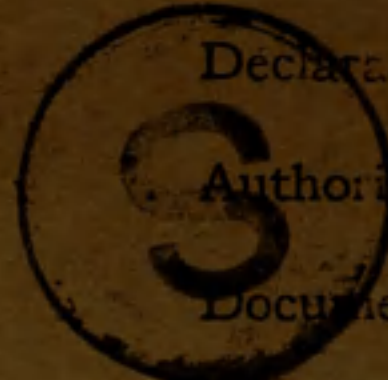
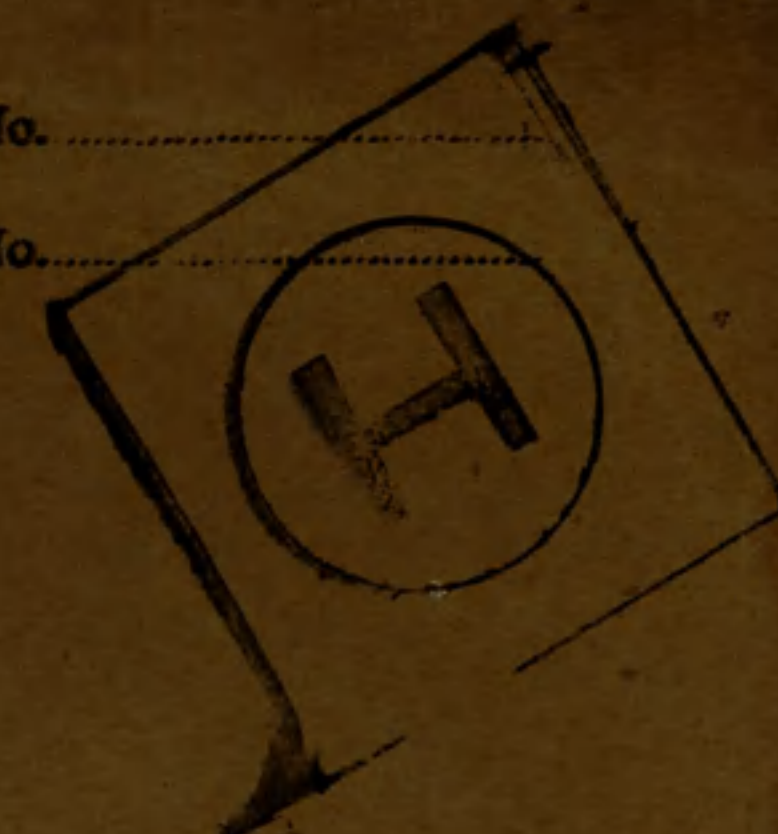


- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers..... 2
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet..... 1
- Compulsory Stoppages.....
- Casualty Forms.....
- Proceedings on discharge.....
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- Parchment Certificate.....
- Medical Report for Invalids.....
- Medical History Sheet..... 1
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet..... 1
- Clothing Transfer Certificate.....
- Inventory of Kit.....
- Last Pay Certificate.....

