Triplicate

"NON COMBATANT SERVICE"

ATTESTATION PAPER.

No. 2611974

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ..... STEPHENSON.
1a. What are your Christian names? ..... Edwin Howard.
1b. What is your present address? ..... Burlington, Ont.
2. In what Town, Township or Parish, and in what Country were you born? ..... Tillsonburg, Oxford, Ontario, Canada.
3. What is the name of your next-of kin? ..... Mrs. Caroline Emily Stephenson.
4. What is the address of your next-of-kin? ..... Burlington, Ont., Canada.
4a. What is the relationship of your next-of-kin? ..... Mother.
5. What is the date of your birth? ..... 20th April, 1886.
6. What is your Trade or Calling? ..... Clergyman.
7. Are you married? ..... No.
8. Are you willing to be vaccinated or re-vaccinated and inoculated? ..... 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.
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? ..... No.
14. If so, what was the nature of the disability? ..... ----
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected? ..... No.
16. If so, what was the reason? ..... ----

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Edwin Howard Stephenson, do solemnly declare that the above are answers made by me to the above questions and that they 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.

Edwin H. Stephenson (Signature of Recruit)

Date May 17, 1918. John Rawling C.S.M. (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Edwin Howard Stephenson, 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.

Edwin Howard Stephenson (Signature of Recruit)

Date May 17, 1918. John Rawling C.S.M. (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 London, Ont., this 17th day of May 1918.

W. H. Irwine Major, (Signature of Justice)
Officer i/c Mobilization Centre.

M. F. W. 23.
750 M.—1-17.
H. Q. 1772-39-841.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT.

Description of EDWIN HOWARD STEPHENSON on Enlistment.

Apparent Age 32 years 1 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 3½ ins.

Chest measurement.
- Girth when fully expanded 35 ins.
- Range of expansion 3 ins.

Complexion Medium

Eyes Grey

Hair Dark Brown

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

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).

R. Eye D. 40/20. L. Eye D. 40/20
Hearing R. Normal. L. Normal.

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 May 17, 1918. 191 . [signature]

Place London, Ont. Capt., A. M. C.
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.

E. H. Stephenson 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.

A. R. Le Rougel Capt. (Signature of Officer)
O.C., A.M.C. Training Depot, No. 1 C.E.F.

Date July 2 1918.

REGIMENTAL DOCUMENTS

NAME Stephenson, Edwin Howard REGT. NO. 261 1974 UNIT H. Q. FILE NO.

	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)					
1	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
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Deceased
	MEDICAL EXAMINATION (M.F.W. 129)					
1	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 1
	LAST PAY CERTIFICATE (M.F.W. 44)					28-23
	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					2-23
	PARTICULARS OF CHARACTER (A.F.W. 3226)					9-23
	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					1
1	A. F. B. 2090A.					
6	Misc.					
1	Form of Will					

40698

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

9276

(Died of Disease) 24-5-19. Vladivostok.

649-S-32421

STEPHENSON, Edwin Howard #2611974 Pte. #11 Stat. Hosp. (Form a m c 3B #1)

Medals & Dec.	Father	W. E. Stephenson, Brant St., Burlington, Ont.
P & S.	"	As above
Mem. Cross	Mother	Caroline Emily Stephenson, Address as above

not eligible for 14-15 star
Canada and Siberia only.

58964

Number 2611974 Rank Pte

Surname STEPHENSON

Christian Name Edwin Howard

Units C.E.F. Theatre of War Siberia

Date of Service 26/10/18

Remarks

Latest Address (H) W. E. Stephenson
Brant St.
Burlington, Ont.

Roll No B Page 12057

200m.-2-21.M.

TRANSFERRED TO C. E. F. (Siberia) O/S Emp. of Japan 11-10-18

H. Q. 649-S-324-21

M. D. No. 1

T. O. S. June 4th 1918

D. O. Pt. II 184 of 3-7-18

S. O. S. 19

Reason

Auth.

