

# ATTESTATION PAPER.

No. *NUV 4* *3*  
*541678*  
Folio.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your name? *Donovan Joseph Trapp*
2. In what Town, Township or Parish, and in what Country were you born? *New Westminster, B.C.*
3. What is the name of your next-of-kin? *J. J. Trapp (Father)*
4. What is the address of your next-of-kin? *407 Agnes St. New Westminster B.C.*
5. What is the date of your birth? *Nov. 23, 1896* *Canada*
6. What is your Trade or Calling? *S. student*
7. Are you married? *no*
8. Are you willing to be vaccinated or re-vaccinated? *D.J.T. 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*

*D. J. Trapp* (Signature of Man.)  
*[Signature]* (Signature of Witness.)

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

I, *D. J. Trapp*, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the Canadian Over-Seas Expeditionary Force, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Date *Oct 21* 191*5*. *D. J. Trapp* (Signature of Recruit)  
*[Signature]* (Signature of Witness)

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

I, *D. J. Trapp*, do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Date *Oct. 21* 191*5*. *D. J. Trapp* (Signature of Recruit)  
*[Signature]* (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 *Vancouver B.C.* this *23* day of *October* 191*5*.

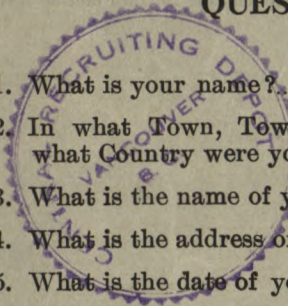
*[Signature]* (Signature of Justice)

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

*[Signature]* (Approving Officer)  
*[Signature]*

*3953*

*23/10/15*  
*#3502*  
*Original*



Description of Donovan Joseph Trapp on Enlistment.

Apparent Age 18 years 11 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 1/4 ins.

Chest measurement { Girth when fully expanded 38 ins.  
 Range of expansion 3 1/4 ins.

Complexion Medium

Eyes Brown

Hair Medium

Religious denominations. { Church of England  
 Presbyterian No  
 Wesleyan Methodist Yes  
 Baptist or Congregationalist  
 Other Protestants (Denomination to be stated.)  
 Roman Catholic  
 Jewish

*Scar on left forearm*

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 2nd October 1915.

*G. H. Manchester*

Place Vancouver, B.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.

Donovan Joseph Trapp 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.

*[Signature]*  
 (Signature of Officer)  
*Cep*

Date 3/11/15 191 .

REGIMENTAL DOCUMENTS

541673.

NAME Trapp, Donovan Joseph

REGT. NO. (473324)

UNIT

H. Q. FILE NO.

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505  
REFERENCE

NON-EFFECTIVE BY

DEATH

Category

DISCHARGE

Category

*Commission*

DESERTION

51 ATTESTATION PAPER (M.F.W. 23, 133, or 51)

1 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

TRAINING HISTORY SHEET (M.F.W. 113)

1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)

1 REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)

1 COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)

2 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

DENTAL HISTORY SHEET (M.F.B. 465)

MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

MEDICAL EXAMINATION (M.F.W. 123)

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)

LAST PAY CERTIFICATE (M.F.W. 44)

1 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)

13 misc  
A12

M

P

16307

H

H

S



SURNAME.

Grapp.

CHRISTIAN NAMES

Donovan Joseph

REGL. No. ~~3302 475524~~ RANK

Pte.

UNIT

~~4<sup>th</sup> University Co. McGill, 3rd Div Sig. Co.~~

FORMER CORPS

Nil.

S. D. S. Com. D. A. 7-11-17  
16-25-3 FOLL.  
9-6-18-78

NEXT OF KIN.

NAMES IN FULL

Grapp, J. J.

RELATIONSHIP TO SOLDIER

Father.

ADDRESS

407 Agnes St., New Westminster  
B. C.

CHANGE OF ADDRESS

COUNTRY OF BIRTH

Canada, New Westminster

DATE

Nov. 23<sup>rd</sup> 1896.

PLACE OF ATTESTATION

Vancouver, B. C.

DATE

Oct. 23<sup>rd</sup> 1915.6/s. 11/31/16.  $\frac{330}{3}$

MARRIED

SINGLE

Eyes.

WIDOWER

TRADE OR CALLING

Student.

RELIGION

Presbyterian.

DESCRIPTION.

APPARENT AGE

28

YEARS

11

MONTHS

HEIGHT

5

FEET

6 1/4

INCHES

CHEST MEASUREMENT

38

INCHES

EXPANSION

4

INCHES

COMPLEXION

Medium.

EYES

Brown.

HAIR

Medium.

DISTINGUISHING MARKS

Nil.

MEDICAL EXAMINATION.

PLACE

Vancouver, B. C.

DATE

Oct. 21<sup>st</sup>, 1915.

Box by Air Mail auth 745-T-28

Lieut.

Number 541673

Rank ~~Spr.~~

*Air Mail to ...*

Surname TRAPP.

