

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... *Cowie*
- 1a. What are your Christian names?..... *George Robert*
- 1b. What is your present address?..... *Belvidere Unit*
- 2. In what Town, Township or Parish, and in what Country were you born?..... *St. Mary's, Ontario, Can. Unit*
- 3. What is the name of your next-of-kin?..... *Benjamin Cowie*
- 4. What is the address of your next-of-kin?..... *Bolton, Eldon St. Unit - Canada*
- 4a. What is the relationship of your next-of-kin?..... *Son*
- 5. What is the date of your birth?..... *August 30th 1892*
- 6. What is your Trade or Calling?..... *Farming*
- 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, *George Robert Cowie*, 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.

G R Cowie (Signature of Recruit)

Date *MAR 3 1916* 1916 . *Geo Hall* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *George Robert Cowie*, 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.

G R Cowie (Signature of Recruit)

Date *MAR 3 1916* 1916 . *Geo Hall* (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 *Woodville* this *Eighth* day of *March* 1916.

Reuben W Thomas (Signature of Justice)

Description of George Robert Corrie on Enlistment.

Apparent Age 24 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.

2nd & 3rd finger of left hand webbed

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

2nd & 3rd toe on both feet webbed

Complexion Fair

Eyes Blue

Hair Brown

Religious denominations.
 Church of England.....
 Presbyterian.....
 Methodist 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 MAR 8 1916 1916.

Place Woodville, Ont

J. McCulloch Capt.
 Medical Officer.

109th Overseas Battalion, C. E. F.

*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.

George Robert Corrie 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.

J. J. [Signature] Lt. Col. (Signature of Officer)
 O. C. 109th Overseas Battalion, C. E. F.

Date MAR 8 1916 1916.

REGIMENTAL DOCUMENTS

NAME

Cowie George Robert

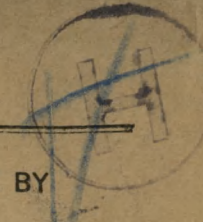
REGT. NO.

72405-9

UNIT

20th Bn

H. Q. FILE NO.



CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

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

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

1 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)

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

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

1 MEDICAL EXAMINATION (M.F.W. 129)

1 TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)

1 PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)

1 DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)

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

1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)

1 PARTICULARS OF CHARACTER (A.F.W. 3226)

1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

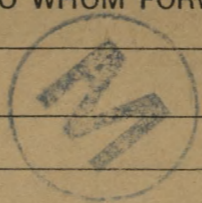
C.H. 3.

M.F.W. 67.

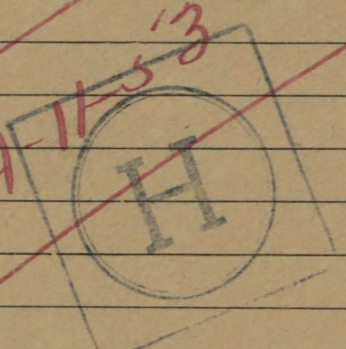
copy and

sent

per C



Deceased 14-11-53



DEATH

Category

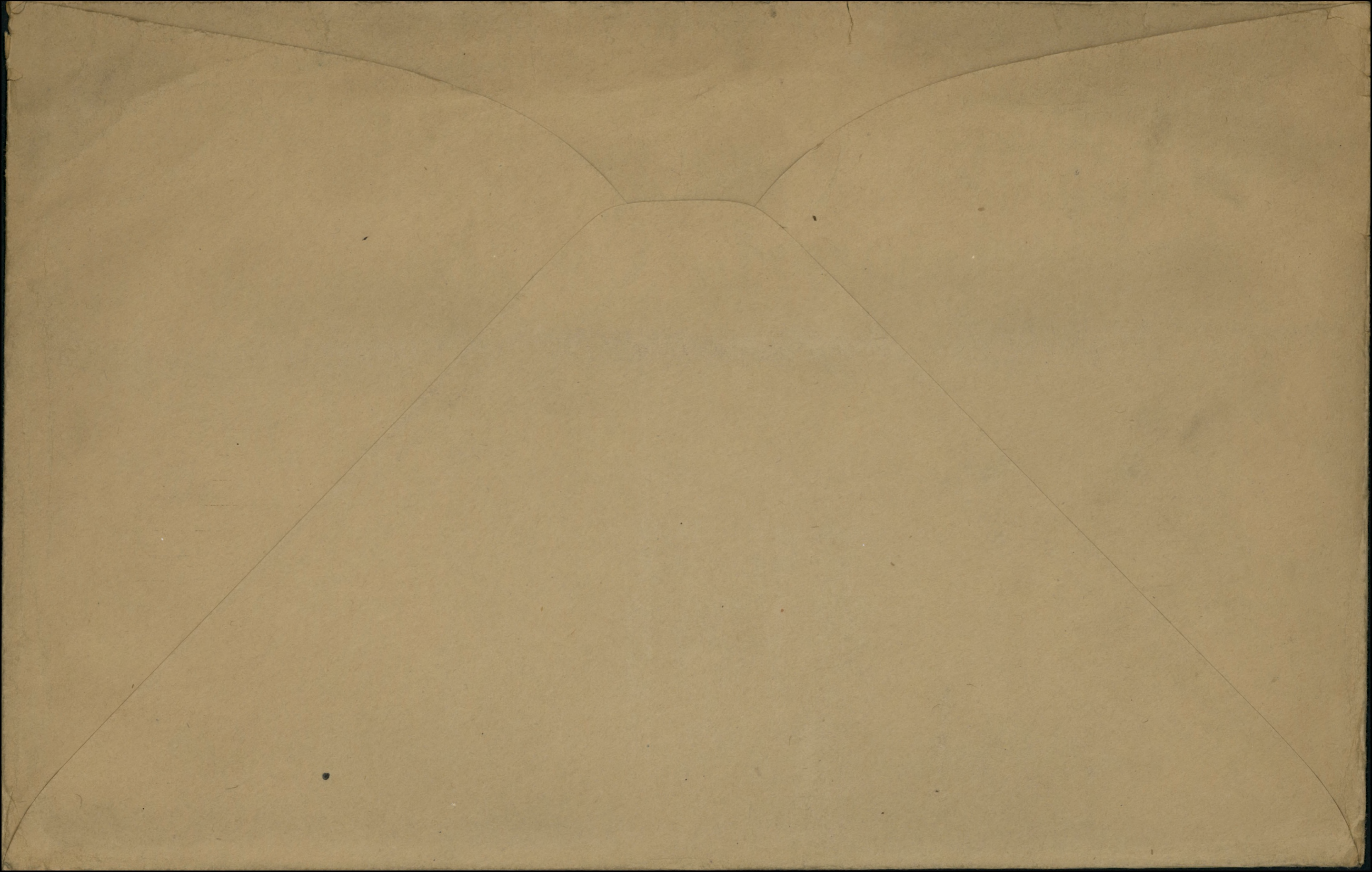
DISCHARGE

Category

Remob.

DESERTION

2,4-9
1-9
3



No. 724059. RANK *Pte*

NAME *Cornie Geo. R.*

T. O. S. 3-3-16
D. O. 96 11-3-16

UNIT *107th. Battalion*

M. D. *13*

| | | | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. | |
|-----------------------|-------------------------|--------------|---|-----------|
| PAID FROM | PAID TO | SIG OR REC'T | PARTICULARS | AUTHORITY |
| <i>1916 Mar 3</i> | <i>1916. Mar 31</i> | <i>✓</i> | | |
| <i>April.</i> | | <i>✓</i> | | |
| <i>May.</i> | | <i>✓</i> | | |
| <i>June.</i> | | <i>✓</i> | | |
| <i>July.</i> | | <i>✓</i> | | |

UNIT SAILED
JUL 23 1916



Name Cowie George

Rank

Reg. No. 724059.

Unit 109 Bn.

