

LIEUT

ALMOND

ERIC

I.D. number
No. d'identification

Surname
Nom de famille

Given names
Prénoms

Open ATIP

Deceased 3/8/53

**NATIONAL PERSONNEL RECORDS CENTRE
CENTRE NATIONAL DES DOCUMENTS
DU PERSONNEL**

**PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL**

Location

Lieu

126

**«CONTENTS CONFIDENTIAL»
«CONTENU CONFIDENTIEL»**



REGIMENTAL DOCUMENTS

NAME Almond, Eric

REGT. NO. Lieut

UNIT 35th Bty.

H. Q. FILE NO. 509

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

1 ATTESTATION PAPER (M.F.W. 23, 133, or 51) 3

3 CASUALTY FORM (M.F.W. 54 or A.F.B. 103) 3

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

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

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

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

1+1 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

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

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

1 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)

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

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

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

1 Disp. Cert.

1 Off. R. Letter

1 m.f.w. 2591

3 27045

M

Per
Ret'd

22-5-19
9

Per 509 G.S.

DEATH

Category

3-7-19

"

"

"

Does to B.P.C.

4/11/19

Per - Spec 1086

G.S.

DISCHARGE

Category

Deceased

3-8-53

Remo

DESERTION

126

H

2

14-8

14-8

11-8

3-7-19

⊕

16-6-16
Gard B.

ATTESTATION PAPER

No. 300916

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION. (ANSWERS.)

1. What is your name?..... *Eric Almond*
2. In what Town, Township or Parish, and in what Country were you born?..... *Shigawake, Que Canada*
3. What is the name of your next-of-kin?..... *Mrs. James Almond*
4. What is the address of your next-of-kin?..... *Shigawake Que*
5. What is the date of your birth?..... *December 25 1896*
6. What is your Trade or Calling?..... *Student*
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?..... *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*

Eric Almond (Signature of Man.)
J. Fuller (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Eric Almond*, 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.

Eric Almond (Signature of Recruit)

Date *September 14 1915* *J. Fuller* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Eric Almond*, 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.

Eric Almond (Signature of Recruit)

Date *September 14 1915* *J. Fuller* (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..... this..... day of..... 191 .

W. H. M. Major (Signature of Justice)

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

W. H. M. Major (Approving Officer)

C.9.

Description

on Enlistment.

Apparent Age 19 years 9 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 7 ins.

Chest measurement: Girth when fully expanded 34 3/4 ins.
Range of expansion 32 1/4 ins.

Complexion Dark

Eyes Blue

Hair Black

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

vacuumation mark
rt arm

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 Sulcarter 1915

[Signature]

Place Sept 15th 1915

[Signature]
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.

Eric Almond having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

[Signature] (Signature of Officer)
major

Date Sept 15 1915

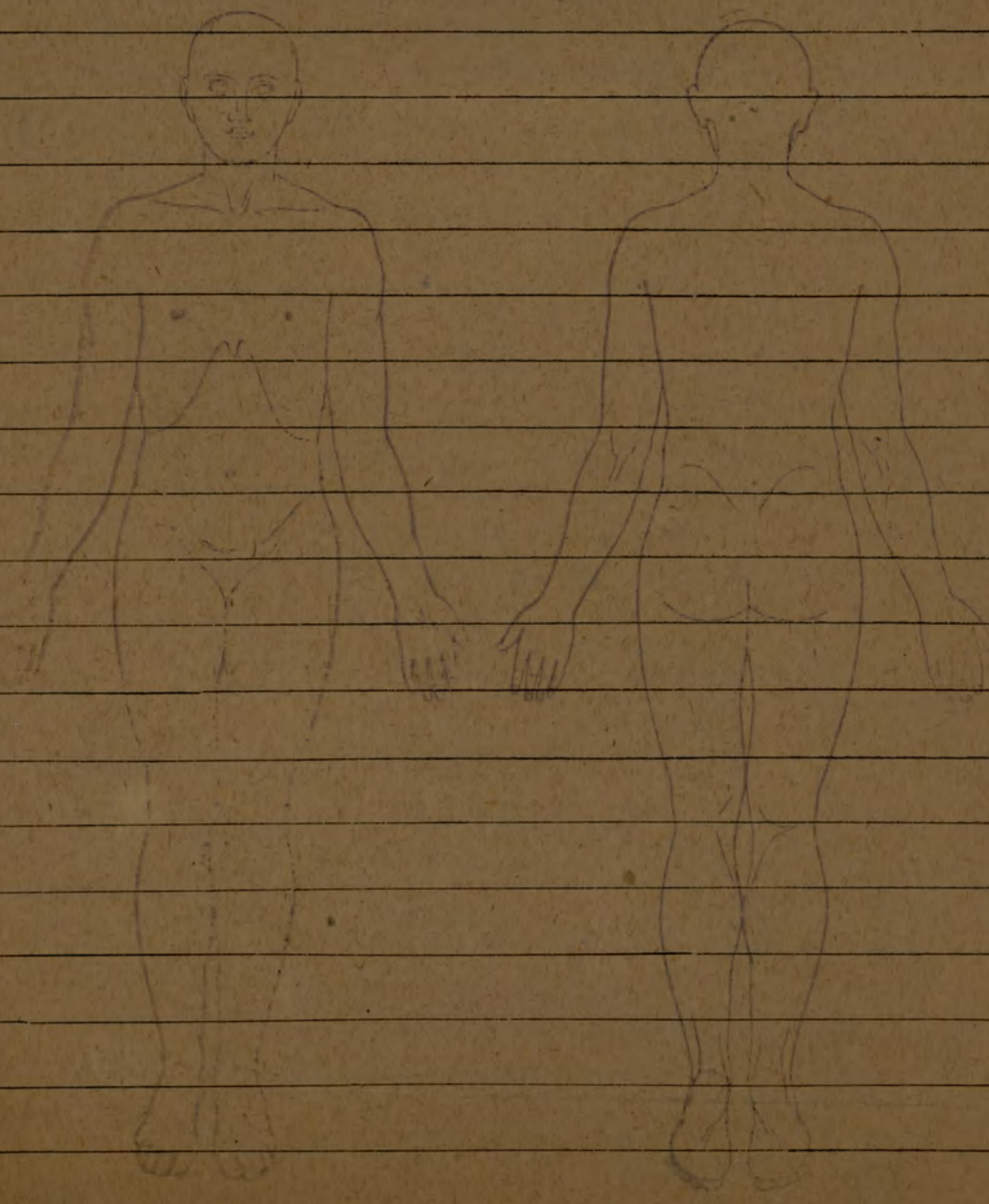
MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. <u>C428</u> Year <u>1918</u>	Regimental No.	Rank.	Surname.	Christian Name.
	Unit.	Age.	Service.	
	<u>4th Batt. CFA.</u>	<u>Lt</u>	<u>almond</u>	<u>E</u>
			<u>22</u>	<u>3</u>

Station and Date. Aug 9.
Disease Sw Face + (R) Hand.

Aug 9.
1918
15th

T & T was from R to L
side of upper lip
Cleaned & sutured
Buccal mucous Mem. - sutured
c Catgut
Flesh on R. Index finger
Biopsy & sutured



ORIGINAL MEDICAL HISTORY SHEET.

300835
300916

Surname Almond Christian Name Cic

Examined { on 15th day of September 1915
at Salcartier Camp

Approved by Addison
Rank Capt. M.O.

Birthplace { City or Town Shigawake
County Bonaventure Dist.

Apparent age 19 yrs 9 mos.

Trade or occupation Student

Height 5 Feet 4 Inches.

166 Lbs.

22 1/4 inches

Expansion 34 3/4 inches

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

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		12 DEC 1917
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	VACCINATIONS.
22/2/11		Alpha Capt. Am. M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
1915 Nov: 9 th		500 m. bacteria. Full M.O.
Nov 23/15		1000 m. Full. Capt. Am. M.O.
22/2/11		Alpha Capt. Am. M.O.
28/6/16	TAB	capt. Am. M.O.

Enlisted on 15 day of October 1915 at Salcartier Camp

	CORPS.	REG'T NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>35th OVERSEAS BATTERY C.F.A.</u>	<u>300916</u>		
Transferred to..	<u>Recorded Overseas Sent to C.F.A.</u>			<u>29/4/18.</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>C.C.M. Montreal Bath</u>	<u>23.8.18</u>	<u>S.w. finger & face</u>	<u>A. Hamiknell Capt.</u>
<u>C.C.M. Montreal Bath</u>	<u>13-1-19</u>	<u>Appendicitis</u>	<u>C. J. Langin Apt. Am.</u>
<u>Atley</u>	<u>24-2-19.</u>	<u>Nil</u>	<u>H. Marshall M.D.</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.

CANADIAN

300835
300916

ORIGINAL MEDICAL HISTORY SHEET.

Surname Almonds Christian Name Cic

Examined { on 15th day of September 1915
at Salcartier Camp

Approved by Adison
Rank Capt M.O

Birthplace { City or Town Shigawake
County Bonaventure

Apparent age 19 yrs. 9 mos.
Trade or occupation Student

Height 5 Feet 4 Inches

Weight 165 Lbs.

Chest measurement { Minimum 32 1/4 inches
Maximum expansion 34 3/4 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

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		<u>12 DEC 1917</u>
		M.O
		M.O
		M.O
		M.O
		M.O
		M.O

Date	Result	VACCINATIONS.
<u>22/2/16</u>		<u>Alpha Capt. Am.</u>
		M.O
		M.O

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>1915</u>		<u>500 m. bacteria. Full</u>
<u>Nov 23/15</u>		<u>1000 u. Full. Capt. Am.</u>
<u>22/2/16</u>		<u>Alpha Capt. Am.</u>
<u>28/6/16</u>	<u>TAB</u>	<u>Capt. Am.</u>

Enlisted on 1st day of October 1915 at Salcartier Camp

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>35th OVERSEAS BATTERY C.F.A.</u>	<u>300835</u>		
Transferred to..	<u>Recorded Overseas Sent to CFA</u>	<u>300916</u>		<u>29/4/18.</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>C.O.H. Montreal Barr</u>	<u>23.8.18</u>	<u>S.w. finger & face</u>	<u>A. Hamiknell Capt.</u>
<u>C.O.H. Montreal Barr</u>	<u>13-1-19</u>	<u>Appendicitis</u>	<u>C. J. J. J. J. J. J.</u>
<u>Atley</u>	<u>24-2-19.</u>	<u>Nil</u>	<u>H. H. H. H. H.</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.

CANADIAN

Christian Name

Surname



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				
Left Sherbrooke	24	2	16	Arrived Braunschott	18	3	16				
Braunschott	14	11	16	Witley	14	4	16				
		11	8	18	21	8	18	Pellus leg Pel. urethri dyp Pel. urethri dyp wound pipe	10	clean belly wound. Stitches Dry dressing. Amalgam for bridge	See case
6608. Midwick batt.		21	8	18	29	18	18	S. Y. hand & fasc. flesh rupt	17	now recovered.	Hamitchell Capt.
HYDE PARK SECTION; 4th SOUTHERN GENERAL HOSPITAL, PLYMOUTH.		8	11	18	7	12	18	Appendicitis	30	Appendix removed, recurrence	W. R. ...
L.D.E. CANADIAN RED CROSS HOSPITAL, No. 1, HYDE PARK PLACE, LONDON, W.		7	12	18	16	12	18	do.	9	Proximal transfer to: CANADIAN RED CROSS OFFICERS HOSPITAL 17, NORTH AUDLEY STREET, LONDON, W.	
CANADIAN RED CROSS OFFICERS HOSPITAL, 17, NORTH AUDLEY STREET, LONDON, W.		16	12	18	10	1	19	do.	25	Convalescent after appendectomy. Anaemia & debility now much improved	Beddall Major ...
C.P.O.H. Midwick Batt		10	1	19	17	1	19	do	7	General condition good. Good recovery from operation. No rest sleeping and poor appetite Heart & lungs sound.	Tom ...

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. Rank Lieut. Surname Almond, Eric
(Given name in full)

Unit or Corps C.R.A. Birthplace Shigawake, Sae.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 157 lbs. Height 5 ft. 7 in. Colour of Eyes Blue
 Nutrition Good
 Pulse 80
 Condition of arteries Good
 Vision Rt. 6 Left 6
 Hearing (conversational voice) Rt. 21 ft. Left 21 ft.

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

Scar at lower abdomen following operation for appendicitis.

26 FEB 1919
WIMLEY, SURREY

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 Yes
 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.