Christian Name Donovan. Joseph.

Units C.E.

Theatre of War France.

*S.O.S. appointed Comm. Imp. Army. 7.11.17*

Date of Service AUTH: C.E.R.D. Pt II. D.O. N<sup>o</sup> 272 dt. 6.12.17

Remarks W.O. Roll # 2 Page 147

D

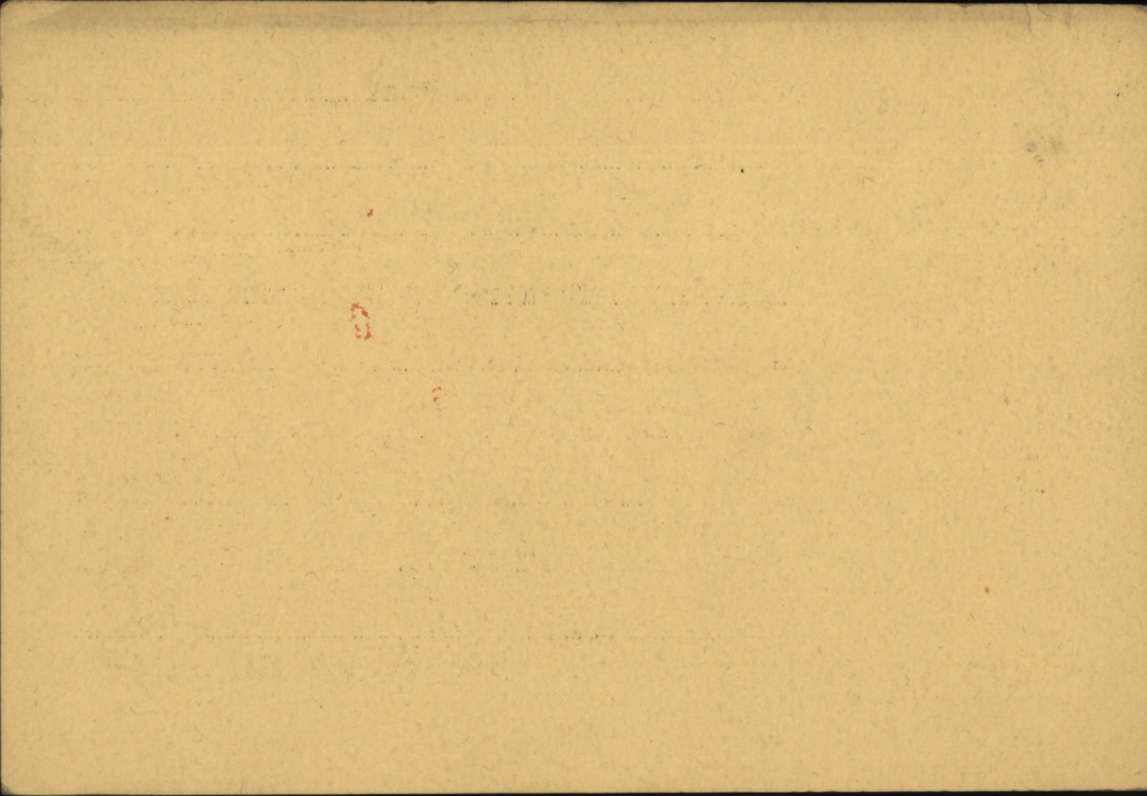
Latest Address W.O. n/w/a/ 1783 of 5/5/20.

N/K T.J. Trapp Esq 467 Agnes St., New Westminster, BC

Roll No.

B. Page 22 3-21

200m-2-21.M.





TRAPP, Donovan Joseph      Lieut.R.A.F.      745-T-28  
(Formerly 541763 Pte. Can.Sig.Troops)

---

MEMORIAL CROSS

Mother

Mrs. Nellie K. Trapp  
407 Agnes street,  
New Westminster, B.C.

