

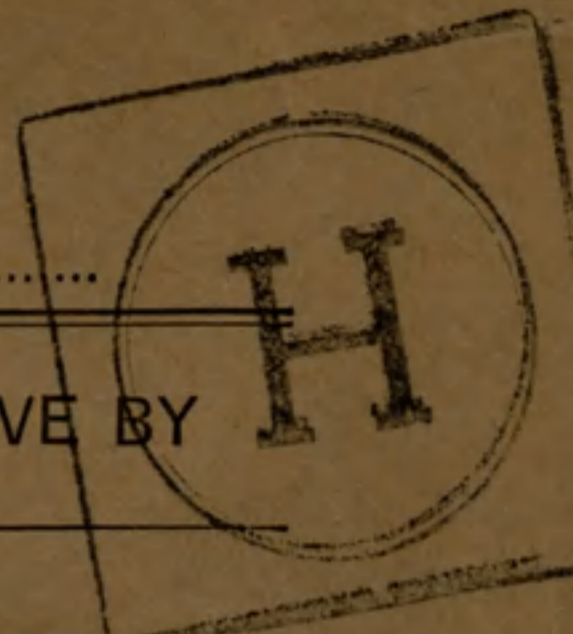
C.E.F. REGIMENTAL DOCUMENTS

NAME **ABBOTT JAMES LEE CORY**

REGT. No. **748034**

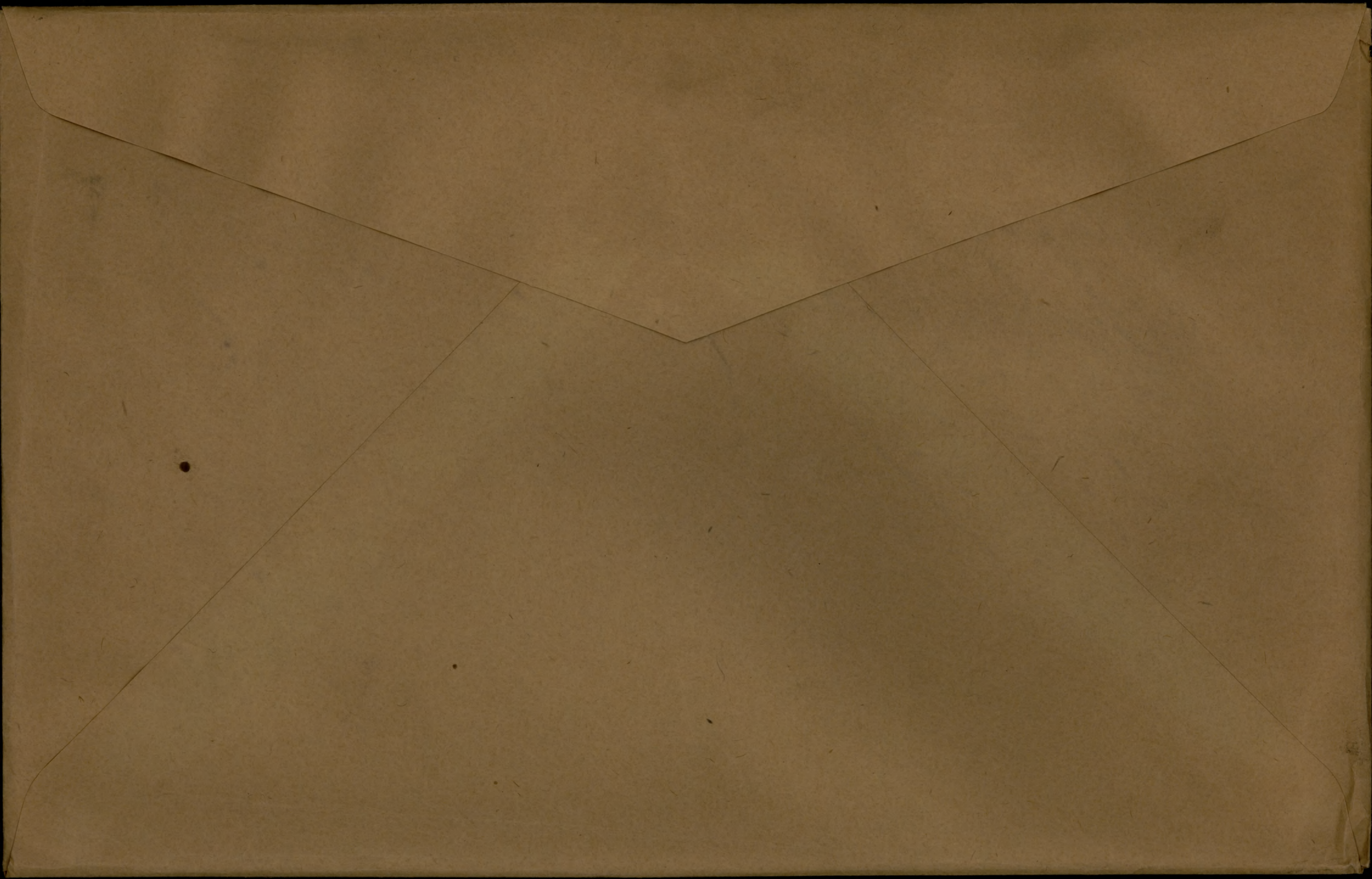
UNIT **14 BN.**

H. Q. FILE No. **191**



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
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					CATEGORY
TRAINING HISTORY SHEET (M.F.W. 113)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.B.W. 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. 174)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					CATEGORY
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)					
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)					
CARDS					
PAY-SHEETS					

M.F.W. 2589
20M-4-46 (9113)
H.Q. 1772-39-1377



Bugler

ATTESTATION PAPER.

