Original

R. 171.

Unit Chaplain Services, O/S M.F. of C. Rank H.Capt. Name Fallon, C.A.

OFFICERS' DECLARATION PAPER

CANADIAN OVERSEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE ANSWERED BY OFFICER.

(ANSWERS).

1. (a) What is your Surname? FALLON

   (b) What are your Christian Names? CHARLES AUGUSTINE

2. (a) Where were you born? (State place and country) Kingston, Ont.

   (b) What is your present address? 178 Ordnance Street, Kingston, Ont.

3. What is the date of your birth? July 18th 1882.

4. What is (a) the name of your next-of-kin? Mrs. D.Fallon

   (b) the address of your next-of-kin? 178 Ordnance Street, Kingston, Ont.

   (c) the relationship of your next-of-kin? Mother.

5. What is your profession or occupation? Clergyman.

6. What is your religion? R.C.

7. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes.

8. To what Unit of the Active Militia do you belong? -

9. State particulars of any former Military Service? -

10. Are you willing to serve in the CANADIAN OVERSEAS EXPEDITIONARY FORCE? Yes.

The undersigned hereby declares that the above answers made by him to the above questions are true.

Charles Aug. Fallon (Signature of Officer).
Hon. Capt.

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider him* fit for the CANADIAN OVERSEAS EXPEDITIONARY FORCE.

Date Aug 9th 1917

Place 13 Barrie St.

H Bright Cameron
Medical Officer.

* Insert here "fit" or "unfit."

Unit C/O M.F. of C. Rank Capt. Name Pallon, C.A.

OFFICERS' DECLARATION PAPER

CANADIAN OVERSEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE ANSWERED BY OFFICER.

(ANSWERS).

1. (a) What is your Surname? PALLON

(b) What are your Christian Names? CHARLES AUGUSTINE

2. (a) Where were you born? (State place and country) Kingston, Ont.

(b) What is your present address? 178 Ordnance Street, Kingston, Ont.

3. What is the date of your birth? July 15th 1882.

4. What is (a) the name of your next-of-kin? Mrs. C. Pallon

(b) the address of your next-of-kin? 178 Ordnance Street, Kingston, Ont.

(c) the relationship of your next-of-kin? Mother.

5. What is your profession or occupation? Clergyman.

6. What is your religion? R.C.

7. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes.

8. To what Unit of the Active Militia do you belong? –

9. State particulars of any former Military Service? –

10. Are you willing to serve in the CANADIAN OVERSEAS EXPEDITIONARY FORCE? Yes.

The undersigned hereby declares that the above answers made by him to the above questions are true.

(Signature of Officer).

Lieut. Colt.

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider him * for the CANADIAN OVERSEAS EXPEDITIONARY FORCE.

Date 19

Place

Medical Officer.

* Insert here "fit" or "unfit".

REGIMENTAL DOCUMENTS

NAME FALLON CHARLES AUGUSTINE REGT. NO. Capt. UNIT Chap. Ser. H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY DEATH Category
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)		~~Pub~~ Recd 25/6/19	10-6-19 ~~Pub~~		
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)		~~Pub~~	~~19-6-19~~	00975	
	TRAINING HISTORY SHEET (M.F.W. 113)					
	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
1	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category Demobd
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
1	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					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)					
1	Disp. Cert.					
2	Misc.					
1	M.F.W. 2591					
1	A 7a card					

Received 20-3-22

Ref. S.S. Mauretania 31/5/19.

W 2589
100M-11-18
1772-39-1377

CANADIAN EXPEDITIONARY FORCE

Certificate of Service

L.K. 2-33.
E.S.

ISSUED TO OFFICERS AND NURSING SISTERS

This is to Certify that (Rank) Honourary Captain

(Name in full) Charles Augustine FALLON, M.C.

Enlisted in The Chaplain Services,

CANADIAN EXPEDITIONARY FORCE, on the XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

day of XXXXXXXXXXXXXXXX 191 AND WAS APPOINTED to COMMISSIONED RANK

in The Chaplain Services,

CANADIAN EXPEDITIONARY FORCE on the Twenty-seventh day

of June 1917.