DESP. DEC 9 1925

REGN. NO. 7841

No. 3302 RANK Pte

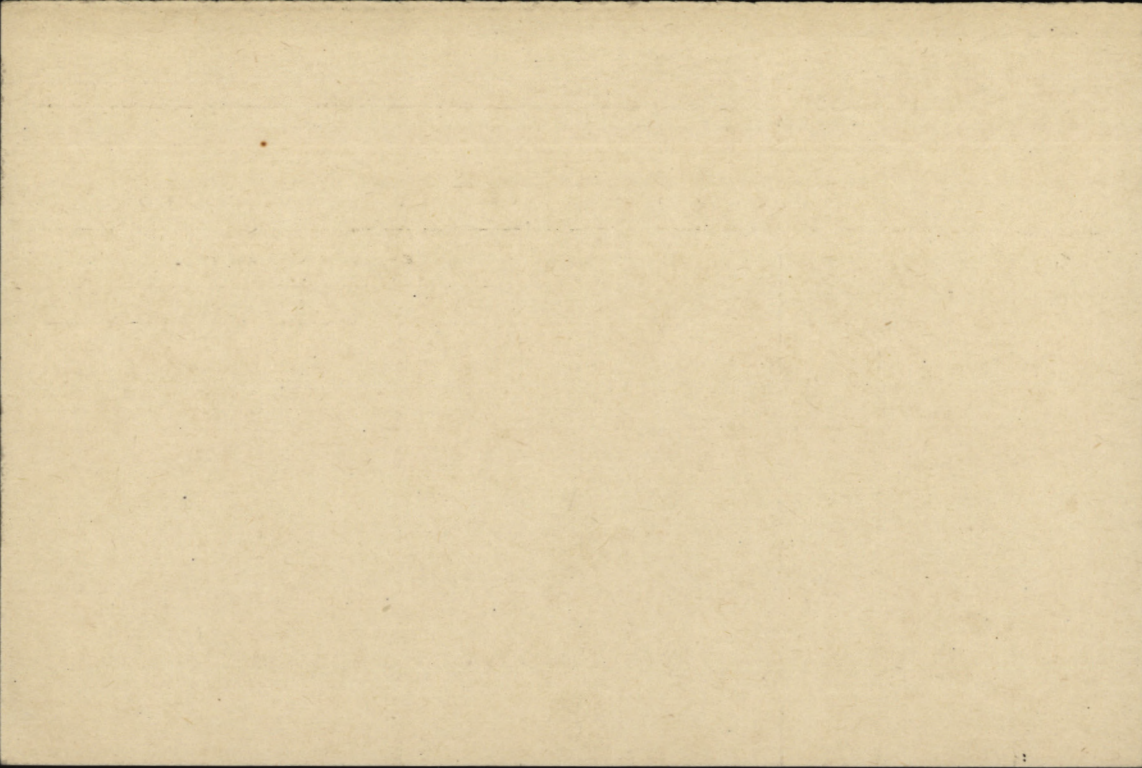
NAME Trapp D. J

T. O. S. 22-11-15  
(No 189 of 23-11-15)

UNIT Canadian Engineers Training Depot

M. D. Hdqts

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
1915 Aug 22	1915 Nov 30	<i>H</i>	<i>Shown on 3rd Div Sign-Cog list. pay list.</i>	
1916 Jan Feb	1916	<i>V</i>		



No. 475524. RANK *PL*

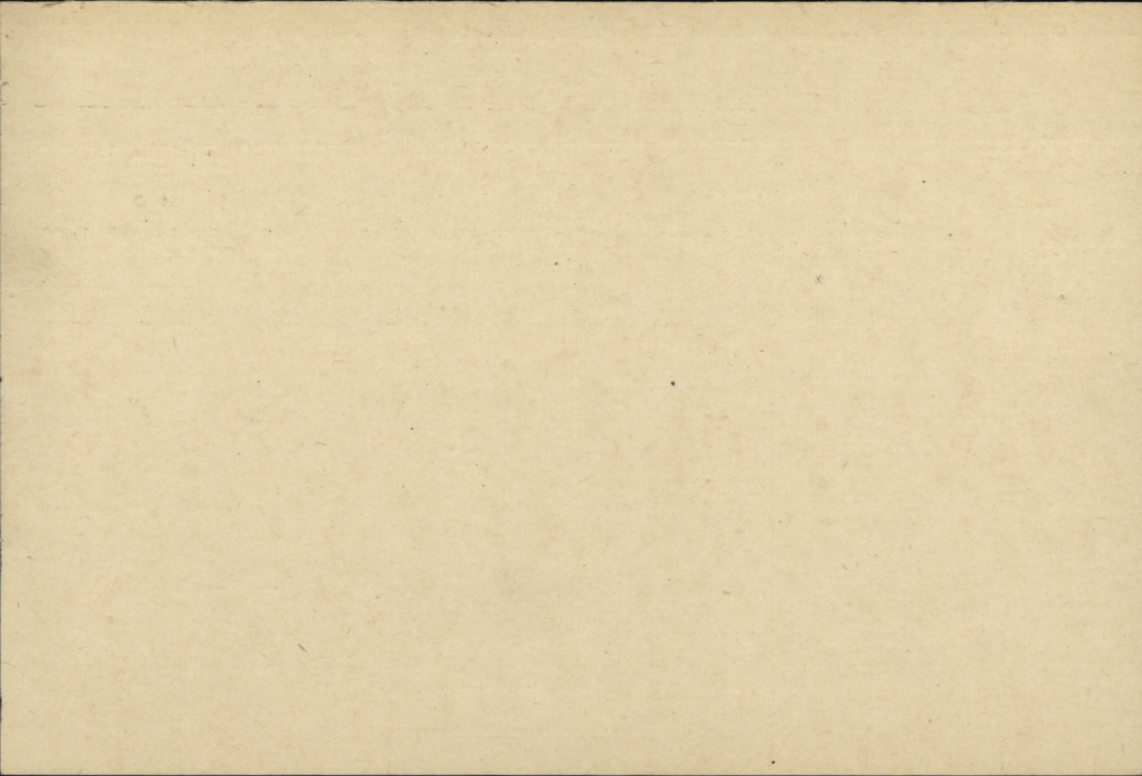
NAME *Trapp, Donovan, Joseph.*

T. O. S.

UNIT *4th University Co. C. E. F.*

M. D. *4*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915</i> <i>Oct. 23.</i>	<i>1915.</i> <i>Nov. 30.</i>	<i>v.</i>	<i>Reinf. draft. O. P. C. L. I</i>	<i>Sailing list.</i>