No. *748034*

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your name? *Abbott James Lee Cory*
2. In what Town, Township or Parish, and in what Country were you born? *Gunnis Lake, Cornwall. Eng.*
3. What is the name of your next-of-kin? *John Abbott, Father*
4. What is the address of your next-of-kin? *Gunnis Lake, Cornwall. Eng*
5. What is the date of your birth? *Nov 30th 1898*
6. What is your Trade or Calling? *Clerk*
7. Are you married? *no*
8. Are you willing to be vaccinated or re-vaccinated? *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. *no*
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*

J. L. B. Abbott (Signature of Man.)
J. E. Smith (Signature of Witness.)
Lieut

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *James Abbott*, 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.

J. L. B. Abbott (Signature of Recruit)
 Date *Dec 2* 191*5* *J. E. Smith* (Signature of Witness)
Lieut.

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *James Abbott*, 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.

J. L. B. Abbott (Signature of Recruit)
 Date *Dec 2* 191*5* *J. E. Smith* (Signature of Witness)
Lieut

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 *Sherbrooke* this *2* day of *Dec* 191*5*

J. K. Edwards (Signature of Justice)
City Alderman

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

J. E. Smith (Approving Officer)
Lieut

Address 90 Drummond Road
Sherbrooke

C.P.

Description of James Lee Cory Abbott on Enlistment.

Apparent Age.....17.....years.....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. 1/2 ins.

Chest measurement { Girth when fully expanded.....32 ins.
 Range of expansion.....1 ins.

Complexion.....Dark

Eyes.....Dark Brown

Hair.....Black

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

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.....Dec 2.....1915

Place.....Sherbrooke Que.....P. J. P. P.
 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.

.....James Lee Cory Abbott.....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.

DEC 7 1915

Date.....1915

.....(Signature of Officer)

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE War Service Badge Class "A" No.

THIS IS TO CERTIFY that No. 748034 (Rank) Private

Name (in full) James Lee Gary Abbott enlisted in
the 117th Battalion

CANADIAN EXPEDITIONARY FORCE at Sherbrooke PQ on the 2nd
day of December 1915

HE served in England and France

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 21

Height 5' 1/2"

Complexion Dark

Eyes Dark Brown

Hair Black

Marks or Scars

Small scar middle of
fore head.

Two vaccination marks
left arm

James Lee Gary Abbott
Signature of Soldier

Date of Discharge



Issuing Officer

[Signature]
Lieutenant
Discharge Section, Dispersal Station "F"
Rank

Date April 20 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.

Casualty Form vice.

250M.—1-16.
H. Q. 1772-39-920.

Unit, Regiment or Corps 117th OVERSEAS BATTALION

Regimental No. 748034 Rank Private Name James L. C. Abbott
C. E. F.

Enlisted (a) 2-12-15 Terms of Service (a) Duration of War. Service reckons from (a) 2-12-15

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) None

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				
		Embarkation	Canada	Aug. 14/16	
		Arrival	England	Aug. 24/16 ✓	
6.1.17	117th. Bn.	Transferred to 23rd. Reserve Battalion, C.E.F.	Shoreham	6.1.17	D.P. II 0.6A ✓
					<i>Whitehead</i> Captain Adjutant 117th. Bn. C.E.F.
6.1.17	23rd. R. Bn.	Taken on strength from 117th. Battalion, C.E.F.	Shoreham	6.1.17	D.P. II 0.3 ✓
6.2.17	14th. Res. Bn.	Transferred to 14th. Res. Bn.	Shoreham	26.2.17	D.P. II 0.54 ✓
					<i>Hedley</i> Lieut. for O.C. 23rd. Res. Bn.

CERTIFIED CORRECT.
 13 MAR. 1917
 C.A.W. RECORDS, LONDON.

(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.

