 16	5 35				36 68		
		33			8 92			20	70 78		
Oct	"	34 10									
				C.A.P.				20	50 78		
				a/f 1652, 15/10. C.F.C. Dist 30	3 73				47 05		
				" 1772 31/10. " " 57	5 60				41 45		
		34 10			9 33			20			

NUMBER 521180 RANK Gte NAME TAYLOR. J.E.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1918	Fwd								41 45		
Nov		33						20	54 45		
				1876. 15/11. 6 bds. C.C.C. 4	13 06				41 39		
Dec		34 10						20	55 49		
				1954. 30/11. " 11	5 60	✓			49 89	✓	
		67 10		2051 19/12 " 15	18 66	✓		40	40 56		
1919				✓	4 33						
Jan		34 10						20	54 66		
Feb		101 20			27 99			60			
		30 80						20	6 54 6		
	Ufn on Corporal 14/12/18 - 28/2/19	1 80							64 26		
	Ufn per Cabane adjustment de 77 d @ 1/6	5 90							73 16		
March				8263 22/2/14 — 13	5 60	✓			78 76	✓	
		37 20			5 60			20	84 76		
				AR 4491 13/3 Cancd 15	7 30				77 46		
				" 2156 31/1 C.T.C. 15	3 73				73 73		
				" 2197 28/2 " 15	5 60				68 13		
				" 2179 28/2 " 15	7 46				60 67		
				" 4572 18/3 " 16	14 68				45 99		
		75 40			44 31			40			
					44 31						

S.L. 35 Sailed for Canada 28/3/19

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 initialled 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.

STATION Shorncliffe DATE 14/3/19

1. 1 (a) Unit C.A.M.C., (b) Regimental No. 521180 (c) Rank Cpl.

(d) Surname Taylor (e) Christian name James Eli.

(f) Home address Vancouver, B.C.,

(g) Next of Kin Rose Taylor (h) Relationship Wife.

(i) Address of Next of Kin Vancouver, B.C.,

2. Age last birthday 51 Date of birth Sept. 3rd. 1867.

3. Enlistment, or Appointment (if an Officer) (a) Place Esquimeat. (b) Date June 15th. 1915.

4. Personal description:

(a) Height 5-11 (b) Weight 170 (stripped) (c) Complexion dark

(d) Colour of hair black. (e) Colour of eyes grey (f) Identification marks, Scars, etc. Scar 3" long left groin result of operation bubos. Terminal phalanx lt. thumb & 2nd & 3rd. phalanges left forefinger amputated.

5. Former trade or occupation Hoisting engineer.

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).	Years	Days
	3	272

	Periods	
	From	To
Canada	15/6/15	15//9/15
	15/9/15	16/11/15
England	12/9/17	7/12/17.
Salonica.	29/12/15	12/9/17.
France or other theatres of War	7/12/17	4/3/19

7. Original disease, or injury Laceration left hand (2) Defective hearing rt. Ear.

(a) Date of origin (1) 1893 (2) 1917. (b) Place of origin Winnipeg, Canada.

(c) Cause (1) Explosion of denamyte, accident. (2) Active service conditions

M. F. B. 227.

400M.—11-18.
1772-39-117.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, 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.)

(Lacerated Fingers) Terminal phal anx left thumb amputated 2nd. & 3rd. phalanges of index fingers amputated. 3rd & 4th. finger marked by flexed on palm from cicatux.
(2.) Otitis M.R. Ear, hearing rt. & lt. not defective but slight catarrhal condition

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.)

(1) Amputation part of thumb and forefinger left hand with contraction of scar tissue resulting in partial flexure of 3rd. and 4th. fingers.

(2.) Fancied slight defect in hearing left ear but since having hearing tested is alright, no discharge from ear.

Specialists Report:- Hearing rt. and lt. 21 feet. No definite change in M.T's. Slight degree of catarrhal Otitis Media Rt. Ear. Condition caused by service.

Sgd., Newbold, C. Jones, Capt.,

(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. (If pulse rate is abnormal, B. P. will be taken.) Genito-Urinary System No. (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).)

