ATTESTATION PAPER

No. A6018
Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

1. What is your name? — John Charles Waller
2. In what Town, Township, or Parish, and in what Country were you born? — Kanizawa Japan
3. What is the name of your next-of-kin? — Rev J. G. Waller Sendai
4. What is the address of your next-of-kin? — Nagno Shimana Japan
5. What is the date of your birth? — August 20 1895
6. What is your trade or calling? — Student
7. Are you married? — Single
8. Are you willing to be vaccinated or re-vaccinated? — Yes
9. Do you now belong to the Active Militia? — Yes
10. Have you ever served in any Military Force? If so, state particulars of former Service. — Yes 6 months 13th Regt
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

J. C. Waller (Signature of Man.)
G. Couldrey (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, John C. Waller, 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.

J. C. Waller (Signature of Recruit.)

Date April 19 1915 G. Couldrey (Signature of Witness.)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, John C. Waller, 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.

J. C. Waller (Signature of Recruit.)

Date April 19 1915 G. Couldrey (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 Hamilton this 19 day of April 1915.

(Signature of Justice.)

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

W. Hressey Major (Approving Officer.)

M. F. W. 23.
200 M.—3-15.
H.Q. 1772-39-841.

DESCRIPTION OF John Charles Waller ON ENLISTMENT.

Apparent Age 19 years 7 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 7 ins.

Chest measurement:
- Girth when fully expanded 35½ ins.
- Range of expansion 3½ ins.

Complexion Light
Eyes Blue
Hair Brownish

Religious Denominations:
- Church of England
- ~~Presbyterian~~
- Methodist
- Baptist or Congregationalist
- ~~Other Protestants~~ (Denomination to be stated.)
- ~~Roman Catholic~~
- Jewish

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.)

Scars on inner side of both thighs.

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 Apr 13 1915

Place Hamilton

R. H. Palmer Lt-Col
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

John C. Waller 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.

O. C. Coates Lt-Col
(Signature of Officer.)

Date Apr 23 1915

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

Attestation Papers..... 1

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet..... 1

Compulsory Stoppages.....

Casualty Forms..... 1

Proceedings on discharge.....

Corps History Sheet.....

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

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet..... 2

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet..... 1

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

G & W. 3861-1

Hereford

1R149

M. F. W. 62.
50m.—9-16.
H. Q. 1772—39—935.

Officers

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name WALLER, JOHN, CHARLES.

Regt. No. 406918 Rank Lieut

Corps 36th Bn.

K. in A. 3.5.17

03810

2/31
1/31

(649-W-8763)

CARD NO. D

FOLL.

SURNAME. Waller

CHRISTIAN NAMES John Charles

REGL. No. ~~406018~~ RANK ~~Corpl.~~ Temp. Lieut.

UNIT 36th Bn.

FORMER CORPS 13th Regt. (6 mos.)

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Waller, ~~Rev.~~ J. G. Mrs

RELATIONSHIP TO SOLDIER not stated (Mother)

ADDRESS Nagano, Shinano, Japan.

also Notify Mrs C. D Hewills (R.N.S) Cayuga. Ont

auth G.H.W. Jel. 12-5-17

COUNTRY OF BIRTH Japan, Karuizawa DATE Aug. 20th 1895.

PLACE OF ATTESTATION Hamilton, Ont. DATE Apr. 19th 1915

Prom. to T/Lieut 20-1-17 auth Hackie R.O. 27/31

L. L. 94504. M. & D. 6512. 8-2-17 O/S. 19-6-15. 125/28.

M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

From Montreal per S.S. "Corsican" 9/6/15

MARRIED SINGLE yes WIDOWER

TRADE OR CALLING Student RELIGION Church of England

DESCRIPTION.

APPARENT AGE 19 YEARS 7 MONTHS

HEIGHT 5' FEET 7 INCHES

CHEST MEASUREMENT 35½ INCHES EXPANSION 3½ INCHES

COMPLEXION Light EYES Blue HAIR Brownish

DISTINGUISHING MARKS Scars on inner side of both thighs

MEDICAL EXAMINATION. PLACE Hamilton, Ont. DATE Apr. 13th 1915

Present address:- not stated

No. a6018 Rank Corp'l Name Waller John C.

