

ATTESTATION PAPER

ORIGINAL

No. 145035

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

- | | |
|--|--|
| <ol style="list-style-type: none"> 1. What is your name?..... 2. In what Town, Township, or Parish, and in what Country were you born?..... 3. What is the name of your next-of-kin?..... 4. What is the address of your next-of-kin?..... 5. What is the date of your birth?..... 6. What is your trade or calling?..... 7. Are you married?..... 8. Are you willing to be vaccinated or re-vaccinated?..... 9. Do you now belong to the Active Militia?..... 10. Have you ever served in any Military Force?.....
<small>If so, state particulars of former Service.</small> 11. Do you understand the nature and terms of your engagement?..... 12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?..... | <p><i>John Bernard Junkin</i></p> <p><i>Bobcaygeon Ontario</i></p> <p><i>Mother Elizabeth Junkin</i></p> <p><i>Hogies Creek Ontario</i></p> <p><i>22nd October 1893</i></p> <p><i>Farmer</i></p> <p><i>No</i></p> <p><i>Yes</i></p> <p><i>No</i></p> <p><i>No</i></p> <p><i>Yes</i></p> <p><i>Yes</i></p> |
|--|--|

John B. Junkin (Signature of Man.)
R.H. Anderson (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *John Bernard Junkin*, 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 *August 23rd* 1915 *John B. Junkin* (Signature of Recruit.)
R.H. Anderson (Signature of Witness.)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *John Bernard Junkin*, 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 *August 23rd* 1915 *John B. Junkin* (Signature of Recruit.)
R.H. 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 *Hudsonay*, this *23rd* day of *August* 1915.

Geo. A. Balfour (Signature of Justice.)

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

..... (Approving Officer.)

ORIGINAL

DESCRIPTION OF John Bernard Junkin ON ENLISTMENT.

Apparent Age 21 years 10 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.

Height 5 ft. 8 1/2 ins.

Chest measurement { Girth when fully expanded 38 ins.
 Range of expansion 5 ins.

(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.)

Top of thumb + 2 fingers on left hand injured

Complexion Fair

Eyes Blue

Hair Light Brown

Religious Denominations { Church of England
 Presbyterian
 Methodist 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 August 17 1915

Place Lindsay

McCulloch
Recruit
 Medical Officer.

*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

John Bernard Junkin 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.

(Signature of Officer.)

Date 1915

"C" "X" Coy

ATTESTATION PAPER.

No. 724551

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your name? *John Bernard Junkin*
 2. In what Town, Township or Parish, and in what Country were you born? *Verlun Ontario*
 3. What is the name of your next-of-kin? *Mother Elizabeth Junkin*
 4. What is the address of your next-of-kin? *Hogies Creek Ontario*
 5. What is the date of your birth? *October 22nd 1895*
 6. What is your Trade or Calling? *Farmer*
 7. Are you married? *No*
 8. Are you willing to be vaccinated or re-vaccinated? *Yes inoculated*
 9. Do you now belong to the Active Militia? *No*
 10. Have you ever served in any Military Force? *Yes 45th Dist Regt 3 months*
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*
- *J. Bernard Junkin* (Signature of Man.)
..... *R. Ananson* (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *John Bernard Junkin*, 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 *October 21st* 191*5*. *John Bernard Junkin* (Signature of Recruit)
..... *R. Ananson* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *John Bernard Junkin*, 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 *October 21st* 191*5*. *J. Bernard Junkin* (Signature of Recruit)
..... *R. Ananson* (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 *21st* day of *October* 191*5*.

..... *[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)
C. C. 100th Overseas Battalion, C. E. F.

6

Description of John Bernard Junkin on Enlistment.

Apparent Age.....20.....years.....11.....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. 8 1/2 ins.

Tops of 1 & 2 fingers left hand missing

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

Complexion.....Fair

Eyes.....Blue

Hair.....Brown

Religious denominations. { Church of England.....
 Presbyterian.....
~~Wesleyan~~ Methodist.....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 18th 1915

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

Place.....Rudsay

*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.

John Bernard Junkin 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.

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

Date.....DEC 29 1915.....1915

D.V.A. FORM H.O. 101-40 (REV. 1-1-20)
C.E.F. REGIMENTAL DOCUMENTS
DEPARTMENT OF VETERANS AFFAIRS
WAR SERVICE RECORDS D.V.A.
CANADA

~~C.E.F. REGIMENTAL DOCUMENTS~~
O. H. M. S.
WAR SERVICE RECORDS D.V.A.

JUNKIN, JOHN BERNARD

PTE. 724551

4TH. C.M.G.C.

14689

DEMOB.

RECORDS CENTRE
MONTREAL



406923

Faint, illegible markings at the top of the envelope, possibly bleed-through from the reverse side.



SURNAME. *Junkin,*
CHRISTIAN NAMES *John Bernard*
REGL. NO. *724551* **RANK** *Pte L/Cpl.*
UNIT *109th*
FORMER CORPS *45th V. Regt.*

CARD NO. *3 H.*
50300105 23-7-19
FOLL. *24-7-19*
3000
Bn.

NEXT OF KIN.
NAMES IN FULL *Junkin, Mrs. Elizabeth*
RELATIONSHIP TO SOLDIER *Mother*
ADDRESS *Nogies Creek, Ont.*

CHANGE OF ADDRESS

COUNTRY OF BIRTH *Canada* *Verlun, Ont.* **DATE**
PLACE OF ATTESTATION *Lindsay, Ont.* **DATE** *Oct. 21st, 1915*

Previously attested with 77th Bn. at Lindsay on 23-8-15 with number 145035 but was dest. on Oct 2nd, 1915.
L. L. 6945. M. & D. 6994. *0523-7-16*
o/p 23-7-16 488
M. F. W. 22. 1900M. -8-16. H. Q. 1772-89-339.
REC 20-7-19 276
2d

Rec'd from Halifax 23-7-16 per SS Olympic

MARRIED

SINGLE

Yes

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE

P. #

Plt -

Number 724551

Rank

P

Surname JUNKIN

Christian Name John Bernard

Units 20th Bu Can Inf Theatre of War France

Date of Service 6-10-16

Remarks ~~W.C. H.C. 10.~~

Latest Address ~~Bobcaygeon Ont~~ ~~Ont~~ ~~Truro~~
Nogies Creek, Ont.

