

*2.P. 29-8-18*

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms.....

Proceedings on discharge.....

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

*AJB 122 - 1*

*AJB 178 - 1*

*R-149 - 1*

*Cas card - 1*

*13*

*14*

**DISCHARGE DOCUMENTS**

R. O. No.....

H. Q. No.....

Name, *CLARENCE ELIHU JAMES*

Regt, No, *A44236* Rank, *Pte.*

Corpsm., *55<sup>th</sup> Battn. C. E. F.*

*Killed in action 26/9-16*

*22743*

Casualty Card *1*

Non-Eff. Card *1*

Part II Card *1*

Change of Address Card

Honour & Award Card

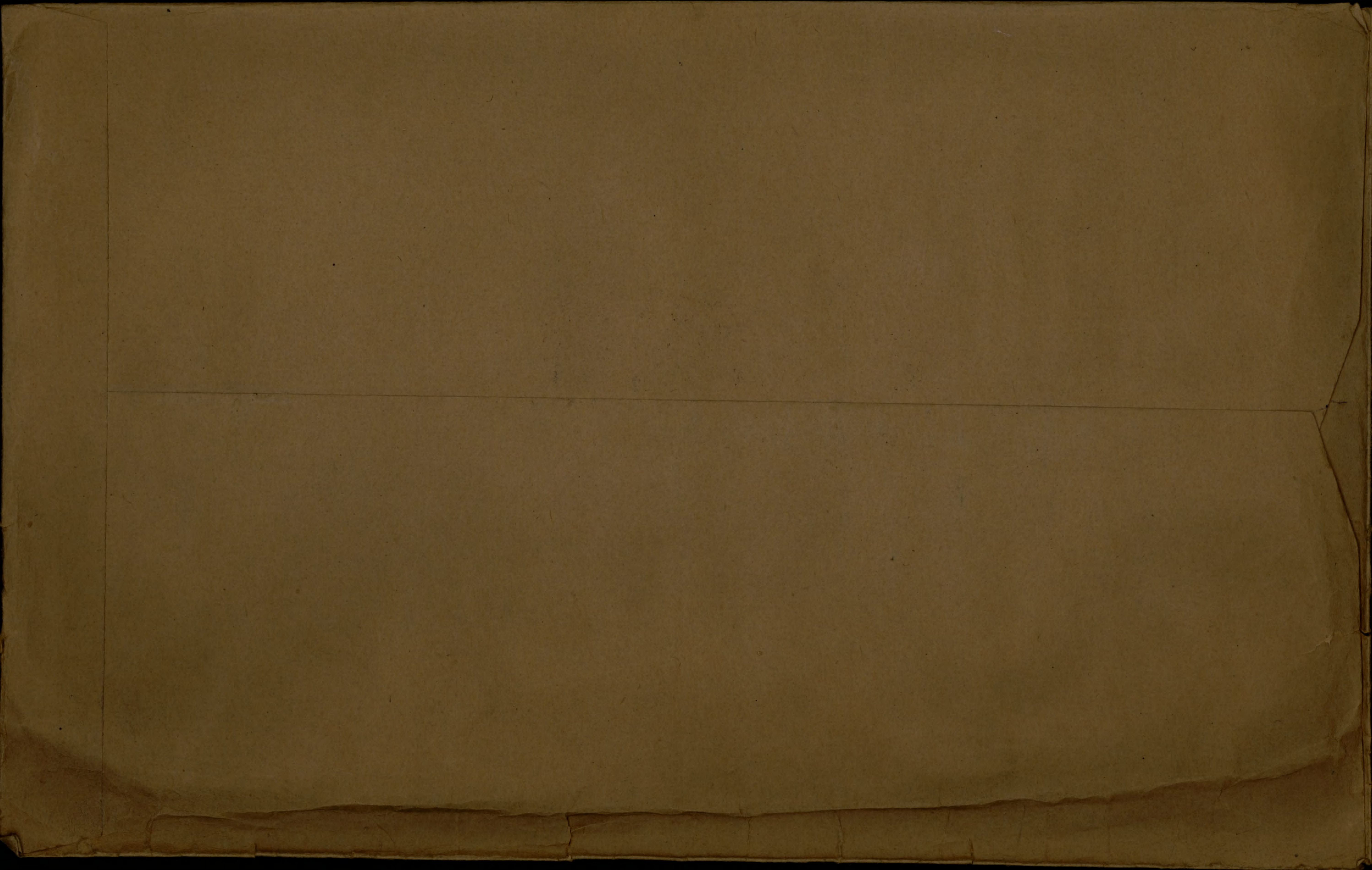
**ARCHIVES CENTRE**

**PUF REL**

*403653*

*4-9*  
*4-9*  
*6-10*

*2*



*Original*

# ATTESTATION PAPER.

No. *A44236*

Folio.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

- 1. What is your name?..... **Elihu James Clark.**
- 2. In what Town, Township or Parish, and in what Country were you born?..... **Garbunear, Newfoundland.**
- 3. What is the name of your next-of-kin?..... **Isaac Clark (Father)**
- 4. What is the address of your next-of-kin?..... **Garbunear, Newfoundland.**
- 5. What is the date of your birth?..... **6th October, 1892**
- 6. What is your Trade or Calling?..... **Laborer.**
- 7. Are you married?..... **No.**
- 8. Are you willing to be vaccinated or re-vaccinated?..... **Yes.**
- 9. Do you now belong to the Active Militia?..... **No.**
- 10. Have you ever served in any Military Force?..... **No.**  
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement?..... **Yes.**
- 12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?..... **Yes.**

*Elihu James Clark* (Signature of Man).  
*Edward J. Davis* (Signature of Witness).

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

I, **Elihu James Clark.**, 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.