T. O. S. Unit 36th Battalion.

M. D. 2

Paid From	Paid To	Sig. or Rec't	Promotions, Transfers, Discharges, etc.	
			Particulars	Authority
1915 apr. 1	1915 apr. 30	✓		
may		✓		
June		✓		
July		m		

UNIT SAILED
JUN 19 1915

No. | Rank Pte. | Name Waller J. C.

T. O. S. | Unit 13th Royal Regiment (3rd O/S. Contingent)

M. D. 2.

Paid From	Paid To	Sig. or Rec't	Promotions, Transfers, Discharges, etc.	
			Particulars	Authority
1915 Ja. 11	1915 Ja. 31	✓	36th Bn Quota	Feb Paylist
" Feb	"	✓		
Mar.		✓		

FORM R. 149.
7106—250m—7/2/17.

AFB 104-93.

Name WALLER Rank Lieut. Reg. No. 9 W 768

Unit John Charles
4th.Bn.

Next of Kin Rev.J.G.Waller(father)Nagano.Shinano.Japan

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
3.5.17.	Rep.from GHQ	KILLED IN ACTION	668	M39 34 C5832		8-5

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

Number..... Rank LIEUT.....

Surname..WALLER.....

Christian Name..JOHN...CHARLES.....

Units.....Theatre of War FRANCE

Date of Service 28:6:15...27:10:15...3:5:17.

Remarks.....Italian.....

1st C.O.R.

Latest Address. Rev. John Gage Waller

...Nagano, Shinano...

Japan

Roll No. "B" Page 65-98.

GJS-8254 dfs
OCT 4 1971

Name Waller, J.C. *Rank* Sgt. *Reg. No.* 406018

Unit 4th Batt.

Next of Kin Rev. J.G.Waller, Nagano, Shinano, Japan.

Date	Movement	Place	Casualty	List No.	Notified N/KO.	W.O. List
27-12-15	2 C.F.A.		Influenza	260		
31-12-15	-do-	Disc. to Duty	-do-	260		

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

WALLER, John Chas. Lieut. 4th Bn.

(Sig. for 14-15 Star # 40605. Cpl. 4th Bn.

MEDALS & DECORATIONS

Rev. John Gage Waller (Father)
Nagano, Shinano, Japan.

Scroll Desp. FEB 2 4 1921 Reqn No 2: 22941

PLAQUE & SCROLL

Father, as above.

Plague Desp. DEC 28 1921 Reqn No PC 4438

Serial No. 784262

MEMORIAL CROSS

Mrs. Lydia S. Waller (Mother)
Nagano, Shinano, Japan.

H.C. Desp. SEP 27 1920 (M) C 24598

662

M

H. Q. FILE No. 649-

NAME Waller, John Charles REGT'L No. 406018

RANK AND CORPS ~~Sgt~~ 2nd Lieut 4th Bat. NATURE OF CASUALTY

NO. 263

FOLL.

CABLE

NO.	DATE	
M 3934	8-5-17	Killed in action May 3rd 1917
A.F.B. 2090a	14-5-17	" " " " " "
	Rouen	noted 6-8-17

L. ... ob 87318—M. & D. 6106.

M. F. W. 42—25m.-10-15.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
260	No 2. C. F. A.	27-12-15	Influenza
260	Disch to Duty	31-12-15	Influenza
668	Rep. from Gen Headquarters	3-5-17	Killed in Action

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
Walker	H.C.	4060 15

Rank	Unit	Co.	Troop	Batty.
Sgt	4 Bn			

Hospital #2 C.F. Amb

Date of Admission 27.12.15

Transferred Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis Influenza

(1)

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnoses: If more than one state present

DISPOSITION Date

#360 Duty 31.12.15

REMARKS

Ch 14.1.16

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

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

WALLER J. C.

Lieut. 4th'Batt.

Report ed from Gen.Hqtrs.KILLED IN ACTION:-
3-5-17 R

C.L.8-5-17 668

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

D. M. S. 1347.

Surname | Christian Name | Reg. No.

Rank | Unit

MEDICAL BOARD held at | Date | Serial No.

(1)

Other Medical Boards at | Date | Serial No.

