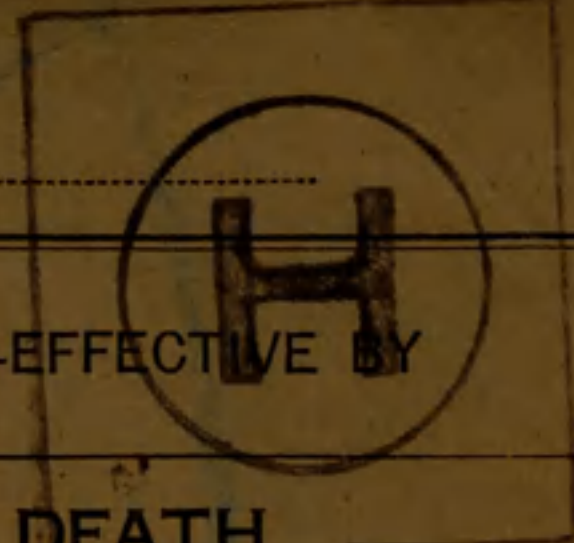


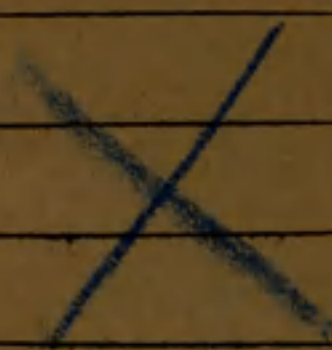
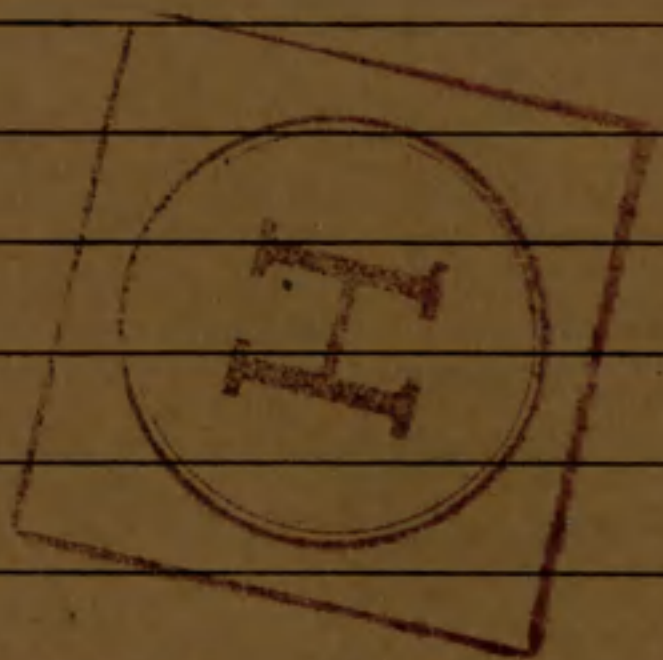
REGIMENTAL DOCUMENTS

34698

NAME Boyles Henry George REGT. NO. 195012 UNIT \_\_\_\_\_ H. Q. FILE NO. \_\_\_\_\_

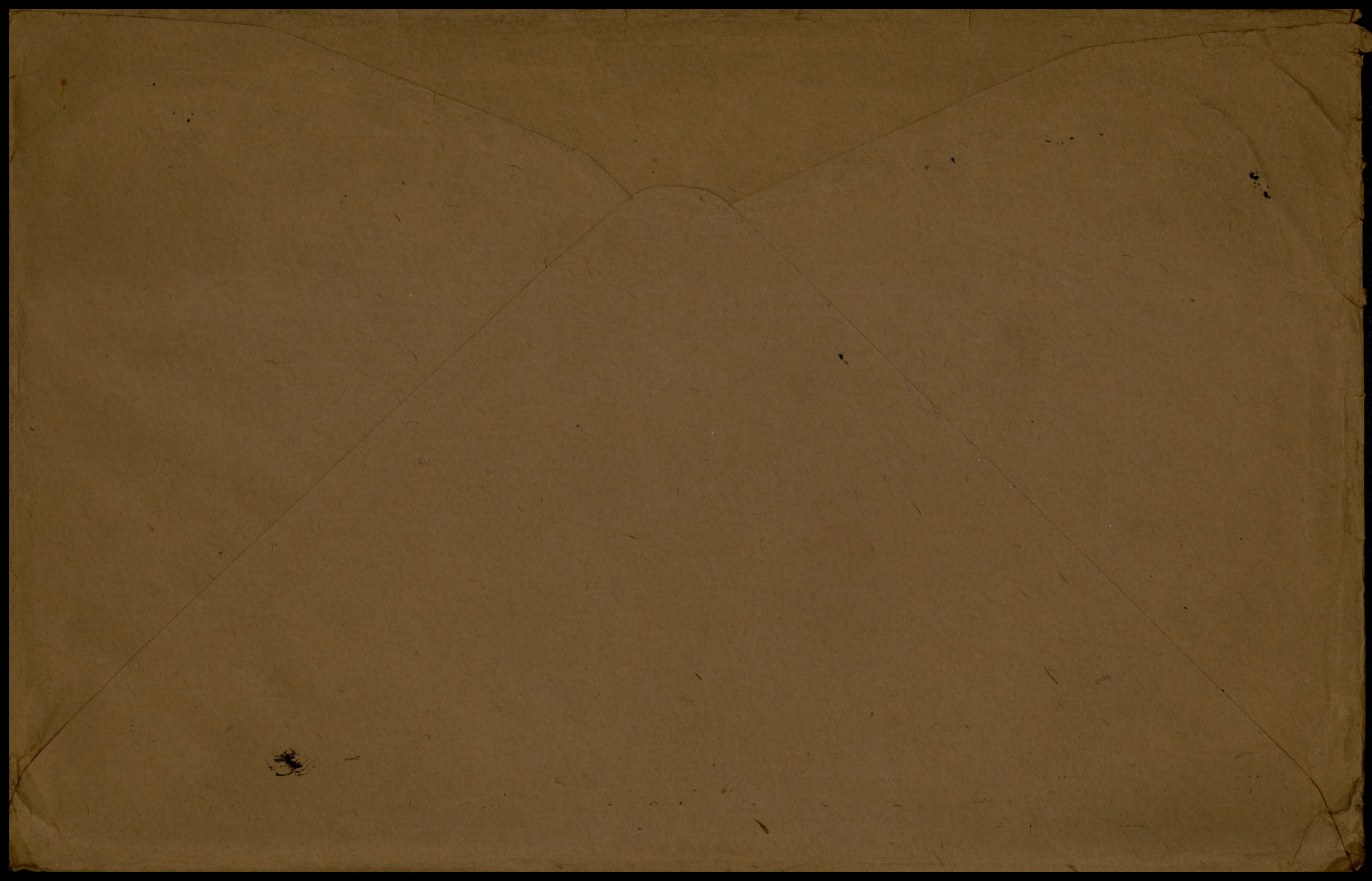


CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
37 ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
TRAINING HISTORY SHEET (M.F.W. 113)					
2 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					KA
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
2 DENTAL HISTORY SHEET (M.F.B. 465)					Category
4 MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
MEDICAL EXAMINATION (M.F.W. 129)					
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my  
2.2.21 3 P 21 2021

2



20/12/15  
No. 195012

ORIGINAL  
ATTESTATION PAPER

57th Regt.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

1. What is your name? Henry George Boyles
2. In what Town, Township, or Parish, and in what Country were you born? Peterborough Ont. Canada.
3. What is the name of your next-of-kin? George S. Boyles. Father
4. What is the address of your next-of-kin? Peterborough Ont. Canada.  
DAWNEYS COYNETS
5. What is the date of your birth? May 26, 1896
6. What is your trade or calling? Machinist
7. Are you married? no
8. Are you willing to be vaccinated or re-vaccinated? 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

H. G. Boyles (Signature of Man.)  
J. H. Coulter (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Henry George Boyles, 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.

Date AUG 31 1915 191 . H. G. Boyles (Signature of Recruit.)  
J. H. Coulter (Signature of Witness.)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Henry George Boyles, 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.

Date AUG 31 1915 191 . H. G. Boyles (Signature of Recruit.)  
J. H. Coulter (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 PETERBOROUGH this AUG 31 1915 day of 1915.

7 DEC REC

J. H. Coulter (Signature of Justice.)

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

J. J. Johnston Lt Col (Approving Officer.)

DESCRIPTION OF Boyle, Henry George ON ENLISTMENT.

Apparent Age 19 years 2 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 35 ins.  
 Range of expansion 5 ins.

Scars - Inner side Lt. Eye, downwards

Complexion Fair

Eyes Grey

Hair Lt. Brown

Religious Denominations { Church of England  
 Presbyterian  
 Methodist Yes  
 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 August 10 1915 J. H. Oakwood

Place Peterborough Camp 54, Rest  
 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

Henry George 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.

Date Nov 4th 1915 J. J. Johnson Lt. Col. (Signature of Officer.)

Fill in Only.—U.S. Number, Rank and Name.

M. F. W. 54. EB 103  
150M. 10-15. 2/16  
H.Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps ~~93rd~~ <sup>93rd</sup> ~~Inf~~ <sup>Inf</sup> Battalion C. E. F. ~~1st Coy~~ <sup>1st Coy</sup>

Regimental No. 195012 Rank Pte Name Henry George Boyle ✓  
C. E. F.

Enlisted (a) ~~Aug 15~~ <sup>31</sup> Terms of Service (a) ~~1 yr~~ <sup>2 yr</sup> D. of W. Service reckons from (a) ~~Aug 15~~ <sup>31</sup> 1915.

Date of promotion to present rank } ~~\_\_\_\_\_~~ <sup>X</sup> Date of appointment to lance rank } ~~\_\_\_\_\_~~ <sup>X</sup> Numerical position on roll of N. C. Os. } ~~\_\_\_\_\_~~ <sup>X</sup>

Extended ~~\_\_\_\_\_~~ <sup>X</sup> Re-engaged ~~\_\_\_\_\_~~ <sup>X</sup> Qualification (b) Machinist

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. Disembarked.	Halifax Liverpool	15/7/16 25/7/16	
8-10-16	O.C. 93rd Bn.	Transferred to 39th Bn.	West Sandling	6-10-16	D.O. 256. ✓ + P/O 239 39 <sup>th</sup> Bn 7-76
10/11/16	case	Taken on Strength	C.C.A.C. Pt. II	D.O. No. 496	19/11/16 ✓ ADJUTANT, 93rd D. S. BATT'N, C.E.F. + P/O 271 39 <sup>th</sup> Bn 24/16 ✓
9/12/16		Discharged to C.C.A.C.,	S.O Pt II	10/12/16	W. Wicklwright. Lieut. Adjutant, Canadian Command Depot,
13/12/16	1606	TRANSFERRED FROM C.C.A.C. TO	39 <sup>th</sup> Res BATT'N	11-12-16	PART II D.O. No. 549-11-13-12-16 + P/O 295-39 <sup>th</sup> 12-12-16

for OK C.C.A.C.

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

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
12-12-16	O.C. 39 <sup>th</sup>	Taken on strength 39 <sup>th</sup>	N. Sandling	12-12-16	Part II 295 ✓ <del>Edgewood Capt</del> for O.C. C.E.F. Auth: A.G.'s letter A.G. 16-1-17 dated 27-11-16.
21-12-16		For Discharge - Bandeman under K.R. & O. Para 392 Sect XXV.	W. Sandling		
		Embarked	Halifax	1-5-17	
		Disembarked	Liverpool	14-5-17	✓
14-5-17	235 <sup>th</sup> Bn	Transferred to 3 <sup>rd</sup> Can. Res. Bn.	West Sandling	14-5-17	D.O. 266 ✓ Lt. Col. COM. 39 <sup>th</sup> BN. C.E.F. Captain Adjutant 235 <sup>th</sup> . Overseas Battalion C. E. F.

MAY 17 1917  
 O.C. 3<sup>rd</sup> Res. Bn. C.E.F.  
 Taken on Strength  
 3<sup>rd</sup> RES. BATTALION C.E.F.  
 Transferred to 1st Bn. C.E.F.  
 W. Sandling  
 MAY 14 1917  
 Lt. Col.  
 O.C. 3<sup>rd</sup> RESERVE BN. C.E.F.  
 134 ✓  
 #287 ✓  
 +1202891977  
 Lt. Col.

*Sheet 2*

Rank *Plt.* Regiment or Corps .....  
 Surname *Bayler* Christian Name *F. Henry George*  
 Religion ..... Age on Enlistment ..... years ..... months.  
 Enlisted (a) *31. 8. 15* Terms of Service (a) *DoPw.* Service reckons from (a) *31. 8. 15*  
 Date of promotion to present rank ..... Date of appointment to lance rank .....  
 Extended { ..... } Re-engaged { ..... } Qualification (b) .....  
 or Corps Trade and Rate .....  
 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>19-10-17</i>	<i>1st C.O.R.D.</i>	<i>T.O.S. 1st C.O.R.D.</i>	<i>West Sandling</i>	<i>18-10-17</i>	<i>Pt. II D.O. No. 224</i>
<i>27-10-17</i>	<i>1st C.O.R.D.</i>	<i>S.O.S. on posting to 3rd. Can. Rec. Bn.</i>	<i>West Sandling</i>	<i>27-10-17</i>	<i>Pt. II D.O. No. 232</i>
			<i>G.H. Clwell, Lieut. &amp; Assist. Adjt. for O. C. 1st C. O. R. D.</i>		
<i>27/10/17</i>	<i>O.C. 3rd Res. Bn. C.E.F.</i>	<i>Taken on Strength from 1st C.O.R.D.</i>	<i>W. Sandling</i>	<i>27/10/17</i>	<i>299</i>
<i>12.8.18</i>	<i>O.C. 3rd Res. Bn. C.E.F.</i>	<i>H. T.P.</i>	<i>Witley</i>	<i>12.8.18</i>	<i>224</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 in the Army Reserve Bn. C.E.F. (b) Signaller, Shoing-Smith, &c.

