

544 OK

R.C.R. R2

ORIGINAL.
ATTESTATION PAPER.

No. 16122
Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? Frank Chamberlain
 2. In what Town, Township or Parish, and in what Country were you born? London England,
 3. What is the name of your next-of-kin? Mr W G Chamberlain
 4. What is the address of your next-of-kin? 111 W S. Douglas, Stratford Ont Can
 5. What is the date of your birth? 27 Sept 1896
 6. What is your Trade or Calling? upholsterer
 7. Are you married? No
 8. Are you willing to be vaccinated or re-vaccinated? Yes
 9. Do you now belong to the Active Militia? No
 10. Have you ever served in any Military Force? Corps of Guides
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
- F Chamberlain (Signature of Man).
J W y act (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, F Chamberlain, 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.

F Chamberlain (Signature of Recruit)
J W y act (Signature of Witness)

Date Aug 22 1915

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, F Chamberlain, 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.

F Chamberlain (Signature of Recruit)
J W y act (Signature of Witness)

Date Aug 22 1915

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 Halifax this 25th day of Aug 1915
R. B. Wain (Signature of Justice)
J.P. for City and County of Halifax

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

(Approving Officer)

Description of Frank Chamberlain on Enlistment.

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

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer.)

Height.....5 ft. 4 ins.

Scab over left eye,

Chest measurement { Girth when fully expanded.....24 1/2 ins.
 Range of expansion.....2 1/2 ins.

Complexion.....*Dark*

Eyes.....*Green*

Hair.....*Black*

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

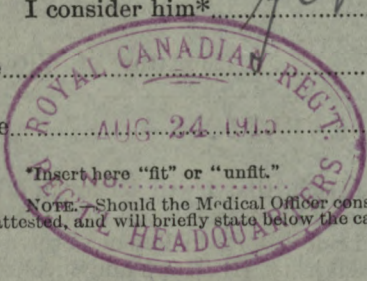
Date.....191.....

Place.....*AUG 24 1915*.....

W. H. Butler Capt. R.C.M.C.
 Medical Officer. *R.C.R.*

*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:—

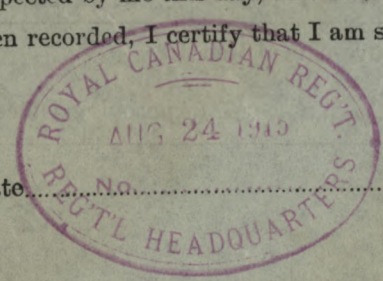


CERTIFICATE OF OFFICER COMMANDING UNIT.

Albert Chamberlain.....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.

W. H. Butler Lieut. Col.
 (Signature of Officer)
Lundy R.C. Regt.

Date.....191.....



