

ATTESTATION PAPER.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your name?..... *Henry Groves*
 - 2. In what Town, Township or Parish, and in what Country were you born?..... *Bristol England*
 - 3. What is the name of your next-of kin?..... *Mother Mrs Parker*
 - 4. What is the address of your next-of-kin?..... *4 Kingsland Rd Bristol*
 - 5. What is the date of your birth?..... *December 11 1896 England*
 - 6. What is your Trade or Calling?..... *Farmer*
 - 7. Are you married?..... *no*
 - 8. Are you willing to be vaccinated or re-vaccinated?..... *and inoculated H G 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*
- Henry Groves*..... (Signature of Man.)
R. Anderson..... (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Date *September 27th 1915*..... *Henry Groves*..... (Signature of Recruit)
R. Anderson..... (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

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

Date *September 27th 1915*..... *Henry Groves*..... (Signature of Recruit)
R. Anderson..... (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 *Lindsay* this *27th* day of *September* 1915.

[Signature]..... (Signature of Justice)
I certify that the above is a true copy of the Attestation of the above-named Recruit.
[Signature]..... (Approving Officer)

b
[Signature]

Description of Henry Groves on Enlistment.

Apparent Age 18 years 9 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. 2 ins.

None

Chest measurement. (Girth when fully expanded) 33½ ins.
 Range of expansion 3 ins.

Complexion Fair

Eyes Hazel

Hair Brown

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

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 September 23rd 1915.

J. McCulloch
Lieut
 Medical Officer.

Place Lindsay

*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.

Henry Groves 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.

W. G. Hutchinson (Signature of Officer)

Date OCT 6 1915

COLONEL
O. C. 80th Battalion, C.E.F.

REGIMENTAL DOCUMENTS

NAME **GROVES** **HENRY** **PTE** REGT. NO. **219743** UNIT **80th BN.** H. Q. FILE NO.

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

DEATH

Category

30245

DISCHARGE

Category

Demob

DESERTION

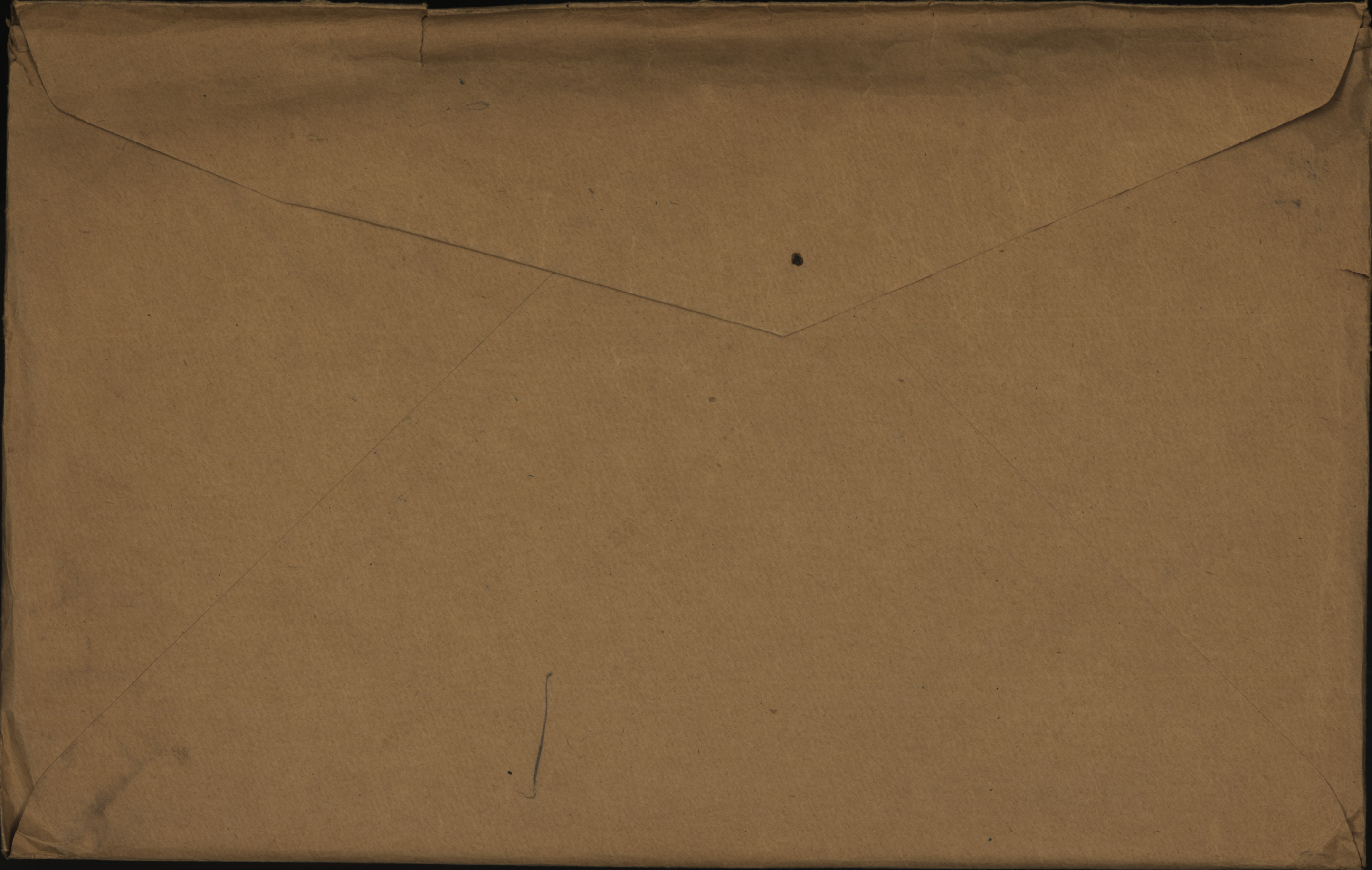
- 1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)
- 1 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)
- 1 TRAINING HISTORY SHEET (M.F.W. 113)
- 2 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)
- REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)
- COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)
- 2 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)
- DENTAL HISTORY SHEET (M.F.B. 465)
- MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)
- 1 MEDICAL EXAMINATION (M.F.W. 129)
- TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)
- PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)
- DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)
- LAST PAY CERTIFICATE (M.F.W. 44)
- 1 PROCEEDINGS ON DISCHARGE (M.F.W. 213 or A.F.B. 268)
- PARTICULARS OF CHARACTER (A.F.W. 3226)
- 1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