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				
16.11.16	bb ab.	Cas Lines to ces P.7. butts	Shoreham	15.11.16	Pic 506
11.12.16	bb ab	Cases Comm'd ces fons for	Hastings	10.12.16	Pic 5245
4-1-17	OC 39	Sot to 6 <sup>th</sup> Res	Wandling	4-1-17	Pic 3-72 Clab 12 <sup>th</sup> 17
4-1-17	6 <sup>th</sup> Res.	Y.O.S.	P. Cliffe	4-1-17	Pic 01
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p>Returned to Canada as Bandsman for Recruiting purposes R.L. 136-109<sup>a</sup> 10<sup>th</sup> 77.</p> <p>Discharge Depot Services utilized as Bandsman in 6<sup>th</sup> 7 Unit, M.D. No 3 Kingston 11<sup>th</sup> 77 RR 199. Peterboro Ont</p> </div>					
4-8-17	3 <sup>rd</sup> Res	Graves, G. B. Hope	Wandling	14.8.17	Pic 0223.
10.9.17	3 <sup>rd</sup> Res	On bonus R.F.C Hastings	Wandling	10.9.17	Pic 0250
17.10.17	3 <sup>rd</sup> Res	Cases att'd Hastings	Wandling	10.9.17	Pic 0287.
<p>Reserve Lt Col for Lt Col H. Records Com 7</p>					

AUG 13 1918 C. B. D. ARRIVED C. B. D. FRANCE AUG 13 1918 N. R. D. 724  
 PART II ORDERS  
 No 87 D AUG 16 1918

AUG 13 1918 C. B. D. LEFT C. B. D. FOR 4<sup>th</sup> Bn AUG 15 1918 N. R. D. 1347

24-8-18 O. C. 4<sup>th</sup> BN ARRIVED at 4<sup>th</sup> BN. FIELD 17-8-18 B. 213 D

SEP 0 1918 4<sup>th</sup> CAN BN KILLED IN ACTION do 3-9-18 DR 28 no 2-86  
 AAS, Cdr See file K.9.17-1256  
 Pt 2 Dns 105, of 10-9-18

Lieut  
for Lt Col. AAS.



## Medical Examination upon leaving the Service of an Officer fit for general service or a Soldier fit for duty.

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank Pte Name Boyle Surname Henry George  
 Unit or Corps 39th Battalion, CEF (If a soldier) Regtl. No. 195012  
 Born at Peterboro, Ont on, date 26 May 1896  
 Signature (for identification) H. G. Boyle

The examination is to be made jointly by two Medical Officers.

**1. PHYSIQUE**—Any deformity, maiming or lameness? If so, describe.

Weight 130 lbs.  
 Height 5 ft. 10 in.

**2. NUTRITION AND DIATHESIS ?**

well nourished good color

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

**3. NERVOUS SYSTEM ?**

normal

**4. RESPIRATORY SYSTEM ?**

normal

**5. HEART ?**

Abnormal Sounds? none  
 Abnormal Size? none  
 Pulse Rate? 70 Intermittence or irregularity? no

**6. ARTERIES.**—Any hardening?

no

**7. DIGESTIVE SYSTEM ?**

normal

**8. GENITO-URINARY SYSTEM ?**

Urinalysis—s.g. ? 1019 Reaction ? acid Albumen ? no Sugar ? no

**9. SKIN, MIDDLE EAR, EYE**  
or any other part ?

normal

**10.** Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe.

no

**11.** Opinion as to the health and physical condition of the one examined ?

Good

Examined at West Sandburg } Signed [Signature] M.O.  
 Date 20th Dec 1916 } Signed [Signature] M.O.

If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.

Condition same as herein stated.  
 J. H. [Signature]  
 E. H. [Signature] Capt.

Medical Examination upon leaving the Service

of an Officer fit for General Service or a Soldier fit for duty.

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this form.

Blank lines for Name, Rank or Grade, and other identifying information.

The examination is to be made jointly by two Medical Officers.

1. PHYSICAL - Any abnormality, malformation or lameness? If so describe.

Blank space for physical examination notes.

2. NUTRITION AND DIETETICS?

Blank space for nutrition and dietetics notes.

Blank space for general observations on the part of the patient.

3. NERVOUS SYSTEM?

Blank space for nervous system notes.

4. RESPIRATORY SYSTEM?

Blank space for respiratory system notes.

5. HEART?

Blank space for heart examination notes.

6. ARTERIES - Any abnormality?

Blank space for arteries examination notes.

7. DIGESTIVE SYSTEM?

Blank space for digestive system notes.

8. GENITO-URINARY SYSTEM?

Blank space for genito-urinary system notes.

9. SKIN, NOSE, EAR, EYE?

Blank space for skin, nose, ear, eye notes.

10. Is there any evidence of impairment of health or physical condition due to conditions above? If so describe.

Blank space for overall health assessment notes.

11. Opinion as to the health and physical condition of the one examined?

Blank space for final opinion notes.

Blank lines for signature and date.

If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular reporting.

FORM OF WILL

37

I, Henry George Bayler (Name in full)

Regimental Number 193012 serving in 235th Bn 669

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

I devise all my real estate unto

.....  
.....  
.....

Name and Address  
of person or  
persons to whom  
it is to go.

absolutely, and my personal estate I bequeath to

Mrs. Beatrice Hardy  
237 George St  
Peterborough Ont

Name and Address  
of person or  
persons to receive  
personal estate\*  
(See note).

NOTE

This space for the appointment of Executor if necessary.

ESTATES BRANCH,  
OCT 20 1917  
MILITIA DEPT.

IMPORTANT NOTE

This must be signed and Dated by THE SOLDIER HIMSELF.

this 17 day of April A.D. 191

Henry Geo. Bayler 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.

Signature of First Witness J. J. Truckland

Address of Witness Peterborough Ont

THE TWO WITNESSES

Occupation of Witness Soldier

MUST SIGN HERE

Signature of Second Witness Wm. Latimer

Address of Witness Peterboro Ont

Occupation of Witness Soldier

V

FORM OF WILL

*Handwritten text at the top of the page, possibly a name or address.*

*Handwritten text in the upper middle section.*

*Handwritten text in the middle section.*

*Handwritten text in the lower middle section.*

*Handwritten text in the lower section.*

ESTATES BRANCH

DETROIT

MILITIA DEPT.

*Handwritten text in the lower middle section.*

*Handwritten text in the lower section.*

*Handwritten text in the lower section.*

*Handwritten text in the lower section.*

*Handwritten text in the lower section.*

*Handwritten text at the bottom of the page.*

This is the last Will and Testament of me Henry George Boyler of the City of Peterborough in the County of Peterborough in the Province of Ontario now a member of the Canadian Expeditionary Forces made this 21st day of July 1917.

I direct that my just debts, funeral and testamentary expenses be paid out of my estate

I give devise and bequeath to my father George Samuel Boyler and to my sister Edna Elizabeth Boyler two thirds of my interest in certain real estate situate on Haggart St in the said city of Peterborough and in a certain house and lot in the Town of Belle ville Illinois <sup>one</sup> of the United States of America as joint tenants and not as tenants in common.

I give devise and bequeath to Beatrice Heard daughter of Richard Heard of the said city of Peterborough the remaining one third interest in the above mentioned property.

All my remaining property both real and personal whatsoever and wheresoever situate I give devise and bequeath to my father George Samuel Boyler to my sister Edna Elizabeth Boyler or the survivor of them

Boyer and to the said Beatrice Heard, share and share alike.

In the event of the said Beatrice Heard predeceasing me I give devise and bequeath the one third interest remaining in the Peterbrough Henry George Boyler.

and Belleville to my father George Samuel Boyler and to my sister Edna Elizabeth Boyler as joint tenants and not tenants in common

And I nominate and appoint the said George Samuel Boyler the sole executor of this my last will and testament.

Signed Published and Declared by the said testator as and for his last Will and Testament on the day and date first above written in the presence of us both present together and in his presence have hereunto set our hands as witnesses.

Harold E. Dolman  
Soldier  
James Fordyce Strickland  
Solicitor

*Certified as a true copy of the original will of*

*for Lt.-Col. i/o Estates.*

NOTE. PTE. H. G. BOYLER, No. 195012, 4th Bn.  
K. in A. 3-9-18. B. 4542.  
SL. 29933.

18 OCT 1918

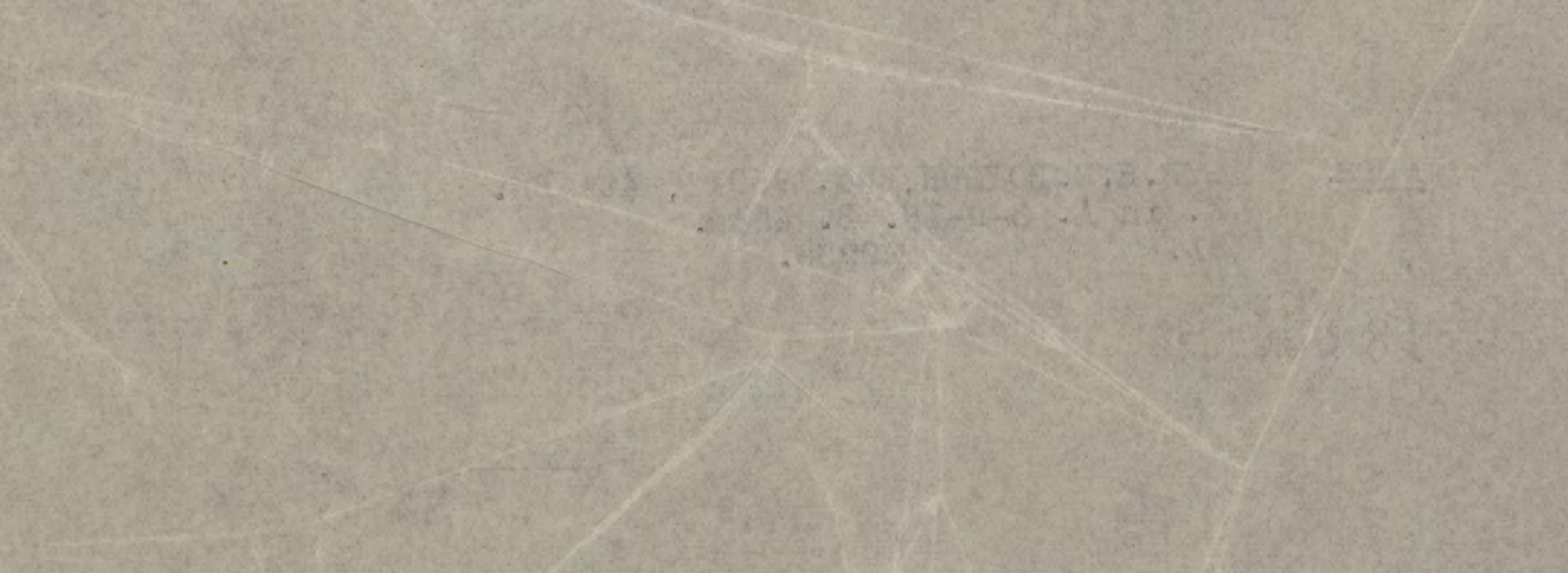
REGISTERED

1918

CANADIAN

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Handwritten scribbles or marks in the lower-left quadrant of the page.



CAN GEN HP.

MEDICAL CASE SHEET

MOORE BARRACKS

SHORNCLIFFE

No. in Admission and Discharge Book.

Regimental No.

Rank.

Surname.

Christian Name.

195019

O/ie

Boyle

Henry

Unit.

Boyle

Age.

Service.

Year

1917

235th Battalion

21 yrs

23 mos

Station and Date.

Disease

Parotitis

20th Street Isolation Hospital

May 17

Set Boracic form mouth wash  
must all. 37

BD

24

To get up

DISCHARGED TO DUTY

8 JUN 1917

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

Station  
and Date.



# CLINICAL CHART.

Army Form B. 181

(To be attached to Case Sheet.)

Corps 235<sup>th</sup> Bath Military Hospital Johannesburg Isolation  
 No. 195019 Rank and Name Pvt Henry Douglas Age 21 1/2 Service 23 mo  
 Disease Dysentery Date of admission May 22, 14 Date of discharge June 7 Result Cured

Dates of Observation	Days of Disease																												
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	
Temperature Fahrenheit	Time																												
	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.
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100°																													
99°																													
98°																													
97°																													
Pulse per Minute	90	90	90	90	90	90	90	90	90	90	90	90	90	90	90	90	90	90	90	90	90	90	90	90	90	90	90	90	
Respirations per Minute																													
Motions per 24 hours	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	

Admission 10:30 AM

Signature Dr. J. J. Balaban  
Dr. J. J. Balaban In charge of case.

