REGIMENTAL DOCUMENTS

NAME Allen. Timothy REGT. NO. 550270 UNIT H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
1	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					Killed 28/8/18
1	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)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					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)					
1	Ribbon					
1	Medal					
1	Cas card					
2	Dog tags					
1	Pipe					
	Paysheets					13-26
						20-26
						28-26
						1

W. 2505
100M-11-18
6772 30-1377

Original

ATTESTATION PAPER.

No. 550-270

DEPOT SQDN. R. C. D.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ..... Allen
1a. What are your Christian names? ..... Timothy
1b. What is your present address? ..... Bracebridge Ontario
2. In what Town, Township or Parish, and in what Country were you born? ..... Gravenhurst Ont.
3. What is the name of your next-of kin? ..... Mary Allen
4. What is the address of your next-of-kin? ..... Bracebridge Ont. Canada
4a. What is the relationship of your next-of-kin? ..... Mother
5. What is the date of your birth? ..... Nov 4th 1895
6 What is your Trade or Calling? ..... Wood Worker
7 Are you married? ..... no
8 Are you willing to be vaccinated or re-vaccinated and inoculated? ..... yes
9. Do you now belong to the Active Militia? ..... no
10. Have you ever served in any Military Force? ..... no
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? ..... yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? ..... yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Timothy Allen, 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.

Timothy Allen (Signature of Recruit)

Date SEP 29 1916 191 . Thos J Berkett Lieut RCD (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Timothy Allen, 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.

Timothy Allen (Signature of Recruit)

Date SEP 29 1916 191 . Thos J Berkett Lieut RCD (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 this 29th day of Sept 1916.

[illegible] (Signature of Justice)

M. F. W. 23
750M—8-16
H. Q. 1772-38-341

Description of Timothy Allen on Enlistment.

Apparent Age 20 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 8½ ins.

Chest measurement: Girth when fully expanded ..... 38 ins.
Range of expansion ..... 4 ins.

Complexion ..... Fair

Eyes ..... Grey

Hair ..... Dark Brown

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

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).

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 SEP 29 1916 191 . W. T. McLean

Place TORONTO, ONT. Capt. Medical Officer i/c Stanley Barracks

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.

Timothy Allen 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 SEP 29 1916 191 . Capt. R. C. R.

R—122

A.C. Rank | Name ALLEN, Timothy. | Reg'l No. 550270

Unit 6th. Dft. R.C.D. | If in perm. Corps, What Unit? | Married or Single Single.

Place and Date of Enlistment Toronto. Sept. 29th.1916. | Place of Birth Gravenhurst, Ont.

Name and Address, Next-of-Kin Mary Allen,

Bracebridge, Ont., Canada. | Relationship Mother.

Assigned Pay Monthly $ | Payable to

Relationship

Separation Allowance $ | Payable to

Relationship

N/E. R.B. No. 1742.
File R.L. 25-A-1627
Category 66

Discharge, Date and Place | Reason | Character

H.W. & V., Ld.—7165-16.

Report. Date.	From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
		Arrived in England per Mesopotamia		13.10.16	
~~R.C.~~ 14/10	RCDRR	Taken on Strength	S'cuppe.	14.10.16	P.T.O. 125
6.3.17	C.R.C.R.	T.O.S. by reorganization as A1	"	6.3.17	" 1
25/4/17	RCD	Taken on Strength Reinforcement	Field	21/4/17	" " 3rd C.R.C.R. Pt II O.45 19/4/17
17.4.18	C.R.C.D.	Reported from Base			
		Killed in Action	Field	Fr.	23.3.18 Amended C.R.C. A 206 ~~not stated~~ C.R.C. A 190 d. 6.5.18
4.5.18	RCD	Killed in Action	"	Fr.	23.3.18 D.O. 38

A.F.B. 103 CHECKED
Bob 27 APL 1917

25081

109728

Can. Res. Cav. Regt.
4 - APR 1917
PAY OFFICE

152

RCR
Kina
Date N.S.
T- 24-4-18
a 190 323/1

— 20 —

Perforated sheet for Will from Pay Book of Reg.