38



1 CWDC 5009a
1 SMS 1375
1 m 2 w 192
1 a f s
2 a 791237
7 casc card
5 m f w b z
1 pay card

16-13
23-13
30 14



No. 219743 RANK Pte

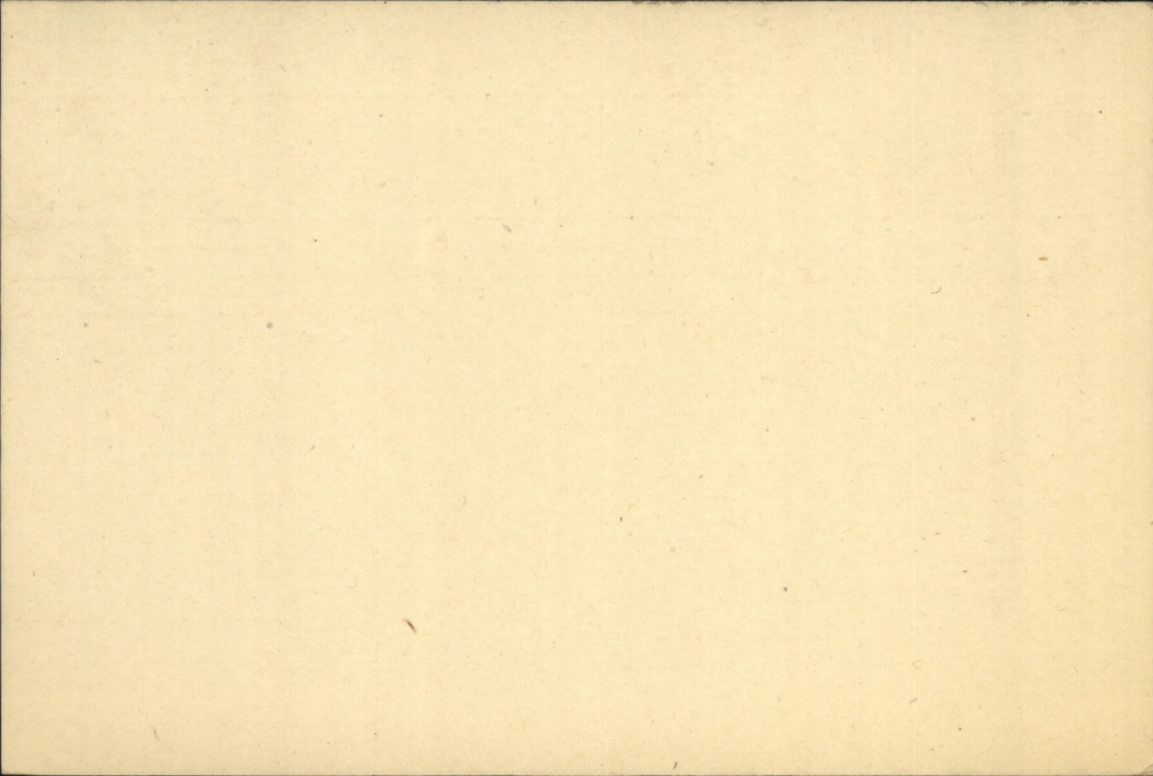
NAME Groves H

T. O. S. 25-9-15
D.O. 90 25-9-15

UNIT 45th Victoria Regt.
O.S. Port

M. D. 3

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
1915 Sept 28	1915 Sept 28	✓	Transferred to 50th Bn 28-9-15	D.O. 12 28-9-15
Sept 29	Sept 30	✓	Station on 50th Bn pay list	
Oct.		✓		
Nov.		✓		
Dec.		✓	Transferred to 109th Bn.	D.O. 97. 23.12.15



No. 219743 RANK *Pte*

NAME *Evans. Henry.*

T. O. S.

UNIT

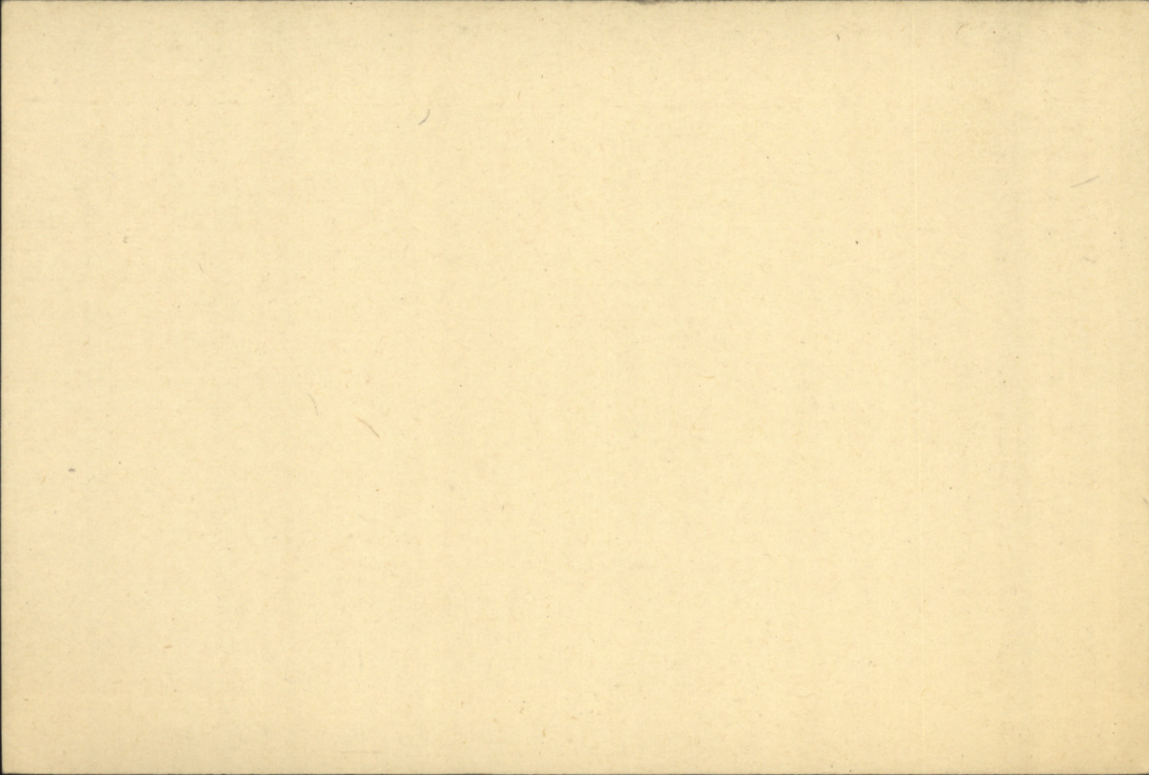
*Transferred from 80th Bn
1-1-16. D.O. 40. 6-1-16.*

109th. Battalion

M. D. *13*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916 Jan 1.</i>	<i>1916 Jan 31</i>	<i>✓</i>		
<i>Feb.</i>		<i>✓</i>		
<i>Mar.</i>		<i>✓</i>		
<i>April</i>		<i>u.</i>		
<i>May</i>		<i>u.</i>		
<i>June</i>		<i>u.</i>		
<i>July</i>		<i>u.</i>		

**UNIT SAILED
JUL 23 1916**



SURNAME.

Groves

3 | *S.O.S. Dec*
CARD NO. *31/12/15: 3*

CHRISTIAN NAMES

Henry

FOLL.

REGL. No. *219743*

RANK *Pte.*

UNIT ~~*80th.*~~

109th.

Bn.

FORMER CORPS

nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Parker, Mrs.

RELATIONSHIP TO SOLDIER

mother.

ADDRESS

4 Kingsland Rd., Bristol, Eng.

COUNTRY OF BIRTH

England, Bristol

DATE

Dec. 11th. 1896.

PLACE OF ATTESTATION

Lindsay, Ont.

DATE

Sept. 27th. 1910

Trans. from 80th Bn. to 109th Bn. auth. sailing list
8/3 23-7-16. 488
15.7.16. 15



275-3 Pte.
R166-3-19 25

L. L. 94504. M. & D. 6512.

M. F. W. 22. 250M. -2-10. H. Q. 1772-39-339.

MARRIED

SINGLE

Yes.

WIDOWER

TRADE OR CALLING

Farmer.

RELIGION

Methodist.

DESCRIPTION.

APPARENT AGE

18

YEARS

9

MONTHS

HEIGHT

5

FEET

2

INCHES

CHEST MEASUREMENT

33 1/2

INCHES

EXPANSION

3.

INCHES

COMPLEXION

Fair

EYES

Hazel

HAIR

Brown.

DISTINGUISHING MARKS

Nil.

MEDICAL EXAMINATION.

PLACE

Lindsay, Ont.

DATE

Sept. 23rd. 1915.

Name

Groves

Rank

Henry
SgtReg. No. 219743
H.R.D.

Unit

38⁷ Batta E.O.R.D.

Next of Kin

Mrs Parker - 4 Kingsland Rd - Bristol

(written)

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
18-6-18	6. Co. Dep. Bat.					
22-6-18	83 Gen. Paulson	London		2247		21957
23-6-18	Queen Alex. Mil. B. Millbank			2248		21926
13-7-18	6. Co. Dealwood			2249		20280
23-8	Discharged.			13302		21358
28-8-18	will proceed on 2-9-18 to 3 rd Co. P. Ford					619.
27-8-18	Beaufort W. Rd. Bristol					25306
19-9	mil (com) St. Epsom.	SE. R. H. and				26914.
25-10	Discharged			256		9322
25-10	will proceed 7-11 to 1 st Co. Witley					1079

A. & D.
CARDCan: Conval: Hospital, HOSPITAL.
Bear Wood.

AT.....