Robert

Pte

Next of Kin Canada.

| Date | Movement | Place | Casualty | List No. | Notified N/K O. | W.O. List |
|----------|----------|-----------|-------------|----------|-----------------|-----------|
| 25-9-16 | Isol. | Aldershot | Parotiditis | 22. | | |
| 16-10-16 | Dis | | .. | 22. | | |

SURNAME.

Cowie

CARD NO.

29

CHRISTIAN NAMES

George Robert

*SOS-112 24-519
FOLL. 11/10/16
100/151/31-5-19-17.
2020
73h.*

REGL. No.

724059

RANK

106.

UNIT

109th

FORMER CORPS

nil

NEXT OF KIN.

NAMES IN FULL

Cowie, Benjamin

RELATIONSHIP TO SOLDIER

Father

ADDRESS

Bolsover, Eldon Tp. Ont.

*also notify
CHANGE OF ADDRESS*

*Mrs J McMillan
% W J Smith
111 No 2 Beaverton
Ont*

25 APR 4-16-16

COUNTRY OF BIRTH

Canada, Mara, Tp. Ont.

DATE

Nov. - 1892

PLACE OF ATTESTATION

Woodville

DATE

Mar. 8th - 1916

Sailed from Halifax 4 ser.

S.S. "Olympic" 23/7/16 488

L. L. 10437. M. & D. 7253.

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

*3/29
9
RIC 22-5-19 98 Pte.*

MARRIED

SINGLE

yes

WIDOWER

TRADE OR CALLING

Farming

RELIGION

Methodist

DESCRIPTION.

APPARENT AGE

24

YEARS

-

MONTHS

HEIGHT

5

FEET

8

INCHES

CHEST MEASUREMENT

38

INCHES

EXPANSION

4

INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

Brown

DISTINGUISHING MARKS

2nd & 3rd toe on both feet webbed.
2nd & 3rd finger of lt. hand webbed.

MEDICAL EXAMINATION.

PLACE

Woodville

DATE

Mar. 8th 1916

Present Address, Beaverton, Ont.

NAME

Lowie G. R.

REG'T L NO

724 059

RANK AND CORPS

Pvt 109th Bn

H. Q. FILE NO. 649-

FOLLOWS

No.

FOLLOWS

CABLE

No.

DATE

NATURE OF CASUALTY

| LIST No | HOSPITAL | DATE OF ADMISSION | REMARKS |
|------------|---------------------|----------------------|--|
| 22. | Mut Isos. Aldershot | 25-9-16 | Parotiditis |
| 22 | Discharged | 16-10-16 | " |
| Q 40-2 | 2h Cas. Clg. Str | 12-10-17 | V. D. G. (10 th Cent. Cent) |
| Q 44-3 | # 57 Gen. Staples | 14-10-17 | " " " (" " ") |
| A 84-2 | Disch to duty | 1-12-17 | " " " Cent Out Regt |
| A. 142 (") | No 4 Can. Fld Amb. | 11-2-18 | Bronchitis (" " ") |
| A. 152 1/2 | Disch to duty | 24-2-18 | " " |

100
P
K
Number

✓
424059

Rank

✓
pt.

B
✓

Surname

✓
COWIE

Christian Name

✓
George Robert

Units

20th Bn Can Exp

Theatre of War

✓
France

Date of Service

28-11-16 ✓

Remarks

Latest Address

✓
Beaverton, Ont.

Roll No.

200m.-6-21.M.

Page 20 724

DATE AND PLACE OF ORIGIN

*DUE TO SERVICE
*NOT DUE TO SERVICE

HOSPITAL AS AN ADMISSION

WHERE FROM)

IT

IN CATEGORY

INVALID

WHERE TO)

CONDITIONS DIAGNOSED

ADDRESS

HOSPITAL

STATION

* CROSS OUT CONDITION NOT APPLICABLE.

DESP. MAR 3 1923
REGN. NO. 6A1230

(OVER)

Surname **Cowie** Christian Name or Names **G.R.** Reg. No. **724059**

Rank _____ Unit _____ Co. _____ Troop _____ Batty. _____

Pte. **109th Bn. 20 Batt 16.6**

Hospital **Aldershot Mil Isolation** Date of Admission **25.9.16**

Transferred **22.6.16 Stat.** Hosp. **12-10-17**

51 Genl Hosp. Etaples Hosp. **14.10.17**

#4 Can. Fld. Amb. Hosp. **11.2.18**

Hosp. _____

Diagnosis

Parotiditis.

(1) Later Diagnosis (if changed)

V.D.G. gl

(2)

Bronchitis

(3)

Additional Diagnosis: if more than one state present *Rw*

DISPOSITION **Dis. 16.10.16** Date

C.L. 19.10.16 22

Dis to duty 1-12-17
REMARKS

19-10-17 A 40(2)

Dis to duty 24.2.18.

24.10.17 A 44(3)

10-12-17 a.m. 2

18.2.18 A 142-1

1.3.18 A 152.

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

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 50m.-4-16.
 1772-39-819.

Sheet No. 2.

Ms. J. W. Mullan

L. L. Job 310.-Req. 6574.

PAYMENTS.

Name of Soldier

Bowie, J. R.

72 4059 "C" Coy

J. R.
XE 109th Baltn

| Month. | Year. | Cheque No. | Amt. | Remarks. |
|--------|-------|------------------|---------------|----------------------------------|
| April | 1916 | | | |
| May | | | | |
| June | | | | |
| July | | | | |
| Aug. | | 15200 | 15 | <i>Cancelled</i> |
| Sept. | | X16871 | 15 | |
| Oct. | | | | |
| Nov. | | P27909 | 45 | <i>to adjut. Co. F. 16/11/16</i> |
| Dec. | | 137424 | 15 | |
| Jan. | 1917 | Ch 37703 | 15 | |
| Feb. | | B43377 | 15 | |
| March | | R46655 | 15 | 15 |
| April | | Q1243 | 15 | 15 |
| May | | X7267 | 15 | |
| June | | O13976 | 15 | 15.8 |
| July | | 620483 | 15 | 15 |
| Aug. | | I27698 | 15 | 15 |
| Sept. | | H34748 | 15 | 15 |
| Oct. | | V46261 | 15 | |
| Nov. | | Z52757 | 15 | |
| Dec. | | H51969 | 15 | 25.5 |
| Jan. | 1918 | | | |
| Feb. | | | | |
| March | | | | |
| April | | | | |
| May | | | | |
| June | | | | |
| July | | | | |

YBR.

\$15.00

AUG 1 1916

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. | | | | |

MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

G. R.

To Whom Mrs J. McMillan
 Address Beaverton

By Whom Assigned Louie, J. R.

2 W. J. Smith RR # 2
R. R. # 2.

Out
7-10-16
HW

Regtl. No. 724059

Rank Plt

Corps C" Co. 109th Batta.