No. 550270.

Name Timothy Allen.

Unit Can Res Cav Regt.

Military Will.

In the event of my death I give the whole of my property & effects to my Mother, Mrs Mary Allen, Bracebridge, Muskoka, Ontario.

Signature Pte. Timothy Allen

Rank and Regt. Pte - Can. Res. Cav. Regt.

Date 4/3/17.

ESTATES BRANCH
MAY 16 1918
MILITIA DEPT.

The original will was forwarded to Ottawa.
30 4 18

ORIGINAL. 3963

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Allen *Christian Name* Timothy

Examined { on 18th day of Nov 1915 / at Toronto

Birthplace { City or Town Gravenhurst / County Ont.

Apparent age 20

Trade or occupation

Height 5 Feet 8½ Inches.

Weight 150 Lbs.

Chest measurement { Minimum 34 inches. / Maximum expansion 38 inches

Physical development Good

Small-Pox Marks none

Vaccination Marks { Arm Right. Left. / Number one

When Vaccinated last 1908

(*a*) Marks indicating congenital peculiarities or previous disease none

(*b*) Slight defects but not sufficient to cause rejection none

Approved by W. T. McKean Capt. Medical Officer i/c Stanley Bks.

Rank M.O.

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

Date	Result	Vaccinations.
4-1-16	Good	W. T. McKean M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
13-12-15	Good	W. T. McKean M.O.
18-12-15	"	W. T. McKean M.O.
24-12-15	"	W. T. McKean M.O.
5/4/17	1/4 B	J. C. Wright.

Enlisted on ..... *day of* ..... *191* ..... *at* .....

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment		550270		
Transferred to..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

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

M. F. B. 313.

100M.—1-15.
H. Q. 1772-39-439.

Surname Allen Christian Name

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
Toronto								Re Admission			W. T. McLean Capt. Medical Officer H.S. Stanley Bks.

FORM OF WILL.

I, Timothy Robert Allen (Name in full)

Regimental Number 550, 270 serving in Royal Canadian Dragoons

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

I bequeath all my real estate unto

None	Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

Mrs Mary Allen Bracebridge Ontario, Can.	Name and Address of person or persons to receive personal estate* *(See note).*

IMPORTANT NOTE
This must be Signed and Dated by THE SOLDIER HIMSELF.

this 29th day of September A. D. 1916.

Timothy Allen Signature of Soldier.

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

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

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness B L Saunders

Address of Witness Stanley Barracks Toronto Ont

Occupation of Witness Soldier

Signature of Second Witness Edward Littledale

Address of Witness Stanley Barracks Toronto

Occupation of Witness Soldier

M. F. W. 82
300M-5-16.
1772-39-983.

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

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps 6th Dft. R.C.H.

Regimental No. 550270 Rank Pte. Name Allen, Timothy

Enlisted (a) 29.9.16 Terms of Service (a) Dur. of War Service reckons from (a) 29.9.16

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) Wood Worker

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	Sept 30/16		S. S. Missanabie
		Dis-embarked - England	Oct 13/16		
14.10.16	O.C. R.C.D.R.R. ~~6th Dft~~	T. O. S. R C D R R	S/cliffe	14-10-16	Part II Orders 125 d/14/10/16
7-3-17.	Repl. Can. O.C. R.C.D.R.R.	~~S.O.S. of R.C.D.R.R. on transfer to C.R.C.R.~~	S,cliffe 6-3-17.		Pt 11 Order 66 d/7-3-17.
6-3-17.	O.C. C.R.C.R.	Taken on strength C.R.C.R. on transfer from R.C.D.R.R. on Reorginization	S,cliffe 6-3-17.		Pt 11 Order No1 d/6-3-17

Adjutant, Royal Canadian Dragoons
Res. Regt.

