

ATTESTATION PAPER.
District Artillery Depot.
CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

No. 341128
Folio.

QUESTIONS TO BE PUT BEFORE ATTESTATION.
(ANSWERS.)

1. What is your surname?	TAYLOR
1a. What are your Christian names?	James Henry
1b. What is your present address?	374 Main St. Toronto East, Ont, Canada.
2. In what Town, Township or Parish, and in what Country were you born?	Staffordshire, England.
3. What is the name of your next-of kin?	Ada Taylor Mrs. White
4. What is the address of your next-of-kin?	374 Main St. East Toronto, Ont, Canada
4a. What is the relationship of your next-of-kin?	Wife Sister
5. What is the date of your birth?	March 10th, 1884
6. What is your Trade or Calling?	Saddler
7. Are you married?	Married
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9. Do you now belong to the Active Militia?	No
10. Have you ever served in any Military Force? If so, state particulars of former Service.	Yes. 2nd V. B. S. S. for 3 yrs, (Pte) Naval Force?
11. Do you understand the nature and terms of your engagement?	Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?	Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, James Henry Taylor, 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.

January 9th, 1917
Date.....191.....
J. H. Taylor (Signature of Recruit)
M. H. Black (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, James Henry 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.

January 9th, 1917
Date.....191.....
J. H. Taylor (Signature of Recruit)
M. H. Black (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.
The above questions were then read to the Recruit in my presence.
I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Toronto, Canada this 9th day of January, 1917.

M. H. Black (Signature of Justice)

Description of James Henry Taylor on Enlistment.

Apparent Age 32 years 10 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. 6 ins.

Scar back of right wrist, scar from great toe joint to instep left foot
scar right knee.

Chest measurement. { Girth when fully expanded 37 ins.
Range of expansion 5 ins.

Complexion Medium

Eyes Hazel

Hair Dark Brown

Religious denominations. { Church of England C. of E.

Presbyterian

Methodist

Baptist or Congregationalist

Roman Catholic

Jewish

Other denominations
(Denomination to be stated.)

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 January 9th, 1917

Place Toronto, Canada.

W. H. Bly
Medical Officer.
Toronto Recruiting Depot.

*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 Henry 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.

Date Jan 13 1917.
W. H. Bly (Signature of Officer)

H. Q. FILE No.....

[illegible]



mess
Harm
Number 341128 Rank gmr

Surname TAYLOR

Christian Name James Henry

Units C.F.A. Theatre of War France

Date of Service 10-9-18

Remarks

Latest Address 12 Bridge St

Toronto E. Ont.

Roll No. B

Page 10259
200m.-2-21.M.

DESP. FEB 16 1922
REGN. No. *668957*

SURNAME.

649-7-6669.
Taylor

2 CARD No. ✓

CHRISTIAN NAMES

James Henry

REGL. No.

341128

RANK

Plt

UNIT

70th Bty C.F.A

FORMER CORPS

*2nd V. B. S. S. (3 yrs)*SOS. 7/4/19.
20 103-915/4/19
FOLL. Jeml.
20.

NEXT OF KIN.

NAMES IN FULL

Taylor, Mrs Ada

RELATIONSHIP TO SOLDIER

Wife

ADDRESS

*374 Main St East, Toronto,
Ont**also notify*
CHANGE OF ADDRESS*Mrs Lily Whate
25 Bridge St.
Toronto, Ont
L.A.P. 11-5-189 m/o*

COUNTRY OF BIRTH

England Staffordshire

DATE

Mar 10th 1884

PLACE OF ATTESTATION

Toronto, Ont

DATE

*Jan 9th 1917**R/C. 5/4/19. 297-38-J.*

MARRIED

Yes.

SINGLE

WIDOWER

TRADE OR CALLING

Saddler

RELIGION

Church of England

DESCRIPTION.

APPARENT AGE

32

YEARS

10

MONTHS

HEIGHT

5

FEET

6

INCHES

CHEST MEASUREMENT

37

INCHES

EXPANSION

5

INCHES

COMPLEXION

Medium

EYES

Hazel

HAIR

Dark Brown

DISTINGUISHING MARKS

Scar back of R. wrist. Scar from
great toe joint to instep left foot Scar R. Knee

MEDICAL EXAMINATION.

