

# ATTESTATION PAPER.

No. 199

Folio.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... *William Taylor*
2. In what Town, Township or Parish, and in what Country were you born?..... *Staley bridge England*
3. What is the name of your next-of-kin?..... *Mrs Jos Taylor*
4. What is the address of your next-of-kin?..... *Biddeford Maine U.S.A*
5. What is the date of your birth?..... *8 August 1888*
6. What is your Trade or Calling?..... *Painter*
7. Are you married?..... *No*
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?..... *Yes*  
If so, state particulars of former Service. *U.S. Coast Artillery Militia*
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*

*William Taylor* (Signature of Man).  
*Jos Hartley Sgt* (Signature of Witness).

### DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, ....., 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.

*William Taylor* (Signature of Recruit)  
 Date *27 Jan* 191*5* *Jos Hartley Sgt* (Signature of Witness)

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

I, ....., 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.

*William Taylor* (Signature of Recruit)  
 Date *27 Jan* 191*5* *Jos Hartley Sgt* (Signature of Witness)

### CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath

before me, at *Montreal* this *27* day of *January* 191*5*  
*W. Gully Mag* (Signature of Justice)

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

..... (Approving Officer)

Description of Wm Taylor on Enlistment.

Apparent Age.....21 years 5 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. 2<sup>3</sup>/<sub>4</sub> ins.

Chest measurement { Girth when fully expanded.....34 ins.  
 Range of expansion.....2<sup>1</sup>/<sub>2</sub> ins.

Complexion.....Fair

Eyes.....Blue

Hair.....Fair

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

4 Vacc left arm  
2 small moles right shoulder

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\*.....for the Canadian Over-Seas Expeditionary Force.

Date.....27 Jan.....1914.

Place.....Montrose

A. B. Power, Capt  
 Medical Officer.

\*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

.....W 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 of Officer)

Date.....FEB 14 1915.....1914.

A. B. Power  
 Comd'g. 6th BDE. AMN COL. C.A.C.E.F.

NAME *Taylor William*

REGT. NO. *85389*

UNIT *158 a 6*

H. Q. FILE NO.

**S**

**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)

CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

TRAINING HISTORY SHEET (M.F.W. 113)

FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)

REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)

COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)

MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

DENTAL HISTORY SHEET (M.F.B. 465)

MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

MEDICAL EXAMINATION (M.F.W. 129)

TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)

PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)

DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)

LAST PAY CERTIFICATE (M.F.W. 44)

PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)

PARTICULARS OF CHARACTER (A.F.W. 3226)

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

*1 key*  
*5 misc.*  
*1 signed*

*Forwarded to [unclear]*

*sent to [unclear] 15-6-20*

*Medical Report*

04049

**H**

DEATH

Category

DISCHARGE

Category

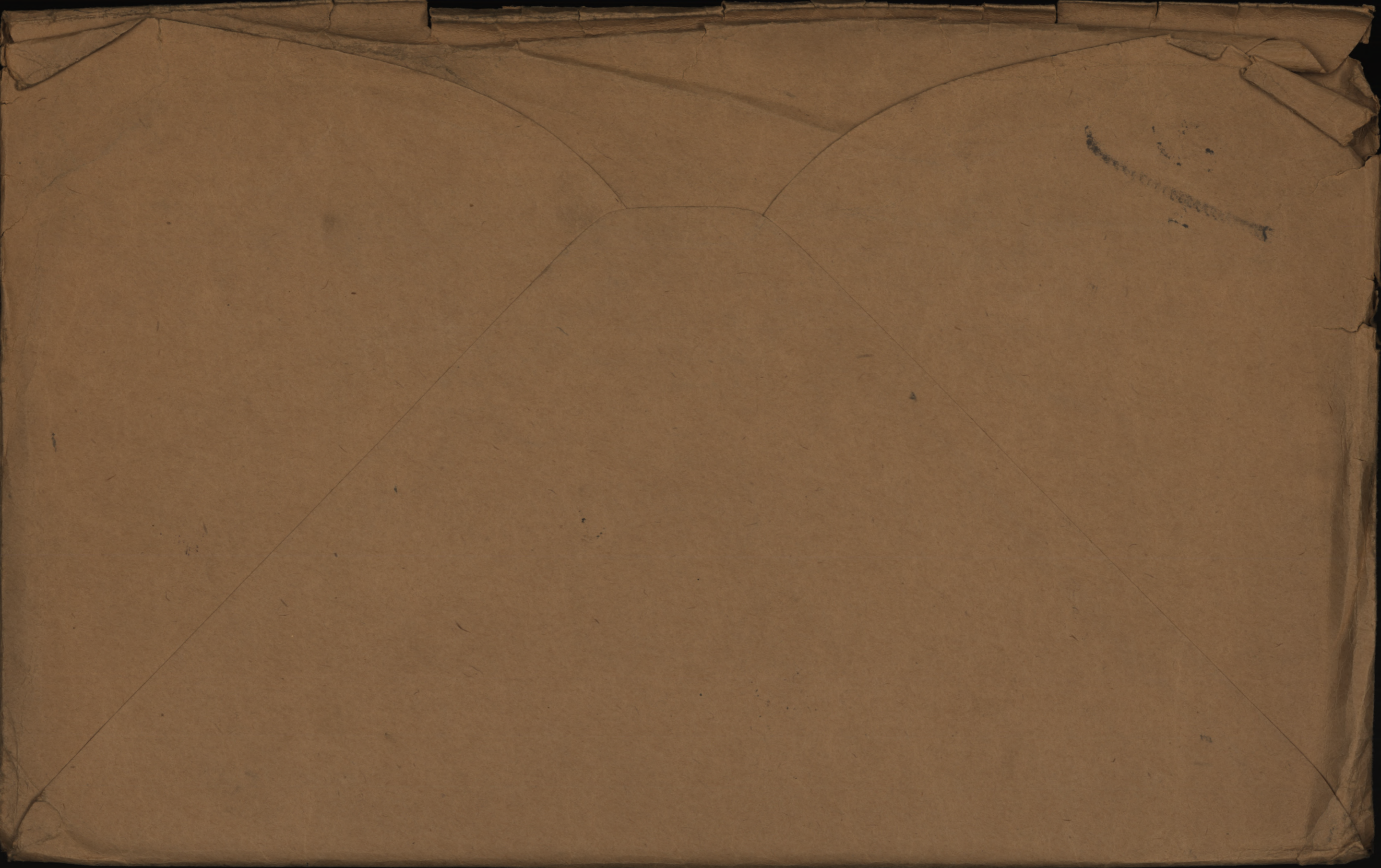
*Demol.*

DESERTION

*4*  
*21-27*  
*16-27*  
*3-27*  

---

*4*



Number 85389 Rank *Ser*

Surname TAYLOR

Christian Names William

Unit C. H. A. Theatre of War *France*

Dates of Service 13-5-15

Remarks

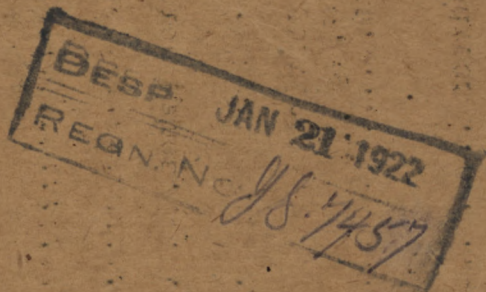
Latest Address 26 Middle St  
Bedford Maine USA

Roll No. B. Page 2001

*Art.*

Q. 20137 Desp

MAY 14 1921













Name TAYLOR W

WILLIAM.

