

REGIMENTAL DOCUMENTS

NAME **YOUNG, JAMES.**

REGT. NO. *931207*

UNIT *#9 Com Bn*

H. Q. FILE NO.

H

81
2

M

24-3-19 JPH

Deceased 13-7-58

01689

H

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DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
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NON-EFFECTIVE BY

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

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

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

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

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DEATH

Category

DISCHARGE

Category

Demo

DESERTION

<i>41</i>	<i>26</i>
<i>10</i>	<i>26</i>
<i>5</i>	<i>26</i>
<i>2</i>	



14/2/29

P

This space to be for numbers

Proceedings on Discharge.

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page).

No. <u>931207</u>	
Rank <u>Private</u>	
Surname <u>Young</u>	
Christian Name <u>James</u> <small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company) <u># 2 Bomb Battn</u>	
Date of Discharge <u>February 14, 1919</u>	
Place of Discharge <u>Halifax NS</u>	
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age..... <u>27</u> years..... <u>7</u> months.	Descriptive Marks <u>Nil</u> <u>Deceased 13-6-58</u>
Height..... <u>5</u> feet..... <u>8</u> inches.	
Complexion <u>Black</u>	
Eyes <u>Black</u>	
Hair <u>Black</u>	
Trade <u>Blacksmith</u>	
Intended place of residence } <u>86 Dupper St</u> (To be given as fully as practicable.) } <u>Sydney NS</u>	
2. The above-named man is discharged in consequence of <u>Demobilization</u>	
<small>N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.</small>	
3. Conduct and character while in the service have been, according to the records, etc.	
To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.	<small>N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.</small>
	4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

M. F. B. 218.

100M. - 1-17.
H. Q. 1772-39-113.

(OVER)

5. He is in possession of the following number of G. C. Badges:

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (Squadron or Battery), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place).....

(Date).....

Commanding

8. Certificate to be signed by the Soldier on Discharge

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place) Halifax N.S. (Signature of Soldier.)

(Date) Feb 12th 1919 K.M. Smith (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 on 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 toward Engagement to.....(the date to which the Record of Service is completed).....years.....days.

Total.....years.....days.

11. Confirmation of Discharge.

The discharge of the above-named man is hereby confirmed.

(Place) Halifax N.S.

(Date) 24/2/19

(Signature)

Samuel LIEUT. COL. No. 6 DISTRICT DEPOT. I.M.

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.)

Wit ~~Subs.~~ allowance
due for two weeks
landing leave

J. Young

<p>Military Form B. 232 Attestation Paper</p>	<p>Reg. Conduct Sheet Military Form B. 231</p>
<p>Proceedings on Discharge Military Form B. 218</p>	<p>Conduct Sheet Military Form B. 231 Squadron Battery Company</p>
<p>(a) Proceedings on Discharge. (b) Attestation. (c) Medical History Sheet (in the event of such having been prepared).</p>	<p>Copies of Convictions by C.P. in MS Medical Report for Invalid* Military Form B. 217 Statement of Man's Account on Transfer and Last Pay Certificate Military Form B. 217 *Only if discharged "Medically unfit."</p>

N.B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

Reservations referred to in Para. 8.
 (To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263.</p> <p>Squadron } Battery } Conduct Sheet, " B. 263a. Company }</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia Form B. 313</p> <p>Medical Report for Invalid* " B. 227.</p> <p>Statement of Man's Account on Transfer and Last Pay Cer- tificate, " D. 877.</p> <p>*Only if discharged "Medically unfit."</p>	<p>Attestation Paper, Militia Form B. 235.</p> <p>Proceedings on Discharge " B. 218.</p> <p>In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p>(a) Proceedings on Discharge.</p> <p>(b) Attestation.</p> <p>(c) Medical History Sheet (in the event of such having been prepared.)</p>
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N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

No 31207.

RANK

Pte.

NAME

Young James

T. O. S.

30-8-16

UNIT

No 2. Construction Battalion

D. O. 21. 31-8-16

M. D. 6

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
1916 Aug 30	1916 Sept 30	m		
	Oct	m		
	Nov.	v		
	Dec.	v		
1917	Jan 1917	v		
	Feb.	m		
	Mar.	m		

mt
JH
Number *931207* Rank *Pte*

Surname *YOUNG*

Christian Name *James*

Unit *2nd C.O.R.C.C.* Theatre of War *France*

Date of Service *17-5-17*

Remarks

Latest Address *86 Upper St*

Sydney

Page *2978*
Roll No. *B*

NS

Desh's 21 June 1921

The Secretary
Sydney Branch
G. W. N. A.
Sydney N. S.

not in stock

4¹²/₂₄

Original ORIGINAL

931207

ATTESTATION PAPER.

No.