*Elihu James Clark* (Signature of Recruit)

Date **April 22nd** 1915 *Edward J. Davis* (Signature of Witness)

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

I, **Elihu James Clark**, 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.

*Elihu James Clark* (Signature of Recruit)

Date **April 22nd** 1915 *Edward J. Davis* (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 *Saint John's N.B.* this **22nd** day of **April** 1915.

*Edward C. Weymann* (Signature of Justice)

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

*Edward C. Weymann Major* (Approving Officer)

Description of Elihu James Clark, on Enlistment.

Apparent Age 21 years 6 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. 6-1/2

Chest measurement { Girth when fully expanded 30 ins.  
 Range of expansion 3 1/2 ins.

Complexion Medium

Eyes Brown

Hair Dark Brown.

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

*Small scar above left eye on brow.*  
*Small scar on right arm above wrist.*

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 April 22nd. 191 5

*W. J. Faudens Capt*

Place St. John, N.B.

55th Battalion.  
 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.

Elihu James Clark. 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 MAY 13 1915 191 5

*J. W. Kirkpatrick Lt. Col.*  
 O. C. 55th. Bn C. E. F.  
 (Signature of Officer)

1/11

1/11 1950

Rank *1st Lt* Name **CLARK Elihi James** ✓  
 Unit *55th BN.* If in perm. Corps, What Unit?  
 Reg'l No. **444236**  
 Married or Single **Single.**  
 Place and Date of Enlistment **St John.N.B. 22nd Apr.1915** Place of Birth **Newfoundland.**  
 Name and Address, Next-of-Kin **Isaac Clark, Garbunear, Newfoundland.**  
 Relationship **Father**

