

"D" Coy.

# ATTESTATION PAPER.

No. 724549

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio. ORIGINAL

## QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your name? Elwood Anthony Percival Hoxie
2. In what Town, Township or Parish, and in what Country were you born? Haliburton Ont.
3. What is the name of your next-of kin? Father Irvin Hoxie
4. What is the address of your next-of-kin? Haliburton Ont. Can.
5. What is the date of your birth? 14th May 1889
6. What is your Trade or Calling? Laborer
7. Are you married? No
8. Are you willing to be vaccinated or re-vaccinated? & 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 } Yes  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

Elwood A. P. Hoxie (Signature of Man.)  
R. Anderson (Signature of Witness.)

## DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Date November 12<sup>th</sup> 1915 Elwood A. P. Hoxie (Signature of Recruit)  
R. Anderson (Signature of Witness)

## OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Elwood Anthony Percival Hoxie, 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 November 12<sup>th</sup> 1915 Elwood A. P. Hoxie (Signature of Recruit)  
R. Anderson (Signature of Witness)

## CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.  
 The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Lindsay this 12<sup>th</sup> day of November 1915.

[Signature] (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

[Signature] Lt. Col (Approving Officer)  
 O. C. 100th Overseas Battalion, C. E. F.

# Description of Elwood Anthony Percival Hoxie on Enlistment.

Apparent Age 26 years 7 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 11 ins.

None

Chest measurement. { Girth when fully expanded 37 ins.  
 Range of expansion 3 ins.

Complexion Fair

Eyes Blue

Hair Dk Brown

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

## CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him\* fit for the Canadian Over-Seas Expeditionary Force.

Date October 26<sup>th</sup> 1915

Place Ruidsay

J. McCulloch Capt.  
H. Boyd 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.

Elwood Anthony Percival Hoxie 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 JAN 12 1916 1915 [Signature] Lt. Col. (Signature of Officer)  
 O. C. 109th Overseas Battalion, C. E. F.

M 512-4-19  
H

NAME Hoxie Elwood Anthony Percival

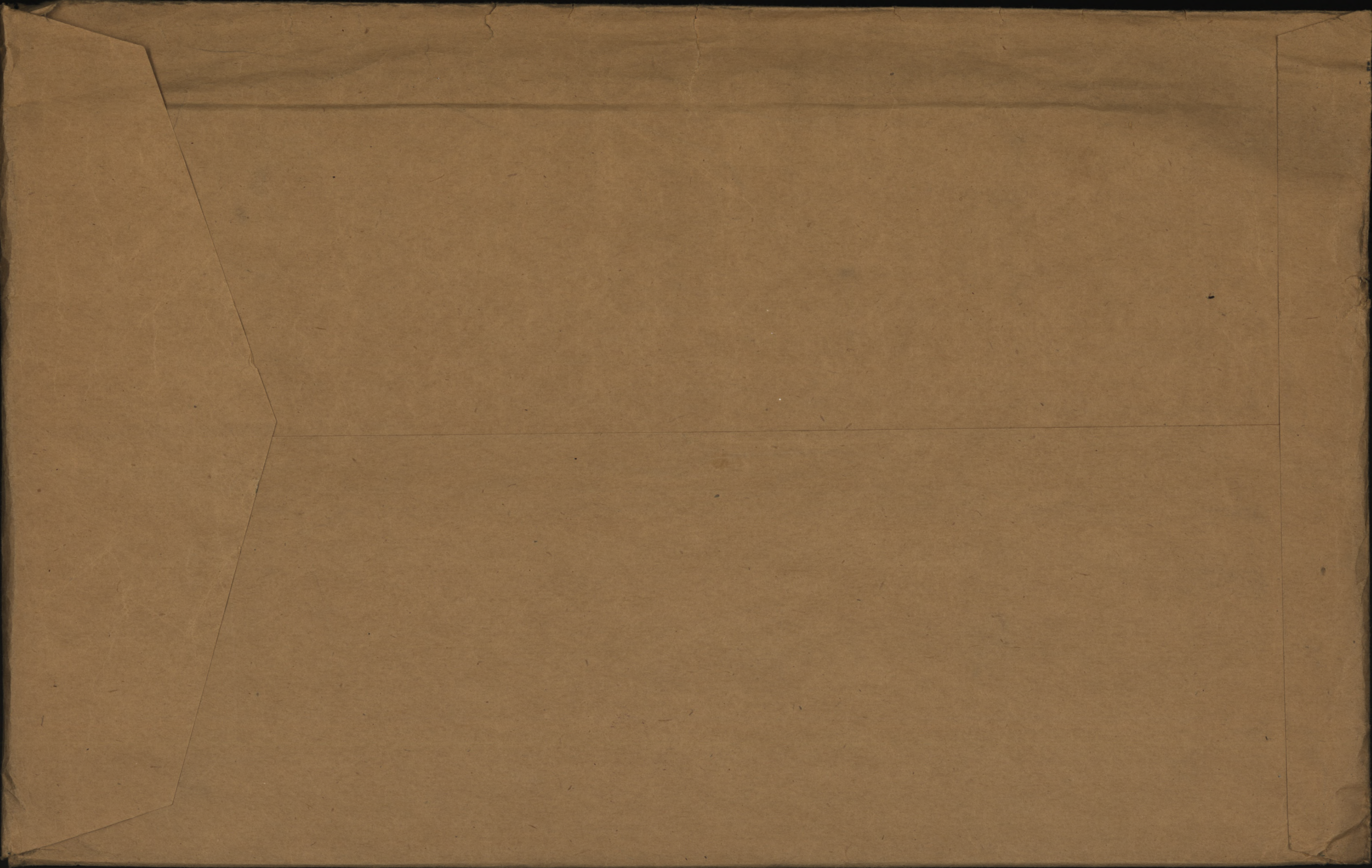
REG NO. 724 549

UNIT 3 District Dep. H. Q. FILE NO.

5

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)	<i>[Handwritten scribble]</i>	<i>[Circular stamp 'M']</i>	<i>[Handwritten scribbles]</i>	<i>[Handwritten '36555']</i>	DEATH
2 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
TRAINING HISTORY SHEET (M.F.W. 113)					
1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					
1 DENTAL HISTORY SHEET (M.F.B. 465)					
1 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)					
1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1 Dental Certificate					
1 D.M.S. 1375					
1 Misc					
1 M.F.W. 192					
1 M.F.W. 67					
1 R 122					
1 pay cards					

*[Circular stamp 'H']*



\*Name. HUXIE C.A.B. Rank Pte. Regtl. No. 724549  
 Original unit C7C. Present unit Y6 S. Age 30 Religion CyC. Fyle Depot 3-14-724  
 Port, ship, and date of arrival Belgic Halifax 2-3-19.  
 Next of kin 4/ Irvin Hoxie Haliburton Ont.  
 Address on leave same.  
 Address on discharge.....  
 Transportation issued  Yes  No Date..... Character on discharge.....  
 Previous occupation Labourer Date and place of enlistment 12-11-15 Lindsay  
 Diagnosis..... Date of Medical Boards.....

Date.	Remarks	Pt. 2 Order No.
21-3-19	T.O.S. Casualty Company No. 3 District Depot. From of for Disposal, Part Two D.O. 80. Eyt 6-3-19 Leave & Sub. 7-3-19 to 20-3-19 Got DD #0 on Desob Rd. 1420	H984

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

(over)

Date.

Remarks.

Pt. 2 Order No.

*4nd*  
*[Signature]*

Number *724549*

Rank *Pte* ~~*[initials]*~~

Surname *Hoxie*

Christian Name *Edwood Anthony Percival*

Units *20th Infantry* Theatre of War *France*

Date of Service *5-10-16*

Remarks *Box K.  
Hoxie St*

Latest Address *Haleburton  
onk*

Roll No. *Page 14492*

200m.-2-21.M.

DEEP

JUL 3 1922

REGN. NO.