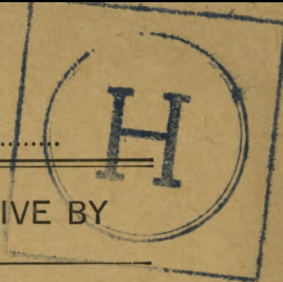
C.E.F. REGIMENTAL DOCUMENTS

NAME **CHAMBERLAIN, FRANK**

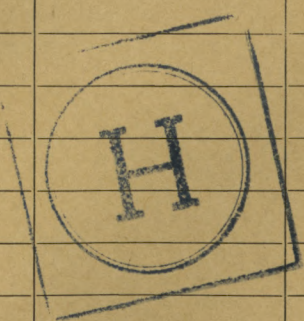
REGT. No. **477163**

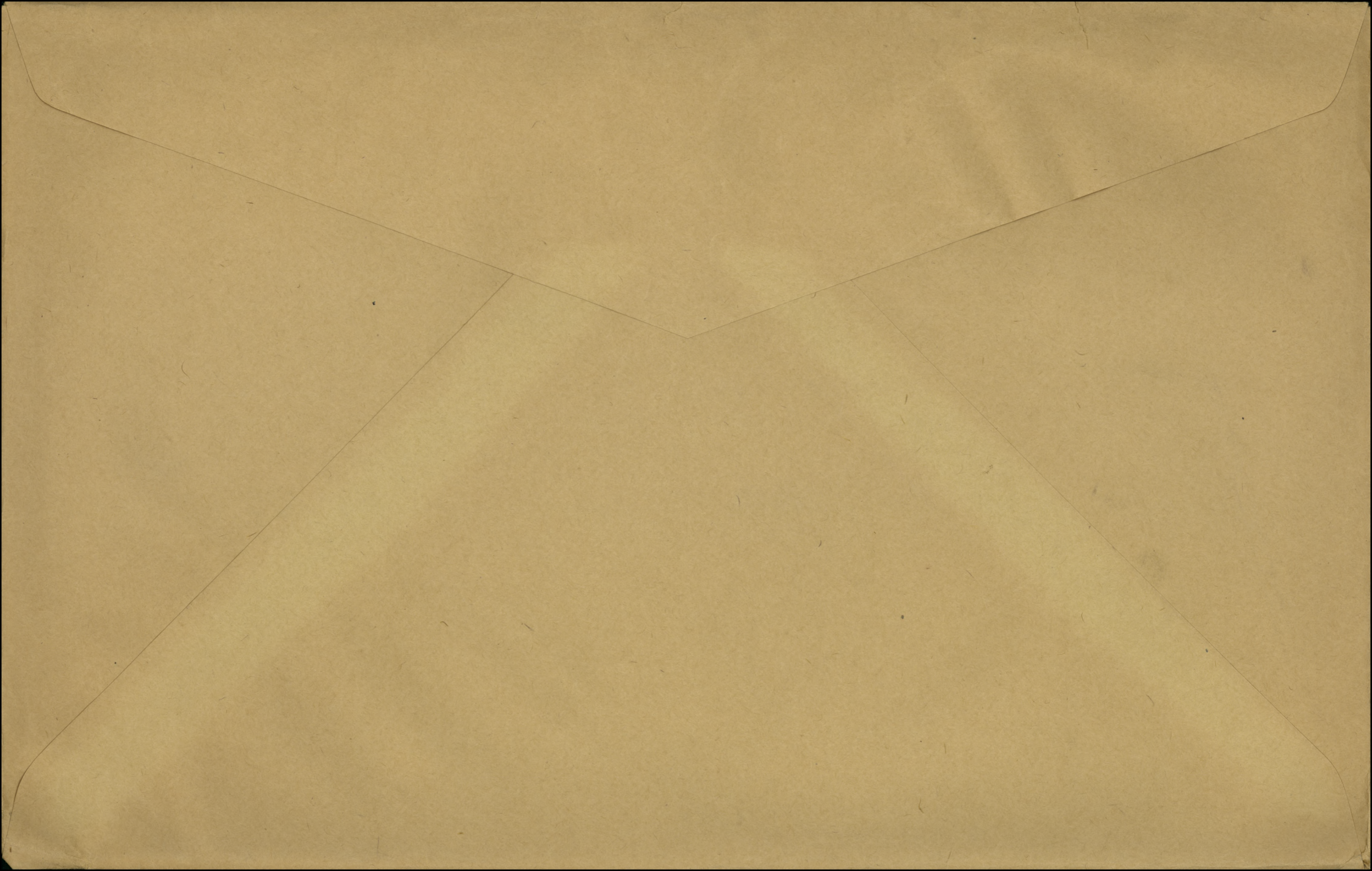
UNIT **R.C.R.**

H. Q. FILE No. **13788**



| CONTENTS | DATE RECEIVED | TO WHOM FORWARDED | DATE FORWARDED | M. F. W. 2505 REFERENCE | NON-EFFECTIVE BY |
|--|---------------|-------------------|----------------|-------------------------|------------------|
| ATTESTATION PAPER (M.F.W. 23, 133 or 51) | | | | | DEATH |
| CASUALTY FORM (M.F.W. 54 or A.F.B. 103) | | | | | CATEGORY |
| TRAINING HISTORY SHEET (M.F.W. 113) | | | | | K.A. |
| FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122) | | | | | 16-9-16 |
| REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120) | | | | | |
| COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121) | | | | | |
| MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 173) | | | | | DISCHARGE |
| DENTAL HISTORY SHEET (M.F.B. 465) | | | | | CATEGORY |
| MEDICAL REPORT (M.F.B. 227 or A.F.B. 179) | | | | | |
| MEDICAL EXAMINATION (M.F.W. 129) | | | | | |
| TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2) | | | | | |
| PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2) | | | | | |
| DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115) | | | | | DESERTION |
| LAST PAY CERTIFICATE (M.F.W. 44) | | | | | |
| PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268) | | | | | |
| PARTICULARS OF CHARACTER (A.F.W. 3226) | | | | | |
| COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A) | | | | | |
| CARDS | | | | | |
| PAY-SHEETS | | | | | |





Surname

Christian Name or Names

Reg. No.

Chamberlain. Unit F.

Co.

Troop

477163.
Batty.

Pte. R.C.R.

Hospital

Sent Hosp. St. Martins Place Date of Admission *15.15*

Workhouse Mil. Newcastle-on-Tyne. 25-10-15.