(a. 7 Form)

Surname Stephenson

Christian names Edwin Howard

Regtl. No. 2611974 Rank Pte

Unit ~~C. A. M. C. (MD)~~ #11 Stat. Hosp.

Next of kin Stephenson, Mrs. Caroline Emily Relationship Mother

Address Burlington, Ont.

Also notify:

BORN—Place Canada, Burlington, Ont. Date April 20th 1886

ATTESTED—Place London, Ont. Date May 17th 1918

O/S

R/C

W. 22—75M-5-18. 1772-39 839.

For Expeditionary Force Cases only. Army Form W.3243a.

No. 11 Stationary Hospital.

State from which Force

Serial No. in A. & D. Book } a/1290

Regt. (state if T.F.) No. 11 Stationary Hospital

Trp., Batty. or Coy. —

Regtl. No. 261474

Rank Private

Name Stephenson Edwin H.

Age 33 Total Service 12 1/12

(a) Date of Arrival at Hospital as an admission 18-5-19

(b) As a transfer (state where from)

Date of discharge to duty

" " " by change of disease Smallpox

" " " as an invalid

" " death 24-5-19 (6.15 Pm

" " transfer (state where to)
(Name of Hospital to be given)

No. of days under treatment

To be filled in by the Medical Officer in charge of case in accordance with para. 14, A.C.I. 462 of 1917.

Date of onset of disease or injury

Disease or injury Measles Smallpox Hemorrhage

Operations

Result of operation

Brief notes on case with complications in order of occurrence:—

Died 6.15 Pm. 24-5-19

Signature of Medical Officer J Hollis Capt

Further notes may be written on back of card.

One of these Red cards is to be completed for every Expeditionary Force patient received into hospital. Black cards for U.K. troops.

320 Wt.4248. 1,750,000. 10.8.18 - Wh.P. E.3639
Army Form W. 3243a.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

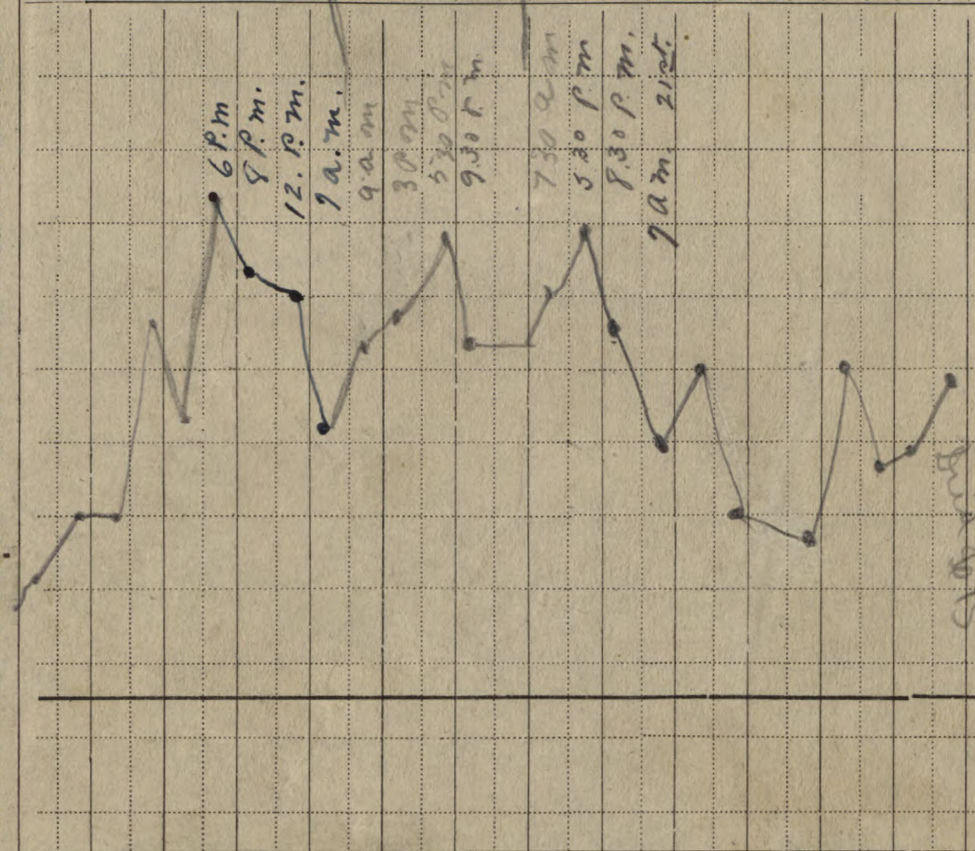
Corps No 11 Stationary Hosp Military Hospital No 11 Stat Hosp