A. & D. No. 13701 PL. OF ACTION.....

RANK. REG. NO. 219743 UNIT. 38th Can Inf SICK OR WOUNDED

NAME Groves A. AGE. B. RELIGION. m.

PLACE IN HOSPITAL 207 C

DIAGNOSIS Infected abdominal wall.

ADMITTED. 12 JUL 1918 FROM. Caulterboro B.A.A

DISCHARGED 23 AUG 1918 TO. 3rd C.C.D. Seaford

TRANSFERRED.....

SERVICE AT HOME. 12/24/13 IN FIELD. 12

RESULTS. Cal 107

(See Document Card for M.H. Sheet and other Documents.)

NAME

Groves. H.

REG'T'L NO

219743.

RANK AND CORPS

Pte

38th Bn.

H. Q. FILE NO. 649-

FOLLOWS

NO.

4th Can. Div.

CABLE

No.

DATE

NATURE OF CASUALTY

FOLLOWS

Number 219743

Rank

Pte

B

Surname GROVES

Christian Name

Henry

Units 38 Bn Can Coy Theatre of War

France

Date of Service

4-12-16

Remarks

'Canoe House' Shrubbery Rd.

Latest Address

RR #1. Songa

Downend, Bristol Eng. Out

Roll No.

B. Page 1X946.

21/5/1916 20017.92-21.M.

P.O. V. rec'd 23^{10/25}

DESP. OCT 5 1925

REGN. NO. 1675-2

DESP. JUN 1 39

REGN. NO. 593

Convalescent Hospital,
Woodcote Park, Epsom.

I

**A. & D.
CARD**

LOCAL CASUALTY.

.....HOSPITAL.

A. & D. No. T2386 AT PL. OF ACTION

RANK Pte. REG. No. 219743 UNIT 6th Res. SICK OR WOUNDED

NAME Groves, H. AGE 21 RELIGION Meth.

PLACE IN HOSPITAL

DIAGNOSIS W. Rt hand & abscess Rt thigh

ADMITTED 18-9-18 FROM Beaufort War, Bristol

DISCHARGED D1 28/10/18 TO I.C.C.D. Wilby

TRANSFERRED

SERVICE AT HOME 3 yrs IN FIELD Eng. 6

RESULTS

REMARKS.

19/9/18 Scar of abscess (septic poisoning)
between knuckles of 1st & 2nd fingers
R. hand. Westness & slightly
inflamed site of old appendectomy
Complains of pain at scar
General condition good.
massage for hand

W. H. Eley
Capt.

Surname **Groves** Christian Name or Names **H.** Reg. No. **219743**
 Rank **Pte.** Unit **38th B.** Co. **E. Coy.** Troop **(Det)** Batty

Hospital **7 General St. Omer** Date of Admission **25-1-17.**

Transferred **6. 6. 18** Hosp. **18. 6. 18**
83 G.H. Boulogne Hosp. **22-6-18**
Green Alex. Millbank, S.W. Hosp. **23-6-18**

Can Con. Bearwood. Hosp. **13. 7. 18**
Beaufort Wt. Bristol Hosp. **27-8-18**

Diagnosis

(1) **Mumps.**
 Later Diagnosis (if changed) **N.Y.D. Q.**
 (2) **Infl. abdomen Wall**
 (3)

Additional Diagnosis: if more than one state present **A.P.**
J.C.T. L Hand Abscess
(R. Thigh (Flesh))

DISPOSITION

Date

C.L. 1-2-17	A117	Dis 19-2-17
1-3-17	a138	REMARKS 23.8.18
22-6-18	a247	Dis. 28.10.18
" 28-6-18	a252	
" 27-6-18	B249	
17. 7. 18	B265	
18. 8. 18	B302	
2-9-18	C298	adm whilst on leave of France.
21. 9. 18	C315	
8-11-18	C356	

A.M.D. 2 DEPT.

Bch. of D.G.M.S. O.M.F.C. London.

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm

1. *Bril. Con. Woodcot St Epsom* 19.7.18

2.

3.

4.

5.

6.

7.

Name GROVES 1 Henry Rank Plt. Regtl. No. 2197 43

Original unit SOB Present unit M. or S. M Age 23 Religion med Fyle Depot 3-5-459 Ref. H.Q.

Port, ship, and date of arrival Cassandra St. John 6-3-19

Next of kin M) Mrs Parker 4 Keyland Rd Bristol Eng

Address on leave Corona Rd

Address on discharge

Transportation issued Yes No Date Character on discharge

Previous occupation Farmer Date and place of enlistment 27-9-15 Lindsay

Diagnosis Date of Medical Boards

Date.	Remarks	Pt. 2 Order No.
14-3-19.	T.O.S. Casualty Company No. 3 District Depot. From ops.	
	for Disposal, Part Two D.O. <u>23</u> Eff. 8-3-19.	
	Leave & Sub. 9-3-19 to 22-3-19.	
27-3-19	SOB SOB On Demob RE 1420	87

*Name will be given in full; surname first.

Date.

Remarks.

Pt. 2 Order No.

M.F.W. 192
150M-6-18.
1772-39-1243.

SERVICE AND CASUALTY FORM (Part I).

Army Form B. 103-1.
Part I.

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W1889—PP 1150 1M 5/18 G.W.P.C.9 (34/0)

(1)*Substantive rank *Acting rank *[To be entered in pencil to facilitate alteration.] (4) Surname (5) Christian Names (6) Army Form, number of, Attestation Form or Record of Service paper) (7) Whether of British or of Alien origin [vide A.C.I. 578 of 1918] (8) Date of birth as stated on enlistment (9) (a)	(2) Regiment or Corps	(3) Regtl. No.
--	-----------------------	----------------

(10) Enlistment (b) (12) Service reckons from (date) (14) Any subsequent variations (if any) of conditions of service	(11) Engagement (c) (13) Special conditions (if any) of enlistment (d)
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Initials and Rank of an Officer.

(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) (Record of Occupation in Civil life (vide Army Order 93 of 1917)
				Industrial Group No. Trade or Calling Married or Single Particulars of Trade Test Occupation Cards despatched on (date) Second Occupation Card despatched on (date)

(17) Next of Kin (18) Demobilizer (f) (19) Pivotal-man (f) (20) Qualifications (g)	(Place) (Date) or (21) Corps trade and rate	(Signature of Posting Officer)
(22) Extended {		(23) Re-engaged {
(24) Miscellaneous entries:—		

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [vide A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoehing-smith, &c.

Regt No. 219 743 Rank Plt Name Groves H

(A) Report		(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
Date.	From whom received.					

18/1/19 Attached to Wing 3, Kinross Park, Part 2, D.O. 19, Jan 20, 1919

~~4-219~~ ~~8-2219~~ Ceases to be attached on transfer to C.K.F. on proceeding to CANADA, Part 2, C.O. 31, Feb 8, 1919.

22/2/19

~~Cassandra~~ Lieut
O 1/6 ROBERTS, WING 3.

SS → CASSANDRA
EMBARKED 22-2-19
DISEMBARKED 3/19

J. F. Allen
Capt & adj
pro O.C. # 13 T.A.C.I.S.

14/3/19

T.O.S. Casualty Company No. 3 District Depot.
for Disposal, Part Two D.O. # 73 Kingston P-3-19

J. Williams
LIEUT.
for O.C. Casualty Co., No. 3 District Depot

22-3-19 A.O.S. # 3 D.D. Demob. P.O. 1420. H.Q. - 87-

J. Williams
Lieutenant
For O.C. No. 3 District Depot

Nothing to be written in this margin.

Blm

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

M. F. W. 54. (A. F. B. 193.)

250M.—1-16.

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 109th OVERSEAS BATTALION, C. E. F.