(2)

(3)

(4)

(5)

Condition found by Board

Disposition Recommended

(1)

(2)

(3)

(4)

(5)

PENSIONS & CLAIMS BOARD held at | Date.....

Disposition

Remarks

Indicate by a P.T.O. if continued on other side.

(9178)—Wt. W12165—2146.—1,250,000.—2-15.—C. & G. Forms B. 103/1.

Army Form B. 103.

M.

M.Y. W.G.T. C.

409

Casualty Form—Active Service.

CERTIFIED CORRECT
Canadian Record Office
Westminster House,
7, Millbank, S.W.

Regiment or Corps 36th Battalion CEF

Regimental No. 40 1760 & Rank ~~Capt~~ Lieut Sgt. Name ~~Walker~~ John Charles.

Enlisted (a) ~~Apr 23 1915~~ Terms of Service (a) Duration of war Service reckons from (a) ~~Apr 23 1915~~

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 Date	Report From whom received	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.
		Transferred to 4th Bn France			W.O.
27/10/15.	O.C.C.B.D.	Reinforcement.	Can.Base.Dep.	27/10/15.	N.R.
6/11/15.	do	do	4th Battalion.	6/11/15.	N.R.
14/11/15.	O.C.4thBn.	do	do	8/11/15.	B.213.
2-1-16.	O.C.2.C.H.A	Influenza	Adm. No 2 C.H.A.	27-12-15	A36. DCR 244
2-1-16	do	do	Disd To Duty	31-12-15	A36. 244
2-1-16	O.C. 4th Bn	Rejoined Unit	4th Battn	31-12-15	B213. 246
22-10-16	do	Promoted C.Q.M.S	do	28-9-16	B213 Pt II 6 No 66 d/- 18-11-16.
3-12-16	do	Granted 10 days leave to	England	29-11-16	B.213 P 2 O. 81. 28-12-16
17-12-16	do	Returned from leave	Field	11-12-16	B213
20-1-17	Can Sec.	Granted Commission as Temp Lieut	do	19-1-17	A.G.S.H.Q. A/21350 & K.I. 181-671 Pt II 6 No 9 d/- 24-1-17
27-1-17	Appt. Comm. etc	To be Temp Lieut.	do	20-1-17	List 120. Pt 2 O. No.19 d/23-2-17
7-5-17	4th Bn	Killed in Action	Field	3-5-17	2-2090 & K.I. 16-5676 Pt 2 O. No. 54 d/- 14-5-17

(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) 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				
				Chas. D. Maxwell, Lieut for Major A. A. G. Canadian Section	

C

31164

R—122.

Rank | Name WALLER. John C. | Reg'l No. 406018.

Unit 36th Bn. | If in perm. Corps, What Unit? | Married or Single Single.

Place and Date of Enlistment Hamilton. 19th Apl. 1915. | Place of Birth Japan.

Name and Address, Next-of-Kin Rev J G Waller. Nagano Shinano Japan.

Relationship Father

Assigned Pay Monthly $ | Payable to

Relationship

Separation Allowance $ | Payable to

Relationship

Discharge, Date and Place | Reason | Character

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
20-4/15	OC 36.	2 days pay. Absent 17-19th Arrs in England	Hamilton	20/4/15 28-6-15	Pt II-19
4.10.15	"	To be Sergeant.	W. Sandling	1.10.15	P. II. O. 155.
26.10.15	O/C 36th	Trans 4th Bn.	W. Sandling	26.10.15	P. 2 O. 174
13.11.15.	O/C. 4.	Struck h 4th Batt.	France	27.10.15.	—— 37.
14.1.16.	C.R. 260.	Influenza.	#2 Can. Fld. Amb.	27.12.15.	
14.1.16.	" "	—— Disc. to Duty.	—. —.—	31.12.15.	
18.11.16	4th Bn.	To be C.S.M.S.	Field	28.9.16	Pt II-66
24.1.17	—.—	Granted a Com. as Temp Lieut. + Posted to 4th Bn.	Field	19.1.17	Pt II-9

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					

ORIGINAL.

No 1 Co 6th ~~406018~~ A6018

MEDICAL HISTORY SHEET.