Assigned Pay Monthly \$ Payable to

Separation Allowance \$ Payable to

Relationship

Relationship

*Entered on N.I. and Index*  
*Checked by H. Lillibron*

Discharge, Date and Place **26-9-16.** Reason **Kin a** Character **11/10/16**

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						
12/6/15	31/7/15	44	1.00	44	44	.10	4.40	10	58.40	99 149	20			20	38.40	<i>Exp</i>	
1/8/15	31/8/15	31	1.00	31	31	.10	3.10		34.10	197 234	51.10			51.10	21.93	<i>Exchange</i>	
1/9/15	30/9/15	30		30	30		3.		33.						54.93	<i>trans to 14<sup>th</sup> Batt</i>	
1/10/15	30/10/15	31		31	31		3.10		89.03		2.68			2.68	86.35		
1/11/15	30/11/15	30		30	30		3		819.35		27.37			27.37	91.98		
1/12/15	31/12/15	31		31	31		3.10		126.08		16.64			16.64	109.44		
1/1/16	31/1/16	31		31	31		3.10		143.54		5.23		7.70	12.93	136.61	<i>72, 77, 81 Box 8/1/16</i>	
1.2.16	29.2.16	29		29	29		2.90		162.51		5.23			5.23	157.28		
1.3-16	31-3-16	31		31	31		3.10		191.38		5.24			5.24	186.14		
				288			28.80	10	533.27	33	133.49		7.70	141.19			

BALANCE TRANSFERRED TO NEW LEDGER

Cash found in effects *N.R.*

Statement of  
 FEB 23 1917  
 ACCOUNTS

*W.R.*



35884

R-122.

Rank \_\_\_\_\_ Name **CLARKE Elih<sup>y</sup> James** Reg'l No. **A 44236**

Unit **55th BN.** If in perm. Corps, }  
What Unit? }

Place and Date of Enlistment **St John.N.B. 22nd Apr.1915** Married or Single **Single.** Place of Birth **Newfoundland.**

Name and Address, Next-of-Kin **Isaac Clark, Garbunear, Newfoundland.**

Relationship **Father**

Assigned Pay Monthly \$ \_\_\_\_\_ Payable to \_\_\_\_\_

Relationship \_\_\_\_\_

Separation Allowance \$ \_\_\_\_\_ Payable to \_\_\_\_\_

Relationship \_\_\_\_\_

Discharge, Date and Place \_\_\_\_\_ Reason \_\_\_\_\_ Character \_\_\_\_\_

RL25-C-1907

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				
30-6-15	OC 12th	Taken on Strength 12th	Shorncliffe	29.6.15	Part II 0662.
29.8.15	OC 12th	Drafted to 14 <sup>th</sup> Batt	France	28.8.15	Pt II 01152.
6.9.15	OC 14 <sup>th</sup> Bn.	joined 14 <sup>th</sup> Bn.	In the Field	19.9.15	Daily Gas list 147.
27.12.15	da	7 Days No O.P. Disobedience.	do	8.1.16	Pt. II order 2. 2.
4.6.16	do.	Granted 9 days leave of absence	do.	25.5.16	23
7.9.16	OC 14 <sup>th</sup>	As app'td A/c. / cpl. with pay	France	20.6.16	Pt II 38
19.9.16	14 <sup>th</sup> Batt.	competitiveness. (Nº 1 N.Z. Str. 1400.	Amiens	7.9.16	G.L. A462 88
25.9.16	" "	" Dis. to duty	France	13.9.16	G.L. A467 D
9.10.16	OC 14 <sup>th</sup>	Killed in Action	France	26.9.16	Pt 2-57
11.10.16	14 <sup>th</sup> Batt.	" " "	"	26.9.16	G.L. A481





*Original*

*A. 44236*

*A. 44236*

# MEDICAL HISTORY SHEET.

Surname *Clark* Christian Name *Elihu, James*

Examined { on *22* day of *April* 191*5* at *St. John N.B.*

Approved by

Birthplace { City or Town *Parbunear* County *Newfoundland* Rank *Capt.* M.O.

Apparent age *21*

Trade or occupation *laborer* M.O.

Height *5* Feet *6 1/2* Inches. M.O.

Weight \_\_\_\_\_ Lbs. M.O.

Chest measurement { Minimum *37* inches. M.O.

{ Maximum expansion *40* inches. M.O.

Physical development \_\_\_\_\_ M.O.

Small-Pox Marks \_\_\_\_\_ M.O.

Vaccination Marks { Arm Right. Left. Number \_\_\_\_\_

When Vaccinated last \_\_\_\_\_ M.O.

(a) Marks indicating congenital peculiarities or previous disease \_\_\_\_\_ M.O.

*Small scar above left eye on brows on right arm above wrist.* \_\_\_\_\_ M.O.

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

\_\_\_\_\_ M.O.