Regimental No. 219443 Rank Private Name Groves Henry

Enlisted (a) 27-9-185 Terms of Service (a) D of W. Service reckons from (a) 27-9-185

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.
Date	From whom received				

	<u>Embarked Canada.</u>	<u>Halifax</u>	<u>24.4.16</u>		
	<u>Disembarked England</u>	<u>Liverpool</u>	<u>31.4.16</u>		

W. M. S. M. J.
Capt.
ADJUTANT
109th Overseas Battalion, C. E. F.

CERTIFIED CORRECT
12 DEC. 1916
GAN. RECORDS, LONDON

<u>4-12-16</u>	<u>O.C. 109th.</u>	<u>Proceeded overseas for service with 38th.Btn.</u>	<u>Witley</u>	<u>4-12-16</u>	<u>D.O.Pt.11 339</u>
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W. M. S. M. J.
ADJUTANT
109th Overseas Battalion, C. E. F.

(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.]

21974
Groves
H.

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				
6 12 16	C.B.D.	TAKEN on STRENGHT 38 th	Havre	6 12 16	N. R. P.I.D. 242 - d 13, n. 16.
7 12 16	"	Left for Unit	FIELD	7 12 16	N. R.
16 12 16	Unit	Joined Unit	FIELD	9 12 16	B. 213. DCS. 69 - 31 12 16
25. 1. 17	7 Gen's	Mumps	adm 7 Gen's	25. 1. 17	W3034-179.
3. 2. 17.	38th.	boon. sick.	Died.	24. 1. 17	B213 Des 87 d 12. 2. 17.
27. 1. 17	12 C.F.A.	Mumps.	adm to #7 Hospital	25. 1. 17.	a36 E2326 Des. 88 d 14. 2. 17.
19. 2. 17.	7 Gen's	"	to Duty. Field.	19. 2. 17.	W3034/208.
3. 3. 17.	Unit	Joined Unit	FIELD	24. 2. 17	B. 213. DCS. 97.
23. 9. 17.	Col.	attd		23. 9. 17	NR 16/2338
18. 10. 17	"	To Unit		18. 10. 17	NR 12
17-11-17	OC Unit	14 days leave.	FIELD	17-11-17	B213 Part II O No. -111 d -28-11-17
-1 DEC 17	Unit	Joined Unit	FIELD	30. 11. 17.	"
9. 3. 18	"	One G. C.B.		27. 9. 17.	" 2023-22. 3. 18.
18618	6ccs.	m.p.d.	6ccs.	18618	a-4195: evac sick
	12 C.F.A.	Inj. abdomen wall. g. to	6ccs	"	a-4263.
21. 6. 18	6ccs.	L.C.S.	35 W.T.	21. 6. 18	a-4317.
22618	83 Gen.	"	83 Gen.	22618	W-4779.
23618	"	"	to England.	23618	W-4916
"	"	Sick. Posted E.O.R. dep. Seaford.		23. 6. 18	W3083-5588. Sordenio
					20. 6. - 6. 7. 18.
					Lieut. for Lt Col. A. A. G.
2-7-18	E.O.R.D.	Posted from 38th En.	Seaford.	Canadian Section, G. H. Q. - 3 rd Ech.	
26/8/18	E.O.R.D.	Command to 3rd C.C.D.	Seaford	23. 6. 18 P.I.D. 0168.	
				23/8/18 P.I.D. 015	

Lieut. for Lt Col. A. A. G.
for Lt Col. i/c Records. ONIFC

SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103-1.
Part I.

(1)*Substantive rank *Acting rank *To be entered in pencil to facilitate alteration. (4) Surname (5) Christain Names (6) Army Form, number of, Attestation } Form or Record of Service paper } (7) Whether of British or of Alien origin [vide A.C.I. 578 of 1918] (8) Date of birth as stated on enlistment (9) (a)	(2) Regiment or Corps	(3) Regtl. No.
--	-----------------------	----------------

(10) Enlistment (b)	(11) Engagement (c)
(12) Service reckons from (date)	(13) Special conditions (if any) of enlistment (d)
(14) Any subsequent variations (if any) } of conditions of service }	Initials and Rank of an Officer.

(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) (Record of Occupation in Civil life (vide Army Order 93 of 1917)
				Industrial Group No. Trade or Calling Married or Single Particulars of Trade Test Occupation Cards despatched on (date) Second Occupation Card despatched on (date)

(17) Next of Kin (18) Demobilizer (f) (19) Pivotal-man (f) (20) Qualifications (g)	(Place) (Date) or (21) Corps trade and rate	(Signature of Posting Officer)
(22) Extended }	(23) Re-engaged }	
(24) Miscellaneous entries:—		

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [vide A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoing-smith, &c.

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W1889—PP 1150 IM. 5/18 G. W. P. Co. (3490)

Temporary original not available

No. 219473 Pte Croves Henry

W. S. B. Blass

(A) Report		(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
Date.	From whom received					

4.1.19

Ceases to be attached on proceeding to

6th Reserve, D.O. No. 6 D/4.1.19

Adjutant, Canadian Command Trench

8-1-19 066th Res

T. O. Son posting from C.O.R.D.

Witley 7-1-19

H 77 Bd #6

18-1-19 066th Res

On Command Kennel Park pending despatch to Canada

Witley 18-1-19

P 2005

OFFICER IN CHARGE RECORDS 6th CAN. RES.

Nothing to be written in this margin.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 219743 (Rank) Private

Name (in full) GROVES, Henry enlisted in

the 80th Battalion

CANADIAN EXPEDITIONARY FORCE at Lindsay, Ont. on the 27th

day of September 1915

HE served in Canada, England and FRANCE

and is now discharged from the service by reason of in accordance with R.O-1420

Demobilization. Auth. 3DD 3. G. 459, D. 25.3.19

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

Age 22 years 4 months

Marks or Scars

Height 5 feet 2 inches

Complexion Fair

Eyes Hazel

Hair Brown

H. Groves
Signature of Soldier

P. Rapp Lieut.
Issuing Officer
for O.C. Discharge Section
No. 3 District Depot
Rank

Date of Discharge 27.3.19

Appointment

Signed at Kington, Ont. this 27th day of March 1919

in Military District No. 3

File Reference No. 3DD 3. G. 459.

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.

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

*Sonya R R I
C/o Cameron on*

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. *219743* Rank *Pte* Surname *GROVES*
(Given name in full)

Unit or Corps *1st ce 22* Birthplace *Henry Bristol Eng*

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

1. GENERAL DESCRIPTION:

Physique *good* Weight *115* lbs. Height *5 2* ft. Colour of Eyes *Brown*
 Nutrition *good*
 Pulse *good*
 Condition of arteries *good*
 Vision Rt. *7* Left *7*
 Hearing (conversational voice) Rt. *3* ft. Left *7* ft.

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

Opinion as to general health and physical condition *good air*

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 Sytem *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.

No complaint find for

APPROVED
[Signature]
 Lieut. A. M. C.
 For A. D. M. S. No. 3
 24-3-19

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at (Overseas)

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 Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at *Barrisfield* (Canada)

Date *24/3/19* Signed *[Signature]* 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 *[Signature]*

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

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

Medical Examination upon leaving the Service *MD B Wing*
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 *Private* Name *Henry* Surname *Groves*
 Unit or Corps *6th Res* (If a soldier) Regt. No. *219743*
 Born at *Bristol Eng* on date *Dec 11th 1897*
 Signature (for identification) *Henry Groves*

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

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

Weight *115* lbs.
 Height *5 2* ins.

no

2. NUTRITION AND DIATHESIS?

good.

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

3. NERVOUS SYSTEM?

no

4. RESPIRATORY SYSTEM.

no

5. HEART?

Abnormal Sounds? *no*
 Abnormal Size? *no*
 Pulse Rate? *72*

Intermittence or irregularity? *no*

6. ARTERIES.—Any hardening?

no

7. DIGESTIVE SYSTEM?

good.

8. GENITO-URINARY SYSTEM?

Urinalysis—s.g.? *1024* Reaction? *acid* Albumen? *no* Sugar? *no*

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

no

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

no

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

good.

Examined at *Kimmel B* Signed *J. T. Johnson M* M.O.
 Date *20-1-19* Signed *W. S. Johnson M* M.O.

