

MAR 18 1916

Signaller

ATTESTATION PAPER.

No. 72110.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio.

ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION. (ANSWERS.)

1. What is your surname?..... *Howe*
- 1a. What are your Christian names?..... *James Edwin*
- 1b. What is your present address?..... *Rindsey Ont.*
2. In what Town, Township or Parish, and in what Country were you born?..... *Windsor Ont.*
3. What is the name of your next-of-kin?..... *Mr. Howe*
4. What is the address of your next-of-kin?..... *Rindsey Ont.*
- 4a. What is the relationship of your next-of-kin?..... *Father*
5. What is the date of your birth?..... *August 1st 1897*
6. What is your Trade or Calling?..... *Salesman*
7. Are you married?..... *No*
8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... *No*
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 Edwin Howe*, 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.

J. E. Howe..... (Signature of Recruit)

Date *MAR 18 1916* 191..... *J. J. [Signature]*..... (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

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

J. E. Howe..... (Signature of Recruit)

Date *MAR 18 1916* 191..... *J. J. [Signature]*..... (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 *Rindsey* this *MAR 18 1916* day of..... 191.....
J. J. [Signature]..... (Signature of Justice)

Description of James Edwin Howe on Enlistment.

Apparent Age.....18 years4 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height.....5 ft. 11 ins.

Chest measurement { Girth when fully expanded.....36 ins.
 Range of expansion.....5 ins.

Complexion.....Dark

Eyes.....Brown

Hair.....Black

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

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.)

Two little warts a 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.....MAR 18 1916.....191

Place.....Lindsay

J. M. C. [Signature] 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 Edwin Howe.....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.....MAR 18 1916.....191

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

Cadet

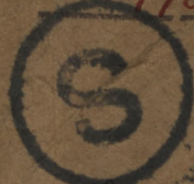
REGIMENTAL DOCUMENTS

O. H. M. S.



NAME *HOWE* JAMES EDWIN 724110

109 & 200 #200



NON-EFFECTIVE BY *Demob'n* CATEGORY.....

35957

ms 26-3-14

CONTENTS

- 3) ATTESTATION PAPER (M. F. W. 23, 133 or 51)
- 2) 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)
- REGT. CONDUCT SHEET (M. F. B. 283 or A. F. B. 121)
- 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)
- / MEDICAL EXAMINATION (M. F. W. 129)
- TRANSFER CLOTHING STATEMENT (M. F. W. 97, or D. O. S. 3)
- 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. 203)
- PARTICULARS OF CHARACTER (A. F. W. 32)
- / COPY OF PARACHUTE DISCHARGE CERTIFICATE (M. F. W. 30A)
- / DENTAL CERTIFICATE ON DISCHARGE
- / UNIT INDEX CARD (M. F. W. 11 or 102)



A 2w 3997 P149 - 1
Dms 1375
IS 732
P122
pay card

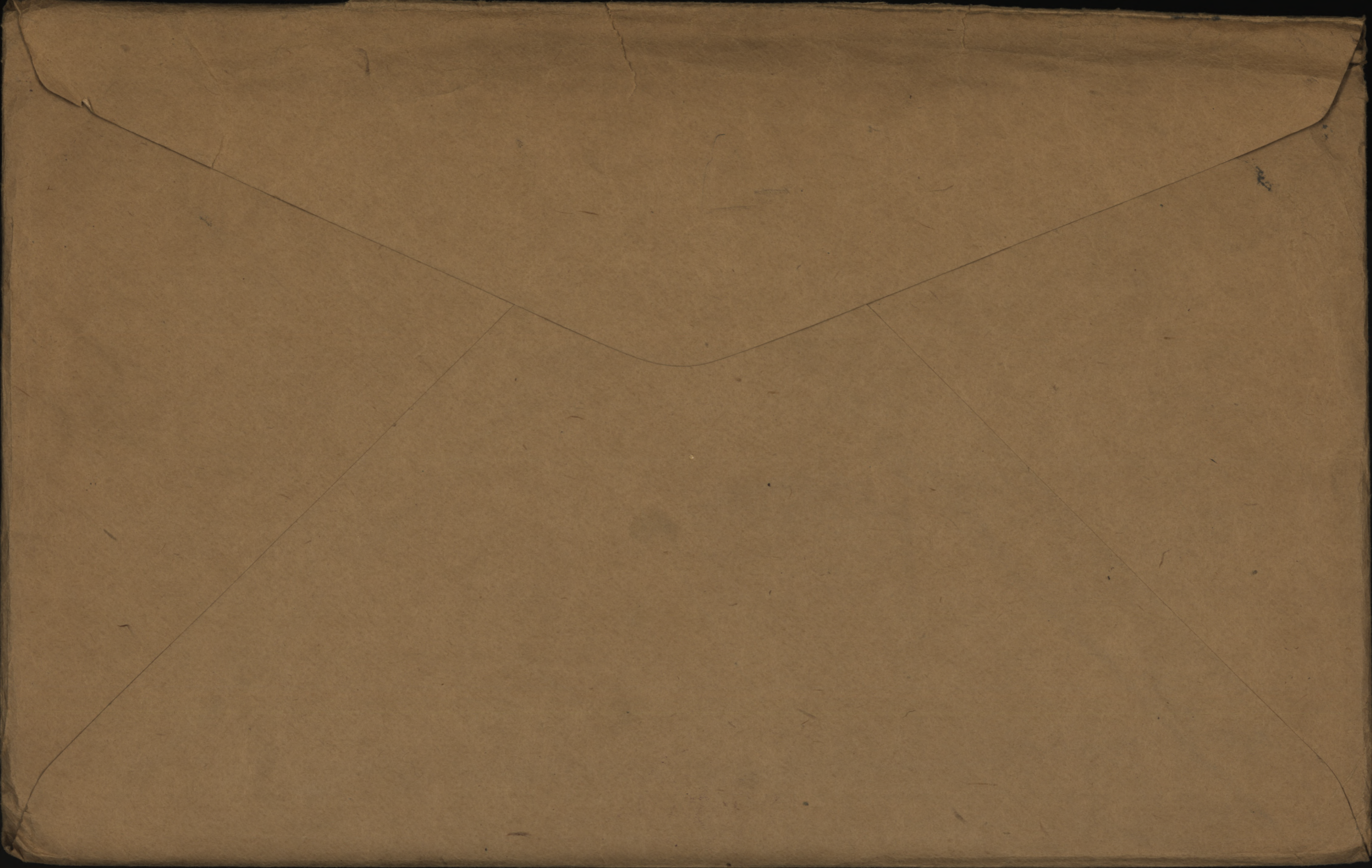
M. F. B. 270.
 850M-8-10
 H. Q. 1772-39-97