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

Gonorrhoea.

(1)

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnoses: If more than one state present

Killed in Action 16.9.16

DISPOSITION

Date

Ch. 30-10-15 - No. 9

C.L. 25-11-15.

Ch. 8.12.15 # 20

" 27.9.16 2904

Dis 15. 11. 15

REMARKS

10.

Ref from Base

**A.M.D. 2 DEPT.
Beh. of D.G.M.S. O.M.F.C. London.**

R

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

No. 16122

RANK

Plt.

NAME

Chamberlain, J.

T. O. S. 5-9-14

UNIT

Royal Canadian Regt

RD266 of 10-11-14

M. D. Ber.

| PAID FROM | PAID TO | SIG. OR REC'T | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. | |
|--------------|------------|---------------------|---|-----------|
| | | | PARTICULARS | AUTHORITY |
| 1914 | 1914 | | | |
| Sept 5 | Sept 30 | ✓ | | |
| Oct 1 | Dec 31 | ✓ | | |
| 1915 | 1915 | | | |
| Jan. | | O.S. | | |
| Feb. | | O.S. | | |
| Mar. | | O.S. | | |
| Apr. | | ✓ | | |
| May | | ✓ | | |
| June | | ✓ | | |
| July. | | ✓ | | |
| Aug. | | ✓ | | |

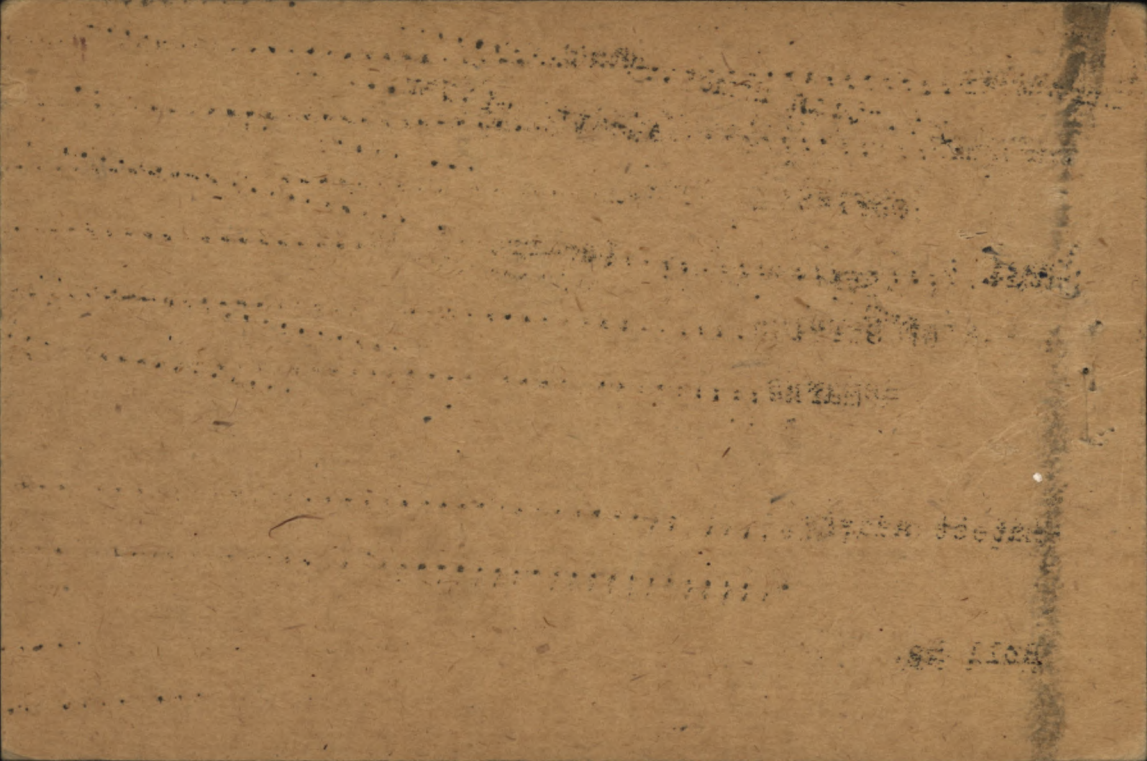


Number 477163 Rank Lt/epi
Surname CHAMBERLAIN #9849
Christian Names Frank Deep FEB 25 1921
Unit R. C. R Theatre of War France
Dates of Service 20/9/14 8/3/16 16/9/16
Remarks

Latest Address Mr. W. G. Chamberlain "Father"
90 Avondale Ave, Stratford
out

Roll No. B

Page 283



CHAMBERLAIN, Pte. F. #477163, R.C.R., H.Q. 649-C-5217.