Surname Waller Christian Name John Charles

Examined { on 12 day of April 1915 / at Hamilton

Approved by W. H. Taylor

Rank Lt and Q.M. M.O

Birthplace { City or Town Kamizawa / County Japan

Apparent age 19 yr 7 mo

Trade or occupation ~~Farmer~~ Student

Height 5 Feet 7 Inches.

Weight 135 Lbs.

Chest measurement { Minimum 32 inches. / Maximum expansion 35½ inches

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right. Left. / Number 1 2

When Vaccinated last Two months ago

(a) Marks indicating congenital peculiarities or previous disease Scars on inner side of both thighs

(b) Slight defects but not sufficient to cause rejection

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.
10/2/14		W. H. Taylor M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
26.4.15	O.K.	W. H. Taylor M.O.
30.4.15	O.K.	M.O.
7.5.15	O.K.	M.O.

Enlisted on 12 day of April 1915 at Hamilton

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	36 Batt.	~~406018~~		
Transferred to..	4th Batt.	LIEUT		

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.

M. F. B. 313.

100M.—1-15.
H. Q. 1772-39-439.

Surname..... Christian Name.....

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	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.

42013 THE MORTIMER SYSTEMS,
OTTAWA, CANADA

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

To Whom Mrs. Jessie Nevill

Address Cayuga. Ont.

By Whom Assigned Waller J. C.

Regtl. No. 406018

Rank Cpl.

Corps 36 Battn- C. E. F. A. Coy.

Rate $15.00

JUL 1 1915

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June		Q4168	15 00	
July		Q2960	15 00	
Aug.		R3754	15 —	
Sept.		J4604	15 —	
Oct.		U5486	15 —	
Nov.		X2768	15 —	
Dec.		X6663	15	
Jan.	1916	Y10134	15	
Feb.		Z13427	15	
March		M15096	15	

Pensions Notified Date 25-5-14

Killed in Action / Died of Wounds Date 3/5/14

14. 9/5/14 Jas Stewart

Date Noted 25/5/14

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
60m.—12-15.
1772—39—819.

Sheet No. 2.

L. L. Job 88002.—Req. 6213.

Mrs. Jessie Nevill

PAYMENTS.

Name of Soldier Waller J. C.
Capt. 36 Bttn. "A Bay"

$15-00

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	1563	15	
May		75120	15	
June		M 5-10	15	
July		A 9932	15	
Aug.		P/62444	15	
Sept.		R 21132	15	
Oct.		A 26130	15	
Nov.		I 29161	15	
Dec.		734124	15	
Jan.	1917	E 4 [illegible] 4	15	
Feb.		X 468444	15	
March		D 54054	15	
April		D 5 271	15	
May		C 11538	15	
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

67 x 31/5/14 - $360.00 = Cas Stewart 25/5/14
a/c closed - 31/5/14 Stewart 25/5/14.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

P—56

Rank Sergt Name WALLER. John C. Reg'l No. 40 A6018.

Unit 36th Bn. If in perm. Corps, What Unit? 0 Married or Single Single. J

Place and Date of Enlistment Hamilton. 19th Apl. 1915. Place of Birth Japan.

Name and Address, Next-of-Kin Rev J G Waller. Nagano Shinano Japan.

Relationship Father

Assigned Pay Monthly $ 15 00/100 Payable to Miss Jennie Neviele

Cayuga Ontario Relationship

Separation Allowance $ Payable to

Relationship

Entered on N.E. Card Index V.W.

Checked by Hayfield

Discharge, Date and Place Reason Character

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
1915																	
July 1	31	31	1.10	34 10	31	10	3 10		37 20	48		15 00	15 00		30	7 20	
								40		Adj. of exchange						7 60	
Aug 1	31	31	1.10	34 10	31	10	3 10		37 20	87 135		4 87 12 16	15 00		32 03	12 77	
Sept 1	30	30	1.10	33 00	30	10	3 00		36 00	215 255		4 87 9 73	15 00		29 60	19 17	Sgt. Oct. 1915 Do
Oct 1	31	31	1.35	41 85	31	15	4 65 3 80		46 60	315		4 87	15 00		19 87	45 80	36 17 Trans to Batt 1/11/15
Nov 1	30	30	1.35	40 50	30	15	4 50		45			5 35	15		20 35	70 45	
Dec 1	31	31	1.35	41 85	31	15	4 65		46 50			33 75	15		48 75	68 20	
1/1/16	31/1/16	"	"	41 85	"	"	4 65		46 50			20 92	15		35 92	78 78	
1 2	29 2	29		39 15	29		4 35		122 28			5 23	15		20 23	102 05	
1 3	31 3	31		41 85	31		4 65		148 55			15 69	15		30 69	117 86	
				348 25			36 65										
				348 25			36 65	40	385 20			132 44	135		267 44	117 86	