(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 Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
19/4/17	O.C. CRCR	Proceeded overseas to R.C.D. France	S,cliffe	19/4/17	Part II Order No. 45 LIEUT ASST ADJUTANT FOR OFFICER COMMANDING CANADIAN RESERVE CAVALRY REGIMENT
21.4.17	CBD	Arrived in France & posted to RCD	Havre	21.4.17	NR PRO 34 d/28.4.17
26.4.17	do	Left for unit	Field	26.4.17	NR
4.5.17	RCD.	Joined unit	do	1.5.17	B213 RCD 353 d/12.5.17
27.4.18	R.C.D.	K. in A. Field	do	23.3.18	Letter K.T. 18-8524. Pt 2 ord 38 d/ 4.9.18.

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

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

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

Sheet No. 2. Mrs. Mary Allen

Name of Soldier Allen Timothy

L. L. Job 89002.—Req. 6213.

PAYMENTS.

3963

Month.	Year.	Cheque No.	Amt.	Pte	Remarks.
April	1916	G 176	20 —	20	
May		H 4971	20	20	
June		C 1813	20	20	
July		K 9674	20	20	
Aug.		A 11559	20	20	
Sept.		C 15820	20	20	
Oct.		A 17388	20	20	
Nov.		D 20531	20	20	
Dec.		D 24540	20	20	
Jan.	1917	C 28719	20	20	
Feb.		C. 31602	20	20	
March		C 34779	20	20	
April		D 291	20	20	
May		D. 4073.	20	20	
June		E. 7223.	20	20	
July		D 11098	20	20	
Aug.		F 14087	20	20	
Sept.		E 17379	20	B	
Oct.			20	T 438	
Nov.					
Dec.					
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

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

L. L. Job 88773—M. & D. 6195.

3-12-15.

MILITIA AND DEFENCE

M. F. W. 11.
20m.—11-15.
H. Q. 1772-39-818.

276

SEPARATION ALLOWANCE

Name Allen. Mary. Mrs

Address Bracebridge. Ont.

Relation to Soldier wife, child or mother } Mother

Name of Soldier Allen Timothy

Regtl. No. 3963

Rank Pte.

Corps R. C. D's.

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	G 26851	38-	38
Feb.		E 29942	20	
March		F 30723	20	Issue March ck 20.

PAYMASTER PAYING
From 1915
To 1916

CONSOLIDATED ACCOUNT 2

PENSION GRANTED July 1- 18.
PER NO. .....
P.L. June 28/18

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2. Mrs Mary Allen (Assignee)

L. L. Job 5470—Req. 6888.

PAYMENTS.

Name of Soldier Timothy Allen

No. 550270. RCD/CEF.

P. 20 21/4/17

OCT 1 - 1916

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		L 24013	20	✓
Nov.		E 25923	20	
Dec.		C 37379	20	
Jan.	1917	G 35796	20	
Feb.		G 42367	20	20 R
March		G 48512	20	20. P
April		H 175	20	20. E
May		H 6548	20	
June		H 12909	20	20. Cu
July		H 19948	20	Cu
Aug.		J 27139	20	C
Sept.		J 33863	20	J
Oct.				240 ✓
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

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

L-L. Job 5470—M. & D. 6888

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H. Q. 1772-39-819

To Whom Mrs Mary Allen
Address Bracebridge Ont.

By Whom Assigned Dependency allow
Regtl. No. 550270
Rank Pte
Corps R.C.D. O.S.

Rate 20.00

OCT 1- 1916

PAYMENTS

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

consolidated acct.