DISCHARGE DOCUMENTS

R. O. No.
H. Q. No.

34610



Name, BOYLE, Palmer
 Regt, No, 5344 Rank, SP4
 Corps, Can Eng

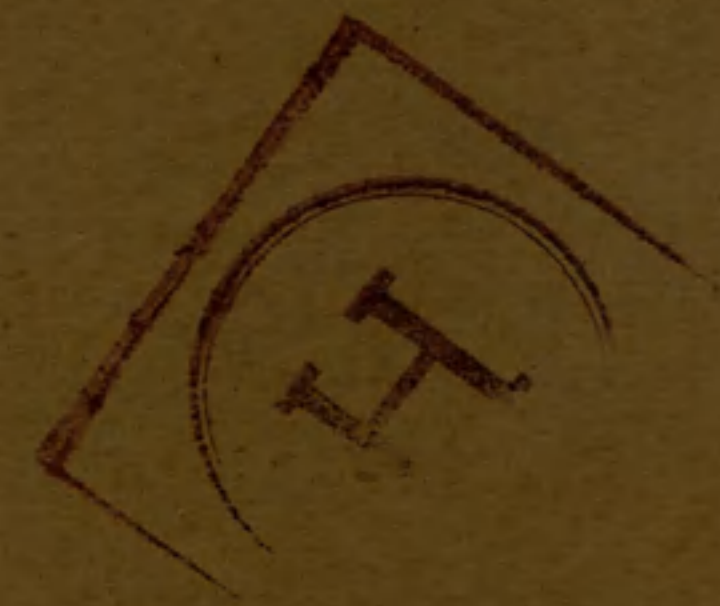


KILLED IN ACTION

156-15

cards, 1 Part 11 Order

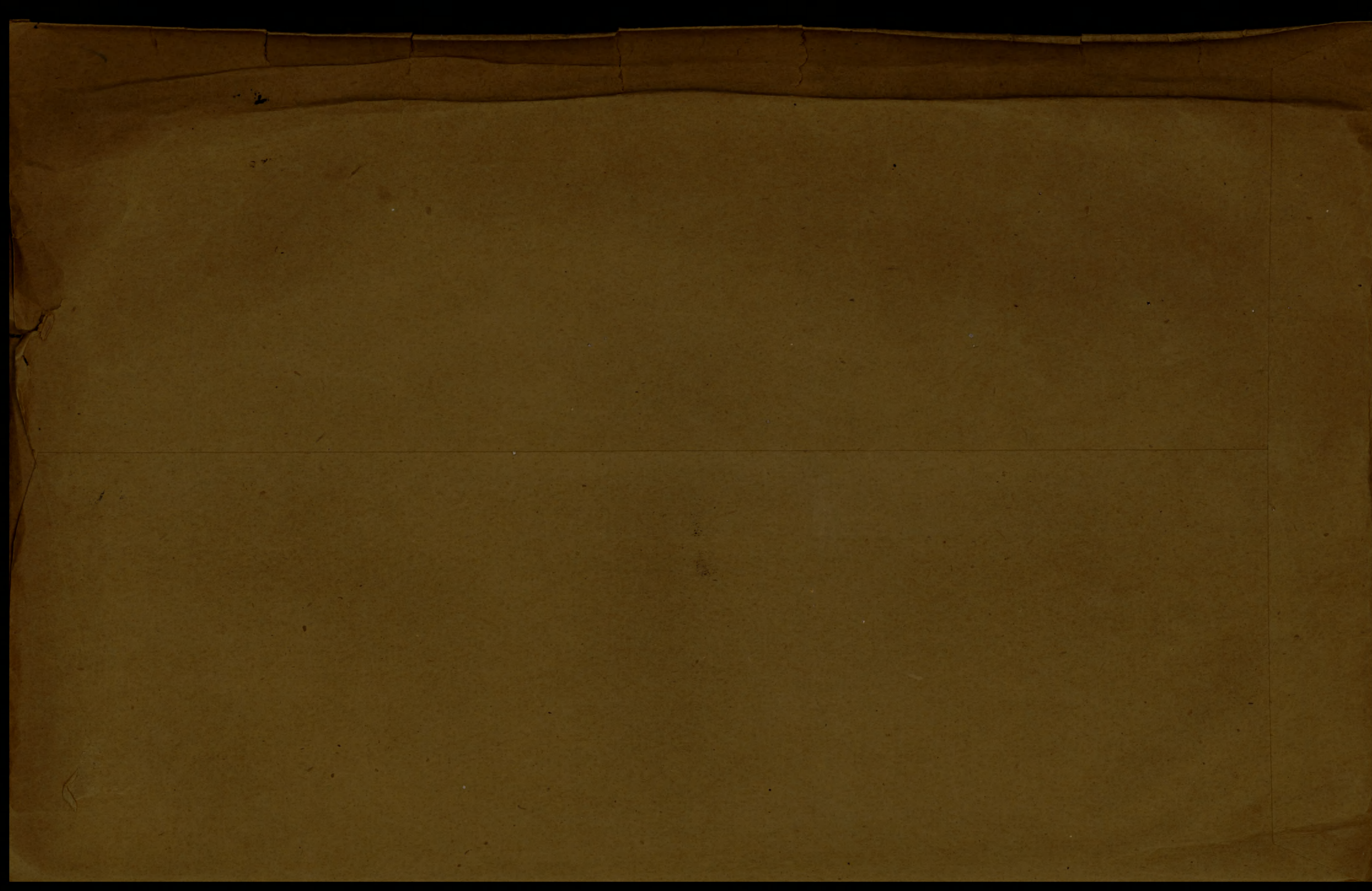
casualty



8-12
31-12
32-13
1

MX. 21-12-20

*1749 = 1
1 P 12 2*



ORIGINAL
ATTESTATION PAPER.