Rank Dvr. *1st Lt*

Reg. No. 83389<sup>5</sup>

Unit 1st.DAC. CPA.

Next of Kin *U.S.A.*

*g.w.*

Date 1917	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
9-12	No. 6 Conv. Dep.	Etaples	VDS.	2121	HA	19354/8
24-12	Disch to Med. Dep.	Etaples	do	2131	HA	17864
<del>28.9.18</del>	<del>5 fou Hosp</del>	<del>Rouen</del>	<del>9th Inf Mt</del>	<del>2363</del>	<del>98</del>	<del>HA 4161/3</del>
8.10	2 P Dep	do	do	2372	"	4756/9
15.10	Disch to Reinf	Etaples	do	2279	"	4962/13
19.2.19	7 fou Hosp	Nimereux	42	2488	HA	7342/4
26.2	3 can fou	Boulogne	do	2493	"	7412/7
18.4	Disch to Base	do	do	2532	"	7519/9



NAME

Taylor William

REG'T L No.

85389

RANK AND CORPS

Lvt. (Can. Artillery) 1<sup>st</sup> Diviamn Col

FOLLOWS

NO.

CABLE

NO.

DATE

NATURE OF CASUALTY

form 21<sup>st</sup> 1389 to 1390

FOLLOWS

7 of 74

Mrs Joseph Taylor U. S. S.

Biddeford Maine U. S. A.

61-3  
G598

5-10-18

Adm 5 Gen H Rouen Sept-28<sup>th</sup> 1918

G88 R Foot.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
Q-28 <sup>(3)</sup>	No. 18. Cas. Clg. Stat.	26-8-17.	V. H. G.
Q-31 <sup>(2)</sup>	Ex. No. 51. Gen. Etaples	28-8-17.	" " "
Q-55	" " " "	23-9-17	" " (Disch)
Q-82 <sup>3</sup>	#7 Gen. Gen. Etaples	25-10-17	Bronchitis (Gen Art)
Q-90 <sup>6</sup>	Discharged	2-11-17	Bronchitis
Q-121	#6 Conv. Dep. Etaples	9-12-17	V. D. S.
Q-131 <sup>5</sup>	Discharged	24-1-17	V. D. S.
Q-363-3	#5 Gen Rouen	28-9-18	G.S.W. Foot R
Q-372-3	#2 Conv. Dep. Rouen	8-10-18	" " " "
Q-379-3	Discharged	15-10-18	" " " "
Q-488-1	No 7 Gen Wimereux	19-2-19	42
Q-493-2	No 3 Gen. Boulogne	26-2-19	42
Q-532	Discharged	18-4-19	42

SURNAME

CHRISTIAN NAME OR NAMES

FORM D.M.S. 1300.

REG. NO.

TAYLOR.

W.

85389

RANK

UNIT

Co.

TROOP

BATTY.

Dvr.  
HOSPITAL

C.A.(1DAC)

DATE OF ADMISSION

18. C.C. Stn.

26-8-17.

1.

51 Gen Staples  
7. Can Gen. Staples

HOSP. 28. 8. 17.

2.

6 Cow Depot

HOSP. 25. 10. 17.

3.

5- Gen Rouen

HOSP. 28. 9-18

4.

2 b. D. Rouen

HOSP. 8-10-18

DIAGNOSIS

1

V.D.G. gt

2.

Bronchitis

3.

21. 10. S. Ho. 1000

W.

G.S.W. Foot R. M.

V.D.S. 1/2.

DISPOSITION

Dis. 23-9-17 DATE

C.I. 3-9-17 A28(3)

REMARKS

DIS- 2-11-17.

6-9-17 A31(2)

Dis 24. 12. 17.

4-10-17 A55(3)

tr. 18. 10. 18

5. 11. 17 A82

14-11-17- @ 90(6)

20-12-17 A121-5

3-1-18 @ 131(5)

3-10-18 A363-3.

14-10-18 A372-3

22. 10. 18 @ 379. 3

1. 3. 19. A488. 1

7. 3. 19. A493. 2.

24. 4. 19. A532.

A.M.D. 2 Dept. Dis: 18. 4. 19.

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

EPITOME OF HOSPITAL TREATMENT.

HOSPITAL

ADM.

1.

7. Gen. W. P. Wimersey  
3. Can Gen Boulogne.

19.2.19.

26.2.19.

2.

3.

4.

5.

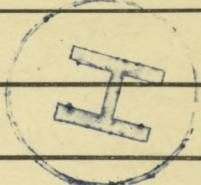
6.

7.



SHORT FORM.  
PROCEEDINGS ON DISCHARGE.  
(Demobilization.)

*DD - F*  
*DD - 2*



1. *85389*

2. R *Driver*

3. N: *Taylor, William*

4. Un *1st D.A.C.*

5. Date of discharge *9-7-19* Place *Montreal.*

6. Reason for discharge *Demob.*

7. Authority. *R.O.1420. D.D.#4 D.O.Pt.II-202.*

8. Proposed Residence after Discharge.....  
*26 Middle St*  
*Bedford Maine USA*

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

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

M. F. *B. 39* *Montreal Que*  
*July 9 - 1919.*  
*W. Taylor*  
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place..... *H.M.T. MONTREAL Que*

Date..... *EMB GL 20 19 9-1919.*  
*DISEMB. MONTREAL 8 6 19*

Signature.....  
(O. C. Discharging Unit.)