248034 Abbott, J. C.

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				
	C. B. D.	ARRIVED C. B. D.	FRANCE	27 th /17	N. R. D. 27 th /17 PART II ORDERS 10 th W. D. 3. 3. 17.
	C. B. D.	LEFT C. B. D. FOR	14 th Am.	28 th /17	I. R. D. 28 th /17
	O. C. SN	ARRIVED 14 th BN.	FIELD	10 th /17	B. 213 D. 17 th /17 W. Y.
31. 5. 17.	Unit.	To make good cost of article (12-6) for lost by neglect 1 box respirator value 12-6. 22-5-17.	Field	29 th /17	B206q. Pt 2 ho 58. 1917.
1. 11. 17	do	Forfeit 1 dump pump 26 th /17 also made good value of article lost, for "lost by neglect" 200ms pump, 1 Iron Kation - value 1/8 - 21 st /17	Field	26 th /17	B206q. 10d - 1917.
14. 1. 18	do	GRANTED 14 DAYS LEAVE	Field	3. 1. 18	B 213 4 - 1918
2. 2. 18	3rd Lt. HQ.	att'd. to 3rd Lt. HQ. as runner	14 th Am.	29. 1. 18	B 213
16. 3. 18	do	To Unit	14 th Am.	14. 3. 18	do
16. 3. 18	Unit.	Ret'd from command	2nd Lt.	14. 3. 18	B 213
23. 3. 18	do.	GRANTED 30 th special DAYS LEAVE (ausky A.C.I. 2327. - 1st Army)	Field	15. 3. 18	B 213 At 1700 24-1-18
27. 4. 18	do	Ret'd from leave	Field	18. 6. 17. 8	Cen. Corps. A 51-1-809 11 th /18
27. 4. 18	do	In 3rd Lt. HQ. as runner	do	21. 4. 18	B 213
✓	3 C 2 B	att'd. runner	3 C 2 B	21. 4. 18	B 213

ORIGINAL ORIGINAL

MEDICAL HISTORY SHEET.

748034

Surname Abbott

Christian Name James Lee Cory

Examined { on 2 day of Dec 1915
at Sherbrooke

Approved by G. G. G. G.

Birthplace { City or Town Gunnis Lake,
County Cornwall, Que

Rank apt M.O.

Apparent age 17

Trade or occupation Clerk

Height 5 Feet 1/2 Inches.

Weight 120 Lbs.

Chest measurement { Minimum 31 inches.

Maximum expansion 2 inches.

Physical development

Small-Pox Marks no

Vaccination Marks { Arm. Right. Left.
Number once left

When Vaccinated last Eleven yrs ago

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	VACCINATIONS.
<u>7/5/16</u>		<u>err.</u>
		M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>3/18/16</u>	<u>+</u>	<u>1/2 B err</u>
<u>4/15/16</u>	<u>+</u>	<u>1 B err</u>
<u>6/23/16</u>	<u>1 B</u>	<u>err</u>
		M.O.
		M.O.
		M.O.

Enlisted on 2 day of December 1915 at Sherbrooke

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>117TH EASTERN TOWNSHIPS,</u> <u>O/S BATTALION C. E. F.</u>	<u>748034</u>		<u>2/12/15</u>
Transferred to.....	<u>4th Bn.</u>			<u>26 FEB 1917</u>

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.

Surname Abbott

Christian Name James Lee Cary

STATION.	Date of Arrival at the Station.	DATES OF						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.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
<u>St Juan PD</u>		<u>12</u>	<u>5</u>	<u>16</u>	<u>15</u>	<u>5</u>	<u>16</u>	<u>Furunculosis</u>	<u>4</u>	<u>Recovered</u>	<u>McLachlan</u>

ORIGINAL

DUPLICATE

To be made out in duplicate.

H.Q. 54-21-23-53

DUPLICATE

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..... **117th EASTERN TOWNSHIPS
OVERSEAS BATT., C. E. F.**

(2) Regimental Number..... *74803A*

(3) Full Name of Soldier..... *J. L. C. Abbott,*

(4) Place of Birth..... *Stennistake, Cornwall
England*

(5) Are you married, or not?..... *Single*

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

(b) Present Postal Address..... *-v*

(7) Are you a widower?..... *-v*

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

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

Also their names and ages.....

.....

.....

.....

.....

8

(9) Is your Father alive? *Yes John Abbott*
If so, state name and address *Kingrodd House*

(10) Is your Mother alive? *Yes*
If so, state name and address *Gunnistake*
Cornwall
England

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

(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.
.....
.....
.....

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.
.....

(15) Are you insured? *.....*
If so, in what Company?.....
Have you made arrangements for payment of your Insurance premium.....
If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

A. Whitehead CAPT. & ADJ.
FOR O. C. 117th E. T. O/S BATT. C. E. F.
.....
Officer Commanding.

Date *AUG 2 1916*

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

1. Christian names *James Lee Cory* 2. Surname *ABBOTT*
3. Rank *Pte* 4. Original Unit *117th Bn* 5. Reg. No. *748024*
6. Address, in full, to which future payments of gratuity are to be forwarded *Bank of Commerce, Sherbrooke, Que.*

7. Date of enlistment in the C.E.F. *Dec 2-15*

8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *No*

9. Relationship of such dependent *not applicable*

10. Address, in full, of such dependent *not applicable*

11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *not applicable*

~~12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—~~

~~13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States?~~

~~14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service.~~

~~15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served.~~

16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department *No*

17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? *No*

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units.

one enlistment

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid.

no

~~20. Have you been issued with a War Service Badge? If so what class?~~

~~21. Have you, during the present war, served in the Imperial Forces?~~

22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled.

no

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?

no

(b) If so, was such reversion in consequence of misconduct or inefficiency?

not applicable

24. Are you now serving in the C.E.F.?

Yes

If not, give:—(a) Date of discharge

not applicable

(b) Reason for discharge

not applicable

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit.

14th Battalion

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit in which you served at the front, and dates of such service with that unit.