Carried forward to Large Ledger sheet

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						

FORM P. 15.
5986—25M—19/1/17

ASSIGNED PAY. | UNIT. NAME OF | DATE | AUTHORITY | RANK. | DATE | AUTHORITY | NAME.

Beneficiary — 4 Bn. — Lieut — Name Waller

Address — Initials J.C.

Bank of Montreal

Amount. $

Separation Allowance issued. Yes or No..... K.R.A. 3/5/17 6 L. 66 9-5/17 — No 11

DATE 1914	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
Mar. 31	Balance Forward:—					Dr. 60 94		
June 15	Adm. D. Canadian 6 4/7. 12 5/7 fes. V. 874. 9 cent			21 80		82 74	Hold Dr a.	
July 11	Pay May 4-31 5/17 V. 6012		100 80			Cr 18 06	Tf. to N.E. Ledger.	
13							Pay to cease. Effective 5/17 V. 2598	
May 1/17	Dr Bal Pay H. 19 1/17. V # 295. Pay H			143 11		25 05	Tf. from Led 25 to Led 12	
" 24	P & A @ L15 Rates + Mess fr. 20/17 - 3 5/17 10 H days V. 9579.		374 40			Cr 349 35	June 8/17	
N.E. Bch - Jan/18	— Trans to Can fr sett 19 1/18. — V 26/32			349 35				

DEPOT DIVISION, N.E. BRANCH
AUG 17 1917
CANADIAN CONTINGENT

Entered on N.E. Card Index V. 10

Checked by .....

Lieut Rates
Rate of Pay 2 00
" " Allce 60
" " Mess 10

Statement of
OCT 24 1917
Account rendered

FORM P. 15.
5986—25M—19/1/17

ASSIGNED PAY.	UNIT. NAME OF	DATE	AUTHORITY	RANK.	DATE	AUTHORITY	NAME.
Beneficiary							Name
Address							Initials
							Bank
Amount. $							
Separation Allowance issued. Yes or No.....							

DATE	PARTICULARS	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
2227—10M—1/1/17

ASSIGNED PAY.

UNIT. NAME OF | DATE | AUTHORITY

RANK. | DATE | AUTHORITY

NAME.

Beneficiary — D/ Bn — Lieut — Name Waller

Address — 4 Bn — Initials J.C.

Bank of Montreal

Amount. $

Separation Allowance issued. Yes or No..... not

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
1917								
Mar 12	Off. unpaid chg a/c Bk. Mont. Ord. Iss. France	22201		60 94	Dr	60 94	D.V.D. France 22-1-17	
							D.V.II " 21-1-17	

PAY OFFICE, N. E. BRANCH
AUG 17 1917
CANADIAN CONTINGENT

Entered on N.E. Card Index T.W.

Checked by .....

Statement of
OCT 24 1917
Account rendered

FORM P.15
2227—10M—1/1/17

ASSIGNED PAY.	UNIT. NAME OF	DATE	AUTHORITY	RANK.	DATE	AUTHORITY	NAME.
Beneficiary							Name
Address							Initials
							Bank
Amount. $							
Separation Allowance issued. Yes or No.....							

DATE	PARTICULARS	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
5986–25M–19/1/17

ASSIGNED PAY.

UNIT. copy

NAME OF | DATE | AUTHORITY

RANK.

DATE | AUTHORITY

NAME.