No. 2 Construction Batt'n, C. E. F.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname? *Young*
- 1a. What are your Christian names? *James*
- 1b. What is your present address? *Sixth Road, St Phillips Barbados, B.W.I.*
- 2. In what Town, Township or Parish, and in what Country were you born? *Sixth Road, St Phillips, Barbados, B.W.I.*
- 3. What is the name of your next-of-kin? *Whilemina Weeks*
- 4. What is the address of your next-of-kin? *Sixth Road, St Phillips, Barbados, B.W.I.*
- 4a. What is the relationship of your next-of-kin? *Sister*
- 5. What is the date of your birth? *1891, 2nd March P.S.*
- 6. What is your Trade or Calling? *Blacksmith*
- 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*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *James Young*, 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.

James Young (Signature of Recruit)

Date *August 31st* 191*6* *Matthew Nathaniel Edwards* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *James Young*, 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.

James Young (Signature of Recruit)

Date *August* 191*6* *Charles W. Reis Capt* (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 *PICTOU, N. S.* this *AUG 31 1916* day of *1916*.

James Charles W. Reis Capt (Signature of Justice)

Justice of the Peace in and for the County of Pictou, Province of Nova Scotia

Description of James Young on Enlistment.

Apparent Age 25 years 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. 8 ins.

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

Complexion black

Eyes black

Hair black

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

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 Aug 31 1916.

Place Pastor NS D. M. Murray
 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.

James Young 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.

..... D. H. Sutherland (Signature of Officer)

Date OCT 20 1916 1916.

SURNAME.

Young

6 CARD NO.

CHRISTIAN NAMES

James

505.015 14-2-196
60.439 12-2-196
FOLL. *650*

REGL. No.

931207

RANK

Pte.

UNIT

No 2 Construction

Bn

FORMER CORPS

Nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Wecker, Wilhemina

RELATIONSHIP TO SOLDIER

Sister

ADDRESS

*6th Road, St. Philips, Barbados,
B. W. I.*

COUNTRY OF BIRTH

B.W.I. 6th Road St. Philips, Barbados.

DATE

1891.

PLACE OF ATTESTATION

Pictou, N.S.

DATE

Aug. 31st 1916.

L. L. 6945. M. & D. 6994.

R/C. 25/1/19. 256/91. 6

M. F. W. 22. 100M. -8-16. H. Q. 177

From Halifax per SS. Southland: 28/3/17.

MARRIED SINGLE *yes* WIDOWER
TRADE OR CALLING *Blacksmith* RELIGION *Church of England*

DESCRIPTION.

APPARENT AGE *25* YEARS MONTHS
HEIGHT *5* FEET *8* INCHES
CHEST MEASUREMENT *38* INCHES EXPANSION *3* INCHES
COMPLEXION *Black* EYES *Black* HAIR *Black*.
DISTINGUISHING MARKS *Not Stated*

MEDICAL EXAMINATION. PLACE *Pictou, N.S.* DATE *Aug. 31st 1916.*

*Present Address 6th Road, St. Philips, Barbados
B. W. I.*

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 931207 (Rank) Private
 Name (in full) James Young enlisted in
 the #2 Bomb BATTⁿ
 CANADIAN EXPEDITIONARY FORCE at Pictou NS on the 31st
 day of August 19 16
 HE served in France
 and is now discharged from the service by reason of Demobilization

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows:—

Age 27 yrs
 Height 5 feet 8 inches
 Complexion Black
 Eyes Black
 Hair Black

Marks or Scars Nil

J Young
 Signature of Soldier

C W MacAlroy CAPTAIN
 O. C. DISCHARGE SECTION No. 6 DISTRICT DEPOT.

Date of Discharge February 14, 1919

Rank

Signed at Halifax NS this 12th day of February 19 19,
 in Military District No. 6

Appointment

File Reference No. _____

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. (Rank) Name

Unit

Address on Discharge

Character and Conduct

Former Occupation

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks

Signed at this day of 19

Name of Officer

Rank

Appointment

On demobilization the particulars called for on the back of this certificate will not be completed.

Uniform not to be worn after Date of Discharge, unless authority has first been obtained from G. O. C. District.

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

Agway

M. F. W. 54. (A. F. B. 103.)

250M.—1-16.

H. Q. 1772-39-920.

402

Casualty Form—Active Service.

Unit, Regiment or Corps *No 2 Construction B. H. 66 J*
 Regimental No. *931207* Rank *plto* Name *James Young*
 Enlisted (a) *31-8-16* Terms of Service (a) *period of War and 76 months* Service reckons from (a) *31-8-16*
 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) _____

MAY 17 1917
 CERTIFIED CORRECT.
 6 JUN. 1917
 CAN. RECORDS, LONDON.

Report Date	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.
		Embarked, Canada	Halifax N.S.	25/3/17	
		Disembarked, England	Liverpool	27/4/17	
	C. #2	Proceeded Overseas	Seaford		PTZ D.O. # H. P. Maclean Adjutant, No. 2 Construction Batt n. C.E.F.

Landed in France 17-5-17 N.R.

