

ATTESTATION PAPER.

No. 725191

109th OVERSEAS BATTALION, C. E. F.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

TRIPPLICATE

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your surname? *Johnson*
- 1a. What are your Christian names? *William Joseph*
- 1b. What is your present address? *157 Blenheim St. Toronto.*
2. In what Town, Township or Parish, and in what Country were you born? *Collingwood, Ont.*
3. What is the name of your next-of-kin? *Joseph Augustus Johnson*
4. What is the address of your next-of-kin? *157 Blenheim St. Toronto.*
- 4a. What is the relationship of your next-of-kin? *Father*
5. What is the date of your birth? *April 19th 1897*
6. What is your Trade or Calling? *Laborer*
7. Are you married? *No*
8. Are you willing to be vaccinated or re-vaccinated and inoculated? *Yes*
9. Do you now belong to the Active Militia? *No*
10. Have you ever served in any Military Force? *No*
If so, state particulars of former service.
11. Do you understand the nature and terms of your engagement? *Yes*
12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } *Yes*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Date **JAN 28 1916** 191 .

Wm J Johnson (Signature of Recruit)

Ed Bourne (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *William Joseph Johnson*, 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 **JAN 28 1916** 191 .

Wm J Johnson (Signature of Recruit)

Ed Bourne (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 *Rindray* this *28th* day of *January* 191*6*.)

[Signature] (Signature of Justice)

Description of William Joseph Johnson on Enlistment.

Apparent Age 18 years 9 months.
To be determined according to the instructions given in the Regulations for Army Medical Services.

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer.)

Height 5 ft 3 1/2 ins.

Chest measurement { Girth when fully expanded 33 ins.
 Range of expansion 3 ins.

Complexion Dark

Eyes Blue

Hair Black

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

Scars on right thumb.

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 declares that he is not subject to fits of any description.

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

Date JAN 28 1916 191

Place Reading

J. McCulloch
 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.

William Joseph Johnson having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

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

Date JAN 28 1916 191

REGIMENTAL DOCUMENTS

NAME JOHNSON, William Joseph

REGT. NO. 725 191

UNIT 28th Bn. Inf. H. Q. FILE NO.

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

DEATH

Category

68567

DISCHARGE

Category

Demob.

DESERTION

12 - 29
18 30
29 - 30

Box 406803

HE

S

BB

M

4

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

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

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

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

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

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

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

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

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

MEDICAL EXAMINATION (M.F.W. 129)

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

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

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

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

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

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

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

1 a.f.w. 3997

2 f.c.d. 3

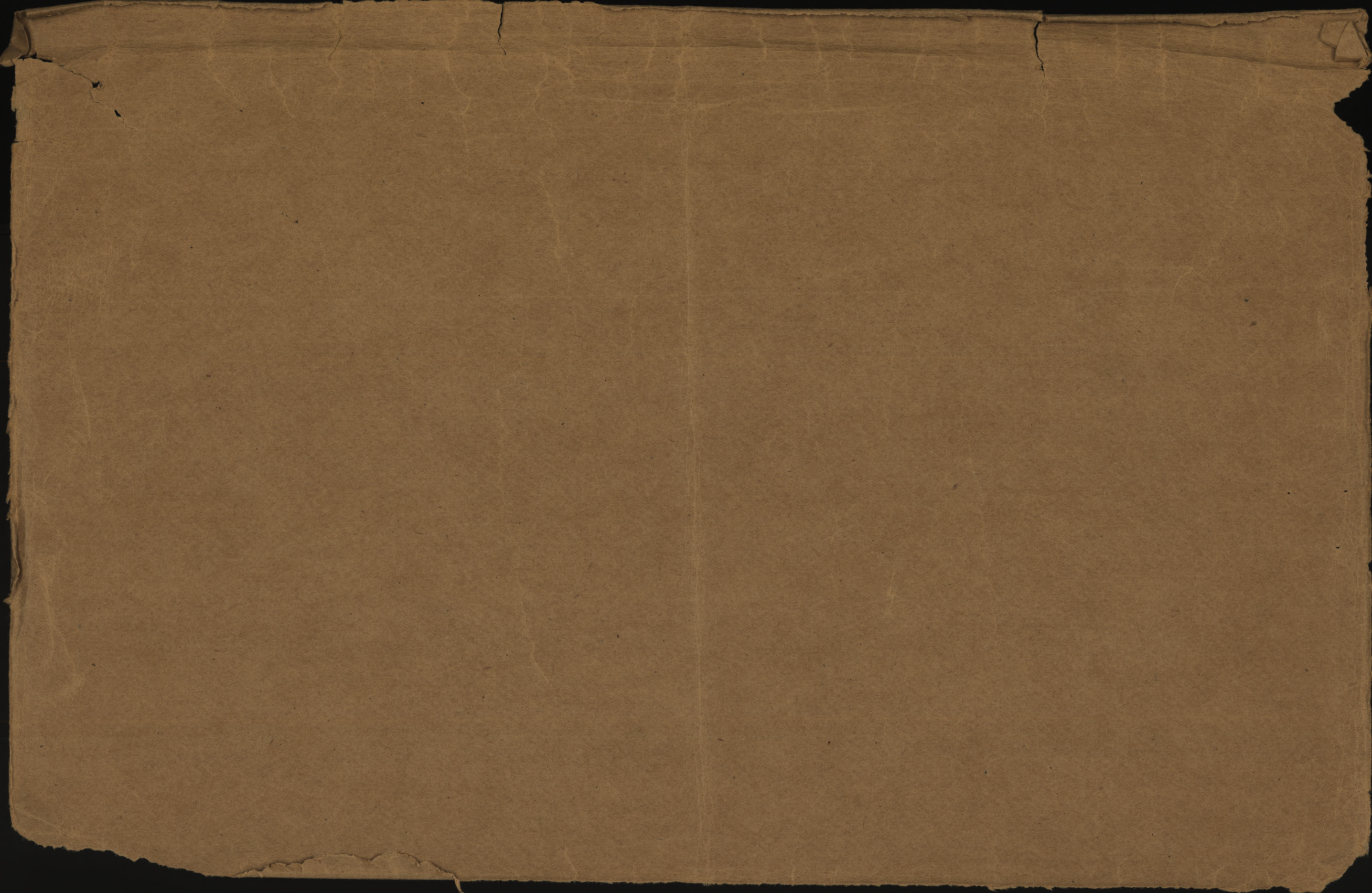
1 m.f.w. 67

1 R. 49

1 a.f.w. 3104

1 a.s. card

1 B-19



725191

I.D. number
No. d'identification

Johnson

Surname
Nom de famille

William Joseph

Given names
Prénoms

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU
PERSONNEL

Restricted
ATIA

Location
Lieu

4911



No. 725191. RANK

Pte

NAME ~~Johnston~~ Wm Joseph
Johnson

T. O. S. 25-1-16.
D. O. S. 24-1-16

UNIT 109th. Battalion.