No. 261197 4 Rank and Name Pte Stevenson E Age 33 Service 13/12

Disease Smallpox Date of admission 18/5/19 Date of discharge Result

Dates of Observation	May 16	17	18	18	19	19	19	20	20	21	21	22	22	23	23	24	24	25	25
Days of Disease																			

Temperature Fahrenheit: 107°, 106°, 105°, 104°, 103°, 102°, 101°, 100°, 99°, 98°, 97°



Pulse per Minute	96	76	84	84	84	75	77	76	72	74	76	77	86	92	75	84	88	76	80	84	88	86	98
Respirations per Minute	19	20	18	15	16	22	16	17	16	16	16	18	17	20	18	23	23	24	22	19	23	22	26	17
Motions per 24 hours	0		1	0		0		1		1				0		1	0	1		1	1	0	1	0

Г. Владивостокъ. Тип.-лит. Іосифа Короть Ф. 983.

Signature ..... In charge of case.

#2611974 Ole Stephenson Edwin H.

Patient complains of malaise & vomiting & pain in the stomach. Has some difficulty in getting bowel to move. On the 4th day a rash appeared at the hair line resembling the rash of measles. Spots on the mucous membrane of the mouth like Koplik's. Conjunctivitis present. Distributed all over the body. Isolated spots. Deep in color slight raised above the surface of the skin.

21. Spots still about the same increasing in no & becoming umbilicated upper part

22. Rash of the face resembles sunburn around the mouth & neck. Distinct vesicular spots. The rash on the body very much increased a deep violet in color & umbilicated

23. Vesicular in appearance patient delirious. Immense hemorrage

24 Rash hemorrhagic patient very very weak pulse irregular.

Died 6.15 PM 24-V-19

Major Collins MO/Coose

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps No. 11 Stat Hospital

No. ~~26974~~ 2611974 Rank and Name Pte Stephenson Edwin Age 33

Military Hospital #11 Stat Hospital

Service 13/12

Disease Measles Smallpox Date of admission 18-5-19 Date of discharge .... Result ....

Dates of Observation																															
Days of Disease																															
Temperature Fahrenheit	Time a.m. p.m.	Time a.m. p.m.	Time a.m. p.m.	Time a.m. p.m.	Time a.m. p.m.	Time a.m. p.m.	Time a.m. p.m.	Time a.m. p.m.	Time a.m. p.m.	Time a.m. p.m.	Time a.m. p.m.	Time a.m. p.m.	Time a.m. p.m.	Time a.m. p.m.	Time a.m. p.m.	Time a.m. p.m.	Time a.m. p.m.	Time a.m. p.m.	Time a.m. p.m.	Time a.m. p.m.	Time a.m. p.m.	Time a.m. p.m.	Time a.m. p.m.	Time a.m. p.m.	Time a.m. p.m.	Time a.m. p.m.	Time a.m. p.m.	Time a.m. p.m.	Time a.m. p.m.	Time a.m. p.m.	Time a.m. p.m.
·8 107° ·6 ·4 ·2																															
·8 106° ·6 ·4 ·2																															
·8 105° ·6 ·4 ·2																															
·8 104° ·6 ·4 ·2																															
·8 103° ·6 ·4 ·2																															
·8 102° ·6 ·4 ·2																															
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·8 99° ·6 ·4 ·2																															
·8 ·6 98° ·4 ·2																															
·8 97° ·6 ·4 ·2																															
·8 ·6																															
Pulse per Minute																															
Respirations per Minute																															
Motions per 24 hours																															

Г. Владивостокъ. Тип.-лит. Іосифа Короть Ф. 983.