PLACE

Toronto. Ont

DATE

Jan. 9th. 1917.Present Address. 374 Main St., Toronto East,
Ont

CR. Rank Name TAYLOR, James Henry. Reg'l No. 341128.
Unit *Dft. Toronto Art. Bgde* If in perm. Corps, }
What Unit? Married or Single Married.
Place and Date of Enlistment Toronto, Jan. 9th. 1917. Place of Birth Staffordshire,
England.
Name and Address, Next-of-Kin M^{rs} WHITE
374 Main St., East Toronto, Ont., Canada. Relationship SISTER.

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason

Character

H. W. & V., Ltd.-9546-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS	
Date.	From whom received.				Taken from Official Documents.	
		Arrived in England		24-2-18	S/S LAPLAND	
1-3-18	Res C.F.A	Taken on strength	Enl Witley	26.2.18	Att. 60	a 713 103. checked. 11.9.18. 1918.
16.7.18	"	Marriage approved	"	3.6.18	- 197.	
11.9.18	"	SOS on proceeding overseas	Sabr	10.9.18	Att. 254 4 Att Pool 123-16-9-18	
11-11-18.	Att Pool	S.O.S to 8 th Bgde C.F.A	"	Field	307078	" 174. 4 8 th Bgde 129-14-11-18.
7.3.19	8 th Bgde	Proc. to England.	"	"	2.3.19	" 7.
27.3.19	do	S.O.S. to Canada Dis. Area "I"	"	Witley.	27.3.19	- 26.

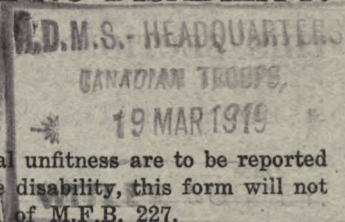
40 I 27-3-19

341128 Taylor J.H.

Taylor J. H.

[illegible]

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. 341128 Rank Saddler Surname Taylor
(Given name in full)

Unit or Corps 8TH ARMY BDE. C.F.A. Birthplace Staffordshire, Eng.

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

1. GENERAL DESCRIPTION:

Physique good Weight 146 lbs. Height 5'7 ft. in. Colour of Eyes Brown

Nutrition good

Pulse normal

Condition of arteries normal

Vision Rt. 4/6 Left 4/6

Hearing (conversational voice) Rt. 4 ft.

Left 4 ft.

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

Scars inner side
of foot
present

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 London (Overseas)

Date 19 3 -19

Signed Nachmuss 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 J. H. 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 Medical Board.)

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

[OVER]

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

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

250M.—1-16.

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps

Regimental No. *341128*

Rank

Name

Enlisted (a) *Jan 9-1917*

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				
		Embarked Canada.....	Halifax	10-218 S; S. Lppland	
		Arrived England.....	Glasgow	25-2-18	
		<i>208 from Canada</i>	Witley	26 FEB 1918	<i>Bo Pt. II 60-</i>
		<i>by Com Woolwich Saddlers Courra</i>	WITLEY.	23-4-18	<i>Bo Pt. II 114</i>
		<i>Ceases to be On Com. Woolwich</i>	WITLEY.	27-7-18	<i>Bo Pt. II 210</i>
		Proceeded overseas to C. F. A.	Witley	10-9-18	<i>Bo Pt. II 254.</i>
		<i>marriage approved</i>			
					<i>Asst. Adjutant, Reserve Brigade, CFA.</i>
					<i>FOR LT. COL. MC RECORDS, C.O.M.F.</i>

(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				

12-9-18.	COBD.	Arr. as Reinf & T.O.S.	Can. Art. Pool	12-9-18.	NR. 754 Pt. II O. 123
14-9-18.	"	Left Base for C.C.R.C.	Field	14-9-18.	NR. 1386
14-9-18.	CCRC.	Arrived at C.C.R.C.	Field	14-9-18.	NR. 1450

30^{10/18} Code Posted to 8th Army Bde C-70 30^{10/18} NR. 379 (1962) d/30^{10/18} NR. 983 Pt. 2 O. 174

do do T.O.S. 8th Army Bde C-70 31.10.18 PRO 129 d/14.11.18
 8.11.18 8th Army Bde C-70 Field 31.11.18 (B21)
 Camp Camp Proceeded to England 2.3.19 NR

S.O.S. enproceeding to Canada
 P.T.Y. crane to 27-3-19
 E.S. Whitaker

W. B. B. B. B.

LIEUT.
 FOR LT COL.
 A.A.G.