VES

Rank **TRAPP** Name **Donovan Joseph** Reg'l No. **541673**

Unit **3rd Div. Sig. Coy.** If in perm. Corps, }  
What Unit? } Married or Single **Single**

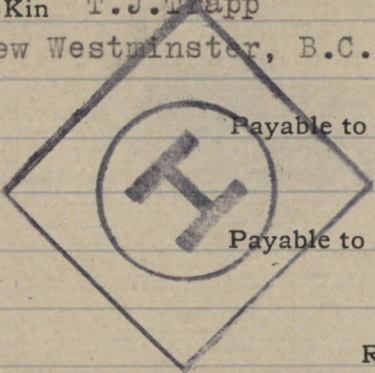
Place and Date of Enlistment **Vancouver, 21 Oct. 1915.** Place of Birth **New Westminster, B.C. Canada.**

Name and Address, Next-of-Kin **T.J. Trapp**  
**407 Agnes St, New Westminster, B.C. Canada** Relationship **Father**

Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

Discharge, Date and Place Reason Character



N/E. R.B. No. **2059**  
File R.L. **23-T-175**  
Category **Com.**

*Spr.*

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
Date.	From whom received.				
		<i>Arrived in England</i>	<b>25 MAR 1916</b>		<i>S. S. Metagama</i>
<b>20-4-16</b>	<i>C.E.J.D.</i>	<i>Took out strength</i>	<i>Schiffe</i>	<b>19-4-16</b>	<i>P II O # 95</i>
<b>9.10.16</b>	<i>- DO -</i>	<i>S.O.S. to cable section b.b</i>	<i>- do -</i>	<b>8-10-16</b>	<i>P II O. 240.</i>
<b>11-12-16</b>	<i>C.E.H.P. Sig Co</i>	<i>Arrived from England "E" Cable Section</i>	<i>In the Field</i>	<b>10. 10. 16</b>	<i>.. 60</i>
<b>12-7-17</b>	<i>✓</i>	<i>Trf. to England to C.E. D. Croberts</i>	<i>pending Commission in Flying Corps</i>	<b>8-7-17</b>	<i>.. " 103. CERD O # 272 d 6/12/17</i>
<b>9-8-17</b>	<i>912 R.F.C. Cadet Wing</i>	<i>Att for pay Rationssaccomodation</i>	<i>Windsor Park.</i>	<b>8-8-17</b>	<i>" - 45</i>
<b>24-11-17</b>	<i>C.E.R.D</i>	<i>Discharged in B'ales</i>		<b>7-11-17</b>	<i>Norm Roll 146</i>
		<i>under 12 R 10 Par 392 Sec</i>			<i>- - 146</i>
<b>6. 12. 17</b>	<i>C.E.R.D</i>	<i>SO.S. on app. to a comm. Imp: Army</i>	<i>Spr. Seaford</i>	<b>7. 11. 17</b>	<i>O # 272</i>
		<i>KR 10 Para 392 Sec xxv (2-4-14-11-17)</i>			

A.F.B. 193 CHECKED  
16 OCT 1916





**Casualty Form—Active Service.**

Regiment or Corps Canadian Engineers Training Depot.

Rank Spr. Surname Fropp Christian Name ~~W. X.~~ DONOVAN, JOSEPH,

Religion Pres. Age on Enlistment 19 years 11 months.

Enlisted (a) 21. 9. 15. Terms of Service (a) D. of W. Service reckons from (a) 21. 9. 15.

Date of promotion 21. to present rank \_\_\_\_\_ Date of appointment to lance rank 21

Extended { \_\_\_\_\_ } Re-engaged { \_\_\_\_\_ } Qualification (b) Student. or Corps Trade and Rate \_\_\_\_\_

Signature of Officer i/c Records.

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 ...	<u>England</u>	<u>25/3/16</u>	
<u>20/4/16</u>	<u>C.E.T.D.</u>	<u>Taken on strength of C.E.T.D. from Hitchen.</u>	<u>Shorncliffe</u>	<u>19. 4. 16.</u>	<u>Pt. II Grd. # 95.</u>
<u>9-10-16</u>	<u>do</u>	<u>Struck off Strength of C.E.T.D. proceeded to C.E. Bull. Section C.E. France</u>	<u>Shorncliffe.</u>	<u>8-10-16</u>	<u>Part II Order No. 241.</u>
					<u>Washby Edwards</u> <u>Adjutant, C.E.T.D.</u> <u>JW</u> <u>LCC</u>
		<u>Arrived in France</u>	<u>Havre</u>	<u>10-10-16.</u>	<u>L.R. 6670</u>

CERTIFIED CORRECT.  
 18 OCT. 1916  
 CAN. RECORDS, LONDON.