406474

(3)
 1-8
 25-8
 27-8

 3

m7w.67



To be made out in duplicate.

DUPLICATE

F.O. 54-21-20-53

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.....

724110

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

James Edwin Howe

(4) Place of Birth.....

Hybridge Ont Canada

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

Not

(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?.....

No

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 *Ira Howe 40 St Patrick St
Lindsay, Ont*

(10) Is your Mother alive? *Yes*

If so, state name and address *Eliza Anne Howe 40 St
Patrick St Lindsay Ont Canada*

(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 *18th July 1916*

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

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

Casualty Form—Active Service.

M. P.
1500M.
H.Q. 1779-

Unit, Regiment or Corps 109th OVERSEAS BATTALION, C. E. F.
 Regimental No. 24110 Rank Private Name Howe James Edwin
 Enlisted (a) 18.3.16 Terms of Service (a) D of W. Service reckons from (a) 18.3.16
 Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }
 Extended _____ Re-engaged _____ Qualification (b) Saleman

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				
	Embarked Canada		Halifax	24.7.16	
	Disembarked England		Liverpool	31.7.16	
Capt. <u>ADJUTANT</u> 109th Overseas Battalion, C. E. F. D.O.Pt. 11. No. <u>279</u>					
Transferred for Overseas Service with <u>20th</u> Batt' <u>ACT 5 1916</u>					
6/10/16	C B Dep	Arrd & taken on strength	20th Bn	6/10/16	NR Pt 2 O'rs 55d11/10/ 16
do	do	Left for	do	20/10/16	NR
27/10/16	20th Bn	Arrived	do	23/10/16	B213
10/11/16	5th C.F.A.	Myalgia Legs adm	5th C.F.A.	9/11/16	A36 DCS 249 25/11/16
		Discg To Duty		11/11/16	do do
20/1/17	5 CFA	GSW Back adm	5 C F A	17/1/17	A36 DCS 264d29/1/17
		trsfd	22 C C S	17/1/17	
23/1/17	2o Genl	do-Buttock To Eng. per	HS Newhaven	24/1/17	W3083 Pt 2 O'rs 9d31/1/17 (6090)
J.W. Hogan Capt. for Lieut-Col. A.A.G.					

CERTIFIED CORRECT.
 18 OCT 1916
 CAN. RECORDS DIVISION

(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 Co. IP.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
1st. C. 20.					
16.3.17.	1st Bn. 20th Res. Bn.	T.O.S. from ceas.	W. Sandling	10.3.17	P. 20.7. & C. 20. 118.
					IC Motuim Sent for Colonel i/c Records Capt. Comt.
20/7/17.	1st Bn. 20th Res. Bn.	S. H. S. on being posted to 5th Res. Bn.	W. Sandling	17/7/17.	Bn. Ord. 133.
18/7/17.	O. B. 5th Res. Bn.	J. on S. from 1st Bn. 20th Res. Bn.	W. Sandling	17/7/17.	Bn. Ord. 193.
25-11-17.	OC. 5th. Res. Bn.	Struck off strength on transfer to 20th Bn., France.	W. Sandling.	24-11-17.	Bn. Ord. 324
2/4/17	1st Bn. 20th Res. Bn.	Att 1st Bn.	Sandling	20/3/17	LIEUT. ADJ. 5th RESERVE Bn. (CENT. ONT.) C.E.F. P. 20.24
2/4/17	1st Bn. 20th Res. Bn.	Attached	St Leonards	20/3/17	" " 42
18/7/17	"	Leases attached	"	17/7/17	" " 128
18/7/17	1st Bn. 20th Res. Bn.	Leases att 1st Bn.	Sandling	17/7/17	" " 133
					IC Motuim Capt.
					FOR LT: OOL: I/C RECORDS, COME
25 NOV 17	C.B.D.	TAKEN on STRENGHT 20th 20.		25 NOV 17	N.R. Part II Ord. 89
28 NOV 17	Can.	Corps Rein. Camp.		28 NOV 17	
5 DEC 17	"	Left for Unit	FIELD	5 DEC 17	N.R.
8 DEC 17	Unit	Joined Unit	FIELD	5 DEC 17	B. 213.
13.4.18.	20th Bn.	To Hosptl - Rich		11.4.18	
12.4.18.	4 F.R.	Scabies adm 1/4		13.4.18.	E. 3982.

CAN. RECORDS
 51917
 51917
 51917

Casualty Form—Active Service.

Regiment or Corps *20 Bn*
 Rank *Private* Surname *Howe* Christian Name *J. E.*
 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 ...			
<i>20.4.18</i>	<i>20 Bn</i>	<i>Rec'd from 1 Hosp.</i>	<i>20 Bn</i>	<i>14.4.18. B.213.</i>	
<i>25.5.18</i>	<i>— " —</i>	<i>Awarded LC Badge</i>	<i>— " —</i>	<i>18.3.18</i>	<i>etc. Part 48</i>
<i>19.10.18</i>	<i>— " —</i>	<i>apptd Lt</i>	<i>HN.</i>	<i>26.9.18</i>	<i>Part 108</i>
<i>2.11.18</i>	<i>A.A.G.</i>	<i>Transf to Eng with a view to being granted a Comm & posted 1st Lt Lt Ont. Reg'l Depot, Witley</i>		<i>2nd / 1</i>	<i>AB 1 B. 1024 d/14/19 KE 28227/5 Part Dord 121 d/9.12.18</i>
		<i>Whoozen</i>	<i>Major</i>	<i>for Lt. Col. A.A.G.</i>	
			<i>Canadian Section. G. H. O. 3rd Echelon B.E.F.</i>		

6-10-18 *121 CWD* *TOS from 20th Bn.* *Witley* *5-11-18* *D.O. 308*
7-11-18 *—* *On com. 12th Res.* *Witley* *7-11-18* *— 309*

(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, Shipping Office, etc.