Not Eligible for Star 14/15.

M. & D. (Father) W. G. Chamberlain,

~~90 Avondale Ave.,~~ 90 Avondale Ave.

~~Stratford, Ont.~~

12745
Stratford, Ont.

P. & S. "

Ditto.

Ser. # 198743.

Mem. C. (Mother)

Mrs. W. G. Chamberlain,

(Same as above)

Not Married.

Desp. JUN 28 1920 (ml 613550) W

APR 1 3 1921
Scroll, Desp. _____ Reqn. No. 234993

OCT 31 1921
Platus, Desp. _____ Reqn. No. P 14847

M

441

| LIST No. | HOSPITAL | DATE OF ADMISSION | REMARKS |
|----------|---|----------------------|------------------|
| 9. | Tent St. Martin Plain Shorncliffe | 19-10-15 | Gonorrhoea |
| 10. | Workhouse Mil. Newcastle on-Tyne | 28-10-15 | Gonorrhoea. |
| 20. | 1st. North. Gen. Newcas- tle-on-Tyne | 13-11-15 | Discharged |
| O204. | Rep. from Base | 16-9-16 | Killed in action |

NAME

Chamberlain Frank

H. Q. FILE No. 649-

REG'TL. NO.

499163

RANK AND CORPS

Plt. Royal Cav. Regiment

CABLE

NO.

DATE

NATURE OF CASUALTY

NO.

747

~~XXX~~ FOLL.

Q1575. 27-9-16.

Killed in action Sept 16 th 16.

B2090a 23-9-16

Rouen

Name Chamberlain F. Rank Pte.

Reg. No. 477163

Unit R.C.R.

R.L. - 25 - 6 - 1853.

Next of Kin Canada

| Date | Movement | Place | Casualty | List No. | Notified N/K O. | W.O. List |
|------------------|--|---------------------|----------|----------|-----------------|-----------|
| 19-10 | Tent Hosp. | St. Martins Plain | Gon. | 9 | | |
| 25 10 | Workhouse | In. Hosp. N. Castle | | 10 | | |
| 15-1 | Discharged | | O.D. | 20 | | |
| 16-9 | Reported from Base - Killed in Action | | | A. 204 | D. 1575 | 27/9 |

Date

Movement

Place

Casualty

List
No.

Notified
N/K O.

W.O. List

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

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Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps ROYAL CANADIAN REGIMENTRegimental No. 477163 Rank Pte Name CHAMBERLAIN FrankEnlisted (a) 23-8-15 Terms of Service (a) for 1 year or duration of war Service reckons from (a) 23-8-15Date of promotion } _____ Date of appointment } _____ Numerical position on } _____
to present rank } _____ to lance rank } _____ roll of N.C.Os. } _____

Extended _____ Re-engaged _____ Qualification (b) _____

| Report | | Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case. | Place | Date | Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents. |
|---------|--------------------|--|--------------|---------|--|
| Date | From whom received | | | | |
| 8.3.16 | 11 Res. Bat. | Reverts to ranks at own request | Shorncliffe | 8.3.16 | |
| 8.3.16 | 11 Res. Bat. | Proceeded Overseas to Royal Canadian Reg. | France | 8.3.16 | <i>W. H. ...</i> |
| | | ARRIVED IN FRANCE | HAVRE | 9.3.16 | <i>PR of A. 663</i> |
| 9.3.16 | <i>663</i> | <i>taken on strength</i> | <i>R.C.R</i> | 9.3.16 | <i>NR P.I. DO 18. 21/3/16</i> |
| 29.9.16 | OC. Unit | KILLED in action. | Field | 16.9.16 | K.I.137.1256, DCS.127 and Pt.2 Ord 45, d/23.9.16. |

Lieutenant

for Lt Col. A. A. G.

| 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 | | | | |
| | | | | | |

Rank

Name *FR* CHAMBERLAIN, Frank.

Reg'l No. 477163

R-122.

Unit Royal Canadian Regt. If in perm. Corps,
What Unit?

Married or Single Single

Place and Date of Enlistment 23rd August 1915.

Place of Birth London, England

Name and Address, Next-of-Kin Mr W.G. Chamberlain ^{ain}, 111 W. St, Douglas Stratford, Ont.