Operated for appendicitis in France Oct. 30/18 - statement M.H.S. shows treatment in hospitals in England from 8-11-18 to 19-1-19. Scar 4" long in right inguinal region well healed & firm - no disability.

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at... *Witney* (Overseas)

Date ... *24-2-19*

Signed *H. J. ...* 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 *C. ...*

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

THIS SECTION FOR USE IN CANADA—

Examined at..... (Canada)

Date

Signed M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature

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

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

[OVER]

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.

Regimental No. Rank. Surname. Christian Name.

Leut Almond R.

Year

Unit.

Age.

Service.

1918

68A

22

CANADA *5*
FRANCE *20*
TOTAL *26*

Station and Date.

Disease *D. W. - hand & face - flesh slight*

ONSPT *8-8-18*

WHERE *France*

HISTORY OF DISABILITY

*T. & T. wound of upper lip. (sutured at C.C.S.)
gripes w/ base of index finger R. - no
bone injury. W/ sutured at C.C.S. Evac. to France
& then to 5th S. Gen. Portsmouth. 11-8-18.
To C.C.S. 21-8-18.*

PERSONAL AND FAMILY HISTORY

Previous health good -

PRESENT CONDITION *Generally good.*

DIGESTIVE SYSTEM *Bowel constipated*

CIRCULATORY SYSTEM *Rate 114. No union*

RESPIRATORY SYSTEM *N.C.*

NERVOUS SYSTEM *O.K.*

G. U. SYSTEM *No subj. symptoms*

LOCAL CONDITION

Wid. of lip healed

" of finger scarred over. Healthy but

tender -

Treat - dry dressing to finger -

23.8.18

Boarded. A.

H. Mitchell Capt.

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

THE
OFFICE OF THE
SECRETARY OF THE
NAVY
WASHINGTON, D. C.

DEPARTMENT OF THE NAVY
NAVY DEPARTMENT

NAVY DEPARTMENT
WASHINGTON, D. C.

DATE
1914

Station
and Date.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. Year	Regimental No.	Rank.	Surname.	Christian Name.
Station and Date.	Disease			
1103 1918		Lieut.	Almond	Eric
1918		Unit.	Age.	Service.
1918		C.F.A.	23 yrs	2 3/4 yrs.
	Appendicitis			
	on 6.1.20 on of symptoms appendicitis was removed.			
	On admission he was still ill			
12/11/18	a suppurated abscess has formed in the scar. which is discharging			
20.11.18	Wound now fully healed			
7.12.18	I was found to have a S.O. D. to the lower abdomen			
9-12-18	Admitted to I.D.C. Hospital Hyde Park Place 7-12-18			
	convalescent from Appendectomy, wound healed general condition good. only on exertion still feels tired & slight aches in side.			
Pembroke Bull Aux Hosp. Putney	Convalescent - anaemia + weakness			
12.12.18	Pt Bland			
9.1.19	much improved			
	} A. Dealter major came			

Station
and Date.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	1919		Unit.	Age.
Year	C.S.A.		27	Service.
Station and Date.	Disease	WHERE		
	ONSET	FRENCH		
C.C.C.H. MILLOCK BARR.	30-10-18			
Jan 10	<u>HISTORY OF DISABILITY.</u>			
<p>Sudden onset. Ad. to C.C.S. - Operation same day. Gangrenous perforated appendix removed. - drainage To 20th Gen. Hosp. 6-11-18. Cond. good. To Hyde Park Hosp. Plymouth 9-11-18. 20-11-18 wd healed. Transferred to P.O.H. 9-12-18. Good recovery To C.C.H. 10-1-19.</p>				
<u>PERSONAL AND FAMILY HISTORY.</u>				
Good.				
<u>PRESENT CONDITION</u> was quite fair.				
<u>DIGESTIVE SYSTEM.</u> no appetite. B. regular				
<u>CIRCULATORY SYSTEM</u>				
<u>RESPIRATORY SYSTEM.</u> } 176.				
<u>NERVOUS SYSTEM.</u> States he doesn't sleep well.				
<u>G.U. SYSTEM.</u> 20y.				
<u>LOCAL CONDITION.</u> wd well healed & no disability now.				
Treat. Folic baths & Bitter Tonic etc.				
13-1-19	Bounded and C.C. - 1200. <i>PF</i>			

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

Station
and Date.

10.0.0

MEDICAL BOARD REPORT ON A DISABLED OFFICER.

(ALSO TO BE USED FOR DISABLED NURSES.)

Station C.C.O.H. Matlock Bath, Derbys.

Date 13-1-19.

- 1. Rank and Name LIEUT. ALMOND; ERIC,
- 2. Unit C.F.A. Art.R.D. Camp Borden.
- 3. Age 23 4. Total Service 42 Mos. War Service { (a) at home 6 Mos.
(b) abroad 21 Mo. (France).
- 5. Address C/o. Col. J.M. Almond, 44 Princess Gardens, S. Kensington, S.W.

STATEMENT OF CASE.

NOTE.—In answering the following questions the Board will carefully discriminate between the officer's statements and evidence recorded in his medical documents. When possible, a statement by his medical attendant should be attached.

- 6. Disability APPENDICITIS.
- 7. Date of origin of disability 30-10-18.
- 8. Place of origin of disability France.
- 9. Give concisely the essential facts bearing on the history of the disability (personal and family history, etc.):—

NOTE.—Boards subsequent to the first should record here the progress of the case since the officer's last appearance.

Sudden onset. Admitted to C.C.S., - operation same day. Gangrenous perforated appendix removed - drainage. To 20th General Hospital 6-11-18 condition good. To Hyde Park Hospital, Plymouth 9-11-18. Wound healed 20-11-18. Transferred to I.O.D.E., 9-12-18. Good recovery. To C.C.O.H., 10-1-19.

OPINION OF THE MEDICAL BOARD

NOTES.—(i) The Board will on no account inform the officer of its opinion on any of the following questions.

- (ii) Clear and decisive answers should be filled in by the Board to enable the Ministry of Pensions to come to a reliable decision on the officer's claim to pension, etc.
- (iii) Expressions such as "may," "might," "probably" should be avoided, if possible.
- (iv) When there is more than one disability the replies will distinguish between them.

- 10. Was the disability contracted (a) before entering the service? No.
(b) in the service? Yes.
- 11. Was it attributable to military service? Yes.
If so, to what specific military conditions is it attributed? Service exigencies.

[Enteric Fever, Dysentery, Malaria, etc., contracted on service in countries where there is a special liability to the disease are to be regarded as attributable to military service.]

- 12. If not attributable to, was it aggravated by, military service? N.A.
If so, by what specific military conditions? N.A.

- 13. Is it attributable to, or aggravated by, the officer's own negligence or misconduct? If so, in what way, and to what extent? No.

I concur in the findings of the Board of Medical Officers
of the Board of Medical Officers
captain P.A.D.M.S.
for Canadians.

14. What is the officer's present condition? General condition good. Heart and Lungs sound. States appetite is poor and does not sleep well. Wound of operation well healed, no hernia and abdominal musculature good. In view of the nature of the operation, the board recommends 1 month's Home Service before being fit for General Service.

15. To what degree is the officer disabled at the present time? _____

(Degrees of disablement should be expressed in the following percentages—100, 80, 70, 60, 50, 40, 30, 20, under 20, or nil.)

16. Is the disability permanent? No.

17. If not permanent, how soon is re-examination recommended? One months.

18. Is it necessary that the officer should be re-examined by the same Board? No.

19. What treatment is the officer receiving, and where, and from whom? Tonic baths at C.C.O.H. Matlock Bath, Derbys.

20. Is the officer in need of special medical treatment of any kind, and, if so, of what nature? No.

21. Does the officer require the constant attendance of another person? No.

22. Officers will be classified by the Medical Board under one of the following categories, the probable period of unfitness for the higher categories being stated. Explanation of these categories is in para. 5 of A.C.I. 158/1918. In case of nurses, omit B. and (i) and (ii) of E.

- | | |
|---|-----------------------|
| A.—Fit for general service | <u>No. One Month.</u> |
| B.—Fit for service in a garrison or labour unit abroad | <u>No. One Month.</u> |
| C.—Fit for home service:— | |
| (i) Active duty with troops | <u>Yes.</u> |
| (ii) Sedentary employment only | <u>N.A.</u> |
| D.—For admission to a command depot | <u>N.A.</u> |
| E.—Requiring indoor hospital treatment:— | |
| (i) In an officers' military or auxiliary convalescent hospital | <u>N.A.</u> |
| (ii) In an officers' hospital | <u>N.A.</u> |
| F.—Permanently unfit for any further military service | <u>N.A.</u> |

23. In the case of officers suffering from neurasthenia found permanently unfit, has A.C.I. 307 of 1918 been complied with? _____

G.H.R. Gibson, Major.C.A.M.C. President.

W.J. McAlister, Major.C.A.M.C.

Bruce Cannon, Capt.C.A.M.C. } Members.

"C".

Sheet 3.
~~Temporary~~

Casualty Form - Active Service.

Regiment or Corps..... *C.F.A.*

Rank *Lieut* Surname *Almond* Christian Name *Eric*

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>5-10-18</i>	<i>Boulogne A.M.H.U.</i>	<i>Arr. as Reinf. r 20.5.18 Can</i>	<i>Art Pool</i>	<i>5-10-18</i>	<i>See lines 9339 (A.G.B) of 3¹⁰/₁₈ K.R. 30419 L.R. (274) P.F. 0. 143</i>
<i>5-10-18</i>	<i>DO</i>	<i>Deases to be detached to CARD. Witley on return to France, and attached to Canadian Artillery Pool.</i>		<i>5-10-18</i>	<i>Auth: do: See 1st Bde. P.2.0. 116 d/14-10-18.</i>
<i>1.10.18</i>	<i>Can. Corps.</i>	<i>Posted to 1st Brigade C.F.A.</i>		<i>5-10-18</i>	<i>A.43 P.F. 0. 143</i>
<i>11.10.18</i>	<i>CCRC</i>	<i>Left for 1st Bde C.F.A.</i>		<i>11.10.18</i>	<i>NA 1615</i>
<i>1-10-18</i>	<i>Can. Cps.</i>	<i>Ceases to be detached to Canadian Artillery Pool on rejoining unit. 1st Brigade C.F.A.</i>		<i>6-10-18</i>	<i>A.43 d/1-10-18 See Part 2 Orders 116 d/14-10-18.)</i>
<i>17.10.18</i>	<i>CCRC</i>	<i>Left for 1st Bde C.F.A.</i>		<i>13.10.18</i>	<i>NR 1867</i>
<i>17.10.18</i>	<i>CRA 1 Coln H...</i>	<i>Joined 1st Bde. C.F.A.</i>		<i>14.10.18</i>	<i>list of Ratings. #14 KR 36330</i>

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered
(b) Signaller, Shoeing-Smith, &c (17591.) Wt. W 1887-P 1124. 1,000,000. 6/18. D & S. Form B/103. (E. 1256.) [P.T.O.]

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 From Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
30.10.18	10 C.F.A.	Appendixes Ad. No. to 1 Ch. CCS		30.10.18	436. 173156
9.11.18	42 CCS	do ad 3 1/8	L. 27 a. y.	5.11.18	436. 174016
6.11.18	20 Genl.	do Ad. 4 1/2	to England	6.11.18	43034. 173960
31.10.18	OC 106 de	To hospital - sick		30.10.18	13773
6-11-18	OC. AT. Ville de Liege.	Invalided, sick, and xxxxxx detached to C.A.R.D. Witley	- - - - -	6-11-18	W.3083 P.2.0.131
15-11-18	CARD	SOS adm to Hoop	Bordon	8.11.18	CARD 319
18-11-18	do	SOS to Ribde	Witley	10.2.49	
20-2-19	Can. Res. Arty	Attached from B.A.R.S.	Witley	10-2-19	Part II #51
3-3-19	B.R.A.	SOS from B.A.R.S.	Witley	24-2-19	Part II #62

Ad. Bennett Lt. for Lt.-Col., A. A. G.
Canadian Section, G. H. O. 3rd Echelon, B. E. F.

H. H. Starnes

G.C.C. Kinmel Park for return to Canada
Part II Order No. 7/5/19
SOS 26/4/19, G.C.C. Kinmel Park
Embarking for Canada Part II Order No.
J. L. R. Rampson Lt. Col.

CANADIAN EXPEDITIONARY FORCE

Certificate of Service

7.11.-4-38.