Major

724110 Howe J. E.

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.
7.12.18	1st. C.O.R.D. appointed acting Sergeant with pay	Witley	5.11.18	D.O. 349
21-12-18	DS Ceases to be shown on Com. to 12th Res and will be shown on Com to 3rd Res.		19-12-18	DL. 353.
--1	3rd. Res. Bn. Struck off strength of O. M. F. C. on transfer to O. C. F. in Canada.	Witley	24-1-19	Part II D.O. 24 24-1-19.
<p>Charles Coulton Lt. Col.</p> <p>FOR THE RESERVE BN. C.E.F.</p>				
<p>Embarked Liverpool R.M. Diarrhman Major Capt. Ad. #16 I.C.S.F.</p>				
<p>JAN 24 1919 O. S. T. O. S. No. 2 DISTRICT DEPOT, TORONTO 1919 PART II D. O. 36</p> <p>McLennan For O. C. No. 2 District Dep.</p>				

24 JAN 1919

JAN 24 1919 O. S.

21/2/19

S.O.S. (Discharged) No. 2 District Depot
Part II, D.O. No.

50 H. S. ...
O. C. Discharge ...
No. 2 District Depot

ORIGINAL ORIGINAL ORIGINAL

MEDICAL HISTORY SHEET.

ORIGINAL

Surname Howe Christian Name James Edwin

Examined { on 15th day of March 1916
 at Lindsay

Birthplace { City or Town Windsor
 County Ontario

Approved by J. McCulloch Capt.
 Rank 109th Regt. C. I. F.

Apparent age 18 years

Trade or occupation Salesman

Height 5 Feet 11 Inches

Weight 136 Lbs.

Chest measurement { Minimum 31 inches.
 Maximum expansion 36 inches.

Physical development good

Small-Pox Marks None

Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.
		<u>13 NOV 1918</u> <u>2 FEB 1917</u> M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right None Left Two
 Number Two

Date.	Result.	VACCINATIONS.
<u>21.3.16</u>	<u>good</u>	<u>J. McCulloch</u> M.O.
		M.O.
		M.O.

When Vaccinated last March 21st 1916

(a) Marks indicating congenital peculiarities or previous disease None

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>18.4.16</u>	<u>good</u>	<u>J. McCulloch</u> M.O.
<u>25.4.16</u>	<u>good</u>	<u>J. McCulloch</u> M.O.
<u>2.5.16</u>	<u>good</u>	<u>J. McCulloch</u> M.O.

Enlisted on 18th day of March 1916 at Lindsay

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Bn C.I.F.</u>	<u>724110</u>		<u>18.3.16</u>
Transferred to	<u>21st Bn</u>			
	<u>20th Bn.</u>			<u>24-11-17</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>West Sandling</u>	<u>15.11.17</u>		<u>A III</u> <u>940R</u>
<u>Camp Integ</u>	<u>22-1-19</u>		
<u>In Camp Toronto</u>	<u>18-2-19</u>	<u>no</u>	<u>"A" J. Fuller</u> <u>Joakimull</u> <u>Capt.</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.

CANADIAN

J. Mc

Surname *Harve* Christian Name *James Robert*

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				
✓ THE MILITARY HOSPITAL, ENDELL STREET, W.C.		24	1	17	27	3	17	G. I. W. Huttoch		Wounded 17 1/2. Shrapnel removed. Slow to heal. 8.3.17. Trach excised, fragment of clothe removed. Sitched wt. Healed.	<i>Dr. Murray</i>
✓ CANADIAN CONVALESCENT HOSPITAL, BROMLEY, KENT.		27	3	17	30	3	17	Do	4	Fit for Physical Training in Command Depot Class 2d	<i>Dr. Hill capt</i> <i>amre</i>

 Duplicate Medical History Sheet
 posted to Ser. *F.S.*

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. 724110 Rank Cadet Surname HOWE
(Given name in full)
James Edwin
Unit or Corps 2100 Birthplace Hampbridge, Ont

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

1. GENERAL DESCRIPTION:

Physique good Weight 157 lbs. Height 5.11 in. Colour of Eyes Brown
Nutrition good
Pulse 72
Condition of arteries normal
Vision Rt 20/20 Left 20/20
Hearing (conversational voice) Rt 2 ft. Left 4 ft.

Identification marks, scars, or deformities.
(Give cause and date of origin.)
Two warts back of neck

Opinion as to general health and physical condition A. 11

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.

no Anemia no Haemorrhoids
no Varicocele no Testicular
no Eczema
G.S.W. 7-1-16. Buttock healed, no disability.

APPROVED
FEB 19 1919
J. H. Lewis
CAPT.
FOR A. B. M. S. M. D. 2

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

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at.....(Overseas)

Date SignedM.O.

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

Signature

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

THIS SECTION FOR USE IN CANADA—

Examined at.....(Canada)

Date SignedM.O.

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

Signature

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

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

[OVER]

Medical Examination upon leaving the Service of an Officer fit for general service or a Soldier fit for duty.

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank cadet. Name James Edwin Surname HOWE
 Unit or Corps 20th Bn (If a soldier) Regtl. No. 734110.
 Born at Weybridge, Ont. on date 1st Aug 1898
 Signature (for identification) J E Howe.