M. D. 13

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Jan 25	1916. Jan 31	✓		
	Feb.	✓		
	Mar.	✓		
	April.	✓		
	May.	✓		
	June.	✓		
	July.	✓		

UNIT SAILED
JUL 23 1916



H.L.
cid
Number 725191 Rank *Plt.*

Surname JOHNSON

Christian Name William Joseph

Units 38th *Bn* *Can Inf* Theatre of War France

Date of Service 6-12-16

Remarks 217 Logan Ave,

Latest Address ~~14 Metcalfe St.,~~
Montreal,
Quebec,
Canada

Roll No. *out.*

200m-2-21.M. *B. Page 18129.*

10
✓

DESP OCT 24 1025
REGN. NO. 16200

SURNAME.

Johnson,

93. CARD NO. ✓

CHRISTIAN NAMES

William Joseph

Has Demob 16-6-19
001770 FOLL. 26-6-19
003

REGL. NO.

725191

RANK

Pte.

UNIT

109th

Batt.

FORMER CORPS

Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Johnson, Joseph Augustus

RELATIONSHIP TO SOLDIER

Father.

ADDRESS

~~#37 Clinton St., Toronto,~~
~~10 Vivian St.~~ Ont.
95 Winchester St. ^{19-12-18.} ~~22-6-18~~ ~~1918~~

COUNTRY OF BIRTH

Canada, Collingwood,

DATE

April 19th, 1897

PLACE OF ATTESTATION

Lindsay, Ont.

DATE

Jan. 28th, 1916

9/8 23-7-16 ²⁴⁸⁸ 19.

9/6 13-6-19

³⁴⁷ 57. Pte.

Rec'd from Halifax 23-7-16 per S S Olympick

MARRIED

SINGLE

Eyes.

WIDOWER

TRADE OR CALLING

Labourer

RELIGION

Baptist

DESCRIPTION.

APPARENT AGE

18

YEARS

9

MONTHS

HEIGHT

5

FEET

3 1/2

INCHES

CHEST MEASUREMENT

33

INCHES

EXPANSION

3

INCHES

COMPLEXION

Dark

EYES

Blue

HAIR

Black

DISTINGUISHING MARKS

Scar on right thumb.

MEDICAL EXAMINATION.

PLACE

Lindsay, Ont.

DATE

Jan. 28th, 1916.

Name *Johnson. William Joseph*

Rank

Reg. No. 725191

Unit *109th Bann.**Rt.*Next of Kin *Canada*

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
14. 9. 16	brought Aldershot		1. 2. 2	14		
20. 10. 16	his		1. 2. 2	27		
	has now been diagnosed. —		V D Y	30		

REGT'L NO

725191

H. Q. FILE NO. 649-

NAME

Johnson W J

RANK AND CORPS

Pte. 109th Bn. (Can Inf.)

FOLLOWS

No.

FOLLOWS

CABLE

No.

DATE

NATURE OF CASUALTY

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS <i>L. Ont. Regt.</i>
14	Connaught Aldershot	14-9-16	N. Y. D. Q.
27	Discharged	20-10-16	" " " "
a-132-1	#4 Can Fld. Amb.	30-1-18	Ch. Otitis Media. Lt.
A152	Dis	10-2-18	" " " "

Surname

Christian Name or Names

Reg. No.

Johnson
Rank
plie.
Hospital

W.
Unit
109th Am
Co.

725191
Troop
Batty.

Date of Admission

Transferred Connaught Aldershot
4 Can to Amb.

Hosp. 14.9.16
Hosp. 30.1.18.
Hosp.
Hosp.

Diagnosis

(1) *nyp* *U.D.G.*
Later Diagnosis (if changed) *Ch otitis media Lt. HD*
(2)
(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Date

el. rs. 9.16# 14
.. 2.11.16. 27 ✓
.. 9.11.16. 30
6. 2.18 A132 Q
1-3-18 A1320

Dis. 20.10.16
Dis. 10.2.18

REMARKS

A.M.D. 2 Dept.

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

Rev.

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Printing and Stationery Services, London

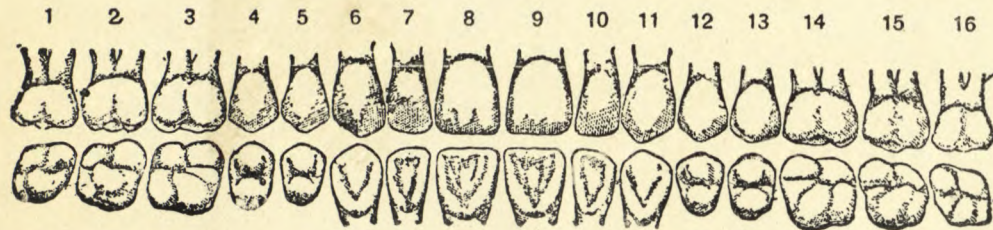
DIRECTIONS TO
DENTAL OFFICERS

NAME OF SOLDIER (Block Letters) Johnson W. J.
 REGIMENT 38th Bn RANK Pte No. 725191
 Date of Examination in England 8/5/19 Date of Examination in France _____

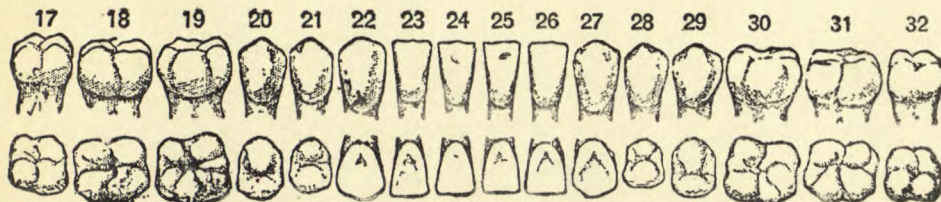
1. This form will be made out for each individual at the time of Demobilization in England or France.