13/12/17	oc unit	5 days 2P N ^o 2 for (1) Malingering (2) Insolence to an N.C.O.		12/12/17	B 2069 P 295 N ^o 1 d/2/1/18
22.4.18	C.F.C. Hos.	Myalgia, legs. Adm. Hld.		22.4.18	E 7368. W. 9000.
29.4.18	" "	" " Disch'd.		29.4.18	E 8935. W. 9297.
27.4.18	oc unit	Adm. to Hosp.	Hld.	22.4.18	B. 213.
2.5.18	C.F. Hos.	Influenza. Adm.		2.5.18	E 9488. W. 9936.
8.5.18	" "	" " Disch.		8.5.18	F. 727. W. 631.
4.5.18	oc unit	To Hosp.	Hld.	1.5.18	B. 213.
4.5.18	" "	Joined from Hosp.	"	29.4.18	B. 213.

(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties.

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				

11.5.18. ~~Scumb.~~ Reg. from 10 Sept. 8.5.18 B 213

24.8.18 ^{or} ~~Wt~~ Granted 14 days leave ~~at~~ 21.8.18 B 213 *109519 Sept 1918*

7.9.18 ~~Wt~~ Rejoined from leave ~~at~~ 5.9.18 B 213

11/12/18. ~~Wt~~ Trans. to England & posted to N. S. Reg. Depot Bramshott 14/12/18 R. 344

ba Hewell Lieut. for Lt.-Col., A. A. G.
Canadian Section, G. H. O., 3rd Echelon. B. E. F.

17.12.18. ~~Wt~~ S.R.D. T.O.S and att'd 2nd b.D. B'shott 14.12.18 D.O. 305
for Quarters & Rations

*W S R D ON COMMAND TO 100 Kimmel BRAMSHOTT
R. H. L.*

MSRD 313 27/18
PART II D.O.

ba. Hught LIEUT.
OFFICER IN CHARGE RECORDS,
NOVA SCOTIA REGTL. DEPOT.

12/1/19 *Pop MTC on transfer Dec 7
Discharge Canada Sanbury N.S.
R.M.A. 10/1/19
Dunn at. Lieut*

12.1.19 *Adm. 21/0/S No. 6 D.D. Hfx. Coy. Co. 22.1.19. Do 29.* *am. Ferguson* Lieut

ASST. ADJT. No. 6 DISTRICT DEPOT

JM Rank _____ Name **YOUNG, James.** Reg'l No. **931207**
 Unit **No. 2. Const. Bn.** If in perm. Corps, }
 What Unit? } Married or Single **Single.**
 Place and Date of Enlistment **Pictou N.S. 31st Aug 1916.** Place of Birth **Sixth Road, St. Phillips, Barbadoes, U.S.A.**
 Name and Address, Next-of-Kin **Whilemina Weekes.**
Sixth Rd., St. Phillips, Barbadoes, B.W.I. Relationship **Sister.**
 Assigned Pay Monthly \$ _____ Payable to _____ Relationship _____
 Separation Allowance \$ _____ Payable to _____ Relationship _____
 Discharge, Date and Place _____ Reason _____ Character _____

N/E. R.B. No. **6750**
 File R.L. _____
 Category **OR CAN**

H. W. & V., Ltd.—9546-16.

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.				
C					
	Arrived in England per S.S. Southland			7.4.17	(Unit) 31 MAY 1917
14-6-17	2 nd Const	Arrived in France	Field	17.5.17	P 1120 115
16.12.18	NSRD	105 from 2 nd CD	Pk B. B. B.	14-12-18	305071 8/19-12-18 2 nd CD
27.12.18	-	of c to C.D.D. Rhyl	-	27-12-18	313
25.1.19.	NSRD	cess. of c to Rhyl	-	12.1.19	St-II. 18
		2505 to 643 Canada			

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

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

No. 931207 Rank Pte. Surname Young
(Given name in full)
James Young
 Unit or Corps D.D. 6 Birthplace Barbadoes

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

1. GENERAL DESCRIPTION:

Physique Good Weight 135 lbs. Height 5 ft. 6 in. Colour of Eyes Brown
 Nutrition Good
 Pulse 72
 Condition of arteries n
 Vision Rt. n Left n
 Hearing (conversational voice) Rt. 20 ft.
 Left 20 ft.

Identification marks, scars, or deformities.
 (Give cause and date of origin).

Pit

Opinion as to general health and physical condition good

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

Nervous System no Genito Urinary System no Cardio-Vascular System no
 Special Senses no Integumentary System no Respiratory System no
 Disturbance of mentality no Muscular System no Digestive System no
 Osseous and Joint System no Any other general condition no

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

86. Upper Lt.
 Sydney.
 C. B

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at(Overseas)

Date SignedM.O.

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

Signature

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

THIS SECTION FOR USE IN CANADA—

Examined at *Halifax*(Canada)

Date *10.2.19* Signed *R. Sharer Capt*M.O.

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

Signature *J. J. J.*

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

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

ORIGINAL 931207 MEDICAL HISTORY SHEET

Surname Young

Christian Name James

Examined { on 31st day of August 1916
 at Pictou N.S.
 Birthplace { City or Town Barbados
 County B. W. I

Approved by D Murray

Rank Lt a m c M.O.