Assigned Pay Monthly \$

Payable to

Separation Allowance \$

Payable to

Relationship
I
Relationship*Rd 25-C-1853*

N. E. R. B. 7

Relationship

Discharge, Date and Place

Reason

Character

*R 199-222**K.O. Box*

REMARKS

Taken from Official Documents

| 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>"C"</i> | | <i>St Martin's Plain</i> | | | |
| 30-10-15 | W.O. | Admit to tent Hosp (Gen) | <i>Shorncliffe</i> | 19-10-15 | Cas. #9 Pt II-O. #258 | |
| 5-11-15 | " " | Admit to mill Hosp " | <i>Newcastle on Tyne</i> | 25-10-15 | " #10 | |
| 17-11-15 | <i>W.C.</i> R.C.R. | Disch from Hosp | | 16-11-15 | Pt II-O. #16. | |
| 25-11-15 | | Taken on strength 11 th Batt | | | --- #2618 | |
| 8.12.15 | W.O. | Desch. 1 st Nor. Gen. Hos. | <i>Newcastle</i> | 15.11.15 | C.R. 20 | |
| 18.1.16. | O.S. 11. | To be Lt / Cpl. | <i>S. cliffs.</i> | 17.1.16 | Pt II 15 | |
| 8.3.16. | " | Struck off strength to Royal Can. Regt. | <i>Overseas</i> | 8.3.16 | Pt II 58. | <i>Rt. 6103 cpl. 16 R.R.</i> |
| 8.3.16. | " | Reverts to ranks on proceeding O/S | | 8.3.16 | " 58. | |
| 21.3.16 | R.C.R. | Taken on strength in the field | | 9.3.16 | 13 | |
| 23.9.16 | R.C.R. | Killed in Action | | 16.9.16 | Pt II O/45. | |

| 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 | | | | |
| 27.9.16 | R.C.P. | Killed in Action | Field | 16.9.16 | C&A 204 ✓ |

444163

16122

G.C.

DUPLICATE

ARMY FORM B. 178.

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^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname CHAMBERLAIN Christian Name _____

TABLE I.—GENERAL TABLE.

Birthplace ... Parish London County _____

Examined... (on 26th day of _____ 1915
at Prospect Bermuda)

Declared Age ... 18 years _____ days.

Trade or occupation ... Upholsterer

Height ... 5 feet 4 inches.

Weight ... 118 lbs.

Chest Measurement { Girth when fully Expanded 33 inches.
Range of Expansion 2 inches.

Physical Development ... fair

Vaccination { Arm ... Right _____ Left _____
Marks { Number ... 3

When Vaccinated ... _____

Vision ... { R.E.—V= _____
L.E.—V= _____

(a) Marks indicating congenital peculiarities or previous disease ... { (a) _____

(b) Slight defects but not sufficient to cause rejection ... { (b) chest small probably develop

Approved by (Signature) C. Ryley

(Rank) Capt Medical Officer.

Enlisted ... { at Bermuda
on 9th day of November 1914

| Corps. | Regtl. No. |
|---------------|---------------|
| <u>R.C.R.</u> | <u>16122</u> |
| | <u>444163</u> |

Became non-effective by _____

This Medical History Sheet has been compared with the corresponding Attestation Paper, and entries made in red ink have been taken from the Attestation Paper.

(Signature) H. ...
(Rank) _____

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

| Date | Brief details, and signature |
|----------|---|
| 9.7.15 | Typhoid Inoc. States was Inoculated at Valcartier |
| 12.12.14 | Vacc Vacc M.D. Ahern Capt |
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Table IV.—Service Table.

| Station or Troopship | Date of arrival or embarkation | Date of departure or disembarkation | Station or Troopship | Date of arrival or embarkation | Date of departure or disembarkation |
|----------------------|--------------------------------|-------------------------------------|-------------------------|--------------------------------|-------------------------------------|
| Bermuda | 14.9.14 | | | | |
| do | 7.7.15 | Examined | and found fit for field | Service | C Ryley Capt |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

I certify the foregoing to be a true copy of an original entry on a Medical History Sheet of this man.
 C.A.M.C.
 Officer in Charge of Records
 Canadian Contingents,
 Bermuda

MEDICAL HISTORY SHEET.

Surname Chamberlain Christian Name J

Examined { on 26th day of September 1914 at Inspect. Bermuda Birthplace { City or Town London County Middlesex

Approved by C. Ryley Rank Captain Paul M.O.

Apparent age 18 Trade or occupation Upholsterer Height 5 Feet 4 Inches Weight 118 Lbs. Chest measurement { Minimum 31 inches Maximum expansion 20 inches Physical Development Fair Small-Pox Marks Nil

Table with columns: Date, Fit or Unfit, EXAMINED FOR RE-ENGAGEMENT. Rows for M.O. status.