PENSION GRANTED July 1-18
PER NO..... B.L. June 28/18

Register No. DA 527

WAR SERVICE GRATUITY
TO
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. 0239-J-2

Regt'l No. 550270 Name Timothy Allen
(Christian Name) (Surname)

Unit R. C. D. Rank Cte Date of enlistment

Date of casualty 23-3-1918 B.P.C. File No. 37072

Was service performed overseas ? yes

DEPENDENT

Name Mrs Mary Allen Relationship W Mother

Address c/o Patriotic Fund
(Jenny J Bird)
J J Bracebridge Ont

Amount of Special Pension Bonus $ Nil Abstracted by J J Maher

Eligible for Gratuity $ 180.00

Less amount of Special Pension Bonus paid $ Nil

Less Debit Balance of S. A. or A.P. $

Total deductions $ Nil

Balance due $ 180.00

Cheque No. S. 1900527 Date issued 16/8/20

Clerk J. E. LeCourt

REMARKS :

Audited by
J Kent 180.00
Date 13/8/20

M.F.W. 2652
25M—6-20.
H.Q. 1772—39-1473

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname Christian Name

Regimental Number Rank

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Address (in full)

Rates:—Regimental pay $ per diem; Field Allowance $ per diem. Separation Allowance $ per month.

L.L. 53961—M. & D. 9721

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

Remarks:

M. F. W. 127
300M-1-19
1772-39-1140

Date of Enlistment 3-12-15

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment May 1-18 ~~Oct 1-1916~~

RATE OF SEPARATION ALLOWANCE

~~20~~	25.00 1-12-17 P.C. 3251		

RATE OF ASSIGNMENT

~~20~~	15 pc 2375		

PARTICULARS OF SEPARATION ALLOWANCE

No. 550270 (~~3960~~)

Rank Plte Promoted Reverted Discharge

Soldier's Name Timothy Allen

Battalion R. C. D. C. E. F.

Beneficiary Mrs Mary Allen.

Relationship mother.

Address

PARTICULARS OF ASSIGNMENT

Name Mrs Mary Allen

Address Bracebridge Ont.

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	
Sept 30, 17		438	240	678	
Oct	C 50614	20	20	40	
Nov	D 51767	20	20	40	Bo
Dec.	C 60137	20	20	40	Br.
Jan 1/18	C 65170	30	20	50	m
Feb	B 91715 ✓	25	20	45	
March	G 98940	25	20	45	
April	G 8708	25	20	45	R
May	Y 210 15	25	15	40	B.
June	Y 25547	20	15	40	B
		653 00	410 00	1063 00	

File 0239-T-2

REMARKS

C. F. X #380 to 30-4-18
Acct. Open pc 2375

Pensions Notified Date 24-4-18
Killed in Action / ~~Died of Wounds~~ / ~~Missing~~ Date 23-3-18
C. 1156/25.18 4/18 Clerk J. LeClair
Date Noted 24-4-1918

K in A 23 3/18 b. p. 176(b) 8 3/18

Pension Granted July 1-18 B.L. June 28/18
B.P.C. to Recover $
Clerk Rob Date June 22-18

M. F. W. 128
400M.—6-17—172-33-1141
L. L. 2329)—M. & D. 7993.

CONSOLIDATED

MR02a Rcn. 30/4/18 LL

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22520—M. & D. 1493.

D M S. 1300 50M-21-11 17.

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
Allen	J.	550270

RANK	UNIT	CO.	TROOP	BATTY.
Pte.	R.C.D. Cdn. Cav.			

HOSPITAL DATE OF ADMISSION

1. HOSP.

2. HOSP.

3. HOSP.

4. HOSP.

DIAGNOSIS R.F.B.

1. Killed in Action (date not stated)

2. 23-8-18. R.

3.

DISPOSITION DATE

17.4.18 a 190

6-6-18 a/206-2. re a/190 Date of Death 23-3-18

REMARKS

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT

HOSPITAL	ADM.
1.	
2.	
3.	
4.	
5.	
6.	
7.	

Form R. 149.

Name ALLEN Rank Timothy Pte Reg. No. 550270

Unit R.C. Dragoons.

Next of Kin Canada.