Apparent age 25
 Trade or occupation Laborer
 Height 5 feet 8 Inches
 Weight 161 lbs.
 Chest measurement { Minimum 35 inches
 Maximum expansion 3 inches

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Physical development very good
 Small-pox Marks none

Vaccination Marks { Arm Right Left X
 Number one

Date	Result	VACCINATIONS
<u>10/2/14</u>	<u>SGR</u>	<u>Dau Murray</u> M.O.
		M.O.
		M.O.

When Vaccinated last 1907
 (a) Marks indicating congenital peculiarities or previous disease none

(b) Slight defects but not sufficient to cause rejection none

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>24/10/16</u>	<u>SGR</u>	<u>H.V. Kent Major</u> M.O.
<u>31/10/16</u>	<u>SGR</u>	<u>H.V. Kent Major</u> M.O.
<u>7/11/16</u>	<u>SGR</u>	<u>H.V. Kent Major</u> M.O.

Enlisted on 20 day of August 1916 at Pictou N.S.

	CORPS	REG'L NUMBER	HABITS	DATE
Joined on enlistment				<u>30/8/16</u>
Transferred to	<u>No. 2 CONSTRUCTION, S.H. C.E.F.</u>	<u>931207</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.

SURNAME

CHRISTIAN NAME OR NAMES

REG. No.

YOUNG

J.

931207.

RANK

UNIT

Co.

TROOP

BATTY.

Pte.

NS.2Con.

HOSPITAL

DATE OF ADMISSION

C.F.C. Hosp. La Joux Jura.

22-4-18.

1.

No

HOSP. 2-5-18.

2.

HOSP.

3.

HOSP.

4.

HOSP.

DIAGNOSIS

Myalgia Legs. ^{Ho}

1.

Influenza ^{Rm}

2.

3.

DISPOSITION

Dis. 29.4.18

DATE

Dis. 8.5.18

CI. 2.5.18. A20292.

REMARKS

*7.5.18 A 206 (4)**9-5-18 A 208-2.**16.5.18 A 214 (2)*

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.

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 1st Lieut. Name Young Surname James
 Unit or Corps 17th Reserve. (If a soldier) Regtl. No. 931207.
 Born at Barbados B.W.D. on date May 20th 1817.
 Signature (for identification) Young James

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

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe.

Weight 141 lbs. sw
 Height 5 ft. 6 ins.

2. NUTRITION AND DIATHESIS? fair

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? sw

4. RESPIRATORY SYSTEM. sw

5. HEART?
 Abnormal Sounds? sw
 Abnormal Size? sw
 Pulse Rate? 80 Intermittence or irregularity? sw

6. ARTERIES.—Any hardening? sw

7. DIGESTIVE SYSTEM? sw

8. GENITO-URINARY SYSTEM?
 Urinalysis—s.g.? 1.020 Reaction? acid Albumen? sw Sugar? sw

9. SKIN, MIDDLE EAR, EYE
 or any other part? sw

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

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

Examined at Acornel Park. Signed Blumhagen Capt M.O.
 Date 2-1-19 Signed Stephens Capt 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.