42759



No. 724549 RANK Pte

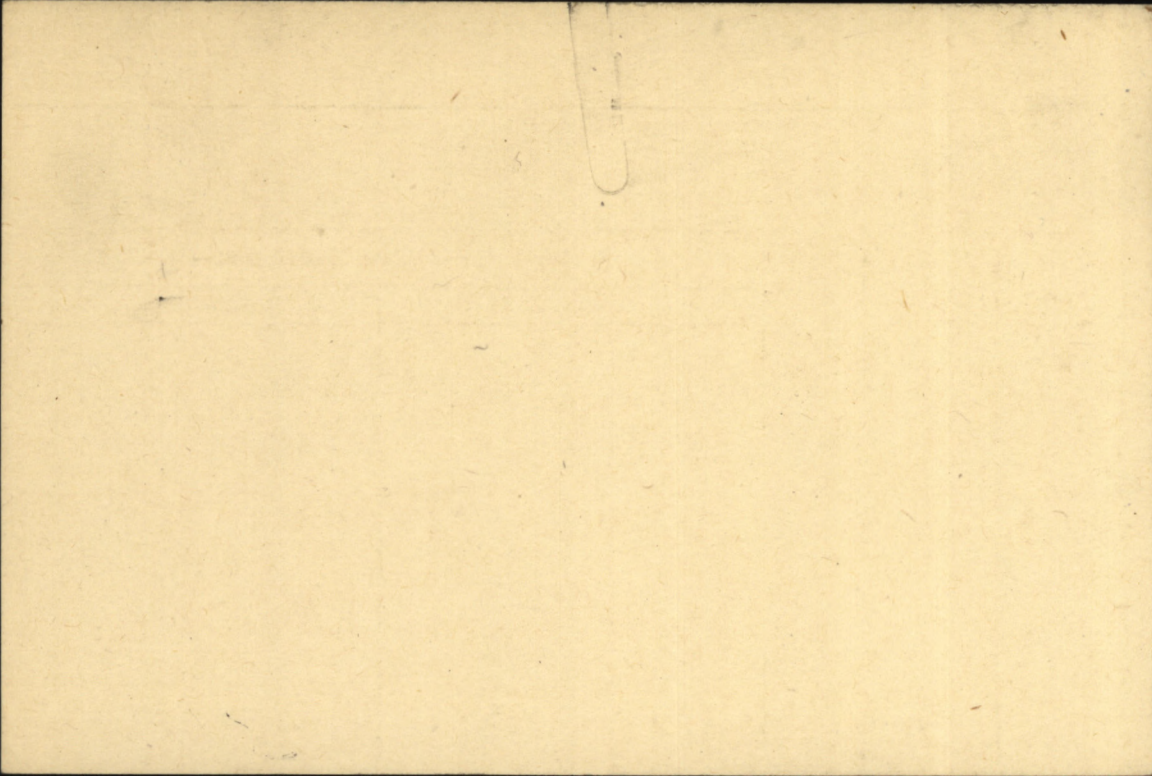
NAME Hobie E. A. P.

T. O. S. UNIT 109th Battalion  
*Transferred from 93rd Div  
 25-11-15. D.O. 5. 25-11-15.*

M. D. 3

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG OR REC'T	PARTICULARS	AUTHORITY
1915 Nov 25	1915 Nov. 30	✓		
1916 Dec.	1916 -	✓	Prom. Cpl. 15-12-15.	D.O. 43. 10-1-16.
1916 Jan.	1916 -	✓		
1916 Feb.	1916 -	✓	Prom. Lt/Lgt. 1-4-16.	D.O. 109. 27-3-16
1916 Mar.	1916 -	✓		
1916 April	1916 -	✓		
1916 May	1916 -	✓		
1916 June	1916 -	✓		
1916 July	1916 -	✓		

UNIT SAILED  
 JUL 23 1916



SURNAME.

*Hoxie*

**23** CARD NO. c

CHRISTIAN NAMES

*Elwood Anthony*

*20.3 demob 25-3-19*

FOLL.

*20.85 of 26.3.19-3.20*

REGL. No.

*724549*

RANK

~~*Pte*~~ *L/Sgt.*

*Batt.*

UNIT

*109th.*

FORMER CORPS

*Nil.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

*Hoxie Irvin.*

RELATIONSHIP TO SOLDIER

*Father.*

ADDRESS

*Haliburton, Ont.*

COUNTRY OF BIRTH

*Canada. Haliburton Ont.*

DATE

*May. 14th 1889.*

PLACE OF ATTESTATION

*Lindsay.*

DATE

*Nov. 12th. 1915.*

*Sailed from Halifax*

*23/7/16 Per "SS" Olympic*

*488*  
*276*  
*20.1-3-19 3306*

MARRIED

SINGLE

*Yes.*

WIDOWER

TRADE OR CALLING

*Labourer.*

RELIGION

*Church of England*

DESCRIPTION.

APPARENT AGE

*26.*

YEARS

*0.*

MONTHS

HEIGHT

*5.*

FEET

*11.*

INCHES

CHEST MEASUREMENT

*37.*

INCHES

EXPANSION

*3.*

INCHES

COMPLEXION

*Fair.*

EYES

*Blue.*

HAIR

*H. Brown.*

DISTINGUISHING MARKS

*Nil.*

MEDICAL EXAMINATION.

PLACE

*Lindsay,*

DATE

*Oct. 26<sup>th</sup> 1915*

No.

RANK

Pte

NAME

Hoxie Earl

T. O. S.

26-10-15-

UNIT

4/5<sup>th</sup>

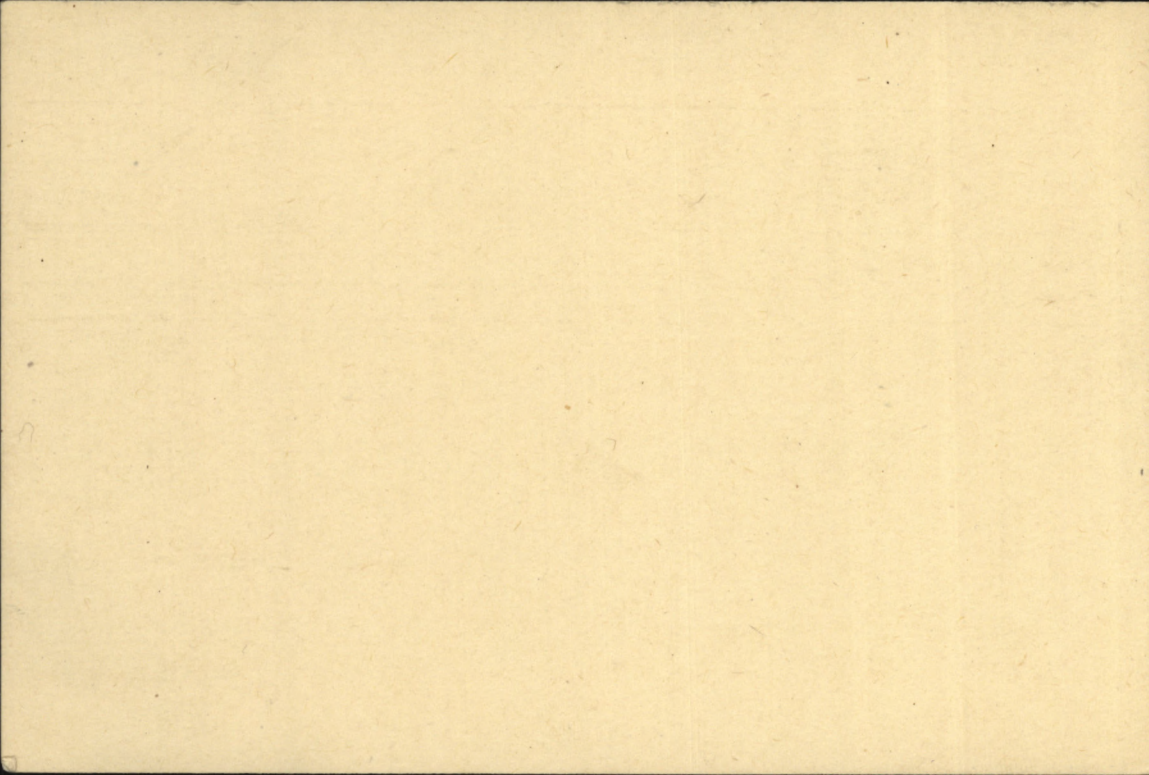
Victoria Regt.