11¹⁰/₂₂

Roll No. B. Page 16711. ~~Ont~~

200m.-2-21.M.

Handwritten initials and marks on the right side of the document, including a large 'R' and other illegible scribbles.

B. W. ret'd 10¹⁰/₂₂ Disch^r

DESP OCT 17 1922
REGN. *PA* 3882

75862 $\frac{5}{10}$

22

NAME

Junkin John Bernard

REG'T'L. No.

724551.

RANK AND CORPS

Pte Lt/Cpl 2nd ^{Co} ^{from} 09th Bn

CABLE

NO.

DATE

NATURE OF CASUALTY

C

M. 1104

3-4-17

Admitted to No. 1. Can. Gen. Hosp. March. 27th, 1917
(G. S. W. Chest. Wall) ✓

Junkin Mrs Elizabeth, (Mother)

16-2

A. 449

20-8-18

Adm 47 Gen H Aug 8th 1918
wdd hand

LIST No.	HOSPITAL	DATE OF ADMISSION	Name should read Jenkins as per list 7. REMARKS
5.	Connaught Aldershot	7-8-16	N.Y.D.
6.	Disc from Conn Aldershot.	14-8-16	D.G.
15.	Mil Bramshott	18-8-16	N.Y.D "O"
A 243	no 1 Can. Gen. Etaples	27-3-17	Gsw. chest wall l. pl.
A 252	To no 6 convt. Depot. Etaples	7-4-17	Gsw. chest wall. pl.
A 255	To base details Etaples	9-4-17	Gsw chest wall l. pl.
A 88-1	#4 Can. fld. Amb	9-12-17	V. H. G. (m. G. Co)
A 96	no 2 Can. fld amb.	10-12-17	N. D. G.
A 96.	Disc to duty	14-12-17	" " "
a 295-1	47 Gen Le Tuffort	8-8-18	W ^d lac P hand (acc 302-3) (m G Co)
A 310 ³	47 "	22-8-18	" " " acc. Disch.
6481	Can. Spec. W. Key	28-5-19	20
C 500	" " "	25-6-19	20 D isch

Junkin
NAME *Jenkins J. B.*

H. Q. FILE No. 649-

REG'L. No. *7245-3-1*

RANK AND CORPS *Sgt 109th Batt (Can. P. Div.)*

CABLE

NATURE OF CASUALTY

NO.

DATE

*For cas. information
see Junkin J. B.*

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

5-

Connaught Aldershot

7-8-16

N. Y. D. Q

Name should read

Junkin (per list 7.)

Name JUNKIN. Rank Pte.

Reg. No. 724551

Unit John Bernard
2nd.C.D.MGC. (14)

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
27-3-17	No.1 C.G.H.Etaples.	GSW.	Chest wall	L.Slt.	A243	/1104
7-4	No.6 Con.Depot.Etaples.		do.	A252		3-4-17
9-4	Base Details Etaples.		do.	A255		

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
	D	—	J			
	M		G			

Name

JUNKIN, J. *John*

Rank

B. *Ernard*

Pte.

724551

Reg. No.

Unit

~~2nd Div 14th. C.M.G. CO. RPS~~4^E Batt.

Next of Kin

Canada

all

Date	1917	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
9-12		No. 4. C.F. Ambulance.			A88		
		9862	V.D.G.				
10-12		No. 2. C.F. Ambulance		so	A96		
		10371.					
14-12		Wien to Duty		so	A96		
		10371.					
1918							
8 8		47 E.H. Le Trupont	Wound (fac)	Wound Pt	A2959	HW9	3283.2
		Read above, as	Accident		A7302		2746
22 8		Dis. Base Dep.		"	A7310		3756.17
28.5.19		ban Spec Wiley		20	C481		10993.
25-6-19		Discharged.			C500		4477

Name

Juckin John Bernard

Rank

~~Lt. Col.~~ Plt.

Reg. No. 724551

Unit

109th Battr.

Next of Kin

Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
7.8.16	Commaught	Aldershot	N.Y.D.	5.		
14.8.16	Discharged		V.D.C.	6.		
18.8.16	Mill Bramshott		N.Y.D.	15		
	Hosp says no trace					

G. M.
H. M.

X

NAME *Jenkins, J. B. Documents on file.* 145035-

RANK & No. *pte.*

CORPS *77th Batt.*

ENLISTMENT, PLACE *Lindsay* DATE *23-8-15*

FORMER CORPS

COUNTRY OF BIRTH

NEXT OF KIN

ADDRESS OF NEXT OF KIN *Mrs. E. Jenkins,*

Struck off strength.
DISCHARGE, PLACE *Rockliffe* DATE *Oct. 2/15.*

Medically Unfit.

*cannot locate
20/6/15
#2.*
M. F. W. 22. 100 m.—9-15.
H. Q. 1772-39-839.