1850

1850

1850

1850

1850

1850

# ATTESTATION PAPER

No. 195012

57th Regt.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE

Folio.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

1. What is your name? Henry George Boyle
2. In what Town, Township, or Parish, and in what Country were you born? Peterborough Ont. Canada.
3. What is the name of your next-of-kin? George S. Boyle. Father
4. What is the address of your next-of-kin? Peterborough Ont. Canada. *James*
5. What is the date of your birth? March 26, 1896
6. What is your trade or calling? Machinist
7. Are you married? no
8. Are you willing to be vaccinated or re-vaccinated? no
9. Do you now belong to the Active Militia? no
10. Have you ever served in any Military Force?  
If so, state particulars of former Service. no
11. Do you understand the nature and terms of your engagement? yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? yes

H.G. Boyle (Signature of Man.)  
J.H. Cochrane (Signature of Witness.)

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

I, Henry George 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.

AUG 31 1915

Date 1915 H.G. Boyle (Signature of Recruit.)  
J.H. Cochrane (Signature of Witness.)

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

I, Henry George 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.

Date AUG 31 1915 1915 H.G. Boyle (Signature of Recruit.)  
J.H. Cochrane (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 Peterborough Ont. this AUG 31 1915 day of 1915.

J.H. Cochrane (Signature of Justice.)

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

J.J. Johnston Lt Col (Approving Officer.)

DESCRIPTION OF Boyle, Henry George ON ENLISTMENT.

Apparent Age 19 years 2 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 5-7 ft. 7 ins.

Chest measurement { Girth when fully expanded 35 ins.  
 Range of expansion 5 ins.

Complexion Fair

Eyes Grey

Hair Light Brown

Scar. Inner side Rt. eye, downwards

Religious Denominations { Church of England  
 Presbyterian  
 Methodist ✓ yes  
 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 August 10 1915

Place Pelleborough Ont

J. H. Cashwood  
Major 57. Regt

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

Henry George 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.

Date Nov 4th 1915

J. J. Johnston Lt. Col. (Signature of Officer.)

A.G.R.

Rank

Name

BOYLER, Henry George

Reg'l No.

195012

Unit

93rd Bn.

If in perm. Corps, }  
What Unit? }

Married or Single

Single.

Place and Date of Enlistment

Peterborough, Ont.,  
31st August, 1915.

Place of Birth

Peterborough, Ont.,  
Canada.

Name and Address, Next-of-Kin

George M. Boyler,

*DOWNERS, CORNERS. See A/P*

Peterborough, Ont., Canada.

Assigned Pay Monthly \$

Payable to

Relationship  
N/E. D.B. No. 14402  
File R.L. 25-B-5657  
Category *X in a*  
Relationship

Father.  
N/E. D.B. No.  
File R.L.  
Category *Can R*

Separation Allowance \$

Payable to

N E R B Serial No 5  
Relationship

Discharge, Date and Place

Reason

Character

*LCR/339/121*

H. W. & V., Ltd. - 7165-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	Character	REMARKS. Taken from Official Documents.
Date.	From whom received.					
<i>"8"</i>		Arrived in England, S. S. Empress of Britain.		25th July 1916.		<i>Can O.R.</i>
8-10-16	93rd Bn	Tr'f'd to 39th. Bn.	W. SANDLING	6-10-16	Pt II	D0256
7-10-16	Q.C. 39 <sup>th</sup>	Taken on strength.	" "	6-10-16	" "	239
11-11-16	Q.C. 39 <sup>th</sup> Bn.	S.O.L. to C.C.A.C.	H. Sandling.	11-11-16	" "	241.
11-10-16	CCAC	Rept'd & LOS	Shorcham	10-11-16	" "	496
13-11-16	"	Rept'd fm Ashford	"	10-11-16	" "	499
16-11-16	"	In bus line to C.C.A.C. for duty	"	15-11-16	" "	506
11-12-16	"	base from 66th Sham & Rept'd	Martins	10-12-16	" "	545
13-12-16	"	found list by SNAB in LOS on trans to 39 <sup>th</sup> Bn	"	11-12-16	" "	549
12-12-16	Q.C. 39 <sup>th</sup>	O.O.L. fit for full duty from C.C.A.C.	H. Sandling.	12-12-16	" "	295.

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.				
H-1-14	39 <sup>th</sup>	S.O.S. to 6 <sup>th</sup> Res Batta	W. Sandling.	H-1-14.	P. 4072 12.2.17 CCAC Part II 0. 3
4.1.17	6th Res Bn	on proceeding to Canada for discharge is S.O.S. from:-	W. Sandling	4.1.17	Pt. II: O. 1
8.2.17	6 <sup>th</sup> Res. Bn.	for discharge is S.O.S. from:-	W. Sandling	2.2.17	31. (D/o. 662.) (auth. a. 4. cans. 16.1.17/27.11.16.) Returned to Canada as Bandsman for recruiting purposes. R.R. 13-96-1072 d/10/4/17
		services utilized as			
		Dis. Depot. Bandsman in C.E.F. unit.	M.D. No 3. Kingston	11-2-17	N.R. 199 Peterboro Ont
		Arrived in England S.S. "Megantic"		14.5.17	with 235 <sup>th</sup> Bn. to 1 <sup>st</sup> C.O.R.
14.5.17	235 <sup>th</sup> Bn.	S.O.S. to 3 <sup>rd</sup> Bn. Bn.	Otterpool	14.5.17	P. 50-266 (P. 50-134 d/17.5.17) 3 <sup>rd</sup> Bn.
4.6.17	3 <sup>rd</sup> Bn.	Adm 27 <sup>th</sup> 17 <sup>th</sup> + Disch 8 <sup>th</sup> 17 <sup>th</sup> M.B.H.	S'cliffe.	—	Pl 77 + 84
14.8.17	"	Awarded 1 Good Cond. Stripes	W. Sandling.	14.8.17	P. 50-223
10.9.17	"	On Com. R.F.C. Hastings	"	10.9.17	" 250 (D.O. 289 d/19.10.17)
17.10.17	"	Ceans ✓ ✓ ✓	"	10.10.17	" 287 (D.O. 289 d/19.10.17)
17.10.17	"	S.O.S. to 1 <sup>st</sup> C.O.R.D.	"	10.10.17	" 287 (1 <sup>st</sup> C.O.R.D.) P. 50-234 d/19.10.17
27.10.17	"	T.O.S. from 1 <sup>st</sup> C.O.R.D.	"	27.10.17	" 297 (1 <sup>st</sup> C.O.R.D.) P. 50-232 d/27.10.17
12.8.18	"	S.O.S. to 4 <sup>th</sup> Bn 7 <sup>th</sup> S.	Pt. Witley	12.8.18	" 224 (4 <sup>th</sup> Bn.) P. 50-87 d/16.8.18
10.9.18	4 <sup>th</sup> Bn.	Killed in Action	" Field	3.9.18	" 105

*Copy of Record sheet in M/E Ledger East Ont Reg Depot*

Rank \_\_\_\_\_ Name *Boyle H G* Reg'l No. *195012*  
 Unit *93 Bn* If in perm. Corps, }  
 What Unit? }  
 Married or Single *Single*  
 Place and Date of Enlistment *31-8-15* Place of Birth *Peterboro Ont*  
 Name and Address, Next-of-Kin *Geo Boyle*  
*Downers Corners Peterboro Ont.* Relationship *Father*  
 Assigned Pay Monthly \$ \_\_\_\_\_ Payable to \_\_\_\_\_  
 Relationship \_\_\_\_\_  
 Separation Allowance \$ \_\_\_\_\_ Payable to \_\_\_\_\_  
 Relationship \_\_\_\_\_

*Approved  
7/7/17*

Discharge, Date and Place Reason Character

H. W. V., Ld.—11319-17.

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>Arrived in England</i>	<i>Empress of Britain</i>	<i>25 July 16</i>	
<i>8-10-16</i>	<i>93 Bn</i>	<i>Trans to 39 Bn</i>	<i>Wandij</i>	<i>6-10-16 P#0256(239<sup>d</sup>)</i>	<i>7-10-16 39 Bn</i>
<i>14-11-16</i>	<i>39 Bn</i>	<i>SOS to CCAC</i>	<i>do</i>	<i>11-11-16 271(498<sup>d</sup>)</i>	<i>11-10-16 CCAC</i>
<i>13-12-16</i>	<i>CCAC</i>	<i>SOS to 29 Bn</i>	<i>Hostijs</i>	<i>11-12-16 549(.295-12)</i>	<i>12-16 39 Bn</i>
<i>4-1-17</i>	<i>39 Bn</i>	<i>SOS to 6 Res Bn</i>	<i>Wandij</i>	<i>4-1-17 3-(P#12)</i>	<i>4-1-17 6 Res Bn</i>
<i>8-2-17</i>	<i>6 Res Bn</i>	<i>SOS on Pw to Canada.</i>		<i>2-2-17-31</i>	
		<i>for discharge Bandmaster for Recruiting Purposes</i>			





*First original Record of This man in N/E Ledger of East-Ont-Reg Dep't. Copy in Envelope 44K29 9-7-17*

G.C. Rank **BOYLER.** Henry George. Reg'l No. **1950I2.**  
 Unit **235th. to 1st Cent. Ont. Regt.** If in perm. Corps, }  
 What Unit? } **Married or Single** **Single.**  
 Place and Date of Enlistment **Peterboro. 31st. Aug. 1915.** Place of Birth **Peterboro. Ont.**  
 Name and Address, Next-of-Kin **George S. Boyler,**  
**Dawners Corners. Peterborough. Ont. Canada.** Relationship **Father.**  
 Assigned Pay Monthly \$ Payable to Relationship  
 Separation Allowance \$ Payable to Relationship

N/E. R.B. No **14402**  
 File R.L.  
 Category **Normal**

Discharge, Date and Place Reason Character  
 H. W. V., Ld. - 9546-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
<i>6</i>		<b>ARRIVED IN ENGLAND 14 5 17. S/S. MEGANTIA</b>			
14-5-17	235th Bn.	S.O.S. to 3rd. Res.	Otterpool	14-5-17	Pt. H.D.O. 266 (3rd. Res. D.O. 134 d/17.5.17)
4-6-17	Wkes	Ad. M. Bk. Hosp (27 1/2) Disch 8-6-17	Wandling	8-6-17	Ch 77.984
14-8-17.	3 Res.	Perm. to Wear Good b. Stripes	do.	14-8-17.	Pt. H.D. 223
10-9-17.	"	On Comm. R.F.C. Hastings	"	10-9-17	Pt. H.D. 250
17-10-17	"	Leaves at R.F.C. Hastings	"	10-2-17	Pt. H.D. 287
17-10-17	"	S.O.S. To 1st. B. C. R.D.	"	10-2-17	Pt. H.D. 287. 1st. B. C. R.D. 224 d/19.11.17
27-10-17	"	T.O.S. from 1.6 H.A. Pt.	"	27-10-17	Pt. H.D. 292. 1.6 H.A. 282 d/27.10.17
12-8-18	"	S.O.S. to 4 Bn Pt. H.D.	Witley	12-8-18	Pt. H.D. 224 (4 Bn Pt. H.D. 570/16-8-18)
10-9-18	4 Bn	Killed in action	Field	3-9-18	Pt. H.D. 105



Surname

Christian Name or Names

Reg. No.

BOYLER

H.G.

195012

Rank

Unit

Pte,

1CO 4

Cas. List.

13-9-18 A318-2 RFB KILLED IN ACTION ~~XXXXXX~~  
3-9-18.

A.M.D. 2 DEPT.

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

Cas. List.

---

CS  
JK

Number 195-012 Rank

PAW

Surname BOYLER

Christian Name Henry George

Units 4th Bn Canadian Theatre of War France

Date of Service 13-08-18

Remarks (A) George S. Boyler, Esq.

Latest Address of Messrs. Moore + Wearing Barristers etc.,

Roll No. B. Page 19868

200m.-6-21... Peterborough, Ont.

MOON - 2 - 51

DESP DEC 29 1922  
REGN. NO. 27365

✓ ✓ ✓ ✓  
BOYLER, Pte. H. G. #195012, 4th BN.

649-B-11844.

78  
C

*enters service*  
*not elig for 1914-1915 Star*

M

MEDALS.....father & ancestor,

George S. Boyler, Esq.,  
c/o Messrs. Moore & Wearing,  
Barristers, etc.,  
Peterborough, Ont.

*Decorations*

Scroll Desd **FEB 25 1921** Reqn. No. 22426

PLAQUE.....Father, as above

*Serial no. 984994*

Plaque Desd **NOV 16 1921** Reqn. No. P16490

C. OF S......Mother, Mrs. Elizabeth Boyler,  
Peterborough, Ont.

*W.*  
*21.6.20*

*Slap 27 <sup>3</sup>/<sub>10</sub> C 3714*

*OK*

NAME

REG. NO

FILE NO.

DATE IN

DATE OUT

P.A. OR B.F.