H.C.

ISSUED TO OFFICERS AND NURSING SISTERS

This is to Certify that (Rank)..... Lieutenant.....

(Name in full)..... Eric ALMOID.....

Enlisted in..... 55th Battery, C.F.A. as No 300315 (unner).....

CANADIAN EXPEDITIONARY FORCE, on the..... Fourteenth.....

day of..... September..... 191..... AND WAS APPOINTED to COMMISSIONED RANK

in..... Canadian Field Artillery.....

CANADIAN EXPEDITIONARY FORCE on the..... Thirteenth..... day

of..... April..... 191..... 8

He SERVED in CANADA,..... England and France with the 55th Battery
C.F.A., 8th Brigade C.F.A., 10th Brigade C.F.A., Canadian
Artillery Reg'tal Depot., and Brigade C.F.A., and 1st Brigade
C.F.A.

and was STRUCK OFF THE STRENGTH on the..... Twentieth..... day

of..... May..... 191..... by reason of..... General Demobilization.....

Dated at Ottawa, this..... Seventh..... day

of..... January..... 191..... 1920.

Wounded-7-8-18.

for
Director of Personal Services.

CANADIAN EXPEDITIONARY FORCE

Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

This is to certify that (Rank)

Name in full

Enlisted in

CANADIAN EXPEDITIONARY FORCE, on the

day of 191 AND WAS APPOINTED to COMMISSIONED RANK

in

CANADIAN EXPEDITIONARY FORCE on the

day of 191

He SERVED in CANADA

and was STRUCK OFF THE STRENGTH on the

day of 191 by reason of

Dated at Ottawa, this

day of 191

Director of Personal Services

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

M.D.4

DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block Letters) Almond, E.

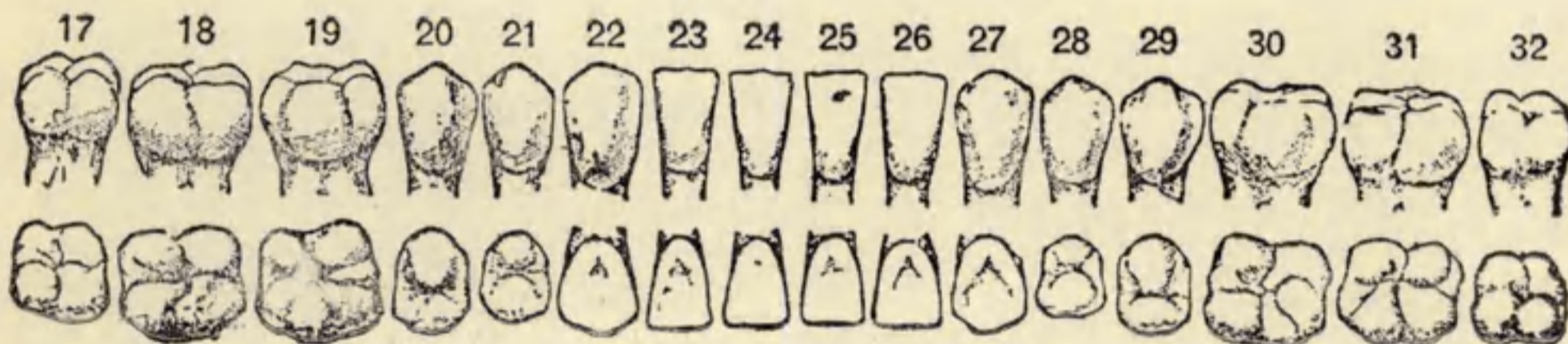
REGIMENT C.F.A. RANK Lt. No. _____

Date of Examination in England 15-4-19. Date of Examination in France _____

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

2. EXTRACTIONS

3. CROWNS

4. DENTURES

(a) Full Upper

(b) Part Upper

(c) Full Lower

(d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)

(a) In Canada

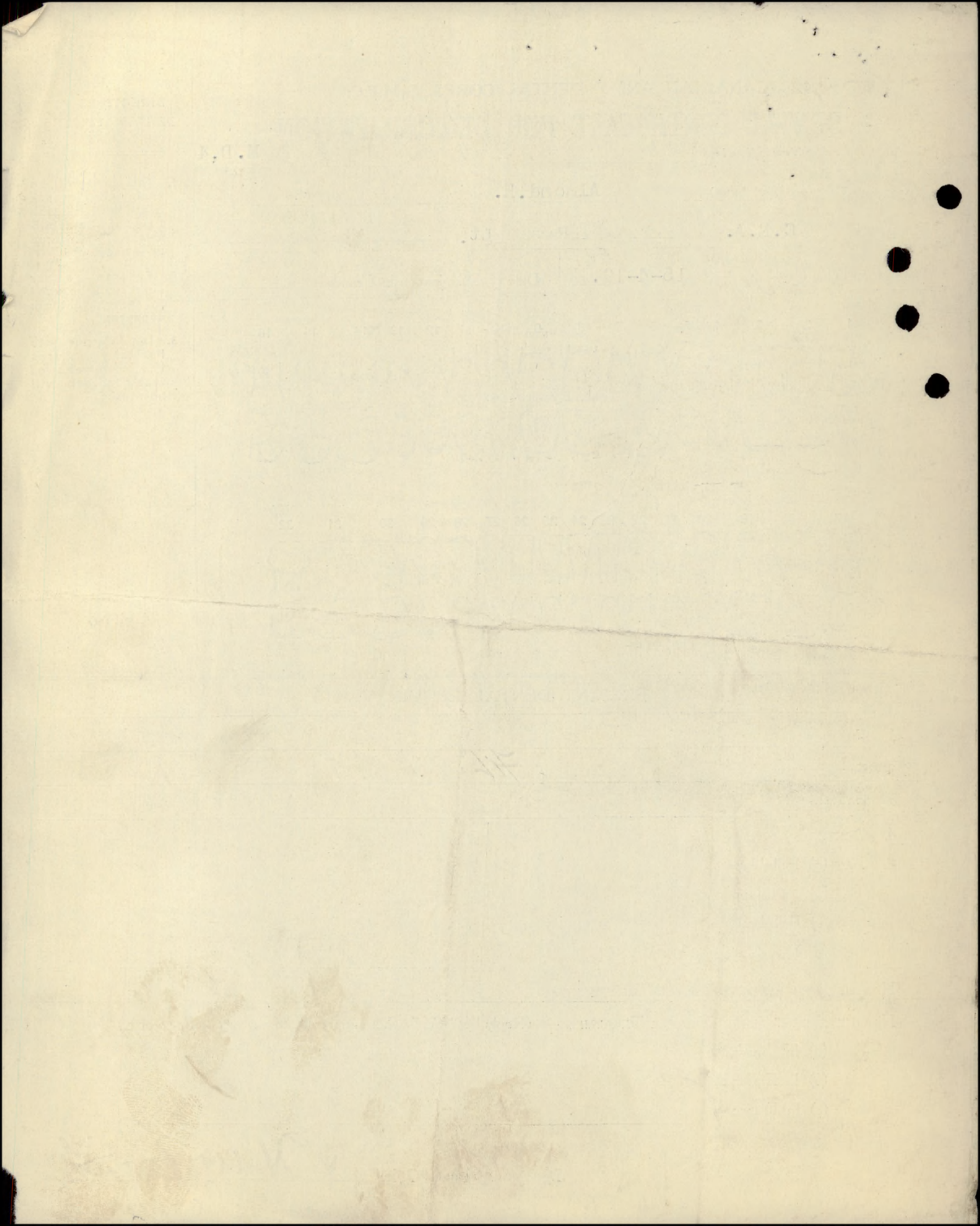
(b) In England Yes

(c) In France

KINMEL PARK, NORTH WALES.

Signature of Dental Officer

W. Reid
Capt.



Surname **ALMOND**
 Rank **300916 A/Sgt. CARD.**
 Promotion **T/Lieut.**

Christian Names **Eric.**

Name and Address of Next-of-Kin

Mrs. James Almond,
 Shigawake, Que. Canada.

M

Unit **Can. Art.**
 Place of birth **Shigawake, Que.**

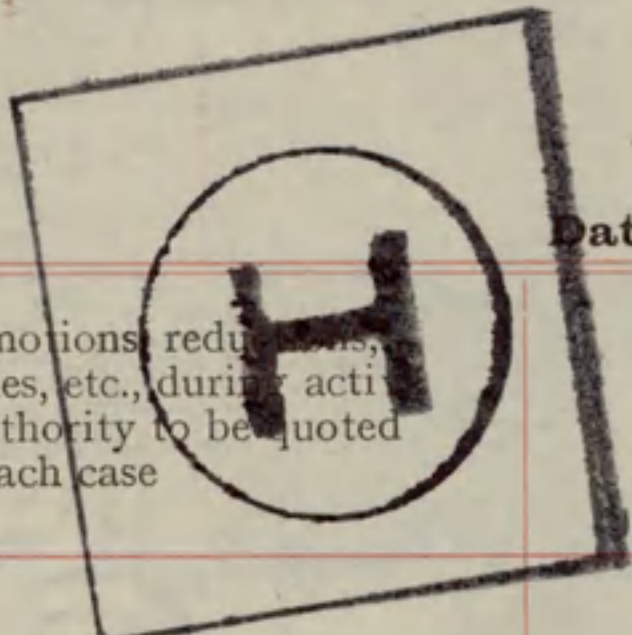
Also notify: Col. (Rev. Canon) J.M. Almond, C.M.G.
 Director Chaplain Services.
 Cleveland House, St. James Sq. S.W. 1

Married (Yes or No) **No.**

Appointments

Date of leaving Canada

Date and Cause of Resignation



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>24.4.18</i>	<i>NO</i>	To be Temp. Lieut. Can. Art.		<i>13.4.18.</i>	<i>Low Pay 30647.</i>
<i>18-4-18.</i>	<i>R.B.C.F.A.</i>	<i>Y.O.S.</i>		<i>13-4-18</i>	<i>Pt. II Ord. 108.</i>
<i>29.4.18</i>	<i>do</i>	<i>SOS on Proc of as Reim to C.F.A.</i>		<i>29.4.18</i>	<i>Pnd 119.</i>
<i>7.5.18</i>	<i>C.A.S.</i>	<i>TOS</i>		<i>1.5.18</i>	<i>Pnd 59</i>
<i>do</i>	<i>do</i>	<i>SOS to 2nd Bde C.F.A.</i>		<i>1.5.18</i>	<i>Pnd 59. TOS. 2nd Bde C.F.A. Pnd 50 7.5.18.</i>
<i>16.5.18</i>	<i>1st Bde C.F.A.</i>	<i>TOS on being posted from 2nd Bde C.F.A.</i>		<i>12.5.18</i>	<i>Pnd 46. Pnd 50 9.5.18.</i>
<i>12-8-18</i>	<i>B.A.M.S.</i>	<i>Adm. 2. Red X Hosp. Rouen</i>		<i>9.8.18</i>	<i>b.L. 1057. G.S.W. face, hand sev.</i>
<i>17.8.18</i>	<i>1st Bde. C.F.A.</i>	<i>Invalided to England (wd.) & detached to C.A.R.D.</i>		<i>10.8.18</i>	<i>Pt. II of 85.</i>
<i>17.8.18</i>	<i>C.A.R.D.</i>	<i>T.O.S. on postg. from 1st Bde. C.F.A. (on adm. to Hp.)</i>		<i>11.8.18</i>	<i>Pt. II of 229.</i>
<i>14.8.18</i>	<i>B.A.M.S.</i>	<i>Adm. 5th Southern Gen. Hosp. Portsmouth</i>		<i>11-8-18</i>	<i>b.L. 1059 G.S.W. face & hand sev.</i>
<i>24.8.18</i>	<i>do.</i>	<i>Adm. Can. Gen. Officers Hosp. Watlock Bath</i>		<i>2.9.18</i>	<i>C.L. 1086</i>
<i>7.9.18</i>	<i>C.A.R.D.</i>	<i>Shown on leave from 2-9-18 to</i>		<i>22-8-18</i>	<i>b.L. 1068 S.W. face hand R.</i>
				<i>23.9.18</i>	<i>Pt. II of 250</i>