BY 105-2-10-15

O. S. Cont

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Oct 26	1915 Oct 31	✓		



No.

RANK

*pte*

NAME

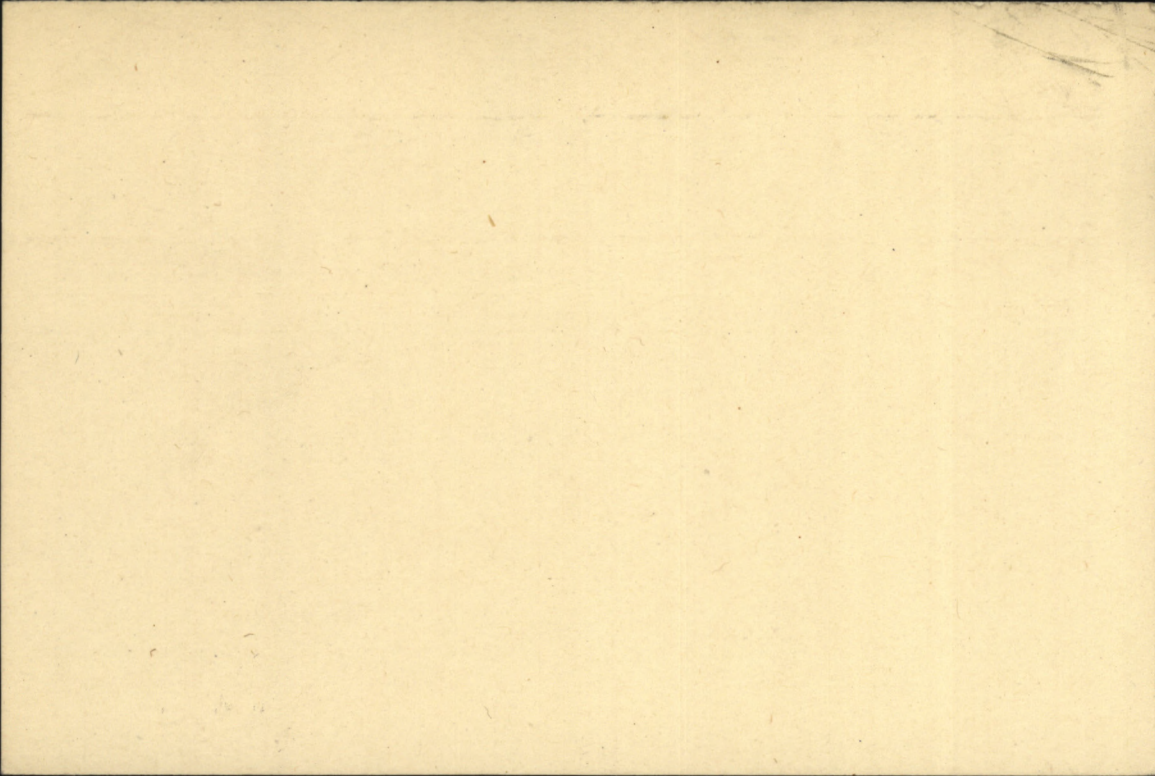
*Hoxie E.**P.*T.O.S. 1-11-15  
D.O. # 12-12-11-15UNIT *93rd Battalion C. I. F.*M. D. *3*PAID  
FROMPAID  
TOSIG.  
OR  
REC'T

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS

AUTHORITY

*1915**1915**Nov. 1**Nov. 24**✓**late 45th Regt**D.O. # 12-12-11-15*UNIT SAILED  
JUL 15 1916





**DUPLICATE**

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

INSTRUCTIONS.

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

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

**109th OVERSEAS BATTALION, C. E. F.**

(2) Regimental Number 724549

(3) Full Name of Soldier Cluwood Anthony Percival Horne

(4) Place of Birth Haliburton Ontario Canada

(5) Are you married, or not? not

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

(b) Present Postal Address Haliburton Ontario  
Canada

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

(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 Mr Erwin P Hovie

(10) Is your Mother alive? yes

If so, state name and address Mrs Alice M. Hovie  
Habiberton Ontario Canada

(11) If your Mother is a widow no

Are you her sole support, or not? I am her only sole support.

(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.

I have given her \$15.00 per month prior to my enlistment  
she has no other support than myself.  
I was her only support before enlistment. father not able to work

(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? yes

If so, in what Company? The Independent Order of Foresters

Have you made arrangements for payment of your Insurance premium yes

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

Date JUL 11 1916

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

# CANADIAN EXPEDITIONARY FORCE

## Discharge Certificate

This is to Certify that No. 724549 (Rank) Private

Name (in full) HOXIE, E lwood Anthony Percival enlisted in  
the 109th Battalion

CANADIAN EXPEDITIONARY FORCE at Lindsay, Ont. on the 12th  
day of November 1915

HE served in Canada, England and FRANCE  
and is now discharged from the service by reason of in accordance with R.O. 1420  
Demobilization. Auth. 3DD 3. H.724, D. 22.3.19

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

Age 29 years 10 months

Marks or Scars NIL

Height 5 feet 11 inches

Complexion Fair

Eyes Blue

Hair Dark Brown

*E A P Hoxie*

Signature of Soldier

*O. C. Dineen*  
O. C. District Issuing Officer  
No. 8 District Depot  
Rank

Date of Discharge 25.3.19

Appointment

Signed at Kinston, Ont. this 25th day of March 1919

in Military District No. 3

File Reference No. 3DD 3. H.724.

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

2 coy.

B13

### 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 PTE Name ELWOOD, A.P. Surname HOXIE.  
 Unit or Corps C.F.C. (If a soldier) Regtl. No. 724549.  
 Born at HALIBURTON, ONT. on date 14, MAY, 1889.  
 Signature (for identification) [Signature]

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

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

Weight 165 lbs. Normal  
 Height 5 ft. 10 1/2 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? None  
 Abnormal Size? None  
 Pulse Rate? good 72 Intermittence or irregularity? None

6. **ARTERIES.**—Any hardening? None

7. **DIGESTIVE SYSTEM** Normal

8. **GENITO-URINARY SYSTEM**  
 Urinalysis—s.g.? 1015 Reaction? acid Albumen? — Sugar? —

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

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe. None

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

Examined at Summerville Eng C.F.C. Signed W Howard [Signature] M.O.  
 Date Feb 5/19 Signed [Signature] 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 State  
at Oyster, in the general register a full year for the

1870  
The following is a list of the names of the persons who have been examined and found qualified to practice the profession of medicine in the State of Virginia for the year 1870.

1870  
1870

1870

1870

1870  
1870

1870

1870

1870

1870

1870

1870  
1870

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

~~Haliburton~~

Ont

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. 724549 Rank Pte Surname HOXIE  
(Given name in full)

Unit or Corps 3rd CCD Birthplace Elwood Haliburton Ont

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

## 1. GENERAL DESCRIPTION:

Physique good Weight 170 lbs. Height 5-10<sup>1</sup>/<sub>2</sub> ft. Colour of Eyes Blue  
 Nutrition good  
 Pulse good  
 Condition of arteries good  
 Vision Rt. 7 Left 7  
 Hearing (conversational voice) Rt. 7 ft. Left 7 ft.

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

no

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.

No Complaints. Fid G.S.

APPROVED

*[Signature]*  
 Lieut. A. M. G.  
 For A. D. M. S. No. 3  
 21-3-19

# EXAMINATIONS.

## THIS SECTION FOR USE OVERSEAS—

Examined at ..... (Overseas)

Date ..... Signed ..... M.O.

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

Signature .....

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

## THIS SECTION FOR USE IN CANADA—

Examined at Barrifield (Canada)

Date 21/3/19 Signed W. H. [Signature] M.O.