Beneficiary — 4 Bn. — Lieut

Address

Name Walker
Initials J. C.
Bank of Montreal

Amount. $

Separation Allowance issued. Yes or No..... Killed in action 3 5/17. C.R. 668-8 5/17

DATE 1917	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
Mar 12	Off Unpdck a/c Bk of Mont Ord Issue France	22201		60 94		60 94		
June 15	Adm. D. Cashier 6 4/17 125 frs 24874 Gant			21 80		82 74		
July 11	Pay May 4-31 5/17 V6012		100 80			18 06	Hold P.A.	
13	Dr Bal fr. Pay II 19 4/17 V295 Pay II			43 11			Tfr. H. E. Rodger	
24	Ord. Lt. rates & Mess fr. 20 1/17-3 5/17 104 days V9579		374 40			349 35	L. 25 V June 8/17	
Aug 17	Transfd N E Branch V 15324			349 35				

FORM P. 15
5986–25M–19/1/17

ASSIGNED PAY.

UNIT.

NAME OF | DATE | AUTHORITY

RANK.

DATE | AUTHORITY

NAME.

Beneficiary

Address

Amount. $

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

Name

Initials

Bank

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

MARRIED OR SINGLE S.

PLACE OF BIRTH Japan

NAME AND ADDRESS OF NEXT OF KIN Rev J.G. Waller
Kagano Shinano, Japan

RELATIONSHIP OF NEXT OF KIN Father

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Promoted Capt	28/9/16	Lo. 66. 18/11/16.

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

C.A.M.S.

REG'L NO. 406018 RANK Capt NAME Waller John C.

IF IN PERMT. CORPS WHAT UNIT — UNIT 4th Bn

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION

DATE OF ATTESTATION

TRANSFERRED TO L.I.C. DATE 28/1/17 AUTHORITY Can Gaz 4788. 17/1/17

TRANSFERRED TO Dep K. DATE 20.1.17 AUTHORITY ✓

TRANSFERRED TO N.E.B. DATE ✓ AUTHORITY ✓

TRANSFERRED TO DATE AUTHORITY

Granted Cond^n as temp Lieut while A.D.C. to G.O.C. 2/1/17

ASSIGNED PAY MONTHLY $ 15.00 DATE EFFECTIVE

PAYABLE TO Mrs Jennie Neville, Cayuga Ont. RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) 7.6.17 EFFECTIVE 1.7.17 REASON Com C.F.A.

DISCHARGE DATE AND PLACE Eng. 28.1.17 REASON AND AUTHORITY Gaz 4788 17/5/17

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) Eff 20/1/17.

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE) V. to G.

C Sempert

FEB 9 1918 PAY OFFICE CANADIAN CONTINGENT

Posted on N.E. Card Index. Checked by

DATE 1916	PAY NO. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE NO. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY NO. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 NO	1 DATE	2 NO.	2 DATE	3 NO.	3 DATE	4 NO.	4 DATE	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
			348 25				36 65							40	385 30											132 44	135		367 44	17 86					
Apr 1/30	30	1.25	40	50	30	15	4 50								45									5 23	5 23		15		25 46	13 40					
May 31	31	"	41	85	31	"	4 65								46 50	9/22	9/11/16	783	23/11/16					5 11	5 11		15		25 22	15 868					
June 1/30	30	"	41	0 50	30	"	4 50								45			991	10/12/16						5 11		15		20 11	18 357					
July 31	31	"	41	85	31	"	4 65								46 50	1/6	16/1/16	1087	11/1/16					5.11	5.23		15		25 34	204 73					
Aug 31	31	"	41	85	31	"	4 65								46 50	1099	25/1/16	1131	8/2/16					6.10	5 23		15		26 33	224 90					
Sept 30	30	"	41	0 50	30	"	4 50								45	1195	7/4/16	1221	15/3/16					6 10	10 46		15		31 56	238 34					
Oct 31	31	"	41	85	31	"	4 65								46 50	1279	2/10/16							5 23			15		20 23	264 61					
Nov 30	30	1.50	45		30	20	6 00							6 80	57 80	1288	27/10/16	1327	5/11/16					5 23	5 23		15		25 46	296 95					34 days @ 20¢
Dec 31	31	"	46	50	31	"	6 20								52 70	1359	27/11/16							17 44	6	9733	46	15		275 77	72 88					
			60	95			60	95																											
Jan 31	17.50		52	70											58 70			1466	9/1/17	1654	17/1/17				8 72	17 44		15		41 16	85 42		95 75		
Feb 28			47	60											47 60									8 72	17 44		15		41 16	91 86		102 75		
			909	90										720	917 10									81 71	50 32	114 77	278 44	300		825 24					
			909	90										7 20	917 10									81 71	50 32	114 77	278 44	3 00		825 24					

Small Ledger Sheet.

