

Enlisted Feb 1/16

OK

ATTESTATION PAPER.

109th OVERSEAS BATTALION, C. E. F.

No. 725214

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... Haynes
- 1a. What are your Christian names?..... James
- 1b. What is your present address?..... 338 Adelaide St W. Toronto
2. In what Town, Township or Parish, and in what Country were you born?..... Kingsbridge Devonshire Co Eng.
3. What is the name of your next-of-kin?..... John Haynes
4. What is the address of your next-of-kin?..... West Norwington Kingsbridge Devonshire
- 4a. What is the relationship of your next-of-kin?..... father
5. What is the date of your birth?..... June 21st 1881
6. What is your Trade or Calling?..... Stone Mason
7. Are you married?..... No
8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... yes
9. Do you now belong to the Active Militia?..... No
10. Have you ever served in any Military Force?.. No
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement?..... yes
12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } yes



DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, James H. Haynes, 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.

Date February 4th 1916. James Haynes (Signature of Recruit)
A. R. J. Regan (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, James H. Haynes, 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 February 4th 1916. James H. Haynes (Signature of Recruit)
A. R. J. Regan (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 London this 4 day of February 1916

[Signature] (Signature of Justice)

6
OK

Description of James Haynes on Enlistment.

Apparent Age.....34 years7 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. 7 1/2 ins.
 Chest measurement { Girth when fully expanded.....38 ins.
 Range of expansion.....3 1/2 ins.
 Complexion.....Fair
 Eyes.....Blue
 Hair.....Brown
 Religious denominations. { Church of England.....C. of E.
 Presbyterian.....
 Methodist.....
 Baptist or Congregationalist.....
 Roman Catholic.....
 Jewish.....
 Other denominations.....
 (Denomination to be stated.)

Capillon on back of neck.

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.....February 4th 1916.....

Place.....Lundsey.....

James 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.

James Haynes.....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.

Date.....February 4th 1916.....

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

REGIMENTAL DOCUMENTS

NAME *Haynes James*

(Spr) REG. NO. *725214*

UNIT *109th Inf. Bn.* H. Q. FILE NO.

44

3

2

1

1

1

1

1

1

1

1

1

1

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

DEATH

Category

DISCHARGE

Category

DESERTION

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

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

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

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

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

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

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

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

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

MEDICAL EXAMINATION (M.F.W. 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)

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

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

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

R 149

Comp to B.P.B.
M

3/9/19

B.P.B. - Spec 67/200
RM 20:9:19

16330

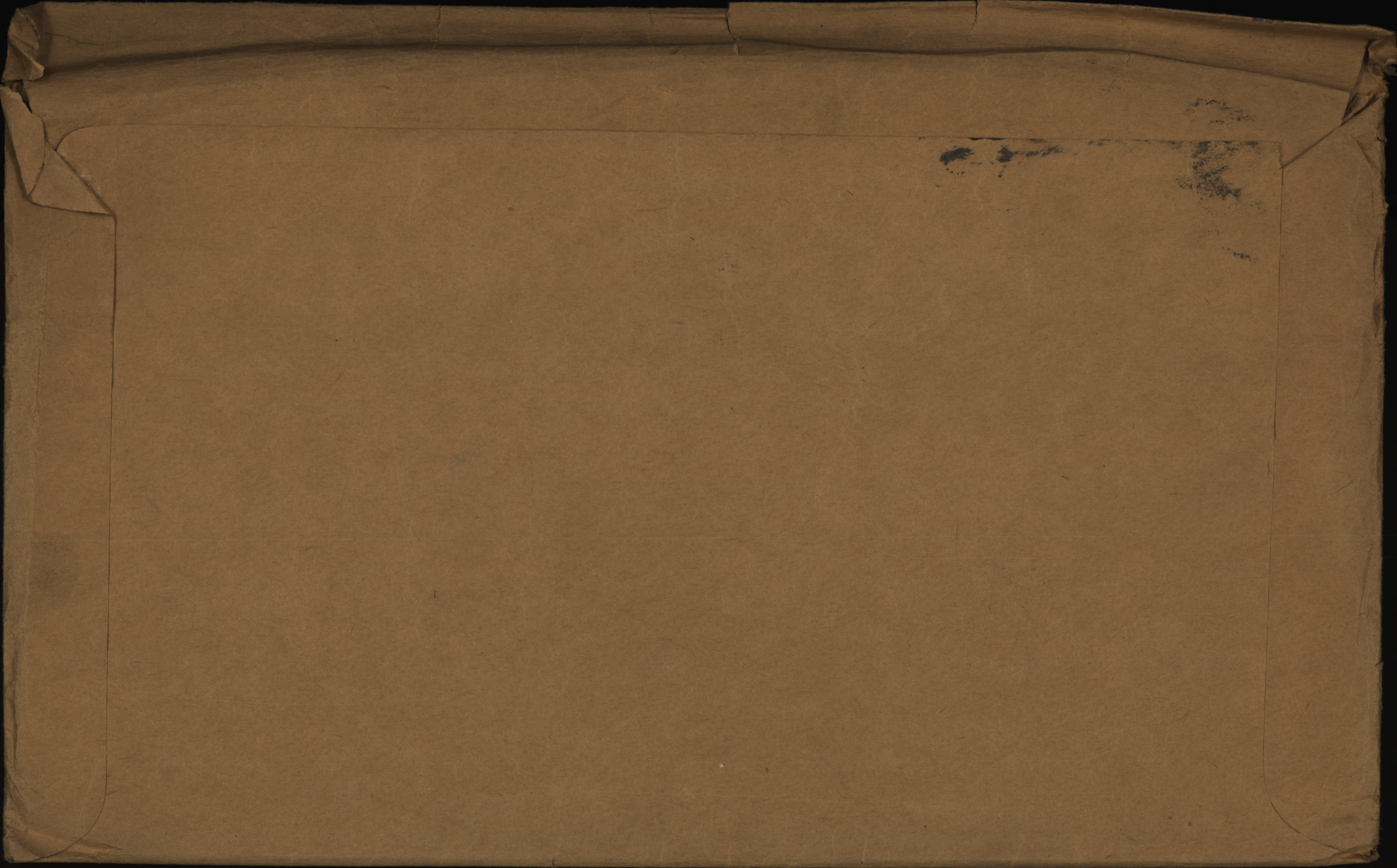
Demoted

H

2
10-6
10-7
31-7
2

Disp - cont.
m - P.W. - 67

AFI-1237



B.