14th Battalion

February 1917 to March 1919

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?

no

(b) If so, are you in receipt of full pay and allowances from that Department?

no

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: *J L Abbott*

Place of Residence: *91 Belvedere St. Sherbrooke P.Q.*

Declared before me at: *Bramshott*

This *16* day of *March* 19 *19*

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths under P.C. 2767, dated 11th Nov., 1918.

J M Keenan
Major

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....
.....
.....

Certified Correct.

District Paymaster

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. 748034 Rank Pt. Surname Abbott James Lee Boyd
(Given name in full)

Unit or Corps 14th Battalion Birthplace Gunmatsale Cornwall Eng

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

1. GENERAL DESCRIPTION: estimated

Physique Good Weight 120 lbs. Height 5 ft. 1 1/2 in. Colour of Eyes Blue

Nutrition Good

Pulse 74 Regular

Condition of arteries Soft

Vision Rt. 6/12+ Left 6/12+

Hearing (conversational voice) Rt. 30 ft.
 Left 20 ft.

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

Small scar middle of forehead at in childhood
no recent marks left arm

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.

Lumbago - 12-5-16 - Recurring
Weakness in childhood history

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at.....*Branstott*.....(Overseas)

Date*1-4-19*.....

Signed*Shawcross*.....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*James L. B. Abbott*.....

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

THIS SECTION FOR USE IN CANADA—

Examined at.....(Canada)

Date

SignedM.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]

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12.
50m.-6-16.
H. Q. 1772-39-819.

⁴
1677
P. do do

To Whom Emma Start
Address 19 Belvedere St.
Shubrooke, Que

By Whom Assigned Abbott, Jas. R. C.
Regtl. No. #448034
Rank Pte
Corps 117th Bttn - H. Q.

Rate \$15⁰⁰

SEP 1 1916

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>Consolidated Accounts</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

101

1 0-101A



101 0-101A



ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.

L. L. Job 310.—Req. 6374.

Emma Start

Name of Soldier

Abbott, Jos L. C.

PAYMENTS.

~~748034~~ *748034 - Pte - 117 of Btn - H.A.*

16⁴/₇₇
P. to Sine

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>15⁰⁰</i>
April	1916			
May				
June				
July				
Aug.				
Sept.		<i>A 15276</i>	<i>15</i>	
Oct.		<i>A 19690</i>	<i>15</i>	
Nov.		<i>A 24472</i>	<i>15</i>	
Dec.		<i>A 34480</i>	<i>15</i>	
Jan.	1917	<i>A 3831</i>	<i>15</i>	
Feb.		<i>A 43285</i>	<i>15</i>	<i>- 15 R</i>
March		<i>A 47203</i>	<i>15</i>	<i>15-R-49203 cancelled J.F. 16/2/17</i>
April		<i>B 50</i>	<i>15</i>	<i>15⁰⁰ ✓</i>
May		<i>B 6021</i>	<i>15</i>	
June		<i>B 15957</i>	<i>15</i>	<i>15⁰⁰ S</i>
July		<i>B 21088</i>	<i>15</i>	
Aug.		<i>B 28202</i>	<i>15</i>	<i>15⁰⁰ ✓</i>
Sept.		<i>C 26051</i>	<i>15</i>	<i>C 26051 Cancelled G.Y.</i>
Oct.		<i>6 33319</i>	<i>15</i>	<i>195⁰⁰ ✓</i>
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

RWA

W

M.C.

SEP 1 1916

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.				

G.R. Rank Name ABBOTT, James Lee Cory Reg'l No. 748034

Unit 117th Bn. If in perm. Corps, }
 What Unit? }
 Married or Single Single.

Place and Date of Enlistment Sherbrooke, 2nd Decr., 1915. Place of Birth Gunnislake, Cornwall England.

Name and Address, Next-of-Kin John Abbott, Gunnislake, Cornwall, England. Relationship Father

Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No. 22963
 File R.L.
 Category
 O.R. CANADA

H. W. & V., Ltd.—7165-16.

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.				
		Arrived in England.	Emp of Britain	July 14. 1916 24 AUG. 1916	
6.1.17-0.	C, 117th-S-O-S	to 23rd Res Bn.	Shoreham,	6.1.17.	Pt I.D.C. 6a
6.1.17	00233.	T.O.S. FROM	117th. Bn Shoreham	6.1.17	Pt II DO 3
26.2.17	" "	S.O.S. to 14th Bn overseas	"	26.2.17	" " 54. J.P.
3-3-17	14th Bn	Taken on Strength	Field	27-2-17	Pt II DO 20.
16.3.19	"	Proceeded to England		14.3.19	" 20
		SL 45-3-7 of 10.4.19			
10.4.19	D Wing	S.O.S. to Canada		10.4.19	D.O. 21
22.3.19	" ecc	T.O.S. from 14 Bn	Pte Bishott	15.3.19	" 7 SOS. 20.4.19

A.F.B. INCORPORATED

Casualty Form - Active Service.