Signature .... In charge of case.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

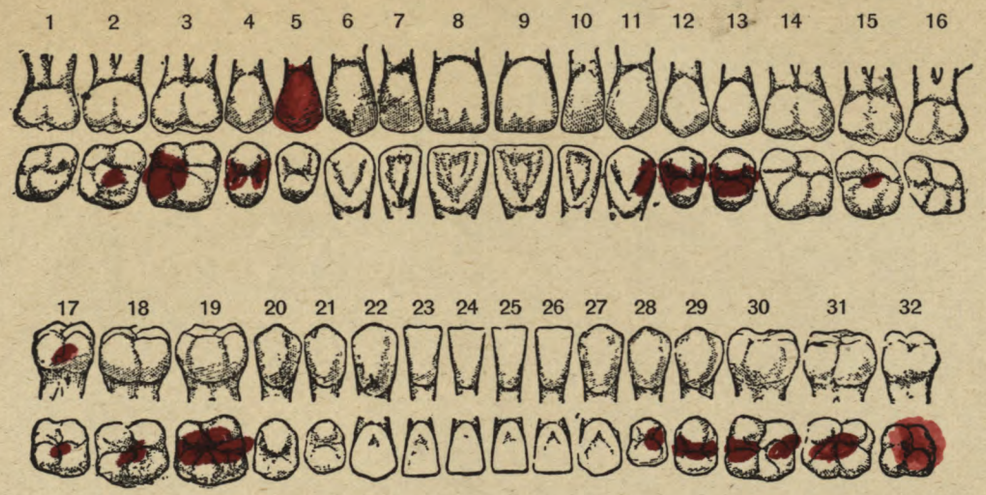
District 1.

Name of Soldier Stephenson E.H.

Rank Cpl.

Regiment OTE.

No. 261197



INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

	Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	Dentures U	Dentures L	Dentures P	Gold Clasp	Gold Filling	Crowns Gold	Crowns Porcelain	Bridge Work	Operator	Military District	Remarks
Condition on first Examination	1915 July 22	14 23 4 11 12 13 17 18 19 28 29 30 31 32															1/5			Mitt Hager		Complete 22/7/18

M.F.B. 465.
200m.—6-18.
1772-39-950.

15.

FORM OF WILL

I, Edwin Howard Stephenson (Name in full)

A. M. C. Training Depot No. 1, C. E. F.

Regimental Number 2611974 serving in

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

"Nil"

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

absolutely, and my personal estate I bequeath to

Will may be found in the care of Wm. Howard Stephenson, Burlington Ontario

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

NOTE

This space for the appointment of Executor if necessary.

Not Necessary

IMPORTANT NOTE

This must be signed and Dated by THE SOLDIER HIMSELF.

this 9th day of September A.D. 1918.

Edwin H. Stephenson 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.

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness D Porter

A. M. C. Training Depot No. 1, C. E. F.

Address of Witness

Occupation of Witness Soldier

Signature of Second Witness H. L. Jackson

A. M. C. Training Depot No. 1, C. E. F.

Address of Witness

Occupation of Witness Soldier

M. F. W. 82.
300M.-12-16.
1772-39-983.

CASE HISTORY SHEET.

Aewat Hospital. Gournsatar Bay Station

No. 309496 Rank Private Name Stewart J.M. Age 39

Unit 25th Bn Completed years of service (Where and how long) 5 1/2

Date of admission 31-1-19 Date of discharge 3/2/19

Diagnosis Bruised rib Place of origin Siberia

CONDITION ON ADMISSION AND PROGRESS OF CASE

31-1-19

Complaining of pain & tenderness over distal end of 9th rib. Fell on side about two weeks ago, & since then movement of side has given pain. No symptoms when quiet. Is tender & pressure over distal part of 9th rib. no fracture of rib.

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

Neg

TREATMENT

(Especially any specific or special form.) Massage & active movement.