Rate \$ 15.00

AUG 1 1916

PAYMENTS

| Month | Year | Cheque No. | Amt. | REMARKS |
|-------|------|------------|------|---------|
| Aug. | 1914 | | | |
| Sept. | | | | |
| Oct. | | | | |
| Nov. | | | | |
| Dec. | | | | |
| Jan. | 1915 | | | |
| Feb. | | | | |
| March | | | | |
| April | | | | |
| May | | | | |
| June | | | | |
| July | | | | |
| Aug. | | | | |
| Sept. | | | | |
| Oct. | | | | |
| Nov. | | | | |
| Dec. | | | | |
| Jan. | 1916 | | | |
| Feb. | | | | |
| March | | | | |

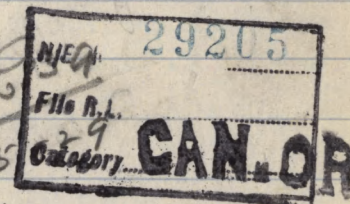


12

| 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. | | | | |
| 10-4-19 24 6 19 | "O"ving owing | T.O.S. from 20 Bn. SOS TO CAN | Withy | 6-4-19 13 5 19 | N.O.A. Pt 6i 60-1-27 1575719 |

A.G.R. Rank Name **COWIE, George Robert** ✓ Reg'l No. **724059** ✓
 Unit **109th Bn.** If in perm. Corps, }
 What Unit? } Married or Single **Single.** ✓
 Place and Date of Enlistment **Woodville, 3rd March, 1916.** ✓ Place of Birth **Mara Tp., Ontario, Co., Ont.**
 Name and Address, Next-of-Kin **Benjamin Cowie,** ✓
Bolsover, Eldon Tp., Ont., Canada. ✓ Relationship **Father.** ✓
 Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship
 Discharge, Date and Place Reason Character

H. W. & V., Ltd.—7165-16.



| 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. | | | | |
| | | | | | |
| | | Arrived in England per H. M. T. 2810 | | 31-7-16 | |
| 26-9-16 | 109 th Bn | Admtd to Isolation Str Aldershot | Bramshott | 25-9-16 | Mumps. Pte II. D.O. 270 C.L. 22 |
| 17-10-16 | do | Dis from Isolat. Str. Aldershot | do | 16-10-16 | Pte II. D.O. 291 C.L. 22 |
| 28-11-16 | do | S.O.S. on Train to 20 th Bn | Witley | 28-11-16 | 333 |
| 11-12-16 | 20 th Bn | Taken on strength. | field | 29-11-16 | 75 |
| 18-10-17 | — | N ^o 22 Cash. Clearing Station | — | 12-10-17 | C.L.A. 40(R) V.D.G. |
| 23-10-17 | C.L. — | N ^o 51 Gen Hosp. | Etaples | 14-10-17 | — 44(3) — |
| 8-12-17 | 1 st COR (20) | Discharged to Duty | | 1-12-17 | " 84(2) " |
| 8-4-19 | 20 Bn | Proc to England | Pte field | 5-4-19 | do 32 |
| | | <i>over</i> | | | |

A.F.B. 103 CHECKED

11 DEC 1916

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

Casualty Form—Active Service.

M. F. W. 54.
150M. 10-15.
H.Q. 1772-39-720.

Unit, Regiment or Corps 20th Bn

Regimental No. 724059 Rank Pte Name Cowie George Robert
C. E. F.

Enlisted (a) 3.3.16 Terms of Service (a) _____ Service reckons from (a) 3.3.16

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) _____

| 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 | | | | |
| | "O" WING | S. O. S., O. M. E. C. ON PROCEEDING TO CANADA | WITLEY | 10/5/19 | O. PT. 2 No. 29 |
| | | | | | <p><i>W. Deakin</i> Lieut., OFFICER I/c RECORDS, "O" Wing C. C. G.</p> <p><i>W. Roberts</i> Lieut. For O. C. No. 2 District Depot.</p> |

*Sailing 60**

14-5-19!

15.5.1919

15.5.1919

15.5.1919

T. O. S. No. 2 DISTRICT DEPOT, TORONTO. 1919 PART II D. 151

(DISCHARGED FROM H. M. S.) No. 2 DIS. DEPOT, PART II D. U 151

(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.

| Date | From whom received | 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. |
|------|--------------------|--|-------|------|---|
| | | | | | |

100-211182
101-1-11

W. H. ...

MAILED FROM ...
MAY 2 1942

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge

Class "A" No. 212043

THIS IS TO CERTIFY that No. 724059 (Rank) Pte

Name (in full) Cowie George Robert enlisted in the 109th Bn

CANADIAN EXPEDITIONARY FORCE at Woodville Bn on the Eighth day of March 1916

HE served in 20th Bn France

Demobilization.

and is now discharged from the service by reason of Medical Unfitness.

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

Age 26 yrs 5m

Height 5ft 8in

Complexion Fair

Eyes Blue

Hair Brown

G A Cowie

Signature of Soldier.

Marks or Scars Ring & Big finger on

L Hand webbed

webbed toes

For Issuing Officer.

O.C. No. 2 District Depot.

Rank

Date MAY 24 1919 19

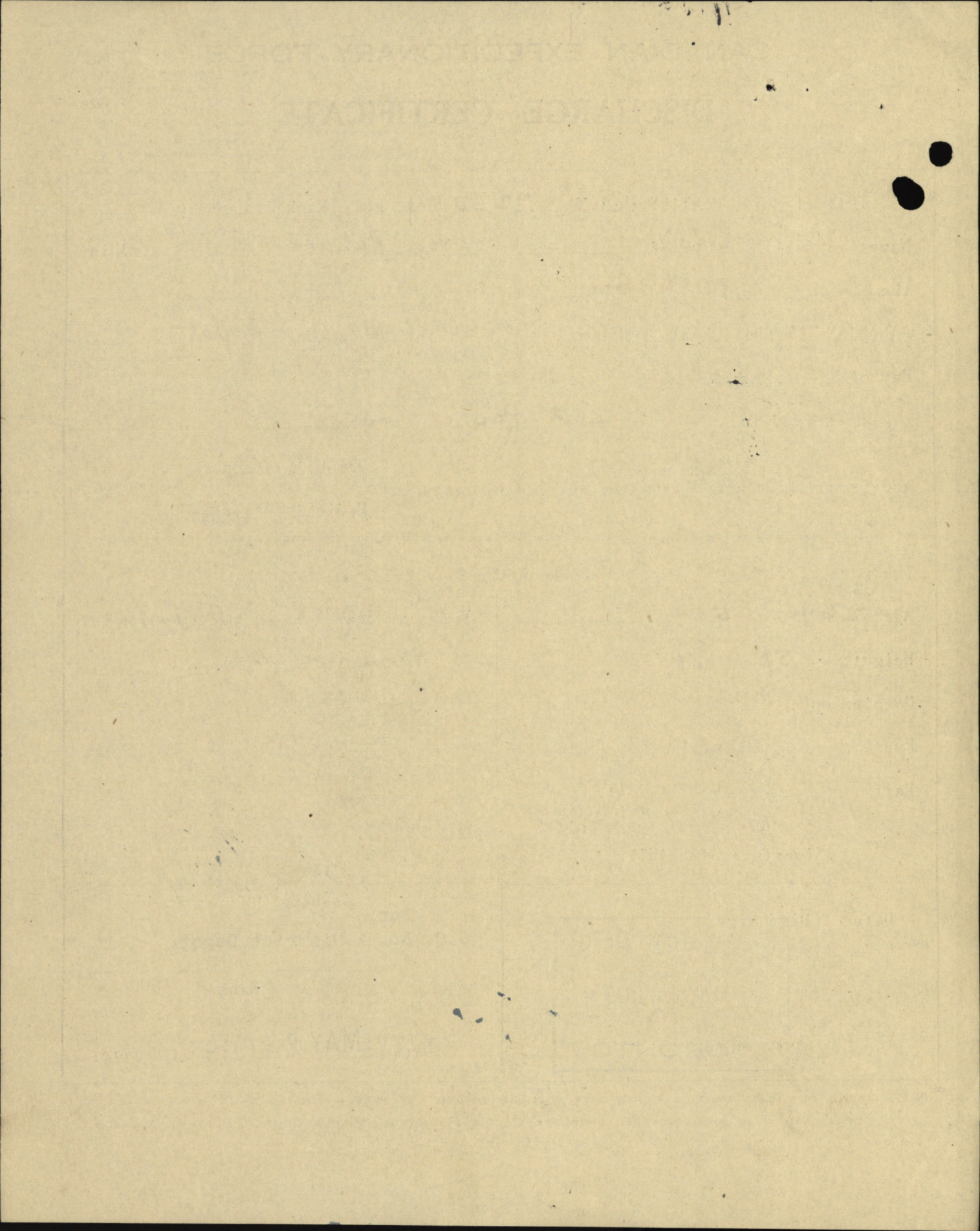
Date of Discharge

No. 2 DISTRICT DEPOT

MAY 24 1919

TORONTO

NB.- 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 ARMY DENTAL CORPS, O.M.F.C.
DENTAL CERTIFICATE FOR DEMOBILIZATION

DIRECTIONS TO
 DENTAL OFFICERS

NAME OF SOLDIER (Block letters) COWIE G. R.