REMARKS:

No. 145035 RANK

2nd

NAME

Junker J B

T. O. S. 17-8-15

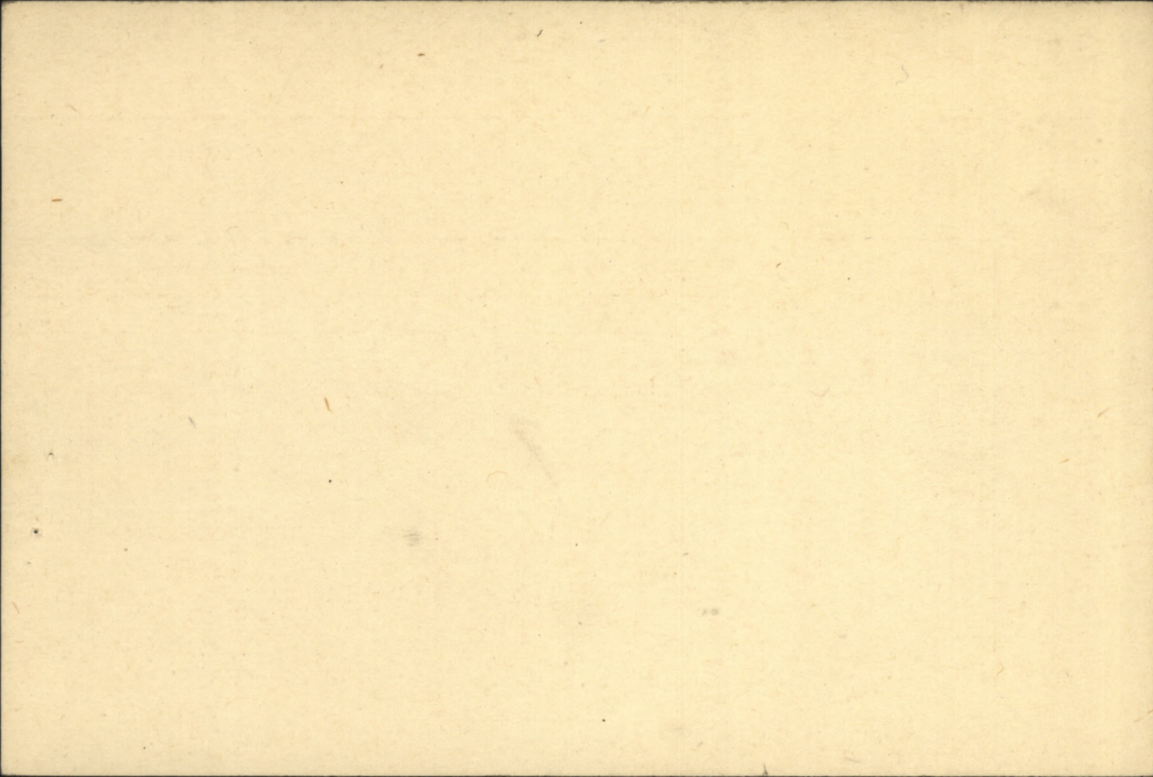
UNIT

45th Victoria Regt.
A. I. Cont.

D.O. 7216-8-15

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Aug. 17	1915 Aug. 25	✓	Transfd to 77 th Bn 25-8-15	D.O. 75-25-8-15
Aug. 26	Aug. 31	✓	Now shown on 77 th Bn. payroll	D.O. 21 of 30-8-15
Sept.		✓		
Oct. 1	Oct. 2	✓	Discharged (M.U.)	D.O. 52 of 2-10-15
			UNIT SAILED JUN 19 1916	
			<i>acc closed by payment. S.</i>	



Surname

Christian Name or Names

Reg. No.

Junkin

J.B.

724551

Rank

Unit

Co.

Troop

Batty.

L. Cp Pte. (109th Bn.) 2nd C. & M. Co. (14)

Hospital

Date of Admission

Connaught Alders at

Transferred Bromshott Mill

Hosp. 7.8.16

#1 Ban. Genl Staples.

Hosp. 27.5.17

6th Conv. Depot Staples.

Hosp. 7.4.17

H. Ban. L. Genl.

Hosp. 9.12.17

Diagnosis

V.D.G.

(1) Later Diagnosis (if changed)

nyd

(2)

Genl. Lt. Chest. wall etc.

(3)

Additional Diagnoses: if more than one state present

V. hl. G. R
Wound (Lac) Rt Hand. Acc.
V. D. G.

DISPOSITION

Disch. 14.8.16

Date

18.8.16 5
C.L. 22.8.16 6

REMARKS

23.8.16 7
27.9.16 15

A.M.D. 2 DEPT.

3.4.17 A/243

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

15.2-17 A252

B. S. Staples - 9.4-17.

19.4-17 A255-0

14.12.17 A88

Bch. of D.G.M.S. Juss. Lond 12-17

14-12-17 A96

Dis. 22.8.18

19.8.18 A295-0

Dis. 25.6.19

27-8-18 A-302-3

note = change diagnosis to
"Wound Lac. Rt. Hand. accident."

5-9.18 A310.3.

10/18

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1. 2. Cont'd Amb.

13-12-17

44 Rue Le Troport.

8. 8. 18

2. Can. Spec. Witley

28. 5. 19

3.

4.

5.

6.

7.

C.L.

6. 6. 19. C481

30. 6. 19 C500

6

To be made out in duplicate.

H.Q. 54-21-23-53

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.....

724551

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

John Bernard Junkin

(4) Place of Birth.....

Bobcaygeon, Ontario, Canada

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

No

(6) If married, state,

(a) Full name of your wife.....

Nil

(b) Present Postal Address.....

Nil

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

No

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

Nil

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

Nil

Also their names and ages.....

Nil

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

If so, state name and address **William B. Junkin, Hogies Creek, Ontario, Canada**

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

If so, state name and address **Elizabeth Junkin, Hogies Creek, Ontario Canada**

(11) If your Mother is a widow **No**.....

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

(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.

Nil.....

(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.

Nil.....

(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.

Nil.....

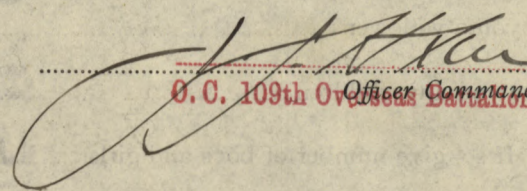
15) Are you insured? **No**.....

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

Have you made arrangements for payment of your Insurance premium? **Nil**.....

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

Date **6th July 1916**.....

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

Group No. 24.