(1) Left thumb fore & finger and palm left hand lacerated as result of explo explosion by dynimite 23 years ago resultiog in amputation of terminal phlanx and second and third phlanges of thumb and finger and partial flexion of third and forth fingers into palm of hand.

(2) First noticed deafness rt, ear in 1917 but condition was not marked nor severe enough to require treatment. First examination by specialist on 13/3/19 with result as above. Boarded on 25/9/17 marked Bi. Since Boarded on 25/10/17 Marked A iii.

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).)

Had gonorrhoea 30 years ago with bubos which was operated on. No complications. Good rec overy with no ill effects. Had sandfly fever on Aug. Aug. 17 5 days ill, good recovery.

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

Scar three inches long lt. groin. Terminal phlanx left thumb amputated also lost two index fingers. Scar palm of left hand from contraction of circatricial tissue.

11.—(a) Did the disabling condition have its origin before enlistment? Yes. (1) No.(2)

(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.)

Not applicable.

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

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? (1) permanent (2) Nil

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)

No.

16. Can the former trade or occupation be resumed? Yes.
(If not, briefly state why)

17. Recommendations

A.S.Porter. Capt.
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 Cpl. J.E. Taylor 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

Sgd., Cpl. J.E.Taylor. Rank.
Signature of invalid examined.

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.

Yes, We concur.

19. Is the invalid fit for

(*a*) General service,	(Category A)	(Yes or No.)	
(*b*) Service abroad, not general service,	(" B)	(Yes or No.)	Yes. Bi.
(*c*) Home service (Canada only),	(" C)	(Yes or No.)	
(*d*) Temporarily unfit.	(" D)	(Yes or No.)	
(*e*) Unfit for service in Categories A, B and C	(" E)	(Yes or No.)	

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.)

Boarded for return to Canada Auth. A.G., Tel. 9083 of 11/11/18.

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.

Sgd., C.A.Langmaid, Capt.,
President.

PLACE Shorncliffe. " L.P.MacHaffie, Capt., CAMC.,

DATE 14/3/19 } 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.

.....
President

PLACE..... } Members

DATE.....

APPROVED BY

Sgd., L.Hyttenrauch, Capt.,

Assistant Director of Medical Services.

DATE 14/3/19.

APPROVED BY

Director-General of Medical Services.

DATE.....

Form D.M.S. 1394
50M-N1478-17-4-17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at No. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL 25 OCT. 1917.

No. 521180 Rank Gr. Name Taylor - J. E.

Local Unit C.A.M.C. Overseas Unit No. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL Age 43.

Examination held at No. 5 CANADIAN GENERAL HOSPITAL LIVERPOOL

DISABILITY.
Overseas-~~Local~~
(SCRATCH ONE OUT).

PRESENT CONDITION.

Left hand - Has amputation of terminal phalynx of thumb and first finger. Concracture from scar at base of ~~3rd~~ 3rd & 4th fingers. Extension not possible due to accident 25 years ago. He says he has been able to do labouring work well ever since that time

BOARD RECOMMENDS:- A III.

1. Fit for Duty
2. Fit for duty after ..... weeks' physical training.
3. Fit for Temporary Base Duty ..... weeks
4. Fit for Permanent Base Duty
5. Discharge

Signatures:-

K. D. Panton Lt. Col. President. C.A.M.C.

Members Wm Creighton Major Capt.

J. Taylor, Capt., C.A.M.C.

APPROVED

Dated 25 OCT. 1917. K. D. Panton Lt. Col. C.A.M.C.

For A.D.M.S.

Form [illegible] S. 1394
50M-[illegible]-17-4-17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at No. 5 CANADIAN GENERAL HOSPITAL OVERSEAS 25 DEC 1917.

No. [illegible] Rank [illegible] Name [illegible]

Local Unit [illegible] Overseas Unit No. 5 CANADIAN GENERAL HOSPITAL OVERSEAS Age [illegible]

Examination held at No. 5 CANADIAN GENERAL HOSPITAL OVERSEAS

DISABILITY.
Overseas ~~Local~~
(DURATION ONE OUT)

PRESENT CONDITION

[illegible]

BOARD RECOMMENDS:

1. Fit for Duty
2. Fit for Duty after weeks' physical training.
3. Fit for Temporary Base Duty weeks
4. Fit for Permanent Base Duty
5. Discharge

Signatures:-

President.