To be made out in duplicate.

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

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 **725214**.....

(3) Full Name of Soldier **James Haynes**.....

(4) Place of Birth **Tuilstone near Kingsbridge**.....

Devonshire 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? Yes

If so, state name and address West Alvington near Kingsbridge
Devonshire England

(10) Is your Mother alive? yes

If so, state name and address Mary Haynes

West Alvington near Kingsbridge Devonshire 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.

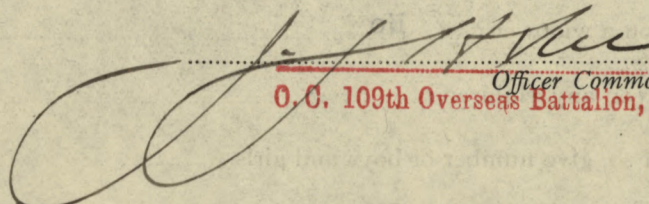
(15) Are you insured?.....

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 6th 1916.


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

725214

Pte Haynes J.

109th Bn. C.E.F.

Will removed by Regt. Paymaster.

76074

J. J. Williams
CAPT.
Paymaster, 100th Overseas Battalion, C.E.F.

- 20 -

Perforated sheet for Will from Pay Book of Reg.

No. 725214

Name J. Haynes

Unit 109th Batt.

*Witness
J. Graydon*

Military Will.

In the event of my death I give the whole of my property and effects to my mother.

Mrs Mary Haynes
West Alvington
Nr Kingsbridge

Signature J. Haynes

Rank and Regt. Private 109th Batt

Date Oct. 12th /16

MEMORANDUM

From

From

To

To

ANSWER

.....19

.....19

*G.P.O.
Loonts*

704

O/S
B Co

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

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

250M.—1-16.

H. Q. 1772-39-920.

Casualty Form—Active Service.

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

Regimental No. 25214 Rank Private Name Haynes James

Enlisted (a) 4.2.16 Terms of Service (a) D of W. 96 months Service reckons from (a) 4.2.16

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) Stone Mason

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>24.7.16.</u>	
	<u>Disembarked England</u>		<u>Liverpool</u>	<u>31.7.16.</u>	
<u>8-12-16</u>	<u>O.C. 109 Bn</u>	<u>Transferred to 124 Bn</u>	<u>Witley</u>	<u>8-12-16</u>	<u>Capt.</u> <u>ADJUTANT</u> <u>109th Overseas Battalion, C. E. F.</u> <u>D. O Part II 643.</u> <u>33</u>
<u>9-12-16</u>	<u>124th Bn.</u>	<u>Taken on strength of 124th Bn., C.E.F.</u>	<u>Witley Camp</u>	<u>8-12-16</u>	<u>Part III ADJUTANT</u> <u>Order 26,</u> <u>109th Overseas Battalion, C. E. F.</u> <u>MAJOR ADJUTANT,</u> <u>124th BATTALION C.E.F.</u>

(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.

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				
20.4.17	O.C. 12th Res. Bz. C.E.F.	Transferred to 12th Res. Battn.	EAST SANDLING	29.3.17	Part II 804
16.5.17	✓ 12th Res. Bz. C.E.F.	S.O.S. to 5th A.T.C. Engineers, Crowboro	do	16.5.17	Part II 124 Chusea company for Capt. rank 12th Res. Bz.
17th	17 JUL 1917 C.E.F. RECORDS, LONDON.	50 S of C.E.F. from 12th Res Battalion Crowboro		16.5.17	Part II Ord # 117
29 JUN 1917	C.E.T.D.	Struck off Strength of C.E.T.D. having proceeded overseas with 5th A.T.C.	CROWBOROUGH	29.6.17	Part II Order No. 134 Flynn Lieut. C.E. Adjutant, C.E.T.D.
20.7.17	M.S.O.	Landed in France	Havre	20.6.17	L.R. 8547 P/1
9-8-17	137A.	But Hand L. To 137A.		11-8-17	} A 26/5987/2560
		To Duty		11-8-17	
15.9.17	O.C.	Rejoined unit		16.8.17	B 213 O.C.S.
25.11.17	O.C.	Sentenced to 14 days P.D. No 1 19-11-17 for while on G.S. disobedience of orders. 18.11.17.		19.11.17	B 2069. P/23.
4.6.18	O.C.	With Unit.	Field	4.6.18	R.G. 18-11741

SERVICE AND CASUALTY FORM (Part I).

Army Form B.103—L.
Part I.

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

Nothing to be written in this margin.

Forms B. 103/3

HWV(R1460)

3/19

100,000

P2151

W10416

(6 28 19)

(1)*Substantive rank *Acting rank *(To be entered in pencil to facilitate alteration.) (4) Surname <i>Haynes</i> (5) Christian Names <i>James</i> (6) Army Form, number of, Attestation } Form or Record of Service paper } (7) Whether of British or of Alien origin (<i>vide</i> A.C.I. 578 of 1918) (8) Date of birth as stated on enlistment (9) (a)	(2) Regiment or Corps <div style="font-size: 2em; text-align: center;"><i>109th Battalion</i></div>	(3) Regtl. No. <div style="font-size: 2em; text-align: center;"><i>925214</i></div>
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(10) Enlistment (<i>b</i>)	(11) Engagement (<i>c</i>)
(12) Service reckons from (<i>date</i>)	(13) Special conditions (if any) of enlistment (<i>d</i>)
(14) Any subsequent variations (if any) } of conditions of service	Initials and Rank of an Officer.
(Authority)	(<i>date</i>)

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

(17) Next of Kin <i>Mrs M. Haynes</i>	
(18) Demobilizer (<i>f</i>)	(Place)
(19) Pivotal-man (<i>f</i>)	(Date)
(20) Qualifications (<i>g</i>)	or (21) Corps trade and rate
(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, Shoeing-smith, &c.