406018 C.Q.M.S. Waller J.C. a.P. £15-00

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
			90	90										7 20	91 7 10								81 71	50 3/-	114 77	278 44	£ 300 -		825 24	91 86				
Mch	31	1 50/20	52	70											52 70	155	6/2						9 72 -				15		23 72	120 84				
Apr	30		51	-											51 -												15		15 -	156 84				
May	-		-												-												15		15	141 84				
June	-		-												-												15	158 10	173 25 10	XXX 8	31 26			Transf. S.R.O. 8ff 28/11/17 Auth Lond. Gaz 11788-11/12/17
June	-		101	3 60										7 70	102 0 60								90 43	50 3/-	114 77	278 44	360	158 18 13 60	105 2 06 13 60		44 86			
June	-		-											1 75	1 75														106 5 66		43 11			
															1022 55																			

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
Oct				Balce FORWARD		43 11			43 11		

Balance transferred to N. E. Branch. JHC

Balance to P.M.6 Liability a/c

DISCHARGED TO Com'n EFFD. 7.7.17 DATE 7.7.17 1917

PAYBOOK VERIFIED 7.6.17 43 11

BAL. 43 11 L.P.C. REN'D 7.7.17

AUTHY. £1 4788 17.12.17

Com'n C.R.A.

Checked J.E. Kyte L.P.C.

175 Sub on Ret. Pay upto 31.12.16

F.W.

DUPLICATE.

406018

DUPLICATE

ARMY FORM B. 178.

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital.
Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname WALLER *Christian Name* John Charles

TABLE I.—GENERAL TABLE.

Birthplace ... Parish KAMIZAWA County JAPAN

Examined ... ... on 12th day of April 1915,
at Hamilton

Declared Age ... ... 19 years 7 months days.

Trade or Occupation ... Student

Height ... ... 5 feet 7 inches.

Weight ... ... 135 lbs.

Chest Measurement { Girth when fully Expanded 35½ inches.
Range of Expansion 3½ inches.

Physical Development ... good

Vaccination Marks { Arm ... Right 1 Left 2
Number 3

When Vaccinated ... ... two monthsnago

Vision ... ... { R.E.—V=
L.E.—V=

(a) Marks indicating congenital peculiarities or previous disease ... (a) scars on inner side of both thighs

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

Approved by (*Signature*) W. H. Taylor
(*Rank*) Lt. A.M.C
Medical Officer.

Enlisted ... ... at Hamilton.
on 12th day of April 1915.

	Corps.	Regtl. No.
Joined on Enlistment ...	36th Batt.	~~106018~~
Transferred to	4th Batt.	LIEUT

Became non-effective by ...

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

on ____ day of ____ 191 .
(*Signature*)
(*Rank*)

(4887.) W. 9597/1588. 500M. 9/15. [illegible] C. P. LTD.

Lieut.-Col.
In Charge of Records,
Canadian Contingent.

Forms B. 178 39

P.T.O.

Table II.—Only for Admissions to Hospital or to the Sick

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks
	Day	Month	Year	Day	Month	Year			

List in the case of Warrant Officers treated in quarters.

s bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer

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

Date	Brief details, and signature
	VACCINATIONS
10/2/15	W. H. Taylor
	ANTI TYPHOID INOCULATIONS ETC.
26/4/15	O.K. "
30/4/15	" "
7/5/15	" "

Table IV.—Service Table.

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

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

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

No. 406018. Sergt. John C. Waller.

14

WILL

In the event of my death I give the whole of my property and effects to My Mother ~~Mrs John G.~~ Mrs John G. Waller.

John G. Waller
Sergt
No. 406018.

Oct. 20th 1915.

Mrs John G. Waller
Nagano.
Shinano
Japan

Form P.—59.

STATEMENT OF PAY ACCOUNT.