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

1. **PHYSIQUE**—Any deformity, maiming or lameness? If so, describe. non-adherent scar - left Hip
chest flat

Weight 164 lbs.
 Height 6 ft. 1 ins.

2. **NUTRITION AND DIATHESIS** normal

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** normal

4. **RESPIRATORY SYSTEM.** normal

5. **HEART**
 Abnormal Sounds? nil
 Abnormal Size? nil
 Pulse Rate? 72 Intermittence or irregularity? nil

6. **ARTERIES.**—Any hardening? nil

7. **DIGESTIVE SYSTEM** normal

8. **GENITO-URINARY SYSTEM** normal
 Urinalysis—s.g.? 1020 Reaction? acid Albumen? nil Sugar? nil

9. **SKIN, MIDDLE EAR, EYE** or any other part?
V.R.E 4/6 V.L.E 4/6 Ears and hearing normal Neurologist

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

A.D.M.S.- HEADQUARTERS
 CANADIAN TROOPS,
 22 JAN 1919
 WITLEY, SURREY.

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

Examined at Witley Signed G. W. Moffat Capt M.O.
 Date 22.1.19 Signed J. W. ... 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 in general service of the Army fit for duty

Rank: Major
Name: [Faint handwritten name]
Service No: [Faint handwritten number]

1. PHYSICAL
Height: [Faint handwritten measurement]
Weight: [Faint handwritten measurement]

2. NUTRITION AND DIGESTION

3. NERVOUS SYSTEM

4. RESPIRATORY SYSTEM

5. HEARTS

6. ARTERIES

7. DIGESTIVE SYSTEM

8. GENITOURINARY SYSTEM

9. SKIN, MIDDLE EAR, EYE

10. [Faint text]

11. [Faint text]

12. [Faint text]

13. [Faint text]

14. [Faint text]

V.R.E. [Faint handwritten notes]

[Faint handwritten notes]

[Faint handwritten notes]

[Faint handwritten notes]

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
T327 Col Year 1917	Y24110	Pte	Howe	
	Unit.		Age.	Service.
	20 th Canadian		18	9/12
Station and Date.	Disease			
Sadell St. W.C. 24/1/17	G. S. W Buttock IX. 1.			B. 27.
	Wounded 17.1.17 France. Shrapnel. A.Y.S 17.1.17 C.C.S. Shrapnel removed. Admitted Sadell St 24.1.17 Convoy C.A. Fair - has had cold. His hoarse. Local. Gaping wound left buttock - clean. Smaller wound lower down. Dressed B.I.P.P.			
29.1.17 28.2.17	Wound looking well. 101. Chest N.A.I ^{upper} Wounds healed except for small track leading downwards from corner of wound. Lower wound - some inflammation around. Two heads of pus expressed - Tomen 4.			
6/3/17. 8/3/17.	Prepared for 8/3/17. Operation. Track excised. Wound edge sutured. A piece of khaki removed from the wound.			
9/3/17. 16/3/17	Dresses. Tot. 100. + Gauze. Wound finally healed except at upper end where there is a gap of 1/4".			
24.3.17 26.3.17	Healed. Walking well. Rec. Beaulieu. E. Cairns Roberts.			

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

Station
and Date.

S. J.
6-15 p.m.
5-8-16

MEDICAL CASE SHEET.*

No. in
Admission
and
Discharge
Book.

Regimental No.

Rank.

Surname.

Christian Name.

724601.

Plc.

Howe.

J. Carl.

Year
1916.

Unit.

Age.

Service.

109th Batt. C. E. D.
"A" Coy.

18.

8/12.

Station
and Date.

Disease Pneumonia

Comaugh
Hospital.
Aldershot.
5/8/16.

3 days ago
soreache left ear
headache general
vomiting
pain in right side.

COA.

Impairment of resonance right side behind
increased voice sounds
? distant bronchial breath, right axilla.
No Bronchovascular
No Kernig

Admitted
By Capt. R. K. C.

6/8/16.

Rusty sputum.

Swain

Heart

Visible pulsation & dulness in 2nd left space
to about 1/2 in from sternum; apex just in
a little nipple line.

A few crackles at right base.

P. 100

M.P. 118

Bools. $\frac{75}{60}$

7-8.

Right apical lobar consolidation & crep.

P. 102

B.P. 110.

Bools. $\frac{80}{60}$

8-8.

fine crep. ~~at~~ left base. P. 98 B.P. 95 Bools. $\frac{80}{60}$

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

Station
and Date.

9.8. AM.

P. 88

N.P. 105

Book 85

67.

13.8.

~~The~~ Signs drawing up.

22/8/16.

gone to A. M. B. Shirley.

2.9.16

Patients have conversed very well

to return to the 'Compass'

W. B. at present

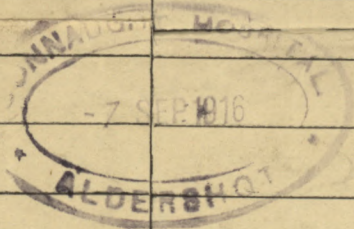
is still

7.9.16.

Is duty: v. fit.