(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					
			Arrived England Per 11. M.T. 2810		31.7.16	
8.12.16	Mc 109 Bn	Pt 11. D.O. 343	S/S on trip to 124 Bn	Witley	8.12.16	
9.12.16	Mc 124 Bn		Adm to Hoop	Witley		
9.12.16	Mc 124 Bn	N.O. 265	Y/O on trip from 109 Bn	Witley	8.12.16	
1.2.17	Mc 124 Bn	D.O. 32	Adm to Hoop	Witley	28.1.17	
28.2.17	Mc 124 Bn	D.C.L. 48	Y/O to C.E. Hoop Woodcote Park	Lipson	22.2.17	
28.3.17	12 Rn Bn	Pt 11. D.O. 80	Taken on on strength	Wandling	29.3.17	
3.4.17	124 Bn	D.O. 85	S/S to 12th Res Bn	Witley	29.3.17	
16.5.17	12 Rn Bn	D.O. 124	S/S to 5th Army Hoop	Wandling	16.5.17	
29.6.17	C.L.T. 10	D.O. 154	S/S to 5th C.T. Co France	Crooboro	29.6.17	
10.7.17	5th A.T. Co	D.O. 1	Landed in France	Field	30.6.17	
16.8.17	125th Bn	C.L. 117	Disch C.E. Hoop Woodcote Park	Lipson	29.3.17	
20.8.17	5 A.T. Coy	C.L.A. 7	Adm No 13 Co 7d Amb	Field	8.8.17	
20.8.17	5 A.T. Coy	C.L.A. 7	Discharged to Duty	Field	8.8.17	

Recommended
FOR LT: COL: I/O RECORDS, C.O.M.F.

Nothing to be written in this margin.

725214

Army Form B. 103.

Regimental Number.....

Casualty Form - Active Service.

Regiment or Corps... *5 Army Troops Coy. Can. Engrs.*

Rank..... Surname *Haynes* Christian Name *James*

Religion..... Age on Enlistment..... years..... months

Enlisted (a) *4.2.16* Terms of Service (a) *4.2.16* Service reckons from (a) *4.2.16*

Date of promotion to present rank..... Date of appointment to lance rank.....

Extended { } Re-engaged { } Qualification (b) *Stone Mason*
or Corps Trade and rate.....

Occupation..... 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>17. 8/18</i>	<i>O.C. Unit</i>	<i>On Comm to 5th Squad B Coy.</i>		<i>12 9/18 B 213.</i>	
<i>31. 8/18</i>	<i>do</i>	<i>Off Command</i>	<i>India</i>	<i>28 9/18 B 213.</i>	
<i>5-10-18</i>	<i>O.C.</i>	<i>Granted 14 day leave to UK</i>		<i>2/10/18 B 213/H 304/1918</i>	
<i>2-11-18</i>	<i>O.C.</i>	<i>Off leave</i>	<i>India</i>	<i>16.10.18 B 213</i>	
		<i>Proceeded to England</i>		<i>3.3.19 P.H.</i>	
<i>6.3.19.</i>	<i>C.S. M/C.</i>	<i>Attached on arrival from France</i>	<i>Seaford</i>	<i>4.3.19. C.E.C. 498</i>	

(e) 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, Shipping-Smith, &c.
 W. 858-M2332-1000m 9/17 (85611) C. P. & S., Ltd. Form B. 103 E/1807. P.T.O.

Casualty Form—Active Service.

Regiment or Corps.....
 Rank..... Surname Haynes Christian Name J.
 Religion..... Age on Enlistment..... years..... months
 Enlisted (a)..... Terms of Service (a)..... 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.....
 Occupation..... 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...			
<u>31/3/19</u>	<u>1.62 RB</u>	<u>S.O.S from 5th A.T Coy</u>		<u>18/3/19</u>	<u>P-16 4075</u>
<u>7.5.19</u>	<u>1.62 RB</u>	<u>Wanted under restricted</u>	<u>Seaford</u>	<u>6.5.19</u>	<u>P-11 105</u>
<u>6/19</u>	<u>"</u>	<u>has for 6 months</u>		<u>23.6</u>	
		<u>S.O.S to C of Canada "</u>		<u>14.19</u>	<u>P/200137</u>
		<u>ad. Rank Lt. Col. ap 16/6</u>			<u>141</u>
		<u>Embarked Liverpool SS BELGIC</u>		<u>ad 1</u>	<u>st CERD.</u>
		<u>22/6/19</u>			
		<u>Disembark d HALIFAX 1-7-19</u>			
		<u>for Stewart LT FOR Capt & Adj. *</u>			

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

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				
22/6/19	S. O. S.	Discharged	London	Order ...	1916
				Major	
				O. C. Dispersal Area Station	

725214

MEDICAL HISTORY SHEET.

ORIGINAL

ORIGINAL

725214

Surname

Haynes

Christian Name

James

Examined

on 4th day of February 1916
at Lindsay

Approved by

J. McCulloch
Capt.
Medical Officer
Rank 109th Overseas Battalion, C.E.F.

Birthplace

City or Town Kingsbridge
County Devonshire England

Apparent age

34 years

Trade or occupation

Stone Mason

Height

5 Feet 7 1/2 Inches

Weight

140 Lbs.

Chest measurement

Minimum 34 1/2 inches
Maximum expansion 38 inches

Physical development

Good

Small-Pox Marks

None

Vaccination Marks

Arm Right None Left Five
Number Five

When Vaccinated last

Feb. 4th 1916

Date Result

VACCINATIONS

4-2-16 Good J. McCulloch
M.O.

(a) Marks indicating congenital peculiarities or previous disease

None

(b) Slight defects but not sufficient to cause rejection

TAB 17-5-1917 W.G.

None

Date Result

ANTI-TYPHOID INOCULATIONS, ETC.

18/4/16 Good J. McCulloch M.O.
25/4/16 Good J. McCulloch M.O.
7/5/16 Good J. McCulloch M.O.
23/9/16 H. Boyd

Enlisted on

4th day of February 1916 at Lindsay

Joined on enlistment

CORPS. REG'TL NUMBER. HABITS. DATE.

109th Batt. 725214. 4-2-16.
C.E.F.

Transferred to..

124th OVERSEAS BATTALION C.E.F.

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.

J. M.O.

James

Christian Name

Haynes

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				
Biamshott		28	1	17	21	2	17	Tonsillitis	25	Suppurative - Made a good recovery	<i>[Signature]</i>
C. C. H. Epsom		21	2	17				- -		Recovered. 3 weeks P. P. 2 Transferred to Unit <u>A III</u>	
No. 13 C.F.A.		8	8	17	8	8	17	Cut hand Barb wire.		Discharged A.7-A.7 DT. <i>[Signature]</i> "G" DIVISION.	<i>[Signature]</i> CAPT. G.A.M.C.

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. 725214 Rank Spr. Surname HAYNES
(Given name in full)
James
 Unit or Corps 1st C.R.B. Birthplace Therstone Eng.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 160 lbs. Height 5' 9" Colour of Eyes Blue
 Nutrition Good
 Pulse 80
 Condition of arteries Good
 Vision Rt. 6/6 Left 6/6
 Hearing (conversational voice) Rt. 21 ft.
 Left 21 ft.