2. Figures as per chart will be used to designate teeth concerned.

3. In reference to Partial Dentures the numbers of teeth thereon will be stated



96



PRESENT DENTAL REQUIREMENTS

1. FILLINGS

2. EXTRACTIONS

3. CROWNS

4. DENTURES

(a) Full Upper

(b) Part Upper

(c) Full Lower

(d) Part Lower

A 1225 H3

HAS HE EVER REFUSED DENTAL TREATMENT?

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)

(a) In Canada

(b) In England

(c) In France

BRAMSHOTT CAMP
HANTS.

Signature of Dental Officer

C. C. Graham Capt.

1892

Johnson M. J.

Ptc

1892

1892

1892

Blom

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

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

250M.—1-16.

H. Q. 1772-39-920.

Casualty Form—Active Service.

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

Regimental No. 425791 Rank Private Name Johnson William Joseph

Enlisted (a) 28-1-16 Terms of Service (a) C. E. F. Service reckons from (a) 28-1-16

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) Laborer

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				

W. S. B. CLASS. A.

Embarked Canada Halifax 24.7.16
Disembarked England Liverpool 31.7.16

Auttsell Capt.
ADJUTANT
109th Overseas Battalion, C. E. F.

4-12-16 O.C. 109th. Proceeded overseas for service with 38th. Btn. Witley 4-12-16 D.O. Pt. 11 339

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

Auttsell Capt.
ADJUTANT
109th Overseas Battalion, C. E. F.

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.]

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
6 12 16	C.B.D.	TAKEN on STRENGTH 38 th Havre		6 12 16	N. R. <i>Att 0.242-13.12.16.</i>
1 12 16	"	Left for Unit	FIELD	1 12 16	N. R.
16 12 16	Unit	Joined Unit	FIELD	9 12 16	B. 213. DCS. <i>69-31 17 16</i>
24.5.17.	38th	Sentenced to 27 days F.P. No.1 for "Absent from working party"		15.5.17.	B 2069 Pt. 2.0.61, d- 5.6.17.
11.10.17	<i>cekb</i>	<i>MS</i>		11.10.17	<i>NR</i>
13.10.17	<i>10 CM. Gray</i>	<i>Wtd for duty from cekb</i>		12.10.17	<i>DR13</i>
3.12.17.	<i>cekb</i>	Left for Unit	FIELD	3.12.17.	<i>nr 56.</i>
	Unit	Joined Unit	FIELD		N. R.
-8 DEC 17	"	14 days leave		-8 DEC 17	B. 213. <i>SO. C. -5 JAN 18</i>
29 DEC 17	Unit	Joined Unit	FIELD	21.12.17	B. 213.
30.1.18	<i>4 CFA.</i>	<i>Chr. Supp. Officer Medical ad.</i>	<i>4. CFA.</i>	30.1.18.	<i>D915.</i>
10.2.18	<i>Unit.</i>	<i>Rejoined</i>	<i>to duty</i>	10.2.18	<i>D 2333</i>
26.2.18	<i>Unit.</i>	<i>14 days F.P. No.1 - 11.5.18. for drunkenness.</i>	<i>Unit.</i>	11.2.18	<i>15.17-232.</i>
16.5.18	<i>Unit.</i>	<i>In confinement awaiting trial to 5/5/18. Tried and convicted 5/6/18 by G.C.M. of "W.O.A.S. disobeying a lawful command given by his superior officer." Also sentenced to 18 months I. H. L. Conf. 5-6-18 by Brig. J. MacBrien G.O.C. 12/18.</i>			<i>B 2069/2. DO 50-1.6.18</i>
13.6.18	<i>Unit.</i>	<i>Admitted. (18 months I. H. L.)</i>			<i>B 2069/6 DO 57-28.6.18</i>
22.8.18	<i>Unit.</i>	<i>Released from no. 10. M.P.</i>		10.6.18	<i>B 213.</i>
"	<i>Unit.</i>	<i>Remainder of sentence suspended. as from date of returning to front. (data)</i>		21.6.18	<i>B 213. DO. 64-10.7.18.</i>
1.2.19	<i>Unit.</i>			29.1.19.	<i>at GHQ. - at 12/PS. d 24.1.19.</i>
10.10.19	<i>Unit.</i>				<i>(B 213. DO. 10/19.</i>

CANADIAN EXPEDITIONARY FORCE 229821

DISCHARGE CERTIFICATE War Service Badge Class "A" No.

THIS IS TO CERTIFY that No. 725191 (Rank) Pte

Name (in full) JOHNSON William Joseph enlisted in the 109th Bn

CANADIAN EXPEDITIONARY FORCE at Lindsay on the 28th day of January 1916

HE served in 38th Batta in France

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

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

Age 22

Height 5'-3 1/2"

Complexion Dark

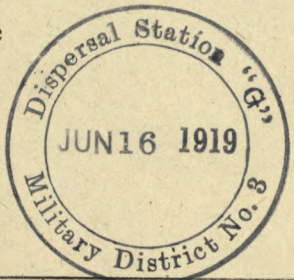
Eyes Blue

Hair Black

W. J. Johnson Signature of Soldier.

Marks or Scars Small scar - rt thumb.

Date of Discharge



J. Dwyer Issuing Officer.

Rank

Date 19

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.

4/27/1911

THE UNIVERSITY OF CHICAGO
LIBRARY

1000 UNIVERSITY AVENUE
CHICAGO, ILL.

THE UNIVERSITY OF CHICAGO
LIBRARY

THE UNIVERSITY OF CHICAGO
LIBRARY

A.C. Rank _____ Name JOHNSON, William Joseph. ✓ Reg'l No. 725191 ✓
 Unit 109th. Bn. If in perm. Corps, }
 What Unit? } Married or Single Single. ✓
 Place and Date of Enlistment Lindsay. Jan. 28th, 1916. ✓ Place of Birth Collingwood, Ont. ✓
 Name and Address, Next-of-Kin Joseph Augustus Johnson. ✓
457, Clinton St. Toronto, Ont., ✓ Relationship Father. ✓
 Assigned Pay Monthly \$ _____ Payable to _____ Relationship _____
 Separation Allowance \$ _____ Payable to _____ Relationship _____
 Discharge, Date and Place _____ Reason _____ Character _____