Original

No. 5344

Folio.

5344 CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

- 1. What is your name?..... Palmer Boyle
- 2. In what Town, Township or Parish, and in what Country were you born?..... Port Colborne Ont
- 3. What is the name of your next-of-kin?..... (Mother) Margaret Palmer
- 4. What is the address of your next-of-kin?..... Welland Ont -
- 5. What is the date of your birth?..... July 13th 1881
- 6. What is your Trade or Calling?..... Electrician
- 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?..... Yes
- 10. Have you ever served in any Military Force?.. If so, state particulars of former Service. No.
- 11. Do you understand the nature and terms of your engagement?..... Yes
- 12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?..... Yes

P. Boyle (Signature of Man).
Chs. H. H. H. (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Palmer Boyle, 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.

P. Boyle (Signature of Recruit)

Date, Sept 23 1914. Chs. H. H. H. (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Palmer Boyle, 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.

P. Boyle (Signature of Recruit)

Date, Sept 23 1914. Chs. H. H. H. (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 Valcartier this 23 day of Sept 1914.

Chs. H. H. H. (Signature of Justice)

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

W. Murray (Approving Officer)

2 *How* *Boyle* 5 7 *Aug*
Description of *Sapper P Boyle* on Enlistment.

Apparent Age *32 1/2* years *12* 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 *5-8* ft. *8* ins.

Chest measurement { Girth when fully expanded *39 1/2* ins.
 Range of expansion *3 1/2* ins.

Complexion *Dark*
 Eyes *Blue*
 Hair *Brown*

*1 scar on L arm.
 Appendix Scar
 Scar on back of neck*

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

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him* *fit* for the Canadian Over-Seas Expeditionary Force.

Date *Sept 9* 1914.

Place *Halifax*

[Signature]
 Capt *A. M. [unclear]*
 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.

P Boyle 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)

Date *Sept 23* 1914.

MEDICAL HISTORY SHEET.

Surname Boyle Christian Name Palmer

Examined { on 9th day of Sept. 1914.
 { at Valcartier P.Q.

Approved by M. P. Ross
 Rank Capt M. O.

Birthplace { City or Town Port Colborne
 { County Ont. Canada

Apparent age 33 years

Trade or occupation Electrician

Height 5 Feet 8 Inches.

Weight _____ Lbs.

Chest measurement { Minimum 36 inches.

{ Maximum expansion 3 1/2 inches.

Physical Development Good

Small-Pox Marks none

Vaccination Marks { Arm Right Left.
 { Number one

When Vaccinated last Oct. 11th 1914

(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
		M. O.
		M. O.
		M. O.
		M. O.
		M. O.
		M. O.
		M. O.

Date	Result	VACCINATIONS.
		M. O.
		M. O.
		M. O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>Sept 1914</u>	<u>off</u>	<u>Ross</u> M. O.
		M. O.
		M. O.

Enlisted on 23rd day of Sept 1914 at Valcartier P.Q.

	CORPS.	REG'TL NUMBER	HABITS.	DATE.
Joined on enlistment.	<u>2 F. C. C. E.</u>	<u>15344</u>	<u>Good</u>	<u>Sept. 23rd 1914</u>
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.

Rank and Name Boyle, Palmer

Regimental No. 5344

Name and Address of Next-of-kin

Unit Div. Engineers (1st Field Co) Mrs Margaret Boyle (Mother)