H-M-T NORTHLAND
 SAILED LIVERPOOL MCH-27 1919
 BR'D HALIF'X APR 5 1919

APR 27 1919 O.S. T.O.S. No. 2 DISTRICT DEPOT, TORONTO. 1919 PART II D. O. 105
 APR 7 1919 S.O.S. (DISCHARGED FROM H. M. S.) No. 2 DIS. DEPOT, PART II D. O. 105

W. B. B. B. B.
 Lt Col.
 No. 2 District Depot.

CANADIAN EXPEDITIONARY FORCE War Service Badge.

DISCHARGE CERTIFICATE

Class A
No. 148966
Issued

THIS IS TO CERTIFY that No. 341155 (Rank) Saddler

Name (in full) Taylor James James enlisted in
the 870th Battery C.E.F.

CANADIAN EXPEDITIONARY FORCE at Toronto on the 9th
day of January 19 17

HE served in 870th Battery Bde C.E.F.

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 35 years

Height 5'6"

Complexion Dark

Eyes Brown

Hair Dark

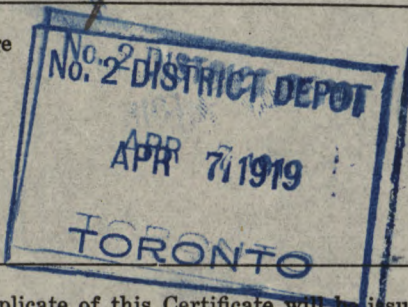
Marks or Scars

Scar inside left foot

J. H. Taylor
Signature of Soldier

A. Sergeant
Issuing Officer

Date of Discharge



For Rank
O.C. No. 2 District Depot.
APR 7 1919 19

Date

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.

DISCHARGE CERTIFICATE

CANADIAN EXPEDITIONARY FORCE

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:

Marks or Scars _____

Age _____

Height _____

Complexion _____

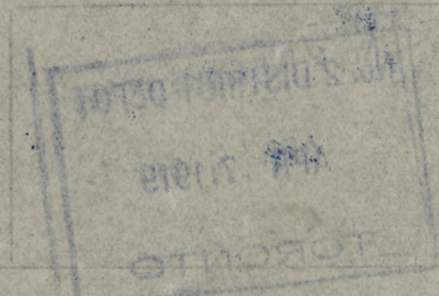
Eyes _____

Hair _____

Signature of Soldier _____

Training Officer _____

Date of Discharge _____



For Rank _____
D.C. No. 2 Discharge Book
Date _____ 19 _____

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

M.P.R. 30A
1000 P.T. 1000-1-10
H.O. 1175-10-100

Name Taylor Eul. 9-1-17

Date of Embarkation for England 10-2-18

Proceeded to France 10-9-18 Returned to England 2-3-19

Demob
Date returned to Canada 27-3-19

P.R. 2855

"looked"
19-6-29

Item

Date of Information for Release

Approved for Release

Date Returned to CIA

Date Returned to CIA

U.S. 1982

ORIGINAL

ORIGINAL

341128

MEDICAL HISTORY SHEET

18 SEP 1918

Surname

Taylor

Christian Name

James Henry

Examined { on 9th day of January, 1917
at Toronto, Canada

Approved by

For Board
C. S. Bay

Birthplace { City or Town Staffordshire
County England

Rank

Sergeant

M.O.

Toronto Recruiting Depot

Apparent age 32 yrs 10 mos

Date

Fit or Unfit

EXAMINED FOR RE-ENGAGEMENT

Trade or occupation Saddler

M.O.