He SERVED in CANADA, XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX and XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX with the Chaplain Services, Overseas Military Forces of Canada, (London Area) #2 Can. Stationary Hosp., #3 Can. Casualty Clearing Station, 102nd Bn.

and was STRUCK OFF THE STRENGTH on the Ninth day

of June 1919 by reason of General Demobilization.

Dated at Ottawa, this Twenty-sixth day

of November 1919.

Awarded Military Cross, L.G. #31283.

J. Leaby Lieut.,
Director of Personal Services.

M. F. W. 2618a.
30m.—4-19.
1772-39-1428.

Army Form B. 103. **Casualty Form—Active Service.** Regimental Number _____

W. S. B, CLASS. "A"

Hon Capt & Chap. Regiment or Corps Chaplain Services

Rank -------- Surname FALLON Christian Name CHARLES AUGUSTINE

Religion R.C. M.C Age on Enlistment ~~35~~ 34 years 11 months.

Enlisted (a) ~~27-6-17~~. Terms of Service (a) _____ Service reckons from (a) ~~23-6-17~~ 7

Date of promotion to present rank _____ Date of appointment to lance rank _____

Extended { _____ } Re-engaged { _____ } Qualification (b) R.C. Priest, Chaplain.

or Corps Trade and Rate _____

_____ Signature of Officer i/c Records.

CERTIFIED CORRECT 12 NOV 1917 CANADIAN RECORD OFFICE

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				
		S.S. Scotian. Embarked ...	Montreal.	23-7-17	
		Disembarked ...	Liverpool	3.8.17.	
6/11/17	D.C.S.	T.O.S. Chaplain Svcs. O.M.F.C	London	~~23-7-17~~ 23.7.17.	D.C.S. Order 197 dated 6-8-17.
	"	Posted Purfleet Area (C.R.T.D)	Purfleet	9.8.17	D.C.S. Order 206 dated 13-8-17
					Major FOR COLONEL, DIRECTOR OF CHAPLAIN SERVICE.
6/11/17	D.C.S.	T.O.S. Chaplain Svcs. O.M.F.C on Proceeding Overseas	London	12.10.17	D.C.S. Order 273 dated 15/10/17
					Major FOR COLONEL, DIRECTOR OF CHAPLAIN SERVICE.
14/10/17	Prin. Chaplain.	attd. to 2 Can Sta Hosp.			E2460. HQ 11746
20.10.17	2 Can Stat Hosp	attd as in W.E. on arrival in France P.B. for A.G. E 2460 d/14/10/17		14.10.17	B.M.2 Pt 5 56 d/31/10/17

(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) Signaller, Shoeing-Smith, &c.

[P.T.O.

(938). Wt. 15012/5156. 1,000,000. 1/16. P. P. Ltd. Forms/B.103/3.

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				
8.12.17	2 Can Stat'y	Ceases to be attd for duty as in War Est. on attachment to No. 3 C.C.C.S. (Auth: A.P.C. B.B. W/28 d/28.11.17)	Field	3.12.17	B213. Pt II 65 d/21/12/17.
8.12.17.	3 C.C.C.Stn.	Att'd for duty ~~as in W.E.~~ (Auth. A.P.C. 2nd Army W 265/A.P.C. d/28/11/17)	"	3.12.17.	B213. Pt II 49 d/18/12/17.
16.2.18	"	Granted 8 days leave.	"	15/2/18	Pt II d/s No 2.1918 B213 Pt II 10 d/26/2/18
10/3/18	"	Rejd. from leave		22/2/18	K.M. 16/6089.
2/3/18.	"	Granted 14 days leave	Rome	23/2/18	B213. Pt II d/s No 7. 1918
16/3/18	"	Rejd. from leave		16/3/18	B213.
23/3/18.	Do.	Ceases to be attd. as in W.E. to 3 Can C.C.S. on being posted to 4th Can Divl H.Q. for duty with 102nd Can Inf Battn.		22/3/18	B213. Auth. P.C. 7.325 d/18/3/18. + P.C. 7.362 d/22/3/18. Can Corps A.102-18-13 d/19/4/18. K.G. 11746 Pt II d/s No 14. d/1918.
23/3/18.	5th Bn CRT.	Reported for duty 22/3/18. Despatched to Can Corps		23/3/18	B213.
~~6.12.18~~	~~Hosp. Camp~~	~~Influenza~~		~~27.11.18~~	~~B213~~
15/2/19.	Lon. Gaz.	Awarded. Military Cross.		15/2/19.	L.G. 31183. Pub. Pt 14. 12/3/19

Emb. Camp. Proceeded to England

3 MAI 19

N.P.
Pt.2 No.