47 14 No 15327
 File R.L. _____
 Category Can OK

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. 2310 31-7-16
12.9.16	109 th	Admitted to Hospl.	Bramshott Camp Counaught	12.9.16	Pt. II D.O. 256
21-10-16	"	Dis from Counaught Hos	Bramshott	20-10-16	Pt. II D.O. 295
4.12.16	"	Sd on tfr. to 38 th Bn	Drifley Field	4.12.16	Pt II D.O. 339
13.12.16	38th Bn	T-O-S on tfr from 109th	Enslht	6.17.16	Pt II D.O. 242.
28.6.18	38th Bn	In confinement awaiting trial 30.5.18 to 5.6.18. Tried & convicted by G.C.C. 11.5.6.18 of "when on active service disobeying a lawful command given by his superior officer & sentenced to 18 months I. A. L. Sentence confirmed 5.6.18 by Bri. Gen. J. H. MacBrien, C.M.G. B.S.O. 12th. C.S. Bde. (aw. o. c. 35th can. Inf. Bn. A. F. B. 2069) 6d/13.6.18 Pa. Sentenced to 18 mo. I. A. L. 5.6.18.	Field	30.5.18	57
10.7.18	"	Admid. to No 10 Military Prison in the Field	"	21.6.18	61.

A.F.B. 103 CHECKED
 5 DEC 1916
 C. J. 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.				
21. 2/19	38 An.	Sentenced by F.G.C.M. ^{B.D.} to 18 mos. I.H.L. awarded 5.6.18. Release pending suspension of sent. ACT. 29.1.19.	Field	29. 1/19.	P 010.
		Released from No 11 Mtd. Prison on susp. of sentence 29.1.19.	"	1 2/19	P 010.
19 3 19	"	Sentence of 18 mos I.H.L. awarded 5.6.18 + suspended 29.1.19 now remitted autt. OC 12 th Can by Bde SCA 14/379 25.2.19 + OC 38 th Bu 478 2069/29 27.2.19	-	25 2.19	- 16
9-5-19		Proceeded to England	Haore	5-5-19	- 30
20.5.19	F Wing CEE	10s. pending R.T.C. 85-85-85	Bramshott	5.5.19	- 21
14 6 19	-	505 to Canada sentence remitted Act AFW	-	6 6 19	- 24
				3104	

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 50m.-4-16.
 1772-39-813

Sheet No. 2.

Mary Jane Johnson

Name of Soldier

*Johnson W. J.
 Plt "B Coy" 109 Batt.*

L. L. Job 310.-Req. 6374.

PAYMENTS. # *725191*

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>15⁰⁰ 20⁰⁰</i>
				AUG 1 1916
April	1916			
May				
June				
July				
Aug.		<i>715428</i>	<i>15</i>	
Sept.		<i>616994</i>	<i>15</i>	
Oct.		<i>621576</i>	<i>15</i>	
Nov.		<i>826987</i>	<i>15</i>	
Dec.		<i>34580</i>	<i>15</i>	
Jan.	1917	<i>740051</i>	<i>20</i>	<i>Cancelled 40⁰⁰ Soldier</i>
Feb.		<i>745389</i>	<i>20</i>	
March		<i>748354</i>	<i>20</i>	<i>20 (W) N# 8358 Can 9/3/17. AM</i>
April		<i>Q 2653</i>	<i>20</i>	<i>20 W.</i>
May		<i>Q 8772</i>	<i>20</i>	
June		<i>B16112</i>	<i>20</i>	<i>Mc</i>
July		<i>Q 2627</i>	<i>20</i>	<i>Bo</i>
Aug.		<i>Z 31609</i>	<i>20</i>	<i>Bo</i>
Sept.		<i>P 36284</i>	<i>20</i>	<i>Bo</i>
Oct.		<i>B 42920</i>	<i>20</i>	
Nov.		<i>S 50669</i>	<i>20</i>	<i>320</i>
Dec.		<i>J 39313</i>	<i>20</i>	<i>340 Mc</i>
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

1.0

W.

ab. [Signature]

320

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.				

[Large handwritten scribble or signature across the table columns]

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom *Mary Jane Johnson.*
 Address *678 Ontario St.,
 Toronto Ont.*

By Whom Assigned *Johnson, W. J.*
 Regtl. No. *725.191.*
 Rank *Pte.*
 Corps *109 Batt. "B" Co.*

Rate *15⁰⁰ per m.*

20⁰⁰ Aug 1st 16

a.s.p. 78877.17¹¹/₁₆ @ 6¹²/₁₆ PAYMENTS

~~AUG 1 1916~~

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				





725191

ORIGINAL ORIGINAL MEDICAL HISTORY SHEET.

E.O. 16
38 Bn

Surname Johnson Christian Name William Joseph

Examined { on 28th day of January 1916
at Lindsay
Birthplace { City or Town Tollington
County Ontario

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

Apparent age 18 years
Trade or occupation Laborer
Height 5 Feet 3 1/2 Inches.
Weight 110 Lbs.
Chest measurement { Minimum 30 inches.
Maximum expansion 33 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 one Left one
Number Two

Date	Result	VACCINATIONS.
<u>28-1-16</u>	<u>good</u>	<u>J. McCulloch</u> M.O.
		M.O.
		M.O.

When Vaccinated last January 28th 1916
(a) Marks indicating congenital peculiarities or previous disease None

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>15/4/16</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>7.5.16</u>	<u>"</u>	<u>J. McCulloch</u> M.O.

(b) Slight defects but not sufficient to cause rejection

Slightly flat footed

Enlisted on 25th day of January 1916 at Lindsay

	CORPS.	REG'T NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Batt.</u>	<u>725191.</u>		<u>28</u> <u>25-1-16.</u>
Transferred to.....	<u>E.E.F.</u> <u>38th Bn</u>	<u>2/12/16</u>		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective ; the date and cause being stated on next page.

To be made out in duplicate.

DUPLICATE H.Q. 51-21-23-53

B-

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 **725191**.....

(3) Full Name of Soldier **William Joseph Johnson**.....

(4) Place of Birth **Collingwood Ontario Canada**.....

(5) Are you married, or not? **No**.....

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

(b) Present Postal Address.....

(7) Are you a widower? **No**.....

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

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

Also their names and ages.....

9

(9) Is your Father alive?..... **Yes**

If so, state name and address **Joseph Augusta Johnson**

(10) Is your Mother alive?..... **Yes** **618 Augusta Street**

If so, state name and address..... **Mary Johnson 608 Ontario 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.