DATE  
REQUIRED

REMARKS

M

Letter sent recalling M.X.  
22/4/20



No. 220021 RANK Pte

NAME Boyler, H

5

T. O. S. 14/8/15  
D.O. of 14/8/15

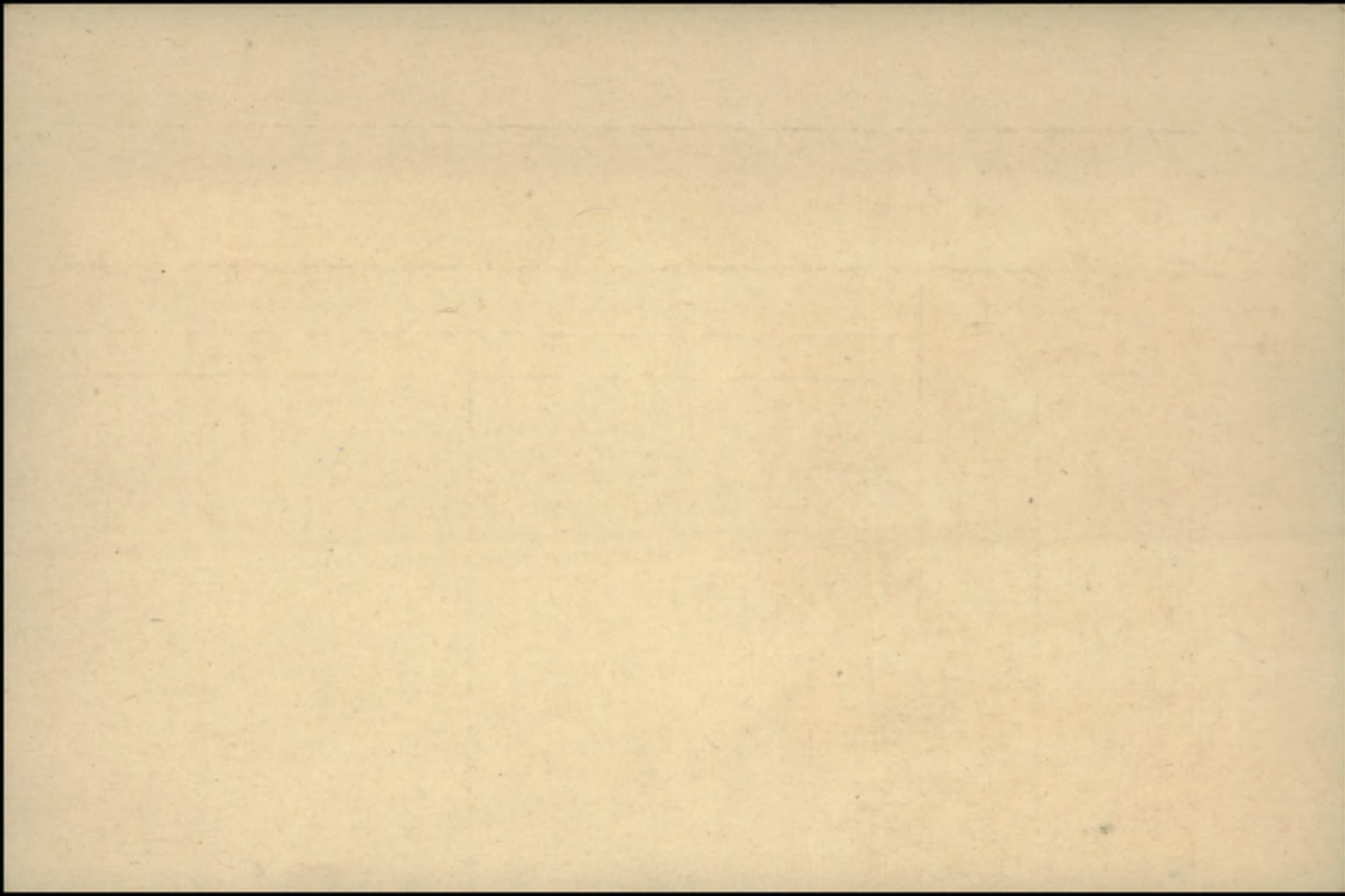
UNIT 57th Regt. (Peterborough Rangers)

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914 Aug. 14	1914 Aug. 31	✓	Transf. to 80th Battalion, 1/9/15 should now 80th Bn paylists	D.O. of 16/9/15
Sept 1	Sept 1	7/		
Sept 1	Sept 30	✓		
Oct.		✓		

UNIT SAILED

MAY 16 1916



13

CARD NO.

SURNAME. *Bayler,*

CHRISTIAN NAMES

*Henry George*

FOLL.

*195012*

REGL. NO.

~~*198012*~~

RANK

*Pte.*

UNIT

~~*93rd. 235th.*~~

*Batt.*

FORMER CORPS

*Nil.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

*Bayler, George S.*

RELATIONSHIP TO SOLDIER

*Father*

ADDRESS

*Peterboro', Ont.*

COUNTRY OF BIRTH

*Canada. Peterboro', Ont.*

DATE

*0/10 3/5/17*

PLACE OF ATTESTATION

*Peterboro' Ont.*

DATE

*Aug 31st. 1915*

*Sailed from Halifax 15/17 16<sup>478</sup> per SS "Empress of Brit"*  
*Trans from 93rd Bn to 235th Auth 235th Bn. N.R. 16/5/17. R/C. 11/247.*

From *Hulgaripes* s.s. "Metagama" 3-5-15

MARRIED

SINGLE

Yes.

WIDOWER

TRADE OR CALLING

Machinist

RELIGION

Methodist

DESCRIPTION.

APPARENT AGE

19

YEARS

2

MONTHS

HEIGHT

5

FEET

7

INCHES

CHEST MEASUREMENT

35

INCHES

EXPANSION

5

INCHES

COMPLEXION

Fair

EYES

Grey

HAIR

Lt. Brown.

DISTINGUISHING MARKS

Scar inner side of right eye, downward.

MEDICAL EXAMINATION.

PLACE

Peterborough, Ont.

DATE

Aug. 10, 1915

Returned per S.S. Missanabie "2" & M. Ault F. 13.  
Special Authority Auth. 1313

No.

RANK

Plt.

NAME

Boyer H. G.

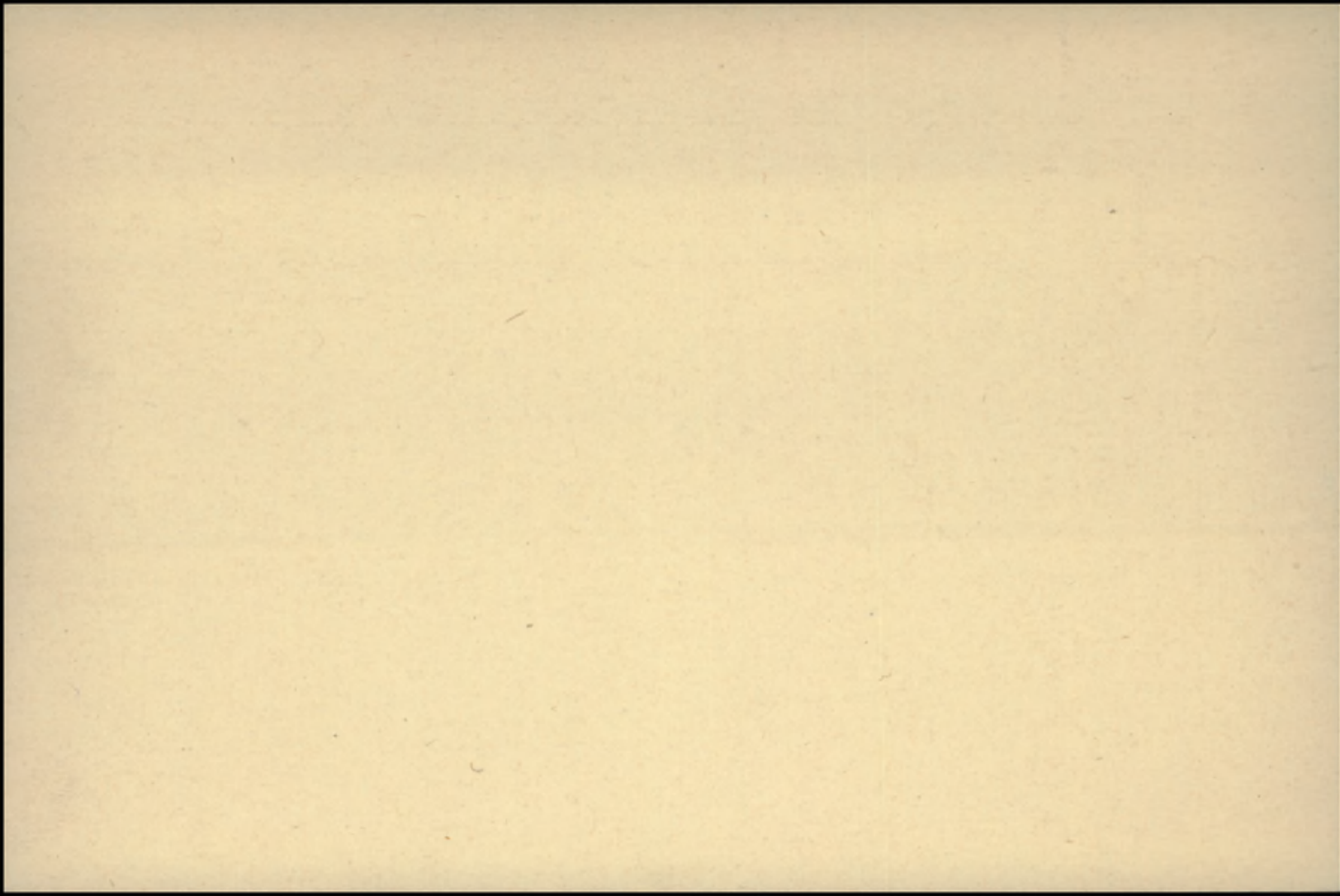
T. O. S.

UNIT

5-7<sup>th</sup> Battalion S.E.F.

M. D. 5-Val

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Sept-1	1915 Sept-1	n.	Trans to 80 <sup>th</sup> Pen. 1/9/15	Sept-pay list.



No. 175012 RANK *Pte*

NAME *Boyer. H. G.*

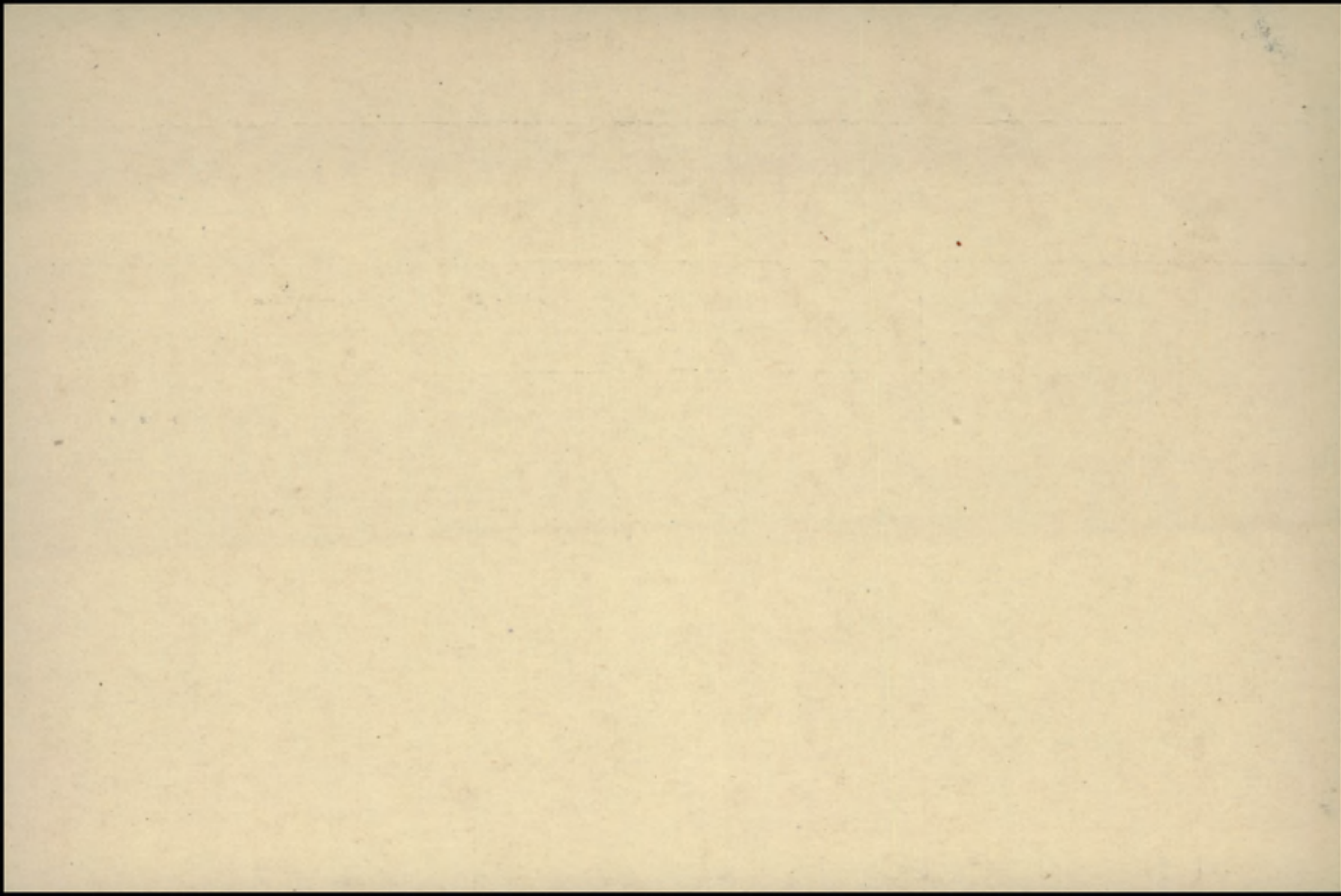
T. O. S.