P. 880.

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

WAR SERVICE BADGE.
CLASS "A" No _____

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

1. Christian names *Bernard John* 2. Surname *Junkin*
3. Rank *Pte* 4. Original Unit *109th Bu.* 5. Reg. No. *724551*
6. Address, in full, to which future payments of gratuity are to be forwarded
*Bank of British North America,
Bancaygen, Ontario, Canada.*
7. Date of enlistment in the C.E.F. *5th November, 1915*
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge. *not applicable*
9. Relationship of such dependent *not applicable*
10. Address, in full, of such dependent *not applicable*
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *not applicable*
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
not applicable
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? *not applicable*
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service. *not applicable*
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served. *3 years 191 days*
Canada 250 days with 109th Bu
England 115 days with 109th Bu.
France 2 years 191 days + 6 M. G. Bu.
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department *no*
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? *no*

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units. *no*
19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid. *no*
20. Have you been issued with a War Service Badge? If so what class? *no*
21. Have you, during the present war, served in the Imperial Forces? *no*
22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled. *no*
23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *no*
- (b) If so, was such reversion in consequence of misconduct or inefficiency? *no*
24. Are you now serving in the C.E.F.? If not, give:—(a) Date of discharge
(b) Reason for discharge
25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit
26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit in which you served at the front, and dates of such service with that unit
27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?
(b) If so, are you in receipt of full pay and allowances from that Department?

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: *J.B. Jenkin*

Place of Residence: *Nagies Creek, Ontario.*

Declared before me at: *Water Camp, Surrey.*

This *11th* day of *may* 19*19*

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths under P.O. 2767, dated 11th Nov., 1918.

J.B. Munro et al.
1 May

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....
.....
.....

Certified Correct.

District Paymaster.

Rv 183

A953

A.F. W.3428.

REPORT ON ACCIDENTAL OR SELF-INFLICTED INJURIES.

To be rendered in accordance with Instructions on the back of this Form.

1. Number, Rank, Name and Unit of injured man. *#724551.*
 Pte. Junkin, J. B.
 2nd Bn. C. M. G. Corps.

Date of Casualty.
 5/8/18

2. Nature, Location, and Severity of injury. (N.B. Field Ambulance to be notified at once if wound is believed to be self-inflicted).
 Lacerated wound back of right hand 1 1/2" long J. A. Stewart Capt C.M.C.

3. Short statement of the circumstances of the case. (Signed statements of witnesses to be attached to this Form).
 Pte. Junkin was drawing water from pump in billet. The wind blew the window near pump open & the spring of the pump handle caused Pte Junkin's hand to go through the pane. *Sp. Lt. Capt. for 06 Co. C.M.C.*

4. Commanding Officer's opinion as to whether the man was:—

(a) In the performance of military duty. *Yes.*

(b) To blame. *No.*

(c) Whether any other person was to blame. *No.*

Date *5/8/18*

J. A. Stewart
 Commanding *2nd Bn. C.M.C.*

5. (a) Opinion of G.O.C. Brigade.
 (b) Disciplinary action taken or proposed, whether against injured man or another.

Date Commanding Brigade.

6. To Army "A."

Forwarded with reference to my Casualty Wire No. Dated

Date Division.

7. ~~XXXXXX~~,
~~XXXXXXXXXXXXXXXXXX~~
A 302
8/19/18

Forwarded for Record. This casualty should be reported as "INJURED (ACCIDENTALLY)."

Roberts



Date *28-8-18*

J. A. Stewart
 for Major-General.
 DEPUTY ADJUTANT GENERAL.
~~XXXX~~

13.5/19
No action by H.I.G.
AC

2/8/18
Pfc. Jenkins, J. B.
2nd Bn. C.M.P. Corps
11. Camp

INSTRUCTIONS.

1. These Forms are to be completed in all cases of accidental or self-inflicted injuries, involving a soldier's absence from duty, whether due to the man's own act, or that of a comrade, or to other extraneous circumstances.

2. Where several casualties occur as the result of one accident, one Form is to be completed for each Officer or other rank injured, but only one set of statements from the witnesses of the accident need be attached.

3. Full statements are to be taken by an Officer from the witnesses of the accident. These statements will be signed by the witnesses making them, and by the Officer who takes them, and will be forwarded with this Form. Where it is intended to take disciplinary action, copies of these statements should be retained by the Unit for use in lieu of a summary of evidence.

4. Where it is possible to obtain it, a statement from the injured man will also be forwarded. This, however, should not be used as evidence against him in any subsequent disciplinary proceedings.

Special Instructions as to Evidence in Cases of Self-inflicted Wounds.

5. In these cases the statements mentioned in paragraphs 2 and 3 above should bring out all material points, e.g., statements to the effect that the witness was with the accused standing on the fire step (or sitting in a dug-out); that the accused was cleaning his rifle; position of safety catch, magazine, etc., if known; muzzle of rifle on toe of foot; hand on muzzle; that accused pulled trigger; that the rifle was afterwards examined and an empty cartridge case was found in chamber; that accused was seen to be wounded; what accused said ("I have shot myself," "I did not know it was loaded," etc.).

6. A soldier is specially trained in the safe use of his rifle and revolver, and evidence of any neglect of the ordinary precautions as to their handling in such cases usually has considerable bearing on the question of negligence. In cases of wilful self-wounding the fullest possible evidence should be obtained; unless the evidence is conclusive, this charge should not be used. The charge will therefore usually be laid under Sec. 40 Army Act—"Conduct to the prejudice of good order and military discipline in wounding himself through negligently handling a rifle," and an alternative charge to this effect should be made, even if the accused is to be tried under Section 18 for wilful maiming.

Group # 24

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

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 724551 Rank Private Surname JUNKIN
(Given name in full)
John Bernard
Unit or Corps 10th Bn. S.C. Birthplace Verlan Ontario

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

1. GENERAL DESCRIPTION:

Physique Good Weight 160 lbs. Height 5' 10 in. Colour of Eyes blue
Nutrition good
Pulse 90 regular
Condition of arteries soft
Vision Rt. 6/12 Left 6/12
Hearing (conversational voice) Rt. 21 ft. Left 21 ft.