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

Signature E. A. P. Hoyle .....

(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]



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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) HOXIE E.A.P.  
REGIMENT C.F.C. RANK Plt. No. 724549

Date of Examination in England 4-2-19 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 None
2. EXTRACTIONS None
3. CROWNS None
4. DENTURES
  - (a) Full Upper
  - (b) Part Upper
  - (c) Full Lower
  - (d) Part Lower
 } None

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 yes

Signature of Dental Officer J. St. Reid Capt.







724549

ORIGINAL

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Hosie Christian Name Elwood Anthony Percival

Examined { on 26<sup>th</sup> day of October 1915  
at Lindsay  
Birthplace { City or Town Haliburton  
County Ontario

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

Apparent age 26 years  
Trade or occupation Laborer  
Height 5 Feet 11 Inches.  
Weight 150 Lbs.  
Chest measurement { Minimum 34 inches.  
Maximum expansion 37 inches.  
Physical development Good  
Small-Pox Marks None

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

Vaccination Marks { Arm Right None Left Two  
Number Two  
When Vaccinated last November 11<sup>th</sup> 1915  
(a) Marks indicating congenital peculiarities or previous disease None

Date	Result	VACCINATIONS.
<u>11-11-15</u>	<u>Nil.</u>	<u>J. McCulloch</u> M.O.
<u>10-2-16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
		M.O.

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

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>20-4-16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>3-5-16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>9-5-16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>22-9-16</u>	<u>Good</u>	<u>He Boyd</u> no

Enlisted on 12<sup>th</sup> day of November 1915 at Lindsay

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>Overseas Contl.</u> <u>45<sup>th</sup> Mch Regt.</u>	<u>724549.</u>		<u>12-10-15</u> <u>12-11-15</u>
Transferred to..	<u>21st Bn</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Summingdale Eng</u>	<u>Feb 5/19</u>	<u>A2</u>	<u>W Howard Bather SN</u>
<u>Barriefield</u>	<u>21-3-19</u>	<u>no an</u>	<u>Es Dunge Capt Mes.</u> <u>W Sydney 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.



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

# Casualty Form—Active Service.

M. F. W. 54.  
150M, 10-15.  
H.Q. 1772-59-920.

Unit, Regiment or Corps 90. 3 Cas. Coy. I.P.

Regimental No. 724549 Rank Pa. Name Hoxie Clewood S.  
C. E. F.

Enlisted (a) 12.11.15 Terms of Service (a) \_\_\_\_\_ Service reckons from (a) \_\_\_\_\_

Date of promotion to present rank. } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }

Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) \_\_\_\_\_

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				

24/3/19 T.O.S. Casualty Company No. 3 District Depot.  
for Disposal, Part Two D.O. 80. 6. 3. 19.

J. L. Williams **1. DEUT.**  
**for O.C. Casualty Co., No. 3 District Depot**

20/3/19 Sub. DD #3 on Desb Rd 1420. 119 24

[Signature] **1. DEUT.**  
**for O.C., No. 3 District Depot**

(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				



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

M. F. W. 54.  
-150M. 10.15.  
H.Q. 1772-39-920.

# Casualty Form—Active Service.

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

Regimental No. 24549 Rank Private Name Hosie Edward Percival Anthony

Enlisted (a) 12.11.15 Terms of Service (a) O. of W. Service reckons from (a) 12.11.15

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) Laborer.

CERTIFIED CORRECT.

5.8.16.

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	
5.8.16.		Appointed <u>Pvt.</u>	Osney	5.8.16	Part II Order 248.
Transferred for Overseas Service with		<u>20th Batt'n</u>	<u>CT 5</u>	<u>1916</u>	<u>D.O. Pt. 11 No. 279</u> Capt.
6/10/16	G B Dep	Arrd & taken on strength	20th Bn	6/10/16	NR Pt. 20's 55411/10/16 E. F.
do	do	Left for	do	20/10/16	NR 109th Overseas Battalion
27/10/16	20th Bn	Arrived	do	23/10/16	B213
10/11/16		Attached Woodcutters		24.11.16	B213
24/6/17	Forestry Coy R.E.	Taken on ration return	Forestry Coy	18/6/17	B213
		Attached for duty.			
24-10-17	20th Bn	Then attached to 1 Forestry Pkty.		20/10/17	B213
24-11-17	361 Forestry Coy R.E.	Granted leave to U.K.		24/11/17	9/12/17 B213. Pt. 2. 93.
15-12-17		Ret'd from leave		9.12.17	B213.
28-3-18.		Filling places on non bat. 361 Forestry (Janitor)			Letter. K.R. 25069. (Auth. C.C. A.106. P. 2. 2. d 29/4/18.
20.4.18.		Ret'd from 4th Forestry Coy		14.4.18	B213.
16.6.18	only.	S.O. 20th on transfer to No 2 Coy. C. F. C.		14.6.18	(M A H K) d 4.5.18. H.B. letter 121/Overseas/25448

(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.

File K.R. 25069.  
Part II 624/17-7-18.

724549, Pl. Hacie, S. A. P.

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				
16.6.18	a.s.g.	J.O.S. 702 Coy, CFC on transfer fr. 30 <sup>th</sup> Bn		15.6.18	C.F.C. 40-6-2, see A15618 d/15.6.18
5-10-18	2 Coy PFC	Rejoined from on Command		4-10-18	K.E. 28215 file Ph. 8 d/20.7.18 B213
16-11-18	Do	got 14 days leave to UK.		10-11-18	B213, P37, 1918.
30-11-18	do	Rejoined from leave		25-11-18	B213
24-7-19		O.C. Cdn. S.O.S. for demobilisation to C.F.C. Cone. Cmp. Le Havre	Depot Sunningdale	28-1-19	N/R. Pt. 2.0/S.
3-2-19			Lt. Hewett		Lieut. for Lt. Col A.A. Cdn. Sect. G.H.Q.
15-2-19	B.D.C.F.C.	O.C. C.F.C. T.O.S. Base Depot, C.F.C. Sunningdale from Cpt. E. France.		29-1-19	L11.D.O. 34.
		transferred M.D. 2. can. camp Phyl.		15-2-19	46. Lt. for O.C. B.D.C.F.
6 FEB 1919		Attached C.C.C. Kinmel Park for n to Canada. Part II Orders Ceases to be attached Kinmel Park on emba k- Canada, Part II Order 56 7/3/19 Dr. J. Ferguson Wing, Kinmel Park Camp.			610-111 FEB 23/19 H. H. X MAR 2 10 H M T *DELIC*

TLH. Rank *Private* Name **HOXIE, Elwood Anthony Percival,** Reg'l No. **724549.**  
 Unit **109th. Bn.** If in perm. Corps, }  
 What Unit? } Married or Single **Single.**  
 Place and Date of Enlistment **Lindsay, Nov 12th. 1915.** Place of Birth **Haliburton, Ont.**  
 Name and Address, Next-of-Kin **Irvin Hoxie,**  
**Haliburton, Ont. Canada**<sup>1/2</sup> Relationship **Father.**

Assigned Pay Monthly \$ Payable to

Relationship

Separation Allowance \$ Payable to

Relationship

N/E. R.B. No.	<b>9928</b>
File R.L.	
Category	<b>O R G an</b>

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	
5. 8. 16	Det. 109 <sup>th</sup>	App'd Prov. Cpl.	Osney		P. H. S. O. 218
5-10-16	do	S.O.S. to 20 <sup>th</sup> Bn	Bramshill	5-10-16	P. H. S. O. 279 J.W.C.
11-10-16	20 <sup>th</sup> Bn	T.O.S. from 109 <sup>th</sup>	Field	6-10-16	" # 55.
do.	do.	Reverts to rank of Private	do	do	do.
<del>16.7.17</del> 26.12.16	<del>do</del> 20 <sup>th</sup> Bn.	Att'd to 1st Forestry Coy R.C.	do	18.6.17	do 49.
17. 7. 18.	do	S.O.S. to 11 <sup>th</sup> Coy C. F. C.	do	14. 6. 18	P. H. S. O. 62. T.O.S. 2 Coy C.F.C. P.H.S.O. 82/20.7/18 Pte
SOS to BDCFC, 28 1.19					
2 Coy DO.4 d.29 1.19					
TOS BDCFC S: DALE					
BDCFC DO 34, d 3 2 19					

A.F.B. 103 CHECKED 116 OCT 1946

*Forestry*

*1600*

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.				
15-2-19	B.D.C.F.C.	S.O.S. TO. C.C.C.	THE S'DALE	15-2-19	Y.O. 8 of 2 m. 0 ew Pln 00 46. Pln 044 d/21.2.19
7.3.19	2 m. 0 ew see 6 c 7 e	S.O.S. to C.E. 7 Can	" Blyth	22.2.19	- 56

7

## SEPARATION ALLOWANCE

Name Mrs. Alice Hoxie

Name of Soldier

Address

Relation to Soldier

wife, child or mother

Regtl. No.