UNIT *235th Battalion C.E.F.*

*Transfd from 247th Bn  
Do 250 apl P. I*

M. D. *3 -*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1917 apl 7 May 1</i>	<i>1917. apl 30 May 14</i>	<i>u u</i>	<i>transf to 3rd Can Bn. Bn West Sandling Camp 14-5-17.</i>	<i>DO266-14-5-17.</i>





No. 195012

RANK

Pte.

NAME

Boyer H. L.

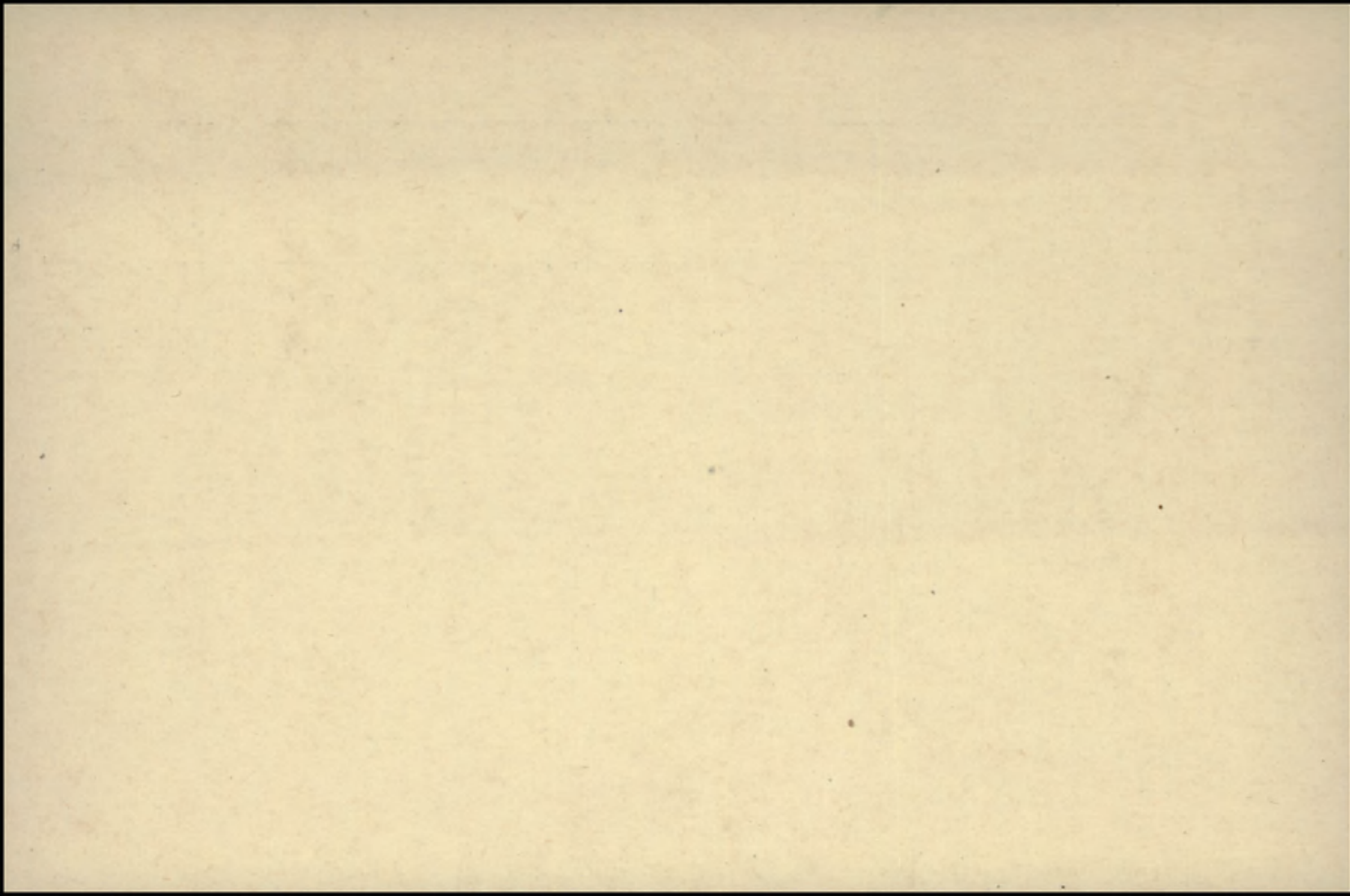
~~T.O.S.~~Trans from 93<sup>rd</sup> Bn.  
Feb. Paylist.

UNIT

247th. Battalion

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917	1917.			
Feb 24	Feb 28	c		
Mar.		c		
Apr. 1	Apr. 6	n	Trans. to 235th. Bn. 6-4-17	D.O. 86 of 10-4-17



No. 198012 RANK *pte*  
 195012 *mar. pay list.*

NAME *Boyle H.* *G*

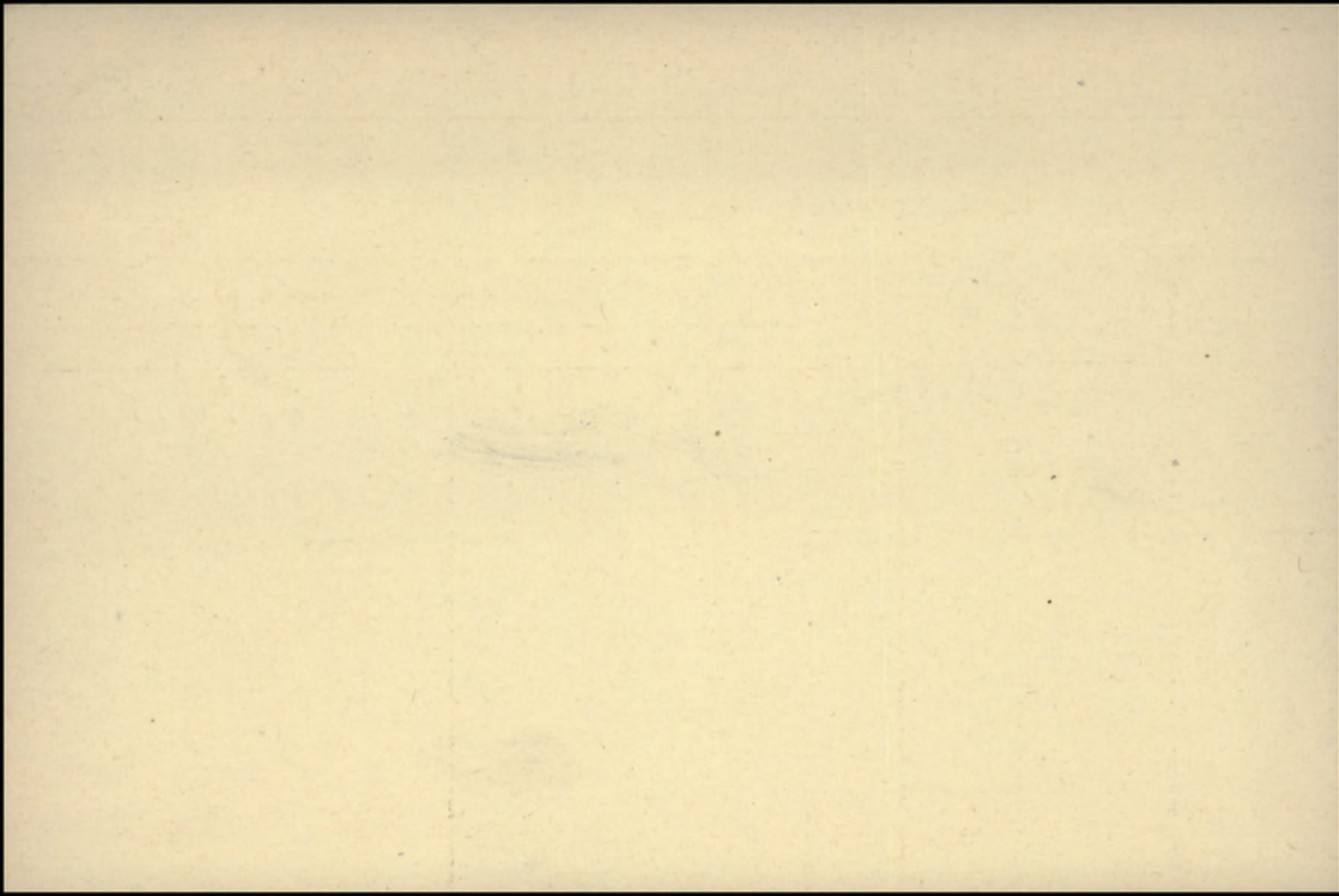
T. O. S.

UNIT *93rd Battalion*

M. D. *3*

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
<i>1915</i>	<i>1915</i>			
<i>Nov. 1</i>	<i>Nov. 30</i>	<i>✓</i>		
	<i>Dec.</i>	<i>✓</i>		
<i>1916</i>	<i>1916</i>			
	<i>Jan.</i>	<i>✓</i>		
	<i>Feb.</i>	<i>✓</i>		
	<i>Mar.</i>	<i>✓</i>		
	<i>April</i>	<i>✓</i>		
	<i>May</i>	<i>✓</i>		
	<i>June</i>	<i>✓</i>		
<i>July 1</i>	<i>July 15</i>	<i>✓</i>		
<i>July 16</i>	<i>July 31</i>	<i>✓</i>		

UNIT SAILED  
 JUL 15 1916



NAME

Boyer Henry George

REGT'L. No.

145012

RANK AND CORPS

Pvt 4th Bn 20th Inf

H. Q. FILE No. 649

FOLLOWS

NO.

34th Bn

FOLLOWS

CABLE

NO.

DATE

NATURE OF CASUALTY

Q. 532	16-9-18
34-11	Nov 11
4318	3-9-18

K. in A Sept 3rd 1918  
 George S Boyer (father)  
 Peterboro Spt.

LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS









NAME

*Bayl.*

*H. G.*

REGT'L No.

*195-012<sup>e</sup>*

H. Q. FILE NO. 649.

RANK AND CORPS

*etc*

*3rd Cav Reg Bn.*

FOLLOWS

No.

CABLE

NATURE OF CASUALTY

NO.

DATE

FOLLOWS

*Boyer, Henry, George,*

*9372m*

LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

47. Maclellan's Can Thorne 27-5-17 Parotiditis





Reas. for. Disch

Date \_\_\_\_\_

J. C. C. P.

(2468) Wt. W. 2290—PP1182 6-18 J.F.W. (E3)

Regtl. No. 216212

Name Russell

(Christi

Unit CARO

R

Co

Category B 2

Name

*Boyer Bdm. St. G.*

M. F. W. 41  
1 0M-7-16  
1772-39 889.

L.P.O. No.  
*121251*

Regimental No.

*195012*

Name and address of next-of-kin

Unit

*61st Batt*

*Peterboro*

Date of enlistment

*Oct.*

Place of

Married (yes or no)

*SA ml*

Date and place discharged

*Special Authority  
Trans to M D 3 1<sup>2</sup> 17.*

Amount of pay assigned monthly \$

*74.*

Reason for discharge

To whom payable

Character on discharge

*Missonabus 11.2.17 (2.2.17)*

L. H. Job 5351-M. & D. 6880.

Date		No. of Days	PAY		Field Allowance		Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To		Rate	Amount	Rate	Amount			No.	Date					
	<i>22</i>	<i>17/16</i>					<i>70 69</i>								<i>Eng &amp; P L</i>
													<i>9 73</i>		<i>Adv £ 2.0.0 320</i>
													<i>24 33</i>		<i>" £ 5.0.0 9500</i>
													<i>24 33</i>		<i>" £ 5.0.0 9900</i>
													<i>9 73</i>		<i>Paid on boat</i>
<i>23</i>	<i>12/76</i>	<i>31. 1/17</i>	<i>40</i>	<i>100 40 00</i>	<i>40</i>	<i>10 4 00</i>		<i>114 69</i>	<i>Bal cr on Trans.</i>	<i>16 57</i>			<i>30 00</i>	<i>114 69</i>	<i>to Quebec Paid</i>
								<i>114 69</i>							<i>Int. Def. pay #1. 9<sup>11</sup>/17</i>

*A/c Trans as from 1/2/17  
Trans to M D 3. with L. P. L  
7<sup>3</sup>/17*

Name .....

Regimental No.

Name and address of next-of-kin

Unit

Date of enlistment

Place of “

Married (yes or no)

Date and place discharged

Amount of pay assigned monthly \$

Reason for discharge

To whom payable

Character on discharge

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.					



MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

M. F. W. 12.  
 25m-4-17.  
 H. Q. 1772-39-819.

To Whom *Miss Beatrice Heard*  
 Address *237 George St.,  
 Peterborough  
 Ont.*

By Whom Assigned *Boyer, W. G.*  
 Regtl. No. *195012*  
 Rank *Pte*  
 Corps *235 Bn.*

Rate *\$20<sup>00</sup>*

*MAY 1 1917*

**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				



18091 3

Miss

MILITIA AND DEFENCE  
ASSIGNED PAY

M. F. W. 12a.  
18m.-417.  
1772-39-819.

Sheet No. 2

Beatrice Heard  
(Assignee)

OVERSEAS CONTINGENTS

Name of Soldier

Boyle, H. G.  
Plt. 235 Bn.

PAYMENTS. 195012

L. L. Job 19227-M. & D. 7811.

Month.	Year.	Cheque No.	Amt.	Remarks.
			20 <sup>00</sup>	MAY 1 1917
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June		C 17677	40	Lu
July		C 19891	20	20 W.
Aug.		C 27293	20	CB
Sept.		F 38591	20	6
Oct.		S 48708	20	
Nov.				120 ✓
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

ER

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.				