Date of enlistment Sept 23rd 1914 Box 417, Welland,

Place of birth Canada Ontario, Canada

Married (Yes or No) No

Date and place of discharge

If in Permanent Force

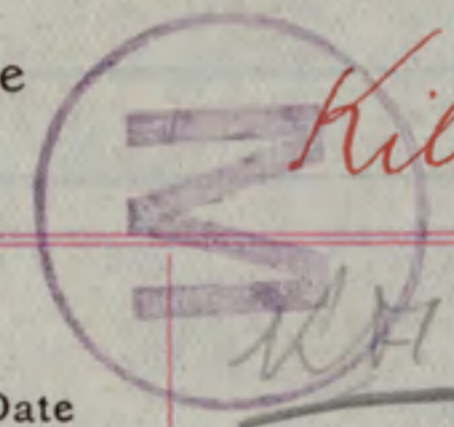
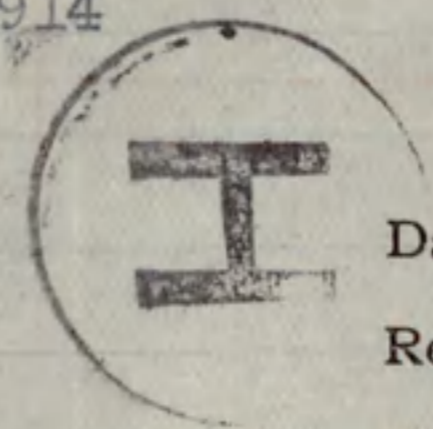
Reason for discharge

Character on discharge

Promotions or appointments

Killed in action

Mix. 21-12-20



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>G</i>	<i>Embarked</i>	<i>Avonmouth</i>	<i>9¹⁵/₁₅</i>	
		<i>but strength. 1st Id. Co., D.E.</i>	<i>France</i>	<i>18³/₁₅</i>	
<i>28⁶/₁₅</i>	<i>WO.</i>	<i>Killed in action.</i>	<i>France</i>	<i>15⁶/₁₅</i>	<i>Rpt. No. 88. ON. Part. No. 18</i>

C.

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

NAME BOYLE Palmer

0 ✓

Regimental No. 5344

Sapper

Name and address of next-of-kin

Unit Div. Engineers (1st Field Coy)

Mrs. Margeret Boyle Palmer (Mother)

Date of enlistment Sept. 23rd 1914.

Box 417
Welland, Ontario,

Place of Birth Canada

Canada.

Married (yes or no) No

Date and place discharged

15-6-15

Amount of pay assigned monthly \$ *25⁰⁰ 25⁰⁰*

Reason for discharge

To whom payable

Next of kin

Character on discharge

PAY OFFICE, N. E. BRANCH
AUG 20 1915
CANADA

Date		PAY			Field Allowance			Other Credits		Total Credits		Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.	
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date								
15 ¹⁰ / ₁₄	31 ¹⁰ / ₁₄	14	1.00	14	14	.10	1.40	25	30	44			25	25			25	<i>25³⁰ Bal Ford 14/10/15</i>	
1 ¹¹ / ₁₄	30 ¹¹ / ₁₄	30	1.00	30	30	.10	3.00	19		52			25	25			50		
1 ¹² / ₁₄	31 ¹² / ₁₄	31	1.00	31	31	.10	3.10	2		36	10		5	25			30		
1 ¹ / ₁₅	31 ¹ / ₁₅	31	1.00	31	31	.10	3.10	6	10	40	20		52	25			30	25	
1 ² / ₁₅	28 ² / ₁₅	28	1.00	28	28	.10	2.80	9	95	140	75		5	25			30		
1-3-15	31-3-15	31	1	31	31	.10	3.10	10	75	144	85		6	25			31		
1-4-15	30-4-15	30	1	30	30	.10	3	13	85	146	85		3	25			28		
1-5-15	31-5-15	31		31	31		3.10	18	85	152	95		9	25			34		
1-15-June	15	15		15	15		1.50	18	95	135	45		3	25			28		
										945									
										rech	162	907	cr	162					
														907			907		
																	907		

Statement of
MAY 25 1916
Account rendered

No June 16.

Cash found in effects *None*

CHECKED BY: _____
DATE: _____

*Effective
Stop payment 2/7/15
Killed in action 15.6.15
Casualty list 88.
Sent to Ottawa for
sett 7/6/16*

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

L. L. Job 89002.—Req. 6213.

Mrs
Margaret Boyle Mother

Name of Soldier

Boyle, Palmer
Pte #5344

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	A 306	20	20
May		B 1074	20	20
June		D 8209	20	20
July		E 6488	20	20
Aug.		F 13948	20	20
Sept.		C 15242	20	20
Oct.		B 18292	20	20
Nov.		C 21926	20	20
Dec.		C 25483	20	20
Jan.	1917	B 28716	20	20
Feb.		B 30227	20	20
March		B 34616	20	20
April		D 533	20	20
May		G 4897	20	20
June		F 7462	20	20
July		C 10912	20	20
Aug.		G 13771	20	20
Sept.		F 17714	20	20
Oct.		20	20	20
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

Killed in action 15-6-15

R 5750
B 5750

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.				