G. J. Skelton Lieut. for Lt Col. A.A.G.
Canadian Section, G.H.Q. - 3rd, Ech.

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

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-9.0.

Casualty Form—Active Service.

Unit, Regiment or Corps C C S

Regimental No. ..... Rank H Cpl C. E. F. Name Augustine C

Enlisted (a) ..... Terms of Service (a) ..... 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				
10 6/19	Ottawa	in Canada on General Demobilization	M.D. No 2	30/5/19	[illegible] 2007-19
14-6-19	M.H.Q. Ottawa	S.O.S. C.E.F. in Canada on General Demobilization	M.D. No. 2	9-6-19	C.E.F. R.O. No. 2021-19

W. Winter. Capt
for Director Personal Services

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

[P.T.O.

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				

Number

Rank Capt.

Surname FALLON

Christian Name Charles Augustine

Units

Theatre of War France

Date of Service 23.7.17 12-10-17 31-5-19

Remarks

Latest Address 348 Porter Ave
Buffalo N.Y.
U.S.A.

Chap

Roll No "B" Page 8624.

200m.-2-21.M.

Next of kin

Address on leave

Address on discharge

Transportation issued Yes No Date Character on discharge

Previous occupation Date and place of enlistment

Diagnosis Date of Medical Boards

Date	Remarks

DESP. NOV 29 1921 REGN. No 46410

*—Name will be given in full; surname first.

SURNAME. Fallon M.C. & S. 31183.

CARD NO. 92

S.O.S. 9-6-19
D.O.L.O. 9-6-19 FOLLO
demob 2 D D

CHRISTIAN NAMES Charles A.

REGL. NO.

RANK Hon. Capt. & Chaplain

UNIT

FORMER CORPS

NEXT OF KIN.

NAMES IN FULL

RELATIONSHIP TO SOLDIER

ADDRESS

CHANGE OF ADDRESS

COUNTRY OF BIRTH

DATE

PLACE OF ATTESTATION

DATE

Hon. Capt. with effect 6-7-17

R/c 6-6-19 $\frac{343}{4}$ Capt

L. L. 10437. M. & D. 7253. O.B. 27-7-17 $\frac{F\ 247}{1}$ Details

M. F. W. 22. 100M.—11-16. H. Q. 1772-39-339.

Order to embark S.S. Scotian 19-7-17 Auth H.Q. 203-1-50 tel. 14-7-17.

MARRIED SINGLE WIDOWER

TRADE OR CALLING RELIGION Roman Catholic

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

Present Address:- 178 Ordnance St., Kingston, Ont.

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Awing 8

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. ..... Rank Captain Surname FALLON

(Given name in full) Charles Augustine

Unit or Corps 102nd Bn Birthplace Kingston - Ont

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

1. GENERAL DESCRIPTION:

Physique Good Weight 165 lbs. Height 5 ft. 8 in. Colour of Eyes Blue

Nutrition Good

Pulse 68 regular

Condition of arteries soft

Vision Rt. 6/12 Left 6/12

Hearing (conversational voice) Rt. 20 ft.

Left. 20 ft.

Identification marks, scars, or deformities. (Give cause and date of origin) Scar anterior side left thigh

Opinion as to general health and physical condition Good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No") (Subjective evidence may be sufficient in certain cases.)

Nervous System No Genito Urinary System No Cardio-Vascular System No

Special Senses No Integumentary System No Respiratory System No

Disturbance of Mentality No Muscular System No Digestive System No

Osseous and Joint System No Any other general condition Yes

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

Measles as child

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Bramshott (Overseas)

Date 6-5-19 Signed J. G. Clay Capt. M.O.