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

May 1/17

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

20			
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## PARTICULARS OF SEPARATION ALLOWANCE

No. 195012  
 Rank Pte Promoted Reverted Discharge  
 Soldier's Name W. J. Boyler  
 Battalion 235<sup>th</sup> Bn  
 Beneficiary  
 Relationship  
 Address

## PARTICULARS OF ASSIGNMENT

Name Miss Beatrice Beard  
 Address 237 George St, Peterborough Ont.  
 Change of Address  
 1  
 2  
 3  
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Oct. 31-17			120	120	
Nov	B 55814		20	20	
Dec	D 59885		20	20	S
Jan	Q 66129		20	20	Pt.
Feb	G 94046		20	20	0
Mar	A 101325		<del>20</del>	<del>20</del>	✓
			200	200	

1965-4-5

2101328 cancelled  
 d.P. cancelled pending receipt of 3 m. 25-2-18 M.R.O 29.  
 M.R.O 20, 9-7-18  
 Discharged to com. in Imp. Army 1-3-18  
 M.R.O. 20, 14-5-18 per 3 m. of 18-2-18

M. F. W. 128  
 400M-6-17-1772-39-1141  
 L. L. 22320-M. & D. 7563.



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

## OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

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### 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-6-17-1772-89-141  
 L. L. 22220-M. & D. 1433.

Date of Enlistment 14. 8. 15.

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

17461

1st June 1918.

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

15.00			
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## PARTICULARS OF SEPARATION ALLOWANCE

No. 195012  
 Rank Pte Promoted Reverted Discharge  
 Soldier's Name Boyles H. G.  
 Eattalion 93 Bn.  
 Beneficiary  
 Relationship  
 Address

## PARTICULARS OF ASSIGNMENT

Name  
 Address  
 Change of Address

1	MISS B. HEARD, 237 GEORGE ST., PETERBORO, ONT.	B17461
2	% 195012 PTE H.G. BOYLER	15 15.00
3	FIFTEEN DOLLARS	
4		

Feb 22/18 2.00 2.00

Date	Cheque No.	Amount S/A	Amount A/P	Total
July J	6246		15	15 ✓
July A	24574		15	15 ✓
Aug C	31955		15	15 ✓
OK B.M. SEP. D	38238		15	15 ✓
OCT.			260	260

H. 1965-H-5 REMARKS M.R. 93.

A.C.O.# LA 820. A.P. Paid at 20<sup>00</sup> from 1-5-17 to 28-2-18 = 200<sup>00</sup>  
 J 6246 - Mailed 22-7-18.

KILLED IN ACTION }  
 DIED OF WOUNDS } DATE... 3-9-18.  
 C. L. No. 304 DATE... 17-9-18.  
 M. R. O. #11662 TO DESTROY RENDERED 20-9-18.  
 B. P. C. FORM 1 & G. F. X. COMPLETED ON FILE  
 CLERK... J.P.H. DATE... 20-9-18.

Box Renat 2.16/19

ENTERED IN  
 AUDIT INDEX  
 JUL 18 1918  
 M.C.  
 VOUCHER SECTION

M. F. W. 123.  
 4076C-17-1772 30-1M4  
 L. L. 22320-M. & D. 7393

AUTHORITY FOR NEW ACC'T. } 2M-17 June 18.  
 Shatts...  
 18.7.18.

# Separation and Assigned Pay Branch

## OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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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. 23320-M. & D. 1983.



LIST OF DISCHARGE DOCUMENTS.

1. Proceedings on discharge. (Army Form B. 268.)
2. Proceedings on transfer to reserve (if any). (Army Form B. 2056.)
3. Duplicate attestation.
4. Army Form B. 97 (if any).
5. Declaration of change of name (if any).
6. Re-engagement paper (if any). Army Form B. 136.
7. Authority for continuance, or extension, of service (if any). Army Form B. 221.)
8. Court of Inquiry on an injury (if any) (Army Form A 2.)
9. Regimental conduct sheet. (Army Form B. 120).
10. Company conduct sheet. (Army Form B. 121.)
11. Copies of convictions by Civil Power (if any).
12. Medical history sheet. (Army Form B. 178).
13. Medical report on invalid (if any). (Army Form B. 179).
14. Copy of receipt for purchase money (if any).
15. Attestation of fraudulently enlisted man for corps in which he has not been held to serve (if any).
16. Detailed statement of former service allowed to reckon towards pension (if any).
17. Copy of 3rd page attestation (in the case of men from abroad entitled to deferred pay who go to Netley or the discharge depot for discharge).
18. Descriptive return (Army Form D. 400), where required. See section 11 on second page.
19. Active service casualty form. (Army Form B. 103).
20. Employment sheet. (Army Form B. 2066).

In the case of recruits who are rejected before, or on, final approval, the discharge documents will consist of—

1. Duplicate attestation. (On third page the date and cause of discharge will be entered and signed by the competent military authority).
2. Medical history sheet (if any). (Army Form B. 178).

Instructions as to the preparation, dispatch, and custody, of discharge documents.

1. When a soldier is to be discharged, the documents retained with the duplicate attestation will be placed inside this form. Should any of the documents be missing, an explanation of the deficiency, signed by the commanding officer, must be substituted for the missing document. The officer in charge of records will then extract from the original attestation, any documents required to complete the list of discharge documents enumerated in the margin, which will then be placed in this form in the sequence given.

2. When men are discharged from the colours at home as medically unfit, or with claims to pension, Army Form B. 268 will be sent confirmed, together with the duplicate attestation and documents retained therein to the officer in charge of records 10 days in advance of the date for discharge in the case of invalids, and 14 days in other cases. This officer will then extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them in this form, and after carefully checking the duplicate attestation with the original forward the whole to the Secretary, Royal Hospital, Chelsea. When such men are discharged abroad, the same procedure will be adopted as above, with the exception that the discharge documents will be sent to the officer in charge of records immediately after discharge takes place (except in the case of men who are granted gratuities on discharge from local battalions or companies, Royal Artillery).

3. When soldiers are sent home from abroad for discharge, the documents retained with the duplicate attestation will be placed inside this form and sent home with the men for transmission to the officer who carries out the discharge, together with the following additional forms:—

- (a) Discharge certificate (Army Form B. 2070 or Army Form B. 2064).
- (b) Character Certificate (Army Form B. 2067) if entitled.
- (c) Copy company conduct sheet (Army Form B. 121) when required under King's Regulations.

The duplicate attestation and documents retained therein will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin and place them in this form.

4. The discharge documents of re-enlisted pensioners, on re-discharge, will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them inside this form, and forward the whole to the Secretary, Royal Hospital, Chelsea, irrespective of the cause of discharge.

5. The original and duplicate attestations of recruits who are rejected before, or on, final approval will be retained by the approving officer for one year, when they will be destroyed.

6. In all other cases the discharge documents will be sent, directly the discharge is carried out, to the officer in charge of records of the unit concerned.

7. Postage need not be paid, and receipts are not required, in the case of documents sent to Chelsea or to the War Office,

8. When the discharge documents of men not entitled to pension are sent to the officer who will have final charge of them, they are to be accompanied by Army Form B. 279, and that officer will, if they are found to be correct, sign and return Army Form B. 279. Should any document be missing, he must at once apply for it.

9. The officers having final charge of the discharge documents will arrange them according to regimental numbers, and enter the names in the alphabetical index, Army Book No. 129.

MISSEANABIE  
CERTIFICATE re DISCHARGE

Bandsman  
DOCUMENT Form B. 268.

Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. <u>195012</u>	Army Rank <u>Bandsman</u>
Name <u>Boyles Henry George</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>	
Corps <u>C.C.A.C.</u>	
Battalion, Battery, Company, Depot, &c. <small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &amp;c., or to General Staff of the Army, it should be so stated.)</small>	
Date of discharge _____	
Place of discharge _____	
1. Description at the time of discharge.	
Age <u>20</u> years <u>7</u> months	Descriptive marks. <u>1/2 in. mark L arm</u> <u>Scar on r. cheek</u>
Height <u>5</u> feet <u>7</u> inches	
Chest measure- ment { girth when fully expanded _____ ins. range of expansion _____ ins.	
Complexion <u>Fair</u>	
Eyes <u>Grey</u>	
Hair <u>Fair</u>	
Trade <u>Machinist</u>	
Intended place of residence (To be given as fully as practicable)	
<small>(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)</small>	
2. The above-named man is discharged in consequence of <u>Bandsman</u> <u>P. J. C. Para 392 Sec XXV Auth. U. G. Letter</u> <u>U. G. 16-1-14 dated 27-11-16</u>	
<small>(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)</small>	
3. Military character:—	
4. Character awarded in accordance with King's Regulations:—	
CANADIAN DISCHARGE DEPOT	
<u>[Signature]</u> Lieut.-Col.	
Officer Commanding	
Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.	
Initials of Commanding Officer.	
Army Form B. 2088 has been issued to*	

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... .. Class \_\_\_\_\_

6. Campaigns, Medals and Decorations

Local Casualty

Certificate of education .....

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me in accordance with Regulations.

(Place) \_\_\_\_\_

(Date) \_\_\_\_\_

Commanding \_\_\_\_\_

CANADIAN DISCHARGE DEPOT  
J. J. M...  
Lieut. Col.,  
Batt. \_\_\_\_\_  
Chief Commanding,

8. Certificate to be signed by the soldier on discharge.

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(Place) \_\_\_\_\_ (Signature of Soldier.)

(Date) \_\_\_\_\_ (Signature of Witness.)

(When a soldier is absent through illness or any other cause, and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned should be attached here.)

9. Additional certificate in the case of a soldier who takes his discharge at his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

(Signature of Soldier.)

10. Statement of service.

Service towards engagement to \_\_\_\_\_ (the date to which the record of service is completed) \_\_\_\_\_ years \_\_\_\_\_ days.

Further service " " \_\_\_\_\_ (the date of confirmation of discharge) " " " " " "

Total ... " " " "

11. Confirmation of discharge.

The discharge of the above-named man is hereby confirmed for \_\_\_\_\_ (date)

(Place) \_\_\_\_\_ Signature \_\_\_\_\_

(Date) \_\_\_\_\_

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated and signed by the soldier.)

\_\_\_\_\_

This space to be left blank for the Chelsea Number.



Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. <u>195012</u>	Army Rank <u>Pte</u>
Name <u>Henry George Boyle</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>	
Corps <u>392 Battalion, B.E.F</u>	
Battalion, Battery, Company, Depot, &c. <small>(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &amp;c., or to General Staff of the Army, it should be so stated.)</small>	
Date of discharge _____	
Place of discharge <u>Canada</u>	
1. Description at the time of discharge.	
Age <u>20</u> years <u>7</u> months	Descriptive marks.  <u>Scar on right cheek</u>
Height <u>5</u> feet <u>10</u> inches	
Chest measurement { girth when fully expanded <u>36</u> ins. range of expansion <u>2 1/2</u> ins.	
Complexion <u>Fair</u>	
Eyes <u>Grey</u>	
Hair <u>Light Fair</u>	
Trade <u>machinist</u>	
Intended place of residence (To be given as fully as practicable)	
<small>(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)</small>	
2. The above-named man is discharged in consequence of <u>Bandeman</u> <u>R.R. + O Para. 392 Sect XXV. Auth: A.G.'s letter</u> <u>A.G. 16-1-17 dated 27-11-16.</u>	
<small>(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)</small>	
3. Military character:— <u>Good.</u>	
Character awarded in accordance with King's Regulations:— <u>Good - Machinist by trade</u>	
Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.	
Initials of Commanding Officer. <u>[Signature]</u>	
Army Form B. 2088 has been issued to*	

LIST OF DISCHARGE DOCUMENTS.

- Proceedings on discharge (Army Form B. 268)
- Proceedings on transfer to reserve (if any) (Army Form B. 2056)
- Duplicate attestation
- Army Form B. 97 (if any)
- Declaration of change of name (if any)
- Re-engagement paper (if any) (Army Form B. 136)
- Authority for continuance, or extension, of service (if any) (Army Form B. 221)
- Court of Inquiry on an injury (if any) (Army Form A. 2)
- Regimental conduct sheet (Army Form B. 120)
- Company conduct sheet (Army Form B. 121)
- Copies of convictions by Civil Power (if any)
- Medical history sheet (Army Form B. 178)
- Medical report on invalid (if any) (Army Form B. 179)
- Copy of receipt for purchase money (if any)
- Attestation of fraudulently enlisted man for corps in which he has not been held to serve (if any)
- Detailed statement of former service allowed to reckon towards pension (if any)
- Copy of 3rd page attestation (in the case of men from abroad entitled to deferred pay who go to Netley or the discharge depot for discharge)
- Descriptive return (Army Form D. 400), where required  
See section 11 on second page
- Active service casualty form (Army Form B. 103)
- Employment sheet (Army Form B. 2066)

In the case of recruits who are rejected before, or on, final approval, the discharge documents will consist of—

- Duplicate attestation.  
(On third page the date and cause of discharge will be entered and signed by the competent military authority)
- Medical history sheet (if any) (Army Form B. 178)

Instructions as to the preparation, despatch, and custody, of discharge documents.