REGIMENT 20th Battn RANK Pte No. 724059

Date of Examination in England 9 APR 1919 Date of Examination in France _____

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 3. 13.

3. CROWNS

4. DENTURES

- (a) Full Upper
- (b) Part Upper 3. 4. 8. 9. 10. 13.
- (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 Yes
- (b) In England
- (c) In France

Signature of Dental Officer G. R. Hynes capt

CANADIAN ARMY DENTAL CORPS (C.A.D.C.)
DENTAL CERTIFICATE FOR DEMOBILIZATION

DIRECTIONS TO
DENTAL OFFICERS
This form will be
filled out by the
dental officer in
charge of the
unit. It should be
filled out for
all dental personnel
in the unit who
are to be demobilized.
The form will be
forwarded to the
C.A.D.C. for
processing.

UNIT NO. _____
REGIMENT NO. _____
BATTALION NO. _____
COMPANY NO. _____
GRADE _____
NAME _____
SERIAL NO. _____
DATE OF BIRTH _____
PLACE OF BIRTH _____
MARRIED _____
CHILDREN _____
RELIGION _____
EDUCATION _____
OCCUPATION _____
MILITARY SERVICE _____
REMARKS _____

1. Name of the dental officer in charge of the unit: _____
2. Name of the dental officer who examined the patient: _____
3. Name of the dental officer who prepared this certificate: _____
4. Name of the dental officer who signed this certificate: _____
5. Name of the dental officer who issued this certificate: _____
6. Name of the dental officer who received this certificate: _____
7. Name of the dental officer who filed this certificate: _____
8. Name of the dental officer who reviewed this certificate: _____
9. Name of the dental officer who approved this certificate: _____
10. Name of the dental officer who rejected this certificate: _____
11. Name of the dental officer who referred this certificate: _____
12. Name of the dental officer who referred this certificate: _____
13. Name of the dental officer who referred this certificate: _____
14. Name of the dental officer who referred this certificate: _____
15. Name of the dental officer who referred this certificate: _____
16. Name of the dental officer who referred this certificate: _____
17. Name of the dental officer who referred this certificate: _____
18. Name of the dental officer who referred this certificate: _____
19. Name of the dental officer who referred this certificate: _____
20. Name of the dental officer who referred this certificate: _____

424059.

ORIGINAL MEDICAL HISTORY SHEET.

ORIGINAL

Surname Bowie Christian Name George Robert

Examined { on 3rd day of March 1916
at Woodville Ont
Birthplace { City or Town Mara Tp
County Ontario

Approved by J McCulloch Capt.
Rank Medical Officer M.O.
109th Overseas Battalion, C. F. F.

Apparent age 23 years
Trade or occupation Farming
Height 5' Feet 8 Inches
Weight 148 Lbs.
Chest measurement { Minimum 34 inches
Maximum expansion 38 inches
Physical development Good
Small-Pox Marks none

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

Vaccination Marks { Arm Right none Left none
Number one

| Date | Result | VACCINATIONS. |
|----------------|-------------|-------------------------|
| <u>17.3.16</u> | <u>fit</u> | <u>J McCulloch</u> M.O. |
| <u>7.4.16</u> | <u>good</u> | <u>J McCulloch</u> M.O. |
| | | M.O. |

When Vaccinated last March 19th 1916
(a) Marks indicating congenital peculiarities or previous disease None

| Date | Result | ANTI-TYPHOID INOCULATIONS, ETC. |
|----------------|-------------|---------------------------------|
| <u>15.1.16</u> | <u>good</u> | <u>J McCulloch</u> M.O. |
| <u>15.5.16</u> | <u>"</u> | <u>J McCulloch</u> M.O. |
| <u>25.5.16</u> | <u>"</u> | <u>J McCulloch</u> M.O. |

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

Enlisted on 3rd day of March 1916 at Woodville, Ont.

| | CORPS. | REG'L NUMBER. | HABITS. | DATE. |
|----------------------|--------------------------------------|----------------|---------|----------------|
| Joined on enlistment | <u>109th Bn. C. F. F.</u> | <u>724059.</u> | | <u>3.3.16.</u> |
| Transferred to.. .. | <u>20th Bn</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.

To be made out in duplicate.

H.Q. 54-21-23-53
DUPLICATE

6
15

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins.....

109th OVERSEAS BATTALION, C. E. F.

(2) Regimental Number.....

124059.

(3) Full Name of Soldier.....

George Robert Cowie.

(4) Place of Birth.....

Beecham Ontario Canada.

(5) Are you married, or not?.....

No.

(6) If married, state,

(a) Full name of your wife.....

Nil.

(b) Present Postal Address.....

Nil.

(7) Are you a widower?.....

Nil.

(8) Have you any children?.....

Nil.

If so, give number of boys and girls.....

Nil.

Also their names and ages.....

(9) Is your Father alive? Yes.

If so, state name and address Benjamin Cowie Belsaver Ontario Canada.

(10) Is your Mother alive? No.

If so, state name and address Nil.

(11) If your Mother is a widow Nil.

Are you her sole support, or not? Nil.

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

Nil.

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

Nil.

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

Nil.

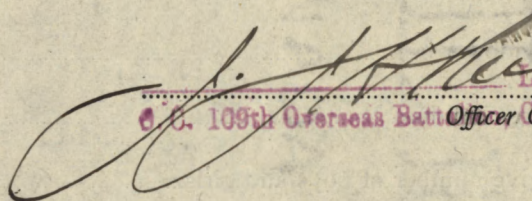
(15) Are you insured? No.

If so, in what Company Nil.

Have you made arrangements for payment of your Insurance premium Nil.

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Date July 7, 1916.


Lt. Col.
C. G. 109th Overseas Batts Officer Commanding.

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. 724059 Rank PTE Surname COWIE
 (Given name in full) GEORGE ROBERT
 Unit or Corps 20th BN Birthplace MARRA TOWNSHIP, ONTARIO

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

I. GENERAL DESCRIPTION:

Physique good Weight 145 lbs. Height 5-8 in. Colour of Eyes hazel
 Nutrition good
 Pulse 75 Regular
 Condition of arteries normal
 Vision Rt. 4/12 Left 4/12
 Hearing (conversational voice) Rt. 4 ft.
 Left 4 ft.

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

Ring & big fingers L hand webbed
Webbed toes

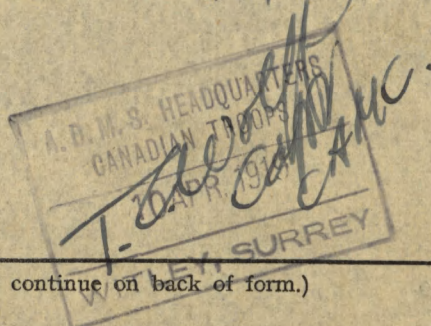
Opinion as to general health and physical condition good

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 yes Cardio-Vascular System no
 Special Senses no Integumentary System no Respiratory System yes
 Disturbance of Mentality no Muscular System no Digestive System no
 Osseous and Joint System yes 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.

Impigo 25-9-16 no disability now
VDG 12-10-17 no disability now
Bronchitis 11-2-18 no disability now
Fracture. L humerus. 1909 no disability now



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

[OVER]

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Worley.....(Overseas)

Date

9-4-19

Signed.....

Wulchshen 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

G. R. Bowie

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

THIS SECTION FOR USE IN CANADA—

Examined at(Canada)

Date

Signed

M.O.