(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.



54167<sup>s</sup>

4th OVERSEAS UNIVERSITIES CO., C.F.E.  
**ORIGINAL**  
**MEDICAL HISTORY SHEET.**

475221

Surname Trapp Trapp Christian Name Douvan Joseph

Examined { on 4 day of Nov 1915  
at Montreal

Approved by Jachot Captain

Birthplace { City or Town New Westminster  
County B.C.

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

Apparent age 18 yrs 11 mos

EXAMINED FOR RE-ENGAGEMENT, 7 DEC 1917

Trade or occupation Student

M.O.

Height 5 Feet 6 1/2 Inches

M.O.

Weight 140 Lbs.

M.O.

Chest measurement { Minimum 33 inches

M.O.

{ Maximum expansion 38 inches

M.O.

Physical development good

M.O.

Small-Pox Marks no

M.O.

Vaccination Marks { Arm. Right. Left  
Number 2

VACCINATIONS

When Vaccinated last as a boy

Date 17/11/15 Result E.P.G. M.O.

(a) Marks indicating congenital peculiarities or previous

M.O.

disease

M.O.

(b) Slight defects but not sufficient to cause rejection

ANTI-TYPHOID INOCULATIONS, ETC.

Nil

Date 5/11/15 Result J.A. Fairie M.O.

3-3-16 Result J.W.S. M.O.

M.O.

Enlisted on 23/10/15 day of 1915 at Vancouver

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment		<del>475221</del>		
Transferred to.....		<u>541673</u>		
	<u>C.E. Cable - 536</u>			

**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.

29

**CANADIAN**



No. 2. Canadian Discharge Depot.  
133 Oxford St. London. W. 1.

I, No. *541643* ..... Rank. *Sp* ..... Name *Trapp* *21/11/17* ..... 1917.

do hereby declare that I desire my discharge in England and waive  
all claim to transportation to Canada.

I acknowledge receipt of  
Certificate of Discharge.  
Certificate of Character.

Witness. *D. Anderson* *lpl* .....

Signature. *D. J. Trapp* .....

No. 1. with distance 1000.  
125 Oxford St. London, W.1.

.....

I, .....

do hereby declare that I have no objection in England and Wales

all claim to the property of .....

Witness my hand and seal this .....

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

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

Rank S.P.R. Name D.J. Surname TRAPP  
 Unit or Corps CAN. ENG. (If a soldier) Regtl. No. 541693  
 Born at New Westminster B.C. on, date Nov. 23 1896  
 Signature (for identification) A. J. Trapp

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

1. **PHYSIQUE**—Any deformity, maiming or lameness? If so, describe. no

Weight 150 lbs.

Height 5 ft. 7 in.

2. **NUTRITION AND DIATHESIS?** Good

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

3. **NERVOUS SYSTEM?** no

4. **RESPIRATORY SYSTEM?** no

5. **HEART?**

Abnormal Sounds? no

Abnormal Size? no

Pulse Rate? 68 Intermittence or irregularity? no

6. **ARTERIES.**—Any hardening? no

7. **DIGESTIVE SYSTEM?** no

8. **GENITO-URINARY SYSTEM?** no

Urinalysis—s.g. ? 1016 Reaction? awd Albumen? none Sugar? none

9. **SKIN, MIDDLE EAR, EYE** no  
or any other part?

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so describe. no

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

Examined at 13 Bouverie St. London } Signed Wm. J. ... M.O.  
 Date 21. 11. 14 } Signed G. H. ... M.O.

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

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

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

Form fields for Name (D. J. ...), Rank (Sgt.), Unit or Corps (A.C.), and other identification details.

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

1. PHYSIQUE - General appearance, maintenance of functions, etc. Weight, Height, etc.

2. NUTRITION AND DIGESTION

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

3. NERVOUS SYSTEM

4. RESPIRATORY SYSTEM

5. HEART? Abnormal sounds? Abnormal size? Pulse rate? Impairment of function?

6. ARTERIES - Any hardening?

7. DIGESTIVE SYSTEM

8. GENITO-URINARY SYSTEM Urinary excretion? Abnormal? Sugar?

9. SKIN, MIDDLE EAR, EYE or any of the parts

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

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

Examined at ... Signed ... M.O. Date ... Signed ... M.O.