*25-11-48*  
*6-4-49*

*16*  
*28*

*E.R.I.*



LIST OF RECHARGE DOCUMENTS

1. Medical History Sheet  
 2. Physical Examination Sheet  
 3. Laboratory Reports  
 4. X-ray Reports  
 5. Pathology Reports  
 6. Hospital Course Sheet  
 7. Discharge Summary  
 8. Referral Letter  
 9. Consultation Report  
 10. Progress Notes  
 11. Medication List  
 12. Patient History Sheet  
 13. Family History Sheet  
 14. Social History Sheet  
 15. Review of Systems Sheet  
 16. Present Illness Sheet  
 17. Past Medical History Sheet  
 18. Allergies Sheet  
 19. Immunization Record  
 20. Family Tree  
 21. Genetic Test Results  
 22. Psychological Evaluation  
 23. Social Work Report  
 24. Nutrition Assessment  
 25. Physical Therapy Report  
 26. Occupational Therapy Report  
 27. Speech Therapy Report  
 28. Audiology Report  
 29. Ophthalmology Report  
 30. Otolaryngology Report  
 31. Dermatology Report  
 32. Plastic Surgery Report  
 33. Orthopedics Report  
 34. Neurology Report  
 35. Psychiatry Report  
 36. Endocrinology Report  
 37. Rheumatology Report  
 38. Infectious Disease Report  
 39. Hematology Report  
 40. Oncology Report  
 41. Radiation Oncology Report  
 42. Cardiology Report  
 43. Pulmonology Report  
 44. Nephrology Report  
 45. Gastroenterology Report  
 46. Hepatology Report  
 47. Urology Report  
 48. Gynecology Report  
 49. Obstetrics Report  
 50. Pediatrics Report  
 51. Neonatology Report  
 52. Geriatrics Report  
 53. Palliative Care Report  
 54. Hospice Report  
 55. Case Management Report  
 56. Care Coordination Report  
 57. Care Plan  
 58. Care Transition Report  
 59. Care Coordination Meeting Minutes  
 60. Care Coordination Call Log  
 61. Care Coordination Dashboard  
 62. Care Coordination Checklist  
 63. Care Coordination Toolkit  
 64. Care Coordination Manual  
 65. Care Coordination Policy  
 66. Care Coordination Procedure  
 67. Care Coordination Standard  
 68. Care Coordination Guideline  
 69. Care Coordination Best Practice  
 70. Care Coordination Innovation  
 71. Care Coordination Research  
 72. Care Coordination Evidence  
 73. Care Coordination Practice  
 74. Care Coordination Quality  
 75. Care Coordination Safety  
 76. Care Coordination Patient  
 77. Care Coordination Family  
 78. Care Coordination Community  
 79. Care Coordination Society  
 80. Care Coordination World

26 Middle St  
 Belmont, MA 02458

37 Massachusetts Ave  
 Cambridge, MA 02139

L.M.B. O'Connell  
 DISEASE CONTROL

**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

- W 23), or
2. Attestation Paper, Triplicate (Militia Form W. 23).
  3. Particulars of Recruit (Militia Form W. 133).
  4. Field Conduct Sheet (Militia Form W. 178 or A.F.B. 122).
  5. Casualty Form (Militia Form W. 54 or A.F.B. 103).
  6. Last Pay Certificate (Militia Form W. 44).
  7. Certificate that missing documents are unobtainable (Militia Form W. 44).
  8. Medical History Sheet (Militia Form B. 313 or A.F.B. 178).
  9. Proceedings of Medical Board (M.F.B. 227, A.F.B. 179 or A.F.A. 45).
  10. Dental History Sheet (Militia Form B. 465).
  11. Medical Report (M. F. W. 129 or D. M. S. 1375).
  12. Regimental Conduct Sheet (Militia Form B. 263).
  13. Company Conduct Sheet (Militia Form B. 263a).
  14. Discharge Certificate (M.F.W. 89) (to be enclosed in special envelope (260M) ).
  15. Discharge Certificate (M.F.W. 89a).
  16. Statement Q.M.C. Form (M.F.W. 2).
  17. Last Pay Certificate (P. 351).
  18. Pay Book (A.B. 64).
  19. War Service Gratuity (Form M.F.W. 2595).
  20. Sundry Documents.

Group B

Checked by [Signature]

Date 28 JUN 1915

# Certificate of Service

(Issued following loss of Permanent Discharge Certificate M. F. W. 39)

DEPT. OF MILITARY DEFENCE  
DEC 24 1921  
CANADA

This is to Certify that No. 85389 (Rank) Driver

(Name in full) TAYLOR, William

Enlisted in 6th Brigade, C. F. A. (Trans. to 1st D.A.C.)

Canadian Expeditionary Force, on the Twenty-seventh day of January 1915.

He served in Canada, and England

and was discharged at Montreal, P.Q. on

the Ninth day of July 1919

by reason of Demobilization

~~His conduct and character while in the Service were~~

Address W. Taylor, Esq.,  
26 Middle St.,  
Bedford, Maine, U.S.A.

Lieut.,  
for Lieut.-Col.,  
Director of Records.

Ottawa 18th day of June 1920.

H. Q. 649-T-5723.

*Found loose in mail*

Branch Head Loan Office

DEC 23 1917

MOBILE, ALA.

CANADIAN EXPEDITIONARY FORCE

War Service Badge

Class "A" No. \_\_\_\_\_

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 85389 (Rank) Driver

Name (in full) Taylor William enlisted in

the 6th Brigade H. A. C. E. F.

CANADIAN EXPEDITIONARY FORCE at Montreal on the 27th

day of January 1919

HE served in 1st P.A.C. in France

Demobilization.

and is now discharged from the service by reason of

~~Medical Unfitness.~~

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

Age 30 years 11 months

Marks or Scars \_\_\_\_\_

Height 5 ft 3 3/4 ins

Complexion Fair

nil

Eyes Blue

Hair Fair

William Taylor

Signature of Soldier.

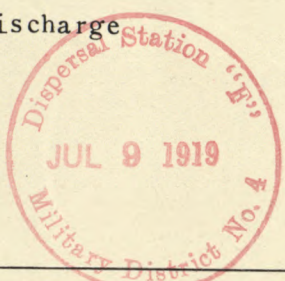
J. J. P. [Signature]

Issuing Officer.

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

Date of Discharge

Rank



Date July 9 1919

NB - 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.

Handwritten text, likely bleed-through from the reverse side of the page. The text is mostly illegible due to fading and bleed-through.

Handwritten text, likely bleed-through from the reverse side of the page. The text is mostly illegible due to fading and bleed-through.

Handwritten text, likely bleed-through from the reverse side of the page. The text is mostly illegible due to fading and bleed-through.



Certified Correct 0 1/2 Records

RL2-5-91

R2 41016

Army Form B. 103.

R. G. 102/3135

Casualty Form—Active Service.

Regiment or Corps Canadian Reserve. F. Art. Bde. 2<sup>nd</sup> Battery.

Regimental No. 85389. Rank Dr. Name Taylor, W.

Enlisted (a) 27/1/15. Terms of Service (a) Period of war. Service reckons from (a) 27/1/15.