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

MS 6

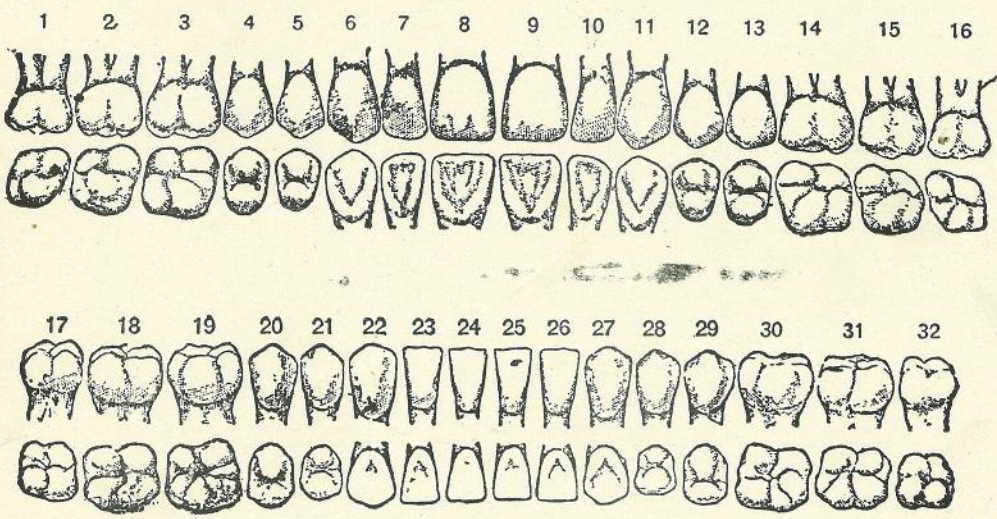
NAME OF SOLDIER (Block Letters) YOUNG J

REGIMENT No 2 Con Bn RANK Pte No. 9312030

Date of Examination in England 31.12.18 Date of Examination in France _____

DIRECTIONS TO DENTAL OFFICERS

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



PRESENT DENTAL REQUIREMENTS

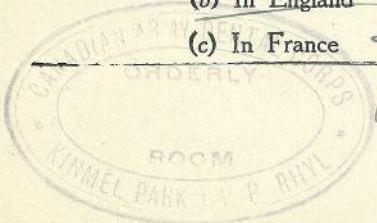
- 1. FILLINGS _____
- 2. EXTRACTIONS 12
- 3. CROWNS _____
- 4. DENTURES
 - (a) Full Upper _____
 - (b) Part Upper _____
 - (c) Full Lower _____
 - (d) Part Lower _____

HAS HE EVER REFUSED DENTAL TREATMENT? _____

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

- (a) In Canada _____
- (b) In England _____
- (c) In France Yes

Signature of Dental Officer W. Kennedy
Cint



FORM OF WILL

I, James Young (Name in full)

Regimental Number 9312107 serving in No. 2 CONSTRUCTION, B'n. C.E.F.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

My Sister I devise all my real estate unto

Mrs. Philomena Weeks
6 Road, St Philip's
Barbados, B.W.I.

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

absolutely, and my personal estate I bequeath to

My Sister
Mrs. Philomena Weeks

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

NOTE

This space for the appointment of Executor if necessary.

IMPORTANT NOTE

This must be signed and Dated by THE SOLDIER HIMSELF.

this 19th day of March A.D. 1917

James Young 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.

Signature of First Witness D. Lionel Cross

Address of Witness San Fdo Trinidad B.W.I.

THE TWO WITNESSES

Occupation of Witness Journalist

MUST SIGN HERE

Signature of Second Witness Archie Bennett

Address of Witness Shelburne St.

Occupation of Witness Laborer



Name *Young J.* Rank *Pvt* Regtl. No. *931207*
 Original unit *1st Bn* Present unit *4th D.D.* M. or S. Age Religion *None* Fyle Depot *74-4-48* Ref. H.Q.
 Port, ship and date of arrival *Halifax N.S. Empress of Britain 2/2/19*
 Next of kin *disto Mrs. A. M. Adams*
 Address on leave *86 Tucker St. Sydney C.B.*
 Address on discharge
 Transportation issued No. Yes Date Character on discharge
 Previous occupation *Blacksmith* Date and place of enlistment *Pictou N.S. 3/18/16*
 Diagnosis Date of Medical Boards

Date.	Remarks.	Pt. 2 Order No.
<i>29/1/19</i> <i>14 2:19</i>	<i>T. A. S. Grant 12/1/19 Posted casualty</i> DISCHARGED at Halifax, N. S.	<i>29</i> <i>43</i>

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

Date.

Remarks

Pt. 2 Order No.

M. F. W. 192

150m. 5-18

1772-39-1243

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 931207 Rank Private Name Young J.
 Corps 2nd who was* Discharged
 On 14-2-19 191... to 1-1-19 191...
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-1-19 191... to 14-2-19 191..., the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month			Balance Cr. from prev. month	11	15-
Advances by Cheques } No. <u>1056 13477</u>	704	00	Reg'tl. Pay <u>45</u> days at \$...1 c.	45	00
Assigned Pay and Sep'n Allee. No.			Field Allow. <u>45</u> days at \$...c.10	4	50
Other charges <u>Pay fund</u>		05-	Separation Allowances* (Monthly)		
Payment on transfer or discharge No. <u>12438</u>	326	00	Other Allowances* <u>Plg.</u>	33	00
Balance Cr. (to be paid by the new unit)			Other Credits* <u>L.P.C.</u>	230	40
Total	396	05-	Bal. Dr. (to be deducted by new unit)	70	00
			Total	396	05-

*Give particulars.

A monthly stoppage of \$ 15.00 (†) has not (‡) been paid on account of Assigned Pay for the month of Jan. 1919 (to) Assignee Mr. W. Weeks and Sep'n Allee. for month of Jan. 1919
 (Address) 6 Ross St, Phillips Barbadoes BWS

(†) Insert amount to be assigned, whether it has been paid or not.
 (‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer. Made by, _____
 Out Allowance of \$ _____ has been paid by Paymaster, Military District No. _____
Created:

REMARKS:—
 State (1) date of enlistment
 (2) if married and if a Separation Allowance Card has been submitted no
 (3) cause of discharge Demote authority D-043
 (4) authority for transfer

NOTE.—Separation Allowance and Assigned Pay Card and Index Card (M.F.W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay List of the Unit.
 Date 24-2-19
 Place Halifax W.D. No. 53 CAPTAIN, PAYMASTER NO 3 DISTRICT DEPT.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit, duplicate to District Paymaster; triplicate to accompany the pay list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