Ch. Seymour

to Capt. Ross



DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT *2*

NAME OF SOLDIER *Kawte*

REGIMENT *1st Cadets*

RANK

Private

No. *724110*



INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

Condition on first Examination	Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhoxa	Synthetic Porcelain	Extracting	DENTURES			Gold Clasp	Gold Filling	CROWNS		Bridge Work	OPERATOR	Military District	REMARKS
												U	L	P			Gold	Porcelain				
	<i>Discharge Exam. At Exhibition Camp</i>																					
	<i>Date. FEB 18 1919</i>																					<i>Certificate issued for.</i>
																						<i>Filling</i>
																						<i>W. Sample</i>

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters)

HOWE. J. E

REGIMENT

20 Bn.

RANK

cadet

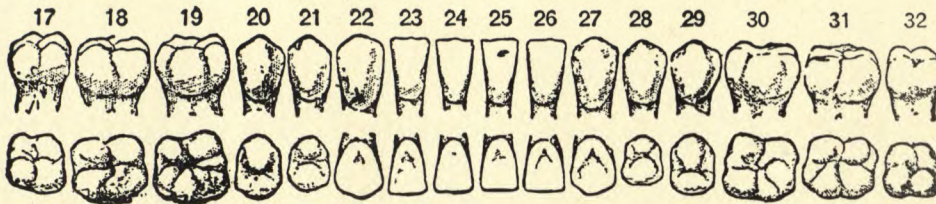
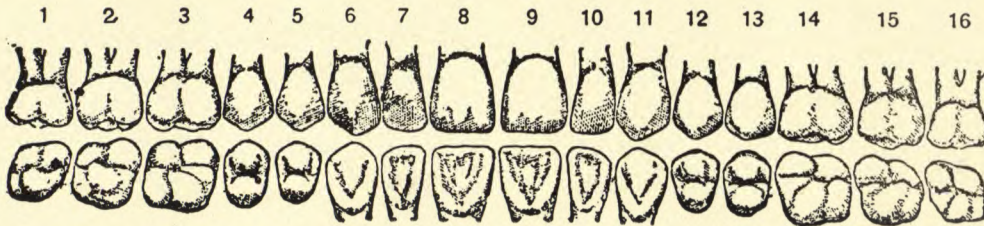
No.

724 110

Date of Examination in England

20/1/19

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

31.

2. EXTRACTIONS

nil

3. CROWNS

nil

4. DENTURES

(a) Full Upper

(b) Part Upper

(c) Full Lower

(d) Part Lower

} nil

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

(c) In France

Signature of Dental Officer

[Handwritten signature]

RECEIVED

HOWE, J F
104 110

1. [Faint text]

2. [Faint text]

3. [Faint text]

- 1. [Faint]
- 2. [Faint]
- 3. [Faint]
- 4. [Faint]

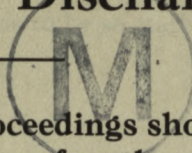
- (1) [Faint]
- (2) [Faint]
- (3) [Faint]
- (4) [Faint]

- (1) [Faint]
- (2) [Faint]
- (3) [Faint]

Signature of Special Officer

This space to be for numbers.

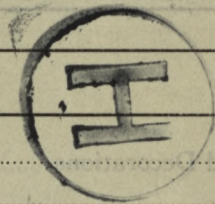
Proceedings on Discharge.



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

JB.

No.	724110
Rank	Cadet
Surname	HOWE James Edwin
Christian name	
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	109th. Bn. (2.DD.)
Date of discharge	Feb. 21st. 1919
Place of discharge	TORONTO, ONT.



1. DESCRIPTION AT THE TIME OF DISCHARGE.

	Descriptive marks
Age.....20.....years.....months.	
Height.....5.....feet.....11.....inches.	Vacc. scars on left arm.
Complexion Dark	G.S.W. Back 17-1-17
Eyes Brown	
Hair Black	
Trade Salesman	
Intended place of residence (To be given as fully as practicable.)	40 St. Patrick St. Lindsay Ont.

2. The above-named man is discharged in consequence of

ON GENERAL DEMOBILIZATION

Authority for discharge.....D.O. D.D. #2. Pt. 11 #50

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

3. Conduct and character while in the service have been, according to the records, etc.

N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

M. F. B. 218.

200M.—5-18.
 H. Q. 1772-39-113.

(OVER)

Index
 20-3-19
 eac

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

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

6. Medals and Decorations.....

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

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

(Place).....

(Date).....

Commanding.....

8. Certificate to be signed by the Soldier on Discharge

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

(Place) Toronto. Ont. James Edwin Howe (Signature of Soldier.)

(Date) Feb. 21st. 1919 H. Sargeant Coy (Signature of Witness.)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

..... (Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to..... (the date to which the Record of Service is completed).....years.....days.

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

11. Confirmation of Discharge.

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

(Place) Toronto... Ont.

(Signature).....

(Date) Feb. 21st. 1919

For
O.C. No. 2 District Depot..

Reservations referred to at Para. 8.

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

List of Discharge Documents

<p>Attestation Paper, Form No. 13 or Particulars of Person Form No. 14</p>	<p>When form B 501 B 306 W 118</p>	<p>Back Cover Sheet Question Bill Continuation of Back Cover Sheet</p>
<p>In the case of persons who are reported on form approved, the discharge documents will consist of</p>	<p>Medical History Sheet Medical History Form Medical Report for Issuing Formal History Sheet Last Pay Certificate Fidelity Certificate Certificate Form of Will Form of Discharge (Medical) and Form of Discharge (Medical) and</p>	<p>When form B 311 W 34 B 33 B 482 W 44 W 397 W 83</p>
<p>(a) Proceedings on Discharge</p>		
<p>(b) Attestation</p>		
<p>(c) Medical History Sheet</p>		

Documents not accompanying this form should be checked out.

I hereby certify that the following documents are unobtainable.

Chief Quartermaster

I hereby certify that the following documents are unobtainable.
The date and number of the discharge form
amount of same is to be noted below.

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

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263

Squadron }
Battery } Conduct Sheet, " B. 263a
Company }

or
Field Conduct Sheet " W. 178

Copies of Convictions, by C. P. in MS.

Med. Hist. Sheet, Militia form B. 313

Casualty Form " W. 54

Medical Report for Invalid§ " B. 227

Dental History Sheet " B. 465

Last Pay Certificate " W. 44

Duplicate Discharge Certificate " W. 39A

‡Form of Will " W. 82

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

Attestation Paper Militia Form W. 23

or
Particulars of Recruit " W. 133

Proceedings on Discharge " B. 218

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(a) Proceedings on Discharge

(b) Attestation.

(c) Medical History Sheet.

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 724110 (Rank) Cadet

Name (in full) HOWE James Edwin enlisted in
the 109th. Bn.