Identification marks, scars, or deformities.
(Give cause and date of origin).
Warty excrescence on back of neck.

Opinion as to general health and physical condition Good

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

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

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

Tonsillitis 8/8/17 - good recovery
Cut hand (braked wire) 28/1/17 - good recovery

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Seaport (Overseas)

Date 24/5/19

Signed C. D. Brown Cap M.O.

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

Signature J. Haynes

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

THIS SECTION FOR USE IN CANADA—

Examined at Osaka (Canada)

Date 27.19

Signed C. D. Brown Cap M.O.

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

Signature J. Haynes

(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.)

MEDICAL CASE SHEET.*

No. in
Admission
and
Discharge
Book.

Regimental No.
725214.

Rank.
Plt

Surname.
Haynes.

Christian Name.
J.

Year
1917

Unit.
124.

Age.
35.

Service.

Station
and Date.

Disease Tonsillitis

Grayschott
Jan 28th 17

Family History - Father ill for part of year with softening
of Brain.
Mother, aunts & well & sisters & both aunts well

Habits - does not drink or smoke -

Past illnesses - never sick before -

Present illness - Four days ago began to have
sore throat, feverish and aches
& Pains all over. Admitted to
No 3 Detachment but getting and
felt about same - till he was
admitted here -

Phy Exam - Throat Badly inflamed Right
side larger than left. Difficulty in
swallowing -

Respiratory & Circulatory & Digestive
systems normal - also all other
organs

G Campbell Capt

Feb 4 1917

Throat much better - Swab negative
much better all wound etc.

K. H. M. M. D.

Throat Greatly improved

G Campbell Capt

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

Station
and Date.

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block Letters) H A Y N E S, J.

REGIMENT 1st CERB. RANK Spr. No. 725214

Date of Examination in England 3/6/19. 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 4-10-32
2. EXTRACTIONS 3-6.
3. CROWNS _____
4. DENTURES
 - (a) Full Upper _____
 - (b) Part Upper yes
 - (c) Full Lower _____
 - (d) Part Lower yes.

A. D. D. S., M. D. No. 3

HAS HE EVER REFUSED DENTAL TREATMENT? no

- 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 yes
 - (c) In France _____

Signature of Dental Officer _____

J. H. Hawie

Capt.

C. A. D. C.

THE UNIVERSITY OF CHICAGO

JAN 11 1951

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W & B Class A

SHORT FORM.

War Service Badge Class.....

No. 22926/..... Issued

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

4-10-41

1. No. 725214

2. Rank. Sp4

9-11-41

3. Name. Haynes James

4. Unit. Can. Engrs

5. Date of Discharge 3/7/19 Place Ottawa

6. Reason for Discharge Demobilization
War service badge class A S.G. O.G. D.G. 25 2 9

7. Authority No 1420/1894

8. Proposed Residence after Discharge Toronto Ont

Embarked Liverpool SS BELGIC
22/6/19
Disembarkd HALIFAX 1-7-19
LTJGR Capt & Adj

Received
6/11/19
N. 15/6

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.?)

J. Haynes
Signature of Soldier.

10. CONFIRMATION.
The discharge of the above named man is hereby confirmed.

Place.....

Date.....



Signature..... R. Heathcote
for O. C. Dispersal Area Station (O. C. Discharging Unit.)

PROCEEDINGS ON DISCHARGE

(Demobilization)

1. Name of Soldier		2. Service No.	
3. Branch		4. Regiment	
5. Date of Discharge		6. Reason for Discharge	
7. Authority		8. Remarks	
9. Signature of Soldier		10. Signature of Officer	
11. Date		12. Place	



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 (C.A.D.C. 5009a).
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 and Clothing Statement Q.M.G. Form (D.O.S. 2),
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B.64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sandry Documents.

Group *Q11*

Checked by No. *20*

[Signature]

12 JUN 1919

W/ 513 Class A

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge Class... A...
22926 Issued

THIS IS TO CERTIFY that No. 125214 (Rank) Sp4

Name (in full) Haynes, James enlisted in

the 109th Inf. Bn.

CANADIAN EXPEDITIONARY FORCE at Lindsay Ont on the 4

day of February 1916

HE served in 5th a.g.c. 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

Height 5' 7 1/2"