205

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

Name *Boyle. Margaret Mrs*

Name of Soldier *Boyle - Palmer.*

Address *Welland
Ont*

Regtl. No. *5344*

Rank *Private*

Corps *# 1 Comp. Wv Engineers*

Relation to Soldier }
wife, child or mother } *Mother*

To what Corps belonging }
when called out } *✓*

*Authority: See Letter 10. 5. 15 from James
Thompson. Rector. Holy Trinity Church Welland*

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug. <i>1/2 mo</i>	1914			
Sept. ✓				
Oct. ✓				
Nov. ✓				
Dec. ✓				
Jan. ✓	1915	<i>19015</i>	<i>190 00</i>	
Feb. ✓				
March ✓				
Apl. ✓				
May ✓				
June		<i>C10,942</i>	<i>20 -</i>	<i>Filed in - action</i>
July		<i>D10567</i>	<i>20 -</i>	
Aug.		<i>A. 11915</i>	<i>20 -</i>	
Sept.		<i>B14369</i>	<i>20 -</i>	
Oct.		<i>C14924</i>	<i>20 -</i>	
Nov.		<i>D14463</i>	<i>20 -</i>	<i>20</i>
Dec.		<i>A15734</i>	<i>20</i>	<i>20</i>
Jan.	1916	<i>B18689</i>	<i>20 -</i>	<i>20</i>
Feb.		<i>C. 18578</i>	<i>20</i>	<i>20</i>
March		<i>A 18287</i>	<i>20</i>	<i>20</i>



5

1000

D 10 2-6 8
Cancelled

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

649

To Whom *Mrs. Margaret Boyle.*
Address *Welland.*
Ont.

By Whom Assigned *Boyle. P.*
Regtl. No. *5344*
Rank *Spr.*
Corps *2nd Fd. Co. C. E.*