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



Rank \_\_\_\_\_ Name **TRAPP, Donovan, Joseph.** Reg'l No. **541673.** P-56  
 Unit **C.E.T.D.** If in perm. Corps, **!** Married or Single **Single.**  
 What Unit? \_\_\_\_\_  
 Place and Date of Enlistment **Vancouver, 21st Oct. 1915.** Place of Birth **New Westminster**  
**B.C. Canada.**  
 Name and Address, Next-of-Kin **T.J. Trapp.**  
**407. Agnes St, New Westminster, B.C. Can.** Relationship **Father.**

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

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

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

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						
<i>March</i>	<i>31</i>	<i>31</i>	<i>1.00</i>	<i>31.60</i>	<i>31</i>	<i>10</i>	<i>3.10</i>	<i>10.00</i>	<i>4.10</i>			<i>973.16</i>	<i>00</i>	<i>✓</i>	<i>2473.18</i>	<i>57</i>	<i>from Canada</i>





MARRIED OR SINGLE *Single*  
 PLACE OF BIRTH *New Westminster, B.C. Canada*  
 NAME AND ADDRESS OF NEXT OF KIN *Mr. J. J. Trapp*  
*407 Agnes St., New Westminster, B.C. Canada*  
 RELATIONSHIP OF NEXT OF KIN *Father*  
 NAME AND ADDRESS OF NEXT OF KIN  
 RELATIONSHIP OF NEXT OF KIN  
 SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)  
 PAYABLE TO  
 RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.		
PARTICULARS	EFFECTIVE DATE	AUTHORITY
<i>Com<sup>d</sup> Imp Army 7-11-17</i> <i>20000000 30/11/17</i>		

ADMISSIONS TO HOSPITAL, &c.			
DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L No. *541673* RANK *Spr* NAME *Trapp Donovan Joseph*  
 IF IN PERM. CORPS / WHAT UNIT UNIT *C.E. JA* TRANSFERRED TO *Ch. Cable Section* DATE *16-12-16* AUTHORITY *D.O. 240*  
 TRANSFERRED TO *C.E. JA* DATE *1-1-17* AUTHORITY *Request*  
 PERMANENT FORCE ALLOWANCES TRANSFERRED TO *N.E. "K"* DATE *1-2-18* AUTHORITY  
 PLACE OF ATTESTATION  
 DATE OF ATTESTATION  
 ASSIGNED PAY MONTHLY \$ *16* DATE EFFECTIVE *1/3/16*  
 PAYABLE TO *Bank of Montreal, London* RELATIONSHIP  
 ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE  
 PAYABLE TO RELATIONSHIP  
 STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *29/5/16* EFFECTIVE *1/3/16* REASON *D.O. 77 4/16*  
 DISCHARGE DATE AND PLACE *England 7-11-17* REASON AND AUTHORITY *Com Imp Army L.G. 14-11-17*  
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)  
 ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

**SUPPLIES INDENT FOR RATIONS.**

STATION *FROM ACTIVE SERVICE BATTAL* DATE

AND MEN.		HEAVY DRAFT HORSES.				LIGHT DRAFT HORSES.			
STRENGTH		TOTAL STRENGTH		TOTAL STRENGTH		TOTAL STRENGTH		TOTAL STRENGTH	
...	...	...	...	...	...	...	...	...	...

NUMBER OF DAYS RATONS INDENTED FOR { MEN ... HORSES ... }

**OFFICERS AND MEN.**

BREAD	MEAT	BACON	SUGAR	TEA	SALT	FOR BREAD		
						FLOUR	YEAST	SALT

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					
Mar 1-30			31 00		30		3 10						10 00	44 10							9 73	16 00	25 73	19 37								<i>C.I.</i>	
April 1-31	30	1 00	30 00	30	1 00	30 00	3 00						16 -	35 00		834 30					9 43		9 43	57 64								<i>A.S.P. shipped 1-3-16</i>	
MAY 1-31	31		31 -	31		31 -	3 10						34 10	419 15	16 1033	7 16	8				9 74	9 74	14 87	24 35	69 39								
JUNE 1-30	30		30 -	30		30 -	3 -						33 -											100 39									
JULY 1-31	31		31 -	31		31 -	3 10						34 10	1195 77	9 16	1288 30	16				4 84	29 43		14 60	119 89								
AUG 1-31	31		31 -	31		31 -	3 10						34 10	148 84	9 16	1386 15	7 16				4 84	19 43		24 33	129 66								
SEPT 1-30	30		30 -	30		30 -	3 -						33 -	1680	31 8	1890 15	9				14 60	14 87		20 19	67 142 99								<i>B.R.V. 11/5 28/8/16</i>
OCT 1-31	31		31 -	31		31 -	3 10						34 10	1935	30 9						9 73		9 73	167 36									
NOV 1-30	30		30	30		30	3 00						33 00			4055 64	8						5 23	195 13									<i>Trans to Ch. Cable Section</i>
DEC 1-15	15		15	15		15	1 50						16 50			163 19	16							211 63									<i>D.O. 240</i>
Dec 16-31	16		16 -	16		16 -	1 60						17 60			228	7 12	12673	28 16			3 48	53 49	7 69	222 26								
Jan 1-31	31	1 10	34 10				3 60						34 10			500	12 49	25 11				12 20		12 20	244 16								
			370 70										26	396 70							53 54	47 28	25 79	9 43	16	20 152	54	244 16					