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

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

**W. S. D.**  
**Class A**

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				

Transferred to Drafty, Shorncliffe 15/9/15

A. J. Hewson Capt  
ADJUTANT,  
5th F. A. BDE., C. E. F.

15-5-15	<u>O.C. D.A.C. 941</u>	<u>Transf. to D.A.C.</u>	<u>In the field</u>	<u>13-5-15</u>	
28-10-15	<u>und.</u>	<u>10 days S.P. #1, 25/10/15. Leaving his team without permission</u>	<u>und.</u>	<u>25-10-15</u>	<u>und.</u>
4/1/16	<u>"</u>	<u>Sentenced to 5 Days FPN #1 4/1/16 for "Disobedience of Standing Order-Leaving his team without permission"</u>	<u>Field</u>	<u>4/1/16</u>	<u>B2069</u>
29-1-16	<u>"</u>	<u>attached e.8.</u>	<u>"</u>	<u>22 1/16</u>	<u>B213 P#0d/14-2-16</u>
<del>11-18</del> 2-5-16	<u>"</u>	<u>Rejoined</u>	<u>"</u>	<u>17 2/16</u>	<u>K3158/und/5/45. P#0d/14-5-16.</u>
9-4-16	<u>"</u>	<u>9 days leave</u>	<u>"</u>	<u>31 3/16</u>	<u>B213. " " "</u>

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

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
18-1-17.	9700 Unit.	Sentenced to 7 days F.P.No.1 with forfeiture of 14 days pay, 8-1-17 for W.on A.S. "Drunkenness 6-1-17."	Field.	6-1-17.	B.2069 Pt.11 O.No.22 d/26-1-17.
27-8-17	18005	<del>U.D.G.</del>	6 AT.	27 <sup>8</sup> / <sub>17</sub> 27 <sup>8</sup> / <sub>17</sub>	A36
28-8-17	51 Gen'l.	do	51 Gen'l.	28-8-17	W3034
1-9-17	Unit	Adm.to Hosp. SICK.	Field.	26-8-17	B.213 DCS.No.412 d/10-9-17
23-9-17	C.S. Dep.	class "A" taken on.	C.S. Depot	23-9-17	NR.
23-9-17	51 Gen'l.	Forfeits Field Allowance & is placed under stoppages of pay at the rate of 50 cents per diem whilst in Hospital from 29-8-17 until 23-9-17 (26 days).	51 Gen'l.	23-9-17	A.F.O.1645 Pt.II O.174 d/28-9-17.
26 <sup>10</sup> / <sub>17</sub>	6 yrs.	D.O.B. class a to 7 Gen		26 <sup>10</sup> / <sub>17</sub>	NR. 173.
28 <sup>10</sup> / <sub>17</sub>	7 Gen	2 non chris aem		28 <sup>10</sup> / <sub>17</sub>	A-8424.
2 <sup>11</sup> / <sub>17</sub>	6 yrs	D.O.B. class "a" from 7 Gen		2 <sup>11</sup> / <sub>17</sub>	NR. 278
2/11/17	7 Gen	Bronchitis to Base		2/11/17	NR W3391/13903
9.12.17	6 Con Dep. 8935	Sos to (attend 51 Gen for treat)	6 Con Dep	9-12/17.	Nonball. 173.
9.12.17	6 Con Dep.	VDS aam	6 Con Dep.	9-12-17	W3034/6711
25.12.17	6 S/2D.	702, C.S. 21 from 6 AT Base		24.12.17	NR. ROR 502
24/12/17.	6 Con Dep.	VDS to Mra Depot Etaples.		24/12/17	W3034/C3941
11/1/18	6 S/2D	left for Unit	fld	1/1/18	NR 864
5/1/18	OC	Reported from Hosp.	fld	3/1/18	B213
10/1/18	OC	Forfeits 3 days pay. Absent from Draft Parade.	fld.	2/1/18	B2069 R 28 D.

*Sheet 2*

### Casualty Form—Active Service.

Regiment or Corps .....

Rank *Private* Surname *Taylor* Christian Name *W.*

Religion .....

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

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

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

Extended { ..... } Re-engaged { ..... } Qualification (b) .....

or Corps Trade and rate .....

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

Report		Record of promotions, reductions, transfers, casualties, &c. during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked ...			
		Disembarked ...			
<i>6.7.18</i>	<i>1st Lt. D. W. L.</i>	<i>Granted 14 days leave to UK from</i>		<i>1.7.18</i>	<i>B.213. P. 1162</i>
<i>7.7.18</i>	<i>1st Lt. D. W. L.</i>	<i>Leave expired. Absent without leave.</i>		<i>15.7.18</i>	<i>B.213</i>
<i>27.7.18</i>	<i>1st Lt. D. W. L.</i>	<i>above entry cancelled</i>		<i>27.7.18</i>	<i>B.213</i>
<i>27.7.18</i>	<i>"</i>	<i>Rejoined from leave</i>		<i>19.7.18</i>	<i>B.213</i>
<i>28.9.18</i>	<i>1 Lt. Col. S.</i>	<i>GW foot R. Adm. &amp; 20 148 A.T.</i>		<i>27.9.18</i>	<i>A.36/K.7552.</i>
<i>28.9.18</i>	<i>5 Genl.</i>	<i>GW. foot R. Adm</i>		<i>28.9.18</i>	<i>W.9034/K.4381</i>
<i>5.10.18</i>	<i>1 Lt. Col. C.</i>	<i>To Hospital, Suspected Wound.</i>		<i>28.9.18</i>	<i>B.213</i>
<i>8.10.18</i>	<i>2 Con Dep.</i>	<i>Not stated, Adm</i>		<i>8.10.18</i>	<i>K.7692.</i>
<i>8.10.18</i>	<i>5 Genl.</i>	<i>GW Foot R. To 2 Con Dep.</i>		<i>8.10.18</i>	<i>K.7932</i>
<i>15.10.18</i>	<i>2 Con Dep.</i>	<i>Class. "A" To Lt. Col. Reinf.</i>		<i>15.10.18</i>	<i>L.3127.</i>
<i>20.10.18</i>	<i>6 Lt. Col. D.</i>	<i>To O.S. "A" from 2 Con Dep.</i>		<i>19.10.18</i>	<i>N.R. 1574.</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) Signaller, Shoeing-Smith, &c.



Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W1889 - PP 1150 IM 5/18 G.W.P.Co (3490)

85389

# SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103-I.  
Part I.

(1)*Substantive rank <i>Dr.</i> *Acting rank *(To be entered in pencil to facilitate alteration.) (4) Surname <i>Taylor</i> (5) Christian Names <i>W.</i> (6) Army Form, number of, Attestation Form or Record of Service paper (7) Whether of British or of Alien origin [ <i>vide</i> A.C.I. 578 of 1918] (8) Date of birth as stated on enlistment (9) (a)	(2) Regiment or Corps	(3) Regtl. No.
	<i>160000</i>	

(10) Enlistment (b)	(11) Engagement (c)	Initials and Rank of an Officer.
(12) Service reckons from (date)	(13) Special conditions (if any) of enlistment (d)	
(14) Any subsequent variations (if any) of conditions of service	(Authority)	(date)

(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) (Record of Occupation in Civil life ( <i>vide</i> Army Order 93 of 1917))
				Industrial Group No. Trade or Calling Married or Single Particulars of Trade Test  Occupation Cards despatched on (date) Second Occupation Card despatched on (date)

(17) Next of Kin	(18) Demobilizer (f)	(Place)	(Signature of Posting Officer)
(19) Pivotal-man (f)	(Date)		
(20) Qualifications (g)	or (21) Corps trade and rate		
(22) Extended {			(23) Re-engaged {
(24) Miscellaneous entries:—			

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [*vide* A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoehing-smith, &c.