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

Medical Examination upon leaving the service

of an Officer for general service or a Soldier for duty

This report is to be filled out by a Medical Officer and a Surgeon General's Representative, and is to be returned to the Surgeon General's Office, Washington, D.C.

Name of Officer or Soldier: _____
Grade: _____
Branch: _____
Service No.: _____

Place and date of examination: _____

1. General appearance: _____
2. History: _____

3. Nutrition and diet: _____
4. Physical examination: _____

5. Laboratory tests: _____
6. Radiology: _____

7. Summary: _____
8. Remarks: _____

9. Signature of Medical Officer: _____
10. Signature of Surgeon General's Representative: _____

11. Date: _____
12. Place: _____

13. Remarks: _____

14. Remarks: _____

15. Remarks: _____

16. Remarks: _____

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) GROVES H. M.D.3

REGIMENT 38. RANK P.T.E. No. 209443

Date of Examination in England 2-1-19. 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 14.
2. EXTRACTIONS
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 no.
(c) In France

KINMEL PARK, NORTH WALES.

Signature of Dental Officer [Signature] Capt

ND 3
287

H
E

TRAVEL

1911

14

- (a) ...
- (b) ...
- (c) ...
- (d) ...

1911

1911

219743 Pte. Groves N.
109th Bn. C.E.F.

U. S. GOVERNMENT
PRINTING OFFICE
1917

Will removed by Regt. Paymaster

J. J. Williamson CAPT.
Paymaster, 109th Overseas Battalion, C.E.F.

75906

Perforated sheet for Will from Pay Book of Reg.
No. 219443
Name Pte Henry Groves
Unit 109 Batt C.E.F.

Military Will.

In the event of my
Death I give the whole
of my Property and effects
to my Brother

Witness
J. Grayson
Mr John R Groves
Rose Dale
Ridgeway Rd
Fishpond
Bristol

Signature Pte Henry Groves
Rank and Regt. 109 Batt C.E.F.
Date Oct 27/10/16

MEMORANDUM

From

From

To

To

ANSWER

.....19

.....19

To be made out in duplicate.

DUPLICATE

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 219743

(3) Full Name of Soldier Henry Groves

(4) Place of Birth Brisrol England

(5) Are you married, or not? No

(6) If married, state,
(a) Full name of your wife.....

(b) Present Postal Address.....

(7) Are you a widower? No

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

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

Also their names and ages.....

(9) Is your Father alive?..... **No**.....

If so, state name and address.....

(10) Is your Mother alive?..... **Yes**.....

If so, state name and address..... **Mrs Groves**.....

24 Peter St Bristol England

(11) If your Mother is a widow.....

Are you her sole support, or not?.....

(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.

(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.

(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.

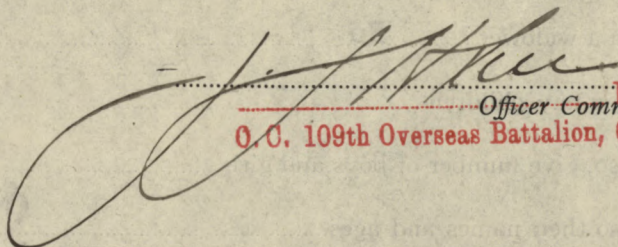
(15) Are you insured?..... **No**.....

If so, in what Company?.....

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

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 7th 1916**.....


.....
Lt. Col.
Officer Commanding.
O. C. 109th Overseas Battalion, C. E. F.

MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom

Address

Rate

John Cameron
Sonya
Out

15⁰⁰ **AUG 1 1916**

By Whom Assigned

Regtl. No.

Rank

Corps

Groves
~~*A. Goulds*~~
²*19743*
Pte.
109 Btn. "B Coy"

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				



17
85
17
203

PIZZO

PIZZO

PIZZO

PIZZO

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

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

Sheet No. 2.

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

John Cameron

PAYMENTS.

Name of Soldier

Groves
~~*A Gaults*~~

2 #19743 (Pte) 109 Bu

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.		<i>V 15896</i>	<i>15</i>	
Sept.		<i>V 17579</i>	<i>15</i>	
Oct.		<i>V. 22519</i>	<i>15</i>	<i>240</i>
Nov.		<i>M 23526</i>	<i>15</i>	<i>15</i>
Dec.		<i>30056</i>	<i>15</i>	<i>255</i>
Jan.	1917	<i>E 38579</i>	<i>15</i>	
Feb.		<i>E 45017</i>	<i>15</i>	
March		<i>D 50663</i>	<i>15</i>	<i>15 P.</i>
April		<i>X 1925</i>	<i>15</i>	<i>15 E.</i>
May		<i>X 4307</i>	<i>15</i>	
June		<i>E 15112</i>	<i>15</i>	<i>15 B.</i>
July		<i>F 22009</i>	<i>15</i>	<i>C</i>
Aug.		<i>B 29219</i>	<i>15</i>	
Sept.		<i>Y 35666</i>	<i>15</i>	<i>D</i>
Oct.		<i>D 42702</i>	<i>15</i>	
Nov.		<i>L 48446</i>	<i>15</i>	
Dec.		<i>958464</i>	<i>15</i>	<i>255 ONE</i>
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

\$15.00

"B leaf"
AUG 1 1916

OK

OK

225

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.	1919			
Jan.				
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.	1920			
Jan.				
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

MARRIED OR SINGLE

Single

PLACE OF BIRTH

Bristol Eng

NAME AND ADDRESS OF NEXT OF KIN

Mrs Parker

4 Kingland Road Bristol Eng

RELATIONSHIP OF NEXT OF KIN

Mother

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

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS																		
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1		2		3														
			\$	c.			\$	c.			\$	c.				No.	DATE	No.	DATE	No.	DATE	No.	DATE											
<i>July 31</i>														<i>15 10</i>	<i>15 10</i>																			
<i>Aug 31</i>	<i>31</i>	<i>10⁰⁰</i>	<i>31</i>		<i>31</i>	<i>10</i>	<i>310</i>								<i>34 10</i>		<i>15 9-8-16</i>																	
<i>Sept 30</i>	<i>30</i>	<i>30</i>					<i>3</i>								<i>33</i>		<i>47 31-8-16 79 15/16</i>																	
<i>Oct 31</i>	<i>31</i>	<i>31</i>					<i>310</i>								<i>34 10</i>		<i>119 30/16 143 15 10</i>																	
<i>Nov 30</i>	<i>30</i>	<i>30</i>					<i>3</i>								<i>33</i>		<i>186 30/16</i>																	
<i>Dec 31</i>	<i>31</i>	<i>31</i>					<i>3 10</i>								<i>34 10</i>		<i>290 30 11 16</i>																	
<i>1917</i>			<i>15 30</i>																															
<i>Jan 15</i>	<i>15</i>	<i>10</i>	<i>16 50</i>												<i>16 50</i>																			
<i>Jan 16</i>	<i>16</i>		<i>184 80</i>												<i>17 60</i>		<i>624 15/16</i>																	
<i>Feb 28</i>	<i>28</i>		<i>30 80</i>												<i>20 80</i>		<i>666 10/16</i>																	
<i>Mar 31</i>	<i>31</i>		<i>34 10</i>												<i>34 10</i>		<i>733 19/16</i>																	
<i>Apr 30</i>	<i>30</i>		<i>33</i>												<i>33</i>																			
<i>May 31</i>	<i>31</i>		<i>34 10</i>												<i>34 10</i>		<i>49 18/4/17</i>																	
<i>June 30</i>	<i>30</i>		<i>33 00</i>												<i>33 00</i>		<i>176 13/5</i>																	
<i>6/2</i>			<i>367 40</i>														<i>260 24/5</i>																	
														<i>15 10</i>	<i>382 50</i>		<i>334 3/5</i>																	

*Apr 30. 31/16 C.A. 2 (S)
293 18/3/17 4 1/2
8 4/4/17. 4 1/2*

PROMOTIONS, &c.