Members

APPROVED

Dated 25 DEC 1917.

For A.D.M.S.

92431.—W6490/1535.—2,000,000—J. J. K. & Co., Ltd.—Forms B. 103/1.

W. S. B Class A.

Army Form B. 103. JDB

Cpl

Casualty Form—Active Service.

Church of England.

Regiment or Corps No. 5 "OVERSEAS" GENERAL HOSPITAL C.E.F.

Regimental No. 521180. Rank Private Name Taylor. James Eli.

Enlisted (a) 15/6/15. Terms of Service (a) ~~one year or~~ Duration of war Service reckons from (a) 15th June 1915

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

Extended Group 26 (Hoisting Engineer) M.S. Re-engaged Qualification (b)

Report: Date	Report: 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.
		Approved	England	5.9.15.	
Embarked Southampton 16-11-15. Dis-embarked Salonica 20-12-15. H.S.Asturias.					
13/5/16	O.C. 5 Can. Genl. Hpl.	Awarded 3 days' to Salonica No. 2 F.P. 11 5/16 for conduct to the prejudice of good order & military discipline 10 5/16.	Salonica MEF	11-5-16	B. 2069. 0 1810. D/- 28/8/ 1916.
7.8.17	— " —	adm. P. "Sandfly Fever"	— " —	7.8.17	W3034 112/250. 0 1810.33 D/- 19/8/ 1917.
12.8.17	— " —	Disch. P. to duty	— " —	12.8.17	W3034 117/101. 0 1810.33 D/- 19/8/ 1917.
19.8.17	— " —	Struck off strength of B.S.F. on proceeding for duty to U.K. Authy: M.C. 2447, d/- 15.8.17	— " —	16.8.17.	B.213.
25.8.17	M.L.O.	Embarked for Taranto.	— " —	16.8.17.	E.238 0 1810.35 D/- 2/9/ 1917.
13.9.17.	C.M.H.	~~TOS~~ Attached. On reporting from No 5 Gen. H. Salonicia	Liverpool	12.9.17.	Pt II Do #111 & 122 d/26 9/17
31.10.17	5th Can. G.H.	Struck off Strength on proceeding to C.A.M.C. Depot	Shorncliffe	31.10.17	Pt. II Do #153 ~~31.10.17~~

CERTIFIED CORRECT. 2 OCT 1917 CAN. RECORDS, LONDON.

R. H. V. Reid CAPT:
FOR LT: COL: I/C RECORDS, C.O.M.F.

Cablaire CAPT. C.A.M.C.,
FOR O.C. No. 5 CANADIAN GENERAL HOSPITAL, LIVERPOOL.

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
8/12/17	6 Can M.D.	S.O.S. from No 5 C.G.H. Bgs	Shorncliffe	3-10-17	Pte. D.O. 305
7/12/17	CAMCD	S.O.S. to Overseas	Shorncliffe	6-12-17	Pt 2 -341L.
		DISEMBARKED	HAVRE		John B Layng Lieut CAPT. ASST. ADJUTANT, FOR O.C., C.A.M.C. DEPOT.
		Having arrived as Reinforcement is taken on the strength of Can C Gen			
7-12-17	6 C.G.H.		Field	7-12-17	WR 14 81 d/19 12/17
26-12-17	"	Left Base for HQ 2 Div 67 C	Vosges	26-12-17	WR RTR 653
24-12-17	"	Classed "B2" Auth AF W 3339/288	"	24-12-17	Pte Ord 2 d/10 1/18
	A.A.G.	S.O.S. Can C Gen to 676 Detention Hosp Gerardmer Auth: A.G. Cdns A.G. 7-1-183 d/23/1/18 W/O 121/08/5421 (S.D.2) d/11 2/18		21-2-18	KR 22546 Pte 19 d/27 3/18
	"	T.O.S. 676 Detention Hosp Gerardmer	"	22-2-18	KR 22546 Pte 1 d/25 3/18
15-6-18	Gerardmer	To hospital	"	10-6-18	B 213
29-6-18	"	Reported from Host	"	18-6-18	B 213
28-12-18	"	Appointed actg corporal with pay (auth: S.M.O. 676. 10-8-A d/14-12-18.)		14-12-18	B 213. Pte 1-1919
3-2-19	D.G.M.S.	Confirmed in rank of corporal. Transfd to Eng & posted to Base. Cas. Coy for purpose of demobilisation		14-12-18	Co. 4/19 Pte 2-1919

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

CERTIFIED CORRECT. 1 DEC. 1917 CAPT. LONDON

Army Form B, 103—II.
Part II.