85389 103 (II.)

(A) Report		(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
Date.	From whom received					

26.2.19 9 Cdn Genl V.D.S. Admitted 26.2.19.

Adg. 23/30.3.19. Posted to C.A. Pool. 30.3.19. —

18.4.19 D.D. T.O.S. Cdn. Arty. Pool 31.3.19. P.T. II O. 3900/1919  
26. Gen. Infts. of Id. allow. of 30 Cents per day 0.1643/16014

1.5.19 Lt. G. B. S. D. S. Cdn. Arty. Pool on 18.4.19. P.T. II O. 460/19  
proceeding to England J.R. 619 P.Q. M. G. Q.A. 1 of 20 7/19

to be posted to SRP of Rapon 1.5.19 Lt. G. B. letter of 20 7/19  
K.G. 51007

P. T. II O. 530/1919  
Nothing to be written in this margin.  
Capt. for Lt.-Col., A. A. G.  
Canadian Section, G. H. O. 3rd Echelon, B. E. F.

SOS OM 7 of C. on proceeding  
to Canada for Discharge.

16-6-19  
~~14-6-19~~

S.O.S. OF O.M.E.C. ON PROCEEDING TO CANADA.

for discharge ~~DOES NOT~~ A.O. 67d-16-6-19

officer in Records  
"M" Wing. C.C.O.

H. M. T. → SATURNIA

EMB GL. G.O.V. 13-6-19

DISEMB. MONTREAL 28 6 19

FOR OFFICER COMMANDING,  
"M" WING, C.C.O.

#8

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

M. F. W. 54. (A. F. B. 103.  
500M.—9-16  
H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps. 1st D.A.C.

Regimental No. 85389 Rank Dvt. Name TAYLOR, W.  
C. E. F.

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

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

Extended..... Re-engaged..... Qualification (b).....

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
21-7-19	O/S	T.O.S.D.D.#4 Disp.Stn."F"	Montreal.	18-6-19	D.O.Pt.II-202.
21-7-19		S.O.S.D.D.#4 Demob.	"	9-7-19	D.O.Pt.II-202.R.O.1420.

*SA. Hatcher* Lieutenant,  
of Assistant Adjutant,  
District Depot No. 4.

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





ORIGINAL.

85389

MEDICAL HISTORY OF

Surname: Taylor Christian Name: William

Examined { on 27 day of January 1915  
 { at Montreal

Birthplace { City or Town Staleybridge  
 { County Lancashire

Apparent Age 27

Trade or Occupation Cariter

Height 5 Feet 3 3/4 Inches

Weight 135 Lbs.

Chest measurement { Minimum 31 1/2 Inches.  
 { Maximum expansion 34 Inches.

Physical Development good

Small-Pox Marks nil

Vaccination Marks { Arm Right Left   
 { Number 1

When Vaccinated last 1889

Approved by Dr. A. L. Pavey  
 (Rank) Capt Medical Officer.

Examined for re-engagement  
 day of \_\_\_\_\_ 1915

\*Considered \_\_\_\_\_

(Signature) \_\_\_\_\_ Medical Officer.  
 \*If unfit, state disability.

(a) Marks indicating congenital peculiarities or previous disease nil  
2 small moles 1 shoulder.

(b) Slight defects but not sufficient to cause rejection nil

Re-vaccinated on 19 day of March 1915  
 Arm L Number 1

Result \_\_\_\_\_

(Signature) D. McLean Capt. Medical Officer.  
 Anti-typhoid inoculations 1/2/15 - 10/2/15. OK  
D. Muckleston Capt

Enlisted on: 27 day of January 1915 at Montreal

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment, <b>AMMUNITION COLUMN</b> 6th BRIGADE F.A.C.E.F.		<u>85389</u>	<u>Good</u>	<u>27 Jan 15</u>
Transferred to.....				

STANDING MEDICAL BOARD  
 M.D. NO. 4  
 STATIONER  
 JUL 8 1919

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

DATE.	REASON.	RESULT.
	<u>Fits for discharge</u>	<u>Asksuley Capt</u>

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.



# 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. 85389 Rank DVR. Surname TAYLOR  
 (Given name in full) WILLIAM  
 Unit or Corps C. A. R. D. Birthplace STALYBRIDGE. ENGL.

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

**I. GENERAL DESCRIPTION:**

Physique Good Weight 135 lbs. Height 5 3/4 ft. Colour of Eyes Blue  
 Nutrition Good  
 Pulse normal  
 Condition of arteries normal  
 Vision Rt. 6/6 Left 6/6  
 Hearing (conversational voice) Rt. 20 ft. Left 20 ft.

Identification marks, scars, or deformities.  
 (Give cause and date of origin).  
none

Opinion as to general health and physical condition Fit

**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 yes 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 yes

**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.**

G.S.M. - R. Foot. 28/9/18  
no disability

V.A.S. - 15/2/19 -  
clearance certificate attached  
no disability

# EXAMINATIONS

## THIS SECTION FOR USE OVERSEAS—

Examined at Perpon (Overseas)

Date 16-5-19

Signed J. Green M.O.  
Capt. Amc

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 William Taylor

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

## THIS SECTION FOR USE IN CANADA—

Examined at JUL 8 1919 (Canada)

Date JUL 8 1919

Signed A. Maleshe Cap 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 William Taylor

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

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

Fit for discharge

R.O. 1564

AMM

# DENTAL HISTORY SHEET

10

CANADIAN ARMY DENTAL CORPS DISTRICT

NAME OF SOLDIER..... TAYLOR Wm.