Rank

Corps

To what Corps belonging

when called out

Haliburton  
Ont.Dependant  
Mother.

Hoxie Elwood Anthony Percival

724549-

PLI

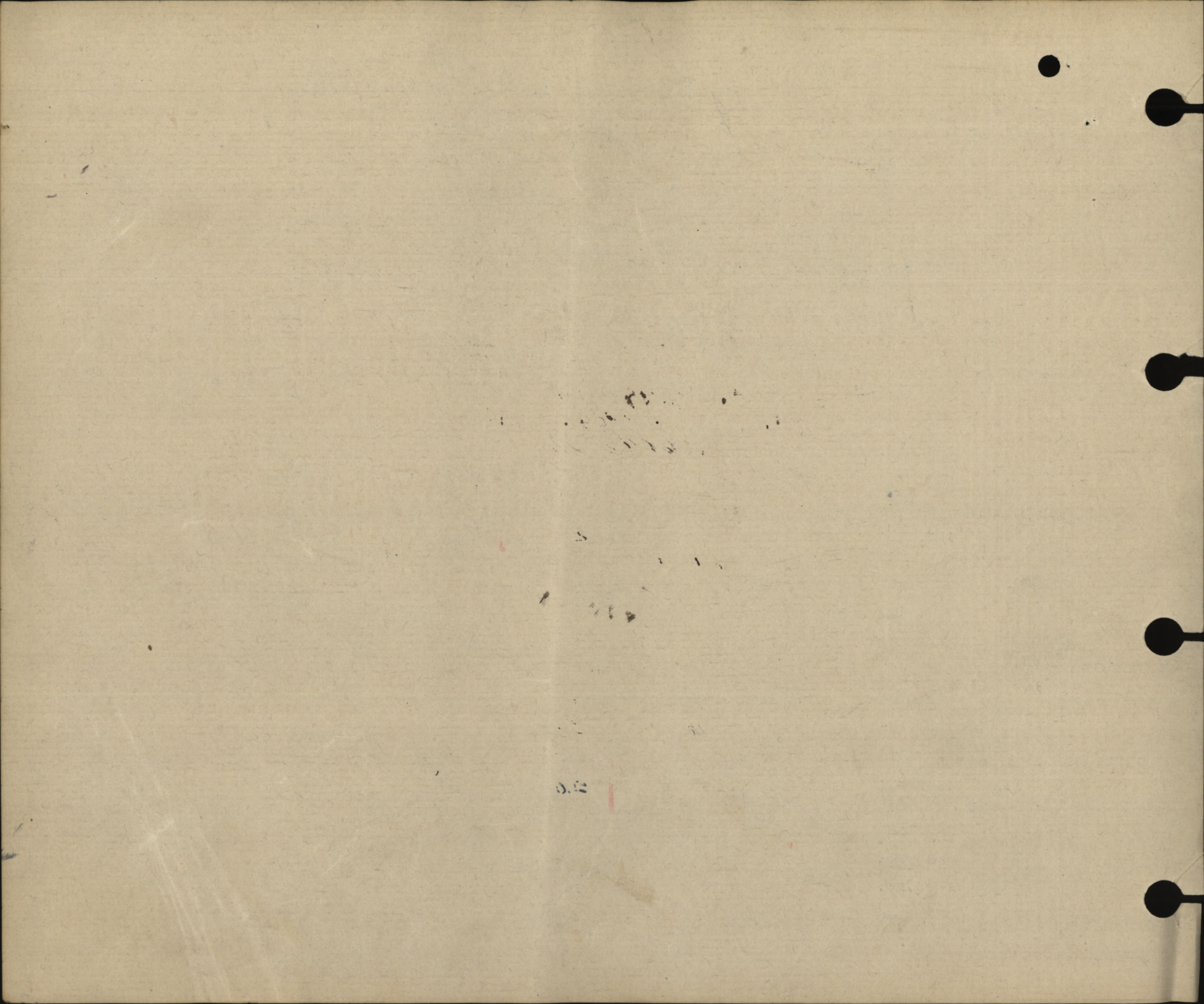
109th O.S. Battn C.E.F.

}

## PAYMENTS

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





MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

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

Sheet No. 2.

*Alice Howe*

Name of Soldier

*Howie E. A. P.*

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

PAYMENTS.

# *724549* Pte. *109 Batt*

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.		<i>F 15281</i>	<i>15</i>	
Sept.		<i>R 19049</i>	<i>15</i>	
Oct.		<i>R 23872</i>	<i>15</i>	
Nov.		<i>S 24100</i>	<i>15</i>	
Dec.		<i>N 32512</i>	<i>15</i>	
Jan.	1917	<i>K 39671</i>	<i>15</i>	
Feb.		<i>K 44934</i>	<i>15</i>	
March		<i>H 49910</i>	<i>15</i>	<i>15. ON</i>
April		<i>D 2302</i>	<i>15</i>	<i>15. W.</i>
May		<i>D 8945</i>	<i>15</i>	
June		<i>B 14500</i>	<i>15</i>	<i>15-B.</i>
July		<i>D 22619</i>	<i>15</i>	<i>15-B.</i>
Aug.		<i>M 31455</i>	<i>15</i>	<i>OK</i>
Sept.		<i>Y 36452</i>	<i>15</i>	<i>OK</i>
Oct.		<i>L 42490</i>	<i>15</i>	<i>OK</i>
Nov.		<i>M 48635</i>	<i>15</i>	<i>OK</i>
Dec.		<i>J 56466</i>	<i>15</i>	<i>OK</i>
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

CANADIAN  
 ASSIGNED PAY AUDITED  
*W. J. Rose*  
 AUDIT CLERK  
 DATE *17/6/19*

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier \_\_\_\_\_

**PAYMENTS.**

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



MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

To Whom Alice Hoxie  
 Address Haliburton  
Ont

By Whom Assigned Hoxie E. A. D.  
 Regtl. No. 724549  
 Rank Pte.  
 Corps 109 Batt. N. 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				



11 11 11

11 11 11

11 11 11

11 11 11

11 11 11

11 11 11

11 11 11

11 11 11

11 11 11

11 11 11

# SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

Mrs Alice  
Hoxie-

Dependant Mother -  
PAYMENTS.

Name of Soldier

Hoxie Edward Anthony Percival  
PA

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

# 724549-

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	Q 2455	40	40
May		R 6559	20	20
June		P 7542	20	20
July		B 7138	40	20
Aug.		K 12233	20	20
Sept.		K 16803	20	20
Oct.		R. 19694	20	20
Nov.		W 83113	20	20
Dec.		W 26043	20	20
Jan.	1917	A 29985	20	20
Feb.		A 32929	20	20
March		A 36148	20	20
April		<del>61508</del>	<del>20</del>	61308 cancelled
May		B 5061	20	20
June		E. 8031	20	20
July		B 12860	20	20
Aug.		V 14690	20	R
Sept.		M 18068	20	100
Oct.		S 20380	20	X
Nov.		S 23266	20	T
Dec.		J 27570	20	F
Jan.	1918			440.00
Feb.				
March				
April				
May				
June				
July				

↑ 220

RE-WRITE

MILITIA AND DEFENCE  
**SEPARATION ALLOWANCE**  
 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.				