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

Signature Chas. A. Fallon

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

THIS SECTION FOR USE IN CANADA—

Examined at .....(Canada)

Date ..... Signed ..... M.O.

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

Signature .....

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

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

FORM P. 15
5986—25M—19/1/17

ASSIGNED PAY.

1917-18

UNIT.			RANK
NAME OF	DATE	AUTHORITY	
Chaplain Services		Pay 3.00 F.A. .75 Mess 1.00	Hon.

Beneficiary

Address

Amount. $

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

DATE 1917	PARTICULARS	CK. NO.	CR.	DR.
Aug 8	Outfit Allce	2869		
	P & A. 27/6 - 31/7/17 M 3/8/17 Bank	13513		131
16	Diff betw P & A. 27/6 + 16/7/17. 20d @ 3.75 Vo 1486			75
	Cred Bal. Can. 16/7/17		105	
	Bank	15268		30
18	P & A. 27/6 - 31/7 M. 3/8/17		131 25	
	Pay Aug R. " "		145 25	
22	Bank	17020		145
Sept 6	Trav Allce 16-24 8/17.	R18		
18	Pay Sept R.		142 50	
22	Bank	21610		142
Oct 9	Trav allce 5-28 9/17.	R47		
"	Pay	"	147 25	
23	Bank	26282		147
Nov 7	Trav - allce 3 - 12 10/17	R83		
Nov	Pay		142 50	
22	Bank	30933		142
Dec	Pay		147 25	
15	Bank	35096		147
1918 Jany	Pay		147 25	
24	Bank	39459		147
Feby	Pay		133 -	
23	Bank	44015		133
Mch 14	Pay		147 25	
25	Bank	42637		147

UNIT. NAME OF	DATE	AUTHORITY	RANK.	DATE	AUTHORITY	NAME. 9 F. 697
Chaplain Services		Pay 3^00	Hon. Capt	27 6/17	Letter H.	Name Fallon
		T.A. 75^4		16 7/17	A. G. 4/8/17	Initials C. A.
		Mess 1^00			H.D.	Bank of Montreal
No.....						

CULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
	2869				✓	£20. 10. 11 $100^00	
M 3/8/17 Bank	13513		131 25				
6/7/17. 20d @ 3.75 Vo 1486			75				
		105					
Bank	15268		30				
3/8/17		131 25					
		145 25					
Bank	17020		145 25				
4 8/17.	R18					£1-1-6. 5^83	✓
		142 50					
Bank	21610		142 50				
28 9/17.	R47					£2-0-0 9^79	✓
		147 25					
Bank	26282		147 25				
8-12 10/17	R83					£1.19.0 $9^49	✓
		142 50					
Bank	30933		142 50				
		147 25					
Bank	35096		147 25				
		147 25					
Bank	39459		147 25				
		133 -					
Bank	41015		133.				
		147 25.					
Bank	42637.		147 25				

FORM P. 15
5986—25M—19/1/17

ASSIGNED PAY.

UNIT.

NAME OF	DATE	AUTHORITY

RANK.

DATE	AUTHORITY

Beneficiary

Address

Amount. $

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

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SP To be

ATE	AUTHORITY	RANK.	DATE	AUTHORITY	NAME.
					Name Initials Bank

CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS

FORM P. 15. H.W.V.Ld.—3717-18.
12519—16M—1-3-18

ASSIGNED PAY.

UNIT.

NAME OF: C.S.

RATE OF P. AND A.: Pay 3.00 F.A. 75¢ Messing 1.00

RANK: Capt

Beneficiary

Address

Amount. $

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

Aaa Outfit Allce

DATE 1918	PARTICULARS		CK. NO.	CR.	DR.
April 22	Pay.			142 50	
24.		Bank.	1186		142
May 3	Pay.			147 25.	
24		Bank.	2679.		147
June 4	Pay.			142 50	
24		Bank.	4144		142
July 8	Pay.			147 25	
24		Bank	5625		147
August 1st	Pay.			147 25.	
24		Bank.	7161.		147
Sept 3	Pay.			142 50	
24		Bank.	9186		142
Oct 1st	Pay.			147 25.	
23		Bank.	10393		147
28	Aaa Outfit Allce. 1/8/18.			100	
30		Bank.	10853		100
Nov	Payr			150	
	Adpt F.A. Allce 1/9/18 - 31/10/18			12.50	
28		Bank	12617		162
Dec	Payr			155	
27		Bank	13770		155
Jan	Payr.			155	
25		Bank			155
Feb	Payr.			140	
25		Bank	17136		140