1. When a soldier is to be discharged, the documents retained with the duplicate attestation will be placed inside this form. Should any of the documents be missing, an explanation of the deficiency, signed by the commanding officer, must be substituted for the missing document. The Officer in charge of records will then extract from the original attestation, any documents required to complete the list of discharge documents enumerated in the margin, which will then be placed in this form in the sequence given.

2. When men are discharged from the colours at home as medically unfit, or with claims to pension, Army Form B. 268 will be sent confirmed, together with the duplicate attestation and documents retained therein to the officer in charge of records 10 days in advance of the date for discharge in the case of invalids, and 14 days in other cases. This officer will then extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them in this form, and after carefully checking the duplicate attestation with the original forward the whole to the Secretary, Royal Hospital, Chelsea. When such men are discharged abroad, the same procedure will be adopted as above, with the exception that the discharge documents will be sent to the officer in charge of records immediately after discharge takes place (except in the case of men who are granted gratuities on discharge from local battalions or companies, Royal Artillery).

3. When soldiers are sent home from abroad for discharge, the documents retained with the duplicate attestation will be placed inside this form and sent home with the men for transmission to the officer who carries out the discharge together with the following additional forms:—

- Discharge certificate (Army Form B. 2079 or Army Form B. 264).
- Character certificate (Army Form B. 2067) if entitled.
- Copy company conduct sheet (Army Form B. 121) when required under King's Regulations.

The duplicate attestation and documents retained therein will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin and place them in this form.

4. The discharge documents of re-enlisted pensioners, on re-discharge, will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them inside this form, and forward the whole to the Secretary, Royal Hospital, Chelsea, irrespective of the cause of discharge.

5. The original and duplicate attestations of recruits who are rejected before, or on, final approval will be retained by the approving officer for one year, when they will be destroyed.

6. In all other cases the discharge documents will be sent, directly the discharge is carried out, to the officer in charge of records of the unit concerned.

7. Postage need not be paid, and receipts are not required, in the case of documents sent to Chelsea or to the War Office.

8. When the discharge documents of men not entitled to pension are sent to the officer who will have final charge of them, they are to be accompanied by Army Form B. 279, and that officer will, if they are found to be correct, sign and return Army Form B. 279. Should any document be missing, he must at once apply for it.

9. The officers having final charge of the discharge documents will arrange them according to regimental numbers, and enter the names in the alphabetical index, Army Book No. 129.

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

*nil*  
*[Signature]*

Classification for service, or proficiency pay... .. Class

6. Campaigns, Medals and Decorations

*nil*  
*[Signature]*

Certificate of education .....

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me in accordance with Regulations.

*Have not seen accounts.*

(Place) *West Sandling* *[Signature]* Lt Col.

(Date) *Dec 21<sup>st</sup> 1916* Commanding *39<sup>th</sup>* Battn. *C. E. J.* Regiment.

8. Certificate to be signed by the soldier on discharge.  
hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(Place) \_\_\_\_\_ (Signature of Soldier.)

(Date) \_\_\_\_\_ (Signature of Witness.)

(When a soldier is absent through illness or any other cause, and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned should be attached here.)

9. Additional certificate in the case of a soldier who takes his discharge at his own request.  
I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.  
\_\_\_\_\_  
(Signature of Soldier.)

10. Statement of service.  
Service towards engagement to *21/2-16* (the date to which the record of service is completed) *1* years *130* days.  
Further service " " \_\_\_\_\_ (the date of confirmation of discharge) ... ..  
\_\_\_\_\_  
Total ... ..

11. Confirmation of discharge.  
The discharge of the above-named man is hereby confirmed for \_\_\_\_\_ (date)  
(Place) \_\_\_\_\_  
Signature \_\_\_\_\_  
(Date) \_\_\_\_\_

Commanding officers (or the Paymaster, if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital, Chelsea, a descriptive return of the man on Army Form D. 400.

RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

\_\_\_\_\_

PENSIONS AND CLAIMS BOARD, Canadian Expeditionary Force, assembled at

Folkestone, Kent, England, on the \_\_\_\_\_ day of \_\_\_\_\_ 191\_\_\_\_\_

Members of Board.

(i) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

Proceedings.

The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked

- 20. (a) State whether the disability is the result of injuries received or illness contracted (1) in the presence of the enemy, (2) on active service, (3) on leave from active service.
- (b) If due to one of these causes, to what specific conditions do the Board attribute it?
- 21. Has the disability been caused or aggravated by:
  - (a) Intemperance?
  - (b) Misconduct?
- 22. Is the disability permanent?
- 23. If not permanent, what is its probable minimum duration? To be stated in months.
- 24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present? In defining the extent of his inability to earn a livelihood, estimate it at 1/4, 1/2, or total incapacity.
- 25. If an operation was advised and declined, was the refusal unreasonable?
- 26. Do the Board recommend:
  - (a) Fit for duty?
  - (b) Fit for base duty?
  - (c) Invalided to Canada?
  - (d) Discharge as permanently unfit?
- 27. Remarks.

Signatures:—

President \_\_\_\_\_

Signed at 41, Grimston Avenue, Folkestone, this \_\_\_\_\_ day \_\_\_\_\_

Members of \_\_\_\_\_ Date \_\_\_\_\_ 191\_\_\_\_\_

Approved \_\_\_\_\_

Station \_\_\_\_\_ President \_\_\_\_\_

Administrative Medical Officer \_\_\_\_\_ Date \_\_\_\_\_

*Paulsman*  
Medical Report on an Invalid.

Army Form B. 179. Canada.

Station West Landing,

Date Oct. 17th, 1916.

- 1. Unit. 39th Batt., C.E.F.
- 2. Regimental No. 195012
- 3. Rank Pte.
- 4. Name Boyer, H.C.
- 5. Age last birthday 20
- 6. Enlisted  on 14th August 1915.  
 at Peterboro, Ont.
- 7. Former Trade or Occupation Machinist.

8. Disability.

- (a) In the presence of the enemy? Not applicable.
- (b) On active service? Enlisted as Bandman.
- (c) On duty? \_\_\_\_\_
- (d) Off duty? \_\_\_\_\_

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

- 9. Date of origin of disability. Previous to enlistment.
- 10. Place of origin of disability. Canada.
- 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. This man enlisted with 39th Batt., as a Bandman, never in any drilling or took any instruction as a soldier. M.P.B. 179 called for by C.O.A.O. 9-10-16.

- 12. (a) Give your opinion as to the causation of the disability. Unknown.
- (b) If you consider it to have been caused by wounds received or illness contracted (1) in the presence of the enemy (2) on active service, explain the specific conditions to which you attribute it. (See notes on page 3).

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith.

Station \_\_\_\_\_ Date \_\_\_\_\_

(1) No. \_\_\_\_\_

(2) No. \_\_\_\_\_

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

This man is normal in appearance and has no complaints.  
Resp. System :- Normal.  
Cardiac System. Slight Systolic soft murmur best heard about level of 3rd Costal Cartilage right side. No No evidence of loss of compensation.  
Digestive and Nervous Systems, Normal.

14. If the disability is an injury, was caused

- (a) In the presence of the enemy?
- (b) On active service?
- (c) On duty?
- (d) Off duty?

Not Applicable.

15. Was a Court of Inquiry held on the injury?

- If so—(a) When?
- (b) Where?
- (c) Opinion?

Not Applicable.

16. Was an operation performed? If so, what?

Not Applicable.

17. If not, was an operation advised and declined?

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly\* attributable to active service?

19. Do you recommend

- (a) Fit for duty?
- (b) Fit for base duty?
- (c) Invalided to Canada?
- (d) Discharge as permanently unfit?

Yes, Enlisted as Bandsman only.

*E. M. ...*  
Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith,

Station West Sandling,  
Date 17th Oct. 1916.  
Officer in charge of Hospital.

\* Loss of teeth on, or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as it is essential that the Members of the Pensions and Claims Board should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

- (ii.) Expressions such as "may," "might," "probably," &c., should be avoided.
- (iii.) The rates of pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted (1) in the presence of the enemy, (2) on active service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 641 to 648 of the Canadian Pay and Allowance Regulations).
- (iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

20. (a) State whether the disability is the result of injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service.  
(b) If due to one of these causes, to what specific conditions do the Board attribute it?

21. Has the disability been caused or aggravated by  
(a) Intemperance?  
(b) Misconduct?

22. Is the disability permanent?

23. If not permanent, what is its probable minimum duration?  
To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

In defining the extent of his inability to earn a livelihood, estimate it at  $\frac{1}{2}$ ,  $\frac{1}{3}$ ,  $\frac{2}{3}$ , or total incapacity.

25. If an operation was advised and declined, was the refusal unreasonable?

26. Do the Board recommend  
(a) Fit for duty?  
(b) Fit for base duty?  
(c) Invalided to Canada?  
(d) Discharge as permanently unfit?

27. Remarks.

Signatures :—

\_\_\_\_\_  
President.

Station \_\_\_\_\_  
Date \_\_\_\_\_  
\_\_\_\_\_  
Members.

\_\_\_\_\_  
Approved.

Station \_\_\_\_\_  
Date \_\_\_\_\_  
\_\_\_\_\_  
Administrative Medical Officer.

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178<sup>A</sup> to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY OF

Surname Boyle Christian Name H. E.

TABLE I.—General Table,

Birthplace { Parish County } Examined { on day of 191... at } Declared Age... years... days Trade or Occupation Height... feet... inches Weight... lbs. Chest Measurement { Girth when fully Expanded Range of Expansion } Physical Development Vaccination Marks { Arm... RIGHT LEFT Number } When Vaccinated Vision { R.E.-V= L.E.-V= } (a) Marks indicating congenital peculiarities or previous disease (b) Slight defects but not sufficient to cause rejection

TABLE III.—Boards; Courts of Enquiry, 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.

Table with columns: Date, Brief Details and Signature. Multiple rows for medical events.

TABLE IV.—Service Table.

Table with columns: Station or Troopship, Date of arrival or embarkation, Date of departure or disembarkation. Includes enlistment and service dates.

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.

Station, Date, Disease, Result. Includes handwritten notes like 'E. Sore throat 23-10-17' and '18/11/16'.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Transferred to, Date, Corps, Regt. Number, Habits, Date. Includes handwritten notes like '195019' and '12.8.18'.

Enlisted on 14th day of Aug 1915 at Peterboro, Ont. M.O. records.

Vaccination Marks. Arm, Right, Left. Number, Result, Date. Includes handwritten notes like 'None'.

Physical development, Chest measurement, Weight, Height, Trade or occupation, Apparent age.

Birthplace, City or Town, Date, Rank, M.O. records.

Examined on 10th day of Aug 1915 at Peterboro, Ont. Approved by Henry George.

ORIGINAL MEDICAL HISTORY SHEET. C.A.F. #195019. 195019. 195019.





**PENSIONS AND CLAIMS BOARD, Canadian Expeditionary Force, assembled at**

**Folkestone, Kent, England, on the \_\_\_\_\_ day of \_\_\_\_\_, 191\_\_\_\_\_.**

**Members of Board.**  
 The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked

**Proceedings.**

The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked

20. State whether the disability is the result of injuries received or illness contracted (1) in the presence of the enemy (2) on active service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 641 to 648 of the Canadian Pay and Allowance Regulations).
21. Has the disability been caused or aggravated by
- Intemperance?
  - Misconduct?
22. Is the disability permanent?
23. If not permanent, what is its probable minimum duration?  
 To be stated in months.
24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?
25. In defining the extent of his inability to earn a livelihood, estimate it at 1/4, 1/2, or total incapacity.
26. If an operation was advised and declined, was the refusal unreasonable?  
 Do the Board recommend
- Fit for duty?
  - Fit for base duty?
  - Invalided to Canada?
  - Discharge as permanently unfit?
27. Remarks.

Signatures:—

President: \_\_\_\_\_  
 Signed at \_\_\_\_\_, Grimston Avenue, Folkestone, this \_\_\_\_\_ day \_\_\_\_\_, 191\_\_\_\_\_.

Administrative Medical Officer: \_\_\_\_\_  
 President: \_\_\_\_\_  
 Date: \_\_\_\_\_

**Medical Report on an Invalid.**

~~Baudsman~~ L Inf 7268  
 4/5 10/11/16  
 Army Form B. 179.  
 Canada.

Station West Sandburg

Date 17<sup>th</sup> October 1916.

- Unit. 39<sup>th</sup> BATT 6.6.5.
- Regimental No. 195012
- Rank Pte.
- Name Boyer H. G.
- Age last birthday 20
- Enlisted on 14<sup>th</sup> August 1915  
at Peterboro Det
- Former Trade or Occupation Machinist

**8. Disability.**

V.A.H  
Enlisted as Baudsman.

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

- Date of origin of disability. Previous to Enlistment
- Place of origin of disability. Canada
- Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.  
This man enlisted with 9<sup>th</sup> Batt. as a Baudsman, never did any drilling or took any instruction as a Soldier M.S.B. 179 called for by C.O. 9/10/16.

Officer in medical charge of case.

- I have satisfied myself of the general accuracy of this report, and concur therewith.
- (a) Give your opinion as to the causation of the disability. None
  - (b) If you consider it to have been caused by wounds received or illness contracted (1) in the presence of the enemy (2) on active service, explain the specific conditions to which you attribute it. (See notes on page 3).  
(1) No (2) No

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

This man is normal in appearance and has no complaints.

Resp. System - Normal.

Cardiac System. Slight systolic soft murmur best heard about level of 3rd costal cartilage right side.

No evidence of loss of compensation.