Regiment or Corps *14th*
 Rank *Pt* Surname *Abbott* Christian Name *J.C.*
 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>15/3/19</i>	<i>Unit</i>	<i>I.O.S. D Wing 6.6.6. Bramshott.</i>			
		<i>S.O.S. on proceeding to Canada</i>			
		<i>Part II orders 16</i>			

Camp. Proceeded to England.
CARMANIA - Sailing No 45
N.R.
Embarked 10 4 P.M. 20 No. d/...
Disembarked 4 19
14 MAR 1919
No. 9 Catering Staff.
FOR POOL.
MAA.
10/4/19
Sun Hooker
for

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				
28-4-19	O/S	T.O.S.D.D.#4	Montreal.	10-4-19	D.O. Pt. II-118
28-4-19		S.O.S.D.D #4 Demob.	Montreal.	20-4-19	D.O. Pt II-118
					R.O. 1420.

Chas. W. Staley
 Lieutenant,
 Assistant Adjutant,
 District Depot No. 4.

docs.

CHANGE OF ADDRESS

H.P. File 13/9/21³⁵

No. 748034 Rank _____ Surname Abbott, Christian Names J. L. C.,
 Address 1120 Hancock St.,
Port Huron, Mich.,
U.S.A.,



1513.
Section
Auds.

D-19
ESM.

CLASS OF ADDRESS

CHRISTIAN LEAGUE

CHURCH

PARISH

NO.

ADDRESS

POST OFFICE

CITY

STATE

No. 748034.

RANK *Pte.*

NAME

Abbott, J.

L. C.

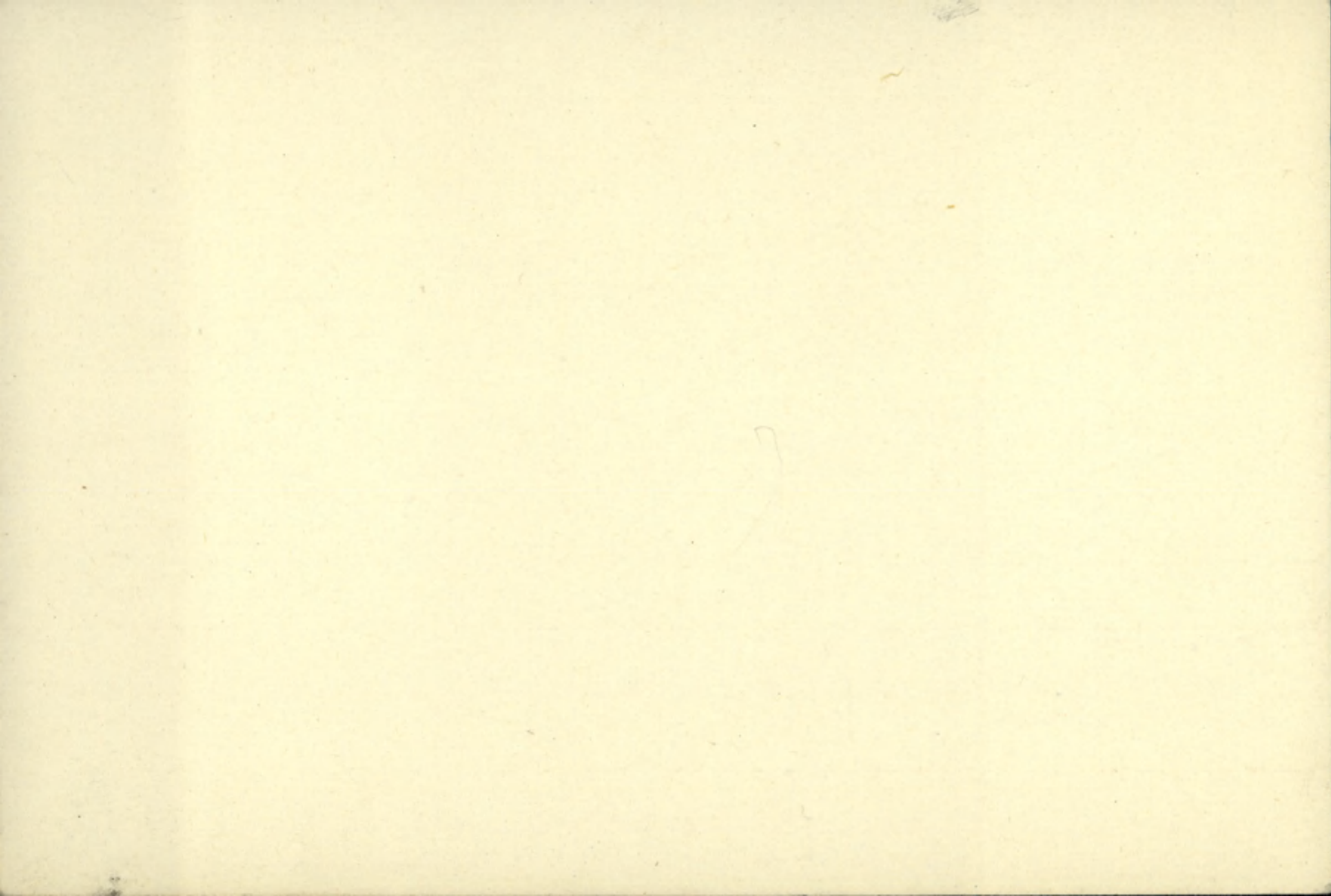
T. O. S. 2-12-15
(D.O. 2 of 3-12-15.)