541643. Trapp D.J.

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS				
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					NO.	DATE	NO.	DATE	NO.	DATE	NO.	DATE				1	2				3	4	CREDIT	DEBIT
			\$	c.			\$	c.			\$	c.																							
Feb 28	28			370																															
Mar 31	31			34																															
Apr 30	30			33																															
May 31	31			34																															
Jun 30	30			33																															
July 31	31			34																															
Aug 31	31			34																															
Sept 30	30			33																															
				636																															

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER. PAY	SER. ALLOC. ENG.
Apr	30/9/17								281 37		
Oct	Apr	34 10		3387. 24/10/17 B.P. at Oxford	4 87				310 60		
Nov	Apr	34 10			4 87						
Nov	7 days pay										
Nov	1-7										
Nov	7 days pay										
Nov	7 days pay										
	Int on Def Pay	13 11							331 41		
		20 81									
				12631 20-11-17 C.P.	97 33						
				7817 10-11-17 C.P.	48 67						
				7706 9-11-17 C.P.	14 60						
				1051 27-12-17 no Canadian Dio Depot.	165 98				4 83		
					326 58						
October				Spl 211 5455 Cash Payment 20 June 12/1/17	3 49				1 34		
					3 49						
Nov				Write to H110 Clothing Department 6/7/16	1 34				nil		
					1 34						

N.B.  
Paid £20.00  
without pay book  
20/11/17

C.O. No. 110  
B. Balance 16598 7-1-17  
A.S.P Book Verified 11-12-17  
L.P.C. Rendered 11-12-17  
Discharge in England  
Com Imp Army  
auth L.G. 14-11-17  
Checked G.W. Williams

Form P.—59.

# STATEMENT OF PAY ACCOUNT.

No. 541673 Rank Spr. Name Trapp, Donovan Joseph.  
 Unit C.E.T.D. Original Unit on Enlistment in O.M.F. of C. C.E.T.D.  
 Date non-effective { Discharge England Authority L.G. 14-11-17.  
 { Decease 8-11-17. Commission Imperial Army.  
 { Desertion

CREDITS.	\$	c.	DEBITS.	\$	c.
From <u>March 15th 1917</u> to <u>Nov. 7th, 1917.</u>			Total Cash Payments <u>par</u>	<u>534</u>	<u>29</u>
No. of days <u>617</u>			Total Assigned Pay @ \$.....		
Pay @ <u>1.00</u> per diem	<u>617</u>	<u>00</u>	per month .....		
F.A. @ <u>.10</u> per diem	<u>61</u>	<u>70</u>	Total Assigned Pay @ \$.....		
From.....1917, to.....			per month .....		
No. of days.....			Other Charges .....		
Pay @.....per diem			(Particulars)		
F.A. @.....per diem			<u>I.O.R. P.11 159 6-7-16</u>	<u>1</u>	<u>34</u>
Other Credits .....			<u>C.D. 2 41/5 28-8-16.</u>		<u>20</u>
<u>Balance from Canada</u>	<u>10</u>	<u>00</u>			
<u>Int. on def. Pay</u>	<u>13</u>	<u>11</u>			
<u>to Oct. 31st, 1917.</u>					
Adjustment of Exchange (see below) .....					
			Credit Balance .....	<u>165</u>	<u>98</u>
	<u>701</u>	<u>81</u>	TOTAL .....	<u>701</u>	<u>81</u>



Sterling equivalent of above Balance @ \$4.86 $\frac{2}{3}$  = £ 34. 2. 1.

Assignment of Pay has been charged on Pay List to.....

Stop payment form forwarded to Assigned Pay Branch on.....

## PARTICULARS OF EXCHANGE ADJUSTMENT.

Total Cash Payments for period during which payments were made @ \$5.00 to the £ ..... I certify that I am satisfied. \$.....  
 Exchange @ \$5.00 ... with my Pay Account as ..... £.....  
 Exchange @ \$4.86 $\frac{2}{3}$  ... detailed hereon, and have no ..... £.....  
 Difference in sterling ... reservations to make on same. ..... £.....  
 Or Canadian Currency @ \$4.86 $\frac{2}{3}$  ... (-Sgd.) D. J. TRAPP. .... \$.....

COMPILED BY R.M.Allison (Sgd.) Certified correct,  
 CHECKED BY G.M.Williams " (Sgd.) S.Reynolds. Capt.

For Chief Paymaster.