Date of Enlistment *30-Aug*

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

1st June 18

OVERSEAS CONTINGENTS

Y
490

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

<i>10.</i>			
------------	--	--	--

5th 5/2/20

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No. _____
 Rank _____ Promoted _____ Reverted _____ Discharge _____
 Soldier's Name _____
 Battalion *2d Const Bn*
 Beneficiary _____
 Relationship _____
 Address _____

Name _____
 Address _____
 Change of Address _____
 1 *MRS. W. WEEKS,*
6 ROADS, ST. PHILLIPS,
 2 *BARBADOES, B.W.I. 10 10.00*
 3 *A-C 931207 PTE. JAMES YOUNG*
TEN DOLLARS
 4 _____

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>June 1918</i>	<i>V 24975</i>		<i>10</i>	<i>10</i>	<i>✓</i>
<i>July</i>	<i>B 30065</i>		<i>10</i>	<i>10</i>	<i>✓</i>
<i>Aug.</i>	<i>X 36977</i>		<i>10</i>	<i>10</i>	<i>✓</i>
<i>Sept.</i>	<i>W 45667</i>		<i>10</i>	<i>10</i>	<i>✓</i>
<i>Oct</i>	<i>O 50448</i>		<i>10</i>	<i>10</i>	
<i>Nov</i>	<i>S 59057</i>		<i>10</i>	<i>10</i>	<i>✓</i>
<i>Dec</i>	<i>Y 59314</i>		<i>10</i>	<i>10</i>	
<i>Jan</i>	<i>R 73342</i>		<i>10</i>	<i>10</i>	<i>✓</i>
			<i>80</i>	<i>80</i>	

Lytle 019896-f-138 NR 414^a

A/c Closed 31-1-19.
Ret'd per Empire of Britain
Date 22-1-19. M.F.W. 187 no. 6
Clerk Phent. 28-1-19.
no. 51973. Duty 28/19. OK 28/19 R.W

M. F. W. 128
 400M. 517-1772 89-1141
 L. L. 22220-M. & D. 1963

AUTHORITY } *2M 10-4-19*
 FOR }
 NEW ACC'T. } *De Brown 31-5-18*

ASSIGNED PAY	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.
EFFECTIVE DATE:-	1 st June 1918	EFFECTIVE DATE:-	
AMOUNT:-	10.00	AMOUNT:-	

NAME:- *YOUNG, James*
NUMBER:- *931207*

NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

Mrs W Weeks Sister
6. Roads, St Phillips Barbados B.W.I.

PARTICULARS OF RANK OR	
AUTHORITY	DATE EFFECTIVE

Stopped effective 1. 1919

MR 161 17/12
266.60

UNIT AND TRANSF		
ORIGINAL UNIT:-	<i>2 Const</i>	
DATE ACCOUNT FIRST OPENED:-		
AUTHORITY	DATE EFFECTIVE	DATE LEOP SHEET 'S'

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
<i>9/12/18</i>	<i>6638</i>	<i>Ted 25 Jcs</i>	<i>4 66</i>				
<i>18/12/18</i>	<i>3596</i>	<i>BRDG.</i>	<i>9 75</i>				

DAILY RATES OF PAY AND	
AUTHORITY	PAY
	<i>1</i>

PARTICULARS OF RENDERING NON-EFFECTIVE: *Dis to Canada 21/12/18 authy MR 161. 17.12.18. 2nd 666*
Deferred 242.50 Ledger Bal 304.39

MT 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	
<i>MAR</i>	<i>Bal Forwd</i>								<i>3</i>
<i>Apr</i>	<i>P. Pay.</i>	<i>33</i>		<i>Can ass Pay (June)</i>				<i>10</i>	
				<i>Gen Rem 25 16/4 L'ow.</i>	<i>30 00</i>				
				<i>AR 10 9/4 CFC Jura</i>	<i>3 57</i>				
				<i>AR 274 22/4 - " -</i>	<i>3 57</i>				<i>2</i>
		<i>33</i>			<i>37 14</i>			<i>10</i>	
<i>May</i>	<i>P. Pay</i>	<i>34 10</i>		<i>AR 415 7/5. CFC Jura</i>	<i>3 57</i>				
				<i>AR 429 23/5. CFC Jura</i>	<i>3 57</i>				
		<i>34 10</i>			<i>7 14</i>				
<i>June</i>	<i>P. Pay</i>	<i>33</i>		<i>Ass Pay (chops above)</i>					
				<i>AR 716 7/6 CFC 5</i>	<i>3 57</i>				
				<i>✓ 879 27/6 ✓ Jura</i>	<i>3 57</i>				<i>3</i>
		<i>33</i>			<i>7 14</i>				
<i>July</i>	<i>P. Pay</i>	<i>34 10</i>		<i>Can ap</i>				<i>10</i>	
				<i>AR 956 18/7 CFC 5</i>	<i>3 57</i>				
				<i>AR 1100 25/7. ✓</i>	<i>3 57</i>				<i>3</i>
		<i>34 10</i>			<i>7 14</i>			<i>10</i>	
<i>Aug</i>	<i>P. Pay</i>	<i>34 10</i>		<i>Can ap</i>				<i>10</i>	
				<i>AR 1263 10/8. CFC 5</i>	<i>3 57</i>				
				<i>CP 26839 26/8 LIN</i>	<i>34 07</i>				
				<i>AR 1478 25/8. CFC 5</i>	<i>7 14</i>				
				<i>CP. 28148 29/8. LIN</i>	<i>12 17</i>				
				<i>AR 3030 24/8 CFC 5</i>	<i>97 33</i>				<i>20</i>
		<i>34 10</i>			<i>154 28</i>			<i>10</i>	
<i>Sep</i>	<i>P. Pay</i>	<i>33</i>		<i>Can ap</i>				<i>10</i>	
				<i>AR. 1679 24/9 CFC 5</i>	<i>3 57</i>				
				<i>AR 1883 24/9 ✓</i>	<i>3 57</i>				<i>20</i>
		<i>33</i>			<i>7 14</i>			<i>10</i>	