UNIT *117th Battalion.*

M. D. *4.*

PAID FROM	PAID TO	SIG OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915. Dec. 2.</i>	<i>1915. Dec. 31.</i>	<i>✓</i>		
	<i>1916. Jan.</i>	<i>✓</i>		
	<i>Feb.</i>	<i>✓</i>		
	<i>Mar.</i>	<i>✓</i>		
	<i>Apr.</i>	<i>✓</i>		
	<i>May</i>	<i>✓</i>		
	<i>June</i>	<i>✓</i>		
	<i>July</i>	<i>✓</i>		
	<i>Aug.</i>	<i>✓</i>		

UNIT SAILED
AUG 14 1916



Jim B.

B.

Number. *748034* Rank. *Pte.*

Surname. *ABBOTT*

Christian Name. *JAMES LEE CORY*

Unit. *14th Bn. Can. Inf.* Theatre of War. *France*

Date of Service. *27-2-17*

Remarks

Latest Address. *91 Belsider St.*

Shedbrook P.O.

Roll No. *B*

Page 29

SEP 23 1921

441658 - 2/23

SURNAME.

Abbott,

CHRISTIAN NAMES

James, Lee, Cory.

REGL. No.

748034,

RANK

Pte.

UNIT

117th.

FORMER CORPS

Nil.

471
54
CARD NO. @.B
Las Vegas Dec 20/19
FOLL.
100118928
400
Batt.

NEXT OF KIN.

NAMES IN FULL

Abbott, John,

RELATIONSHIP TO SOLDIER

Father,

ADDRESS

*Gunnis Lake,
Cornwall, Eng.*

CHANGE OF ADDRESS

COUNTRY OF BIRTH

England, Cornwall,

DATE

PLACE OF ATTESTATION

Sherbrooke,

DATE

Dec. 2-1915.

Sailed from Halifax 14/8/16 per S.S. "Empress of Britain"

MARRIED *no.*

SINGLE *yes.*

WIDOWER

TRADE OR CALLING

clerk.

RELIGION

C. of E.

DESCRIPTION.

APPARENT AGE

17.

YEARS

MONTHS

HEIGHT

5

FEET

1/2

INCHES

CHEST MEASUREMENT

32

INCHES

EXPANSION

1

INCHES

COMPLEXION

Dark.

EYES

Dark Brown

HAIR

Black.

DISTINGUISHING MARKS

nil.

MEDICAL EXAMINATION.

PLACE

Sherbrooke

DATE

Dec. 1915.

Home Add.

not stated

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

Dec 1/17
Sept 1/18

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

15			
----	--	--	--

625-21
817

PARTICULARS OF SEPARATION ALLOWANCE

No. *748034*
 Rank *Pte* Promoted Reverted Discharge
 Soldier's Name *Jos. L. C. Abbott*
 Battalion *117th Battrn - H. Q.*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *Emma Stant*
 Address *19 Belvedere St. The Brooke*
 Change of Address
 1 *John Abbott*
 2 *Guinnislake Cornwall*
 3 *England*
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Sept 30-17</i>			<i>195</i>	<i>195</i>	<i>26-9-14</i>
<i>Oct B</i>	<i>50060</i>		<i>15</i>	<i>15</i>	<i>20-12-17 Nett</i>
<i>Nov B</i>	<i>51768</i>		<i>15</i>	<i>15</i>	<i>X</i>
<i>Dec B</i>	<i>57372</i>		<i>15</i>	<i>15</i>	<i>S</i>
<i>Jan 1/18</i>	<i>B 63870</i>		<i>15</i>	<i>15</i>	<i>e s</i>
			<i>240</i>	<i>240</i>	

Duplicate sheets sent to England
B63870 came

ENGLISH

JAN 2 1918

JAN 28 1918

Alc Closed
Ret'd per
 Date *8/19* M.F.W. 1917
 Clerk *M.D.K. Gollin*

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

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date

Cheque No.

Amount S/A

Amount A/P

Total

REMARKS

M. F. W. 128
40036-6-17-1772-39-1141
L. L. 2320-M. & D. 7593.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Duplicate

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

\$15			
------	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. *748034*

Rank *Pte.* Promoted Reverted Discharge

Soldier's Name *Abbott, Jos. L. C.*

Battalion *117th Battrn.*

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name *John Abbott*

Address *Guinnislake, Cornwall, England.*

Change of Address

1

2

3

4

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

<i>Sept 30/17</i>			<i>195 -</i>	<i>195 - -</i>	<i>2 M. 27-11-17. 20-12-17 H.E.H.</i>
<i>Oct.</i>	<i>B.50060</i>		<i>15 -</i>	<i>15 - -</i>	
<i>Nov.</i>	<i>B.51768</i>		<i>15 -</i>	<i>15 - -</i>	
<i>Dec.</i>	<i>B.57372</i>		<i>15 -</i>	<i>15 - -</i>	

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

PARTICULARS OF ASSIGNMENT

No.

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

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

Received by Pay II.
 JAN 29 1981
 and Passed for Action to
 Date
 Sub-Div.