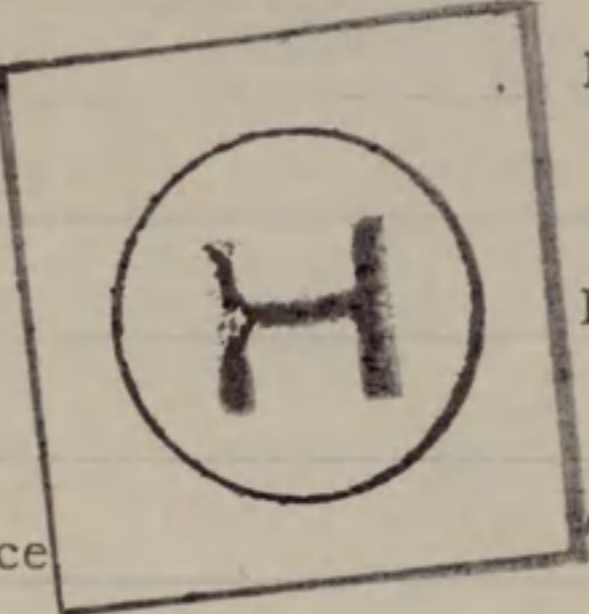
A.F.B. 103
 4-MAY-1918

A.F.B. 103
 20 AUG

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				
25.9.18	Res. B.C.F.A.	S.O.S. on posting from C.A.R.D.		24.9.18	Pt. II of 268 3. 103.
5.10.18	do	S.O.S. on proc. overseas to C.F.A. as reinf.		4.10.18	Pt. II of 2788 OCT. 1918
11.10.18	Can Art Pool	S.O.S.		5.10.18	Pt. II of 143.
11.10.18	do	S.O.S. on being posted to 1st Bde. C.F.A.		5.10.18	Pt. II of 143.
14.10.18	1 Bde. C.F.A.	ceases to be detached to C.A.R.D. on return to France & attached to C. Art. Pool		5.10.18	Pt. II of 116.
14.10.18	do	ceases to be detached to C. Art. Pool on returning to unit		6.10.18	Pt. II of 116.
16.11.18	do	Invalided sick & detached to C.A.R.D.		6.11.18	Pt. II of 131. A.F.B. 103.
15.11.18	C.A.R.D.	S.O.S. on posting from 1 Bde. C.F.A.		8.11.18	Pt. II of 319 22 NOV. 1918
12.11.18	A.M.S.	Adm. 4 S. Gen. Hosp. Plymouth		8.11.18	C.L. 1136, appendicitis
9.12.18	do	Adm. S.O.D.E. Hosp. 1 Hyde Park Place W.		8.12.18	C.L. 1159 "
12.12.18	do	Adm. Perkins Bull Hosp Putney S.W.		11.12.18	C.L. 1162 "
20.12.18	-do-	Adm. Can. Red Cross Ofrs' Hosp. 17 Audley St W		17.12.18	Ch 1169.
14.1.19	do	Adm. C.C. Officers Hosp. Matlock Bath		17.1.19	C.L. 1192
1-3-19	C.A.R.D.	S.O.S. to Res. Bde C.F.A.		11.1.19	C.L. 1187 "
28.3.19	R.B.C.F.A.	S.O.S. on transfer to M.D. wing 4 Kinnell Park for R.T.C.		24-2-19	Pt. II of 60
28.3.19				28.3.19	Pt. II of 87
12.5.19	4 M.D.C. wing Kinnell	Cease to be attached on proceeding to Canada		7.5.19	Pt. II of 111
		Sailed for Canada		7.5.19	Sailing 50

15894

IR.

Rank *Prov. Corp.* Name **ALMOND, Eric** Reg'l No. **300916**
 Unit **35th Bty, C.F.A.** If in perm. Corps, }
 What Unit? } Married or Single **Single**
 Place and Date of Enlistment **Valcartier, 14th Sept, 1915.** Place of Birth **Shigawake, Que. Can.**
 Name and Address, Next-of-Kin **Mrs James Almond,** *Notify COL (REV CANON) J.M. ALMOND, C.M.G.*
Shigawake, Quebec, Canada. *if Casualty.* **Relationship** *DIRECTOR CHAPLIN SERVICES,*
CLEVELAND HOUSE,
87 JAMES SQ SWI.
 Assigned Pay Monthly \$  Payable to
 Relationship
 Separation Allowance \$ Payable to
 Relationship
 Discharge, Date and Place Reason Character

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS.
Date.	From whom received.				
		<i>Arrived in England</i>	<i>1 2 MAR 1916</i>		A.F.B. 103 CHECKED Taken from Official Documents. <i>19 DEC 1916</i>
<i>23-4-16</i>	<i>adj. 11th H. Bde</i>	<i>App. Prov. Corp.</i>	<i>Whitley Camp</i>	<i>24/2/16</i>	<i>Pt II D.O. 51A, 63</i>
<i>25-5-16</i>	<i>..</i>	<i>S.O.S. Tpl. 8th Bde. 6.7.A.</i>	<i>..</i>	<i>25-5-16</i>	<i>Pt. II D.O. 83</i>
<i>25-5-16</i>	<i>adj. 8th Bde</i>	<i>S.O.S. 8th Bde 6.7.A.</i>	<i>✓</i>	<i>25-5-16</i>	<i>Pt II D.O. 141</i>
<i>12-7-16</i>	<i>8th Bde</i>	<i>Embarked for France</i>	<i>✓</i>	<i>13-7-16</i>	<i>Pt II D.O. 189</i>
<i>5.9.16</i>	<i>..</i>	<i>Conf in Ranks of Corp</i>	<i>Field</i>	<i>14.7.16</i>	<i>Checked A.F.B. 103. 27-7-16</i>
<i>21.6.17</i>	<i>8th Bde</i>	<i>S.O.S. Posted to 10th Bde</i>	<i>..</i>	<i>5-5-17</i>	<i>Pt II D.O. 67 + 10th Bde 90 d/21.5.17</i>
<i>26.11.17</i>	<i>10th "</i>	<i>Appointed as Sgt with pay</i>	<i>..</i>	<i>20.10.17</i>	<i>Pt II 179</i>
<i>8.12.17</i>	<i>6d R.P.</i>	<i>S.O.S. from 10th Bde</i>	<i>Witley</i>	<i>5.12.17</i>	<i>Rank amended to 274 29/1/17</i>
<i>27.12.17</i>	<i>10 Bde</i>	<i>about amended to read S.O.S. on trans to Reg. with draw of obtaining Com + pay in C.A.R.</i>	<i>Field</i>	<i>8.12.17</i>	<i>" 173</i>

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.				
19-4-18	CARD.	SOS on Report to Commission in Call. Artillery	a/s. Witley	12-4-18	PT 109 amended by PIA 0.127d/7.5.18

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. *6 Ra.*

Regimental No. Rank *Private* Name *Almond Eric*
C. E. F.

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

Date of promotion to } Date of appointment } Numerical position on }
present rank } to lance rank } 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				
<i>20/5/19</i>	M.H.Q. Ottawa	T.O.S. C.E.F. in Canada on General Demobilization	M.D. No. ⁴	<i>7/5/19</i>	C.E.F. R.O. No. <i>1977-19</i>
<i>(27/5/19)</i>	M.H.Q. Ottawa	S.O.S. C.E.F. in Canada on General Demobilization	M.D. No. ⁴	<i>20/5/19</i>	C.E.F. R.O. No. <i>1983-19</i>

D. J. ...

Lieut.

for Director Personal Services

(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.]

LAST PAY CERTIFICATE.

PARTICULARS.

1. L.P.C. Issued, date 22-4-18
2. Authority Dist B-53 19 4/18
3. Discharged to Comms. O.R. F.C.
4. Pay Book Verified 22-4-18
5. Balance shown on L.P.A. \$ 5.55³⁴
6. Balc. shown on Ledger Sheet \$ 5.31⁰¹
7. Full particulars of entries making difference between 5 and 6 if any:-

No.	Date	Unit and Particulars of Entry	Amount	
			Debit	Credit
<u>149</u>	<u>Apr 18</u>	<u>Wilford LS</u>	<u>24</u>	<u>33</u>
		<u>5.24³³</u>	<u>24</u>	<u>33</u>

8. Ass'd Pay Cancelled A₃M forms rendered 22-4-18
or

9. Sep. Allce. and Assd. Pay continued to dependent in
England and transf'd to Acc'ts Br. for payment

Davidson
Certified Correct.

A. Ashworth
Officer i/c Group "I"

EXAMINER

621

11/11/11

11/11/11

11/11/11

11/11/11

11/11/11

11/11/11

11/11/11

11/11/11

11/11/11

11/11/11

11/11/11

11/11/11	11/11/11	11/11/11
11/11/11	11/11/11	11/11/11
11/11/11	11/11/11	11/11/11

11/11/11	11/11/11	11/11/11
11/11/11	11/11/11	11/11/11
11/11/11	11/11/11	11/11/11

11/11/11	11/11/11	11/11/11
11/11/11	11/11/11	11/11/11
11/11/11	11/11/11	11/11/11

11/11/11

11/11/11

11/11/11

11/11/11

11/11/11

2nd Contingent

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

To Whom *Miss Jean Almond*
Address *245 Pine ave. w.
Montreal Que.*
Rate *\$ 20.00*

By Whom Assigned *Almond E.*
Regtl. No. *300916*
Rank *Gnr.*
Corps *35th. Battery c. f. a.*

MAR 1 1916

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>Consolidated Acct.</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March		<i>2/15887</i>	<i>20</i>	

1
1940

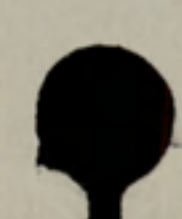
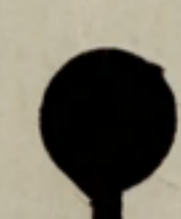
1
1940

1
1940

1
1940

1
1940

1
1940



2nd. Contingent

MILITIA AND DEFENCE

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

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.

Miss Jean Almond

Name of Soldier

Almond E.

PAYMENTS.

300916 - 35th. Batty. C.F.A.

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

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>\$20.00</i> MAR 1 1916
April	1916	<i>J 458</i>	<i>20</i>	
May		<i>K 3649</i>	<i>20</i>	
June		<i>L 6867</i>	<i>20</i>	
July		<i>M 7406</i>	<i>20</i>	
Aug.		<i>N 11678</i>	<i>20</i>	
Sept.		<i>O 15259</i>	<i>20</i>	
Oct.		<i>P 19647</i>	<i>20</i>	
Nov.		<i>Q 24749</i>	<i>20</i>	
Dec.		<i>R 32032</i>	<i>20</i>	
Jan.	1917	<i>S 35525</i>	<i>20</i>	
Feb.		<i>T 41473</i>	<i>20</i>	<i>20 (Jed)</i>
March		<i>U 47481</i>	<i>20</i>	<i>20 L</i>
April		<i>V 44</i>	<i>20</i>	<i>20 L</i>
May		<i>W 6089</i>	<i>20</i>	
June		<i>X 12672</i>	<i>20</i>	<i>20 W.</i>
July		<i>Y 19560</i>	<i>20</i>	<i>20 W.</i>
Aug.		<i>Z 26706</i>	<i>20</i>	<i>20 W.</i>
Sept.		<i>1 34080</i>	<i>20</i>	<i>20 W.</i>
Oct.				<i>20 W.</i>
Nov.				<i>20 W.</i>
Dec.				<i>20 W.</i>
Jan.	1918			<i>20 W.</i>
Feb.				<i>20 W.</i>
March				<i>20 W.</i>
April				<i>20 W.</i>
May				<i>20 W.</i>
June				<i>20 W.</i>
July				<i>20 W.</i>

096 960

380

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.				

IR.

Rank

Name

ALMOND, Eric

Reg'l No. 300916

P-56

Unit

35th Bty, C.F.A.

If in perm. Corps, }
What Unit? }

Married or Single **Single**

Place and Date of Enlistment

Valcartier, 14th Sept, 1915.

Place of Birth

Shigawake, Que. Can.

Name and Address, Next-of-Kin

Mrs James Almond,

Shigawake, Quebec, Canada.

Relationship

Assigned Pay Monthly \$ 20⁰⁰

Payable to

Miss Jean Almond, 245 Pine Ave. W.,
Montreal, Que.

Relationship

Separation Allowance

Payable to

Relationship

Discharge, Date and Place

Reason

Character

Date		No. of Days	PAY		Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To		Rate	Amo	No. of Days	Rate	Amount			No.	Date						
	Feb 29															16 90 Bal. from Canada	
17 Mar	31	31	1 ⁰⁰	31 00	31	10	3 10	34 10			9 73	20 00	29 73	21 27		Checked L.S.	

BALANCE TRANSFERRED TO NEW LEDGER.