Vaccination Marks { Arm Right Left Number 3 (a) Marks indicating congenital peculiarities or previous disease V - R 26/6 L 26/6

Table with columns: Date, Result, VACCINATIONS. Entry: 12/14 2 R M.O.

(b) Slight defects but not sufficient to cause rejection Chest small will probably develop

Table with columns: Date, Result, ANTI-TYPHOID INOCULATIONS, ETC. Entry: 9/15/14 Stated was inoculated at Valcartier M.O.

Enlisted on 9th day of November 1914 at Bermuda

Table with columns: CORPS, REG'TL NUMBER, HABITS, DATE. Entry: R. C. B, 1622, 9-11-14

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Table with columns: STATION, DATE, DISEASE, RESULT.

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

Surname *Chamberlain* Christian Name *J*

| STATION. | Date of Arrival at the Station. | DATES OF | | | | | | DISEASE. | Number of days in Hospital. | Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of Inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied, Particulars of prophylactic inoculations. | Signature of Medical Officer. |
|--------------------------------|---------------------------------|-------------------------|-----------|-----------|--------------------------|-----------|-----------|-------------------|---|--|-------------------------------|
| | | Admission into Hospital | | | Discharge from Hospital. | | | | | | |
| | | Day | Month | Year | Day | Month | Year | | | | |
| <i>Bermuda</i> | <i>14-9-14</i> | | | | | | | | | | |
| <i>---</i> | <i>7.7.15</i> | | | | | | | | <i>Examined and found fit for Field Service</i> | <i>Bylers</i> | |
| <i>Sent Hospital</i> | | | | | | | | | | | |
| <i>Rehoboth</i> | | | | | | | | | | | |
| <i>Shorncliffe</i> | | <i>19</i> | <i>10</i> | <i>15</i> | <i>25</i> | <i>10</i> | <i>15</i> | <i>Manorrhoea</i> | <i>6</i> | <i>Trans to Newcastle</i> | |
| <i>Workhouse Mil. Hospital</i> | | <i>25</i> | | | | | | | | | |
| <i>Newcastle on Tyne</i> | | <i>25</i> | <i>10</i> | <i>15</i> | <i>15</i> | <i>11</i> | <i>15</i> | <i>Leonorhoea</i> | <i>22</i> | | |

H. McKim Capt. C.A.M.C.
R. Hodgson Capt. R.A.M.C.T.

Duplicate Medical History Sheet posted to here.
 Medical Registrar
 Record Office.

Rank *Pte.* Name **CHAMBERLAIN, Frank. Edmund.** Reg'l No. **477163** P-56
 Unit **Royal Canadian Regt.** If in perm. Corps, What Unit? Married or Single **Single**
 Place and Date of Enlistment **23rd August 1915.** Place of Birth **London, England**
 Name and Address, Next-of-Kin **Mr W.G. Chamberland, 111 W. St. Douglas Stratford, Ont.** Relationship

Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ *68* Payable to Relationship

Discharge, Date and Place *Killed in action 16/4/16* Reason *Ch A 204 29/4/16* Character