Rate *\$ 25 per m.*

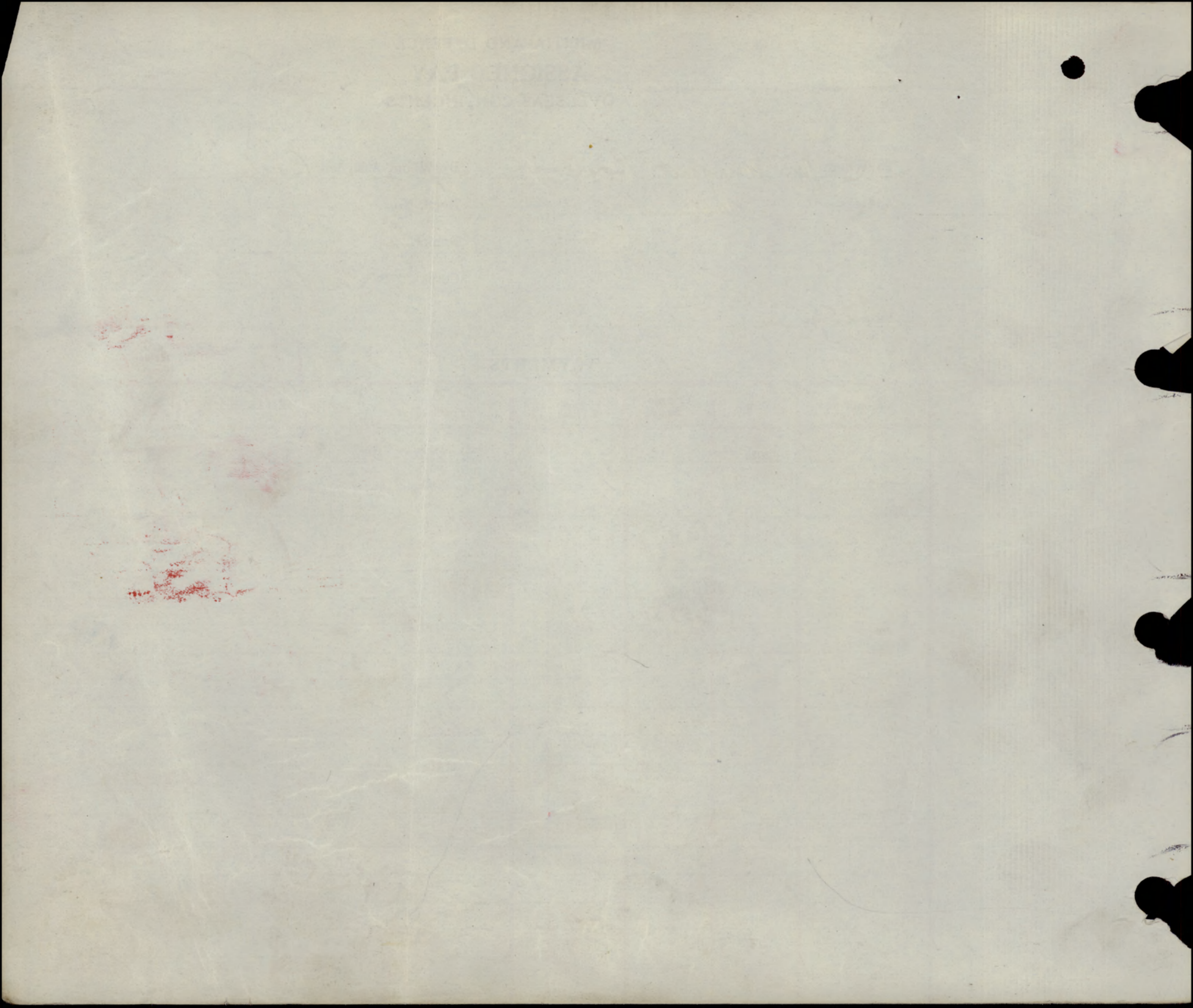
PAYMENTS

REMARKS *Casualties*

Month	Year	Cheque No.	Amt.
Aug.	1914		
Sept.			
Oct.		<i>{ E</i>	
Nov.		<i>1668</i>	<i>50 -</i>
Dec.		<i>F. 2239</i>	<i>25</i>
Jan.	1915	<i>E 3438</i>	<i>25</i>
Feb.		<i>D 5356</i>	<i>25 -</i>
March		<i>B 38⁶³⁻⁶⁴ X 2</i>	<i>25</i>
Apl.		<i>97707</i>	<i>25</i>
May		<i>J 2730</i>	<i>25</i>
June		<i>J 3679</i>	<i>25</i>
July			
Aug.			
Sept.			
Oct.			
Nov.			
Dec.			
Jan.	1916		
Feb.			
March			

Killed in action (C. E. 29⁶/₁₀)
A.X. 2/7/16 A.K.
Pensions Notified 15-12-17.
F. H. Ostrom 15¹⁴/₁₇

John



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

20.			
-----	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No. 5344
 Rank Pte . Promoted Reverted Discharge
 Soldier's Name Palmer Boyle
 Battalion # 1 Comp. Div. Engineers
 Beneficiary Mrs. Margaret Boyle
 Relationship Mother
 Address Welland, Ont.

Name
 Address
 Change of Address
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Sept. 30-17		30/9/17 750		\$750.00	01968-P-1 Sump Killed in action 15-6-15. Adjusted note Pension notified 15/12/17 pens have been but not has still paid sep 17 Have requested STD - 2/8/18

123854
 12/2/17

Surname

Christian Name or Names

Reg. No.

Boyle

P.

5344

Rank

Unit

Co.

Troop

Batty.

Spr.
Hospital

Can Div Eng:

Date of Admission

15-6-15

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

Killed in Action 15-6-15.
(Shell. fire)

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnoses, if more than one state present

DISPOSITION

Date

REMARKS

C.L. 28. 6. 15

88. Rept from the Base.

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

Number 5344 Rank Spr

Surname BOYLE

Christian Names Palmer

Unit C.E. Theatre of War France

Dates of Service 9-2-15 D.

Remarks Hatter

Latest Address R. W. Boyle Esq

124. Aqueduct St

Welland, Ont.

Roll No. B.

Page 14/19

G 8618 - Deep

900 26440 000

APR 2 - 1921

JUL 28 1921

No.

RANK

Spr.

NAME

Boyle, P

T. O. S.

UNIT # *5 Field Coy. C. C.*

M. D. *3*

PAID FROM	PAID TO	SIG OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1914</i>	<i>1914</i>			
<i>Aug. 19</i>	<i>Aug. 31</i>	<i>✓</i>		
<i>Sept. 12</i>	<i>Sept. 18</i>	<i>✓</i>		



Name **Boyle, P.** Rank **Sapper** Reg. No. **5344**

Unit **Divisional Engineers, 1st Field Company**

Next of Kin **Canada**

Date 1915	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
June 15	KILLED IN ACTION.		Shell fire	88	28/6/	28/6/15
	<i>John B. R. A. 4</i>					

SURNAME.