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						

100% Balance of FA. 03

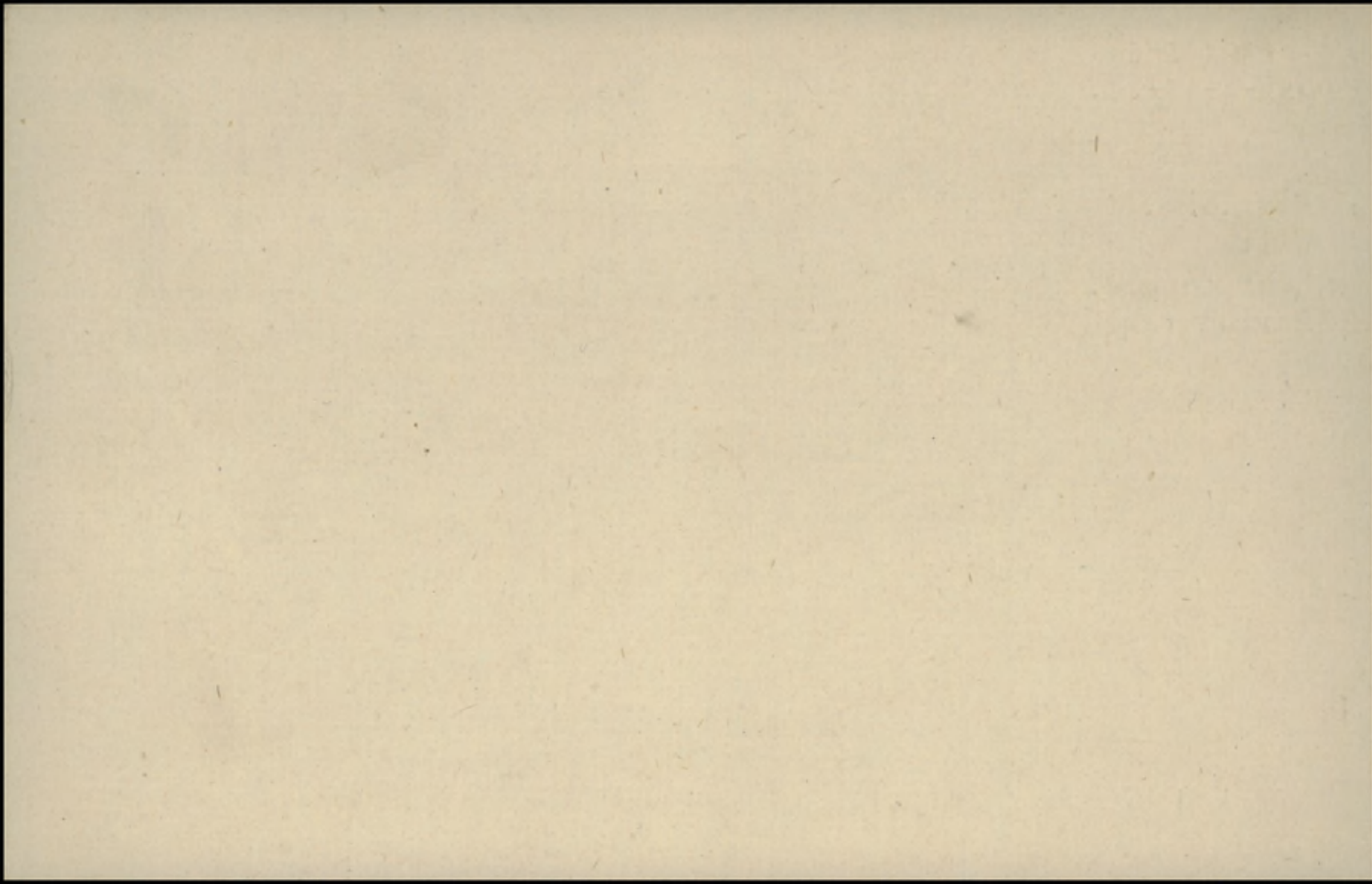
A.G. 10425-5M.

6055-8-12-17.

Name Almond E. File No. 8-a.603
Regt. No. 300916. Rank bpl
Unit Can Art.
Sent to W.O. 16/4/18. List No. 368
Action taken To be lieutenant.

Effective 13-4-18
Gazetted date 24/4/18 No. 30647 Page 4961
G.O.G. Orders _____ No. _____ Date _____

Checked by _____ Date _____



C.E.F.

ALMOND, Eric

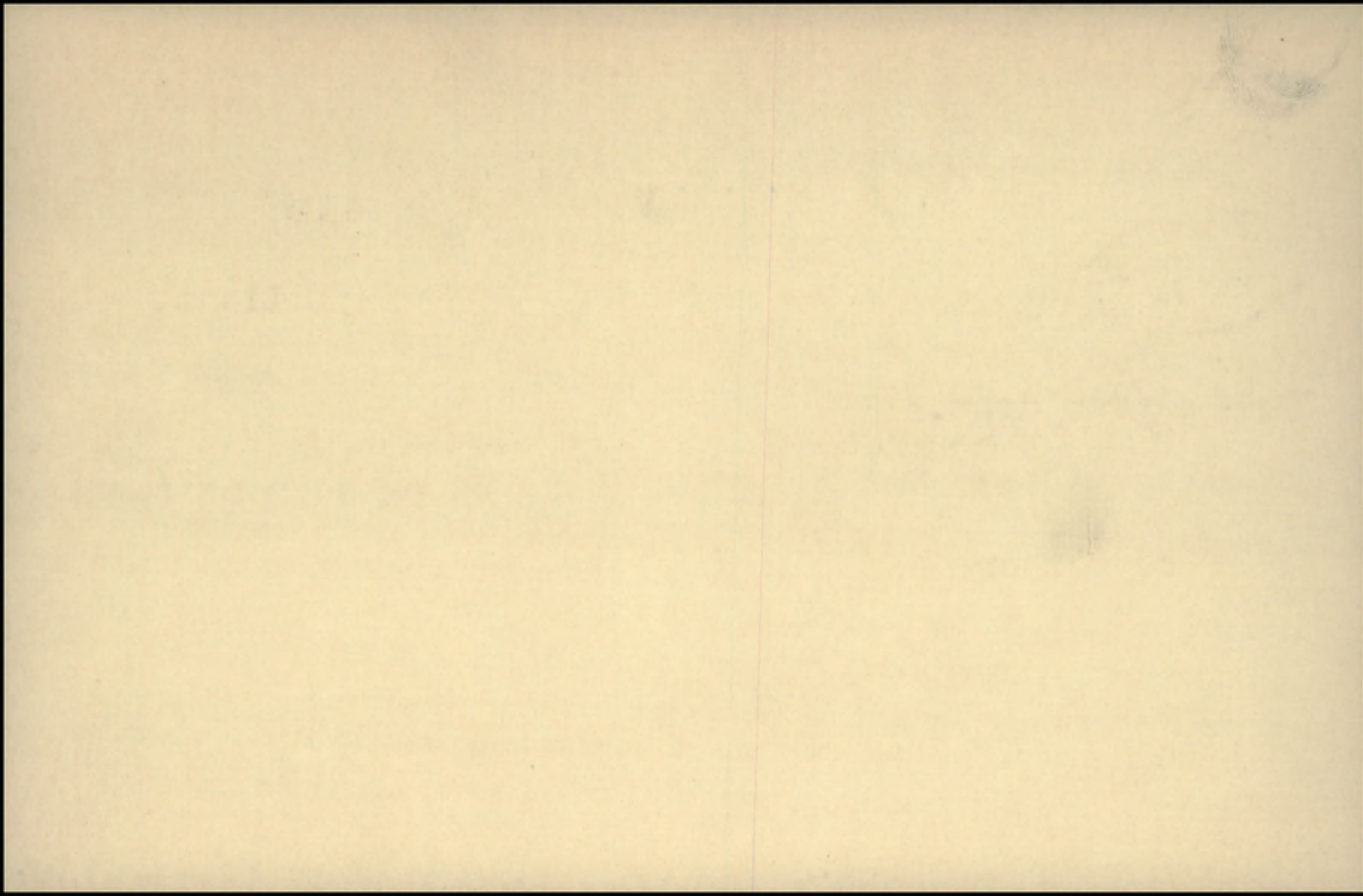
Lieut.

Medals prev desp.: ?

Cross to widow: Not eligible (Married subsequent to disch

Cross to mother:

*Hold pending application
25/11/53*



No. ~~300835~~ RANK *Pte.*

NAME *Almond. E.*

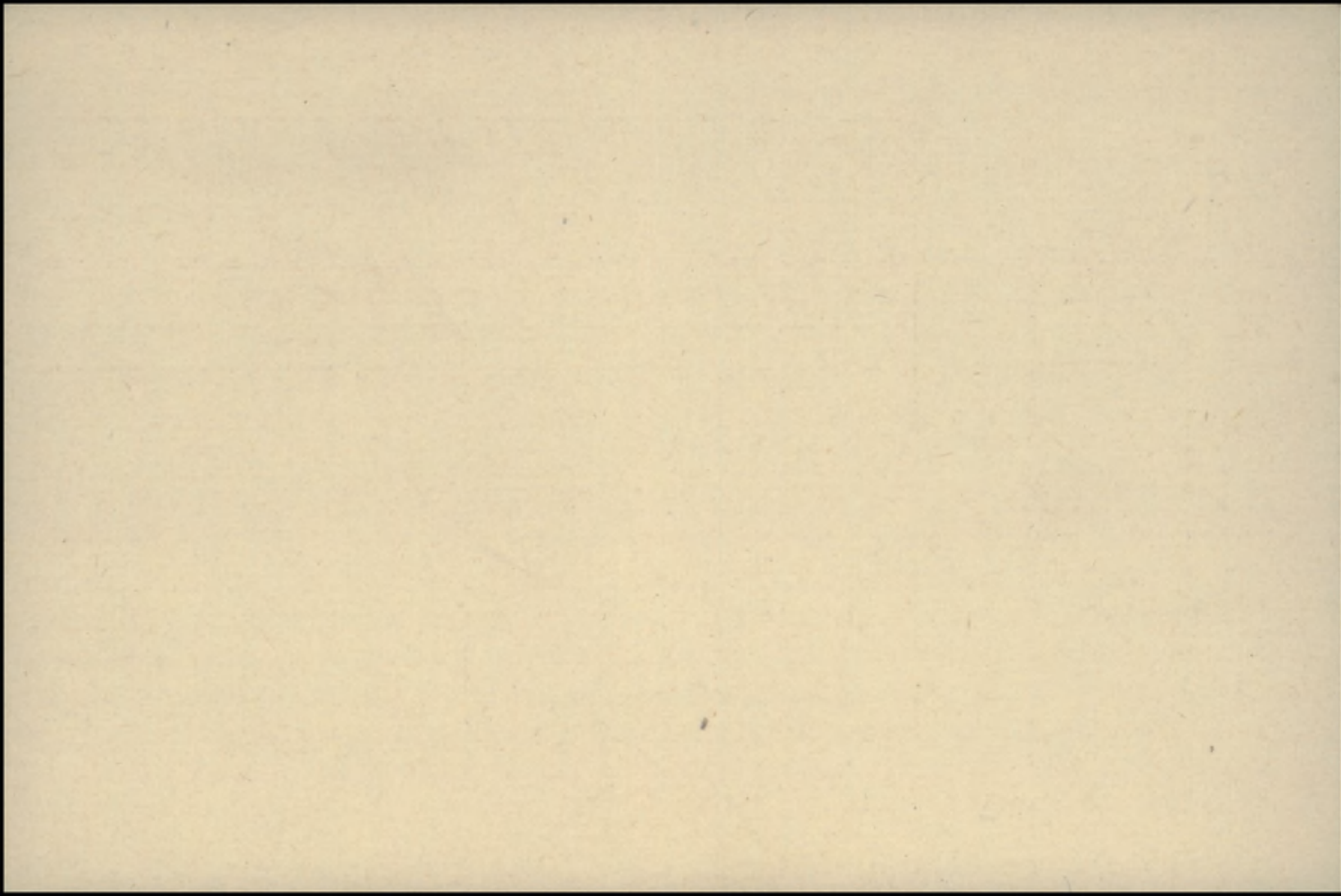
T. O. S. *1-10-15.*
2013 of 10-10-15.