Height 5 feet 6 Inches

M.O.

Weight 129 lbs.

M.O.

Chest measurement { Minimum 32 inches
Maximum expansion 37 inches

M.O.

M.O.

Physical development Good

M.O.

Small-pox Marks nil

M.O.

Vaccination Marks { Arm Right Left 4
Number 4

Date

Result

VACCINATIONS

When Vaccinated last Childhood

30/1/17

J. B. Hawley

M.O.

(a) Marks indicating congenital peculiarities or previous disease nil

M.O.

M.O.

(b) Slight defects but not sufficient to cause rejection
Slight functional disturbance
of heart from smoking.

Date

Result

ANTI-TYPHOID INOCULATIONS, ETC.

Jan 20/17
Jan 27/17

B. B. Cornell

M.O.

B. B. Cornell

M.O.

3/2/17
8.3.18

J. B. Hawley

M.O.

W. B. Hawley

Enlisted on 9th day of January, 1917

13-3-18

Toronto, Canada.

	CORPS	REG'L NUMBER	HABITS	DATE
Joined on enlistment	District Artillery Depot.	341128	Good	9/1/17.
Transferred to	70th Bty PROCEEDED O/SEAS TO 6th & 4th France	C 75	"	9/1/17
			SEP 10 1918	

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT
Witley	19.3.17	Nil A	ES M. J. C. S. J.

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.

Taylor

Surname	Christian Name
189101	
(18910101010101)	

[illegible]

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters)

JAMES HENRY TAYLOR

REGIMENT

8TH ARMY BDE. C.F.A.

RANK

Saddler

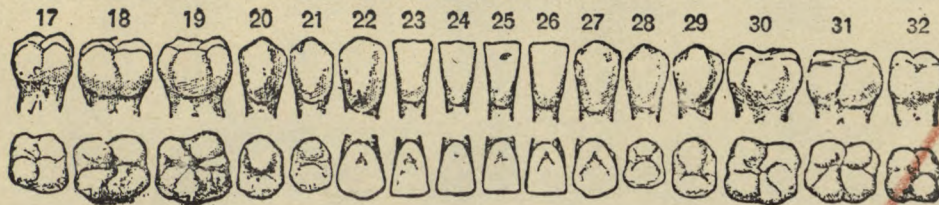
No.

341128

Date of Examination in England

18 MAR 1919

Date of Examination in France



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 8

2. EXTRACTIONS

3. CROWNS

4. DENTURES

(a) Full Upper

(b) Part Upper

(c) Full Lower

(d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

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

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.

Signature of Dental Officer

C. M. C. C.

AMERICAN ARMY AND AIR FORCE
CENTRAL CERTIFICATE FOR DEMOBILIZATION

RECEIVED
OFFICE OF THE
DIRECTOR

NAME
ADDRESS
CITY
STATE
ZIP

DATE
TIME
PLACE

REMARKS
SIGNED
OFFICIAL

THIS CERTIFICATE IS
ISSUED TO THE
HONORABLE
MEMBER OF THE
ARMY OF THE UNITED STATES
WHO HAS BEEN
DEEMED FIT TO
RE-ENTER THE
CIVILIAN LIFE

NAME	
ADDRESS	
CITY	
STATE	
ZIP	
DATE	
TIME	
PLACE	
REMARKS	
SIGNED	
OFFICIAL	

RECEIVED
OFFICE OF THE
DIRECTOR

Duplicate

To be made out in duplicate.

H.Q. 54-21-23-53

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

INSTRUCTIONS.

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

-
- (1) Name of Overseas Unit which Soldier joins..... 70th BATTERY CFA CEF
-
- (2) Regimental Number..... 341128
- (3) Full Name of Soldier..... TAYLOR. James Henry
-
- (4) Place of Birth..... Walsall, England.
-
- (5) Are you married, or not?..... xx
- (6) If married, state,
- (a) Full name of your wife..... xx
-
- (b) Present Postal Address..... xx
-
- (7) Are you a widower?..... WIDOWER
- (8) Have you any children?..... No

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

Also their names and ages..... xx

M. F. W. 67.

500M.-9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive?.....No.....