Complexion Fair

Eyes Blue

Hair Brown

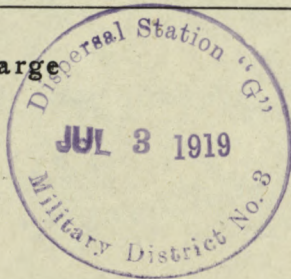
Marks or Scars

Wart back of neck

J. Haynes
Signature of Soldier.

P. V. Heathcote
Issuing Officer.

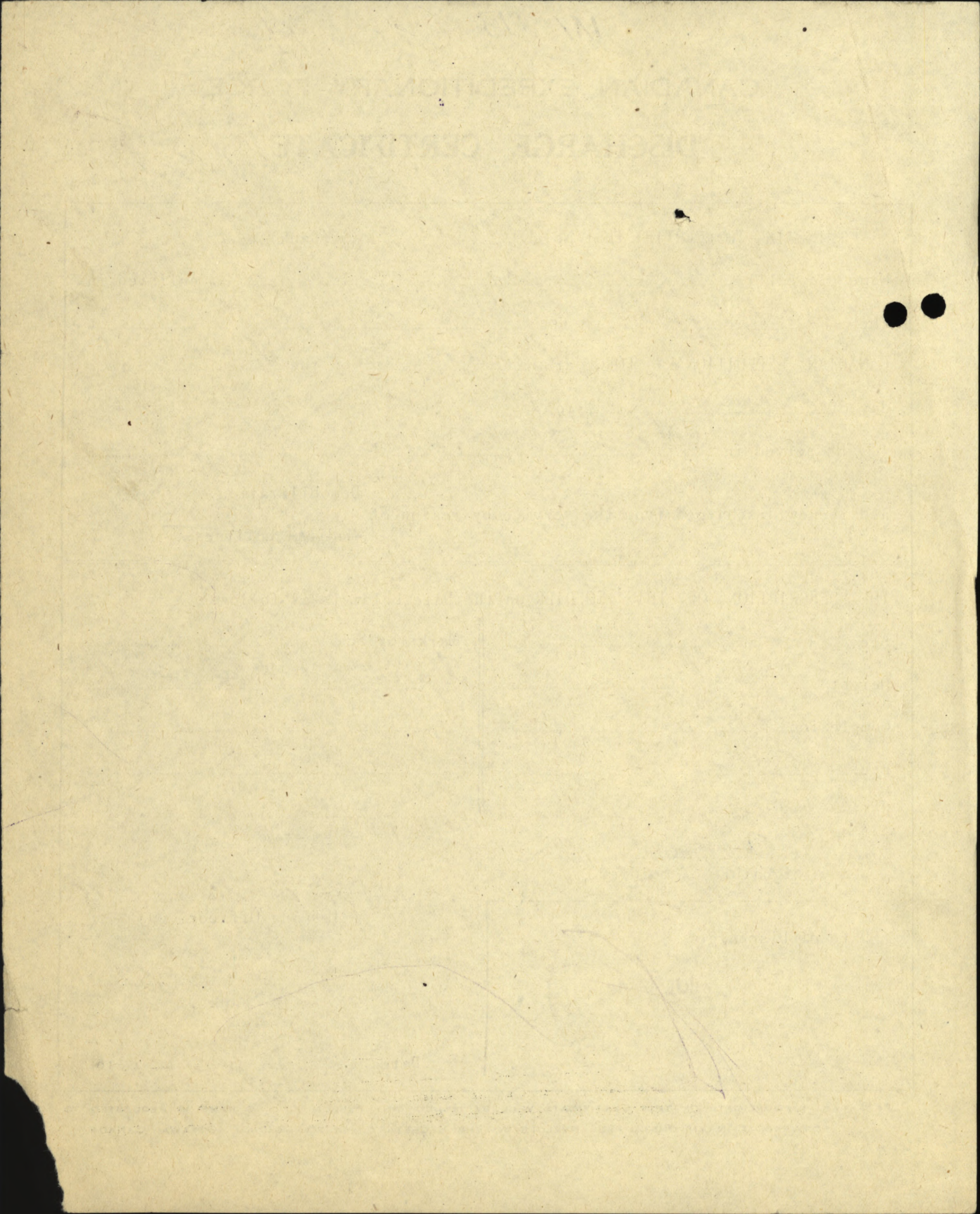
Date of Discharge



Leapt
Rank

Date 19.....

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.



Number

725214

Rank

Spr

B

Surname

HAYNES

Christian Name

James

V

Units

C.E.

Theatre of War

France

Date of Service

29-6-17.

Remarks

Latest Address

G.P.O. 55 Seaton St.,

Toronto.

Roll No.

D. Page 14341

ONT.

22/8/41

200m.-2-21.M.

DESP. SEP 3 1941

REGN No.

124

REG'TL No 725214

H. Q. FILE No. 649-

NAME *Haynes*

RANK AND CORPS *Pte*

J. 124th Bn.

FOLLOWS

No.

FOLLOWS

CABLE

No.

DATE

NATURE OF CASUALTY

LIST No

HOSPITAL

DATE OF
ADMISSION

REMARKS

41	Mil. Bramshatt	29-1-17	Ny D. "O"
48.	Low Low Woodcote Pk	22-2-17	Tonsillitis
117	Disch	27-3-17	Tonsillitis
a7	#13 Can Old Amb	8-8-17	Cut Hand Barbed Wire
a7	Disch to Disch	8-8-17	Cut Hand " " "

No. 125214. RANK

E Pl

NAME *Haynes James.*

T. O. S. 4-2-16.

UNIT

d.o.b.s. 4-2-16

109th. Battalion.

M. D. 13

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916 Feb. 4</i>	<i>1916 Feb. 29</i>	<i>✓</i>		
<i>Mar.</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



Surname **Haynes** Christian Name or Names **J.** Reg. No. **725214**
 Rank _____ Unit **5th Army Troop, Coy. C.** Co. _____ Troop _____ Batty _____
Pte ~~124th Bn~~ Hospital _____ Date of Admission _____

Bramshott Mil. 29-1-17

Transferred _____ Hosp. _____

Can. Gen. Sept. 1917 Hosp. *22. 2. 17.*

13. Can. Hd. Quarters Hosp. *8. 8. 17.*

Hosp. _____

Diagnosis

M.S.

Conjunctivitis

(1) Later Diagnosis (if changed)

Cut Hand Barbed Wire

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Date

C.L.6-2-17 41

Dis 27. 3. 17
REMARKS

- 28. 2. 17 48

16. 8. 17 117

- 20. 8. 17 27

Dis to Duty 8. 8. 17 B

A.M.D. 2 Dept.

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

aw.

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm

1.

2.

3.

4.

5.

6.

7.

TEH. Rank HAYNES, James Name HAYNES, James Reg'l No. 725214
 Unit 109th. Bn. If in perm. Corps, }
 What Unit? } Married or Single Single.
 Place and Date of Enlistment Lindsay, Febr. 4th. 1916. Place of Birth Kingsbridge,
MRS M. (Anth. A.S.P. 64915) Devonshire, Co. Eng.
 Name and Address, Next-of-Kin John Haynes,
West ALVINGTON, Kingsbridge, Devon County, Eng. Relationship Father.

Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship

19462
 N/E. R.E. N3
 File R.L.
 Category CAN. OF

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					
8.12.16	109th Bn	S.O.S. to 124th Bn	Witley	8.12.16	Pt II D.O. 343
9.12.16	124th Bn	S.O.S. to 109th			265
1-2-17		adm. to Hosp.		28-1-17	32. D.O.L. 41. Quinny
28-2-17		Spa to C.C.H. Woodcote	Epsom	22-2-17	De.L. 48
28-3-17	124th Res Bn	Taken on Strength	E Sandring	27-3-17	Pt II D.O. 85
3-4-17	124th Bn	S.O.S. to 12th Res. Bn	Witley	29-3-17	Pt II D.O. 85
16.5.17	12 Res.	S.O.S. to 5th Army Troop	Wandling	16.5.17	124
29.6.17	CSTB	S.O.S. to 5 th ATCo France	Crowboro'	29.6.17	154
10.7.17	5 th A.T.Co	Landed in France	Field	30.6.17	1
16.8.17	125th Pt	Wandling C.C. Host! Woodcote Pt	Epsom	27.3.17	CL 117 Foucaultes