COMPILED BY *J. McLean*
CHECKED BY *R. [Signature]*

ASSIGNED PAY ENGLAND OR CANADA. SEPARATION ALLOWANCE. ENGLAND OR CANADA.
EFFECTIVE DATE: 1st June 1918 EFFECTIVE DATE:
AMOUNT: 10:00 AMOUNT:-

NAME: YOUNG, James
NUMBER: 931207

NAME, ADDRESS, RELATIONSHIP & AUTHORITY
Mrs W Weeks Sister
6. Road, St Phillips
Barbados B.W.I.
Stopped effective 1.1.1919

PARTICULARS OF RANK OR APPOINTMENT		
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Plt.

UNIT AND TRANSFERS
ORIGINAL UNIT: 2 Construction Bn
DATE ACCOUNT FIRST OPENED: 1 APR 1917

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET 'S' D	UNIT TRANSFERRED TO

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
9/12/18	6638	Fed 25 Feb	4 66				
18/12/18	3596	B.R.D.G.	9 75				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBSCE ALL'CE
	1	10		

PARTICULARS OF RENDERING NON-EFFECTIVE: Dis to Canada 21/12/18 authy MR 161. 17.12.18, 2nd 666 Cr 290
Deferred \$ 242.50 Ledger Bal \$ 304.39

MT 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
MAR	Bal Forward								302 47 180		
Apl	P. Pay	33	-	Can ass Pay (June) Gen Rem: 25 16 1/2 L Dow. AR 10 874 CFC June AR 274 27/4 - " -	30 00 3 57 3 57			10	288 35 185		195
May	P. Pay	34	10	AR 415 1/5 CFC June AR 429 23/5 CFC June	3 57 3 57				315 31 300		210
June	P. Pay	33	-	Ass Pay (chaps above) AR 716 7/6 CFC 5 v 879 27/6 v June	3 57 3 57				341 17		215
July	P. Pay	34	10	Can at AR 956 18/7 CFC 5 AR 1100 25/7	3 57 3 57			10	358 13 220		
Aug	P. Pay	34	10	Can at AR 1263 10/8 CFC 5 CP 26839 26/8 LIN AR 1478 25/8 CFC 5 CP 28148 29/8 LIN AR 3030 24/8 CFC 5	3 57 34 07 7 14 12 17 47 33			10	224 95 225		
Sep	P. Pay	33	-	Can at AR 1679 5/9 CFC 5 AR 1883 24/9	3 57 3 57			10	243 81 230		

NUMBER RANK NAME

MONTH PARTICULARS CR. 1. CR. 2. PARTICULARS DR. 1 DR. 2 DR. 3 DR. 4. BALANCE DEFERRED SEPARATION

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Oct	PP	34	10	cap.				10	24381	235	
				2266 12.10 CFC5	373						
				334 26.10 ✓	373						
				2387 26.10 ✓	373				26045		
		34	10	2402 11.11 ✓	746			10			
Nov	✓	33		cap 2702 11.11 ✓	373						
				cap.				10			
				2921 26.11 ✓	1306						
Decr	✓	34	10	cap.				10			
	Int on Defd Pay	13	63	3596. 18.12 ✓	973				30439	24250	
				6638. 10.12 ✓	466				29000		
		80	13		3118			20			
				190. 10.12 ^{entered} Rhyt.	973				28027		
					973						

B.O.S. to Gen 12.1.19
 20.18. 25.1.19. 25.10

28027

CONDITIONS, &c.

EFFECTIVE DATE

AUTHORITY

REG'L No. 931207 RANK _____ NAME Young James,

IF IN PERMT. CORPS } UNIT 2nd Co. Bn. TRANSFERRED TO _____ DATE _____ AUTHORITY _____

WHAT UNIT _____

PERMANENT FORCE ALLOWANCES _____ TRANSFERRED TO _____ DATE _____ AUTHORITY _____

PLACE OF ATTESTATION Pictou n.s. TRANSFERRED TO _____ DATE _____ AUTHORITY _____

DATE OF ATTESTATION Aug 31st 1916 TRANSFERRED TO _____ DATE _____ AUTHORITY _____

~~X~~ E ✓

HOSPITAL, &c.