Accts.	
Bank	
Disch.	
Invest.	
Obs.	
P.Bks	
P.H.S.S.	
Sep/C	

14th Bn. A.S.

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. 5000a).
6. Field Conduct Sheet (A.F.B. 122).
7. Proceedings on Discharge (M.F.B. 218a).
8. Discharge Certificate (M.F.W. 59) (Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D.S.).
11. Equipment Statement Q.M.G. Form (D.O.S. 2), and Clothing.
12. Last Pay Certificate (P. 851).
13. Pay Book (A.F. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group..... B
 Checked by No..... 9
 Date..... 3-4-19

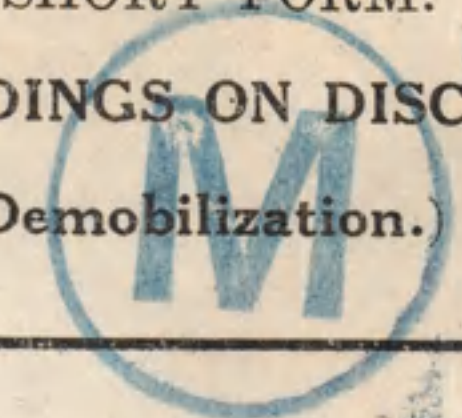
D. A. F
 O. G. 3

21-8-39

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

War Service Badge Class "A" No. 260121 (Demobilization.)



1. No. <u>748034</u>		
2. Rank. <u>Private</u>		
3. Name. <u>ABBOTT, James Lee boy</u>		
4. Unit. <u>14th Battalion</u>		
5. Date of Discharge	<u>20-4-19</u>	Place <u>MONTREAL</u>
6. Reason for Discharge..... <u>DEMOBILIZATION</u>		
7. Authority. <u>R.O. 1420 D.D.#4 D.O. Pt. II-118</u>		
8. Proposed Residence after Discharge..... <u>91 Belvidere St</u> <u>Sherbrooke</u> <u>P.Q.</u>		
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. ?..... <u>4 B39</u> <u>Montreal</u> <u>April 20 1919</u> <u>J. L. Abbott</u> Signature of Soldier.		
10. CONFIRMATION. The discharge of the above named man is hereby confirmed. Place..... <u>Montreal</u> Date..... <u>April 20 1919</u> Signature..... <u>[Signature]</u> Officer in Charge, Discharge Section, (Or, Discharging Unit.)		

* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND OR CANADA	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.
EFFECTIVE DATE:- 1-3-18		EFFECTIVE DATE:-	
AMOUNT:- \$15 ⁰⁰		AMOUNT:-	

NAME: **ABBOTT J.L.C. (James L. C.)**

NUMBER: **748034**

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.

John Abbott. (Father)
Gunnislake
Cornwall, England.

Mrs Bertha Moore. (Sister)
Gunnislake
(A2M 14-5-18) Cornwall.

Dropped off 1.5.19

PARTICULARS OF RANK OR APPOINTMENT		
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		<i>Private.</i>

UNIT AND TRANSFERS

ORIGINAL UNIT:- *117th Battⁿ*

DATE ACCOUNT FIRST OPENED:- *1-9-16*

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S F'D	UNIT TRANSFERRED TO
			<i>114th Battⁿ</i>
		<i>10/5/16</i>	<i>Canada Ser</i>

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
2.3.19	3114	207	373				
4	5911	257	466				
20.3	73	73	73				
			<i>8139</i>				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	<i>1</i>	<i>10</i>		

PARTICULARS OF RENDERING NON-EFFECTIVE: *Dr's to Can 3/3/19 4851. Posh 200 Posh. M.D.H. C. Bal 7797 159³⁸ mil*