UNIT

33rd Battery *C. 7. a. 11th* Howitzer Brigade
Jan *P. S. 200916*

M. D. *4*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915</i> <i>Oct. 1</i>	<i>1915</i> <i>Oct. 31</i>	<i>✓</i>		
	<i>Nov.</i>	<i>✓</i>		
	<i>Dec.</i>	<i>no</i>		
	<i>1916</i>			
	<i>Jan.</i>	<i>no</i>		



ne ALMOND ✓ Rank Lieut. ✓

Reg. No.

Unit C.F.A. 1st Bde.

Col. (Rev. Canon) J. M. Almond (CMG)

Next of Kin Canada also notify

Director Chaplain Services
Cleveland House St. James
Square S.W. 1

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918	Rep 29339	Wounded				
9-8	2 Red Cross Hosp.	Rouen (WO)	GSW. Face & Hand Sev.	1059	0748	13/18
11-8	5th Ho. Gen. Ho.	Portsmouth (23852)		1059	0766	
22-8	Can. Conv. Ho.	Med. Bldg S.W. France	Hand (24122)	1068		
2-9	Discharged	7003		1086		

Name **ALMOND**
*Eric*Rank **Lieut**

Reg. No.

Unit / Bde. **CFA**also notify: Col (Rev. Canon) J. M. Almond C.M.G.Next of Kin *Canada*Director Chaplain Services
Cleoland House, St. James Sq.
S.W. 1.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918 8-11	4th Southern Gen	Plymouth	AFW 3026	1138		
			Appendicitis			
8-12	to Studebaker 7001			1159		
11-12	to Ball's 7001			1162		
17-12	Canadian Red Cross Hosp. 17 Ave. St. W. 7001			1169		
1-1-19	to Studebaker 7001			1184		
17-1	Discharged 7003			1192		

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

1057	2 Red Cross: Rowen	7-8-18	Esophage. Hand, sev
1059	^{4th} 5 th South Gen Portsmouth	11-8-18	" " " " & " "
1068	Can. Convo Office: Nat. Bath	22-8-18	" " Trac. Hand R
1086	Disc	2-9-18	Esoph. " "
1136	4 th South Gen: Plymouth	³⁰⁻¹⁰⁻¹⁸ 8-11-18	Appendicitis
1159	IOPE; Hyde Park Place	8-12-18	"
1162	Perkins Bull: Putney SW	11-12-18	"
1169	Can. Rlo Office: 17 Audley St	17-12-18	"
1187	Can. Convo Office: Natlock Bath	11-1-19	"
1192	Disc	17-1-19	"

NAME

Almond, Eric

REGT'L No.

(# ~~340716~~)

RANK AND CORPS

Lieut.

P. Bde. C. Sta. To...

H. Q. FILE No. 649.

CABLE

NO.

DATE

NATURE OF CASUALTY

FOLLOWS

No.

*4 Bty.
35
11th Bde.*

FOLLOWS

<i>W.A. Mrs. James Almond (R.N.S.) Shigawake, P.O. D766.¹⁵⁻¹</i>	<i>13-8-18.</i>	<i>Adm. 2 B.R. Co. H. Rouen. Aug 9th / 18. G.W. face, hand, sev. ✓</i>
---	-----------------	---

MEDICAL CASE SHEETS.

(Form to accompany when forwarding to Medical Research Committee.)

This form is to be completed, and is to be sent with all Case Sheets (however few in number) forwarded to the Medical Research Committee (Statistical Section), British Museum, Montague Place, London, W.C.1.

All Case Sheets are to be sent, whether considered of interest or not, and should be despatched once a month.

No Case Sheets to be sent until three months after the patient's discharge.

Name or designation of Hospital

COCK

Matlock Bath Derby

Command

Northern

No. of Sheets forwarded

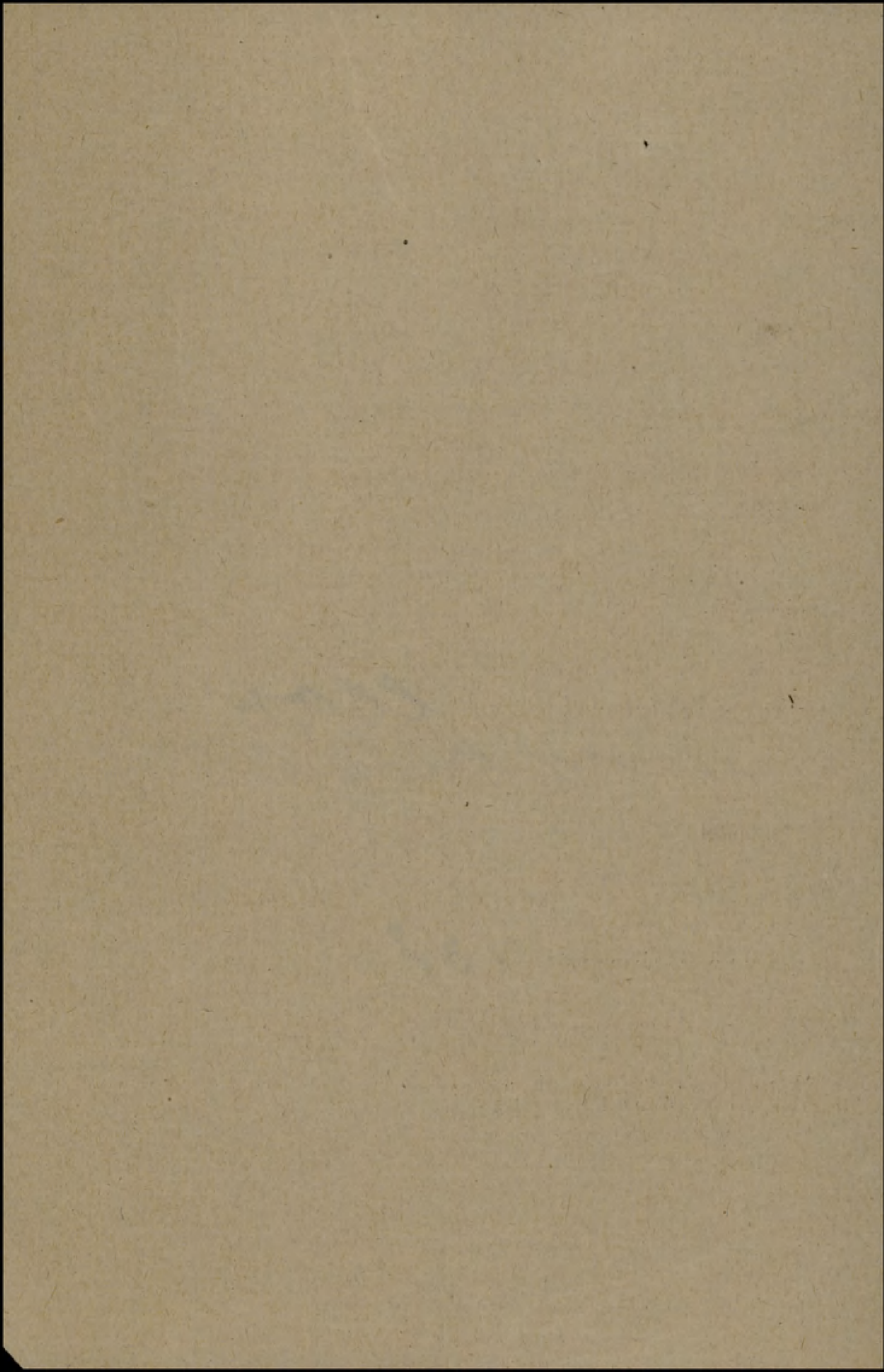
138

Period covered by Case Sheets
(i.e., earliest and latest dates
of completion)

Jan 1st 1919
" 31st "

Date

Officer in charge.



Surname. Christian Name.
 ALMOND E.
 Rank. Unit.
 Lieut. 1st.Bgde. C.F.A.

Date of admission.
 No.2 Red Cross Hospital, Rouen. 9-8-18.
 Hosp. 15th. South. Gen. Hosp. Portsmouth 11-8-18.
 Canadian Officers Conval. Hosp. Matlock. 22-8-18.
 H.S. to 4th. South. Gen. Hosp Plymouth 8-11-18.
 Transferred Hosp.
 I.O.D.E. Hospital, Hyde Park Place. 8-12-18
 Perkins Bull Hospital, Putney S.W. 11-12-18
 Canadian Red Cross Offs. Hosp. London 17-12-18
 Canadian Conval. Offs. Hosp. Matlock 11-1-19.

..... Hosp.

Diagnosis. G.S.W. Face, Hand severe.
 G.S.W. Fract. rt. Hand. *and*
 Appendicitis. *pu*

Later diagnosis.

Discharged: -2-9-18.
do. 17-1-19
 Date.

Disposition.
 12-8-18 1057-5.
 14-8-18 1059-5.

 24-8-18. 1068-2.
 14-9-18 1086-4.
 12-11-18 1136-3.
 9-12-18 1159-2.
 C.L. 12-12-18 1169-3.
 C.L. 20-12-18 1187-4.
 C.L. 14-1-19 1192-4.
 C.L. 20-1-19
 C.L.
 C.L.
 C.L.
 C.L.

Remarks.

A.M.D. 2 DEPT.

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

Surname

Christian Name

Reg. No.

ALMOND

E

Rank

Unit

Lieut.

C.F.A.

MEDICAL BOARD held at

Date

Serial No.

(1) **Buxton Area.**

23-8-18.

Other Medical Boards at

Date

Serial No.

Matlock Bath

13-1-19

(2)

(3)

(4)

(5)

Condition found by Board

SW.Hand.& Face. Flesh Slt. Appendicitis.

Disposition Recommended

(1) **Fit for General Service.**

Fit Home ser.unfit G.D.&.G.S. 1 month.

(2)

(3)

(4)

(5)

PENSIONS & CLAIMS BOARD held at

Date.....

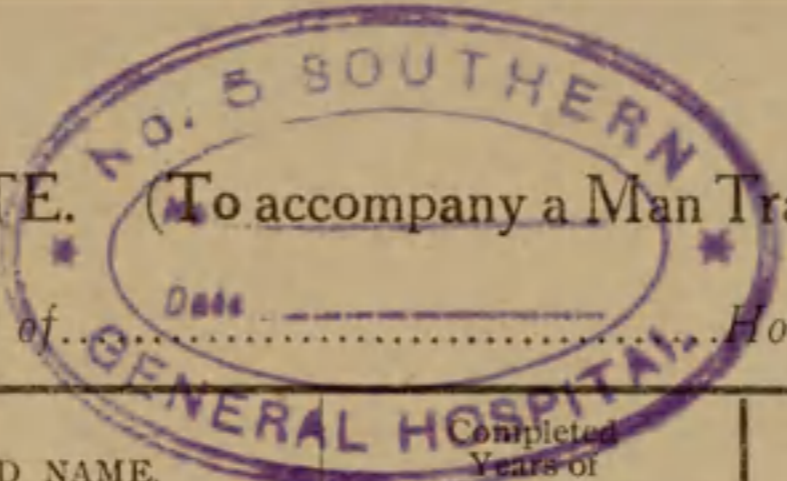
Disposition

Remarks

MEDICAL TRANSFER CERTIFICATE. (To accompany a Man Transferred from one Hospital to another).

Army Book 172.