\_\_\_\_\_ M.O.

\_\_\_\_\_ M.O.

Enlisted on *22* day of *April* 191*5* at *St John N.B.*

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<i>55th</i>	<i>A44236</i>		
Transferred to..	<i>Batt</i>			



## EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

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



Casualty Form—Active Service.

CONFIRMED CORRECT.  
Canadian Record Office,  
Westminster House,  
Millbank, W.C.

Regiment or Corps 12<sup>th</sup> Res. Battalion

Regimental No. A44236 Rank Pte Name Clarke E J (J)

Enlisted (a) \_\_\_\_\_ Terms of Service (a) Period of War Service reckons from (a) \_\_\_\_\_

Date of promotion to present rank } \_\_\_\_\_ Date of appointment to lance rank } \_\_\_\_\_ Numerical position on roll of N.C.Os. } \_\_\_\_\_

Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) \_\_\_\_\_

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				

<u>29/8/15</u>	<u>30th B.D.</u>	<u>Arrived from England taken on strength of</u>	<u>30th B.D.</u>	<u>29/8/15</u>	<u>4113</u>	
		<b>14<sup>TH</sup> CANADIAN INF. BATTALION</b>				
<u>11/9/15</u>	<u>O.C. Unit</u>	<u>joined Batt.</u>	<u>Field</u>	<u>6/9/15</u>	<u>B. 213.</u>	
<u>30. 12. 15</u>	<u>Unit.</u>	<u>awd 7 days P.P. No 1,277/15 for disobedience of O.D.s 1247+586.</u>	<u>11. 12. 15</u> <u>Field</u>	<u>27. 12. 15</u>	<u>2206g.</u>	
<u>26. 5. 16</u>	<u>Unit</u>	<u>8 days leave to</u>	<u>Unit.</u>	<u>24. 5. 16.</u>	<u>B. 213.</u>	<u>23. 7. 16. 16.</u>
<u>21. 7. 16</u>	<u>Unit</u>	<u>appto A/L/Cpl with pay</u>	<u>Field</u>	<u>20. 6. 16</u>	<u>B. 213.</u>	<u>38. 7 9/16.</u>
<u>7. 9. 16</u>	<u>1 N.Y. Coy</u>	<u>to on furlough</u>	<u>Adm New Zealand Coy</u>	<u>7. 9. 16</u>	<u>62024.</u>	
<u>9. 9. 16.</u>	<u>16. T. A.</u>	<u>do</u>	<u>Adm 4 Co. T. A.</u>	<u>8. 9. 16</u>	} <u>A. 26.</u>	<u>349. 22. 9. 16.</u>
			<u>do N.Y. Coy Hq.</u>	<u>9. 9. 16</u>		
<u>10. 9. 16.</u>	<u>16. T. A.</u>	<u>do</u>	<u>Adm 1 Co. T. A.</u>	<u>7. 9. 16.</u>	} <u>A. 26.</u>	<u>353. 30. 9. 16</u>
<u>do</u>	<u>do</u>	<u>do</u>	<u>do duty?</u>	<u>8. 9. 16</u>		
<u>do</u>	<u>do</u>	<u>do</u>	<u>Adm 1 Co. T. A.</u>	<u>5. 9. 16</u>	} <u>A. 26</u>	<u>do</u>
			<u>do N.Y. Coy Hq.</u>	<u>5. 9. 16</u>		

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

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
15-9-16	Unit	Rejoined from hospital	Unit	14-9-16	S 213. Oct. 25th.
29-9-16	Unit	Killed in Action	Field	26-9-16	S 213. 357. 7-10-16. 17-9-16. Photo of unit for Lt Col. Ash.

O. Age on Enlistment	A.P.		Years	21,	21
P. Religion	A.P.		10	Methodist	4
Q. Rank when left Canada		Cas.	4	OR	1
R. Unit left Canada with		Cas.	12 (b)	55th Bndt. 921	
S. Date left Canada		Cas.	5	June 19-1915	18
T. Unit in England		Cas.	12 (b)	2th Bn.	012
U. Date first proceeded to Theatre of War		Cas.	5	Aug. 28-1915	20

Source of Information—Casualty Form.