\* Strike out whichever applicable.

ASSIGNED PAY.	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.
EFFECTIVE DATE:-	1. 8. 16	EFFECTIVE DATE:-
AMOUNT:-	15 <sup>00</sup>	AMOUNT:-
NAME, ADDRESS, RELATIONSHIP & AUTHORITY		WHEN PAYEE OF A.P. IS THE SAME WORD "SAME" ONLY TO BE WRIT
Alice Hoxie		
Haliburton, Ont.		
<i>Stopped off 1/3/19.</i>		

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS				UPON CLEARANCE OF VOUCHERS, ENT BY INSERTION OF DATE CHARGED IN		
DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY
<del>3249</del>	<del>7781</del>	<del>C4CB D.</del>	<del>2700</del>	<del>9/13</del>		
<del>829</del>	<del>774</del>	<del>---</del>	<del>1300</del>	<del>14/60</del>		
			2433			

*a/c agreed upon 30/1/19*  
*Canada 28/1/19*

PARTICULARS OF RENDERING NON-EFFECTIVE:-			
MONTH 1918	PARTICULARS	CR. 1	CR. 2.
mch 31	Bal. Fwd		
apl	P. Pay	33	AR. 9467
			Canada
		33	AR 9544
			Canada
may	do	34/10	AR 9611. 19
			9707.
			9403.
			31. 17/5
			snar. 965
June		34/10	bal
		33.	AR. 72.
			109.
		33.	bal
July		34/10	AR 140.
			173.
aug		34/10	bal
		34/10	AR. 36
			" 270.
Sep.	P.P.	34/10	
		33	10.
			AR. 312
			" 369
Oct	" "	34/10	
			10
			A.R. 510
			" 107
			" 176
	Ford	34/10	Ford

AND OR DA. SEPARATION ALLOWANCE. 536 ENGLAND OR CANADA.

NAME:- HOXIE Edwood Anthony Percival

EFFECTIVE DATE:-

NUMBER:- 725549

AMOUNT:-

PARTICULARS OF RANK OR APPOINTMENT

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
		Private.

UNIT AND TRANSFERS

ORIGINAL UNIT:- 109 Balm

DATE ACCOUNT FIRST OPENED:- 1.8.16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T SF D	UNIT TRANSFERRED TO
			20 Balm
P.O. 8. 15/18	2/18/18	2/18/18	102 Co. C. 26 France.

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

AMOUNT	DATE OF PAYMENT	NUMBER OF A R	UNIT PAID BY	AMOUNT
943				
146				
2433				

DAILY RATES OF PAY AND ALLOWANCES

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

a/c Agreed apat 30/9/18 0850

EFFECTIVE:- Canada 28/11-18. 511. Japan m/d 2. 2. 2. 2. 2. 2

CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
							5851		
33		AR 9467. 22/3. 361 For Co. Canada	803			15			
33		AR 9544. 5/4. do Canada pay	446			15	6402		
34/10		AR 9611. 19/4. 361 For Co.	178						
		9707. 3/5. do	446						
		9403. 8/3. do	892						
		31. 17/5. do	892						
34/10		AR 9651-22/4. OSB. CAP	714			15	5190		
33		AR 72. 3/5. 361 For Co. CAP	446			15			
33		109. 14/6. do. CAP	446			15	6098		
34/10		AR 140. 28/6. 361 For Co. CAP	446			15	8008		
34/10		173. 12/7. do. CAP	892			15	7562		
34/10		AR 36. 26-7-18. 361 For Co. CAP	446			15	6670		
33		" 270. 9-8-18. " " " CAP	446			15	7688		Nil
33		AR 312. 23-8-18. " " " CAP	446			15			
33		" 369. -9-18. " " " CAP	446			15			
34/10		b. A. P. A.R. 519. 20-10-18. 2 Co. CAP	373			15			
		" 171. 20-9-18. " " " CAP	466						
		" 176. 31-10-16. Dist. Co. CAP	560			15			
34/10		Ford	839						

NUMBER 725549

RANK PTE

NAME HOXIE B.A.P

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2
1918				Sep. 30 Bal. Ford	839	
Oct	Brot Ford. Ples Pay Oct	3410		A R Hunt 1-10-18 20 <sup>th</sup> 12	933	
		3410			1772	1772
Nov	P. P	33-		B.A.P		
Dec	"	3410		Cast Larden 10-11-18 61267	7300	
Jan	"	3410		A R Sitt 9-11-18. 26676	933	
				booh 67047. 21-11-18. Larden	1460	
				B.A.P.		
		10120		B.A.P		
		10120			9693	
		3080		A R 638 21-12-18. 260	746	
				" 667. 7-1-19 "	373	
				cap		
				A R 781. 3-2-19 B.A.P	973	
				" 774. 8-2-19. ✓	1460	
		3080			3552	

COMPILED BY *[Signature]*  
 CHECKED BY *[Signature]*

A.S.M. FORM RECORDED 11/2/19  
 DISCHARGED TO *Canada* DATE 28/2/19  
 PAY BOOK VERIFIED 11/2/19  
 AUTH. 2871. 8/2/19. date. M.O. 2

*A.S.M. Canada 28/2/19 2873 mo 2*

CANADIAN  
 ASSIGNED PAY AUDITED  
*[Signature]*  
 AUDIT CLERK  
 DATE 17/6/19

KIE to A.P.

A.P. 15-00

CULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
10-30 Bal. Ford	834				8596		
am	<del>734</del>			15-			
18 20-12	933				<del>8172</del>		
	1772			15-	8734		
P.				15-			
10-11-18 61267	7300						
9-11-18. 26676	933						
21-11-18. Randan	1460						
A.P.				15-			
A.P.				15-	4661		
	9693			15-			
12-18. 260	746						
5-19 "	373						
				15-	5121		
2-19 B.D.	973						
2-19. ✓	1460						
	3552			15-	2689		

2689



52841

Hoxie, E.A.P. Pte. 724549 20th Batt'n, E.E.X

Will detached by Paymaster, 109th Batt'n, C.E.F.

J. J. Williamson (capt)  
P. M. 109th Batt'n C.E.F.

- 20 -

Perforated sheet for Will from Pay Book of Reg.

No. 724549

Name Elwood Anthony Percival Hoxie

Unit 109th Batt'n Coy.

Military Will.

I Elwood Anthony Percival Hoxie #724549  
 serving in Canadian Expeditionary  
 force, do hereby revoke all former  
 wills by me made and declare  
 this to be my last will.  
 I bequeath all my real estate  
 unto my mother Alice Moxley  
 Hoxie Haliburton Ontario  
 Canada Boy 8, and my  
 Personal estate the same.

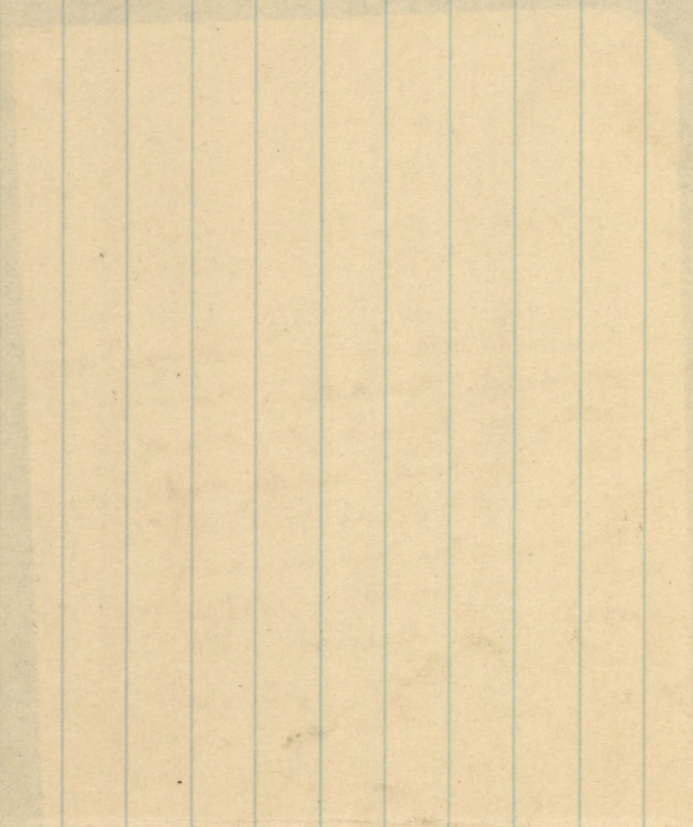
Corp. R. Gregory  
 Haliburton Ont  
 Canada

Signature epl. E.A.P. Hoxie

Rank and Regt. Corporal.