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

Signature

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

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

MARRIED OR SINGLE

single

PLACE OF BIRTH

Maia Sp. Ontario Co.

NAME AND ADDRESS OF NEXT OF KIN

Benjamin Cowie

Bolsaver, Eldon Sp. Ont.

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 |
|-------------|----------------|-----------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

ADMISSIONS TO HOSPITAL, &c.

| DATE ADMITTED | DATE DISCHARGED | V. OR A. | NAME OF HOSPITAL |
|-----------------|-----------------|-----------|---------------------------------|
| <i>15/10/17</i> | <i>1/12/17</i> | <i>D.</i> | <i>Bolsaver, Eldon Sp. Ont.</i> |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

REG'L. No. *724059* RANK

Pte NAME *Cowie G.W. Robert*

IF IN PERMT. CORPS
WHAT UNIT

UNIT *109th Bn*

TRANSFERRED TO *20th Bn*

DATE *1-1-17*

AUTHORITY *DO 333 28-11-16*

PERMANENT FORCE ALLOWANCES

TRANSFERRED TO

DATE

AUTHORITY

PLACE OF ATTESTATION

Woodville

TRANSFERRED TO

DATE

AUTHORITY

DATE OF ATTESTATION

March 3-1916

TRANSFERRED TO

DATE

AUTHORITY

ASSIGNED PAY MONTHLY \$

15.00

DATE EFFECTIVE

Aug. 1st 1916

PAYABLE TO

Mrs. J.M. Mullan R.R. #2 Braunter, Ont.

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)

| 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 | | | | | | | | | | | |
| | | | \$ | c. | | | \$ | c. | | | \$ | c. | | | | | | | | | | | | | | | | | | | | No. | DATE | No. | DATE | No. | DATE | No. | DATE |
| <i>July 31</i> | | | | | | | | | | | | | | | <i>21 85</i> | <i>21 85</i> | | | | | | | | | | | | | | | | | | | | | | | |
| <i>Aug 31</i> | <i>31</i> | <i>100</i> | <i>31</i> | | <i>31</i> | <i>10</i> | <i>310</i> | | | | | | | | <i>34 10</i> | <i>21 98.16</i> | | | | | | | | | | | | | | | | | | | | | | | |
| <i>Sept 30</i> | | <i>30</i> | | | | | <i>3</i> | | | | | | | | <i>33</i> | <i>52.38.16.81</i> | | | | | | | | | | | | | | | | | | | | | | | |
| <i>Oct 31</i> | | <i>31</i> | | | | | <i>310</i> | | | | | | | | <i>34 10</i> | | | | | | | | | | | | | | | | | | | | | | | | |
| <i>Nov 30</i> | | <i>30</i> | | | | | <i>3</i> | | | | | | | | <i>33</i> | <i>190.30.17.16</i> | | | | | | | | | | | | | | | | | | | | | | | |
| <i>Dec 31</i> | | <i>31</i> | | | | | <i>310</i> | | | | | | | | <i>34 10</i> | <i>269.30.11.16</i> | | | | | | | | | | | | | | | | | | | | | | | |
| <i>1917</i> | | <i>15 30</i> | | | | | <i>1530</i> | | | | | | | | <i>34 10</i> | <i>207.15.11.16</i> | | | | | | | | | | | | | | | | | | | | | | | |
| <i>Jan 31</i> | <i>31</i> | <i>110</i> | | | | | <i>3410</i> | | | | | | | | <i>34 10</i> | <i>149.16.1.11.16</i> | | | | | | | | | | | | | | | | | | | | | | | |
| <i>Feb 28</i> | <i>28</i> | <i>110</i> | | | | | <i>3080</i> | | | | | | | | <i>30 80</i> | <i>1700.6</i> | | | | | | | | | | | | | | | | | | | | | | | |
| <i>March 31</i> | | <i>34 10</i> | | | | | | | | | | | | | <i>34 10</i> | <i>187.3.17.3</i> | | | | | | | | | | | | | | | | | | | | | | | |
| <i>April 30</i> | <i>30</i> | <i>110</i> | | | | | <i>33</i> | | | | | | | | <i>33</i> | | | | | | | | | | | | | | | | | | | | | | | | |
| <i>May 31</i> | | <i>34 10</i> | | | | | | | | | | | | | <i>34 10</i> | <i>9.17.4</i> | | | | | | | | | | | | | | | | | | | | | | | |
| <i>June 30</i> | | <i>33</i> | | | | | | | | | | | | | <i>33</i> | <i>72.30.4</i> | | | | | | | | | | | | | | | | | | | | | | | |
| | | <i>367 40</i> | | | | | | | | | | | | | <i>33</i> | <i>132.21.5</i> | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | <i>21 85</i> | <i>389 25</i> | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

b

bl

4005-95-22/16

4005-206-3/16

DO 333-28-11-16 Jld

to 20th Bn: eff 1-1-17

14 days \$2.45. 2/1/17

724059 Ste Bowie G.R.

| 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. | DATE | NO. | DATE | NO. | DATE | | | | NO. | DATE | | | | 1 | 2 | 3 | 4 | CREDIT | DEBIT |
| | | | \$ | C. | | | | | | \$ | C. | | | | | | | | | | | | | | | | | | | | |
| | | | 367 | 40 | | | | | 21 85 | 389 25 | | | | | | | 58 69 | 17 77 | | | 165 | 16 80 | 258 26 | 130 09 | | | | | | | |
| July 31 | 100 | 34 | 10 | | | | | | 34 10 | 274 | 2/6 | | | | | | 2 68 | | | | 15 | | 17 68 | 147 41 | | | | | | | |
| Aug 31 | | 34 | 10 | | | | | | 34 10 | 192 | 8/6 | | | | | | 5 36 | | | | 15 | | 20 36 | 141 15 | | | | | | | |
| Sept 30 | | 33 | | | | | | | 33 | 410 | 20 | 584 | 30/8 | | | | 2 68 | | | | 15 | | 28 39 | 165 76 | | | | | | | |
| | | | 468 | 60 | | | | | 21 85 | 490 45 | 339 | 9/7 | 540 | 5/14/8 | | | 2 67 | 2 08 | | | 210 | 16 80 | 324 69 | | | | | | | | |

| MONTH | PARTICULARS | CR.1 | CR.2 | PARTICULARS | DR.1 | DR.2 | DR.3 | DR.4 | BALANCE | DEFER. PAY | SEF. ALLICE ENG. |
|-------|--------------------------|-------|------|-------------|------|------|------|------|-----------|------------|------------------|
| 1917 | Sept 30 Balance | | | | | | | | 165 76 | | |
| | Oct P. pay | 34 10 | | | | | | | 15 184 86 | | |
| | Nov P. pay | 33 | | | | | | | 15 | | |
| | AR 684. 30/9. 20 Pm | | | 268 | | | | | | | |
| | 602 19/9 " | | | 268 | | | | | | | |
| | 733 30/9 " | | | 107 07 | | | | | | | |
| Dec | P. pay | 34 10 | | | | | | | 15 | | |
| 1918 | Jan do | 67 10 | | | | | | | 30 80 73 | | |
| | Jan do | 34 10 | | | | | | | 15 | | |
| | AR 1108. 8/2 2 Pm | | | 13 38 | | | | | | | |
| | 727. 23/12. 20w.e.c.c. | | | 3 57 | | | | | 15 82 88 | | |
| Feb | do | 30 80 | | | | | | | 15 | | |
| | AR 887. 12/1. 20w.e.c.c. | | | 4 46 | | | | | | | |
| | 928. 3/1. 10w.e.c.c. | | | 3 57 | | | | | 15 90 65 | | |
| Mar | do | 34 10 | | | | | | | 15 124 75 | | |
| | AR 1038 22/2 10w.e.c.c. | | | 4 46 | | | | | 35 06 | | |
| | 1293 25/2 20w.e.c.c. | | | 3 57 | | | | | | | |
| | 1319. 12/3 20w.e.c.c. | | | 4 46 | | | | | | | |
| | 1384 23/3 " | | | 3 57 | | | | | 15 93 69 | | |
| | | 34 10 | | | | | | | 16 06 | | |