Boyle

CARD NO.

D

CHRISTIAN NAMES

Palmer

FOLL.

REGL. No.

5344

RANK

Sapper

UNIT

Div. Engineers

FORMER CORPS

Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Palmer, Mrs Margaret

RELATIONSHIP TO SOLDIER

Mother

ADDRESS

Welland, Ontario, Can.

COUNTRY OF BIRTH

Canada, Port Colborne, Ont.

DATE

July 13th 1881

PLACE OF ATTESTATION

Valcartier

DATE

Sept. 23rd 1914.

Ops. 7-10-14 $\frac{43}{9}$

MARRIED

SINGLE

Yes

WIDOWER

TRADE OR CALLING

Electrician

RELIGION

Church

DESCRIPTION.

APPARENT AGE

32

YEARS

2

MONTHS

HEIGHT

5'

FEET

8

INCHES

CHEST MEASUREMENT

36

INCHES

EXPANSION

3 1/2

INCHES

COMPLEXION

Dark

EYES

Blue

HAIR

Brown

DISTINGUISHING MARKS

1 vacc. scar on arm. Appendix

scar. Small scar on back of neck.

MEDICAL EXAMINATION.

PLACE

Valcartier

DATE

Sept 9th

H.A. ①

H. 649-B-905.
17ed. Co.

✓ ✓ ✓ ✓ ✓
BOYLE, Spr. P. ^{Palmer} Boyle, #5344, 1st Can. Div. Eng'rs.

M. & D. (Father) R. W. Boyle,
124 Aqueduct St., Welland, Ont.

P. & S. " ditto.

Per # 800732

Mem. C. (Mother) Mrs. R. W. Boyle,
124 Aqueduct St., Welland, Ont.

elig for 1914-15 star
" " v. m.
" " B. v. m.

APR 1 9 1921 Regn. No. 2 36700

SEP 5 1922 40343 45764

B

u

Pa.

932

M
6.38716

DEC 28 1920

NAME

Boyle, Palmer

REG'T L No.

5344

RANK AND CORPS

Sapper

1st Field. Co. Com. Engrs.

CABLE

NATURE OF CASUALTY

NO. 2242

NO.

DATE

6.2666	28-6-15	Killed in action June 15th Shell fire.
Army Form B 2090A	Com. Sect. 6.4.2.	3rd Echelon 15/3/16 Do

FOLL.

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

88

Reported from the Base 15-6-15 Killed in action, shell
fire.

No. 5544

RANK *Spr.*

NAME

Boyle. P.