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
Mar 31	Bal. Forw'd								<i>56.45</i>		
April	P.P.	<i>33</i>		AR 162 1 st D. Sig Co 14.4.18	<i>4.46</i>				<i>54.99</i>		
May	P.P.	<i>34 10</i>		AR 386 - 1 st D. Sig Co 4.5.18	<i>4.46</i>		<i>15.00</i>		<i>74.09</i>		
				" 539 " " 22.5.18	<i>3.57</i>				<i>66.06</i>		
June	P.P.	<i>34 10</i>		AR 610 - 1 st D. Sig Co 3.6.18	<i>4.46</i>		<i>45</i>		<i>84.06</i>		
				" 772 " " 15.6.18	<i>3.57</i>				<i>79.60</i>		
				" 864 " " 29.6.18	<i>4.46</i>				<i>76.03</i>		
July	P.P.	<i>34 10</i>		A.P. 6R 6.1401 = £3.18	<i>12.49</i>		<i>15</i>		<i>90.67</i>		
				AR 1265 - 1 st D. Sig Co 30.7.18	<i>4.46</i>				<i>86.21</i>		
Aug	P.P.	<i>34 10</i>		A.P. 6R 6.35401 £3.18	<i>4.46</i>		<i>15</i>		<i>105.31</i>		
				AR 187 - 3 rd Inf Bde 24.8.18	<i>7.14</i>				<i>98.17</i>		
Sept	P.P.	<i>34 10</i>		A.P. 6R 8.11401 £3.18	<i>7.14</i>		<i>15</i>		<i>116.17</i>		
				AR 655 1 st D. Sig Co 7.9.18	<i>3.57</i>				<i>112.60</i>		
				" 792 " " 15.9.18	<i>3.57</i>		<i>15</i>		<i>109.03</i>		
					<i>7.14</i>				<i>19</i>		
Oct	P.P.	<i>34 10</i>		CR D46202 £3-1-18			<i>15</i>		<i>128.13</i>		
				AR 1232 " 9-10-18	<i>3.79</i>				<i>124.40</i>		
				AR 1459 " 25.10.18	<i>3.73</i>				<i>120.67</i>		
					<i>7.46</i>		<i>15</i>				
Nov	P.P.	<i>33</i>		CR D63909 £3-1-8			<i>15</i>		<i>138.67</i>		
				AR 2273 " 4-11-18	<i>3.73</i>				<i>134.94</i>		
				AR 2273 " 4-11-18	<i>3.73</i>				<i>134.94</i>		
				AR 2273 " 4-11-18	<i>3.73</i>		<i>15</i>		<i>119.94</i>		
				AR 2273 " 4-11-18	<i>3.73</i>				<i>116.21</i>		
Dec	P.P.	<i>34 10</i>							<i>150.31</i>		
Jan	P.P.	<i>34 10</i>							<i>184.41</i>		
				<i>Cont Fund</i>			<i>7.46</i>	<i>30</i>			

COMPILED BY *Estimate*

REVIEWED BY *...*

NUMBER 748034

RANK *Plt*

NAME ABBOTT *J. C. L.*

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
	<i>Brit Fund</i>	10120			746		30		18441		
				CHK# F42801 $\frac{1}{2}$ 3-1-8			15		16941		
		10120			746		45		1580		
<i>Feb</i>	<i>PP</i>	3080		CHK# F49001 $\frac{1}{2}$ 3-1-8			15		18521		
				APR 3818 ^{Details} _{Can Rec} 14 Pm. 23-12-18	389				18132		
				" 3458 " 16-12-18	1298				16834		
				" 2090 ICP Sig Co 21-1-19	560				16274		
				APR 2688 30 Pm. 14 Pm. 5-2-19	746				15528	15528	
<i>Mar</i>	<i>PP</i>	3410		CHK# F38061 <i>mch</i> $\frac{1}{2}$ 3-1-8	2993		15		17438		
				CHK F 38144 <i>apl. APR</i> $\frac{1}{2}$ 3-1-8			15		15938		
				APR 5911 14 Pm 11-3-19	466				15472		
				" 3141 " 2-3-19	373				15099		
				6490	389		15				
				" 6614 <i>Plating C.C.</i> 20-3-19	7300				4799		
		6490			11132		45				

McCauley 10/2/19 H 45
L P C.

a 356
cert

AUDITOR *atw* PAYMASTER *atw*

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

M. OR S. _____ REGT. No. *748034* RANK *Pto* NAME (IN FULL) *ABBOTT J. H. C.*

RELATIONSHIP *0* PARTICULARS *Pos* EFFECTIVE DATE *10-4-19* AUTHORITY *10/18/19* ORIGINAL UNIT C.E.F. *14 Bn* IF IN P.F. WHAT UNIT? _____ (BLOCK LETTERS SURNAME FIRST)

ADDRESS _____ PLACE OF ATTESTATION _____ TRANSFERRED TO _____ DATE _____ AUTHORITY _____

DATE OF ATTESTATION *2-12-15* TRANSFERRED TO _____ DATE _____ AUTHORITY _____

IS SEPARATION ALLOWANCE PAID? *Quil* DATE EFFECTIVE _____ ASSIGNED PAY \$ *15.00* DATE EFFECTIVE _____

TO WHOM PAID _____ RELATIONSHIP _____ ANY CHANGE IN ASSIGNEE OR ADDRESS _____

ADDRESS *St. John's P. 2* *26/6/19* PAYABLE TO *Mrs B. Moore* *sister* *Web Bank of Commerce* *Sherbrooke* *P. Que.*

ADDRESS *Jermis Lake* *Cornwall Eng*

STOP PAYMENT FORM RENDERED, DATE _____ EFFECTIVE _____

DISCHARGED _____ PLACE _____ DATE *Montreal 20-4-19* REASON _____ AUTHORITY *10/18/19* IF ENTITLED TO POST DISCHARGE PAY _____



MONTH	PAY AND F.A.		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS	
	NO. OF DAYS	RATE	AMOUNT													DEBIT	CREDIT	DEBIT	CREDIT		
			\$	C.	\$	C.	\$	C.	\$	C.	\$	C.									\$
1-4-19				70.00		77.99														77.99	Balance
25-4-19	25	110	27.50	35.00		132.50									5.50					550.00	BR 25-4-19
						210.49															
				Other Credits		W. S. G. S. A. Total									Other Charges						Balance
				420		420									70					350	3070681
20-5-19															550.64					70	311581
20-6-19															70					70	1042199
20-7-19															70					70	1222271
20-8-19															40					40	1534790
20-9-19															40					40	
																				420	