UNIT. NAME OF	RATE OF P. AND A.	RANK.	DATE	AUTHORITY	NAME.
C.S.	Pay 3.00 F.A. .75 Messing 1.00	Capt & Qmr.			10 Name Fallon. Initials C.A. Bank of Montreal

s or No..... Aaa Outfit Allce. 1/8.

TICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
		142 50					
Bank.	1186		142 50		0		
		147 25.					
Bank.	2679.		147 25		0		
		142 50					
Bank.	4444		142 50		0		
		147 25					
Bank	5625		147 25		0		
		147 25.					
Bank.	7161.		147 25		0		
		142 50					
Bank.	9186		142 50		0		
		147 25.					
Bank.	10393		147 25		0		
		100					
Bank.	10853		100		0		
		150					
Allce 18/9/18 - 31/10/18		12.50					
Bank	12617		162 50		0		
		155					
Bank	13770		155		0		
		155					
Bank			155		0		
		140					
Bank	17136		140		0	Forwarded	

FORM P. 15. 12519—16M—1-3-18 H.W.V.Ld.—3717-18.

ASSIGNED PAY.	UNIT. NAME OF	RATE OF P. AND A.	RANK.	DATE	AUTHORITY
Beneficiary		Pay			
Address		F.A.			
		Messing			
Amount. $					
Separation Allowance issued. Yes or No.....					

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	S To
Mar	Balce Forward		Nil			Nil	
	Pay R		155				
24	Bank	18683		155			
Apr.	Pay R.		150 -				
	Bank	1107		150			
May 8	Bal May & June P + A	Bank.	17311	305			
" 11	May Pay R.		155			Dr. 150	
June 27	June Pay R.		150				

E OF	RATE OF P. AND A.	RANK.	DATE	AUTHORITY	NAME.
	Pay				Name
	F.A.				Initials
	Messing				Bank

	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
vard							
		155					
uk	18683		155				
		150 -					
nk	1107		150 -				
nk.	17314		305				
		155			Dr. 150	Retd. to Can	
		150				L.P. 6 to 30/6/19 (Bahott)	
						Tofer to N.E. Ledger	
						20 L 12 fr Ly. July '19.	

Forms R. 150. I.D.
3732. 15 M. 14/12/16.

"MC"

Surname FALLON, **Christian Names** Charles Augustine,

Rank Hon.Capt. **Name and Address of Next-of-Kin** Mother

Promotion Mrs D.Fallon,
178,Ordnance Street,Kingston, Ont.Canada,

TOS. 27.6.17

Unit Chaplain Services.

Place of birth Kingston, Ont.Canada.

Married (Yes or No)

Appointments

Date of leaving Canada 23.7.17.ER **Date and Cause of Resignation**

Report		Record of Promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case	Place	Date	REMARKS Taken from Official Documents
Date	From whom received				
		T.O.S.			
6.8.17	D of C.S.	Having Rpt for Duty on arrl from Canada		26.7.17	Co 197
13.8.17	do	Posted to Purfleet area with Effect		9.8.17	Co. 206
11.8.17	CRTDpt	Attchd from D.C.S London & Posted to Hq Coy		9.8.17	Wo Ord. 212.
15.10.17	do	Ceases to be attchd on Proc to D.C.S. London.		12.10.17	Wo Ord. 277.
15.10.17	D.C.S.	SOS on Proc o/s for Duty Effect		12.10.17	Co 273.
31-10-17.	W.P.2.6.Stat.Hp.	Att^d for duty in Bar Pol on arr from England		14.10.17	Pt II o/56.
22.12.17	- do -	Ceases to be Att for duty on Att to No 3 C.C. Ag Stat.		3.12.17	Pt II o/65, Pt II o/49 (No 3 CC)
5.3.18	Can Chap Forces	Granted 8 Days leave		15.2.18	Pt II o/2
27.3.18	- do -	Granted 14 Days leave to Rome		23.2.18	Pt II o/7
26.4.18	- do -	Ceases to be Att 3 CCCS & is Posted to 4th Dis HQ for duty with 102 Bn		22.3.18	Pt II o/14
15.2.19	WO	Awarded the "MC"			to G 30.7.19 London Gaz 31183
24.3.19	102 Bn	Granted 14 Days Leave (France)		11.3.19	Pt II o/16