No. ..... Rank Lieut Name J.C. WALLER

Unit 4th Bn Original Unit on Enlistment in O.M.F. of C. 4th Bn

Date non-effective { Discharge / Decease / Desertion } 3.5.17. Authority Killed in Action O.L./ 668 D/ 8.5.17.

Credits.	$	c.	Debits.	$	c.
From 20.1.17. 191, to 31.5.17.			Total Cash Payments	21	80
No. of days 132			Total Assigned Pay @ $ ... per month		
Pay @ 2.00 per diem ...	264		Total Assigned Pay @ $ ... per month		
F.A. @ 60 per diem ...	79	20	Ord. Issues	60	94
From 20.1.17. 191, to 31.5.17.			Other Charges ... ... (Particulars) Bal from N.C.O's a/c	43	11
No. of days 132 ...					
Pay @ 1.00 Messing. ...	132				
F.A. @ ... per diem ...					
Other Credits ... ... (Particulars)					
Adjustment of Exchange (see below)					
Cash in effects Nil					
Debit Balance ...			Credit Balance ...	349	35
Total ...	475	20	Total ...	475	20

Sterling equivalent of above Balance @ $4.86⅔ = £ 71.15.8.

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 £ ... ... $ .....

Exchange @ $5.00 ... ... £ .....

Exchange @ $4.86⅔ ... ... £ .....

Difference in sterling ... ... £ .....

Or Canadian Currency @ $4.86⅔ ... ... $ .....

S

Duplicate

Certified correct,

Thomas Law

Captain

For Chief Paymaster

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

C2 12/17

Form P.—69.

STATEMENT OF PAY ACCOUNT.

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

Unit ..... Original Unit on Enlistment in C.A.M.C. of C. .....

Date non-effective { Discharge / Desertion } ..... Authority .....

Credits.	£	s.	d.	Debits.	£	s.	d.
From ..... to				Total Cash Payments ...			
				Total Assigned Pay @ £ ..... P.T. month			
No. of days				Total Assigned Pay @ £ ..... per month			
Pay @ ..... per diem				Other Charges (Particulars)			
P.A. @ ..... per diem							
From ..... to							
No. of days							
Pay @ ..... per diem							
P.A. @ ..... per diem							
Other Credits (Particulars)							
Adjustment of Exchange (see below)							
				Credit Balance ...			
Debit Balance ...							
TOTAL ...				TOTAL			

Sterling equivalent of above Balance @ $4.86⅔ = £ ..... s. ..... d.

Assignment of Pay has been charged on Pay List ..... Page ..... No. .....

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

PARTICULARS OF EXCHANGE ADJUSTMENT.

Total Cash Payments for period during which payments were made @ $9.00 to £ .....

Exchange @ $9.00 .....

Exchange @ $4.86⅔ .....

Difference on Exchange .....

Or Canadian Currency ..... $ .....

Certified correct.

For Chief Paymaster.

State if balance due is paid or transferred for remittance .....

R. 150.

OK.

PMD.

Rank and Name WALLER, John Charles

1st Copy

Report Date	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

4 Bn. W NE

AFB.158.
4Bn 1-2-17
do 1-3-17

Rank:- 406018 C.Q.M.S.,

Promotion:- Temp.Lieut.

Unit:- 4th Battn.,

Place of Birth, Karnizaiva, Japan.

Married:- No.

Next-of-kin:- Mrs Mother

Rev. J. G. Waller, (Father)

Nagano, Shinano,

Japan.

27-1-17	WO O.C.	To be Temp. Lieut	20-1-17	B.R.O. L.G 30074 d/3/5/17	
24.1.17.	4th Bn.,	Temp.Lieut.psted to 4th Battn.,	19.1.17	Part ii Ord.9.	
23-2-17	4th Bn.,	P.II ord. no. 9 of 24.1.17 sub-order (3) as far as they concern this Officer should read "To be Temp. Lieut with effect from 20.1.17.	P.II ord. 19. (4th Bn)		
8-5-17	CRO	Reported from G.H.Q. Killed in Action	3.5.17	C.L. 668	Pte O.S.C. 4th Bn

(A.F.B. 104-93-2000 A
Forms 11 JUL 1917.)

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				
24.1.17.	4th Bn.	Temp.Lieut.pated to 4th Battn.,		19.1.17	Part II Ord.9.