(SERVICE AND CASUALTY FORM Part II).

Regiment or Corps No 5 O/S Gen Hosp. Regimental Number 521180

*Substantative Rank Pte. Surname Taylor Christian Names James Eli

*Acting Rank _____

(* To be entered in pencil to facilitate alteration.)

(A) Report: Date.	(A) Report: From whom received	(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
11.3.19	CAMC Cas Coy.	59	T.O.S. fr. CAMC field Reported	S'Cliffe	7.3.19.	
28.3.19	do	74	S.O.S. M.D. Wing 11 Rhyl for R.T.C.	do	28.3.19	

Attached C.C.C. Kinmel Park for return to Canada. Part II Order No._____. Ceases to be attached C.C.C. Kinmel Park on embarking for Canada, Part II Order No._____

Ralph Hargrove Capt.
Officer Commanding C.A.M.C. Cas Coy.

Commanding _____ Wing,
Kinmel Park Camp,

Embarked S S Saturnia
Glasgow March 30'19

Embarked S S Saturnia
Glasgow March 30'19

ORDERLY ROOM
MAR 30 1919
10 13 P.C.

To be folded on this line.

Nothing to be written in this margin.

A1834 W.6425—P1600 500,000 10/18 G.W.P.Co.3973.

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer
			T.O.S, No11 D, D, 30Mch 19 [illegible]			
			S, O, S. C, E, F Apr 15-19 T Area			
			No11 [illegible] Apr. 7- [illegible]			
			A MacLean Capt. for. O.C. XI District-Depot.			

Nothing to be written in this margin.

Form [illegible]S. 1394
50M-11478-17-4-17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Liverpool September 25th 1917.

No 521180 Rank Pte Name Taylor J.

Local Unit C.A.M.C. Overseas Unit No.5 Can Gen Hosp Age 46

Examination held at C.M.H. Kirkdale, Liverpool

DISABILITY.
~~Overseas~~-Local Deformity of left hand.
(SCRATCH ONE OUT).

PRESENT CONDITION.

Terminal phalanx left thumb amputated, also that of index finger fourth and fifth digits left hand flexed and useless on account of contraction of scar.

Defective hearing left ear.

BOARD RECOMMENDS:- B.1.

1. Fit for Duty
2. Fit for duty after ..... weeks' physical training.
3. Fit for Temporary Base Duty ..... weeks
4. Fit for Permanent Base Duty
5. Discharge

Signatures:-

Members
(Wm Creighton Maj Cam President.
(H A W Bromlaff Capt Cam
(A S Burns Capt Cam

APPROVED

Dated 25/9/17 1917. Wm Creighton Maj Cam

For A.D.M.S.

Form [illegible]394
30M-114-8-17-4-17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Liverpool September 25th 1917.

No 52180 Rank Pte Name Taylor J.

Local Unit C.A.M.C. Overseas Unit No.5 Can Gen Hosp Age 46

Examination held at C.M.H. Kirkdale, Liverpool

DISABILITY
~~xxxxxxx~~ Local Deformity of left hand.
(SCRATCH ONE OUT)

PRESENT CONDITION

Terminal phalanx left thumb amputated, also that of index finger fourth and fifth digits left hand flexed and useless on account of contraction of scar.

Defective hearing left ear.

BOARD RECOMMENDS B.1.

1. Fit for Duty
2. Fit for duty after weeks' physical training.
3. Fit for Temporary Base Duty weeks
4. Fit for Permanent Base Duty
5. Discharge

Signatures.-

President.

Members

APPROVED

Dated 25/9/17 1917.

For A.D.M.S.