* Strike out whichever inapplicable.

| | | | |
|------------------|------------------------------|----------------------|----------------------|
| ASSIGNED PAY | ENGLAND CANADA | SEPARATION ALLOWANCE | ENGLAND or CANADA |
| EFFECTIVE DATE:- | 1.8.16 | EFFECTIVE DATE:- | |
| AMOUNT:- | 15 ⁰⁰ | AMOUNT:- | |

NAME:- *COWIE George Robert.*
NUMBER:- *724059*

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 J Mc Millan
R.R. #2. Beaverton Ont.
stopped off 1 1/2

| PARTICULARS OF RANK OR APPOINTMENT | | |
|------------------------------------|----------------|---------------------|
| AUTHORITY | DATE EFFECTIVE | RANK OR APPOINTMENT |
| | | <i>Private</i> |

UNIT AND TRANSFERS

ORIGINAL UNIT:- *1.09 Batt*
DATE ACCOUNT FIRST OPENED:- *1.8.16.*

| AUTHORITY | DATE EFFECTIVE | DATE LEDGER SHEET T'S'F'D | UNIT TRANSFERRED TO |
|-----------|----------------|---------------------------|---------------------|
| | | | <i>20 Batt</i> |

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>4/4/17</i> | <i>269</i> | <i>Lon R Field</i> | <i>25</i> | | | | |
| <i>9 1/2</i> | <i>269</i> | <i>W. J. J. J.</i> | <i>48.67</i> | | | | |
| | | | <i>49.02</i> | | | | |

| DAILY RATES OF PAY AND ALLOWANCES | | | | |
|-----------------------------------|-------------|-----------|--------|----------------|
| AUTHORITY | PAY | F.A. | P.F.A. | SUBS'CE ALL'CE |
| | <i>1.00</i> | <i>10</i> | | |

PARTICULARS OF RENDERING NON-EFFECTIVE: *Disch'd. to Canada 1 1/2, Wiltles N/R A/6848-1279, Wiltles, 14/22, Co. B. 27.50*

| MONTH 1918 | PARTICULARS | CR 1 | CR 2 | PARTICULARS | DR 1 | DR 2 | DR 3 | DR 4 | BALANCE | DEFERRED | SEPARATION |
|---------------|----------------|-----------|------|---|--------------|------|------|-----------|--------------|----------|------------|
| <i>Mar 31</i> | <i>Bal Fwd</i> | | | | | | | | <i>9369</i> | | |
| <i>Apr</i> | <i>B. Pay</i> | <i>33</i> | | <i>AR. 10. 11/4. 20 Br</i> | <i>446</i> | | | | | | |
| | | | | <i>Can A.P.</i> | | | | <i>15</i> | | | |
| | | | | <i>AR. 75. 23/4. 20 Br</i> | <i>357</i> | | | | <i>10366</i> | | |
| <i>May</i> | <i>do</i> | <i>33</i> | | <i>Can A.P.</i> | <i>803</i> | | | <i>15</i> | | | |
| | | | | <i>AR. 141. 23/5. 20 Br</i> | <i>446</i> | | | <i>15</i> | <i>11830</i> | | |
| <i>June</i> | <i>do</i> | <i>33</i> | | <i>Can A.P.</i> | <i>446</i> | | | <i>15</i> | | | |
| | | | | <i>AR. 208. 12/6. 20 Br</i> | <i>803</i> | | | | | | |
| | | | | <i>274. 30/6. "</i> | <i>357</i> | | | | <i>12470</i> | | |
| <i>July</i> | <i>do</i> | <i>33</i> | | <i>Can A.P.</i> | <i>1166</i> | | | <i>15</i> | <i>14380</i> | | |
| | | | | <i>AR. 432. 12/7. 20 Br</i> | <i>446</i> | | | | | | |
| | | | | <i>537. 25/7. 468 B.</i> | <i>357</i> | | | <i>15</i> | <i>13577</i> | | |
| <i>Aug</i> | <i>do</i> | <i>33</i> | | <i>Can A.P.</i> | <i>803</i> | | | <i>15</i> | <i>15487</i> | | |
| | | | | <i>AR. 662. 20/8. "</i> | <i>357</i> | | | | <i>15130</i> | | |
| <i>Sept</i> | <i>do</i> | <i>33</i> | | <i>Can A.P.</i> | <i>357</i> | | | <i>15</i> | <i>16930</i> | | |
| | | | | <i>799. 10/9. 20 Br</i> | <i>714</i> | | | | <i>16216</i> | | |
| | | | | <i>AR. 835 30/9</i> | <i>9733</i> | | | | | | |
| | | | | <i>908 29/9</i> | <i>892</i> | | | | | | |
| | | | | <i>865 27/9</i> | <i>357</i> | | | | <i>5234</i> | | |
| | | | | | <i>11696</i> | | | <i>15</i> | | | |
| <i>Oct</i> | <i>do</i> | <i>33</i> | | <i>Can A.P.</i> | | | | <i>15</i> | | | |
| | | | | <i>C.P. 43521 - 7/10/18</i> | <i>5353</i> | | | | | | |
| | | | | <i>AR. 1217-29/10/18 - 18th Br</i> | <i>373</i> | | | | <i>1418</i> | | |
| | | | | | <i>5726</i> | | | <i>15</i> | | | |

to while day of arrival 17/19

(over)

NUMBER

RANK

NAME

| MONTH | PARTICULARS | CR. 1. | CR. 2. | PARTICULARS | DR. 1 | DR. 2 | DR. 3 | DR. 4. | BALANCE | DEFERRED | SEPARATION |
|-------|-------------------------|--------|--------|---|-------|-------|-------|--------|---------|----------|----------------------|
| | | | | Balance Forward | | | | | 14.18 | ✓ | |
| Nov. | P. Pay Nov. Dec. & Jan. | 10120 | | af 482-18/11-4 Bde. | 3.73 | | | | | | |
| | | | | af 1006-24/11-2, 4 Bde. | 13.06 | | | | | | |
| | | | | Cal. Nov. Dec. & Jan. | | | | | 45- | 53.59 | accepted 2.6/3/19 |
| | | 10130 | | | 16.79 | ✓ | | | 45- | | |
| (Feb) | | 6490 | | 1849 ¹⁸ / ₁₂ 4 Bde. | 1.30 | | | | | | |
| | | | | 1405 ¹⁸ / ₁₂ ✓ | 6.49 | | | | | | |
| | | | | 2346 ¹⁸ / ₁₂ ✓ | 3.79 | | | | | | |
| | | | | 3090 ¹⁸ / ₁₂ ✓ | 3.73 | | | | | | |
| | | | | 3587 ¹⁸ / ₁₂ ✓ | 3.73 | X | | | | | |
| | | | | 1604 ¹⁸ / ₁₂ S. e. c. # 2 | 7.30 | | | | | | |
| | | | | 5705 ¹⁸ / ₁₂ K Bde. | 3.65 | | | | | | |
| | | | | | | | | | 58.52 | | |
| | | 6490 | | | 29.97 | | | | 30 | | |
| | | | | | | | | | 30 | | |
| apl | | 33 | | | | | | | 15 | | |
| | | | | 269 ¹⁰ / ₅ O. W. | 48.67 | | | | | | |
| | | | | 1395 ¹⁰ / ₅ ✓ | 9.73 | | | | | | |
| | | | | 35-13 ¹⁰ / ₅ ✓ | 9.73 | | | | | | |
| | | 33 | | | 68.13 | | | | 15 | 8.39 | |
| July | | | | Att. 4/4/17 Q4005 | 35 | | | | | 8.04 | |

A

War Service Badge
Class "A" No. 22043

11-3-32
S.S. Baronia
O.C. 1

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)

1. No. 724059

2. Rank. Pte

3. Name. Cowie George Robert

4. Unit. 204 Bn

5. Date of Discharge. MAY 24 1919

Place Toronto

S.S. Baronia
Liverpool 14-5-19.