Identification marks, scars, or deformities.
(Give cause and date of origin.)
Transverse scar at right of operation

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

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.

27-3-17 S. W. chest
8-8-18 wd right hand accidental
6-8-16 V. D. G.

States casualty entry of wd H. Huel is incorrect
1915 Heria (umbilical) operated - cured

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Witley.....(Overseas)

Date 26-5-19.....

Signed D. McKernan..... M.O. Capt

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

Signature J. B.

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

THIS SECTION FOR USE IN CANADA—

Examined at(Canada)

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 a Medical Board.)

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

~~H. Wing~~ M. Wing H Groups

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

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 724551 Rank Pte Surname Junkin
(Give name in full)
John Bernard
Unit or Corps 4th M.G.C. Birthplace Verulam, Ontario

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

1. GENERAL DESCRIPTION: EU
Physique good Weight 155 lbs. Height 5 ft. 10 in. Colour of Eyes Blue
Nutrition good
Pulse 70 regular
Condition of arteries soft
Vision Rt. 6/12 Left 6/12
Hearing (conversational voice) Rt. 21 ft.
Left 21 ft.

Identification marks, scars, or deformities.
(Give cause and date of origin.)
From severe abdominal
scar of operation
near back of right hand
& tip of left thumb.

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 yes 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.
Ventral Hernia cured by operation Sept 1915
no disability now.
See Ser H. 12105 available.

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Witley, Eng. (Overseas)

Date 1-7-19

Signed [Signature] M.O.

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

Signature J.B. Junkin

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

THIS SECTION FOR USE IN CANADA—

Examined at [Signature] (Canada)

Date 23/7/19

Signed [Signature] M.O.

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

Signature J.B. Junkin

(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.)

Auth. D.O.G. 14-1-48 of 15.6.9.

Approved 23/7/19

[Signature]

on 9.10.18. M.D. # 3

Approved

[over]

724551

ORIGINAL ORIGINAL
MEDICAL HISTORY SHEET

Surname Junkin Christian Name John Bernard

Examined { on 18th day of October 1915
at Lindsay
Birthplace { City or Town Verton
County Ontario

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

Apparent age 19 years
Trade or occupation Farmer
Height 5 Feet 8 1/2 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 One
Number One
When Vaccinated last October 21st 1915

Date	Result	VACCINATIONS.
21-10-15	Nil	<u>J. M. Culloch</u> M.O.
25-1-16	Good	<u>J. M. Culloch</u> M.O.
		M.O.

(a) Marks indicating congenital peculiarities or previous disease Mark of operation for hernia (umbilical)
(b) Slight defects but not sufficient to cause rejection None

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
5/5/16	Good	<u>J. M. Culloch</u> M.O.
15.5.16	"	<u>J. M. Culloch</u> M.O.
24.5.16	"	<u>J. M. Culloch</u> M.O.
7/8 22-9-16	"	<u>J. M. Culloch</u> M.O.

Enlisted on 21st day of October 1915 at Lindsay

	CORPS.	REG'TL. NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>Overseas Coy</u> <u>45th West Regt.</u>	<u>724551</u>		<u>21. Oct. 1915</u>
Transferred to.....	<u>109 C. E. F.</u> <u>21st Bn</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Barnesfield</u>	<u>23/7/19</u>	<u>Inf a.</u>	<u>J. M. Culloch Capt Come</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.

Duplicate 373 H. Group
"M" WING, C.C.G.

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block Letters) JURKIN JOHN BERNARD
REGIMENT 4th BTN C.M.G.C. RANK PTE No. 724551

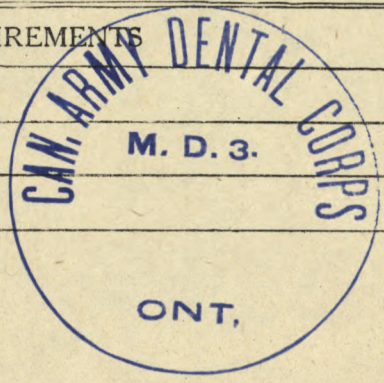
Date of Examination in England 28/6/19 Date of Examination in France _____



1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated

PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS
3. CROWNS
4. DENTURES
 - (a) Full Upper
 - (b) Part Upper
 - (c) Full Lower
 - (d) Part Lower



HAS HE EVER REFUSED DENTAL TREATMENT? No

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

- (a) In ~~Canada~~
- (b) In England Yes
- (c) In ~~France~~

Signature of Dental Officer [Signature]

LIBRARY
M. B. S.
1910

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

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

350M.—5-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps..... *109 Battalion CEF*

Regimental No. *724537* Rank *Private* Name *John Bernard*

Enlisted (a) *Oct 21st 1915* Terms of Service (a) *War of 1914-18* Service reckons from (a) *Oct 21st 1915*

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				
<i>12-7-19</i>	<i>T. O. Smith</i>	<i>Discharged</i>	<i>Kingston</i>	<i>July 23-19</i>	<i>Pt. 2 Order 205</i> <i>for P. F. Healy Major O. C. Dispersal Area Station</i>

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

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

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

350M.—5-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps *109 Battalion C Coy*

Regimental No. *42455* Rank *Pvt* Name *Justinus John Bernard*
C. E. F.

Enlisted (a) *Oct 21 1915* Terms of Service (a) *Duration of War* Service reckons from (a) *Oct 21 1915*

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				
<i>11-10-16</i>	<i>Brampton</i>	<i>arrived in Coy. T.O.S. from 109 Bn. to</i>	<i>Graner</i>	<i>31-7-16</i>	<i>Par #17.1 2810</i>
<i>12-5-19</i>	<i>H. C. M. S. G. P. II Sg.</i>	<i>Proceeded to Coy. from field</i>		<i>11-10-16</i>	<i>T.O.S.</i>
	<i>S.G.S.</i>	<i>in Proceedings to Com</i>		<i>12-5-19</i>	
<i>12-7-19</i>	<i>T.O.S.</i>	<i>W.I. H.O.S. Discharged.</i>	<i>Kingston</i>	<i>July 28-19</i>	<i>P. II Order 205.</i>

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

Casualty Form - Active Service.