State if balance due is paid or transferred for settlement:—

# STATEMENT OF PAY ACCOUNT.

Name: \_\_\_\_\_ Rank: \_\_\_\_\_  
 Unit: \_\_\_\_\_ Original Unit on Enlistment in O.M.F. of C. \_\_\_\_\_  
 Discharge Date non-effective: \_\_\_\_\_  
 Decrease: \_\_\_\_\_  
 Termination: \_\_\_\_\_

DEBITS		CREDITS	
§	c.	§	c.
Total Cash Payments			
Total Assigned Pay @ \$			
per month			
Total Assigned Pay @ \$			
per month			
Other Charges			
Credit Balance			
<b>TOTAL</b>			

## PARTICULARS OF EXCHANGE ADJUSTMENT.

Total Cash Payments for period during which payments were made @ \$500 to \_\_\_\_\_  
 Exchange @ \$1.25 \_\_\_\_\_  
 Exchange @ \$1.25 \_\_\_\_\_  
 Exchange @ \$1.25 \_\_\_\_\_  
 O. Cashier Currency @ \$1.25 \_\_\_\_\_

Certified correct.  
 For Chief Paymaster \_\_\_\_\_  
 State W balance due is paid or transferred for settlement.

This space to be left blank for the Chelsea Number.

[Blank box for Chelsea Number]



R2 au

Army Form B. 268.

23-2175

# Proceedings on Discharge.

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

No. 541643 Army Rank Dr.

Name Graff Danova Joseph  
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps 4th In. Co. P. P. S. L. I. B. C.

Battalion, Battery, Company, Depot, &c. C. E. R. S.  
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge 4th November 1914

Place of discharge No. 2. C. D. O. London

### 1. Description at the time of discharge.

Age <u>29</u> years <u>7</u> months	Descriptive marks. <u>Nil</u>
Height <u>5</u> feet <u>7</u> inches	
Chest measurement { girth when fully expanded <u>38</u> ins. range of expansion <u>3</u> ins.	
Complexion <u>Fair</u>	
Eyes <u>Grey</u>	
Hair <u>Light</u>	
Trade <u>Clerk</u>	
Intended place of residence (To be given as fully as practicable) <u>Bank of Montreal 47 Threadneedle St. B. C.</u>	

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

### 2. The above-named man is discharged in consequence of commission in the

Imperial Army - K. A. 50392-XXV

And London Gazette 14/11/14 P. 11439.

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

3. Military character:— **VERY GOOD**

4. Character awarded in accordance with King's Regulations:—

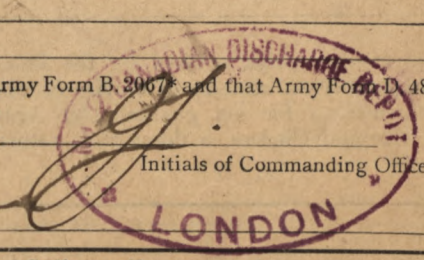
**MILITARY CHARACTER. VERY GOOD**

To be filled in on the soldier quitting the Colours.

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067\* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 2088 has been issued to\*



\* Strike out if not applicable.



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

*not applicable*

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

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

6. Campaigns, Medals and Decorations

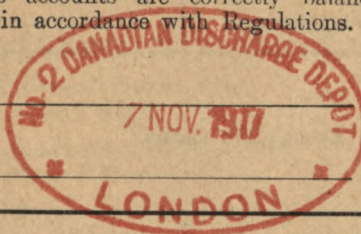
*France 9 Months*

Certificate of education *not available*

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

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

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



Commanding \_\_\_\_\_ Battr. \_\_\_\_\_ Regiment. \_\_\_\_\_

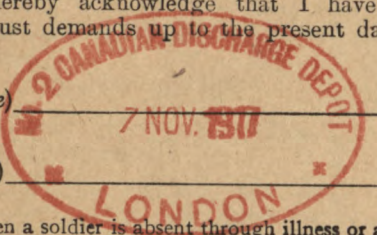


8. Certificate to be signed by the soldier on discharge.

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

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

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



*D. J. Trapp* (Signature of Soldier.)

*S. J. Brown* (Signature of Witness.)

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

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

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

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

10. Statement of service.

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

Further service " " *4/11/14* (the date of confirmation of discharge) ... .. *2* " *18* "

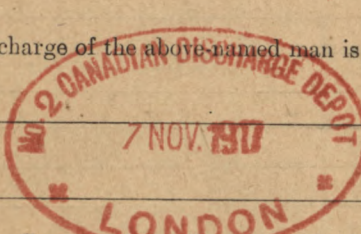
Total ... *2* " *18* "

11. Confirmation of discharge.

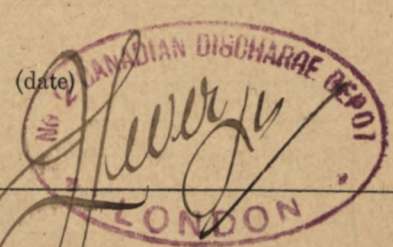
The discharge of the above named man is hereby confirmed for *4/11/14* (date)

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

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



Signature \_\_\_\_\_



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

RESERVATIONS REFERRED TO AT PARA. 8.

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

---

*Subject to Balance of Pay.*

*D. J. Trapp*

LIST OF DISCHARGE  
DOCUMENTS.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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