Extract from Admission and Discharge Book of 0000 Hospital at PORTSMOUTH Date 21/8/18



No. of Case.	Regiment or Corps.	Troop or Company.	Regt. No.	RANK AND NAME. Surname first. If Married, write "M" under name.	Completed Years of			DATES.		Religion.	DISEASE. (a) Primary. (b) Secondary. (c) Operations.	Destination on Transfer, and to what Hospital or Ship Transferred.
					Age last birthday.	Service.	Service in the command.	Admitted into Hospital.	Transferred.			
COT EF 9/11.	Com. Field Artillery 4 Bty.			ALMOND. Lieut. E.	22	3 1/2	1 1/2	11/8/18	21/8/18	E.	Shell Wad perforating upper lip (R) index finger.	Officers Con. Hosp. Nantock Bath Derbyshire

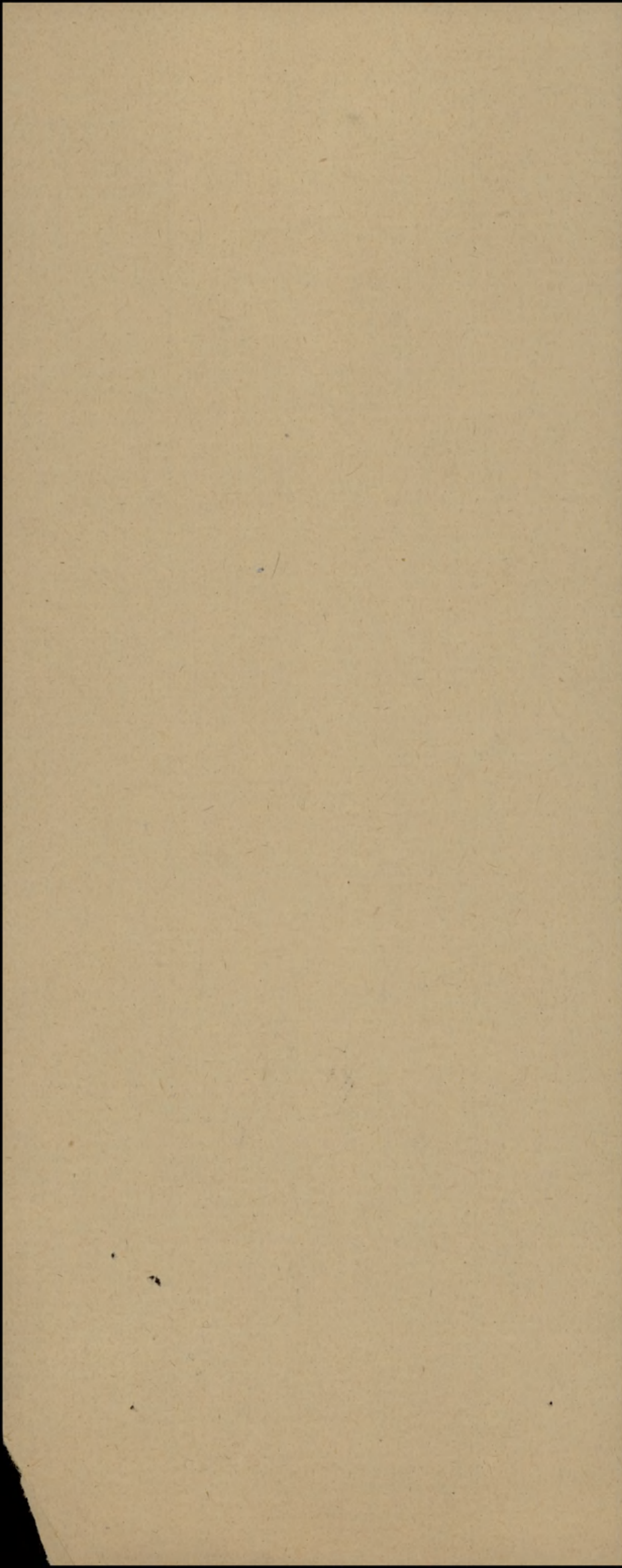
State whether the Patient

- (a) Was transferred from an Expeditionary Force..... Yes
- (b) Has already been granted 10 days' furlough..... No
- (c) Was admitted whilst on short leave from Overseas..... —
- (d) Was admitted from a Home Service Unit..... —

State here briefly reasons for Transfer, and note any particulars of Case for information of Medical Officer.

E. D. Taylor

MAJOR R.A.M.C.(T.) FOR
OFFICER I/C 5TH SOUTHERN GENERAL HOSPITAL
Medical Officer in Charge.



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

Mar. 1/16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

20			
----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. 300916
 Rank *9th nr.* Promoted *Emp. Lieut. 13/4/18* Reverted Discharge
 Soldier's Name *Almond*
 Battalion *35th Battery Q.F.A.*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *Miss Jean Almond*
 Address *245 Pine Ave.*
 Change of Address *Montreal Que.*
 1 *126 Durocher St*
 2 *Apt 14 - Montreal Que*
 3 *7-2-18 JOL*
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Sept 30, 17			380	380	
Oct.	C 50821		20	20	
Nov.	D 51978		20	20	
Dec.	C 62324		20	20	
Jan/18	C 65371		20	20	
Feb	B 91917		20	20	
March	G 99140		20	20	
April	G 8903		20	20	
May	A 11863		20	20	
			<u>\$540⁰⁰</u>	<u>\$540⁰⁰</u>	

REMARKS 273-8-8
 I. Lieut- 13/4/18. Auth. S-9 Vol x1 B53-19/4/18.
 Pro. soldier taking Commission noted 14-6-18
 B91917 cancelled for add. not cancelled mailed 23/2/18 to Pine Ave. *J. Almond*

262
12/10/18
22/11/18

M. F. W. 128
400M-6-17-1772-39-1141
L. L. 22320-M. & D. 7583.



CERTIFIED CORRECT.

9 AUG 1916

Certified Correct. O.K. RH. 2-25-91 Ref. file to 1101/607
K28. 3117
Fill in Only.—Unit, Number, Rank and Name.

M. F. W. 54.
150M. 10-15.
H.Q. 1772-33-320.

Casualty Form—Active Service.

Unit, Regiment or Corps 35th OVERSEAS BATTERY C.F.A., 11th Hown Bgde

Regimental No. 916 300833 Rank Lieut. Name Almond, Eric
C. E. F.

Enlisted (a) Sept. 14-15 Terms of Service (a) Duration of War and 6 months Service reckons from (a) Sept. 14-15

Date of promotion to present rank. } 24/2/16 Date of appointment to lance rank } 13/4/18 Numerical position on roll of N. C. Os. } 4630647

Extended _____ Re-engaged _____ Qualification (b) student

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				

<i>Embarked Canada</i>	<i>Feb. 26-16</i>	<i>Disembarked England</i>	<i>March 13, 1916</i>		
		<i>Embarked for England</i>			
<i>Promoted</i>	<i>Prov. Cpl.</i>	<i>24/2/16</i>	<i>D.O. Pt. II 51^a</i>		
		<i>Embarked from Canada</i>	<i>St. John</i>	<i>26/2/16</i>	
		<i>Disembarked England</i>	<i>Plymouth</i>	<i>13¹²/3/16</i>	<i>Refuse</i>
<i>12-7-16</i>	<i>8th Bde</i>	<i>Embarked for overseas</i>		<i>13/7/16</i>	<i>for O.C. 8th Bgde. Pt. II D.O. 189.</i>
		<i>Promoted Prov. Cpl.</i>	<i>Witley Camp</i>	<i>23/4/16</i>	<i>Auth:- Pt. II Orders #51a 23/4/16</i>
		<i>Landed in France</i>	<i>Harve</i>	<i>14/7/16</i>	
<i>24/8/16</i>	<i>Ob. Unit</i>	<i>Confirmed Corporal</i>	<i>Field</i>	<i>14/7/16</i>	<i>Letter Ref no. RH. 107/1178 P.I.O #197 d/5/9/16.</i>
<i>14/5/17</i>	<i>CRA</i>	<i>Trans to 10th Bde</i>	<i>Reggan's</i>	<i>5/5/17</i>	<i>a3/10 B213 d/12/5/17 P.I.O 67 d/21/5/17</i>

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

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
11-5-17	ERA	T.O.S. on transfer from 8th Bde CFA on reorganization	Field	6-5-17	A3/10 Ref AAG file S/290-90 Pt.11.0. 90 D/21-5-17
9-11-17	Unit	Appointed acting sergeant with pay		20-10-17	B 213. Part II.0. 179. d 26-11-17
24-11-17	Unit	Granted Leave of Absence		21-11-17	B 213 Part II.0. 183 30-11-17
24-11-17	M.S. To C.O.C	struck off strength on being transferred to Eng. with a view to obtaining a commission & posted to Can arty Regimental Depot. Witley		5-12-17	510/12836. & Can Corps No. 7-2.3. d 1-12-17. Ref File K8. 20220. R.I. II.0. 188 d. 11-12-17
					<p><i>Chas. B. Chapman</i> LIEUT. OFFICER i/c RECORDS CANADIAN SECTION G.H.Q. 3RD ECHELON</p>
8-12-17	CARD	To S from 10 th Bde	Witley	5-2-17	<p>Pt 274 & 10th Bde Pt 188 11/2/17 <i>P. Brumby</i> Lieut. for Colonel i/c Records, COMF</p>
8-12-17	CARD	on com of 9 (O.T.C) Witley	Witley	5-12-17	Pt 200. 274
19-4-18	SO	to Res Bde CFA SO	SO	13-4-18	<p>Pt 450 109 of <i>W. Remaire</i> CAPT. & ADJT. For O.O. CAN. ART. REGIMENTAL DEPOT.</p>
18-4-18	O.C Res Bde C.F.A	T.O.S. from CARD having been appointed temporary commission	Witley	13-4-18	B 0 Pt II 108
24-4-18	W.O	To be Temp Lieut Can Art		13-4-18	L.C. 30647

Lieut Eric Almond

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				
11 ⁵ /18	OC. - 1st Bde.	joined unit.	Field.	10.5.18.	B 213,
7.8.18	1 C.F. Amb.	SW. Face & Rt. hand ad. to CCS.		7.8.18	a 36. 57543 - Pt. II. 084 D/1918
9.8.18	2 Red Cross	do do R.F. ad:		9.8.18	W3039 do
10.8.18	do	do do To England.		10.8.18	- do
> 10-8-18.	OC. A.T. "Guildford"	Invalided to England, wounded, and detached to Canadian Artillery Regt' 1. Depot, Witley - 10-8-18,			A.F.W. 3083 d/ 10-8-18. Pt. 2.0. 85 d/ 1918.
<i>Eric Almond</i>					
17.8.18	canon	T.O.S on Evacuation	Witley	11.8.18	Part # 20 229
7.9.18	Do.	Leave to 25.9.18	Do	22.9.18	" " " 250
24/9/18	Do	S.O.S. to Res. Bde C.F.	Do.	24.9.18	" " " 269 J.M. Jackson. LIEUT. OFFICER i/c RECORDS,
25.9.18	RB 62a	S.O.S from C.A.R.A	Witley	24.9.18	Bob 368
5-10.18	R.B.C.M.	Proceeded to C.F.A	Witley	4.10.18	Bob 278 W. H. H. H. LIEUT. & ABST. ADJUTANT, RESERVE BRIGADE, CANADIAN FIELD ARTILLERY.

Sheet 2.
 Fill in only.—Unit, Number, Rank and Name.

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

500M.—9.16
 Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps *35th Bty CFA, 11th How Bde.*

Regimental No. Rank *Lieut* Name *Almond Eric*

Enlisted (a) Terms of Service (a) *Duration + 6 years* Service reckons from (a)

Date of promotion to present rank } *13/4/18* 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				
<i>29.4.18</i>	<i>Res Bde CFA</i>	<i>Proceeded Overseas to CFA.</i>	<i>Witley</i>	<i>29/4/18</i>	<i>RD Pt II 119</i> <i>A.E. Dolven</i> LIEUT. & ASST. ADJUTANT. RESERVE BRIGADE, CANADIAN FIELD ARTILLERY.
<i>1-5-18</i>	<i>A.M.L.O. Boulogne</i>	<i>Arrived France T.O.S. Can Army Pool</i>	<i>Can Army Pool</i>	<i>1-5-18.</i>	<i>Seemliness. 7499. (A.G.6)</i> <i>dy 27 7/18 K.R. 27727.</i> <i>K.R. 12340. P.O. Sq dy 7 5/18.</i>
<i>27-4-18</i>	<i>A.F.G.</i>	<i>Posted to 2nd Bde. C.F.A.</i>		<i>1-5-18.</i>	<i>K.R. 456. P.O. Sq dy 7-5-18.</i>
<i>27-7-18.</i>	<i>do</i>	<i>T.O.S. 2nd Bde. C.F.A. on being posted from Can Army Pool.</i>	<i>Field</i>	<i>1-5-18</i>	<i>K.R. 456. P.O. 50.</i>
<i>8-5-18.</i>	<i>B.C.B.D.</i>	<i>Left for 1st Bde C.F.A.</i>	<i>do</i>	<i>9-5-18.</i>	<i>NA. P.O. 1012/330.</i>
<i>12-5-18.</i>	<i>C.F.A. 1st Div</i>	<i>S.O.S. 9/estab. 2nd Bde. C.F.A. on being posted to 1st Bde C.F.A.</i>	<i>do</i>	<i>12-5-18.</i>	<i>A5-2-19. K.R. 26330.</i> <i>P.O. 53.</i>
<i>12.5.18</i>	<i>C.F.A.</i>	<i>T.O.S. 1st Bde. C.F.A. on being posted from 2nd Bde C.F.A.</i>	<i>do</i>	<i>12.5.18.</i>	<i>A5-2-19. K.R. 26330</i> <i>P.O. 46 8/16.5.18</i>

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

1086
31-3-33

PROCEEDINGS OF AN OFFICER OR NURSING SISTER
STRUCK OFF STRENGTH
OF THE
CANADIAN EXPEDITIONARY FORCE

9801

1. RANK *Private*

2. NAME *Almond, Eric*

3. UNIT *C. R. A.*

4. DATE STRUCK OFF STRENGTH _____ PLACE _____

5. REASON *Demobilization*
Sgt 687 Canada RD 1983-19
20/5/19

WAR SERVICE BADGE. CLASS "A" No.....