Regiment or Corps

Rank Private Surname Jenkins Christian Name John Bernard

Religion Age on Enlistment years months

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

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

Extended { } Re-engaged { } Qualification (b)

or Corps Trade and rate

Occupation Signature of Officer

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
			Embarked ...		
			Disembarked ...		
<u>2-10-18</u>	<u>CC RC</u>	<u>SOS 2 Bn CWB on transfer 4 Bn CWB</u>		<u>2-10-18</u>	<u>1P21767 P04-18</u>
<u>No</u>	<u>No</u>	<u>2nd. 4 Bn CWB</u>		<u>2-10-18</u>	<u>No 1P20-18</u>
<u>5-10-18</u>	<u>OC</u>	<u>Joined Unit</u>	<u>2nd</u>	<u>2-10-18</u>	<u>B213</u>
<u>30-11-18</u>	<u>Obl unit</u>	<u>Granted 14 days leave to W.V.</u>		<u>29-11-18</u>	<u>B213 PTD 145</u>
<u>21/12/18</u>		<u>Returned from leave</u>		<u>19/12/18</u>	<u>B213</u>
		<u>Proceeded to England</u>		<u>9/5/19</u>	<u>20/12/18</u>

A. A. G. Kelton
 Lieut. for Lt Col. A. A. G.
 Canadian Section, G. H. Q. - 3rd, Ech.

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoeing-Smith, &c.
 W. 8635-M2733 2000m 9/17 (35611) C. P. & S., Ltd., Form B/103 E/1807. P.T.O.

Copy Original Not available
SERVICE AND CASUALTY FORM (Part I).

Army Form B.103-I.
 Part I.

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

Nothing to be written in this margin.

Forms/B.103/3
 HWV(R1460)
 3/19
 W10416-P2151
 100,000
 6 28 19

(1)*Substantive rank *Acting rank *(To be entered in pencil to facilitate alteration.) (4) Surname (5) Christian Names (6) Army Form, number of, Attestation } Form or Record of Service paper } (7) Whether of British or of Alien origin (vide A.C.I. 578 of 1918) (8) Date of birth as stated on enlistment (9) (a)	(2) Regiment or Corps	(3) Regtl. No.
<i>Pte</i> <i>Junkin</i> <i>John Bernard</i>	<i>109th Bn C.E.F</i>	<i>724551</i>

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

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

(17) Next of Kin

(18) Demobilizer (f) (Place)

(19) Pivotal-man (f) (Date)

(20) Qualifications (g) or (21) Corps trade and rate

(22) Extended { (23) Re-engaged {

(24) Miscellaneous entries :-

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

(A) Report		(B)	(C)	(D)	(E)	(F)
Date	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer
Arrived in England 31-7-16 per H.M.T 2810						
5-8-16	109th Bn	208	Apptd Prot. L-cpl	Oxney		
6-8-16	✓	" 219	Adm Hoop	Connaught	5-8-16	General
16-8-16	✓	" 229	Dis from Hoop		14-8-16	
18-8-16	✓	" 231	Adm Hoop	Beshott	18-8-16	"
22-10-16	✓	" 296	Dis from Hoop	"	20-8-16	"
5-10-16	✓	" 279	SOS to 20th Batten	"	5-10-16	J.W.C.
11-10-16	20 Bn	" 55	TOS from 109th Bn	Ford	6-10-16	
11-10-16	do	" "	Reverts to Rank of Pl.	"	6-10-16	
8-3-17	"	" 19	Trans to 1st Cav M & Coy	"	16-1-17	
12-3-17	14 C M G Coy	" 28	TOS from 20th Bn	"	17-1-17	
3-4-17	"	Ch-A-243	Adm #1 Cdu Gen. Hoop	"	27-3-17	G.S.W. wall ?
16-4-17	"	" A 252	no 6 Con. Depot	"	7-4-17	" "
19-4-17	"	" 255	To Base Details	"	9-4-17	" "
13-12-17	"	" A 258	Adm #4 Cdu. Hd Amb	"	9-12-17	V.P.G.
22-12-17	"	" A 96	To #2 Cdu. Hd Amb.	"	10-12-17	✓
22-12-17	"	" A 96	Discharged to Duty	"	14-12-17	✓
15-3-18	28th M G Coy	Bl 00 20	Trans. to M G Corps	"	1-3-18	
19-8-18	2 Bn C M G	Ch A 295	Wounded	"	8-8-18	
24-8-18	"	Bl 00 82	Injured accidentally	"	5-8-18	
16-10-18	4 Bn C M G	" 120	TOS from 2 Bn C M G.	"	2-10-18	
16-10-18	2 Bn "	" 104	SOS to 4th Bn C M G.	"	2-10-18	
12-5-19	CC Camp	" 27	TOS from 4 C M G Coy	Witley	10-5-19	
12-5-19	4 C M G Coy	" 39	Proceeded to Eng. Field	Witley	1-5-19	

Nothing to be written in this margin.

Embarcked 12 7 19
 Liverpool
 Disembarked 21.7.19
 Halifax H M T Royal C

S. O. S. ON PROCEEDING TO CANADA.

112. (No. 93) 12/4/19

FOR OFFICER COMMANDING

Shaker

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

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

Casualty Form—Active Service.

M. F. W. 54.
150M. 10-18
H.Q. 1772-30-920.

Unit, Regiment or Corps 10th OVERSEAS BATTALION, C. E. F.