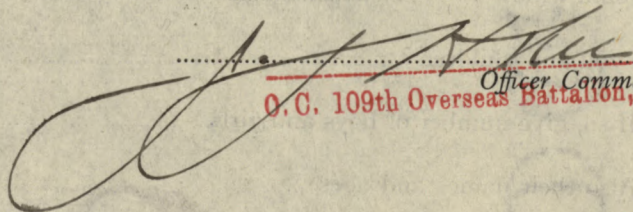
15) Are you insured?..... **yes**

If so, in what Company?..... **Prudential Life**

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..... **July 14th 1916.**

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

9

To: Officer Commanding.....

The following is a Special Ear Report on the undermentioned, Your M.O's. attention should be called to it, and the case should now be paraded with this Report in TRIPLICATE; the Medical History Sheet, and the Casualty Form, to:

LONG

The ~~Board~~ Board, as there IS NOT a disability of the EAR.

Name Johnson W. J. Number 725191 Rank. Pte Unit. 38th Anti

Former Occupation. Labourer Original Disease or Injury. Deafness O.M.C.C.

Date of origin. Childhood Place of Origin. Canada

Present Disability. O.M.C.C. and Deafness

History of present Condition. Deafness during all his life.

Did the disabling condition have origin before enlistment? yes

If so, has it been aggravated by service? yes

Has the Disability been caused or aggravated by intemperance or Improper Conduct, or unreasonable refusal to accept treatment? no

What is the probable duration (in months) of the Disability? 6 mos

Can the Former Trade or Occupation be resumed?.. yes

Notes.

Ref: - 10/20						
RT.	+	+	normal	normal	Retracted	
LF.	+	-	normal	normal	Retracted	

Voice; Weber; Rinne; Schwabach; Mosby; Druehead.
 3 ft

A

Category Recommended.

12519

W. J. Johnson, O.A.M.C. Officer in Charge, Medical Board, C.O.C., Branshott.

~~DUPLICATE.~~ *original*
~~DUPLICATE~~
MEDICAL HISTORY SHEET.

Surname Johnson Christian Name William Joseph

Examined { on 28th day of January 1916.
 at Lindsay
 Birthplace { City or Town Collingwood
 County Ontario

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

Apparent age 18 years
 Trade or occupation Labourer
 Height 5 Feet 5 1/2 Inches.
 Weight 110 Lbs.
 Chest measurement { Minimum 30 inches.
 Maximum expansion 33 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 one Left one
 Number Two

Date	Result	VACCINATIONS.
<u>28-1-16</u>	<u>good</u>	<u>J. McCulloch</u> M.O.
		M.O.
		M.O.

When Vaccinated last January 25th 1916
 (a) Marks indicating congenital peculiarities or previous disease None

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>18/1/16</u>	<u>good</u>	<u>J. McCulloch</u> M.O.
<u>28/1/16</u>	<u>good</u>	<u>J. McCulloch</u> M.O.
<u>7/5/16</u>	<u>"</u>	<u>J. McCulloch</u> M.O.

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

Slightly Flat footed

Enlisted on 28th day of January 1916 at Lindsay

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Batt.</u>	<u>725191.</u>		<u>28-1-16.</u>
Transferred to.....	<u>C. E. F.</u> <u>38th Bn.</u>			<u>2-12-16</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Bramshott</u>	<u>10/5/19</u>	<u>D. tuberculosis</u>	<u>R. H. Stang Cgd</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.

ASSIGNED PAY.	ENGL. OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.	NAME: Johnson William Joseph			
EFFECTIVE DATE: 1/8/16		EFFECTIVE DATE: -		NUMBER: 725191			
AMOUNT: \$15⁰⁰		AMOUNT: -		PARTICULARS OF RANK OR APPOINTMENT			
NAME, ADDRESS, RELATIONSHIP & AUTHORITY				AUTHORITY			
Mrs. Mary J. Johnston 618 Ontario St. Toronto Mother Stopped Eff. 1/2/18				DATE EFFECTIVE			
				RANK OR APPOINTMENT			
				712			
UNIT AND TRANSFERS							
ORIGINAL UNIT: 109 Bn							
DATE ACCOUNT FIRST OPENED: 1/8/16							
AUTHORITY		DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO			
5057 28/6/18		5/6/18	18 Mks. Imp.	38th Bn			
5010 21/2/19 38 Bn		1/10/18	27/10/18	B. N. G.			
16 19/3/19		29-1-19	25-2-19	Released Remitted			
		1/1/19	15/1/19	CORD.			
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS							
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
26.4.19	439	Belg. Fes. 20	2.19				
7.5.19	2643	B. Schott. £10.	4867				
			5216				
DAILY RATES OF PAY AND ALLOWANCES							
AUTHORITY		PAY	F.A.	P.F.A.	SUBS. ALL'CE		
		1.00	10				

PARTICULARS OF RENDERING NON-EFFECTIVE: **Trans to Canada 1-6-19 B. Schott NR 8614. 12.5.19 B. Schott. M.D. 3 2 P.C. Bel. 18 mos. 9 M. 27/1/18 120.35 M. 25/6/18 DR 10208**

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
1918											
31 March	Bal fwd								37 54		
April	P.P.	33		ar				15			
				ar. 7. 2/4/18. 38th	803						
				" 198. 18/4 "	357			15	4394		
					1160			15			
F. 14. 6 F 2 6 May	P.P.	33		ar				15			
				ar 904. 5/1/19. 1 cm/c	446						
				" 349. 4/5. 38th	446			15	5412		
F 30 6 June	P.P.	33		ar	892			15			
				14 d. 7 P no. 1/5/18. P.D. 50. 1/6/18	1540						
				In conf. 30/5. 5/6/18. Sent. by 79 CM to 18 mos. 5/6/18	3520			15	2151		
				20.57. 28/6/18. 27. 20. 7. 5. 27. 20. 7. 5. 27. 20. 7. 5.	5060				2152		
F 317 July	P.P.	33		Can. ar. under debited 5 ⁰⁰ per mo. 1/8/16 to 31/5/19. AP09599-W-83				110 00			
				ar				15			
F 318 Aug	P.P.	3410		July pay (in prison)	3410			125	10348		
				ar	3410			15			
F 309 Sept.	P.P.	3410		Aug pay - in prison	3410			15	11848		
				ar	33			15			
				Sept. pay -	33			15	13348		
				Oct ✓	3410			15	14848		
				Nov	3410			15			
				In Det ⁿ Nov/18 Jan/19	10120			15	16348		
					10120						
Feb	Released from 10 th Mil. Prison on Suspension of Sentence 29-1-19. 2010 21/2/19. 38 Bn P.A. 29-1-19. to 28-2-19. 31 days Sentence Remitted Eff 29/1/19 2010 16 17/3/19 38 Bn	3410		Jan/AR 3247 4/2/19 12 C.F.B.	373						
Mar	Jan In Det ⁿ 1/28 Jan/19	3080		Jan/AR 3393 10/2- 12 th Bde	373						
				Brot Forward	1746				16348		

NUMBER 725191 RANK Pte.