6. Reason for Discharge

Demobilized

(H)

7. Authority.

No. 2, D.D., Part II, D.O. No. 157

8. Proposed Residence after Discharge

Bellefleur Ont.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate
M. F. W.?

Discharged 11-5-32

G.R. Cowie

Signature of Soldier.

10.

No. 2 DISTRICT DEPOT
MAY 24 1919
TORONTO

CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place TORONTO

Date

Signature

For
O.C. No. 2 District Depot.
(O.C. Discharging Unit.)

[Signature]

LIST OF DISCHARGE DOCUMENTS

Abstract Paper, Theoretical
on Pathology of Heart
First Cardiac Report
Cancer, Fourth
Last Cardiac Report
Certificate that patient is cured
Medical History Sheet
Proceedings of Medical Board
Eventual History Sheet
Medical Report
Hospital Cardiac Report
Cancer Cardiac Report

LIST OF DISCHARGE DOCUMENTS.

| | |
|--|-------------------------------------|
| Attestation Paper, Triplicate..... | Militia Form W. 23 |
| or Particulars of Recruit..... | Militia Form W. 133 |
| Field Conduct Sheet..... | Militia Form W. 178 or A.F.B. 122 |
| Casualty Form..... | Militia Form W. 54 or A.F.B. 103 |
| Last Pay Certificate..... | Militia Form W. 44 |
| Certificate that missing documents are unobtainable..... | |
| Medical History Sheet..... | Militia Form B. 313 or A.F.B. 178 |
| Proceedings of Medical Board..... | M.F.B. 227, A.F.B. 179 or A.F.A. 45 |
| Dental History Sheet..... | Militia Form B. 465 |
| Medical Report..... | M. F. W. 129 or D. M. S. 1375 |
| Regimental Conduct Sheet..... | Militia Form B. 263 |
| Company Conduct Sheet..... | Militia Form B. 263a |

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (U.S.D.C. 5000d).
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
(Enclosed in special envelope (260M)),
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (C. 551). *sup*
13. Pay Book (C. 554).
14. War Service Card (Form M.F.W. 2595).
15. Sundry Documents.

Group 13

Checked by No. 15

Date 6/15/19.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

11915 *Aug 1/16*

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

\$

| | | | |
|-----|--|--|--|
| 15. | | | |
|-----|--|--|--|

92-1028

PARTICULARS OF SEPARATION ALLOWANCE

No. *724059*
 Rank *pte* Promoted Reverted Discharge
 Soldier's Name *G. R. Cowie*
 Battalion *109th Batta "C" Co.*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *Mrs. J. McMillan*
 Address *% W. J. Smith R.R. #2 Beaverton*
 Change of Address *Out*

1
2
3
4

| Date | Cheque No. | Amount S/A | Amount A/P | Total | REMARKS |
|----------------|-----------------|------------|-------------------|-------------------|----------|
| <i>1917</i> | | | | | |
| <i>Dec 31.</i> | | | <i>255.</i> | <i>255.</i> | |
| <i>Jan.</i> | <i>B 6662</i> | | <i>15</i> | <i>15</i> | <i>N</i> |
| <i>Feb.</i> | <i>D 99847</i> | | <i>15</i> | <i>15</i> | |
| <i>March</i> | <i>A 118021</i> | | <i>15</i> | <i>15</i> | |
| <i>April</i> | <i>B 532</i> | | <i>15</i> | <i>15</i> | |
| <i>May</i> | <i>M 16596</i> | | <i>15</i> | <i>15</i> | |
| <i>June</i> | <i>L 20310</i> | | <i>15</i> | <i>15</i> | |
| <i>July</i> | <i>S 31537</i> | | <i>15</i> | <i>15</i> | |
| <i>Aug</i> | <i>S 41465</i> | | <i>15</i> | <i>15</i> | |
| <i>Sept</i> | <i>L 43356</i> | | <i>15</i> | <i>15</i> | |
| <i>Oct</i> | <i>M 51790</i> | | <i>15</i> | <i>15</i> | |
| <i>Nov</i> | <i>A 20314</i> | | <i>15</i> | <i>15</i> | |
| <i>Dec.</i> | <i>R 66814</i> | | <i>15</i> | <i>15</i> | |
| <i>1919</i> | | | | | |
| <i>Jan</i> | <i>OM 91444</i> | | <i>15</i> | <i>15</i> | <i>J</i> |
| <i>Feb</i> | <i>F 77251</i> | | <i>15</i> | <i>15</i> | |
| <i>Mar</i> | <i>H 89558</i> | | <i>15</i> | <i>15</i> | |
| <i>Apr</i> | <i>R 2936</i> | | <i>15</i> | <i>15</i> | |
| <i>MAY</i> | <i>H 7657</i> | | <i>15</i> | <i>15</i> | |
| | | | <u><i>510</i></u> | <u><i>510</i></u> | |

3804 94

M. F. W. 128
400M-6-17-1772-89-141
L. L. 22320-M. & D. 7593.

A/c Closed *Baronia*
 Ret'd per *Baronia*
 Date *MAY 27 1919* *MAY 23 1919*
 Date *M.F.W. 187*
 Closed *Baronia*

NRO 114030

AUDITED



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

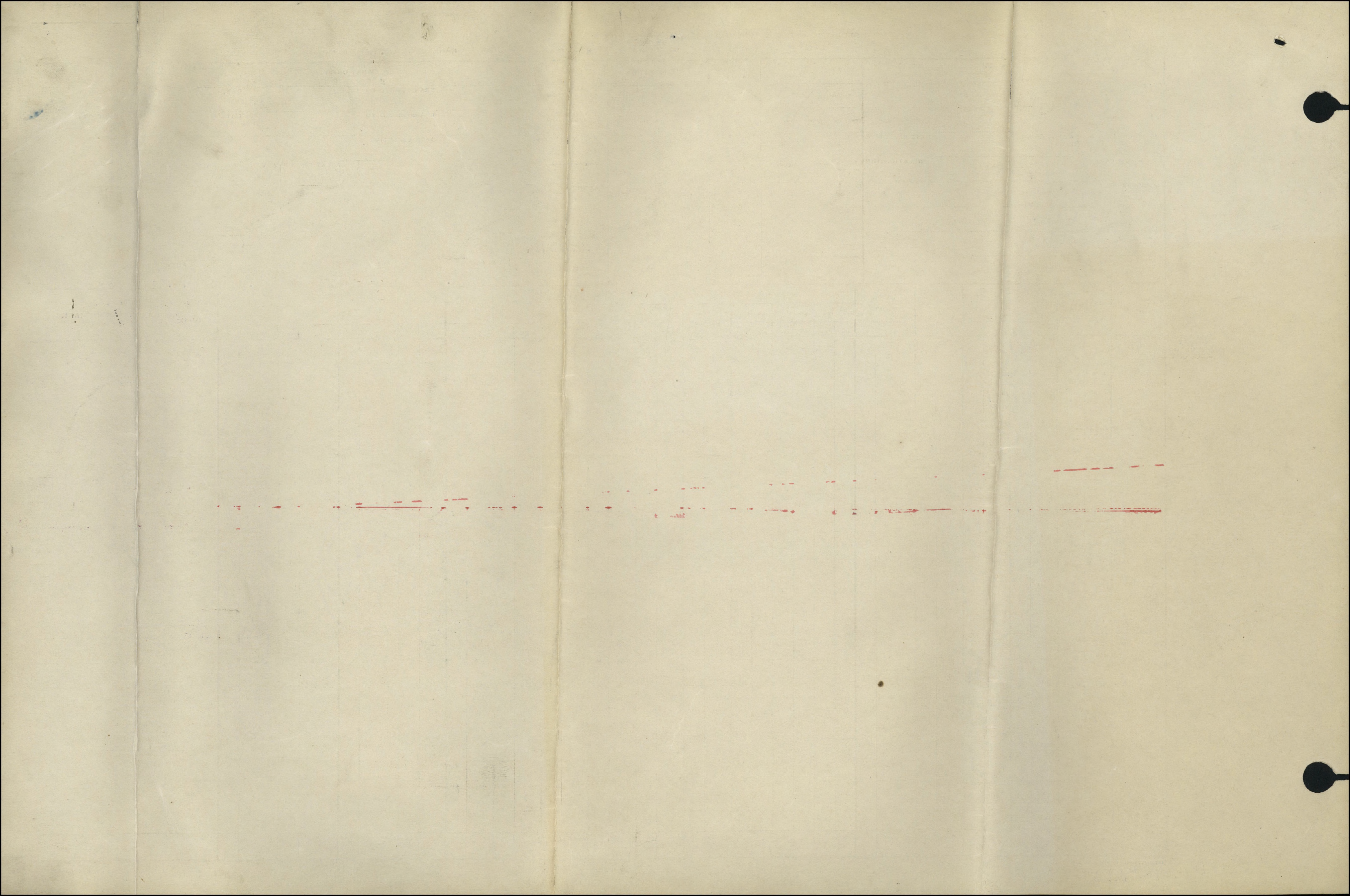
Form with fields for M. OR S., NEXT OF KIN, ADDRESS, RELATIONSHIP, PARTICULARS, EFFECTIVE DATE, AUTHORITY, ORIGINAL UNIT C.E.F., PLACE OF ATTESTATION, TRANSFERRED TO, DATE, AUTHORITY, DATE OF ATTESTATION, ASSIGNED PAY \$, DATE EFFECTIVE, PAYABLE TO, ADDRESS, STOP PAYMENT FORM, DISCHARGED, PLACE, DATE, REASON, AUTHORITY, IF ENTITLED TO POST DISCHARGE PAY.