EFFECTIVE DATE	AUTHORITY

REG'L. No. 219743 RANK

Pte NAME Groves Henry

IF IN PERMT. CORPS
WHAT UNIT

UNIT 109th Bn TRANSFERRED TO 38th Bn DATE 10-1-17 AUTHORITY 20339 4-12-16

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION Lindsay Ont TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION Sept 27th 1915 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY \$ 15.00 DATE EFFECTIVE August 1916

PAYABLE TO Mrs John Cameron Sonya 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)

HOSPITAL, &c.

NAME OF HOSPITAL

ACQUITTANCE ROLLS

CASH PAYMENTS

ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
2		3		4		1	2				3	4			
No.	DATE	No.	DATE	No.	DATE										
											1510				
						973 ✓		15		2473	2447				
						730 ✓		15		2960	2787				
						973 ✓		15		3203	2994				
						2676 ✓		45		8636					
						1460 ✓		15		2479	3821				
						973 ✓		15		2717	4514				
						487 ✓		15		15	4664				20339-4-12-16 2nd
						730 ✓		15		264	1398	5026			to 38 th Bn Eff 16-17
						4866 ✓		15							
						1124 ✓		90							
						261 ✓		15		2023	6083				
						262 ✓		15		2445	7048				
								15		1762	8586				
								15		2023	9973				
								15		2303	10970				
						7849	1460	1207	165	264	27280				

Arzo. 3/1/16 C&D (2nd R.)
293 10/3/17 4th Bn Ent. Bn

8 4/4/17. 4th Bn Ent Bn

523 ✓
268 ✓
267 ✓
268 ✓

Link Q 4005 2/2/16

09

C

219743

Oto Groves H.

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		1		2		3		4				
			\$	C.						\$	C.	NO.	DATE	NO.	DATE	NO.	DATE	NO.	DATE	1	2	3
Sept			367	40					1510	38280									7849	1460	1207	
July	31	100/10	34	10						3410	414 20/6								268			
Aug	31		34	10						3410	533 4/7								267			
Sept	30		33							33	572 17/7	857 31/8							536	535		
											941 5/9								268			
																			267			

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE
1917									
Oct	B.F.	147	16						147 16
		34	10	accy pay					15 166 26
		24	10	a.p.					15
Nov									15
	P.P.	33		AR 696. 15/10/17. Local Cashier APOS38	4	46			
				AR 1160. 3/10. 38th	17	84			
				AR 989. 17/9. 38th	2	67			
				(1714) AR 1636. 29/10. 9	1	78			
Dec		34	10	a.p.					15 176 61
		67	10		26	75			30
1918									
Jan		34	10	a.p.					15
				AR 1498. 5/12. 38th	4	46			
				AR 1382 2/11 "	12	49			
				" 200. 15/70. 12/11 38th	9	73			
				" AR. 1558. 16/12 "	3	57			
		34	10		11	85			15 77 86
Feb				a.p.					15
	P.P.	30	80	AR 1652. 1/1/18. 38th	4	46			
				" 1728. 16/1 "	3	57			
				" 1808 2/2 "	4	46			
		30	80		12	49			15 81 17
March				a.p.					15
	P.P.	34	10	AR 1912. 20/2 "	3	57			
				" 2008 2/3 "	4	46			
				" 2121 18/3 "	5	35			
		34	10		13	38			15 86 89

58.

CASH PAYMENTS			ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
2	3	4				CREDIT	DEBIT			

155-

1460	1207		165-	264	27280	109	70			
			15		2035	12345				
			15		15	14255				
			15		2839	14716				

535
268

* Strike out whichever inapplicable.

ASSIGNED PAY	ENGLAND CANADA.	SEPARATION ALLOWANCE.
EFFECTIVE DATE:-	1/8/16	EFFECTIVE DATE:-
AMOUNT:-	\$1500	AMOUNT:-

NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE WORD "SAME" ONLY TO BE

Mrs. John Cameron
Sonya, Ont.

Stopped Effect 1/2/19

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHER BY INSERTION OF DATE CHAR

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT
1-1-19		4 days P.P. + 4 days P.O.A. 1ccw	880			
9-1-19	7633	Wiley	930			
16-1-19	7792	-	923			
			2583			

PARTICULARS OF RENDERING NON-EFFECTIVE *Trans. to Jan 1/19*

MONTH 1918	PARTICULARS	CR 1	CR 2	UNIT
31 March	Bal fwd.			
April	P.P.	33		AR
May	P.P.	33		AR
		3410		AR
June	P.P.	33		AR
July	P.P.	33		AR
		3410		AR
Aug		3410		AR
	S.F. 23/8/18 - 2/9/18 B.O. 201 27/8/18 3660	730		AR
Sep.	P.P.	4100		AR
		33		AR
Oct		3410		AR
Nov.	S.F. 18/10/18 to 7/11/18 (odys) SO. 309 8/11/18 1ccw	3410		AR
		930		AR
Nov.	P.P.	33		AR
Dec	P.P.	3410		AR
Jan	P.P.	3410		AR
		10850		

Checked *[Signature]*

SEPARATION ALLOWANCE.

ENGLAND OR CANADA.

NAME - GROVES, Henry

EFFECTIVE DATE:-

NUMBER:- 219743

AMOUNT:-

PARTICULARS OF RANK OR APPOINTMENT

NOTE: WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

AUTHORITY DATE EFFECTIVE RANK OR APPOINTMENT

Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:- 38th Bn 109th Bn

DATE ACCOUNT FIRST OPENED:- 1/8/16

AUTHORITY DATE EFFECTIVE DATE LEDGER SHEET T'S'F'D UNIT TRANSFERRED TO

168.

1/7/18

2/7/18

38th Bn

CoRD

1-4-18 18-4-18

Canada

NOTE: UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

UNIT DATE OF PAYMENT NUMBER OF A.R. UNIT PAID BY AMOUNT

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY PAY F.A. P.F.A. SUBS CE ALL CE

100 10

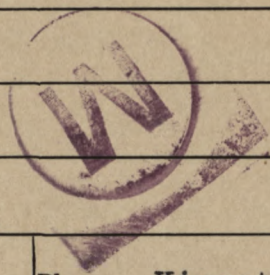
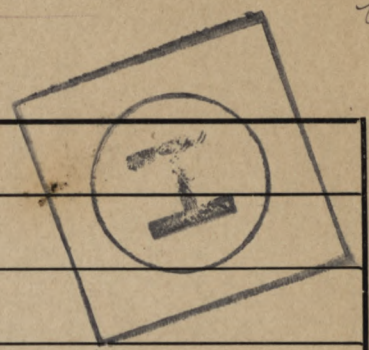
Rest. pay for 3 mths. 24/1/19 20.25. 27/1/19 100.00

Trans. to Can 1/7/19 - 1184000 - Wiley 20-1-19 - Chpt. M.D. 3 - Subal 43-19

CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
							86 89		
33		ap				15			
		AR 72. 5/4/18. 38th	892						
33		" 158. 10/4 "	359			15	9240		
		ap	1249			15			
3410		AR 324. 4/5. 38th	446						
3410		" 574. 18/5 "	359			15	10347		
		ap	803			15			
33		AR 695. 1/6	359			15	11790		
33		ap	357			15			
3410		AR. 3622. Bearwood. 13.7.18.	487						
		" 10856 - London. 6.7.18.	487						
		" 1106 - Bearwood. 30.7.18.	1947				10779		
3410		Canal.	2921			15			
3410		✓ 4864. ✓ 23/8/18	487			15	8552		
3410		GR. W. 26022. 23/8/18	4380			15			
			4867			15			
3410		AR 2638 - Epsom. 19.9.18	487			15	9865		
			487			15	13278		
						15	7340		
		Canal				15	5432		
		AR 4798 19/10/18 Epsom	973						
		" 8192 25/10/18 ✓	4867			15	5935		
		Canal	5840			15			
1000		AR 6456 27/11/18 1000	973			15			
		AR 6785 11/12/18	1947			15			
		AR 7975 19/12/18 CoRD	2433						
		Canal				15			
		Canal				15	6932		
			5353			45			

SHORT FORM.
 PROCEEDINGS ON DISCHARGE.
 (Demobilization.)