NAME JOHNSON William Joseph

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
March	Bal Forward	3410		Blec. Brought forward	746				16348		
	P.A. Mar	3410		Dr. Ar. 3554 3/3/19 12 th 2de	365						
				✓ v. 3703 15/3/19	365				11004		
		6820			1476						
May	at May	6710		AR 17 3/4/19	349						
				N 193 15/4/19	349						
				N 439 26-4-19	349				5344		
		6710			1047						
June				AR 4468 27/5/19 C.C. (ind)	460						
				N 2543 28/5/19 "7" C.C.	4867				11668		
				N 5028 29/5/19 "v" (ind)	973				12641		
					2000						
					7300						
				S.O.S. to Canada 6/6/19. S.h. 83. 38B.v.							

61
67.10
10208 Dr Bal.
16918

Dr.
11004 Dr Bal.
698 Ledger
5216 Panel.
16918

Dr. Comm
12-5-18

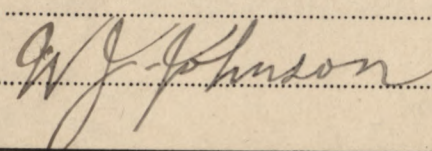
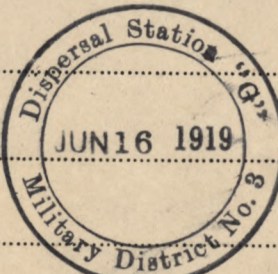
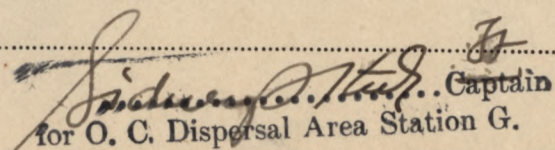
SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

9903

70-7-33

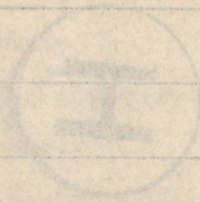
1. No. 725791.	
2. Rank. Pte.	
3. Name. Johnson William Joseph	
4. Unit. 38 ³ B ³ Inf.	
5. Date of Discharge JUN 16 1919	Place Ottawa G.
6. Reason for Discharge Demob ⁿ	
7. Authority R. 1420.	
8. Proposed Residence after Discharge 95 Winchester St. Toronto. Ont	
9. CERTIFICATE TO BE SIGNED BY SOLDIER. I hereby acknowledge that at the undernoted place and date I received my discharge Certificate M. F. W. ? 32.	
 Signature of Soldier.	
10. CONFIRMATION. The discharge of the above named man is hereby confirmed.	
Place	Date
	
 Signature for O. C. Dispersal Area Station G. (O. C. Discharging Unit.)	
<div style="border: 1px solid black; padding: 5px; width: fit-content;"> Medical Documents Forwarded to S.C.R. or B.P.C. on Date JUL 9 - 1919 </div>	

H-M-T Olympic
SAILED S' HARTON 6/8-19
ARR'D HALIF'X June 12:1919

117271

PROCEEDINGS ON DISCHARGE
(Demobilization)
SHORT FORM

1. No.	2. Rank	3. Name	4. Date	5. Date of Discharge	6. Reason for Discharge	7. Authority	8. Proposed Residence after Discharge	9. Remarks
CONTINGENT TO BE SIGNED BY SOLDIER								
I hereby acknowledge that at the undotted place and date I received my discharge Certificate								
M. W. 1919								
Signature of Soldier								
CONFIRMATION								
The discharge of the above named man is hereby confirmed.								
Date								
Place								
Signature								
Mr. O. C. Discharge Area Station G.								
(O. C. Discharge Unit)								

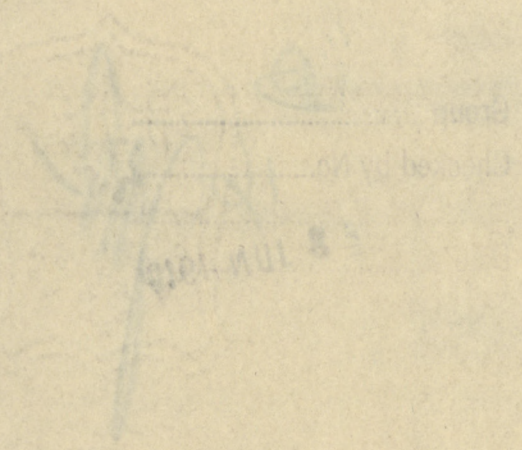


Mr. O. C. Discharge Area Station G.
Signature

LIST OF DISCHARGE DOCUMENTS

Medical Form W. 100	Attestation Form, Triplate
Medical Form W. 100	or Particulars of Record
Medical Form W. 100 or A.R. 100	Field Conduct Sheet
Medical Form W. 100 or A.R. 100	Casualty Form
Medical Form W. 100	Last Pay Certificate
	Certificate that missing documents are undelivered
Medical Form B. 100 or A.R. 100	Medical History Sheet
M.R. B. 100, A.R. 100 or A.R. 100	Proceedings of Medical Board
Medical Form B. 100	Personal History Sheet
M. F. W. 100 or A.R. 100	Medical Report
Medical Form B. 100	Reharmat Conduct Sheet
Medical Form B. 100	Company Conduct Sheet

1. This is a discharge form...
 2. Particulars of Record...
 3. Casualty Form...
 4. Medical History Sheet...
 5. Last Pay Certificate...
 6. Certificate that missing documents are undelivered...
 7. Medical History Sheet...
 8. Proceedings of Medical Board...
 9. Personal History Sheet...
 10. Medical Report...
 11. Reharmat Conduct Sheet...
 12. Company Conduct Sheet...



LIST OF DISCHARGE DOCUMENTS.