Form D.M.S. 1394
50M-1147 17-4-17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Liverpool September 25th 1917.

No 521180 Rank Pte Name Taylor J.

Local Unit. C.A.M.C. Overseas Unit No.5 Can Gen Hosp Age 46

Examination held at C.M.H. Kirkdale, Liverpool

DISABILITY.
~~Overseas~~ Local Deformity of left hand.
(SCRATCH ONE OUT).

PRESENT CONDITION.

Terminal phalanx left thumb amputated, also that of index finger fourth and fifth digits left hand flexed and useless on account of contraction of scar.

Defective hearing left ear.

BOARD RECOMMENDS:- B.1.

1. Fit for Duty
2. Fit for duty after weeks' physical training.
3. Fit for Temporary Base Duty weeks
4. Fit for Permanent Base Duty
5. Discharge

Signatures:-

Members
(Wm Creighton Maj Cam President.
(H A W Brown Capt
(A S Burns Capt

APPROVED

Dated 25/9/17 1917. Wm Creighton Maj Cam

For A.D.M.S.

Form D.M.S. 1304
50M-1147 7-4-17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at [illegible] 1917.

No. [illegible] Rank [illegible] Name [illegible]

Local Unit [illegible] Overseas Unit [illegible] Age [illegible]

Examination held at [illegible]

DISABILITY.
Overseas Local [illegible]
(SCRATCH ONE OUT).

PRESENT CONDITION

[illegible]

BOARD RECOMMENDS:- [illegible]

1. Fit for Duty .....
2. Fit for duty after ..... weeks physical training.
3. Fit for Temporary Base Duty ..... weeks
4. Fit for Permanent Base Duty .....
5. Discharge .....

Signatures:-

..... President.

Members .....

APPROVED

Dated ..... 1917.

For A.D.M.S.

15-8

DISPERSAL STATION T 11-12-40

WAR SERVICE BADGE, CLASS "A" NO. 174755

DISPERSAL STATION T

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No.	521180		
2 Rank.	Cpl.		
3. Name.	Taylor J. E.		
4. Unit.	CAMC 5 Gen Hosp		
5 Date of Discharge	4/15/19	Place	Vancouver

6 Reason for Discharge

B II Loco. Engineer. Life.

21

7. Authority.

8. Proposed Residence after Discharge Vancouver 15/6/15

Embarked S S Saturnia
Glasgow March 30'19

1263 Burrard st
No. 6 District Det. Hosp

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.? 39

Jas. E. Taylor
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

Date

Dispersal Station T
APR 15 1919
Military District No. 11

Signature Carl McRobbie Major
(O. C. Discharging Unit.)

MEDICAL DOCUMENTS
FORWARDED TO
~~S.C.R.~~ OR B. P. C.
ON
J.G. 19/4/19.

M.F.B. 218a—300M.-11-18—1772-39-113.

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. 5003a).
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).
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group A
Checked by No. 12
Date 29-1

Date of Enlistment 15-6-15

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

T 937

Date of Assignment Feb 1916

RATE OF SEPARATION ALLOWANCE

20	$ 25.00 1-12-17 P.C.3257	30 1 9/18	

PC 2753 Nov 34803

RATE OF ASSIGNMENT

20			

PARTICULARS OF SEPARATION ALLOWANCE

No. 521180

Rank Pte Promoted Reverted Discharge

Soldier's Name J E Taylor

Battalion 5 General Hospl C E F

Beneficiary Mrs Rose Taylor Mfw 2554 30/7/18

Relationship Wife

Address ~~1066 Hornby St, Vancouver, B.C.~~

PARTICULARS OF ASSIGNMENT

Wife

Name Mrs R Taylor

Address ~~1066 Hornby St Vancouver BC~~

Change of Address

Letter 13/6/18 # ~~1763-3rd Ave West Vancouver BC~~

*2 1263 Burrard St Vancouver BC

3

4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total	
Dec 31		610	535	1145	
1918 Jan	K 69562	30	20	50	W
Feb	T 68335	25	20	45	C
Mar.	V 93744	25	20	45	✓
Apr	V 8967	25	20	45	✓
May	T 15019	25	20	45	✓
June	P 21980	25	20	45	✓
July	G 32596	25	20	45	✓
Aug	R 41080	25	20	45	✓
Sept	P 42227	25	20	45	✓
Oct	D 49051	25	20	45	
Nov	F 57192	25	20	45	
Dec	J 66157	45	20	65	
Jan	F 70880	30	20	50	
Feb	O 81616	30	20	50	
Mar	B 87197	30	20	50	
Apr	R 4228	30	20	50	
		1055	855	1910	