CONDITION ON DISCHARGE,

(and disposal made of case.) Recovered Cat A.1.

Date 3-2-19

Medical Officer i/c case.

M. F. B. 313a.
200M.-5-18.
1772-39-439.

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

M. F. W. 54. (A. F. B. 103.
350m.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps. A. M. C. T.D. No. 1, C. E. F.

Regimental No. 2611974 Rank Pte. Name STEPHENSON, Edwin Howard.

Enlisted (a) 17-5-18. Terms of Service (a) C. E. F. c.e.f. Service reckons from (a) 17-5-18

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) Clergyman.

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				
m) 26/6/22		Embarked Canada 14/10/18			
		Arrived Siberia 26/10/18 with #11 Stationary Hospital			
24.10.18	O.C. #11 Staty Hosp.l	Having proceeded up country is short on command.	Vladivostok	8/12/18	Pt. II D.O. #20
18.2.19	do	Ceased to be on command	do	5.2.19	Pt II D.O #7
27.5.19	do.	Adm.d #11 Staty. Hosp.l (Measles)	do.	18.5.19	Pt. II DO #21.
—1—	do.	S.O.S Deceased.	do.	24.5.19	Pt. II DO #21.
		~~Embarked Siberia~~			
		~~S.S. Empress of Russia~~			

Certified Correct
H. W. Adams
Capt.

Capt.
DEPUTY ASSISTANT ADJUTANT GENERAL
DEPARTMENT OF RECORDS
CAN. EXPED. FORCE (SIBERIA)

(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				

C.E.F. (SIBERIA) RECORD SHEET

Next-of-Kin	Mrs. Caroline Emily Stephenson (Mother) Burlington, Ont.
Also Notify	
Subsequent changes in Next-of-Kin	

Country of Birth	Married or Single on Enlistment	Subsequent Marriage Date
Tillsonburg, Oxford, Ontario.	Single.	

Surname	Stephenson
Christian Names	Edwin Howard
Regimental No.	2611974
Rank	Pte.
Unit	#11 Stat. Hospital
Place and Date of Enlistment	London, 17-5-18 M.D. 1.
NON-EFFECTIVE: (1) Place	Vladivostok
(2) Date	24-5-19
(3) Reason	Deceased
H.Qs. File No.	649-S-32421.

Record of Promotions, Reductions, Transfers, Casualties, Reports, &c.	Place	Rank Shewn	Effective Date	Unit	Authority: Part II D.O. No., Cas. List, &c.	Authority: Dated
Embarked for Overseas. "Emp. of Japan"	Vancouver	OCT 11 1918		#11 Stat. Hosp.	Sailing list.	
'On Command' having proc. 'up country'	Siberia	Pte.	8-12-18	#11 Stat. Hosp.	#20	24-12-18.
ceases to be On Command	Vlad.	"	5-2-19.	" "	#7	18-2-19.
Ref. to 23rd May 2070 Died at Stat. Hosp. (Small. Ax)	Siberia	Pte.	23-5-19. 25-5-19	Stat. Hosp.	Sib. Rec 210	26-5-19.
Dang. ill Stat. Hosp. (Smallpox)	Siberia	Pte.	23-5-19.	" "	Sib. Rec 207	30-5-19.
S.D.S. on Decease.	Vlad.	"	24-5-19	" "	#21	24-5-19
Admitted to No 11 Stat. Hosp. (Measles)	"	"	18-5-19	" "	#21	24-5-19

M.F.W. 2581 (25M-9-18).
1772-39-1368.
L L Job 48477.

Record of Promotions, Reductions, Transfers, Casualties, Reports, &c.	Place	Rank Shewn	Effective Date	Unit	Authority	
					Part II D.O. No., Cas. List, &c.	Dated

NON-COMBATANT SERVICE.

Original

MEDICAL HISTORY SHEET

Surname STEPHENSON Christian Name Edwin Howard.

Examined on 17 day of May 1918 at London, Ont., Canada.