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

1. Triplicate Attestation Paper (M.F.W. 23) & Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129).
5. Dental Certificate (C.A.D.C. 5109a).
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discharge (M.F.B. 213a)
8. Discharge Certificate (M.F.W. 29)
(Enclosed in special envelope (200H)).
9. Copy of Discharge Certificate (M.F.W. 30a).
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group B

Checked by No. 160

Date 8 JUN 1919

AUDITOR *W.M. G.M.D.* PAYMASTER

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

M. OR S.

REGT. No. *725191* RANK *Pte* NAME (IN FULL) *JOHNSON, Wm Joseph*

NEXT OF KIN *Mary Jane Johnson* RELATIONSHIP

PARTICULARS EFFECTIVE DATE AUTHORITY

ORIGINAL UNIT C.E.F. *109th Bn* IF IN P.F. WHAT UNIT? (BLOCK LETTERS SURNAME FIRST)

ADDRESS *95 Winchester St. Toronto, Ont.*

PLACE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

IS SEPARATION ALLOWANCE PAID? *Yes* DATE EFFECTIVE *1-2-18*

DATE OF ATTESTATION *Jan 25 - 1916* TRANSFERRED TO DATE AUTHORITY

TO WHOM PAID *as above* RELATIONSHIP

ASSIGNED PAY *15.00* DATE EFFECTIVE *closed 31-11-18*

ADDRESS *95 Winchester St. Toronto*

PAYABLE TO *Mary Jane Johnson* RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS

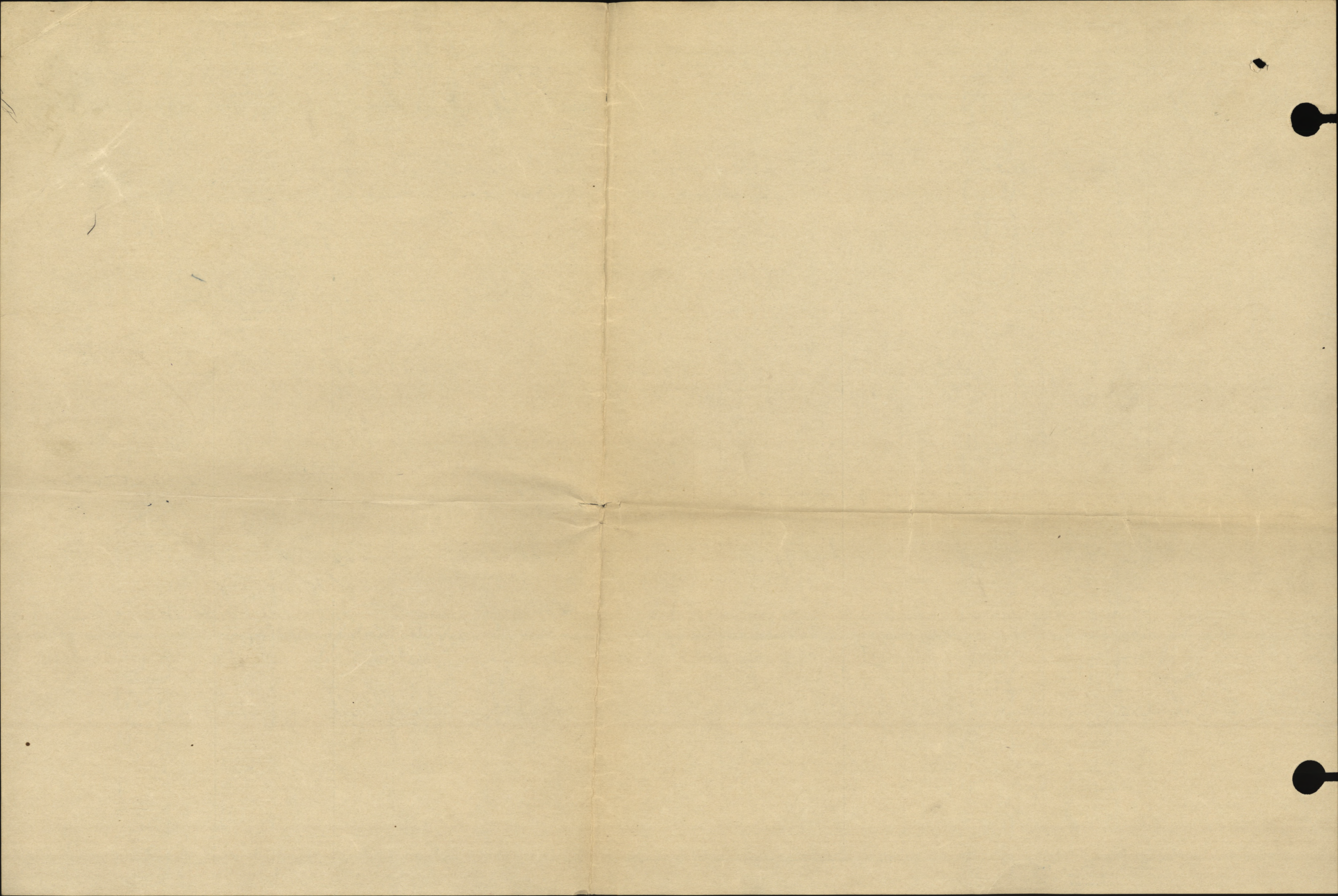
Wm Joseph Johnson
95 Winchester St.
Toronto
47 Carlton St
E. Toronto
Ontario

ADDRESS *95 Winchester St. Toronto, Ont.*

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED *London* PLACE *16-6-19* DATE REASON *Demst.* AUTHORITY IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A.		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY		REGI-MENTAL CHARGES		OTHER CHARGES		TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS		
	NO. OF DAYS	RATE	AMOUNT		CREDITS		COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3	PAY	MENTAL	CHARGES	CHARGES	DEBITS	DEBIT	CREDIT						
			\$	C.	\$	C.	\$	C.	\$	C.	\$	C.								\$	C.	\$		C.	\$
June 21/19	22	10	2500		12	8				4	87	5	00	7	00				162	08	162	08	102	08	Returned Olympic Bal. per Eng. P. Co. Clothing Allee. and 1st Payment W. S. G. Pay to Estimate date of discharge. Advances in England. Boat Money. Train Money. Overpaid 5 days on discharge. 6 pay on this.
July 11/19																								M. JW 2095 Rec 1st Pay W.S.G. 3-7-19 per 275-669. 6 pay sh. 14 day Debit Balance	
Aug 8/19																									
Sept 10/19																									
Oct 15/19																									
Nov 13/19																									



Date of Enlistment 26-1-16.