T. O. S.

UNIT

*1st Field Co. Cav Eng
(o/s pay lists in key)*

*Transfd from 2nd Field Co. 15-10-14
Sept & Oct pay list*

M. D.

6

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PAID
FROM

PAID
TO

SIG.
OR
REC'T

PARTICULARS

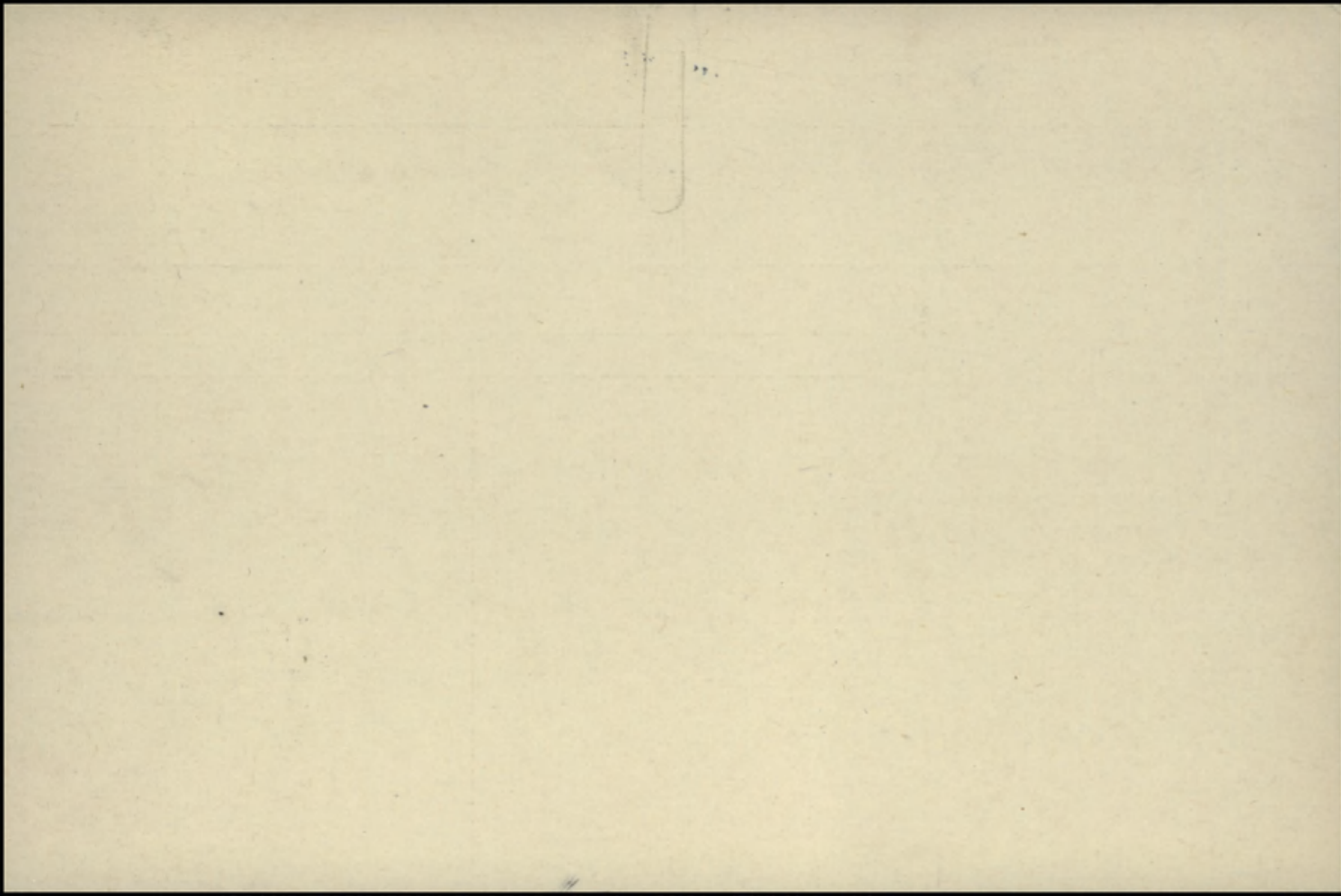
AUTHORITY

*1914
Oct. 15*

*1914
Oct. 31*

✓

**UNIT SAILED
OCT 3 1914**



No. 5344

RANK

Spr

NAME

Boyle. P

T. O. S.

UNIT *2nd Fld Coy. Can. Engineers*

M. D.

2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915- Sept-1 Sept 22</i>	<i>1915. Sept. 21 Oct 14.</i>	<i>✓ ✓</i>	<i>Transfd to 1st Coy. 15 Oct Inclusive</i>	<i>Oct paylist.</i>

UNIT SAILED
OCT 3 1914





Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and signature

Table IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation
Salisbury Plain	20/10/14				

To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Boyle Christian Name Palmer

TABLE I.—GENERAL TABLE.

Birthplace .. Parish Port Colborne County Ontario Canada

Examined { on 23rd day of September 1914.
 at Valcartier Que Canada

Declared Age 32 years 2 mos days.

Trade or Occupation Electrician

Height 5 feet, 8 inches.

Weight 168 lbs.

Chest Measurement { Girth when fully Expanded 39 inches.
 Range of Expansion 3 inches.

Physical Development Good

Vaccination Marks { Arm Right Left
 Number 2

When Vaccinated October 1914

Vision { R.E.—V=
 L.E.—V=

(a) Marks indicating congenital peculiarities or previous disease (a)

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

Approved by .. (Signature) R. Horton
(Rank) Capt Medical Officer.

Enlisted { at Valcartier Que Canada
on 23rd day of September 1914.

Corps.	Regtl. No.
<u>1st Field Company 68</u>	<u>5344</u>

Became non-effective by
on _____ day of _____ 1914.
(Signature) _____
(Rank) _____