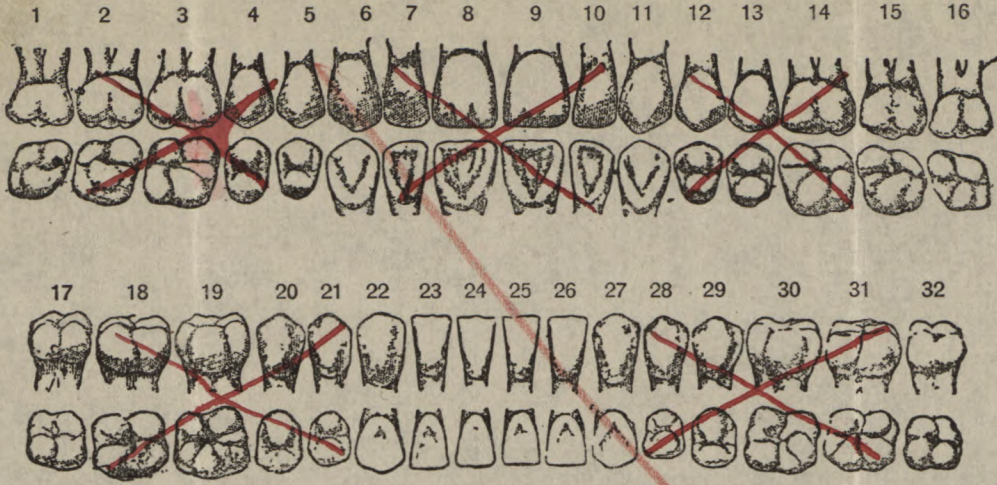
REGIMENT..... 1st. D.A.C.

RANK..... DVT.

No..... 85389

WORK AS DONE BY CIV. DENTIST (RECOMMENDED)

CONDITION OF MOUTH (PRESENT CAVITIES NOS. MISSING ETC.)



## INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report, record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge from the Service.

Date	Analgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhea	Synthetic Porcelain	Extracting	DENTURES			Gold Clasp	Gold Filling	CROWNS		Bridge Work	Prophylaxis	OPERATOR	Military District	REMARKS	
											U	L	P			Gold	Porcelain						
1970 July 23																						Required	
																							Cavities Extractions
																							Pl upper 10 teeth Pl lower 9 " 4 Gold clasps
																							Completed 8-20 J. F. Morrison Captain District Dental Officer

*D. Orice*  
*D. Orice*  
*Completed 8-20*  
*J. F. Morrison*  
*Captain*  
*District Dental Officer*

DENTAL HISTORY

DATE

NO.

19

19

19

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Black Letters) TAYLOR. W.  
 REGIMENT C.A.R.D. RANK Gur No. 85389  
 Date of Examination in England 30/5/49 Date of Examination in France \_\_\_\_\_

DIRECTIONS TO DENTAL OFFICERS

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



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 8.
2. EXTRACTIONS \_\_\_\_\_
3. CROWNS \_\_\_\_\_
4. DENTURES
  - (a) Full Upper
  - (b) Part Upper 2.7.8.12.13.
  - (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

*No* R. Simpson Capt

Signature of Dental Officer

*J. Ross*

209

W. B. ...  
P. S. ...

...



ReinforcementsMILITIA AND DEFENCE  
ASSIGNED PAY  
OVERSEAS CONTINGENTS

To Whom ~~Mr.~~ Jos. Taylor.  
Address 26. Middle Street  
Biddford, Maine  
U. S. A.

By Whom Assigned Taylor. W.  
Regtl. No. 85389  
Rank Dr  
Corps Amn Col. 6<sup>th</sup> Bde. C. I. A.

Rate \$15.00 From Mar 1<sup>st</sup> /15.

## PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March		A6993	15	
April		67415	15	
May		B8350	15	
June		A9719	15	
July		J 5015	15	
Aug.		J 5846	15	
Sept.		J 612846	15	
Oct.		J 9221	15	
Nov.		J 15304	15	
Dec.		J 14390	15	
Jan.	1916	E 15837	15	
Feb.		E 18257	15	
March		E 18720	15	



10  
11  
12

13  
14  
15

16  
17  
18

19

20

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

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

Sheet No. 2.

L. L. Job 89002.-Req. 6213.

*Jos. Taylor*

PAYMENTS.

Name of Soldier

*Taylor J.*

Month.	Year.	Cheque No.	Amt.	15 <sup>00</sup>	Remarks.
April	1916	H 68	15 -		
May		A 1280	15		
June		F 4156	15		
July		S 11434	15		
Aug.		N 15689	15		
Sept.		B 18817	15		
Oct.		B 23393	15		
Nov.		L 28262	15		
Dec.		X 31419	15		
Jan.	1917	X 40222	15		
Feb.		C 48457	15		
March		M 52726	15	15 R	
April		G 5221	15		
May		J 1875	15		
June		A 1918	15	B.	
July		S 26134	15	6	
Aug.		132887	15		
Sept.		S 40283	15		
Oct.		Q 45202	15		
Nov.		G 47182	15		
Dec.		M 64018	15		510 MK
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

*MR*

*WPK*

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.				

NAME TAYLOR, William.

Regimental No. 85389 Name and address of next-of-kin  
 Unit 6th Bde. C.F.A. Mrs. Joseph Taylor,  
 Date of enlistment 27th Jan, 1918. 26 Middle St.  
 Place of " England. Biddleford, Maine, U.S.A.  
 Married (yes or no) No. Date and place discharged  
 Amount of pay assigned monthly \$ 16 Per month. Reason for discharge  
 To whom payable Next-of-kin Character on discharge

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						
1 1/15	31 3/15	31	1.00	31.00	31	.10	3.10		34.10			32.50		45	32.95	1.15	
1 4/15	30 4/15	30	1.00	30.00	30	.10	3.00		33.00			32.50		60 1.10	34.20	.05	forfeit 1 day's pay.
1 5/15	31 5/15	31	1.00	31.00	31	.10	3.10		34.10					50	50	33.55	
1 6/15	30 6/15	30	1.00	30.00	30	.10	3.00		33.00			12.00			12.00	54.55	to D.A.C.
1 8/15	31 8/15	31	1.00	31.00	31	.10	3.10		34.10			8.00			8.00	80.65	
								2.26				85.00				87.91	Exchg. 2.26 added.
1 <sup>st</sup> Aug	31 <sup>st</sup> Aug	31	1.00	31.00	31	.10	3.10		114.01			11.32			11.32	105.69	
1 Sept	30 Sept	30	1.00	30.00	30	.10	3.00		33.00			8.04			8.04	130.65	
1 Oct	31 Oct	31	1.00	31.00	31	.10	3.10		34.10			2.61			2.61	162.14	
1 Nov	30 Nov	30	1.00	30.00	30	.10	3.00		33.00			16.95		10.00	26.95	168.19	10 d. 4P No 1 Part II #38
1 Dec	31 Dec	31	1.00	31.00	31	.10	3.10		34.10			20.06			20.06	182.23	
1 <sup>916</sup> Jan	31 Jan	31	1.00	31.00	31	.10	3.10		34.10			5.22	160.00	5.50	186.72	29.61	50 4P No 1 Part II #38 D. 16 Aug 1 <sup>st</sup> Mch.
1 Feb	29 Feb	29	1.00	29.00	29	.10	2.90		31.90			5.23	16.00		21.23	110.28	
1 Mch	31 Mch	31	1.00	31.00	31	.10	3.10		34.10			56.51	16.00		72.51	187.79	
				394.00			39.70	2.26	438.96			210.94	208.00		181.54	37.09	









\* Strike out whichever inapplicable.