R.L. 25. A. 1627

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
Feb	Killed in Action					
March	(Gl. Gaz. 1st 4/16-4-18)			Aign.	Hill	
	A.F.B. 212 of 30.3.18					6917
	Date of death now ascert. to be 23-3-18			A206.	4127	
	Pt II O. # 38 of 4-5-18					1463

Date		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List

REGT'L. No. 55027

NAME Allen Timothy

H. Q. FILE No 649

RANK AND CORPS Pte. Royal Can. Dragoons

FOLLOWS

No.

FOLLOWS

CABLE NO.	CABLE DATE	NATURE OF CASUALTY
N of K.		Mrs. Mary Allen (Mother) Bracebridge Ont.
H. 111. 63	18-4-18.	Killed in action. no date given
H 127 23-2	7-5-18	re H 111 date ascertained to be Mar. 23rd 1918

L. L. 31493. M. & D. 8476.

M. F. W. 42—100M.—28-11-17.
H. Q. 1772-39-893.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 190	Rep. from Base	Date not stated	Killed in action
A 306	Date of Death	23-3-18	

649-A-7534-

6

ALLEN Timothy, Pte. #550270-R.C.Dragoons-

Medals & Decorations.	Mrs.A.Allen Bracebridge, ~~Muskoka,~~ Ont.	MOTHER c/o Henry J. Bird Jr. Can. Pat. Fund Bracebridge, Ont.
P. & S. Serial No. 750002	(AS ABOVE)	Desp. 29 10/20 J. Ret'd. Desp 28 7/22 P #3488
C. OF S.	(AS ABOVE)	

Desp 26 2/20 C 2004

over

M

Scrotal Desp. 24-1-21 Reqn. ~~No. B78~~

Plague Desp. _____ Reqn. No _____

P. 559

Married or Single: S

Place of Birth: Gravenhurst, Ont.

Name and Address of Next of Kin: Mary Allen. Bracebridge, Ont. Canada.

Relationship of Next of Kin: Mother

Name and Address of Next of Kin:

Relationship of Next of Kin:

Separation Allowance Monthly $ — Effective (Date)

Payable to:

Relationship of Dependant:

Casualties, Promotions, &c.

Particulars	Effective Date	Authority
Killed in action	23-3-18	C.F.A. 90-17-4-18

Admissions to Hospital, &c.

Date Admitted	Date Discharged	V. or A.	Name of Hospital

Statement of Effects Rendered July 23/18 Bal 66 to Bal

Reg'l No. 550970 Rank Pte Name Allen Timothy

If in Perm't. Corps What Unit — Unit R.C.D., 6th Draft — Transferred to C.C.D.B. Date — Authority

Permanent Force Allowances — Transferred to R.C.D. Date 21.7.17 Authority D.O. 45 194

Place of Attestation Toronto — Transferred to — Date — Authority

Date of Attestation Sept. 29th 1916 — Transferred to — Date — Authority

Assigned Pay Monthly $ 20.00 Date Effective 1 Oct/16.

Payable to Mrs Mary Allen, Bracebridge Ont. Relationship Mother

Assigned Pay Monthly $ Date Effective

Payable to Relationship

OCT 22 1918

Stop-Payment Form (Assigned Pay) Rendered (Date) Effective Reason

Discharge Date and Place Reason and Authority

Account Transferred to Non-Effective Branch (Date)

Account Transferred to Officers' Pay Branch (Date)