Statement of
FEB 26 1917
 Account rendered

| Date | | PAY | | | Field Allowance | | | Other Credits | Total Credits | Voucher | | Cash Payments | Assigned pay | Other Charges | Total Debits | Balance | Remarks, Casualties, etc. | |
|-----------------|---------|-------------|-----------------|---------------|-----------------|-----------------|--------|--------------------|---------------|---|---------------|---------------|--------------|---------------|--------------|---------------|--|--|
| From | To | No. of Days | Rate | Amount | No. of Days | Rate | Amount | | | No. | Date | | | | | | | |
| 1915 | | | | | | | | | | | | | | | | | | |
| 1 Sep. | 30 Oct. | 30 | 1 ⁰⁰ | 30 00 | 30 | 1 ⁰⁰ | 3 00 | | 33 00 | | | 33 00 | | | 33 00 | | | |
| 1 Oct. | 31 Oct. | 31 | " | 31 00 | 31 | " | 3 10 | | 34 10 | | | | | 44 | 8 14 | 25 96 | <i>6/10/15 263 + accessories</i> | |
| 1 Nov. | 30 Nov. | 30 | " | 30 00 | 30 | " | 3 00 | | 33 00 | | | | | 7 60 | 9 60 | 49 36 | <i>17/10/15 200, 258, 263</i> | |
| 1 Dec. | 31 Dec. | 31 | " | 31 00 | 31 | " | 3 10 | 14 80 ^x | 48 90 | <i>623 12 Feb 24 33 793 14 47 862 14 66 949 14 60</i> | | | | 10 20 | 83 20 | 15 06 | <i>Dischd Hosp. 16/11/15 200 + board and Hosp. Nov. 30 Oct + Nov ady (6/15) from 11/30/16/15 21/2/17/15 17/10/15 263 + accessories for period 30/10/15 to 26/11/15 (34/16 - 34/16)</i> | |
| 1 Jan | 16 Jan | 16 | " | 16 00 | | | | | | <i>1118 " 9 73</i> | | | | | 29 19 | 20 62 | <i>Hosp. 17/1/16 B.O. 15 (11/16)</i> | |
| 17 | 31 | 15 | 1 ⁰⁵ | 15 65 | 31 | " | 3 10 | | 34 75 | <i>1030 " 19 46 1212 " 4 87</i> | | | | | 15 22 | 38 75 | <i>bltd. Rec. C 189 (11/16)</i> | |
| 1 Feb. | 29 Feb. | 29 | " | 30 45 | 29 | " | 2 90 | | 33 35 | <i>1268 " 4 87 1433 " 4 87</i> | | | | 61 | 3 49 | 69 71 | <i>bltd. Rec. C 189 (11/16)</i> | |
| 1 Mar | 31 Mar | 31 | " | 31 00 | 31 | " | 3 10 | | 34 45 | <i>2565 2205 CBD</i> | | | | | 3 49 | 69 71 | <i>Reverts to Private 8/3/16 B.O. 58</i> | |
| 8 th | 31 Mar | 24 | 1 ⁰⁰ | 24 00 | | | | | | | | | | | | | | |
| | | | | 215 45 | | | | | 21 30 | 14 80 | 251 55 | | | 153 29 | 28 55 | 181 84 | 69 71 | |

17 40
 6 00
 11 40
 3 80

Cash found in effects *WR*

BALANCE TRANSFERRED TO NEW LEDGER.

29.40
 14.80
 12.60
 4.80
 17

Settled

10 cents brought forward in June.
 error in pay for January/16
 adjusted June 1916

Information from Records (as regards correct ven. charges) d/21/10/16
 admitted to Hosp. V.D.G. 19/10/15 Ch. 9 and Part II 258 d/30/15
 is charged from Hosp. 16/11/15 Part II 20. 11/15 d/17/10/15

E 4933

477163 Pt

Chamberlain

R R 7.E.

King

14

WILL

In event of my death
I give the whole of
my property and effects

to Mr. W. G. Chamberlain

111 Douglas St.

Stratford Ont.
Canada.

Signature Frank Chamberlain

Pte. No. 477163

ESTATES BRANCH

SEP 17 1919

MILITIA DEPT.

RATES OF REGIMENTAL PAY
OFFICERS' ALLOWANCES

| Rank | Regimental Pay | Officers' Allowance |
|--------------------|----------------|---------------------|
| Colonel | 1000 | 1000 |
| Lieutenant Colonel | 750 | 750 |
| Major | 500 | 500 |
| Captain | 350 | 350 |
| First Lieutenant | 250 | 250 |
| Second Lieutenant | 150 | 150 |
| Ensign | 100 | 100 |
| Junior Ensign | 75 | 75 |
| Subaltern | 50 | 50 |
| Subaltern (junior) | 25 | 25 |

REGIMENTAL OFFICERS' ALLOWANCES

| Rank | Regimental Allowance | Officers' Allowance |
|--------------------|----------------------|---------------------|
| Colonel | 1000 | 1000 |
| Lieutenant Colonel | 750 | 750 |
| Major | 500 | 500 |
| Captain | 350 | 350 |
| First Lieutenant | 250 | 250 |
| Second Lieutenant | 150 | 150 |
| Ensign | 100 | 100 |
| Junior Ensign | 75 | 75 |
| Subaltern | 50 | 50 |
| Subaltern (junior) | 25 | 25 |

These rates are subject to the provisions of the Army Act, 1905, and the Army (Regulations) Act, 1911, and are subject to the provisions of the Army (Regulations) Act, 1911, and the Army (Regulations) Act, 1911.