If so, state name and address

(10) Is your Mother alive?.....Yes.....

If so, state name and address Lizzie Agnes Taylor

374 Main St. East Toronto, Ont. Can.

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

Are you her sole support, or not?.....No.....

(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.

.....XX.....

(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.

.....XX.....

(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.

.....XX.....

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

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

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

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

Date.....28/1/18.....

- P. M. Little Lieut
Officer Commanding.

70th Battery C.F.A. C.C.F.

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

M. F. W. 11a.
50m.- 6-16.
1772-39-818.

OVERSEAS CONTINGENTS

Sheet No. 2. *Ada Amelia Taylor* ^{wife}
PAYMENTS.

Name of Soldier *Taylor, James H.*
lpr.

L. L. Job 4503. -Req. 6832.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917	<i>N30805</i>	<i>14</i>	<i>14 R</i>
Feb.		<i>N32635</i>	<i>20</i>	<i>20</i>
March		<i>N36916</i>	<i>20</i>	<i>20</i>
April		<i>L2703</i>	<i>20</i>	<i>20</i>
May		<i>N6040</i>	<i>20</i>	<i>20 114 MK</i>
June		<i>N9322</i>	<i>20</i>	<i>20</i>
July		<i>N12517</i>	<i>20</i>	<i>B N12517, Cancelled</i>
Aug.		<i>XXXXXX</i>	<i>XXXX</i>	<i>Wife Deceased 30/6/17 DMK 14/7/17</i>
Sept.				<i>End 20/7/17</i>
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

Month.	Year.	Cheque No.	Amt.		Remarks.	
Aug.	1918					
Sept.						
Oct.						
Nov.						
Dec.						
Jan.	1919					
Feb.						
March						
April						
May						
June						
July						
Aug.						
Sept.						
Oct.						
Nov.						
Dec.						
Jan.	1920					
Feb.						
March						
April						
May						
June						
July						
Aug.						
Sept.						
Oct.						
Nov.						

SEPARATION ALLOWANCE

Name *Ada Amelia Taylor,*
Address *374 Main St.,*
East Toronto, Ont.

Name of Soldier *Taylor, James N.*

Regtl. No. *341128*

Rank *lpr.*

Corps *70th Bty.*

Relation to Soldier

wife, child or mother

} *wife*

To what Corps belonging

when called out

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



2-5-68

OC 1-5-68

1-5-68

MARRIED OR SINGLE

PLACE OF BIRTH

NAME OF NEXT OF KIN

ADDRESS

NAME OF NEXT OF KIN

ADDRESS

APPOINTMENTS.
PROMOTIONS AND REVERSIONS.

PARTICULARS

EFFECTIVE DATE

AUTHORITY

DATE ADMITTED

ADMISSIONS DATE DISCH'D

V. OR A.

TO HOSPITAL, &c. NAME OF HOSPITAL.

REG'L. No.

RANK

NAME

PLACE OF ATTESTATION

DATE OF ATTESTATION

ORIGINAL UNIT

ASSIGNED PAY

PER MONTH \$

DATE EFFECTIVE

AUTHY.

PAYABLE TO

RELATIONSHIP

PER MONTH \$

DATE EFFECTIVE

AUTHY.

PAYABLE TO

RELATIONSHIP

PER MONTH \$

DATE EFFECTIVE

AUTHY.

PAYABLE TO

RELATIONSHIP

PER MONTH \$

DATE EFFECTIVE

AUTHY.