5 ATCo
 K
 Haynes

H

N.F.B. 103 CHECKED
 CSTB 220.117
 17.5.17

725214 Haynes J.

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.				
20. 8. 17	5 th A.T. Coy.	Adm No 13 Can Fd. Amb. Field		8. 8. 17	CLA 75 cut No.
20. 8. 17	DO	Discharged to duty	DO.	8. 8. 17	DO (Barbed Wire
31. 3. 19	1 st C.E.R.B.	T.O.S. from 5 th A.T. Co. rpr. Seaford		29. 3. 19	DO. 75.
1. 5. 19	"	AWL ^{Under 20 day detentions} for Was Pay P.A.		21. 4. 19	" 100
29. 4. 19	"	Proceeded to Wandsworth Det. Barracks to undergo 20 day detention	"	28. 4. 19	" 98
12-5-19	"	Ret'd from Wandsworth	"	10. 5. 19	" 109
2. 6. 19	1 CERB	SCS .C CANADA	Seaford	23. 6. 19	DO 141
		71-9-22		23 ⁶ / ₁₉	

MILITIA AND DEFENCE ASSIGNED PAY.

Ref. No. N/Roll
88

33715

To whom Mrs Mary Haynes,
Address Kingsbridge, West Alvington
Kings Bridge Devonshire. Eng.

By whom assigned Haynes James,Regtl. No. 725214Rank PteCorps, &c. 109th Btn.Rate \$15.00Date to Commence 1st August, 1916.

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Pay Sheet Deduction.	REMARKS.
Jan.	1916				
Feb.					
March					
April					
May					
June					
July					
Aug.		150016	15	X	
Sept.		185383	15	X	
Oct.		199142	15	X	
Nov.		236700	15	X	
Dec.		377716	15	X	
Jan.	1917	320105	15	X	
Feb.		361884	15	X	
March		404929	15	X	
April					
May					
June					
July					
Aug.					

*File 64915**Repaid 23/9/16 D**A.P. checked & found correct
26-3-17 J.P. D. R. P.*

ASSIGNED PAY.

By whom assigned *Haynes James*
 Regtl. No. *725214* *Pte 109th Regt.*

Month.	Year.	Cheque No.	Amount.	Pay Sheet.	REMARKS.
Sept.	1917				
Oct.					
Nov.					
Dec.					
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1919				
Feb.					
March					

AUDITOR *W.M.* PAYMASTER *W.M.*

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

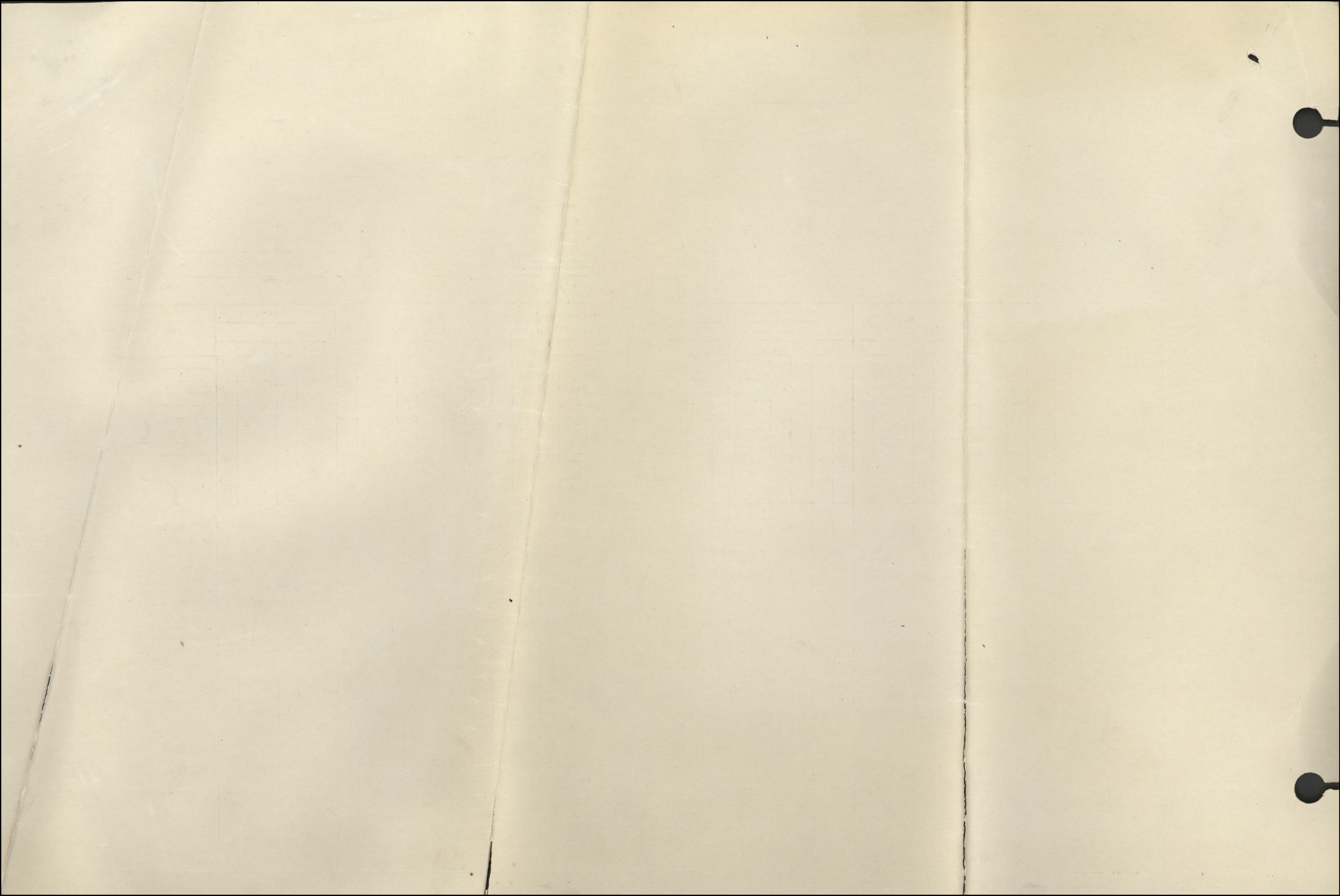
M. OR S. REGT. NO. *725214* RANK *Spr* NAME (IN FULL) *HAYNES, James*
 NEXT OF KIN ADDRESS RELATIONSHIP ORIGINAL UNIT C.E.F. *109th Bn.* IF IN P.F. WHAT UNIT? BLOCK LETTERS SURNAME FIRST!
 ADDRESS PLACE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY
 DATE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY
 IS SEPARATION ALLOWANCE PAID? *- Nil -* DATE EFFECTIVE *3-7-16* ASSIGNED PAY \$ *15th A.O.* DATE EFFECTIVE *1-8-19*
 TO WHOM PAID RELATIONSHIP PAYABLE TO *Mrs. M. Haynes* (Wife) ANY CHANGE IN ASSIGNEE OR ADDRESS
 ADDRESS *New Clonington, Baybridge, Down, England.*
 STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE PLACE DATE REASON AUTHORITY IF ENTITLED TO POST DISCHARGE PAY
Kingsdown 3-7-19. Desert.