1911-12
1911-12
1911-12

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom *M. G. Chamberlain*
 Address *111 Douglas Street*
Stratford
Ont.
 Rate *\$ 60.00*

By Whom Assigned *Chamberlain. A*
 Regtl. No. *477163*
 Rank *Plt*
 Corps *R. C. R*

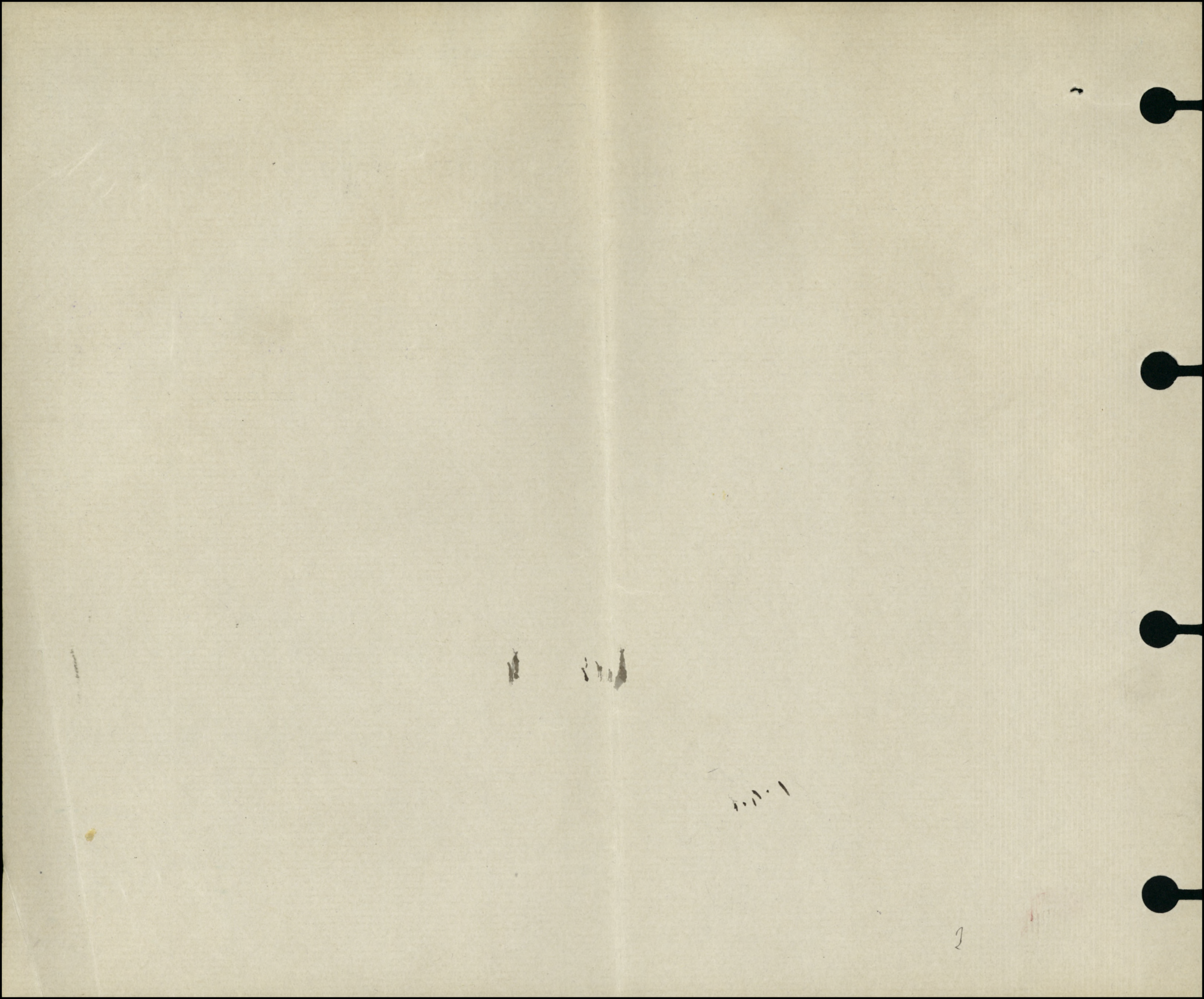
SPECIAL REMITTANCE

Schedule # 1531 31.7.16

PAYMENTS

| Month | Year | Cheque No. | Amt. | REMARKS |
|-------|------|-------------------|--------------|---------|
| Aug. | 1914 | | | |
| Sept. | | | | |
| Oct. | | | | |
| Nov. | | | | |
| Dec. | | | | |
| Jan. | 1915 | | | |
| Feb. | | | | |
| March | | | | |
| April | | | | |
| May | | | | |
| June | | | | |
| July | | | | |
| Aug. | | <i>1916014889</i> | <i>60.00</i> | |
| Sept. | | | | |
| Oct. | | | | |
| Nov. | | | | |
| Dec. | | | | |
| Jan. | 1916 | | | |
| Feb. | | | | |
| March | | | | |





M. X. 52

16/6/00

Also
Notify

Subsequent
changes in
Next-of-Kin

Country of Birth

5M-9-18).
68.
477.