Date	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	C1.	Remarks
1916 Oct.	31	1.	31.		31	10	3 10								34 10			25-8	15.10						2 43			20.		22 43	11 67					
Nov	30		30.		30		3.								33.	2534	31.10.16	26 48	15.11.16					2 43	4 84			20.		24 30	14 34		-	17 97		
Dec	31		31.		31		3 10								34 10	2934	31.12.16							2 43				20.		22 43	29 04		-	29 04		
1917			9	20			9 20																													
Jan	31		34	10											34 10	2834	31.12.16							9 43				20.		29 43	33 41					
Feb	28		30	80											30 80	2998 2910	31/1							9 73 4 87				20		34 60	29 61					
Mar	31		34	10											34 10	3158	28/2/17	3323	31/3/17					9 73	7 30 4 84			20		41 90	21 81		-			
Apr	30		33	00											33													20		20	34 81					
May	31	1 00/70	34	10											34 10	4	19/4/17							4 87				20		24 87	44 04					
June	30		33	00											33 00					70	1/5 R & D					3 57 4 96 3 57		20		31 50	45 54					
Jul 1/20	20		22												22					355	23/4 R & D							20		20	47 54		-	47 54		To R.C.D. 21.7.17 D.O. 45 194
July 31	11		12	10											12 10					110	30/5 R & D							—		—	59 64		-	59 64		
Aug	31	1 00/70	34	10											34 10	158 133	31/6 11/6							3 54 3 54				20.		27 14	66 60		-	66 60		
Sept	30	1 00/70	33	-											33 -	252 186.	31/7 1/7	380 244	23/8 10/8					3 57 3 57	3 57 3 57			20 -		34 28	65 32		-	65 32		
			401	50											401 50									58 07	26 61	11 50		240 -		336 18						
			401	50											401 50									5807	2661	1150		240 -		33618						

Total Can A Pay 380.00

20.00 Per month from 1/10/16 to 31/4/18

Account Still Open

C.F.X. 0 239-S-2 14/5/18-577

550270 Pte. Allen. J.

Date	Pay: No. of Days	Pay: Rate	Pay: Amount $	Pay: Amount c.	Field Allowance: No. of Days	Field Allowance: Rate	Field Allowance: Amount $	Field Allowance: Amount c.	Working or Special Pay: No. of Days	Working or Special Pay: Rate	Working or Special Pay: Amount $	Working or Special Pay: Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	Acquittance Rolls 1 Date	Acquittance Rolls 2 No.	Acquittance Rolls 2 Date	Acquittance Rolls 3 No.	Acquittance Rolls 3 Date	Acquittance Rolls 4 No.	Acquittance Rolls 4 Date	Cash Payments 1	Cash Payments 2	Cash Payments 3	Cash Payments 4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
MONTH	PARTICULARS				CR. 1	CR. 2	PARTICULARS							DR. 1	DR. 2	DR. 3	DR. 4	BALANCE		DEFERRED PAY	SEP. ALLOE. ENG.														
					~~66.44~~													65.52																	
Oct.	31 days	1 00/10			3410		a G										20																		
							317. 9.9.17. Field							357																						
							363. 22.9.17. R.C.D.							357				7228																	
					3410									714			20																		
Nov.	P.P.				33 –		a.R. 297. R.C.D. 11.10.17.							357																						
Dec.	P.P.				3410		a.R. 435 R.C.D. 22.10.17.							357																						
							a.P. Nov.										20																		
							a.R. 460 R.C.D. 8.11.17.							357																						
														1071																						
							a.P. Dec.										20																		
					6710									1071			40	8867																	
1918 Jany.	P.P.				3410		a.R. 489 R.C.D. 29.11.17.							357																					
							a.R. 569 R.C.D. 24.12.17.							714																						
							a.R. 505 R.C.D. 6.12.17.							892																						
														1963																						
							a.P. Jan.										20																		
					3410									1963			20	8314																	
Feb.	P.P.				3080		a.R. 583 R.C.D. 10.1.18.							357																						
							a.R. 625 R.C.D. 23.1.18.							357																						
							a.P.										20																		
					3080									714			20	8680																	
Mar.	P.P.				3410		a.P.										20																		
							D.R. W3069. R.C.D. Nov/17							18																						
							a.R. 757. F.S.H. 20.2.18.							357																						
							a.R. 741 R.C.D. 8.3.18.							357																						
							a.R. 758 R.C.D. 20.3.18.							714																						
					3410									1446			20	8644																	
June							Vouch from PAO 5/7/18 a/c A.O. Paid by Ottawa										20	66.44																		
																	20																		
Sept.							Bal. Transfd A/Vou 137 Ottawa							66.44				Nil																	
														66.44																					