CANADIAN EXPEDITIONARY FORCE at Lindsay on the 18th.
day of March 19 16

HE served in England and France
and is now discharged from the service by reason of Demobilization

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

Age 20

Height 5'11"

Complexion Dark

Eyes Brown

Hair Black

J. E. Howe
Signature of Soldier

Marks or Scars

Vacc. scars on left arm.

G.B.N. Back 17-1-17

Lucas
Issuing Officer

O.C. No. 2 District Depot.

Rank

Date of Discharge Feb. 21st. 1919

Appointment

Signed at Toronto. Ont. this 21st. day of February 19 19

in Military District No. 2.

NO. 2
FEB 21 1919

File Reference No. DISTRICT DEPOT

JB.

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

Uniform is not to be worn after expiration of one month from date of discharge, except by special permission of G. O. C. district.

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

ORIGINAL

M. D. 2

CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44
1188 (D.P. 250M-12-18.
1772-89-908.

LAST PAY CERTIFICATE

No. 56

Regimental No. 724110 Rank Cadet Name Howe Jr
(Surname first)
Unit No. 2 DISTRICT DEPOT who was* DISCHARGED
On 21-2-19 1919, to 21-2-19
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-2-19 to 21-2-19 1919 the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month.....	84 01	
Regimental Pay..... <u>21</u> days at \$..... <u>1</u> .c. <u>15</u>		21 15
Field Allowance..... days at \$..... c.		35
Separation Allowance.....		70
Clothing Allowance.....		12
Post Discharge Pay.....		
*Other Credits..... <u>Sub 4/2 18/2</u>		
Advances.....		
Separation Allowance and Assigned Pay Cheque No.....		
*Other Charges.....		
Balance on transfer or on discharge, cheque No. <u>54519</u>	90	32 86
Total.....	90	117 11

*Give particulars. DB 32 86

A monthly stoppage of \$..... (†) has..... (‡) been paid on account of
Assigned Pay for the month of Jan 1919 }
and Separation Allee. for month of Jan 1919 } (to) Assignee Mr Ira Howe
(Address) Box 108 Lindsay Ont
(†) Insert amount to be assigned, whether it has been paid or not. (‡) Insert "not" if amount has not been paid for period of account.

ON TRANSFER OF AN OFFICER.

Outfit Allowance of \$..... has been paid by Paymaster, Military District No.....

REMARKS:—

State (1) date of enlistment..... married or single.....
(2) Separation Allowance, entitled or not..... (3) Reason for discharge.....
(4) Authority for discharge or transfer.....

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer or soldier.

Date 20 2 19
Place TORONTO, ONT.

[Signature]
Paymaster.

- N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916.
- (B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.
- (C) For purposes of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. As payment of the balance will have been made, the words "on transfer or" will be deleted.
- (D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificate will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.

at 2.
AS

Number 724110

Rank H/cpl.

~~B~~

Surname HOWE

Christian Name James Edwin

~~X~~

Units 20th Bn Canadian Theatre of War France

Date of Service 6. 5-10-16

Remarks

Latest Address 40 St Patrick St

Lindsay Ont

Roll No. B. Page 14692.

200m. -2-21.M.

DESP

JUL 24 1922

REGN. NO. GA 28875

649-H-7333

2, CARD NO. ✓

SURNAME. *Howe,*

D.C.M.

CHRISTIAN NAMES

James, Edwin

L.G. 3/128

S.O.S. Memo 21-2-192

REGL. NO. *72 4/110*

RANK *Pte.*

FOLL. *ADAPT V 09 of 19-2-19*

UNIT *109th*

Brit.

FORMER CORPS

Nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Howe, Ira

RELATIONSHIP TO SOLDIER

father

ADDRESS

Lindsay, Ont.

COUNTRY OF BIRTH

Canada, Wexbridge, Ont.

DATE

Aug. 1st, 1897

PLACE OF ATTESTATION

Lindsay, Ont.

DATE

Mar. 18th, 1916

Sailed from Halifax 23/7/16 per H. "Olympic" P/B. 2-2-19.

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

RELIGION

yes
salesman *Baptist*

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

dark *brown* *black*

DISTINGUISHING MARKS

Two little warts on back of neck.

MEDICAL EXAMINATION.

PLACE

DATE

Lindsay, Ont. *Mar. 18th, 1916*

NAME

Howe

REGT'L NO

72410

RANK AND CORPS

Pte.

H. Q. FILE NO. 649-

FOLLOWS

NO

109th Bn

CABLE

No.

DATE

NATURE OF CASUALTY

FOLLOWS

0817729-1-17

lp

*Adm to No 20 Gen Hosp, (amius)
Jan 21st 1917. LSW Back. ✓*

OK

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A 381	No. 5 Can. Old Amb	9-11-16	Myalgia Legs
A 381	Disch to Duty	11-11-16	"
A 425	No 20 New Danheo Camiers	2-1-17	G.W. Back Ill
B 259	The Mcg. Endell Standard	WC 24-1-17	G.W. L. Buttock
B 309	Cow. Cow. Bromley	28-3-17	G.W. L. Buttock
B 311	Discharged	30-3-17	G.W. L. Buttock
A 191 ¹	# 4 Can 7 1/2 Amb	11-4-18	Scabies
A 191 ²	Disch to Duty	13-4-18	"

Name **HOWE. James Edw** Rank **Pte.**Reg. No. **724110**Unit **20th. Battalion.**Next of Kin **Canada.**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
9-11-16	No. 5 Can. Fld. Amb.	Myalgia	Legs.	A381.		
11-11	Discharged to Duty.	do.		A381.		
21-1-17	No. 20 Gen. Hosp. Camiers.	GSW	Back	Sit. A425	08177	30-1
24-1	Mil. Hosp., Endell St.	W.C. GSW	L. Buttock	B259		
28-3	CCH. Bromley.		do.	B309		
30-3	Discharged.		do.	B311		

No. 724110 RANK

Pte

NAME

Hawe. James Edwin

T. O. S. 18-3-16

UNIT

D.O. 106.23.3.16

109th. Battalion

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Mar 18	1916. Mar. 31	✓		
April.		✓.		
May.		✓.		
June.		✓.		
July.		✓.		