Table with columns: MONTH, PAY AND F.A., OTHER CREDITS, TOTAL CREDITS, ACQUITTANCE ROLLS, CASH PAYMENTS, ASSIGNED PAY, REGIMENTAL CHARGES, OTHER CHARGES, TOTAL DEBITS, BALANCE DEBIT, BALANCE CREDIT. Includes handwritten entries for dates like 30.4.19, 29.5.19, 18.3.19 and amounts like 27.50, 31.90, 420, 136.90, 487.5, 130.07, 164.40, 75.17, 344.50, 140, 280, 210, 140, 850, 70, 420, 420.

BALANCE FROM PREVIOUS ACCOUNT

T.O.S.I.H. 5.19 D.O. 15.1... PARTICULARS OR REMARKS SUBS. 10 D.O.

Handwritten notes and remarks: ev bal on 1st, 11.5.19, 1946 End on R.P.C., 15.7, W.S.G., 25/5/19 70, 550, 19/6/19 64.50 662477 140, QR 89 July 16 70, QR 115 Aug 18 70, QR 129 Sept 16 70, QR 169 Oct 22 70, 1st W.S.G. Paid by #2 D.D., W.S.G. PAID IN FULL, CAPTAIN, WAR SERVICE GRATUITY.



Mumps

Cured

J. P. Howe

R. 172.

CANADIAN

CHA

Registered No.
Lieut.

DATE

Sent

Request

Casualty
List

Fill in Only.—Unit, Number, Rank and

W. S. B. CLASS "A"

Casualty Form—Active Service.

250M.—1-16.
H. Q. 157 920.

Unit, Regiment or Corps 109th BATTALION CANADIAN INFANTRY.

Regimental No. 124059 Rank Private Name Cowie George Robert
E. F.

Enlisted (a) 3.3.16 Terms of Service (a) D of W Service reckons from (a) 3.3.16

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) Farmer

| 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. |
|--------|---|-------|------|--|
|--------|---|-------|------|--|

| | | | | |
|----------|---|--------------------------------|----------------------|--|
| 28-11-16 | Embarked Canada. Disembarked England. Proceeded overseas for service with 20th. Btn | Halifax Liverpool Witley | 24.7.16. 31.7.16. | |
|----------|---|--------------------------------|----------------------|--|

CERTIFIED CORRECT.
14 DEC. 1916
CAN. RECORDS, LONDON.

~~27-11-16 Witley Transf'd to 20th Bn, Overseas 28-11-16; D.O. 333-28-11-16~~

W. Aseltine
CAPTAIN,
ADJUTANT,
109TH BATTALION CAN. INFANTRY.

| | | | | | | |
|----------|----------|--|-------|----------|-----------------|------------|
| 29/11/16 | CB Depot | Arrived taken on strength | 20 Bn | 29/11/16 | NR.Pt.2.0.75 | 11/12/16 |
| do | do | Left for Unit | Field | 1/12/16 | NR | |
| 8/12/16 | 20th Bn | Joined Unit | do | 4/12/16 | B213 | |
| 5/1/17. | 4th Can | Draft Bn 14 days F.P.No.1 for using obscene language to his superior Offr. | do | 2/1/17. | B2069.Pt 2 O'rs | 5d20/1/17. |

(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.]

| 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. |
|----------|--------------------|---|----------|------------|--|
| 6-10-17 | 20 Pm | Granted leave to wounded | | 26-9-17 | B 213. Pt 2. 40013/10/17. |
| 13-10-17 | " | Rejd from leave | 20 Pm | 9-10-17 | " |
| 12-10-17 | 6 C.F.A. | V. D. G. admit hosp 22 CCS | | 12-10-17 | A 36. A 5391 |
| 13-10-17 | 22 CCS | " " adm 12/10 Surg. AT. 12 | | 13-10-17 | " " A 5548. |
| 14-10-17 | 51 Gen | " " M. adm 51 Gen | | 14-10-17 | H 3034. A. 5411. |
| 1-12-17 | " | " " Hosp | | 1-12-17 | B 9962. |
| 2-12-17 | 2 2BD | " " from 51 G. Hosp | 2 2BD | 2-12-17 | NR |
| 1-12-17 | 51 Genl | Forfeits Fld Alice & is placed under stoppage of pay at the rate of 50 cents per diem whilst in hosp: from 15-10-17 to 1-12-17. (48 days) | | | AFO. 1643. - File No. 7484. Pt 2 893/10-12-17. |
| 10-12-17 | 2 2BD | Left for | 2 CCRC | 10-12-17 | NR. |
| " | 2 CCRC | Arrived | " | " | NR |
| 11-2-18 | 6 C.F.A. | Bronchitis admit hosp | H C.F.A. | 11-2-18 | D. 2298. |
| " | H " | " " adm | " | " | D 2414. |
| 24-2-18 | 4 " | " " Dischd | Duty | 24-2-18 | X 5231. |
| 26-2-18 | 2 CCRC | Rejd from F.A. | 2 CCRC. | " | B. 6. 63 (256.) |
| 6-3-18 | " | Despatched to | 20 Pm | 6-3-18 | NR 128 |
| 16-3-18 | 20 Pm | Rejd from CCRC | " | 7-3-18 | B 213. |
| 4-5-18 | " | Ad H CCB Amm by Mty | HA | 2-5-18 | " |
| 5-10-18 | " | Granted 14 days leave | H. K | 1-10-18 | " Pt 2 95-1918. |
| 19-10-18 | " | Rejd from leave | 20 Pm | 17-10-18 | " |
| | C.E.C. | Proceeded To England | | 5 AVR 1919 | N.T. |
| 6.4.19 | D. King | T.O.S. | Littley | 10.4.19 | D.O. #4 |

Swanwick

Lieut.
for Lt. Col., AAG,
Canadian Section