ASSIGNED PAY, ENGLAND or CANADA.	ENGLAND or CANADA.	SEPARATION ALLOWANCE, ENGLAND or CANADA.	ENGLAND or CANADA.
EFFECTIVE DATE: 1/3/15		EFFECTIVE DATE: -	
AMOUNT: 15 <sup>00</sup>		AMOUNT: -	

NAME: TAYLOR William J  
NUMBER: 85389

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 Joseph Taylor  
26 Middle St  
Biddleford Maine USA  
*Stopped 1.6.19*

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Junior

UNIT AND TRANSFERS

ORIGINAL UNIT: 6 Bde 62a  
DATE ACCOUNT FIRST OPENED: -

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SFD	UNIT TRANSFERRED TO
			12ab

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
27-2-19							
8-4-19		H. Stoppan 41 dy. 660	24.60				
5.5.19	33	Q 4005 5/10	1.22				
5.5.19	4917	Ripon £ 8	38.93				
12.5.19		Ldn. £ 2	9.73				
16.5.19	6845	Ripon £ 3	44.60				
			<u>89.08</u>				

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE: *Discharged on 31/9/19 9231 Ripon 20/19 Ripon*

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
3/3/18	Ble Fwd			<i>L.P. Bal. Debit 7.89</i> <i>Led. Bal. Cr. 7.89</i>					131.41		
				6a Pay				15			
april	6a Pay	33		AR 32 12ab 12/4/18	4.46						
		33		AR 81 " 22/4/18	3.57				141.38		
May	6a Pay	34.10			8.03			15			
	Cor Nth 4823 Error in Oct 1917 acc. shown as 163.64 shown as 163.74		10	AR 139 12ab 5/5	4.46						
		34.10	10	AR 183 " 21/5	3.57				152.55		
June	6a Pay	33			8.03			15			
				AR 207 " 7/6	4.46						
				AR 279 " 21/6	8.03						
				AR " " "	3.57						
				" 335 " 28/6	4.46				150.03		
		33			20.52			15			
July	"	34.10		6a Pay				15			
				68. 15102 8/7/18	34.07						
				AR 244 1st Details 1/7/18	8.92						
				AR 20.10 65 12ab. 7/7/18	97.33				28.81		
		34.10			140.32			15			
Aug	"	34.10		6a Pay				15	47.91		
				AR 420 " 29/8	8.03				39.88		
		34.10			8.03			15			
Sept	"	33		6a Pay				15	57.88		
				AR 463 4/9	3.57						
				522 20/9	3.57				50.74		
		33			7.14			15			

COMPILED BY *R. N. Shackleton*  
CHECKED BY *R*

NUMBER 85389 RANK

Imm

NAME TAYLOR W.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
1918									50 74		
Oct	G P	34 10		at				15	X		
				4609 10% G+Q 32ct	3 73						
				1965. 27/10 C9BP	4 66				61 45		
Nov	Spay.	34 10		at	8 39			15			
		33						15			
		34 10		absent 8 Dec 5/11.	3 73						
1919				at				15			
Jan		34 10		1078, 2 camp 1/12	16 79						
		1		at				15	97 13		
		101 20			20 47			45			
Feb	March	64 90		at 1087. 1 Dec 26/12	3 89						
				1127 ✓ 9/11	3 77						
				1288 ✓ 21/11	3 73						
				1287 ✓ 29/11	9 33						
				1331. ✓ 8/12	13 06						
				1389. ✓ 7/2.	3 73						
				Imm				30	94 52		
		64 90			37 51			30			
				1100p stop VD 19.2.19 to 26.2.19 = 9 days							
				20.21. 1 <sup>st</sup> Dec. 21/19 Sch 3/69337		4 80					
				112 3 <sup>rd</sup> Camp 18/4	3 65						
				2563 CPD 26/4	27 38						
				CP 67989 9/5	14 60						
		67 10		at		50 43		30	<del>87 08</del>		
									81 19		
				4917 Ripon 5/5	38 93						
				CP. 68482 12/5	9 73						
				1100p stop 27/2/19 to 8/4/19 = 41 days		24 60					
				Do 46 at port 22/4/19 Sch 3/29626							
				6855 Ripon 4/5	14 60				6 67		
		67 10			108 89	29 40		30			
				at 3735 2.6.19	24 33						
				Q405.133. 5.5.19.	1 22				32 22		
					25 55						

2  
31  
8  
41  
16162  
5043

508 18/6/19 8 1/2 47 000

Envelope 34, 5240

Rank and Name **TAYLOR, William.**  
 Regimental No. **85389.** Name and Address of Next-of-kin  
 Unit **6th Bgde, C.F.A.** **Mrs. Joseph Taylor.**  
 Date of enlistment **Jan 27th 1915.** **Biddleford,**  
 Place of birth **England.** **Maine, U.S.A.**  
 Married (Yes or No) **No.** Date and place of discharge  
 If in Permanent Force Reason for discharge  
 Character on discharge

Promotions or appointments

WIE. R. 35799  
 File R.L.  
 Categor. **Canon.**

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
Date	From whom received				
			<i>Ch. Bde</i>	<i>23/2/15</i>	
<i>20-4-15</i>	<i>OC Res Bde</i>	<i>Absence - 1 days pay. RH</i>	<i>Shorncliffe</i>	<i>20-4-15</i>	<i>Part II O. #32 Para 95</i>
<i>17-5-15</i>	<i>OC Res Bde</i>	<i>Drafted to France.</i>	<i>"</i>	<i>13-5-15</i>	<i>Part II O#50. Para 100.</i>
<i>22-5-15</i>	<i>OC Res Bde</i>	<i>Taken on Strength D.A.C.</i>	<i>France</i>	<i>13-5-15</i>	<i>Part II O#13</i>
<i>13-11-15</i>	<i>OC D.A.C.</i>	<i>Leading team, 10 days SP. No 1</i>	<i>"</i>	<i>25-10-15</i>	<i>" " " 38</i>
<i>15-1-16</i>	<i>"</i>	<i>5 days SP. No 1 for disobedience</i>	<i>"</i>	<i>4-1-16</i>	<i>" " " 3</i>
<i>14-2-16</i>	<i>"</i>	<i>Attached to ban Engineers</i>	<i>"</i>	<i>22-1-16</i>	<i>" " " 8</i>
<i>14-5-16</i>	<i>"</i>	<i>Return from " "</i>	<i>"</i>	<i>17-2-16</i>	<i>" " " 20</i>
<i>"</i>	<i>"</i>	<i>Granted 9 days leave from</i>	<i>"</i>	<i>31-3-16</i>	<i>" " " 20</i>
<i>3-9-17</i>	<i>"</i>	<i>To 18 Cus. Cl. Statu.</i>	<i>"</i>	<i>26-8-17</i>	<i>Cl. a 28. V.D. 9.</i>
<i>5-9-17</i>	<i>10 ac.</i>	<i>To 51 Gun Hosp.</i>	<i>Etaples</i>	<i>28-8-17</i>	<i>Cl. a 31 "</i>
<i>3-10-17</i>	<i>do do</i>	<i>Disch. do do</i>	<i>do do</i>	<i>23-9-17</i>	<i>Cl. a 50 "</i>
<i>3-11-17</i>	<i>do do</i>	<i>Adm #1 Canadian Gen. Hosp.</i>	<i>Etaples</i>	<i>25-10-17</i>	<i>Cl. a 82 " Ironclad "</i>

85389 Taylor W.

William

TAYLOR

Rank and Name

Report

Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.