017846-J-245 REMARKS

* M.R.O. 13655 alteration rend 21-10-18

1st Ass. was 15.00 from 1/9/15 to 31/1/16. McK

Ret'd per Saturnia

Date 10/4/19 M.F.W.187 15/4/19 M D 11

Closed MRO 70892 OK 15/4/19 RW

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7993.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400m.—6-17—1772-39-1141
L. L. 22320—M. & D. 7993.

S.S. Saturnia 15/4/19

AUDITOR | PAYMASTER

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

M. OR S. REGT. No. 521180 RANK Cpl NAME (IN FULL) Taylor J.E.

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Yes | DATE EFFECTIVE 1-5-19

TO WHOM PAID Mrs. Rose Taylor | RELATIONSHIP (W)

ADDRESS 1263 Barrard St. Vancouver B.C.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
English J.P.C. Adj to		31/3/19

ORIGINAL UNIT C.E.F. | IF IN P.F. WHAT UNIT? | (BLOCK LETTERS SURNAME FIRST)

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ 20.00 | DATE EFFECTIVE 1-5-19 | Payable by new Unit.

PAYABLE TO Mrs. Rose Taylor (W) | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS 1263 Barrard St. Vancouver B.C.

Same C. O. Jones Rant Nelems Camp 8/7/19 Settlement Camp Courtenay

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED PLACE MD XI | DATE 15/4/19 | REASON | 25/4/19 | AUTHORITY | IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $ C.	OTHER CREDITS $ C.	$ C.	TOTAL CREDITS $ C.	ACQUITTANCE ROLLS COL. NO. 1 NO. DATE	COL. NO. 2 NO. DATE	COL. NO. 3 NO. DATE	CASH PAYMENTS COL. NO. 1 $ C.	COL. NO. 2 $ C.	COL. NO. 3 $ C.	ASSIGNED PAY $ C.	REGIMENTAL CHARGES $ C.	OTHER CHARGES $ C.	$ C.	TOTAL DEBITS $ C.	BALANCE DEBIT $ C.	CREDIT $ C.	PARTICULARS OR REMARKS
31/3/19		1.20			45 99	45 99													45 99	
19/4/19	19	1.20	22 80	35 -		57 80	Boat Train		Cheque 25243	4 87	5 -	143 92	20 -				173 79	70 -		35.00 Other A Clothing Allcs
															35 -		35 -	105 -		35.00 Other Chgs " " Chgd back
				35 00		35 00												70 00		35.00 of credits charged back in error
					~~4 80~~ ~~15 00~~										4 80		4 80	74 80		4 days overpaid 4.80 of charges
															15 00		15 00 ~~4 80~~	89 80		of charges 15.00 15 days S.A. overpd
183 days				420 -	180 -	600 -									15 - 74 80		89 80	345 20	165	
							June		816393-4	65 20	45 -						1110 20	280	120 -	
							July 15		822753-4	70	30	3					100	210	90	
							Aug 15		839739-9	70	30	4					100	140	60	
							Sept 15		115859-6	70	30	5					100	70	30	
							Oct 15		1577188-9	70	30	7					100	—	—	
						600											600			

War Service Gratuity

Service 3 years months

Certified that all payments have been made on this account for which covering authority has been received to date.

A. Fund Lieut., Paymaster, Demobilization Pay M.D. No. 11

I certify that all payments of War Service Gratuity have been made on this account according to the period of Service shown on the M.F.W. 2595 received.

H. E. Whyte Capt., Officer i/c War Service Gratuity M.D. No. 11

H.D. Patterson

200M-3-19.—L. ... 58785-... & D. 9935.
M. F. W. 2596.
1772-39-1390.

P.M. 11494