PAYABLE TO

RELATIONSHIP

DISCHARGE DATE AND PLACE

REASON AND AUTHORITY

PRESENT UNIT

PARTICULARS OF TRANSFERS

TO UNIT

EFFECTIVE DATE

AUTHORITY

SEPARATION ALLOWANCE MONTHLY \$

EFFECTIVE (DATE)

STOPPED EFFECTIVE (DATE)

PAYABLE TO

REASON

RELATIONSHIP

AUTHORITY

AUTHORITY FOR ISSUE

REMARKS

SEPARATION ALLOWANCE MONTHLY \$

EFFECTIVE DATE

STOPPED EFFECTIVE (DATE)

PAYABLE TO

REASON

RELATIONSHIP

AUTHORITY

AUTHORITY FOR ISSUE

REMARKS

NEW PAYBOOK ISSUED

NEW PAYBOOK ISSUED

PERIOD		PAY AND FIELD ALLOWANCE		WORKING PAY		SEPARATION ALLOWANCE		ASSIGNED PAY CREDITS		ANY OTHER CREDITS		TOTAL CREDITS		SEPARATION ALLOWANCE		CASH PAYMENTS DURING THE MONTH				ASSIGNED PAY		OTHER CHARGES		TOTAL DEBITS		BALANCE CARRIED FORWARD		NUMBER OF ACQUITTANCE ROLLS		NUMBER OF S.A. AND A.P. CHEQUE		REMARKS. ALL CASUALTIES, PROMOTIONS, &c., TO BE NOTED. ALSO PARTICULARS OF "OTHER CREDITS" OR "OTHER CHARGES"	
FROM	TO	NO. OF DAYS	RATE	\$	C.	NO. OF DAYS	RATE	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	1	2	3	4	\$	C.	\$	C.	\$	C.	CREDIT	DEBIT	1	2		
																		\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.				
MONTH PARTICULARS		CR. 1	CR. 2	PARTICULARS		DR. 1	DR. 2	DR. 3	DR. 4	BALANCE																							
JAN 31 1918				Bal forward						10																							
At Gen		30	80	AR 1574 PERS.		24	33																										
trch		34	10	AP At trch						30	20	57																					
		64	90			24	33			30																							

ASSIGNED PAY		ENGLAND or CANADA.	SEPARATION ALLOWANCE.		ENGLAND or CANADA.	NAME: TAYLOR James Henry					
EFFECTIVE DATE: 1-2-18			EFFECTIVE DATE: 1-2-18			NUMBER: 341128					
AMOUNT: 15.00			AMOUNT: 15.00			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					
Mrs. Lily White 374 Main St E. Toronto - Ont						DATE EFFECTIVE					
Mrs. L. E. Taylor 12 Budge St. Toronto Ont.						RANK OR APPOINTMENT Enr					
UNIT AND TRANSFERS											
ORIGINAL UNIT: Inf Art. Bde											
DATE ACCOUNT FIRST OPENED: 1-2-18											
AUTHORITY		DATE EFFECTIVE		DATE LEDGER SHEET T'SP'D		UNIT TRANSFERRED TO					
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				
23/2	2994	C&C	4.00								
7/3	3061	IC 4A	58.10								
DAILY RATES OF PAY AND ALLOWANCES											
AUTHORITY		PAY		F.A.		P.F.A.					
		1		10							
PARTICULARS OF RENDERING NON-EFFECTIVE: Note Can 3/3/19. NR. 4365 Wtting 10/3/19 Wtting. Balance L.P.C. 17.20 Cred.											
MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
1918											
Mar.	Bal. Fwd.								20 57		
April	Enr. Pay	33		A. Pay				15			
				AR 435 23/4/18	CRA	487					
				" 7		5 00			218 70		
		33				9 87		15			
May	Enr's Pay	34 10		A. Pay.				15	478 0		
				AR. 7429 London. 25/5/18.	9 73				38 07	nil	
		34 10			9 73			15			
June	GP	33		A.P.				15	56 01		
				AR. 4674 London. 31/5/18	9 73						
				AR 1613 CRA. 8/6/18	14 60						
				AR. 2061 ✓ 22/6/18	9 73				22 01		
		33			34 06			15			
July	GP	34 10		A.P.				15	41 11		
				AR 2835 15-7-18	CRA	9 73					
				AR. 3224. 27-7-18.	CRA	9 73			21 65	nil	
		34 10			19 46			15			
Aug.	GP	34 10		A.P.				15	40 75		
				AR. 3433 13-8-18	CRA	4 87					
				AR. 3834 27-8-18.	do	9 73			26 15		
		34 10			14 60			15			
Sept.	GP	33		A.P.				15	44 15		
				AR. 4167 8-9-18.	CRA	2 43					
				AR. 1831 19-9-18.	CRA	3 57			38 15		
		33			6 00			15			