UNIT SAILED

JUL 23 1916



*Name HOWE James Edwin Rank Cadet Regtl. No. 724110
 Original unit 100th Bn Present unit M. or S. Age 21 Religion Bapt Fyle Depot 24-HO-367
 Ref. H.Q. _____
 Port, ship, and date of arrival Grampian St. John 2-2-19
 Next of kin Ira Howe Lindsay Ont. 40 St. Patrick St.
 Address on leave same
 Address on discharge same
 Transportation issued Yes Date 21-2-19 Character on discharge _____
Lindsay, Ont.
 Previous occupation Sales-man Date and place of enlistment Lindsay March 18-16
 Diagnosis DEMOB'N Date of Medical Boards 19-2-19.

Date.	Remarks	Pt. 2 Order No.
<u>T.O.S.</u>		
<u>24-1-19</u>	<u>Posted to Cas Co (Ex. Camp) 2-2-19 Leave & Subs from 4-2-19 to 18-2-19</u>	<u>36</u>
<u>21-2-19</u>	<u>SOS DISCHGD. "DEMOB'N" entitled to WSG.</u>	<u>50</u>

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

Date.

Remarks.

2 Order No.

Surname *Howe* Christian Name or Names *J. E.* Reg. No. *724/110*
 Rank *Pte.* Unit *20th. Bn.* Co. *1 C.O.* Troop Batty
 Hospital *No 5 Can. F. Amb.* Date of Admission *9-11-16*

Transferred

Hosp.

20 Gen Damer Camern Hosp *21-1-17*

Endell St Mil W.C. Hosp. *24.1.17*

Bromley Casual Hosp. *28.3.17*

Diagnosis

Myalgia Legs.

(1) Later Diagnosis (if changed)

L.S.W. Back (BPT)

(2)

Seabine R.

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Disc. to Duty. 11-11-16 Date

Dis. 30.3.17

REMARKS

Disc. 13.4.18

C.L. 29-11-16 A381

30-1-17 A425

1-2-17 B259

" 2.4.17 B309

" 4.4.17 B311

18.4.18 A191.1

18.4.18 A191.1

A.M.D. 2 Dept.

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

Handwritten mark

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm

1. 4 Can. Fed Amb.

11. 4. 16

2.

3.

4.

5.

6.

7.

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.				
13.3.17.	C.C.A.C.	S.O.S. on transfer to 1st. Bant. Ant Regiment	Hastings	10.3.17	Pt. II D. O. 118
4.4.17	20th Bn	Disch from Hosp.	Bromley	29.3.17	C.L. 3311 Y.S.W. R. Bussack
2.4.17	1st Bn	On Com to 1st Bn D.	Walsingham	30.3.17	Pt. 6.24. & 1st CCD. 2042
16.3.17	"	Y.O.S. from C.C.A.C.	Walsingham	10.3.17	— 7.
18.7.17	5th Res.	100 ^{rept} from 1st CCD.	Walsingham	17.7.17	— 193. } 1st Bn
18.7.17	1st CCD	Cases attn returning to Res Unit	Walsingham	17.7.17	✓ 128 } 20. 133. ✓ 20th Bn
26.11.17	5th Res.	SOS to 20th Bn	Walsingham	24.11.17	— 324 20. 89 16.12.17
3.6.18	20.	Awarded 1st CC Badge	Field	18.3.18	Pt. 49
31.10.18	20th Bn	Cpl L/Plt	Pk	26.9.18	Pt. 4 118
6.10.18	100th	100 from 20th Bn for use	LC battery	5.11.18	Pt. 308 (20th Bn Pt. 40 1210/9-12-18)
7.11.18	100th	on Com 12 Res	✓	7.11.18	Pt. 309
21.12.18	✓	Cases on Com 12th Res. & on Com. 3rd Res.	✓	19.12.18	— 353
		DCM RI-F 5 JUL 1919			auth. Lg. 10020-24/19 3128-d. 16/1/19
21-6-19	100th	Cases on Com to 3rd Res SOS to Canada MD 2	Pt. Witley	24-1-19	Pt. 127 S.L. 9

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom *Mrs. Ida Howe*By Whom Assigned *Howe J. E.*Address *Box 108
Lindsay,
Ont.*Regtl. No. *724110.*Rank *Pte.*Corps *109 Batt. Signal Co.*Rate *\$15.00* **AUG 1 1916****PAYMENTS**

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





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MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

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

Sheet No. 2.

Mrs. Ira Howe

Name of Soldier

Howe J. E.

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

PAYMENTS.

724110

Remarks.

Pte Sig Co 109 Batt

15.00

AUG 1 1916

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.		<i>Q 15175</i>	<i>15</i>	
Sept.		<i>R 18927</i>	<i>15</i>	
Oct.		<i>R 23744</i>	<i>15</i>	
Nov.		<i>J 23976</i>	<i>15</i>	
Dec.		<i>N 32388</i>	<i>15</i>	
Jan.	1917	<i>J 39884</i>	<i>15</i>	
Feb.		<i>P 15204</i>	<i>15</i>	
March		<i>P 50908</i>	<i>15</i>	<i>15-l.</i>
April		<i>C 2509</i>	<i>15</i>	<i>15-Ch.</i>
May		<i>P 8571</i>	<i>15</i>	
June		<i>W 16414</i>	<i>15</i>	<i>15-R 16414 Cancelled</i>
July		<i>C 22097</i>	<i>15</i>	<i>C 22096 Can. Mr.</i>
Aug.		<i>L 29663</i>	<i>15</i>	
Sept.		<i>W 38265</i>	<i>15</i>	
Oct.		<i>K 42287</i>	<i>15</i>	
Nov.		<i>J 49307</i>	<i>15</i>	
Dec.		<i>J 52914</i>	<i>15</i>	
Jan.	1918			<i>255.2</i>
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