Digestive & Nervous Systems - Normal.

14. If the disability is an injury, was caused

- (a) In the presence of the enemy?
- (b) On active service?
- (c) On duty?
- (d) Off duty?

not applicable  
not applicable  
not applicable  
not applicable

15. Was a Court of Inquiry held on the injury?

- If so—(a) When?
- (b) Where?
- (c) Opinion?

not applicable

16. Was an operation performed? If so, what?

not applicable

17. If not, was an operation advised and declined?

not applicable

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly attributable to active service?

not applicable

19. Do you recommend

- (a) Fit for duty?
- (b) Fit for base duty?  Yes. Enlisted as Bandman only.
- (c) Invalided to Canada?
- (d) Discharge as permanently unfit?

*B. M. Oles*  
Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith,

Station West Sandling

*G. Brathill*  
Officer in charge of Hospital.

Date 17th Oct. 1916.

\* Loss of teeth on, or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as it is essential that the Members of the Pensions and Claims Board should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted (1) in the presence of the enemy, (2) on active service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 641 to 648 of the Canadian Pay and Allowance Regulations).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

20. (a) State whether the disability is the result of injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service.

a1

a2

(b) If due to one of these causes, to what specific conditions do the Board attribute it?

21. Has the disability been caused or aggravated by

- (a) Intemperance?
- (b) Misconduct?

22. Is the disability permanent?

23. If not permanent, what is its probable minimum duration?

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

In defining the extent of his inability to earn a livelihood, estimate it at  $\frac{1}{4}$ ,  $\frac{1}{2}$ ,  $\frac{3}{4}$ , or total incapacity.

25. If an operation was advised and declined, was the refusal unreasonable?

26. Do the Board recommend

- (a) Fit for duty?
- (b) Fit for base duty?
- (c) Invalided to Canada?
- (d) Discharge as permanently unfit?

27. Remarks.

Signatures:—

President.

Station \_\_\_\_\_

Date \_\_\_\_\_

Members.

Approved.

Station \_\_\_\_\_

Date \_\_\_\_\_

Administrative Medical Officer.

P. 559.  
MARRIED OR SINGLE

Single

PLACE OF BIRTH

Peterboro, Ontario, Canada

NAME AND ADDRESS OF NEXT OF KIN

George Boyler  
Hoggan St. Peterboro Ont Canada

RELATIONSHIP OF NEXT OF KIN

Father

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

Reinstated

Min: Pay 2. 8A  
4/11/18

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED

DATE DISCHARGED

V. OR A.

NAME OF HOSPITAL

31-12-16  
75.00

Int. 62 cents  
J.P.

REG'L. No. 195012

RANK

Private

NAME

Boyer Henry George

Do 256 8-10-16

IF IN PERM. CORPS  
WHAT UNIT

UNIT 93 Battalion

TRANSFERRED TO 39th Res. Bn. DATE 6 Oct. 1916

AUTHORITY Do 256 8-10-16

PERMANENT FORCE ALLOWANCES

TRANSFERRED TO Non Effective DATE 23-12-16

AUTHORITY Do 256 8-10-16

PLACE OF ATTESTATION

Peterboro Ont. Canada

TRANSFERRED TO Pay II In DATE 11/10/17

AUTHORITY Pay II 9/10/17

DATE OF ATTESTATION

August 14th 1915

TRANSFERRED TO DATE

AUTHORITY

ASSIGNED PAY MONTHLY \$

DATE EFFECTIVE

PAYABLE TO

ASSIGNED PAY MONTHLY \$

DATE EFFECTIVE

PAYABLE TO

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

EFFECTIVE

REASON

DISCHARGE DATE AND PLACE

Discharged to Canada 22/12/16

REASON AND AUTHORITY A.G. Letter 16-1-17 27/11/16

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

6-1-17 E. 22-12-16

Entered on N.E. Card Index

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

7

Checked by G. Mangum

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	No. OF DAYS	RATE	AMOUNT				1	2	3	4	1	2	3	4	CREDIT	DEBIT															
1916																																								
August																																								
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Sept																																								
1-30	30	100	3000	30	100	3000																																		
Oct																																								
1-5	5	100	500	5	100	500																																		
Oct																																								
6-31	26	76	2016	26	76	2016																																		
Nov																																								
1-30	30	30	900	30	30	900																																		
Dec																																								
1-22	22	22	484	22	22	484																																		
N.B. March 1917																																								
Aug 1917																																								

Checked by G. Mangum

Checked by G. Mangum

N.B. March 1917

3 3/4

9 Duplicates

JAN 17 1917

MAR 5 1917

Relationship on N.E. Card Index

Checked by

Checked by G. Mangum

Transf to 39th Reserve Bn. 6-10-16 Do 256 8-10-16.

Discharged to Canada 22/12/16  
Auth. A.G. Letter 16/1/17-27/11/16  
\*Charged from P.S. Pay Book  
Transf to Non-Eff. 22/12/16 16-1-17  
L.P.C. issued 22-12-16 E. 22-12-16

9.73, 24.33, 9.24, 33 Adv. CA 2 70.00  
572. No 29. 24/17. Cred. B.C. 12. 30.

Transf to "Canada Disc'ge a/c"  
6/62 Ch Int. B. 4/4/17, Recd 7/21/17

WP



P. 559  
MARRIED OR SINGLE

Single

PLACE OF BIRTH

Peterboro, Ont

NAME AND ADDRESS OF NEXT OF KIN

George Boyler  
Downs Corner, Peterboro, Ont

RELATIONSHIP OF NEXT OF KIN

Father

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

ADMISSIONS TO HOSPITAL, &c.

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

REG'L No. 195012

RANK Pte

NAME Boyler Henry George

✓ 100

IF IN PERMT. CORPS  
WHAT UNIT

UNIT 235<sup>th</sup>

TRANSFERRED TO 3rd Res. Bn. DATE 16/5/17

2.0.266  
AUTHORITY 14/5/17

PERMANENT FORCE ALLOWANCES

TRANSFERRED TO Imp. Cadets DATE 1.2.18

PLACE OF ATTESTATION Peterboro, Ont

TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION

31/8/15

TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY \$ 200

DATE EFFECTIVE May 1/17

PAYABLE TO

Mrs. Beatrice Head 237 George St. Peterboro, Ont

RELATIONSHIP

ASSIGNED PAY MONTHLY \$

DATE EFFECTIVE

PAYABLE TO

18/8/18 EFFECTIVE 13/18

RELATIONSHIP

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

18/8/18

EFFECTIVE 13/18

REASON Comm. Camp Army

DISCHARGE DATE AND PLACE

REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS				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	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	CREDIT	DEBIT							
			\$	c.			\$	c.			\$	c.																	NO.				DATE	NO.	DATE
15/5/17			Balance from Canada												18 15	18 15																			
-31	17	00	18	70											18 70																				
30/6	30		33												33																				
July 31	31		34 10												34 10																				
Aug 31	31		34 10												34 10	830 57																			
Sept 30	30		33												33	981 27	1146 41/8																		
			152 90												18 15	191 05																			
MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	OFFICERS' PAY	SER. ALLGEE. PAY ENG.																								
Sept 30	Bal.								19 95																										
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Oct P.P.		34 10							29 18																										
				CA 98889-11/10. 22.	9 73				19 45																										

No 195012. Priv. Boyles. H. G.

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 DATE	RATE	AMOUNT		No. OF DATE	RATE				AMOUNT	No. OF DATE	RATE	AMOUNT	1	2	3	4				1	2				3	4	CREDIT	DEBIT			
			\$	C.										No.	DATE	No.	DATE				No.	DATE				No.	DATE	No.	DATE	No.	DATE	No.
1917	MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS			DR.1	DR.2	DR.3	DR.4	BALANCE	RED.	ALLG.	PAY	ENG.	MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS		DR.1	DR.2	DR.3	DR.4	BALANCE	RED.	ALLG.	PAY	ENG.	
Oct. 31		Bal. Forward.										1915																				
Nov		P.P.	33									20																				
						R.F.G. Depot Farmboro Army Form 1823A 11/10/17		3 41																								
						R.F.G. Depot Farmboro Army Form 1823A 4/10/17		3 41																								
						Cash AR 98913 11/10/17 London		24 33																								
Dec		P.P.	34 10			R.F.G. Depot Farmboro AF 1823A 27/1/17		3 41																								
						Arv. Arb. 1797/14 14/1/17 3 Res		4 87																								
						G.R. 1899 28/11 3 Res		14 60																								
						24005 # 2918 7/4/17 3 -		14 6																								
						Can A.P.						20	8 94																			
						B.A.P.		55 49				20	8 94																			
Jan	1918	P. Pay	34 10			G.R. 1913 18/1/17 3 Res		24 33				20	19 17																			
			34 10					24 33				20	19 17																			
Feb			30 80			B.A.P.						20	8 37																			
			30 80									20	8 37																			
Mar			34 10			DNAR 2574 3rd Res Bal 14/18		2 43																								
						✓ 2205 3rd Res 15/18		4 87																								
						✓ 2352 ✓ 29-1-18		2 43																								
						✓ 2777 ✓ 27-2-18		2 43																								
						✓ 2950 ✓ 12-3-18		4 87																								
						✓ 3143 ✓ 22-3-18		2 43																								
			34 10					19 46																								

6 27

6442

\* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.
EFFECTIVE DATE:-		EFFECTIVE DATE:-	
AMOUNT:-		AMOUNT:-	

NAME:- *Boyle Henry George*  
NUMBER:- *195012*

NAME, ADDRESS, RELATIONSHIP & AUTHORITY	WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.
<i>Miss B. Heard</i> <i>237. George St Peterboro</i> <i>(Fiancee) Ont</i> <i>Stopped 1/10/18</i>	

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

UNIT AND TRANSFERS			
ORIGINAL UNIT:- <i>235th Bn 15/5/17</i>			
DATE ACCOUNT FIRST OPENED - <i>15/5/17</i>			
AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T 5F'D	UNIT TRANSFERRED TO
<i>NR. 18/18</i>			<i>Imp Cadets</i> <i>3rd Res Bn</i>
	<i>1/9/18</i>		<i>4th Bn</i>
	<i>1/10/18</i>		<i>NSA</i>

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS							
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
<i>12-2-18</i>	<i>2878</i>	<i>W. Solly</i>	<del><i>2.45</i></del>				
<i>22-5-18</i>	<i>102a</i>	<i>Qm Chgs.</i>	<del><i>1.22</i></del>				

DAILY RATES OF PAY AND ALLOWANCES				
AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	<i>1 00</i>	<i>10</i>		

PARTICULARS OF RENDERING NON-EFFECTIVE:- *Killed in action 3/9/18 C/P 318-13/9/18 4th Bn.*

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
<i>1918</i>											
<i>March</i>	<i>Balesford</i>								<i>6 27</i>		
<i>Apr</i>	<i>Pay</i>	<i>33</i>		<i>DNAR 298. a 1 CORB. 26 7/8</i>	<i>2 43</i>				<i>36 84</i>		
		<i>33</i>			<i>2 43</i>						
<i>May</i>	<i>P+a</i>	<i>34 10</i>		<i>DNAR 125. 12 4/8 3 CRBn</i>	<i>2 43</i>						
				<i>" " 517. 14 5/8 1 CORB.</i>	<i>2 43</i>						
				<i>" " 654 28 7/8 3 CRes</i>	<i>2 43</i>				<i>63 65</i>		
		<i>24 10</i>			<i>7 29</i>						
<i>June</i>	<i>✓</i>	<i>33</i>		<i>bal</i>				<i>15</i>			
				<i>CP 11081 London 17.6.18</i>	<i>34 07</i>						
				<i>DNAR 848. 3 Can Res 12.6.18</i>	<i>2 43</i>						
				<i>I.O.R. 3rd Res Bn 21.5.18</i>	<i>1 32</i>						
				<i>AR 918 3rd Res Bn 25.6.18</i>	<i>2 43</i>						
		<i>33</i>		<i>DNAR 967 ✓ 25.6.18</i>	<i>7 30</i>				<i>34 10</i>		
					<i>47 53</i>			<i>15</i>			
<i>July</i>	<i>✓</i>	<i>34 10</i>		<i>absence all parades June 28/29. effect 3.7.18</i>							
				<i>3 days F.P. No 2. D.O. 184 3.18. 3 Res</i>		<i>3 30</i>					
				<i>absent from 9th parade 5.7.18. effect 9.7.18</i>		<i>3 30</i>					
				<i>DNAR 1123. 3rd Res Bn 12.7.18</i>	<i>4 87</i>						
				<i>✓ 1265 ✓ 26.7.18</i>	<i>9 73</i>						
				<i>B.A.P.</i>				<i>15</i>	<i>32</i>		
		<i>34 10</i>			<i>14 60</i>	<i>6 60</i>		<i>15</i>			
<i>Aug</i>	<i>✓</i>	<i>34 10</i>		<i>bal</i>				<i>15</i>	<i>51 10</i>		
				<i>AR 1493. 14/8 3 Res</i>	<i>4 87</i>				<i>46 23</i>		
		<i>34 10</i>			<i>4 87</i>			<i>15</i>			
<i>Sep</i>	<i>✓</i>	<i>33</i>		<i>bal.</i>				<i>15</i>	<i>64 23</i>		
		<i>33</i>						<i>15</i>			
				<i>Stat. of the rendered</i>							
				<i>ent. Bal. 14 1/2, ca. Bal. 64 23</i>							

NON EFFAC