Place

Date

REMARKS  
Taken from Official Documents

Date

From whom received

13-11-17	1st D.A.C. Division #7 Canadian Gen. Hospital	Elapico	2-11-17	C.A.A. 90 "Bronchitis"	
19-12-17	Adm #6 Convalescent Depot		9-12-17	C.A.A. 121 "V.D.S."	
3-10-18	" Wounded	Inv. Field	28-9-18	C.A.A. 363-2	
30-3-19	Do Posted to C.A. Pool	Do	30-3-19	23 Pool	39.8.4.19
2.5.19	C.A.R.D. To S from 1st D.A.C. + added to dept	" Ripon	2.5.19	M.I.D.O. 173	Pool 20/53 2-5-19
27-5-19	M. Wing cel T.O.S. pend. S.T.B.	" Willey	27-5-19	- H7, CACH	156/5.6.19

To Canada 87-F-53 18-6-19

S.O.S To CANADA  
OICR F.B.D.O, 1 d 25 7 19

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

*Mar 1-1915*

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

**T** 1172

RATE OF ASSIGNMENT

15			
----	--	--	--

*102523*

## PARTICULARS OF SEPARATION ALLOWANCE

No. *85389*  
 Rank *Ser.* Promoted Reverted Discharge  
 Soldier's Name *W. Taylor*  
 Battalion *Am. Col. 6th Bde C.F.A*  
 Beneficiary  
 Relationship  
 Address

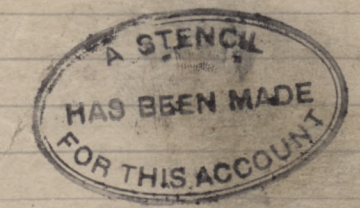
## PARTICULARS OF ASSIGNMENT

Name *Jos. Taylor*  
 Address *26 Middle St.*  
 Change of Address *Briddford*  
*Maine*  
*U.S.A.*

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Dec 31 1918</i>	<i>—</i>		<i>510</i>	<i>510</i>	
<i>Jan</i>	<i>K 109796</i>		<i>15</i>	<i>15</i>	<i>W ✓</i>
<i>Feb</i>	<i>T 68524</i>		<i>15</i>	<i>15</i>	<i>B ✓</i>
<i>Mar</i>	<i>V 93974</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Apr</i>	<i>V 9193</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>May</i>	<i>T 15217</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>June</i>	<i>Z 16216</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>July</i>	<i>Z 27636</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Aug</i>	<i>Z 40406</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Sept</i>	<i>Z 54556</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Oct</i>	<i>Z 69552</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Nov</i>	<i>Z 86645</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Dec</i>	<i>Z 100420</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Jan</i>	<i>Z 114673</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Feb</i>	<i>Z 127640</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Mar</i>	<i>Z 139396</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Apr</i>	<i>Z 9970</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>May</i>	<i>Z 15497</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>June</i>	<i>Z 20526</i>		<i>15</i>	<i>15</i>	<i>✓</i>
			<i>780</i>	<i>780</i>	

*017849 W 343* REMARKS  
*alt. M.R.O.P. 13698 showing Reg. no. issued 5-11-18. M. T. Graham*  
*30/6/19*  
*Ret'd by Saturday*  
*Date 29/6/19. M.F.W. 187*  
*July*  
*Memo to P 108-378*

M. F. W. 128.  
Form 6-7-1772-31-1141  
L. L. 22340-M. & D. 1903.





AUDITOR *W.C.* PAYMASTER *O*

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

*Ref.*

M. OR S. REGT. NO. 85389 RANK *Gur.* NAME (IN FULL) TAYLOR, W. (BLOCK LETTERS SURNAME FIRST)  
NEXT OF KIN RELATIONSHIP PARTICULARS EFFECTIVE DATE AUTHORITY ORIGINAL UNIT C.E.F. PLACE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY  
ADDRESS G.O.S. 18-6-19 DO 202 P.B. MR 93 Supp 2 I.D.A.C. TRANSFERRED TO DATE AUTHORITY  
DATE OF ATTESTATION JAN 27 - 1915  
IS SEPARATION ALLOWANCE PAID? nil DATE EFFECTIVE ASSIGNED PAY \$ 13.00 DATE EFFECTIVE 1/9/19  
TO WHOM PAID Mrs. Taylor RELATIONSHIP Ws. ANY CHANGE IN ASSIGNEE OR ADDRESS  
ADDRESS 26 Middle St Briddeford Maine U.S.A. W.S.A. 26 Middle St Briddeford Maine U.S.A.  
STOP PAYMENT FORM RENDERED, DATE EFFECTIVE  
DISCHARGED PLACE DATE REASON AUTHORITY IF ENTITLED TO POST DISCHARGE PAY  
*Montreal* 9-7-19 Demot DO 202 P.B. MR 93 Supp 2

T1015  
JUL 31 1919  
PAY DIVISION

MONTH	PAY AND F.A.		OTHER CREDITS			TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGIMENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT	\$	C.	S	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3	\$	C.	\$	C.	\$	C.	DEBIT	
				35.00		35.00										32.22		32.22		<i>Saturday</i>
1/6/19				70.00		70.00				4.82	5.00	8.31	15.00					10.79		<i>Bal dr 6. L.P.C. Cu. Co 35.00 P.A. for June 15.00</i>
2/7/19	32	1 <sup>10</sup>	35.20			35.20												7.70		<i>7<sup>20</sup> 7 day @ 1<sup>10</sup> undrpaid on 2 P.C. 3/7/19 to 9/1/19</i>
				7.70		7.70												7.70		
						147.90												147.90		<i>Balance</i>
			Other Credits	W. S. C. S. A. Total	War Service Gratuity									Other Charges	W. S. G. S. A. Total					<i>Soldier Dependat</i>
				4.20		4.20								70					70	350
15/19														70				70		<i>1277266</i>
9-9-19														70				70		<i>1527160</i>
9-10-19														40				40		<i>1635952</i>
9-11-19														40				40		<i>1649812</i>
9-12-19														40				40		<i>1745972</i>
														420						<i>7.00</i>