6. AUTHORITY _____

7. PROPOSED RESIDENCE *126 Durocher St.*
Montreal
Deceased 3-8-53

1. Triplicate Declaration Paper (M.F.W. 51), or Triplicate Attestation Paper (M.F.W. 23).
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. 5009a).
6. Proceedings on Striking off Strength (M.F.W. 2591)
7. Last Pay Certificate (P. 41)
8. War Service Gratuity Form (M.F.W. 2595).
9. Sundry Documents.

This folder should contain the following documents:

1. Declaration Paper, M. F. W. 51, or Attestation Paper, M. F. W. 23.
2. Casualty Form, A. F. B. 103 or M. F. W. 54.
3. Medical History Sheet, M. F. B. 313 or A. F. B. 178.
4. Proceedings of Medical Boards, A. F. A. 179 or M. F. B. 227.
5. Medical Report M. F. W. 129.
6. Dental History Sheet, M. F. B. 465.
7. Last Pay Certificate, M. F. W. 44.
8. Certificate as to Missing Documents.

Group..... *a*

Checked by No..... *22*

OPB

Date *6/5/19*

AR 214
Sheet 15

AUDITOR *[Signature]* PAYMASTER *[Signature]*

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

M. & R. S. *[Blank]* REGT. No. *[Blank]* RANK *Lieut* NAME (IN FULL) *ALMOND, ERIC*
 NEXT OF KIN *[Blank]* RELATIONSHIP *[Blank]* ORIGINAL UNIT C.E.F. *CJA* IF IN P.F. WHAT UNIT? *[Blank]* (BLOCK LETTERS SURNAME FIRST)
 ADDRESS *[Blank]* PLACE OF ATTESTATION *[Blank]* TRANSFERRED TO *[Blank]* DATE *[Blank]* AUTHORITY *[Blank]*
 ADDRESS *[Blank]* DATE OF ATTESTATION *15-9-15* TRANSFERRED TO *from file in Overseas* DATE *[Blank]* AUTHORITY *[Blank]*
 IS SEPARATION ALLOWANCE PAID? *No* DATE EFFECTIVE *7-5-19* ASSIGNED PAY \$ *Nil* DATE EFFECTIVE *[Blank]*
 TO WHOM PAID *[Blank]* RELATIONSHIP *[Blank]* ANY CHANGE IN ASSIGNEE OR ADDRESS *[Blank]*
 ADDRESS *[Blank]* STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE *[Blank]* EFFECTIVE *[Blank]*
 DISCHARGED *Sgt to P.M. Unit* PLACE *[Blank]* DATE *20-5-19* REASON *Jan. Draft No 1988* AUTHORITY *S-153/8* IF ENTITLED TO POST DISCHARGE PAY *[Blank]*

35

June

BALANCE FROM PREVIOUS ACCOUNT

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	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2				COL. NO. 3	DEBIT	CREDIT	DEBIT	
1919																		
June		3 ⁰⁰	93 00	37 90								51 70		51 70			37 90	<i>Balance 37 90</i>
			Other Credits	93 00								79 20		79 20				<i>93 00 - 10 84</i>
			W.S.C.S.A. Total	549 00								93 00		93 00			456 00	<i>37 70 over 11 days part Sol. Depant</i>
10/10/19				549 00								366 00		366 00			90 00	<i>1636 458</i>
30/10/19												90 00		90 00				<i>1646 990</i>

55 6/11/19
14-5-19

Formerly 300916 Cpl. 2
NAME.

ASSIGNED PAY.

UNIT.

RANK.

DATE

AUTHORITY

NAME OF

RATE OF P. AND A.

Beneficiary

Address

Amount.

Separation Allowance issued. Yes or No.....

ERA

Pay 2⁰⁰

F.A. 60

Messing 1⁰⁰

Lieut

19th 18

19th 18. 16th 18. 15th 18

Name

Almond

Initials

Eric

Bank

of Montreal
Trafsq

100⁰⁰ - Add. Outfit. d. 13⁴/₁₉

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
1918		1918-19						
	Apl 19 Outfit Allow	Direct	883				42.75	
25	Adv. £10 direct	Cash	1164			48 64		
29	P & A @ Lieut's rates from 13 th 18. Mess 19 th 18. Vo. 1313			58 80			10 13	
May 1	Pay May (R)			111 60				
8	Dr. Bal. from Pay II Vo. 1.					55 34		
13	A. P. Carr.						20	
24		Bank	2474			46 39		
June 1	Pay June (R)			108				
22		Bank	4063			108		
July 9	Pay July (R)			111 60				
24		Bank	5404			111 60		
Aug 1	Pay Aug (R)			111 60				
24		Bank	7030			111 60		
Sept 2	Pay Sept (R)			108				
17	Clothing on R. L'don. 4 th 18. List 135. Sept. vo. 1791.					60 35		
24		Bank	8930			47 65		
Oct 1	Pay Oct (R)			111 60				
17	Clothing on R. L'don. 2 th 18. (1. nap case) 14 th List 72. Oct. vo. 2159					3 41		
22		Bank	10667			108 19		
28	Add ^l Outfit Allow.		100					
		Bank				100		
Nov 22	Pay R & A. P. A. 12 th 18			140				
		Bank	12521			140		
Dec 11	Pay R.			124				
		Bank	13469			124		

ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF

RATE OF P. AND A.

DATE

AUTHORITY

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.....

b. R. a

Pay *2*
F.A. *1*
Messing *1*

Lieut.

Name

Initials

Bank

Almond
Eric
of Mount.
Traf. Sq.

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
<i>Jan 19</i>	<i>Pay R.</i>		<i>124</i>					
<i>Jan 24</i>	<i>Pay R.</i>	<i>Bank 15497</i>		<i>124</i>				
<i>Feb 13</i>	<i>Pay R.</i>	<i>Bank 16751</i>	<i>112</i>					
<i>Mar 12</i>	<i>Pay R.</i>	<i>Bank 18342</i>	<i>124</i>					
<i>Apr 24</i>	<i>Adv. P. & A. apl.</i>	<i>" 18651</i>		<i>120</i>				
<i>Apr 17</i>	<i>(Ar. assd)</i>	<i>Bank 407</i>		<i>100</i>				
<i>12</i>	<i>Pay (R)</i>		<i>120</i>					
<i>15</i>	<i>Adv. Outfit Allow. 134/19</i>	<i>100</i>	<i>293</i>	<i>100</i>				

Net to loan
At 6 to 30th Willey
1/2 to McEdey

Spd. from Dec. 10 to 12 - 14/19

MARRIED OR SINGLE *S.*

PLACE OF BIRTH *Shigawake, Que., Canada*

NAME AND ADDRESS OF NEXT OF KIN *Mrs. Jno. Almond,
Shigawake, Que., Canada.*

RELATIONSHIP OF NEXT OF KIN

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
<i>Promoted Pres. Corp.</i>	<i>24/2/16</i>	<i>D.O. I 51/16</i>
<i>App'd. 4/5/16 with pay</i>	<i>20/10/17</i>	<i>23/4/16</i>
<i>Confirmed Corp.</i>	<i>14-7-16</i>	<i>20/17-5-9-16</i>

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L No. *300916* RANK *Sgt* NAME *Almond Eric* 30.53

IF IN PERM. CORPS | WHAT UNIT | UNIT *11th Regt* | TRANSFERRED TO *5th Regt S.F.A.* | DATE *16/6/16* | AUTHORITY *25/5/16*

PERMANENT FORCE ALLOWANCES | TRANSFERRED TO *10 BUCFA* | DATE *1/8/17* | AUTHORITY *20/7/17*

PLACE OF ATTESTATION *Falcartier Camp* | TRANSFERRED TO *6th B.D.* | DATE *5/12/17* | AUTHORITY *27/2*

DATE OF ATTESTATION *September 14th 1915* | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY MONTHLY \$ *20.00* DATE EFFECTIVE *1/3/16*

PAYABLE TO *Mrs. Jean Almond, 245 Pine Ave., Montreal* RELATIONSHIP

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON

DISCHARGE DATE AND PLACE REASON AND AUTHORITY *Comm. DMSC 13-4-18*

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

20 SEP 1918

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1	2	3	4	1	2	3	4	CREDIT	DEBIT										
			\$	c.			\$	c.			\$	c.														No.	DATE				No.	DATE			
<i>Mar 31</i>	<i>31</i>	<i>31</i>	<i>31</i>	<i>310</i>												<i>1690</i>	<i>5100</i>							<i>20</i>		<i>2973</i>	<i>2127</i>				<i>Promoted Pres. Corp.</i>				
<i>Apr 30</i>	<i>30</i>	<i>2300</i>	<i>30</i>	<i>300</i>	<i>10</i>	<i>300</i>										<i>370</i>	<i>397035</i>	<i>7/4/16</i>	<i>6/4/16</i>	<i>23/4/16</i>			<i>2000</i>		<i>4433</i>	<i>1664</i>				<i>24/2/16. D.O. I 51/16 23/4/16</i>					
<i>May 31</i>	<i>31</i>	<i>3410</i>	<i>31</i>	<i>310</i>												<i>3720</i>	<i>103</i>			<i>253</i>			<i>20</i>		<i>3703</i>	<i>1681</i>									
<i>June 15</i>	<i>15</i>	<i>1650</i>	<i>15</i>	<i>150</i>												<i>18</i>							<i>20</i>		<i>20</i>	<i>1481</i>									
<i>June 30</i>	<i>15</i>	<i>1650</i>	<i>15</i>	<i>150</i>	<i>10</i>	<i>150</i>										<i>18</i>		<i>311</i>	<i>12/4/16</i>				<i>20</i>		<i>484</i>	<i>7494</i>									
<i>July 31</i>	<i>15</i>	<i>3410</i>	<i>31</i>	<i>310</i>	<i>10</i>	<i>310</i>										<i>3420</i>							<i>20</i>		<i>2430</i>	<i>3784</i>									
<i>Aug 31</i>	<i>15</i>	<i>3410</i>	<i>31</i>	<i>310</i>	<i>10</i>	<i>310</i>										<i>3420</i>							<i>20</i>		<i>3220</i>	<i>4284</i>				<i>1254</i>					
<i>Sep 30</i>	<i>15</i>	<i>33</i>	<i>30</i>	<i>3</i>	<i>10</i>	<i>3</i>										<i>36</i>							<i>20</i>		<i>2485</i>	<i>5099</i>									
<i>Oct 31</i>	<i>31</i>	<i>3410</i>	<i>31</i>	<i>310</i>												<i>3720</i>							<i>20</i>		<i>2485</i>	<i>6034</i>									
<i>Nov 30</i>	<i>30</i>	<i>33</i>	<i>30</i>	<i>3</i>		<i>3</i>										<i>36</i>							<i>20</i>		<i>2349</i>	<i>7285</i>				<i>7285</i>					
<i>Dec 31</i>	<i>31</i>	<i>3410</i>	<i>31</i>	<i>310</i>		<i>310</i>										<i>3420</i>							<i>20</i>		<i>3654</i>	<i>7348</i>				<i>7348</i>					
<i>1914</i>	<i>15</i>	<i>3060</i>														<i>3420</i>							<i>20</i>		<i>2485</i>	<i>8283</i>				<i>8283</i>					
<i>Jan 31</i>	<i>30</i>	<i>3720</i>														<i>3420</i>							<i>20</i>		<i>2436</i>	<i>9207</i>				<i>9207</i>					
<i>Feb 28</i>	<i>10</i>	<i>3360</i>														<i>3360</i>							<i>20</i>		<i>2436</i>	<i>9207</i>				<i>9207</i>					
<i>Mar 31</i>		<i>3720</i>														<i>3420</i>							<i>20</i>		<i>3919</i>	<i>9008</i>				<i>9008</i>					
		<i>44210</i>														<i>2060</i>	<i>49240</i>						<i>760</i>		<i>40267</i>										

Checked *L. J. Stewart*