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

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

H 9993

Aug 1-16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

<i>15</i>			
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PARTICULARS OF SEPARATION ALLOWANCE

No. *724110*

Rank *pts* Promoted Reverted Discharge

Soldier's Name *J. G. Howe*

Battalion *109 Batt. Signal Co*

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name *Mrs. Ira Howe*

Address *Box 108 - Lindsay Ont*

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>1917</i>					<i>90 Hb. d. 14</i>
<i>Dec 31</i>			<i>2.55 -</i>	<i>2.55 -</i>	
<i>Jan</i>	<i>M 69534</i>		<i>15 -</i>	<i>15 -</i>	<i>P</i>
<i>Feb</i>	<i>H 70947</i>		<i>15</i>	<i>15</i>	
<i>March</i>	<i>F 94878</i>		<i>15</i>	<i>15</i>	
<i>Apr.</i>	<i>I 9212</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>May</i>	<i>D 12800</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>June</i>	<i>C 15169</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>July</i>	<i>U 31363</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Aug.</i>	<i>F 30406</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Sept.</i>	<i>G 45692</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Oct.</i>	<i>J 51245</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Nov</i>	<i>B 60425</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Dec</i>	<i>K 62392</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Jan</i>	<i>F 71722</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Feb</i>	<i>E 79579</i>		<i>15</i>	<i>15</i>	<i>✓</i>

ok rfu

M. R. O. Destroy H 64412 - 6-2-19. h

M. F. W. 128
400M-6-17-1772-39-141
L. L. 23320-M. & D. 7983.

28.2.19

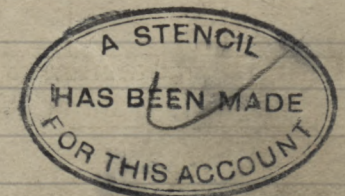
A/c Closed *Champion*

Ret'd per.....

Date *2.2.19* M.F.W. 187 *6.2.19*

Closed *M. Brennan*

M R 2.



* Strike out whichever inapplicable.

ASSIGNED PAY. ENGLAND or CANADA. SEPARATION ALLOWANCE. ENGLAND or CANADA.

NAME:- HOWE James Edwin. A
NUMBER:- 724110

EFFECTIVE DATE:- 1.8.16 EFFECTIVE DATE:-
AMOUNT:- 15⁰⁰ AMOUNT:-

PARTICULARS OF RANK OR APPOINTMENT

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

AUTHORITY DATE EFFECTIVE RANK OR APPOINTMENT

Mrs. Ira Howe.
Lindsay. Ont. (Mother)
Stopped 1/1/19

Do 108 31/10/18 20 Bn 26/9/18 L/Cpl
249 17/12/18 5/11/18 A/Sgt

UNIT AND TRANSFERS

ORIGINAL UNIT:- 109 Batta
DATE ACCOUNT FIRST OPENED:- 1.8.16

AUTHORITY DATE EFFECTIVE DATE LEDGER SHEET T SF D UNIT TRANSFERRED TO

20 Batta

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

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
10/1	346	36 R.B.	21 33				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	10		
	1 05	10		
	1 35	10		

PARTICULARS OF RENDERING NON-EFFECTIVE:-

Discharged 31/1/19 n.b. 2118 1/3 hrs m.d. - 24/6. 15/19

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
Jan	Bal Fwd								70 21 3/4		
Apr	P Pay	33		AR. 74. 11/4. 20 Bn	446						
				89. 23/4. "	357						
		33		Carial.	803			15	8068		
				do				15			
May	do	3410		AR. 154. 23/5. 20 Bn	446			15	9532		
June		3410		bal	446			15			
		33		AR. 224. 12/4. 20 Bn	803						
				289. 30/6. "	357			15	10172		
		33		bal	1166			15	12082		
July		3410		AR. 446. 12/7. 20 Bn	446						
				551. 25/7. 462 B.	357			15	11279		
Aug		3410		bal	803			15	13189		
		3410		AR. 676. 20/8. "	357			15	12832		
Sept		3410		bal	357			15	14632		
		33		774. 2/9. 20 Bn	714				13918		
				878 27/9 "	357			15	13561		ap. agreed
Oct		3410		car	1074			15			
	Undercredited as to Apr 26/9 to 31/10							15			
	Do 108 31/10/18 20 Bn 36 days @ 5 ⁰⁰	180		AR 1020 14/10 20 Bn	373						
				1227 29/10 ✓	373						
				CP 58032 3/11 C.P.M	243						
				58121 4/11 ✓	243						
		3590			1232			15	14419		ap. agreed 24/1/18
		3450		car Nov + Dec	1232			30			
		3450		AR 9598 6/11 C.P.D.	2433						
				AR 3207 15/11 12 Re	973						
				AR 3290 28/11 12 Re	2433						
				3459 29/11 ✓	4867						

Awarded D.C.M 16/1/19 Do 20 24/12/19 20 Bn

COMPILED BY
CHECKED BY

[Handwritten signature]

NUMBER	RANK	NAME	MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
					34 50									
					35 40									
Dec				1/2/19 P	35 65		CP 73424 29/11 London	107 06			30	144 19		
Jan					35 65		82274 13/12	48 67	✓			129		
							3770 10/12 12 Res	154 87	✓			15 19		
							Car Jan	29 20				115 19		
					37 80			169 80				15	15 19	
					105 80			189 80			45	90 14		
				Underwritten with Supt Pay 5/11/18 - 31/1/19 DO 349 17/12/19 1 Corb	34 40		Overcredited on DO 349 17/12/18 Corb	24 33	3 60					
							Dnal 346 12/1 3 Res	24 33				21 66		
					34 40			24 33	3 60					
SOS				Canada 24/1/19 Sgt Corb										

24 33
15 19

9 14