Date

Faint, illegible text at the top of the page, possibly a header or title.



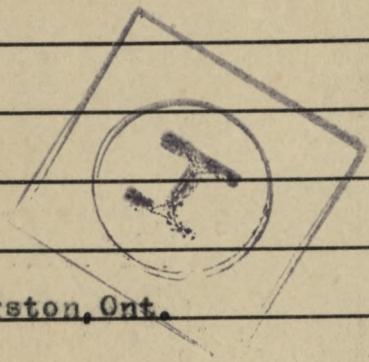
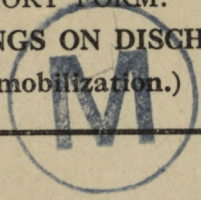
Faint, illegible text or markings at the bottom right corner of the page.

66.

War Service Badge Class     

No. 91032 Issued

SHORT FORM.  
PROCEEDINGS ON DISCHARGE.  
(Demobilization.)



1. No. 724549

2. Rank Private

3. Name HOXIE, Elwood Anthony Percival.

4. Unit No. 3 District Depot.

5. Date of Discharge 25.3.19. Place Kingston, Ont.

6. Reason for Discharge Demobilization

7. Authority 3DD 3H. 724. D. 22.3.19.....R.O-1420.

8. Proposed Residence after Discharge Haliburton, Ont.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate  
M. F. W. ? 39

*D.H.*

*E.A. Hoxie*  
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Kingston, Ont

Date 25.3.19.

Signature *[Signature]*  
(O. C. Discharging Unit.)