1st Unit in T. of W.

*14th Bn.*  

0	1	4
---	---	---

Period of Service

Months: *13*  

1	3
---	---

2nd Unit in T. of W.

--	--	--

Period of Service

Months:  

--	--

3rd Unit in T. of W.

--	--	--

Period of Service

Months:  

--	--

4th Unit in T. of W.

--	--	--

Period of Service

Months:  

--	--

X. Check Column

CHECK

Z. Casualties

Cas.

11

*Kinda 9*

YA. Honours and Awards

Cas.

~~1. Yes.~~  
2. No.

~~1~~  
2

YB. Married or Single

A.P.

~~4. M.~~  
5. S.  
~~6. W.~~

~~4~~  
5  
~~6~~

YC. Service Unit Transfer

Cas.

7. Subsequent Unit or Units.

All cards subsequent to 1st.

8. First Unit.

Last or only card.

8

WATCH

# Extract of Information Coded for Hollerith

TH,

*CH, PW  
20/11*

Regtl. No. *H H H 236*

Name

Surname

Christian Names

*Clark  
Elihu James*

Abbreviations used:—A.P., Attestation Paper, Particulars of Recruit, Officer's Declaration Paper.  
A.P.C., Attestation Paper and Pay-roll Card.  
Cas., Casualty Form and Record Sheet.  
P.D., Proceedings on Discharge.

Extracted by:

*J.D., E.S.*

Coded by:

*E.B.*

Checked by:

*L.M.*

	SOURCE OF INFORMATION	CODE USED	LONGHAND EXTRACT	CODE NO.
A. No. of Card 1, 2, 3, 4, 5, 6			Cards to be punched.....	
B. Professional Soldier	A.P.	1	<i>no prev serv, 0</i>	
C. Theatre of Service	Cas.	2	<i>European 0</i>	
D. Personnel Seconded to W.O., R.A.F., etc.	Cas.	3	<i>not seconded 0</i>	
E. Rank on Discharge		P.D. 4	<i>Other Rank 1</i>	
F. Date Discharged		P.D. 5	<i>Sept 26. 1916, 33</i>	
G. Disposition on Discharge		P.D. 6	<i>Killed in action 01</i>	
H. Place proceeding to		P.D. 7	<i>not applicable 0</i>	
J. Unit Enlisted in	A.P.C.	12 (a) 12 (b)	<i>55th Battalion 3055</i>	
K. Country of Birth	A.P.	8	<i>Newfoundland, 12</i>	
L. Occupation	A.P.	9	<i>Labourer 91</i>	
M. Date of Enlistment	A.P.C.	5	<i>Apr 22, 1915, 16</i>	
N. Place of Enlistment	A.P.C.	13	<i>St John NB, 725</i>	

Surname **Clarke** Christian Name or Names **E.J.** Reg. No. **444236**  
 Rank **A.L.Cpl.** Unit **14th Bn.** Co. Troop Batty  
 Hospital **1st Ne Zealand Amiens** Date of Admission **7.9.16**

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis **Conjunctivitis.**

(1) Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

*Killed in action, 26.9.16.  
Base rept.*

DISPOSITION

*Dis 13.9.16* Date

C.L. 19.9.16 A462(2)

REMARKS

*25.9.16 A467*

*11.10.16, A481'*

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

*Rw.*



# EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

NAME *Clarke, Elisha James*

H. Q. FILE No. 649-

REGT'L. No. *A 44236*

RANK AND CORPS *A/L/Pl. 14<sup>th</sup> Bn (form 55th + 14th*

CABLE

NO.