Approved by H. R. Tougel Capt. O.C. A.M.C. Training Depot, No. 1 C.E.F. Rank M.O.

Birthplace: City or Town Tillsonburg. County Oxford, Ont., Canada

Apparent age 32/1

Trade or occupation Clergyman

Height 5 feet 3 1/2 Inches

Weight 113 lbs.

Chest measurement: Minimum 32 inches; Maximum expansion 35 inches

Physical development good

Small-pox Marks Nil

Vaccination Marks: Arm Right Left; Number 0

When Vaccinated last never

(a) Marks indicating congential peculiarities or previous disease —

(b) Slight defects but not sufficient to cause rejection

R. Eye D. 40/20. L. Eye D. 40/20

Hearing R. Normal. L. Normal.

Date	Fit or Unfit	Examined for Re-Engagement
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations
23-7-18		G. L. McCuffin M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
23-7-18		G. L. McCuffin M.O.
30-7-18		M.O.
6-8-18		M.O.

Enlisted on 17th day of May 1918 at London Ont.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	A.M.C. T.D. No. 1, C.E.F.	2611974		17/5/18
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

London, Ont. MAY 17 1918 On Attestation considered A11

Station	Date	Disease	Result
	Maj. A. M. C. Pres.	Capt. A. M. C.	Capt. A. M. C.
London, Ont.	24-9-18	nil	A-2 H. Swarmer Capt. Pres. S.M.B.

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.

M. F. B. 313.

300M.—1-17.
H. Q. 1772-39-439.

Surname Stephenson Christian Name Edward Frederick

STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			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
		Day	Month	Year	Day	Month	Year				
Blackwater	Oct 26	16	5	19	24	5	19	Small pox	9 days	Decr. 6.15 PM.	J. Kilburn Major

#11 Stally Hospital

Paymaster

Auditor

M. or S. Single

Name and Address of Next of Kin ~~Caroline E.~~ William Howard Stephenson (Father)
Burlington, Ont.

Separation Allowance $ | Effective Date

By Whom Paid

Payable to | Relationship

Address

CASUALTIES, AFFECTING PAY AND ALLOWANCES

PARTICULARS	EFFECTIVE DATE	AUTHORITY

Regimental No. 2611974 | Rank Pte | Name Stephenson Edwin H.

If in P.F. What Unit | P.F. Allowances | Original Unit C.E.F. A.M.C.T.D #1

Place of Attestation London, Ont. | Transferred to | Date | Authority

Date of Attestation 19-5-18 | Transferred to | Date | Authority

Assigned Pay $ 20.00 | Date Effective 1-10-18 | Authority M.F.W. 2583

Payable to W. H. Stephenson | Relationship Father

Address Burlington, Ont.