for O. C. Discharge Section  
No. 3 District Depot

ERW

STATE OF NEW YORK  
DEPARTMENT OF TAXATION

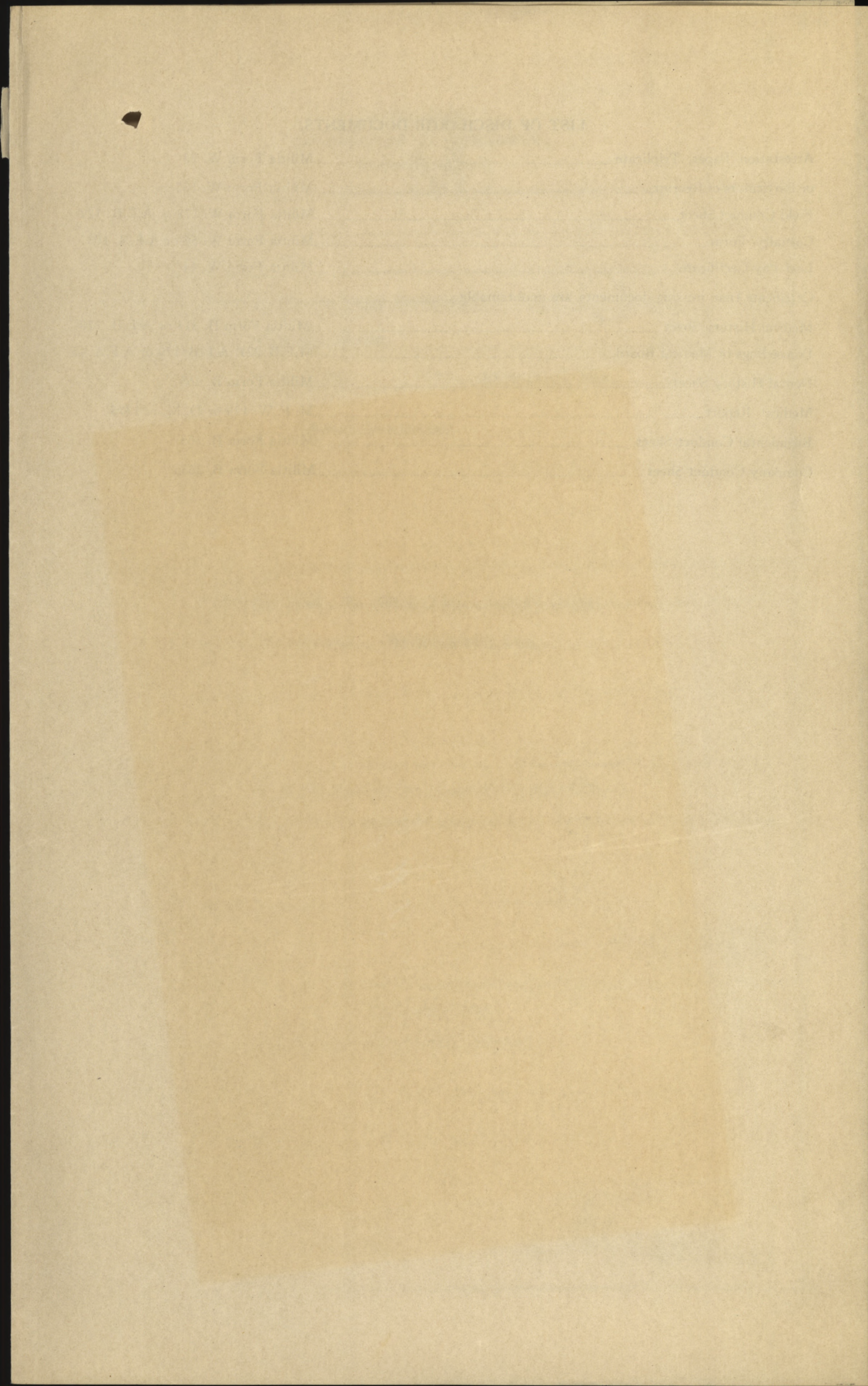
IN SENATE  
January 12, 1911

No.	Name	Residence	Profession	Assets	Liabilities	Net Worth
1	John J. ...	...	...	...	...	...
2	...	...	...	...	...	...
3	...	...	...	...	...	...
4	...	...	...	...	...	...
5	...	...	...	...	...	...
6	...	...	...	...	...	...
7	...	...	...	...	...	...
8	...	...	...	...	...	...
9	...	...	...	...	...	...
10	...	...	...	...	...	...
11	...	...	...	...	...	...
12	...	...	...	...	...	...
13	...	...	...	...	...	...
14	...	...	...	...	...	...
15	...	...	...	...	...	...
16	...	...	...	...	...	...
17	...	...	...	...	...	...
18	...	...	...	...	...	...
19	...	...	...	...	...	...
20	...	...	...	...	...	...
21	...	...	...	...	...	...
22	...	...	...	...	...	...
23	...	...	...	...	...	...
24	...	...	...	...	...	...
25	...	...	...	...	...	...
26	...	...	...	...	...	...
27	...	...	...	...	...	...
28	...	...	...	...	...	...
29	...	...	...	...	...	...
30	...	...	...	...	...	...
31	...	...	...	...	...	...
32	...	...	...	...	...	...
33	...	...	...	...	...	...
34	...	...	...	...	...	...
35	...	...	...	...	...	...
36	...	...	...	...	...	...
37	...	...	...	...	...	...
38	...	...	...	...	...	...
39	...	...	...	...	...	...
40	...	...	...	...	...	...
41	...	...	...	...	...	...
42	...	...	...	...	...	...
43	...	...	...	...	...	...
44	...	...	...	...	...	...
45	...	...	...	...	...	...
46	...	...	...	...	...	...
47	...	...	...	...	...	...
48	...	...	...	...	...	...
49	...	...	...	...	...	...
50	...	...	...	...	...	...
51	...	...	...	...	...	...
52	...	...	...	...	...	...
53	...	...	...	...	...	...
54	...	...	...	...	...	...
55	...	...	...	...	...	...
56	...	...	...	...	...	...
57	...	...	...	...	...	...
58	...	...	...	...	...	...
59	...	...	...	...	...	...
60	...	...	...	...	...	...
61	...	...	...	...	...	...
62	...	...	...	...	...	...
63	...	...	...	...	...	...
64	...	...	...	...	...	...
65	...	...	...	...	...	...
66	...	...	...	...	...	...
67	...	...	...	...	...	...
68	...	...	...	...	...	...
69	...	...	...	...	...	...
70	...	...	...	...	...	...
71	...	...	...	...	...	...
72	...	...	...	...	...	...
73	...	...	...	...	...	...
74	...	...	...	...	...	...
75	...	...	...	...	...	...
76	...	...	...	...	...	...
77	...	...	...	...	...	...
78	...	...	...	...	...	...
79	...	...	...	...	...	...
80	...	...	...	...	...	...
81	...	...	...	...	...	...
82	...	...	...	...	...	...
83	...	...	...	...	...	...
84	...	...	...	...	...	...
85	...	...	...	...	...	...
86	...	...	...	...	...	...
87	...	...	...	...	...	...
88	...	...	...	...	...	...
89	...	...	...	...	...	...
90	...	...	...	...	...	...
91	...	...	...	...	...	...
92	...	...	...	...	...	...
93	...	...	...	...	...	...
94	...	...	...	...	...	...
95	...	...	...	...	...	...
96	...	...	...	...	...	...
97	...	...	...	...	...	...
98	...	...	...	...	...	...
99	...	...	...	...	...	...
100	...	...	...	...	...	...

CONFIRMATION

The above is a true and correct copy of the original as filed in the office of the Department of Taxation.

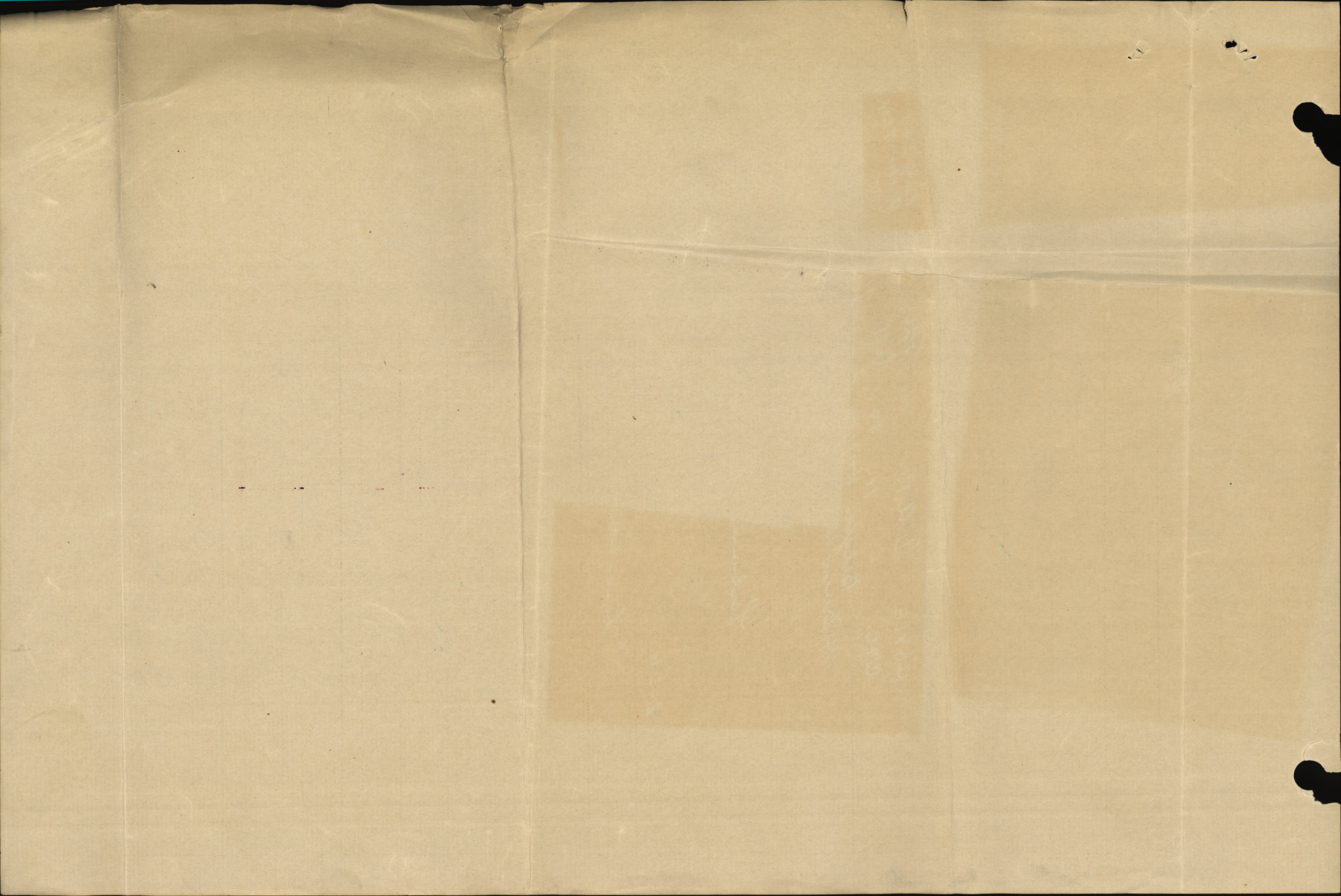
DEPARTMENT



**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







Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

1-3-16

Separation and Assigned Pay Branch

H

10222

Aug 1/16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

<del>20</del>	\$ 25.00	*30.00
---------------	----------	--------

1-9-18  
PC 2753  
MRO 24027  
P.C. 3257

RATE OF ASSIGNMENT

15			
----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. **724549**  
 Rank **Rte - Promoted** Reverted Discharge  
 Soldier's Name **C. A. P. Hoxie**  
 Battalion **109 Battr. D. Co.**  
 Beneficiary **Alice Hoxie** M.F.W. 2554 2/8/8  
 Relationship **Dep. Mother**  
 Address **M.F.W. 2554, received - 4/9/18**

PARTICULARS OF ASSIGNMENT

Name **Alice Hoxie**  
 Address **Haliburton, Ont.**  
 Change of Address  
 1  
 2  
 3  
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total
1917				
Dec 31		440 -	255 -	695 -
Jan 1918	M 69742	20	15 -	45 -
Feb	N 71153	25	15	40
Mar	I 95081	25	15	40
Apr.	J. 9425	25	15	40
May	F 5192	25	15	40
June	C 15379	25	15	40
July	U 31578	25	15	40
Aug.	F 30624	25	15	40
Sept.	G 45910	25	15	40
Oct.	J 51463	25	15	40
Nov.	C 60644	25	15	40
Dec	H 65910	45	15	60
JAN	F 71915	30	15	45
Feb	E 79752	30	15	45
MAR	E 90651	30	15	45
		855	480	

9053-E-6

REMARKS

CANADIAN  
 ASSIGNED PAY AUDITED  
 OK. J. M. Rose  
 AUDIT CLERK  
 DATE 17/6/19

MRO Destroy 16595 73-19. J.P.L.

M. F. W. 128  
 400M-6-17-1772-39-1141  
 L. L. 22520-M & D. 7583.

Alc Closed 31-3-19  
 Ret'd per... B.L.G. 15  
 Date 1-3-19 M.F.W. 187  
 Clerk J.P.L. 73-19  
 MID 2

A STENCIL  
 HAS BEEN MADE  
 FOR THIS ACCOUNT