Regimental No. 724551 Rank Private Name Jenkins John Bernard

Enlisted (a) 25-11-15 Terms of Service (a) D. A. W. Service reckons from (a) 21-10-15

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) Farmer

Class 'A'

CERTIFIED CORRECT.
8 OCT 1916

Report Date	From whom received	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.
		Embarked Canada	Halifax	24.7.16.	
		Disembarked England	Liverpool	31.7.16.	
		Appointed <u>2nd Lt. R.F.C.</u>	Osney	5.8.16	Part II Order 218
		Transferred for Overseas Service with <u>20th Batt'n C.F.</u>		5 1916	D.O.Pt. 11 No. 279
3/10/16	C B Dep	Arrd & taken on strength	20th Bn	6/10/16	NR Pt 2 O' 55d/1/10/16
do	do	Left for	do	20/10/16	<u>W 3034</u> CAPTAIN.
27/10/16	20th Bn	Arrived	do	23/10/16	B215 ADJUTANT,
26-1-17	do	Att to 4th C I B M.G. Coy	Fld	17-1-17	B217 BATTALION CAN. INFANTRY.
20-1-17	AG.G.H.Q.	Trsf'd to 14th Mach Gun Coy.	Field.	16-1-17	Auth, CGS, OB/181 d/19-1-17. AG.G.H.Q. A/6864.K.A.8575. Part 11. Ors. 19 d/8-3-17.
20/1/17	A.G.G.H.Q.	Taken on strength of Coy.	Field	17/1/17	Do.Pt-27 D/12/3/17.
27-3-17	1 Par Gen	SW Chest alt.	1 Par Gen	27-3-17	W 3034 (235)
30-3-17	Accid	Wounded to hospital	not stated	24-3-17	B213 Dec 159d/10-4-17
6-4-17	1 Par Gen	SW Chest alt adm	1 Par Gen	7-4-17	W 3034

(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				
9-4-17	6 Con Depot	J. W. Chest adm	6 Con Depot	7-4-17	W3034(254)
9-4-17	OC M.G.	arrived at M. G. Base	Camis	9-4-17	N.R. 9-4-17
3-6-17	MGCBS	left Base for unit	3 iels	3-6-17	N.R. 117
8-6-17	ob unit	joined unit from base	do	6-6-17	B213 No A 1748/20-6-17
9-11-17	do	granted 14 days leave of absence		10-11-17	B213. FR 136
1-12-17	do	Returned from leave		25-11-17	B213 OK 11 Dec 1452 15-17
15-12-17	do	Evac. to Hosp sick		10-12-17	B213
12-12-17	2 S.F.A.	U.D.G.	To H.T.G.	30-12-17	ASG-C2261
16-12-17	"	do	To duty	14-12-17	ASG-L2996
21-12-17	Ob Unit	Returned unit from Hosp		16-12-17	B213
		Absorbed into 3rd Batt'n			
		Can Mach Gun Corps			
18-7-18	Unit	Sentenced 7 days F.P. No. 1 W.O.A.S. absent from		12-7-18	B2069 At 11 Dec 71 d 27-7-18
		parade from 7:45 am until 12 noon 10-7-18			
25-7-18	do	Sentenced 3 days F.P. No. 1 W.O.A.S. appeared on 8-15 parade in a		25-7-18	B2069 At 11 Dec 44 d 5-8-18
		dirty condition			
17-8-18	Unit	Injured (accid)	Field	5-8-18	B213
	ad. 3 coh.	Injured (accid) whilst in the performance		5-8-18	W3428 KDR 1/16841 At 11 Dec 82/18
		of Military duty			
8-8-18	47 Cb Co	Lac W. Kneer (acc)	To 9 A.T.	8-8-18	ASG.H3
8-8-18	47 Gen Hoop	do To Base 24/815902	47 Gen Hoop	8-8-18	W0034
25-8-18	MGCBS Dep	Arr Depot (in 3 Con Depot)	MGCBS Depot	22-8-18	Re R 312
29-8-18	Cb Co	Arr Camp ex MGCBS Depot	Cb Co	29-8-18	Re R 4555



DEPARTMENT OF VETERANS AFFAIRS

STATEMENT OF SERVICE

IN THE

CANADIAN ARMED FORCES

NOT VALID
WITHOUT THE
IMPRINT OF
THE OFFICIAL
STAMP OF THE
DEPARTMENT

Service Rank and/or Number.....724551.....Name.....John Bernard JUNKIN ✓

1. Branch of Service: CANADIAN EXPEDITIONARY FORCE ✓
2. Date and Place of Birth: October 22, 1895 Bobcaygeon, Ont. -
3. Date and Place of Appointment, October 21, 1915 Lindsay, Ont. ✓
Enlistment or Enrolment:
4. Theatres of Service: CANADA - BRITAIN - FRANCE ✓
5. Date and Place of Retirement July 23, 1919 Kingston, Ont. ✓
or Discharge:
6. Type of Retirement or Discharge: Honourable ✓
7. Rank on Retirement or Discharge: Private ✓
8. Medals and Decorations: BRITISH WAR & VICTORY MEDALS ✓
9. Remarks: Nil

Date:.....October 16, 1964.....

/DF

[Signature]
Supervisor, War Service Records Division

NOT
FOR
REPRODUCTION
WITHOUT
THE
WRITTEN
CONSENT
OF
THE
DEPARTMENT

DEPARTMENT OF VETERANS AFFAIRS

STATEMENT OF SERVICE

IN THE

CANADIAN ARMED FORCES

1. Name of member of the Canadian Armed Forces: _____

2. Date and place of birth: _____

3. Position and Place of Assignment: _____

4. Length of service: _____

5. Date and Place of Retirement: _____

6. Type of Retirement or Discharge: _____

7. Work on account of Disability: _____

8. Award and Decoration: _____

9. Remarks: _____

WORK SHEET - DVA.812

Rank or Number 724551 Name John Bernard Jenkins

1. Branch of Service C. E. F.
2. Date and Place of Birth 22 Oct. 1895 Bobcaygeon Ontario, Ont.
3. Date and Place of Enlistment 21 Oct. 1915 Lindsay, Ont.
4. Theatres of Service Canada Britain France.
5. Date and Place of Discharge 23 July 1919 Kingston Ont.
6. Type of Retirement or Discharge Honourable
7. Rank on retirement or Discharge Pte.