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	CREDIT	
July	8	1.10	8.80	35 ⁰⁰ 70 ⁰⁰	113	80			987	84	80			19.13	19.13	19.13	Returned "Belgie" Bal. per Eng ^{l.} P. C., Clothing Allow. and 1st Payment W. S. G. Pay to estimate date of discharge. Advances in England. Bont Money, Train Money. Overpaid 5 days on discharge.	
<i>War Service Certificate</i>																		
1913				624													<i>M. JW 259116e</i>	
				624													<i>1st Page 624, #8, 10074</i>	
																	<i>WR 9935283 July 31/19</i>	
																	<i>Y1305054 Sep 2/19</i>	
																	<i>Y1319627 Sep 29/19</i>	
																	<i>Y1331071 Oct 29/19</i>	
																	<i>1339023 - Dec. 1/19</i>	

1913

BALANCE FROM PREVIOUS ACCOUNT

OK



MARRIED OR SINGLE

Single

PLACE OF BIRTH

Kingsbridge Devonshire Eng

NAME AND ADDRESS OF NEXT OF KIN

*Mrs. J. M. Haynes
West Aovington Kingsbridge Devon
Eng*

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

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED

DATE DISCHARGED

V. OR A.

NAME OF HOSPITAL

U.S. checked ground covered 29.3.17

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE RECORD				
	NO. OF DAYS	RATE	AMOUNT \$	C.	NO. OF DAYS	RATE				AMOUNT \$	C.	NO.	DATE	NO.
<i>July 31</i>									<i>27 86</i>	<i>27 86</i>				
<i>Aug 31</i>	<i>31</i>	<i>1.00</i>	<i>31</i>		<i>31</i>	<i>10</i>	<i>3 10</i>			<i>34 10 15 9 86</i>				
<i>Sept. 30</i>	<i>30</i>		<i>30</i>		<i>30</i>		<i>3</i>			<i>33 47 31 8 16 79 15 16</i>				
<i>Oct 31</i>	<i>31</i>		<i>31</i>		<i>31</i>		<i>3 10</i>			<i>34 10 19 30 9 16 158 15 16</i>				
<i>Nov 30</i>	<i>30</i>		<i>30</i>		<i>30</i>		<i>3</i>			<i>129 06 33 186 30 10 16 290 30 11 16</i>				
<i>Dec 31</i>	<i>31</i>		<i>31</i>		<i>31</i>		<i>3 10</i>			<i>34 10 228 15 11 16</i>				
<i>Jan 20</i>	<i>20</i>	<i>1.00</i>	<i>22</i>							<i>22 118 16</i>				
<i>Jan 11</i>	<i>11</i>	<i>1.00</i>	<i>12 10</i>							<i>12 10 424 15 1</i>				
<i>Feb 28</i>	<i>28</i>	<i>1.00</i>	<i>30 80</i>							<i>30 80</i>				
<i>Mar 31</i>	<i>31</i>		<i>34 10</i>							<i>34 10</i>				
<i>April 20</i>	<i>20</i>		<i>22</i>							<i>22 317 16</i>				
<i>Apr 10</i>	<i>10</i>		<i>11</i>							<i>11</i>				
<i>May 31</i>	<i>31</i>		<i>34 10</i>							<i>34 10 97 30 4 37 13 4</i>				
			<i>334 40</i>							<i>27 86 362 26</i>				
			<i>334 40</i>							<i>27 86 362 26</i>				