War Service Badge Class.....
 No. 91136..... Issued ll



1. No. 219743

2. Rank. Private

3. Name. GROVES, Henry

4. Unit. No. 3 District Depot.

5. Date of Discharge 27.3.19. Place Kingston, Ont.

6. Reason for Discharge..... Demobilization.....

7. Authority. 3DD 3. G.459, D. 25.3.19.....R.O.1420.

8. Proposed Residence after Discharge..... Sonya, Ont. R.R.No.1.....

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.?..... 39.....

.....

..... H. Groves.....
 Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place..... Kingston, Ont......

Date..... 27.3.19......

.....

Signature..... R. G. [unclear].....
 (O. C. Discharging Unit.)

amk.

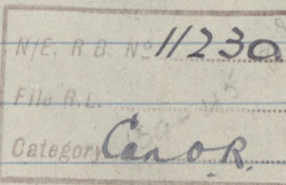
LIST OF DISCHARGE DOCUMENTS

No.	Name of Discharge Document	Date
1	Discharge Certificate	1910
2	Discharge Certificate	1911
3	Discharge Certificate	1912
4	Discharge Certificate	1913
5	Discharge Certificate	1914
6	Discharge Certificate	1915
7	Discharge Certificate	1916
8	Discharge Certificate	1917
9	Discharge Certificate	1918
10	Discharge Certificate	1919
11	Discharge Certificate	1920
12	Discharge Certificate	1921
13	Discharge Certificate	1922
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21	Discharge Certificate	1930
22	Discharge Certificate	1931
23	Discharge Certificate	1932
24	Discharge Certificate	1933
25	Discharge Certificate	1934
26	Discharge Certificate	1935
27	Discharge Certificate	1936
28	Discharge Certificate	1937
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181	Discharge Certificate	2090
182	Discharge Certificate	2091
183	Discharge Certificate	2092
184	Discharge Certificate	2093
185	Discharge Certificate	2094
186	Discharge Certificate	2095
187	Discharge Certificate	2096
188	Discharge Certificate	2097
189	Discharge Certificate	2098
190	Discharge Certificate	2099
191	Discharge Certificate	2100

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

TLH. Rank **GROVES, Henry.** Reg'l No. **219743.**
 Unit **109th. Bn.** If in perm. Corps, }
 What Unit? } Married or Single **Single.**
 Place and Date of Enlistment **Lindsay, Septr. 27th. 1915.** Place of Birth **Bristol, England.**
 Name and Address, Next-of-Kin **Mrs. Parker,**
4, Kingsland Road, Bristol, England. Relationship **Mother.**
 Assigned Pay Monthly \$ Payable to
 Relationship
 Separation Allowance \$ Payable to
 Relationship



Discharge, Date and Place Reason Character
 H. W. & V., Ltd.—7165-16.

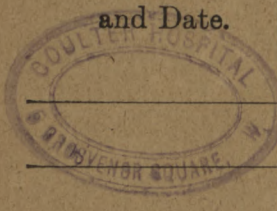
Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
Date.	From whom received.				
	C.				
		Arrived in England per F. M. T 2310		31-7-16	
4.12.16	06109th Bn	SO on tfr to 38th Bn	Whitley	4.12.16	Pt II D O 329
13.12.16		38th Bn T-O-S on tfr from IC9th Bnsht	Field.	6.12.16	Pt II D O 242.
1.2.17	✓	Adm No 7 General Hosp	St Omer	25.1.17.	Ch. A117. Mumps (lit)
1.3.17	✓	Dis	✓	19.2.17	Ch. A138 ✓
22.3.18	~	Granted one G.C. Badge.	Field	29.1.17.	Pt II D O 23.
2.7.18	G.O.R.D.	Posted from 38th Bn.	Seaford	23.6.18	38th Bn D/060 168 d/6.7.18.
26.8.18	..	On Comd. 3rd CCD	..	23.8.18	and CCD D/0201 215. d/27-8-18.
24.9.18	3rd CCD	Ceases on Comd.	..	27.8.18	225. d/27-9-18.
4-10-18	E.O.R.D.	ceases on Comd to 3rd CCD	Seaford	17-9-18	3rd CCD D/0228 Pt II 249 d/27.9.18.

A.F.B. 133 CHECKED
 9 DEC. 1918
 D.L.M.

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.				
2-11-18	E.O.R.D.	On Comd 1st CCD Willey	Seaford	28-10-18	1st CCD No 309 PID 10274. dy 8-11-18.
8-1-19	6 th Res	posted from E.O.R.D. ex 1 st	Willey	4-1-19	6 th 1 st CCD No 5 E.O.R.D. No 89/10-1-19
10-1-19	1 st 6 th Res	Awarded 4 dip FP 2 nd forfeit 4 dip pay by P.A. for 10-1-19 from 28/12/18 to 1/1-19	"	14-1-19	" 8.
18-1-19	6 th Res	On com. to King H. Miff. M.D. 15.	"	18-1-19	No 15.
28 ² / ₁₉	N ^o 3 MD Com Wing	ceases att ⁿ on transfer to C.E.F. in Canada.	"	Rhyl	21-2-19 PT 00 51 6th Res No 61 15-2-19
18 ³ / ₁₉	6 th Res	ceases on Comd Rhyl HOS to C.E.F. Canada	Seaford	22-2-19	- 61

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	219743		H. Graves	Henry
Year	Unit.		Age.	Service.
	38 Cavalry		18	3 years



Station and Date.	Disease
	Appendicitis. Small bowel opened & discharged prof
	entered 13-6-18
	discharged 12-7-18
	W. L. [Signature]

* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

Station
and Date.

MEDICAL CASE SHEET.*

M

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
<i>2513408</i> Year	<i>219703</i>	<i>Pte</i>	<i>Groves</i>	<i>A</i>
	Unit	Age	Service.	
<i>Bearwood</i> 12-7-18 Station and Date.	<i>38¹</i>	<i>18</i>	<i>36/12</i>	
<i>207C</i>	Disease <i>Infected Abdominal Wall.</i>			
<i>15. 7. 18</i>	<i>Dressings</i>			
<i>22. 7. 18</i>	<i>Appendicitary wound healing - continue dressings</i>			
<i>29. 7. 18</i>	<i>W^a healed continue treat.</i>			
<i>5 - AUG 1918</i>	<i>W^a healed by Dressing LPT</i>			
<i>12 AUG 1918</i>	<i>W^a healed Improving, complains of pain in R^a groin on fast walking</i>			
<i>19 AUG 1918</i>	<i>operated on 2 yrs ago. improving now. Getting stronger. Carry on one week longer & discharge</i>			
<i>23/8/18</i>	<i>Discharge D.T. <i>A. Gallie</i></i>			
	<i>A. Gallie</i> Captain, Med. Off., Canadian Convalescent Hospital, Bear Wood, Wokingham, Berks.			
	<i>24 AUG 1918</i> Registrar, Canadian Convalescent Hospital, Bear Wood, Wokingham, Berks.			

Station
and Date.

11 20

Sheet II
Casualty Form - Active Service.

Regiment or Corps.....*38th Batta*
 Rank.....*Pte* Surname.....*Grimes* Christian Name.....*Henry*
 Religion..... Age on Enlistment..... years..... months.....
 Enlisted (a)..... Terms of Service (a).....*2 y 11 m* Service reckons from (a).....
 Date of promotion to present rank..... Date of appointment to lance rank.....
 Extended { } Re-engaged { } Qualification (b).....
 or Corps Trade and Rate.....
 Signature of Officer.....