NUMBER 341128

RANK

Jnr

NAME


TAYLOR

JH

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1918									38 15		
Oct	G. 7	34 10		ad				15			
				531. 11/10. 40ac	7 46				49 79	afred	
Nov	Spay.	34 10		ad	7 46			15			
		33						15			
		34 10		ad 134. 8cta. 8/11.	13 06						
				1221. 15/11.	7 46						
				ad	6 52			15			
Jan		34 10		ad 133. 8cta 9/11	3 73						
		10 20		ad				15	81 74		
					24 22			45			
				ad 1568. 8cta 2/12	3 73						
				1754 ✓✓ 11/1.	3 73						
				1936 ✓✓ 2/1.	3 73						
				2041 ✓✓ 1/2.	18 66						
				2143 ✓✓ 11/2.	3 73						
Feb.	Sur.	30 80		ad.				15			
March	"	34 10		ad.				15	83 06		
				AR. 2994. etc. 23/2	7 46						
				3061. 8cta. 7/3.	58 40				17 20		
		64 90			99 44			30			

Sol to Canada 27.5.19 Lf 40

RT FORM.
S ON DISCHA
obilization.)

A circular purple ink stamp containing the letter 'H' is located in the upper left corner of the page.

Class *Ch*
No. *148966*
issued.

3. Name. James Henry Taylor

4. Unit. *8th Army Brigade L. V. A.*

5. Date of Discharge

APR 7 1919
APR 7 1919

Place

TORONTO, ONT.

6. Reason for Discharge

DEMOBILIZATION

7. Authority. No. 2, D.D., Part II, D.O. No.

8. Proposed Residence after Discharge.....12 Bridge Street
Toronto E

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. ?

J. H. Taylor

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place.

Date.

No. 2 DISTRICT DEPOT
APR 7 1919
TORONTO

Signature _____

(O. C. Discharging Unit.)

O.C. No. 2 District Depot.



TORONTO, ONT.

APR 7 1919

DEMobilization

U.S. DEPT. OF THE INTERIOR

Department of the Interior

DEPARTMENT OF THE INTERIOR

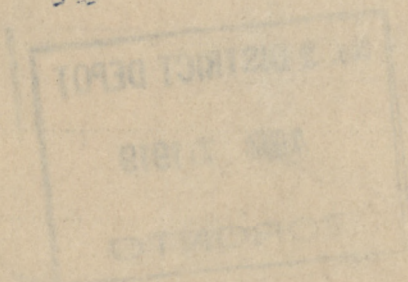
Department of the Interior

U.S. DEPT. OF THE INTERIOR

U.S. DEPT. OF THE INTERIOR

U.S. DEPT. OF THE INTERIOR

U.S. DEPT. OF THE INTERIOR



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. 178 or A.F.B. 179).
4. Proceedings of Medical Board (M.F.B. 227 or M.F.W. 129).
5. Dental History Sheet (M.F.B. 465).
6. Field Conduct Sheet (M.F.B. 122).
7. Proceedings of Discharge (M.F.B. 218a).
8. Discharge Certificate (M.F.W. 44).
9. Copy of Discharge Certificate (M.F.W. 89a).
10. Discharge Certificate (M.F.W. 89).
11. Equipment Statement Q.M.G. Form (D.O.B. 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 B
 Checked by No. 15
 Date 26/3/19

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF ASSIGNMENT

RATE OF SEPARATION ALLOWANCE

25	20 1/8		
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3-6-18 P2253

15.00			
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959

PARTICULARS OF SEPARATION ALLOWANCE

No. 341128

Rank Gr Promoted Reverted Discharge

Soldier's Name J. H. Taylor

Battalion Depot Art. Bde m D #2

Beneficiary Mrs Laura E Taylor

Relationship wife

Address 24 Bridge St Toronto Ont m/w 672974

PARTICULARS OF ASSIGNMENT

Name Mrs Lily Whate

Address 374 Main St, East Toronto

Mrs Laura E Taylor (wife) Ont.