*769 1
391 2
685 3*

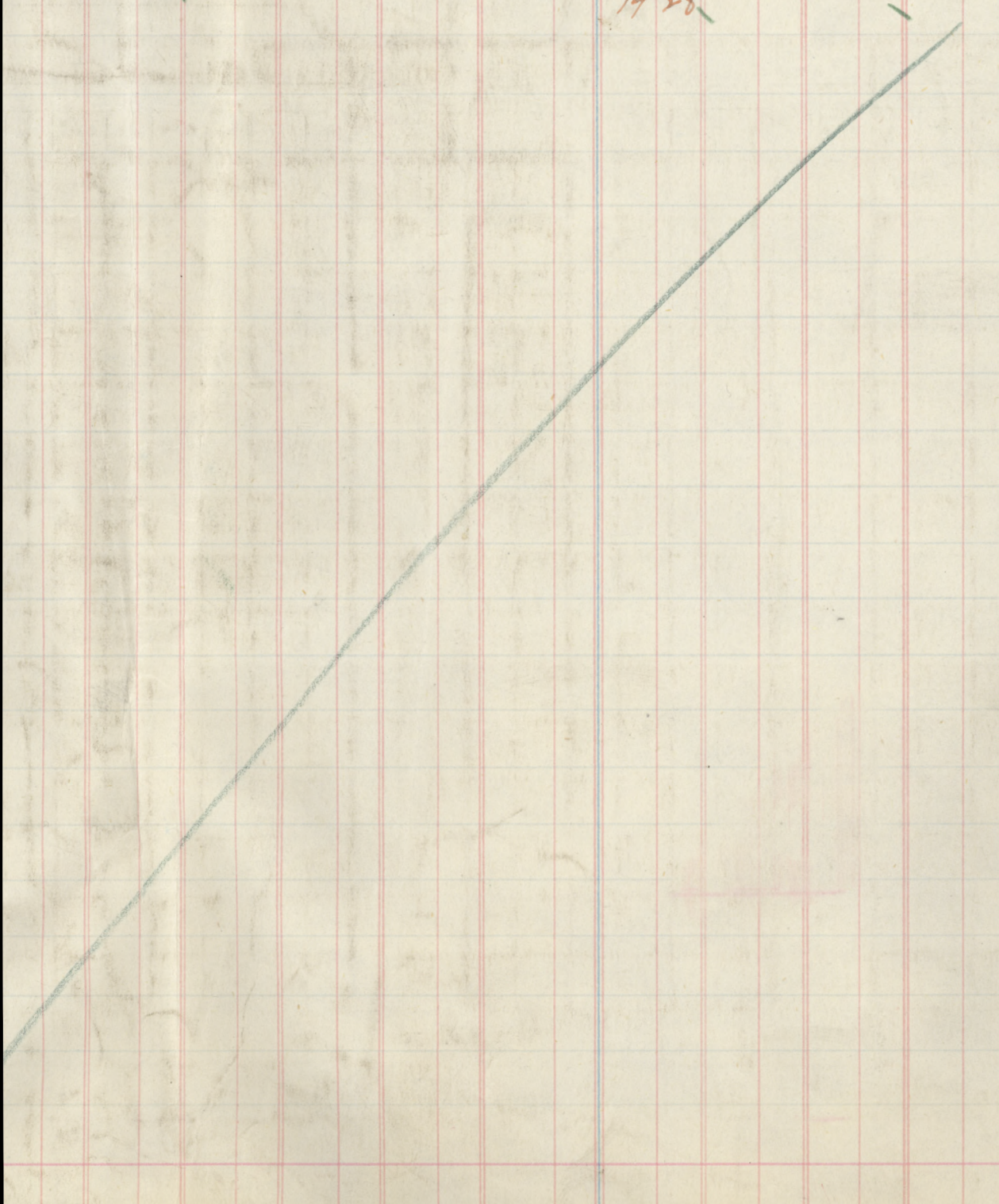
*1096 7
378 3
164 4*

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

14 60	75 44		150	17 60	328 20	34 06					
			15	19 89	19 87	47 19					
			15		15	66 29					
			15		15	85 39					
			15		15	103 39					

14 60	75 44	210	17 60	393 07	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER. PAY	SEP. ALLGE. ENG.
-------	-------	-----	-------	--------	------	------	------	------	---------	------------	------------------

34 10					7 14						
					3 57						
					3 57						
					14 28						
								15	118 46		



* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND OR * CANADA.	SEPARATION ALLOWANCE.	
EFFECTIVE DATE:-	1-8-1916	EFFECTIVE DATE:-	
AMOUNT:-	15 ⁵⁰ / ₁₀₀	AMOUNT:-	
NAME, ADDRESS, RELATIONSHIP & AUTHORITY		WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF A.P. IN PREVIOUS MONTH, WORD "SAME" ONLY TO BE WRITTEN IN	
Mary Haines (Mother) West Abington, Kingsbridge, Scotland			

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS				UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE BY INSERTION OF DATE CHARGED IN RED IN			
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
14/5	2114	1 cent	1947				
	2677	1	457				
30/5	2703	1	1465				
			3894				
							20.105-1/4/19 100
							6 mens. w/e

PARTICULARS OF RENDERING NON-EFFECTIVE:			
MONTH	PARTICULARS	CR. 1	CR. 2
1918			
Mar 31	Balance Forward		
April	P.P.A.	33	00
			AR. 3. 9/4/18
			" 18 24/11
		33	
May	P.P.A.	34	10
			AR 28. 8/5/18
			" 39 73/5/18
June		34	10
		33	
			Bu 3664
			AR 50 5/6
			AR 64 2/6
JUL 1918	Pay	34	10
			AR 1177
			AR 157 5/6
			AR 138- 30
		34	10
Aug		34	10
			17
			21
		34	10
Sept	P.P.	33	
			6/8
			AR. 280 Pa
		33	
Oct	Sprinkay	34	10
			AR 395
			AR. 1256 5/6
			" 335
		34	10
			over

NUMBER

12521A

RANK

Spr

NAME

Haynes J.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BA
Nov & Dec	d/m pay	67 10		62044			15		10
Jan	do	34 10		at 448. 5 at 6. 14" 18	16 49		15		
				Dec 671640					
				at 495 5 6/6 15/12/18	7 46				
				\$27768 Jan.			15		
				AR 278 109.	2/7/17 279				13
		101 20			27 04		15		
Feb	✓	30 80		531 5AT Coy.	16/19 7 46				
				669964			15		
				578 5AT Coy	3/19 3 73				
				648 ✓	11/19 3 73				
Mar	✓	34 10		7849 6838	20/19 4 66				
				3427 Lestave	26/19 7 46				
				341968			15		
		64 90		53. 6866	9/19 48 67		30		
				53 ✓	9/19 73 -				
		64 90			148 71		30		2
April	✓	33 -		A 28637.			15		
May		34 10		EAP a 69817			15		
				80100. 15/19. 168RB. Awl from 0630					
				193/19. to 0130 9/19. 2 days Detm. for file:					
				21 days pay 214/19. total. 41 days P.A.			45 10		
		67 10					45 10 30		
June	✓	33		EAP June			15		
				July } 1291549			15		
				2114 10 EAB.	15-5-19 19 47				
				2703 ✓	20-5-19 11 60				
				2676 ✓	24-5-19 4 87				10
		177 22.00			29 94		20		

Sol Legnada S.P. 71
 P# 23-619

NAME

Haynes J.

CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
		<i>Wd.</i>					10946		
6/10		62044			15				
3/10		AR 448. 5 at 6. 14/18	1649						
		Dec 871640			15				
		AR 495 5 6/6 15/12/18	746						
		F 27768 Jan.			15				
		AR 278 18. 12/7/17	279				13862		
10/20			27 04		45				
30 80		531 5AT Coy 16/19.	746						
		669964			15				
		576. 5AT Coy 3/19	373						
		648 ✓ 11/19	373						
34 10		7849 6813A. 20/19.	466						
		3427 Lecture. 26/19.	746						
		F 31968			15				
64 90		53. 68MB. 9/19.	4867		30				
		53 ✓ 9/19	73						
64 90			14871		30		2481		
33 -		A 28637.			15				
34 10		EAP a 69217			15				
		RO100. 15/19. 168RB. Awl from 0630							
		19/19. to 0130 9/19. 2 days Detn. forfeit							
		2 days pay. 21/19. total. 41 days PVA.		45 10			1681		
67 10				45 10 30					
33		EAP June } 1791549			15				
		July } 1791549			15				
		2114 10 EAB. 15-5-19	19 17						
		2703 ✓ 20-5-19	1460						
		2678 ✓ 24-5-19	1189				1913 D2		
32 00			3894		20.				

Sol Leonada S.F. 1
 Eff 23-6-19

3300
 1681
 4981
 6894
 4981
 1913 D2