Stop-Payment Form (Assigned Pay) Rendered (Date) | Effective

Discharged. Date and Place | Authority

L. L. Job 48205
M. & D. 20-9-18-12M

MONTH 1918	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT C	OTHER CREDITS $	OTHER CREDITS C	ASSIGNED PAY CREDITS $	ASSIGNED PAY CREDITS C	TOTAL CREDITS $	TOTAL CREDITS C	ACQUITTANCE ROLLS COL. No. 1 No.	DATE	COL. No. 2 No.	DATE	COL. No. 3 No.	DATE	COL. No. 4 No.	DATE	CASH PAYMENTS COL. No. 1 $	C	COL. No. 2 $	C	COL. No. 3 $	C	COL. No. 4 $	C	ASSIGNED PAY CANADA	ASSIGNED PAY OTHER COUNTRIES	OTHER CHARGES $	C	REGIMENTAL CHARGES $	C	TOTAL DEBITS $	C	BALANCE DEBIT $	C	BALANCE CREDIT $	C	DEFERRED PAY $	C	PAY AVAILABLE FOR ISSUE $	C	SEP. ALL'CE	REMARKS
Oct.	31	1.10	34	10	62	84			96	94	4	21 18	52	31 18					5	-	8	20					20	-					33	21			63	73			63	73			L.P.C. 30-9-18 A.M.C.
Nov.	30	1.10	33	00					33	00	83	14 18	122	30 18					16	44	9	64					20	-					46	05	12	05					50	68			Nov Slip L.P.C.
Dec	31	1.10	34	10					34	10	118	6 18							62	62							20	-					82	65	48	55					2	13			Dec Country 8/12/18
Jan.	31	1.10	34	10					34	10																	20	00					40	00			14	10			16	25			
Feb	28	1.10	30	80					30	80	171	15	185	28					103	15	69						20	00					46	80	15	20					1	03			
Mar.	31	1.10	34	10					34	10	209	31	199	15					74	9	69	3					20	00					34	42	32							71			
April	30	1.10	33	00					33	00	232	19	238	20					63	7	62	5					20	00			1	35*	33	97	97						26	52			* PAC 512 April 1917
May	31	1.10	34	10					34	10																	20	00					20	00			14	10			13	84			
	243		267	30	62	84			330	14									108	23	46	72					160	-			1	35	316	30							13	84			
			Balance Brought Forward						13	84	82	2							10	-													10		10						3	84			
May	31		15	10					15	10																											15	10			18	94			* Cash found in effects Canadian Realty 137 & 27. $10.00 5.10 15.10
	243								28	94									10	-													10								18	94			

Deceased. Vladivostok (Small Pox) 24th May 1919.

Carried Forward

Regimental No.....Rank.....Name.....

MONTH	PAY				OTHER CREDITS		ASSIGNED PAY CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS								CASH PAYMENTS								ASSIGNED PAY CANADA	ASSIGNED PAY OTHER COUNTRIES	OTHER CHARGES		REGIMENTAL CHARGES		TOTAL DEBITS		BALANCE				DEFERRED PAY		PAY AVAILABLE FOR ISSUE		SEP. ALL'CE	REMARKS
											COL. No. 1		COL. No. 2		COL. No. 3		COL. No. 4		COL. No. 1		COL. No. 2		COL. No 3		COL. No. 4										DEBIT		CREDIT							
	No. OF DAYS	RATE	AMOUNT								No.	DATE	No.	DATE	No.	DATE	No.	DATE	$	C	$	C	$	C	$	C			$	C	$	C	$	C	$	C	$	C	$	C	$	C		
			$	C	$	C	$	C	$	C																																		

Carried Forward

Date of Enlistment 26-5-18 Reported 3-7-18

MILITIA AND DEFENCE

S17803

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Siberian.

1 Oct 1918

Made bros 1st July

RATE OF SEPARATION ALLOWANCE			

RATE OF ASSIGNMENT			
$20.00			

PARTICULARS OF SEPARATION ALLOWANCE

No 2611974

Rank Pte Promoted Reverted Discharge

Soldier's Name Edwin Howard Stephenson

Battalion Siberian Draft.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1 WILLIAM HOWARD STEPHENSON,
BURLINGTON,
2 ONT. 20 20.00
% 2611974 PTE EDWIN HOWARD STEPHENSON
3 TWENTY DOLLARS
4

	Date	Cheque No.		Amount S/A	Amount A/P	Total		REMARKS
	Oct.	51996	Y		20	20		
	Nov	52540	Je		20	20	✓	
	Dec	68009	2		20	20	✓	
	Jan '19	73997	I		20	20	✓	
	Feb.	77727	O		20	20	✓	
	Mar	83568	B		20	20	✓	
	Apl	870	W		20	20	✓	
	May	6944	a		20	20		
					$160	160		

Died May 23rd-25th 1919
Small pox.

C.L. 512 Fl 3 dated 28.5.19.
MRO Ld 108349 Destroyed
Acct. closed 31-5-19.

AUTHORITY FOR NEW ACC'T. Fyle. 017363 E 12 W Fagni 31/10/18

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 1933.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch A

OVERSEAS CONTINGENTS

Date of Assignment

CANCELLED

RATE OF SEPARATION ALLOWANCE

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. 22320—M. & D. 7493.

AUTHORITY FOR NEW ACC'T.