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

J 3067 Aug 16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

2500	30/1/18		
------	---------	--	--

1-2-18 7026255
7026251

RATE OF ASSIGNMENT

20	15		
----	----	--	--

1-6-18

PARTICULARS OF SEPARATION ALLOWANCE

No. 725191
 Rank Pte Promoted Reverted Discharge
 Soldier's Name W. J. Johnson
 Battalion 109th Battr "B" Coy
 Beneficiary Mary Jane Johnson
 Relationship mother m.s.w. 2554
 Address held OK 12/18

PARTICULARS OF ASSIGNMENT

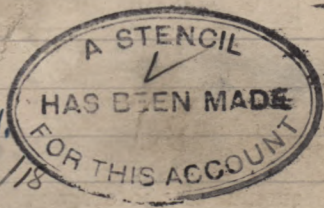
Name Mary Jane Johnson
 Address 618 Ontario St
 Change of Address Toronto, Ont -
 1 Vivian St Toronto Ont 9/5/18
 2 95 Winchester St Toronto Ont 22-11-18 m 900 2554
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917					
Dec 31			340	340	
1918					
Jan	B 69845		20	20	
Feb	R 74851		20	20	
Mar	D 100466		20	20	
Apr	J 14876		20	20	
Apr	G 4864	75		75	
May	F 11750	25	20	45	
June	L 20728	25	20	45	
June	J 515	25	15	40	
July	R 30472	25	15	40	
Aug	H 35702	25	15	40	
Sep	O 44896	25	15	40	
Oct	N 49156	25	15	40	
Nov	E 53794	25	15	40	
Dec	F 67804	45		45	
1919					
Feb	O 5910	30		30	
Feb	G 78743	30		30	
March	B 85208	30		30	
April	H 278	30		30	
May	Z 8424	30		30	
June	R 10257	30		30	
M.R.O. 125474 Dec		475	530	1005	

09599-W-83

S.A. opened from 1-2-18 date of application as per S.B. ruling adjustment cheque for 75.00 to cover Feb + March + April, med
 mailed 19/4/18
 A.P. reduced to 15.00 per month effective 1st June, as Nom. Roll of the 109th Bn shows this amt. assigned
 C. 20728 can. adj. for June ordered 19/18 med
 A.P. to close 1-12-18 per 3rd 27.9.18 sentenced to 18 mo at 1/2 R. for desertion. Alteration order 18040 eff 1/12/18 back 26.11.18
 A.P. suspended 1/1/19 per ruling PAB folio 57 suspended order 26417 eff 1/1/19
 to adj. Jan/19 mailed 16/1/19 per L.A. 136446, cause 23/1/18
 Awt "P.A.B 27/1/19" S.A. use re-opened from date suspended viz 1/1/19 & 3/1/19
 A/c Closed Olympic
 B'd per 12619 M.F.W 187
 Date 61771 (Re-Inst.) 1/1/19 @ 3 1/4
 M.R.O. 125474 Dec
 P.R.O. 1 P issued 18/4/18
 Closed GMB

AUDITED



M. F. W. 128
 40096-6-17-1772-38-1141
 L. L. 22320-M. & D. 7583.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

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PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
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M. F. W. 128
 400M-6-17-1772-88-1141
 I. L. 22220-M. & D. 7493.

9

THIS FORM WILL BE USED FOR ALL RANKS
MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION B Namshett DATE May 13 1919

1. 1 (a) Unit 38th (b) Regimental No. 725191 (c) Rank pt

(d) Surname Johnson (e) Christian name William Joseph

(f) Home address 95 Winchester St Toronto Ont

(g) Next of Kin Jos A Johnson (h) Relationship Father

(i) Address of Next of Kin 95 Winchester St Toronto Ont

2. Age last birthday 21 Date of birth April 17th 1897

3. Enlistment, or Appointment (if an Officer) (a) Place Lindsay (b) Date Jan 28-1916

4. Personal description:

(a) Height 5ft 6 1/2 in (b) Weight 132 lbs (c) Complexion fair
(stripped)

(d) Colour of hair black (e) Colour of eyes blue (f) Identification marks, Scars, etc. Small scar on nose at bridge

5. Former trade or occupation Labourer

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted)	Years	Days
	<u>3</u>	<u>96</u>



Canada	PERIODS	
	From	To
	<u>Jan 28-1916</u>	<u>July 24-1916</u>
	<u>July 31-1916</u>	<u>Sept 6-1916</u>
	<u>Sept 6-1916</u>	<u>May 5-1919</u>

7. Original disease, or injury Cholera Supp. other Media

(a) Date of origin Childhood (b) Place of origin Canada

(c) Cause Infection

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

Impaired hearing left ear

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Specialist's report

20 H
Voice Waxes + + normal
5 ft normal retracted
meatus Drumhead
normal retracted

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above? (Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System no Cardio-Vascular System no Genito-Urinary System no
(If pulse rate is abnormal, B. P. will be taken.) (Albumen and Sugar will be excluded.)
Special Senses no Respiratory System no Integumentary System no
Disturbances of Mentality no Digestive System no Muscular System no
Osseous and Joint Systems no Any other general condition no

10. (a) History (of the condition referred to in Section 9 (a).)

Hearing left ear has been poor since childhood
30/1/19 Chr. Supp. Otitis Media 4th C. 7A
Discharged to duty 10/2/18

NO CARD ON

10.—(b) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (a).)

Commaught Map. Aldershot 13/9/16 - 20/10/16
Honoraria - No present disability

(c) (Here give a description of wounds, scars and deformities.)

See 4/7)

11.—(a) Did the disabling condition have its origin before enlistment? *Yes*

(b) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

Yes

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? *(a) & (b) no*

The regimental documents will be referred to.

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? *Six months*

14. Treatment (Case reports, general or special, should be secured and attached where possible.)

Treated in field hospital

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? *no*
(If the answer is "yes" state nature of treatment required and probable duration)

16. Can the former trade or occupation be resumed? *Yes*
(If not, briefly state why)

17. Recommendations *none*

A. McCreary Capt
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned *W. J. Johnson* have heard the description of my disability and present condition read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.)

I complain in addition of *nothing*

W. J. Johnson Pte. Rank.
Signature of invalid examined.