NAME OF HOSPITAL

ASSIGNED PAY MONTHLY \$ _____ DATE EFFECTIVE _____

PAYABLE TO _____ RELATIONSHIP _____

ASSIGNED PAY MONTHLY \$ _____ DATE EFFECTIVE _____

PAYABLE TO _____ RELATIONSHIP _____

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) _____ EFFECTIVE _____ REASON _____

DISCHARGE DATE AND PLACE _____ REASON AND AUTHORITY _____

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) _____

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE) _____

LEAVES OF ABSENCE ROLLS

2		3		4	
DATE	NO.	DATE	NO.	DATE	NO.
74	205				
134	146				
207	256				
282	121				
304	217				

DEFERRED PAY _____ SER. ALLG. ENG. _____

CASH PAYMENTS					ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
1	2	3	4	CREDIT				DEBIT				
					A/S			9 85				Bal from Canada.
					-			42 85		15 -	27 85	
9 73					-		14 60	62 35		30 -	32 35	
4 87					-		4 87	90 48		45 -	45 48	
4 87					-		-	124 58		60 -	64 58	
					-		-	158 68		76 -	83 68	
					-		-	17 85	173 83	90 -	83 83	
					-		37 82	173 83				

83.

22 105

931207 Young, J

DATE	PAY		FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS				
	No. OF DAYS	RATE	AMOUNT		No. OF DAYS	RATE	AMOUNT		No. OF DAYS	RATE				AMOUNT		1		2		3		4		1	2	3
			\$	c.			\$	c.						\$	c.	No.	DATE	No.	DATE	No.	DATE	No.	DATE			
MONTH	PARTICULARS		CR.1	CR.2	PARTICULARS				DR.1	DR.2	DR.3	DR.4	BALANCE	FEED. RED. PAY	SEP. ALLGE. ENG.											
	G.A. 12m												197 22													
Nov.	P.P.		33-		AR. 833.	28 ⁹ / ₁₇	C.F.C.		3	57					120											
					" 857.	12 ¹⁰ / ₁₇	-		3	57																
					" 979.	25 ¹⁰ / ₁₇	-		3	57																
DEC			34 10		" 1098	10 ¹¹ / ₁₇	-		3	57				250 04	135											
			67 10						14	28																
JAN	1918	P.P.	34 10		Sta Sds FP.	12 ¹² / ₁₇	201. 2 ¹ / ₁₈			5	50															
					AR. 1266.	23 ¹¹ / ₁₇	2 bonds		12	49																
					" 1440.	21 ¹² / ₁₇	-		7	14				259 01	150											
			34 10						19	63		5	50													
FEB			30 80		" 1858.	24 ¹ / ₁₈	C.F.C.		3	57																
					" 1602.	14 ¹ / ₁₈	Jura C.F.C.		3	57				282 67												
			30 80						7	14																
MAR	1918	"	34 10		AR 2017	14 ² / ₁₈	" "		7	14					180											
					" 2375	18 ³ / ₁₈	" "		7	14				302 49												
			34 10						14	28																

JAN 12 1919 29

Taken on Strength.....B. O.....

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING

M. OR S.

Emp of Britain 21-1-19

DAILY RATE OF PAY AND ALLOWANCES

REGT. No. 931

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.
ADDRESS		<i>10</i>		<i>R.P.L.</i>	<i>2. C</i>
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				PLACE OF ATTESTATION
<i>No.</i>					DATE OF ATTESTATION
TO WHOM PAID	RELATIONSHIP				ASSIGNED PAY \$
ADDRESS					<i>10</i>
					PAYABLE TO
					<i>ma</i>
					ADDRESS
					<i>6</i>
					STOP PAYMENT FORM RENDERED, DATE
					DISCHARGED

BALANCE FROM PREVIOUS ACCOUNT

MONTH	PAY AND F.A.			OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY		REG. MENT CHARG	
	NO. OF DAYS	RATE	AMOUNT		C.		C.		COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3	C.		C.
			\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.			
<i>Jan. 19</i>	<i>14</i>	<i>45</i>	<i>110</i>	<i>49</i>	<i>50</i>	<i>11</i>	<i>20</i>	<i>35</i>	<i>11</i>	<i>15</i>	<i>326</i>	<i>05</i>	<i>326</i>	<i>00</i>	<i>34</i>	<i>38</i>	
				<i>230</i>	<i>40</i>								<i>70</i>				
	<i>153</i>			<i>350</i>				<i>350</i>			<i>Mar 25/19</i>	<i>147928</i>		<i>70</i>			<i>War Service Gratuity</i>
											<i>April 9/19</i>	<i>148725</i>		<i>70</i>	<i>00</i>		
											<i>May 7/19</i>	<i>580845</i>		<i>70</i>	<i>00</i>		
								<i>350</i>	<i>-</i>								

Completed
C.A.