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
			Embarked .. Disembarked..		
<i>24-9-18</i>	<i>DISCHARGED FROM 3RD C. D. Seaford</i>	<i>TO 601 BDN. PART II D. O. NO 225</i>	<i>Seaford</i>	<i>17/9/18</i>	<i>24-9-18 For O.C. 8rd Canadian Command Depot</i>
<i>4/10/18</i>	<i>Co RD</i>	<i>Asson on command to 3rd Bn</i>	<i>Seaford</i>	<i>17/9/18</i>	<i>6172 DO 249</i>
		<i>Patent in Beaufort Hill Hosp. Bristol</i>			
<i>10-1-19</i>	<i>Co RD</i>	<i>Sos reporting to 6th Reser</i>	<i>Seaford</i>	<i>7/1/19</i>	<i>2411 DO 8</i>
			<i>Eastern Ontario Regtl. Depot,</i>		

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoeing-Smith, &c.

[P.T.O.]

219743

219443

ORIGINAL MEDICAL HISTORY SHEET ORIGINAL

Surname Groves Christian Name Henry

Examined { on 23rd day of Sept 1915
at Lindsay
Birthplace { City or Town Bristol
County England

Approved by H. V. Alger
Rank Maj. 80th Ball M.O.

Apparent age 18
Trade or occupation Farmer
Height 5 Feet 2 Inches.
Weight 105 1/2 Lbs.
Chest measurement { Minimum 30 1/2 inches.
Maximum expansion 33 1/2 inches.
Physical development Good
Small-Pox Marks No

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT.
<u>21/10/16</u>	<u>DI</u>	<u>J. McCulloch</u> M.O. <u>Capt.</u> M.O.
		<u>28 JUN 1918</u>

Vaccination Marks { Arm Right 2 Left One
Number Three
When Vaccinated last January 25th 1916
(a) Marks indicating congenital peculiarities or previous disease None

Date	Result	VACCINATIONS.
<u>25/1/16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
		M.O.
		M.O.

(b) Slight defects but not sufficient to cause rejection
Slightly flat footed

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>9/5/16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>15/5/16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>25/5/16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.

Enlisted on 23rd day of Sept 1915 at Lindsay

	CORPS.	REG'T L NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>Overseas Contingent</u>	<u>45th Pat Regt</u>		<u>23.8.15</u>
Transferred to.. ..	<u>38th Bn.</u>	<u>219743.</u>		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>1st Coy Willey</u>	<u>6-12-18</u>	<u>nil.</u>	<u>A. H. [unclear]</u>
<u>Quinn's Barr.</u>	<u>1/20/14</u>	<u>nil</u>	<u>Cat [unclear]</u>
<u>Banquet</u>	<u>24-3-12</u>	<u>nil</u>	<u>St. [unclear]</u>

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.

W. [unclear]

CANADIAN

219743

Henry
Christian Name

Hooves
Surname

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
Barnesfield	29/9/15	2	10	15	16	10	15	Appendicitis	14		
Belleville	8/12/15	8	12	15	8			Result of Appendicitis			
	23/6/18	23	6	18	12	7	18	1st Abd. wall	19	Small bird spined & discharged fully	Sparker
		12	7	18	23	8	18	Do.	40	operation wound healed.	D. J. Collins, Captain, Med. Off., Canadian Convalescent Hospital, Bear Wood, Wokingham, Berks.
		27	8	18	18	9	18	J.C.I. Hand (A) Boil thigh (A)	23	Injured: Healing	30 Hutton Capt. Hoove
M.C.H. 3/18	18 9 18				28 OCT 1918			Do	41	Heart & Lungs normal 27/9/18 J.C.I. Hand healed had a comm. of war 8 P.T.I. D.I.	7000 J. Moody Capt. C.A.M.C., No. 1 Division.



Cassandra
6-3-19

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

REGT. No. *219743* RANK *Pte* NAME (IN FULL) *Grove, A*

M. OR S.	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?	(BLOCK LETTERS SURNAME FIRST)
NEXT OF KIN							
ADDRESS	<i>bil</i>				<i>E.O.B.A.</i>		
IS SEPARATION ALLOWANCE PAID?					PLACE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
TO WHOM PAID	<i>bil</i>	<i>Pte Henry Ghoral Sonya</i>			DATE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
ADDRESS	<i>bil</i>				ASSIGNED PAY \$	DATE EFFECTIVE	
					<i>15⁰⁰</i>	<i>1-4-19</i>	
					PAYABLE TO	RELATIONSHIP	ANY CHANGE IN ASSIGNEE OR ADDRESS
					<i>W. John Cameron</i>	<i>T.S.</i>	<i>John Cameron</i>
					ADDRESS		<i>9-630</i>
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE	
					DISCHARGED	PLACE DATE	REASON AUTHORITY IF ENTITLED TO POST DISCHARGE PAY
					<i>Kingston</i>	<i>27/3/19</i>	<i>Per. M.F.W. 187</i>

BALANCE FROM PREVIOUS ACCOUNT

MONTH	PAY AND F.A.		OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS
	NO. OF DAYS	RATE			AMOUNT	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2					COL. NO. 3	DEBIT	
				<i>42449</i>												<i>42449</i>	
<i>Jan</i>																	
<i>Feb</i>	<i>28</i>	<i>11⁰⁰</i>	<i>3080</i>	<i>3080</i>				<i>973</i>	<i>973</i>	<i>3987</i>	<i>30</i>			<i>89</i>	<i>33</i>	<i>415</i>	<i>84</i>
<i>Mar</i>	<i>27</i>		<i>2970</i>	<i>35</i>	<i>1120</i>			<i>60</i>	<i>86</i>					<i>60</i>	<i>86</i>	<i>15019</i>	<i>15019</i>
																	<i>Sea 72 Out 14 days</i>
																	<i>7738</i>
																	<i>War Service Gratuity</i>
																	<i>MTW 2595 Per</i>
	<i>183</i>	<i>Dup</i>		<i>420</i>	<i>420</i>									<i>70</i>	<i>70</i>	<i>350</i>	<i>7738</i>
														<i>70</i>	<i>140</i>	<i>280</i>	<i>8321790</i>
														<i>70</i>	<i>210</i>	<i>210</i>	<i>Apr. 25/19</i>
														<i>70</i>	<i>280</i>	<i>140</i>	<i>333302</i>
														<i>70</i>	<i>350</i>	<i>70</i>	<i>9934624</i>
														<i>70</i>	<i>420</i>	<i>70</i>	<i>May 27/19</i>
																	<i>9950708</i>
																	<i>July 22/19</i>
																	<i>1299573</i>
																	<i>Aug 23/19</i>

EP
med

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

G

9304

Aug. 1-1916

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

15			
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PARTICULARS OF SEPARATION ALLOWANCE

No. 219743
 Rank Pte. Promoted Reverted Discharge
 ✓ Soldier's Name H. Groves
 Battalion 109 Battr. B. Coy.
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

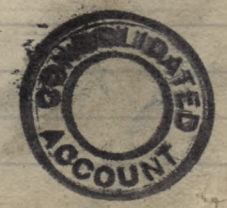
Name John Cameron
 Address Sonya Ont.
 Change of Address
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917					7535-H-2
Dec 31			255	255	
1918 Jan	M 69416		15	15	S
Feb	9 94498		15	15	
March	H 95153		15	15	
Apr	H 14278		15	15	H
May	S 21936		15	15	H
June	O 24276		15	15	H
July	16 32943		15	15	H
Aug	O 40398		15	15	H
OK War Sep	V 41814		15	15	H
Oct	W 52675		15	15	H
Nov	V 61675		15	15	H
Dec	X 65824		15	15	H
Jan	R 75217		15	15	H
Feb	Y 81259		15	15	H
Mar	M 83364		15	15	H
			480	480	H m R080309

M. F. W. 128
400M-6-17-1772-38-1141
L. L. 22320-M. & D. 7583.

A/c Closed 31-3-19
 Ret'd per Cassandra
 Date 5-3-19 M.F.W 187...3-19
 Clerk Hamilton

AUDITED



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

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PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No. _____

Rank _____ Promoted _____ Reverted _____ Discharge _____

Soldier's Name _____

Battalion _____

Beneficiary _____

Relationship _____

Address _____

Name _____

Address _____

Change of Address _____

1 _____

2 _____

3 _____

4 _____

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
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M. F. W. 128
 400M-6-17-1772-88-1141
 L. L. 22220-M. & D. 7993.