1 MRS. LILY WHATE 12
374 MAIN ST., 25 Bridge St.
2 E. TORONTO, ONT. 15 15.00
3 % 341128 GR J. H. TAYLOR
4 FIFTEEN DOLLARS

Date	Cheque No.	Amount S/A	Amount A/P	Total
Feb 1918	76634	114	15	15
Mar	V 4377	XX	15	15
Apr	V 8991		15	15
May	7 15042		15	15
June	P 22001		15	15
July	9 32618		15	15
Aug	R 41102		15	15
Sept	P 42250		15	15
Oct	2 44078		15	15
Nov	7 57212		15	15
Dec	n 2590	148	15	148
	u 44120	48	15	60
Jan	1 70894	30	15	45
Feb	0 81630	30	15	45
Mar	B 87208	30	15	45
Apr	W 4614	30	15	45
		427	225	652

REMARKS 017846-224

S/A to wife from d. gen. 2-1-17 to 30-6-17. 114
wife deceased. see sheet in stop

* m/c 15 sent 16-4-18 per

① new assign for 2m 4-9-18 effective 1-11-18
m/c. 13671 alteration sent 24-10-18
PAB ruling to pay SA of m 3-6-18
acw. 7726 cheque 22590 ad. SA mailed 30-11-18
m/w 19249 alteration sent 24-11-18

① u 64120 came 4-12-18 cc 0 SP 5755 sent 2-12-18
a 60 11309 cheque 25765 sent up Dec mailed 13-12-18

M. F. W. 128
40m 6 F. J. 7238-1141
L. L. 2230-M. & D. 1893.

Ret'd per. Northland
Date 5/4/19 M.F.W. 187
Closed m/c 70843 10/4/19
m/c 2

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No.			
Rank	Promoted	Reverted	Discharge
Soldier's Name			
Battalion			
Beneficiary			
Relationship			
Address			

PARTICULARS OF ASSIGNMENT

Name	
Address	
Change of Address	
1	
2	
3	
4	

Date

Cheque
No.Amount
S/AAmount
A/P

Total

REMARKS

M. F. W. 128.
FORM 6-7-1772-33-1141
L. L. 22820-M. & D. 1903.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

9-1-17

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

T

RATE OF SEPARATION ALLOWANCE

20	\$ 25.00		
	1-12-17		
	P.C.3257		

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. 341128
 Rank *Sur* Promoted Reverted Discharge
 Soldier's Name *James H. Taylor*
 Battalion *70 Batty*
 Beneficiary *Ada Amelia Taylor*
 Relationship *wife*
 Address *374 Main St East Toronto Ont*

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917					
Dec 31	—	114		114.	
		X		X	
		X		X	
<i>file in stop</i> <i>S. a. account suspended wife deceased date of last Cheque paid 30/6/17. M.K.</i>					

Date of Assignment

OVERSEAS CONTINGENTS

RATE OF ASSIGNMENT

--	--	--	--

--	--	--	--

PARTICULARS OF ASSIGNMENT

Name _____

Address

Change of Address

1

2

3

4

[illegible]

Form with sections: M. OR S., PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING, DAILY RATE OF PAY AND ALLOWANCES, REGT. NO. 341128, RANK Sadler, NAME (IN FULL) TAYLOR, J. H., DISPERSAL "I" 9.1379, NEXT OF KIN, ADDRESS, IS SEPARATION ALLOWANCE PAID, TO WHOM PAID, ADDRESS, ORIGINAL UNIT C.E.F., PLACE OF ATTESTATION, DATE OF ATTESTATION, ASSIGNED PAY, PAYABLE TO, ADDRESS, STOP PAYMENT FORM, DISCHARGED, PLACE, DATE, REASON, AUTHORITY, IF ENTITLED TO POST DISCHARGE PAY, T.O.S. 24.3.14 D.O. 105, PARTICULARS OR REMARKS, SUBS. 10 D.