DATE

NATURE OF CASUALTY

<i>02532</i>	<i>10-10-16</i>	<i>Killed in action Sept. 26th 1916</i>
<i>Bassa Rouen</i>	<i>9-10-16</i>	<i>" " " " 1916 (rec'd 30-1-17)</i>
<i>authority Letter dated 19-3-17 of G. I. G. Leites Br. Eng.</i>		<i>Correct. Rank. A/L. Pl. having been appointed with pay 20-6-16 Rec'd. 12-4-17</i>

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 462.	No 1 New Zealand Stat. Amiens	7-9-16	Conjunctivitis
A 467	Discharged to duty	13-9-16	" "
A 481.	Rep. from Base	26-9-16	Killed in action

*Ind*  
*Mus*

*Att*

Number *A444236* Rank

Surname *CLARKE*

Christian Name *Edith James*

Units *14th Bn Coy 2 Theatre of War* *France*

Date of Service *28-18-15*

Remarks *(7) base Clarke*

Latest Address *Victoria*

*Newfoundland*

Roll No. *B Page 18853*

(This form to be filled in by all ranks on voyage to Canada.)

R	RANK	SURNAME	INITIALS	UNIT
.....	.....	.....	.....	.....

al address.....  
 (Street) (City or Town) (Province)

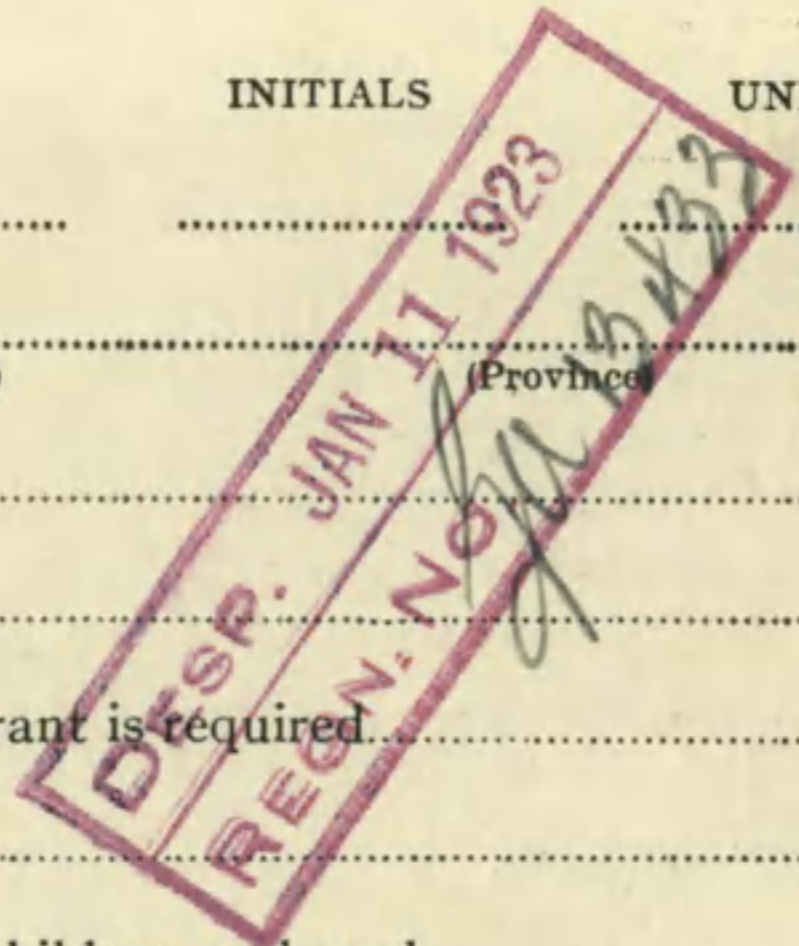
one person to be notified of arrival.....  
 .....

Station in Military District to which a furlough warrant is required.....  
 Railway.....

d, is your wife on board..... ..Number of children on board.....

ination.....

(Sgd.).....



(649-C-5366)

CARD NO. **D**

SURNAME. *Clarke*

CHRISTIAN NAMES *Elihu James*

REGL. No. *A 44236*

RANK *Plt*

UNIT *55th 15th 14th*

*Batt. (1st R.D.)*

FORMER CORPS

FOLL.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL *Clarke, Isaac*

RELATIONSHIP TO SOLDIER *Father*

ADDRESS *Carbonear,  
Newfoundland.*

COUNTRY OF BIRTH *Newfoundland, Carbonear.* DATE

PLACE OF ATTESTATION *St. John. N.B.* DATE *April 22, 1915.*

*O/S 19-6-15-127*

Sailed from Liverpool. S. S. Corsica, 11/6/15.