12 NOV. 1918

Report Date	Report From whom received	Record of Promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case	Place	Date	REMARKS Taken from Official Documents
19 5 19	Chap Forces	Ceases to be posted to 4 Cdn Div 602 Bn		3.5.19	Pt 29
19 5 19	"	SOS & Estab'd posted to Gen Dept			
		on proceeding to England		3 5 19	Pt 29
12. 5 19	A Wing Bchott	TOS pending RTC		4.5.19	Pt 22.
26 5 19	DCS	SOS on reporting from France		4 5 19	Co 174
26 5 19	"	Posted to CCC Bichott		4 5 19	Co 176
6 6 19	A Wing	SOS on return to Canada		31 5 19	Pt 38
23 6 19	DCS	SOS on return to Canada		31 5 19	CO 206
		~~Sailed to Canada~~		31 5 19	Sh 68
				SOS 9.6.19	

48489

War Service Badge
Class "A" No. .....

DA 1.

Occupational Group No. 19

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

3.6.38.

1. RANK Capt.
2. NAME Fallon Charles Augustine
3. UNIT 102 Bn
4. DATE STRUCK OFF STRENGTH | PLACE Toronto
5. REASON Demob. ~~SOSA-6-19~~ PO 2021-19
6. AUTHORITY
7. PROPOSED RESIDENCE ~~Catholic University Washington D.C.~~ 348 Porter Ave. (C.A.C.) Buffalo. N.Y., U.S.A.

Paid 24-1-19 22

This folder should contain the following documents:

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

M. F. W. 2591.
20M—11-18.
1772-39-1380.

1. Triplicate Declaration Paper (M.F.W. 51), or
   Triplicate Attestation Paper (M.F.W. 23).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B.313 or A.F.B.178)
4. Proceedings of Med. Board (M.F.B.227 or M.F.W.129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Proceedings on Striking off Strength (M.F.W. 2591).
7. Last Pay Certificate (P. 41) & dup
8. War Service Gratuity Form (M.F.W. 2595).
9. Sundry Documents.
10 Dispersal Cert.

Group B

Checked by No. 15

Date 30-5-19

Army Form B. 103. Regimental Number

Casualty Form—Active Service.

Regiment or Corps: Chaplain ~~Services~~ Forces

Rank: H. Capt. Surname: Fallon (MC) Christian Name: C. G. A.

Religion: R.C. Age on Enlistment: years months

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

Date of promotion to present rank Date of appointment to lance rank

Extended / Re-engaged Qualification (b) War Service Badge

W.S.B. class "A" Class "A" No.

or Corps Trade and rate

Occupation Signature of Officer

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked			
		Disembarked			
		Proceeded o/s 12-10-17.			
		(auth W.O. 121/overseas/4724/A(49) of 9/10/17.			KR18843.
		Posted to 2nd Can Sta Hosp.			PC. E2460. 14/10/17
		(auth PC 125 of 22/10/17 Ref KR18843).			KG11746
17/12/17	A.D.C.S.	Reposted to 3 Can CCS.			KG11746
		(auth. PC. E2620 of 27/11/17)			
15-2-18.	3 CCC Sta	10 days leave		15-2-18.	B213 PH= 10. 26/2/18.
10-3-18	"	Rejoined from leave		22-2-18	KM.16/6089.
2-3-18	"	Granted 10 days leave	Rouen.	23-2-18	B213 PH= 13 of 19/3/18
16-3-18	"	Rejoined from leave.	-	16-3-18	B213

(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) Signaller, Shoeing-Smith, &c.