MARRIED

SINGLE

yes.

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION.

PLACE

DATE

649. G 5566

H.A.D.

#A44236, A/L/C. E.J. CLARKE

14th Bn.

Name & Address of Legatee

Isaac Clarke (F)

Victoria

Newfoundland.

Medals & Decorations

5721

M

Name & Address of Next of Kin

As above

Scroll Desp.

JAN 4 1920

Reqn. No.

27596

P&S.

Serial no. 765524

Plaque Desp.

SEP 20 1920

Reqn. No.

P 9663

Name & Address of Female Next of Kin

As above (mother died 23/1/17)

Desp MAY 12 1920 C 7163

Memorial

Cross 814



Handwritten text at the top of the page, possibly a header or title, which is mostly illegible due to fading and bleed-through.

Handwritten text in the upper middle section of the page, also mostly illegible.

Handwritten red mark or signature in the bottom right corner, possibly a date or initials.

Name **Clarke. James Elihi.** Rank **A/L/Cpl.**

Reg. No. **A44236.**

Unit **14th Batt.**

6-1907

Next of Kin **Canada. (Newfoundland)**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List	
1916.							
26-9.	Killed in Action.			A	481	2532	11-10



Name *Clarke* Rank *A/Lt Col.* Reg. No. *A44236*  
*James*  
 Unit *14th Batt* *Garbunear*  
 Next of Kin *Isaac Clarke* *Newfoundland*

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
<i>1916</i> <i>7-9</i> <i>13-9</i>	<i>No 1 N.S. Ste. Amiens</i> <i>Discharged to duty</i>	<i>Ponnettoes</i>	<i>✓</i>	<i>A462</i>	<i><del>A466</del></i>	<i>A467</i>



MARRIED OR SINGLE *S.*  
 PLACE OF BIRTH *Newfoundland.*  
 NAME AND ADDRESS OF NEXT OF KIN *Isaac Clark Esq.  
 Barbunear, Newfoundland.*  
 RELATIONSHIP OF NEXT OF KIN *Father.*  
 NAME AND ADDRESS OF NEXT OF KIN  
 RELATIONSHIP OF NEXT OF  
 SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)  
 PAYABLE TO  
 RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
<i>1st Lt.</i>	<i>20.6.16</i>	<i>Bo. 38.7.9.16.</i>
<i>Killed in action</i>	<i>27/9/16</i>	<i>61A.481/10</i>

REG'L No. *444236* RANK *1st Lt.* NAME *Clark, Elihi James*  
 IF IN PERM. CORPS, WHAT UNIT *55-UNIT 14th Bn.* TRANSFERRED TO *NE* DATE *27/9/16* AUTHORITY *61A.481/10*  
 PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY  
 PLACE OF ATTESTATION *St. John, N.B.* TRANSFERRED TO DATE AUTHORITY  
 DATE OF ATTESTATION *22/4/15* TRANSFERRED TO DATE AUTHORITY  
 ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE  
 PAYABLE TO RELATIONSHIP  
 ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE  
 PAYABLE TO RELATIONSHIP  
 STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON  
 DISCHARGE DATE AND PLACE *26.9.16 Field* REASON AND AUTHORITY *Killed in action 26.9.16 61A.481/10*  
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) *27/9/16*  
 ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

Entered on N.E. Card Index. *N.W.*  
 Checked by *H. Sillerton*  
 PAY OFFICE  
 NOV 21 1916