W. 8635—M2733 2000m 9/17 (35611) C. P. & S., Ltd., Form B./103 E/1807.

P.T.O.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
23/3/18.	3 CCCSta.	Ceases to be attd in W.E. (A.P.C. 4th Army W 381/A.P.C. d/19/3/18.		22/3/18.	B213. Pt. II 16 d/ 9/4/18.
23/3/18	Do.	Posted to 4th C Div HQ. for duty with 102nd C I Battn.		22/3/18.	PC. 7. 325 d/18/3/18 + PC. 362 d/22/3/18. Can Corps A. 102-18-13 d/19/4/18. KG 11746 B243.
16.3.18.	Bruce, Chaplain. A.A.G. Can Sect	T.O.S. on reposting to 4th Div HQ for duty with 102nd Battn.		22.3.18.	P.C. F 325. KG 11746. Part 2 Vs 17 d/.
15.2.19.	London Gaz.	Awarded the Military Cross.			No. 31183. Pt. 11 Vs. 6.

Lieut. for Lt Col. A. A. G.
Canadian Section, G. H. Q. - 3rd, Ech.

SoS Proceeding to Canada 31-5-19 Part Forces No. 30
Awing 6-66
R. [illegible] for O-6.

H. M. T. S. MAURETANIA
EMBARKED 31-5-19

C.A.D.C. 5009A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

DIRECTIONS TO DENTAL OFFICERS

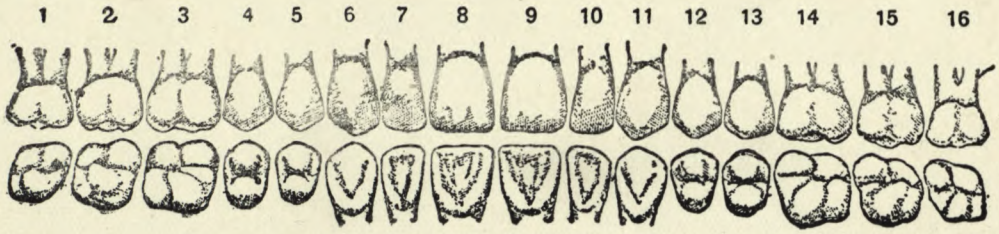
1. This form will be made out for each individual at the time of Demobilization in England or France
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated

NAME OF SOLDIER (Block Letters) FALLON. C. A.

REGIMENT Chaplain Services RANK Captain No.

alt. 102 141

Date of Examination in England 6-5-19 | Date of Examination in France



8-I

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 3, 20.
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

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

- (a) In Canada
- (b) In England yes.
- (c) In France yes.

Signature of Dental Officer C C Graham Capt

Mauretania 6/6/19

7 97

AUDITOR | PAYMASTER

M. OR S.

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

REGT. No. RANK H. CAPT. NAME (IN FULL) FALLON C. A. AUGUSTUS (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? No. DATE EFFECTIVE

TO WHOM PAID RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 102nd Bn IF IN P.F. WHAT UNIT? Bank of Montreal, Kingston Branch

PLACE OF ATTESTATION / TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 23/7/17 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY $ NIL DATE EFFECTIVE

PAYABLE TO RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE DATE 9-6-19. REASON Demob AUTHORITY GO 169 IF ENTITLED TO POST DISCHARGE PAY Yes

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.			TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.			TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					
30/6/19					NIL												100	00									15	00									Ord. Boat Chg. No. 21997 Rib Mary. 1-30/6/19
																															115	00	115	00			
July 1-	4	00																									115	00									T.O.S.T.O. 364
																											84	00									O/C. PKA. } 10-30/6/19
																											10	50			209	50	209	50			O/C. PKA. }
122 days	4		W.S.G. 488	-			488	-																			W.S.G. 209	50			209	50	AMOUNT DUE SOLDIER DEPENDENT 278	50			
											AK 50		Jun 25		388861.												124	—			333	50	154	50			
																											15	—			348	50	139	50			Rebate on messing.
											AK 97		Aug 22.		1045911.												139	50			488	—	closed				
			488	-			488	-																			488				488	-					

W. S. G. PAID IN FULL

LIEUT.

FOR PAYMASTER WAR SERV. DE GRATUITY

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1300.

1st/Lieut

FALLON, C.A.