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL
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DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS							
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1	2	3	4	1	2	3	4				CREDIT	DEBIT										
			\$	C.			\$	C.			\$	C.																				NO.	DATE	NO.	DATE	NO.	DATE	NO.
<i>1-30</i>	<i>168</i>														<i>327 33</i>																							
<i>4-16</i>	<i>30</i>	<i>1<sup>00</sup></i>	<i>30</i>	<i>30</i>	<i>1<sup>00</sup></i>	<i>3</i>									<i>33</i>	<i>1166</i>	<i>74</i>	<i>1209</i>	<i>284</i>							<i>261</i>	<i>261</i>			<i>522</i>	<i>21392</i>							
<i>May</i>	<i>31</i>		<i>31</i>	<i>31</i>		<i>3 10</i>									<i>324 10</i>	<i>1469</i>	<i>175</i>	<i>1339</i>	<i>345</i>	<i>70 2.</i>	<i>CR M. 30/5</i>	<i>305 30/5</i>	<i>24/5</i>			<i>255</i>	<i>256</i>	<i>97</i>	<i>33</i>	<i>487</i>	<i>6326</i>			<i>17057</i>	<i>7745</i>			
<i>June</i>	<i>30</i>		<i>30</i>	<i>30</i>		<i>3</i>									<i>33</i>	<i>1355</i>	<i>146</i>									<i>255</i>				<i>255</i>	<i>10790</i>							
<i>July</i>	<i>31</i>		<i>31</i>	<i>31</i>		<i>3 10</i>									<i>324 10</i>		<i>1464</i>	<i>27</i>									<i>262</i>			<i>262</i>	<i>13938</i>							
<i>Aug</i>	<i>31</i>		<i>31</i>	<i>31</i>		<i>3 10</i>									<i>324 10</i>	<i>1520</i>	<i>27</i>	<i>1588</i>	<i>158</i>							<i>348</i>	<i>349</i>			<i>697</i>	<i>16651</i>							
<i>Sept.</i>	<i>30</i>	<i>31</i>	<i>50</i>	<i>30</i>		<i>3</i>									<i>365</i>	<i>3815</i>	<i>1636</i>	<i>27/8</i>							<i>349</i>		<i>255</i>			<i>604</i>	<i>19862</i>							
<i>Oct.</i>																	<i>169</i>	<i>21/9</i>							<i>698</i>			<i>460</i>	<i>1158</i>	<i>18704</i>					<i>4th Lt. 20/6/16 Bo. 387/9/16</i>			
<i>April 1917</i>																																				<i>1st Lt. N.E. 27/9/16</i>		
																																				<i>Killed in action 26.9.16</i>		
																																				<i>61A.481/10</i>		
																																				<i>18704 to Canada for</i>		
																																				<i>Self. 13-4-17.</i>		

Statement of  
 FEB 22 1917  
 Account rendered

Cash found in  
 effects *N. R.*

Small  
 Ledger Sheet.



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

Date	Brief details, and signature

**Table IV.—Service Table.**

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

**DUPLICATE**

Army Form B. 178.

**To be used for recruits enlisting direct into the Regular Army only. 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 CLARK E Christian Name Elihu James.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Garbunear County Newfoundland

Examined at ... on 22nd day of April 1915.  
at St. John. N.B.

Declared Age ... 21 years ... days.

Trade or Occupation ... Labourer.

Height ... 5 feet, 6½ inches.

Weight ... lbs.

Chest Measurement { Girth when fully Expanded. 40 inches.  
 Range of Expansion 3 inches.

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 ...  
Small scar above left eye on brow and on rt. arm above wrist.

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

Approved by (Signature) \_\_\_\_\_ (Rank) Capt. Medical Officer.

Enlisted ... at St. John N.B.  
on 22nd day of April 1915.

Corps.	Regtl. No.
<u>55th Battn</u>	<u>A44236</u>

Transferred to ...

Became non-effective by \_\_\_\_\_ on \_\_\_\_\_ day of \_\_\_\_\_ 1915.

(Signature) \_\_\_\_\_ (Rank) \_\_\_\_\_

I certify the foregoing to be a true copy of an original entry on a Medical History Sheet of this man.

*W. R. Ward*  
 for the Officer in Charge of Records Canadian Contingents.

C.A.M.C. for the Officer in Charge of Records Canadian Contingents.



**Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.**

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
<i>1. New York Hosp. Mission</i>	<i>7</i>	<i>9</i>	<i>16</i>	<i>13</i>	<i>9</i>	<i>16</i>	<i>Conjunctivitis</i>	<i>6</i>	<i>Dis to duty</i>	<i>A462. A467</i>