8. Remarks:

Date: 3-9-63

Clerk's Initials L. E. B.

ONE UNIT - 1945



Name _____

Branch of Service _____

Date and Place of Birth _____

Date and Place of Discharge _____

Number of Service _____

Date and Place of Inservice _____

Type of Retirement or Discharge _____

Rank or Retirement or Discharge _____

Signature _____

Check's 10/15/45



DEPARTMENT OF VETERANS AFFAIRS

STATEMENT OF SERVICE

IN THE

CANADIAN ARMED FORCES

DEPARTMENT OF
VETERANS AFFAIRS
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IMPRINT OF
SEP 7 1963
THE OFFICIAL
STAMP OF THE
DEPARTMENT
WAR SERVICE RECORDS
OTTAWA - CANADA

Service Rank and/or Number 724551 Name John Bernard JUNKIN

- 1. Branch of Service: CANADIAN EXPEDITIONARY FORCE
- 2. Date and Place of Birth: 22nd October, 1895 Bobcaygeon, Ont.
- 3. Date and Place of Appointment, Enlistment or Enrolment: 21st October, 1915 Lindsay, Ont.
- 4. Theatres of Service: CANADA - BRITAIN - FRANCE
- 5. Date and Place of Retirement or Discharge: 23rd July, 1919 Kingston, Ont.
- 6. Type of Retirement or Discharge: Honourable
- 7. Rank on Retirement or Discharge: Private
- 8. Medals and Decorations: BRITISH WAR & VICTORY MEDALS
- 9. Remarks: Nil

*36 Pembroke St
Toronto, Ont*

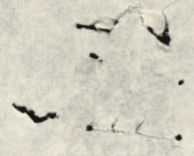
Date: 4th September, 1963.

[Signature]
Supervisor, War Service Records Division

DEPARTMENT OF
VETERANS AFFAIRS
SEP 2 1983
OTTAWA CANADA

STATEMENT OF SERVICE

CANADIAN ARMED FORCES



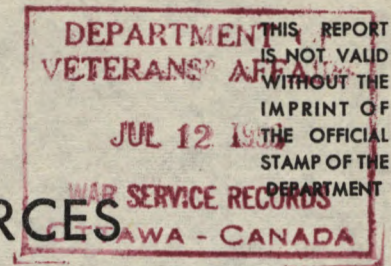
Service Number or Number
Branch of Service
Date and Place of Birth
Theatres of Service
Date and Place of Retirement
Type of Release or Discharge
Rank or Retirement Distinction
Medals and Decorations
Remarks
Name



RECORD OF SERVICE

IN THE

CANADIAN ARMED FORCES



Service Rank and/or Number 724551 Name John Bernard JUNKIN

- 1. Branch of Service: CANADIAN EXPEDITIONARY FORCE *Verulam Ont.*
- 2. Date and Place of Birth: 22nd October, 1895. Verlun, Ontario.
- 3. Date and Place of Appointment, Enlistment or Enrolment: 21st October, 1915. Lindsay, Ontario.
- 4. Unit on Appointment, Enlistment, or Enrolment: 109th Battalion
- 5. Theatres of Service: CANADA - ENGLAND - FRANCE
- 6. Date and Place of Retirement or Discharge: 23rd July, 1919. Kingston, Ontario.
- 7. Reason for Retirement or Discharge: "Demobilization"
- 8. Rank on Retirement or Discharge: Private
- 9. Medals and Decorations: BRITISH WAR & VICTORY MEDALS

Proper Creek, Ont.

10. Remarks: Also served in C.E.F. with 45th Victoria Regiment, from 17th August, 1915 to 2nd October, 1915. Rank - Private. Discharged: "Medically Unfit" Regt. No. 145035.

DESCRIPTION AT TIME OF RETIREMENT OR DISCHARGE

Sex: Male Height: 5 Feet 8½ Inches.
 Eyes: Blue Hair: Brown Complexion: Fair
 Marks or Scars: G.S.W. Chest. Scar right hand. Scar left thumb.

Ottawa, Ont., Canada

July 12th, 19 56.

Director, War Service Records

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge

Class "A" No. 213731

THIS IS TO CERTIFY that No. 724551 (Rank) Pte

Name (in full) Junkin, John Bernard enlisted in
the 1109th Bn

CANADIAN EXPEDITIONARY FORCE at Lindsay on the 21st
day of October 1915

HE served in 4th C.M.G.C. 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:

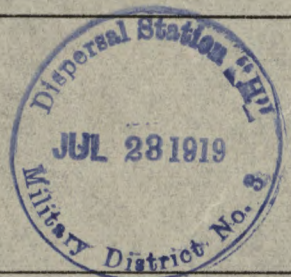
Age 23 7/12 yrs
Height 5 ft 8 1/2 ins
Complexion Fair
Eyes Blue
Hair Brown

Marks or Scars
Scar abdomen
Scar back right hand
Scar left thumb

J. B. Junkin
Signature of Soldier

I. J. Hickey Lt.
Issuing Officer
for O. C. Dispersal Area Station H

Date of Discharge



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.

DISCHARGE CERTIFICATE



THIS IS TO CERTIFY that No. _____ (Rank) _____

Name (in full) _____

the _____

CANADIAN EXPEDITIONARY FORCE at _____ on the _____ day of _____ 19____

He served in _____

and is now discharged from the service by reason of _____ Demobilization _____
 Medical Discharge _____

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

Age _____	Height _____
Complexion _____	Eyes _____
Hair _____	Build _____
Signature of Soldier _____	Signature of Officer _____
Date of Discharge _____	Date _____

Rank _____

N.B. - If no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unopened envelope to the Secretary, Military Council, Ottawa, Canada.

no card
145035

MEDICAL HISTORY SHEET.

Surname Jurkin Christian Name John Bernard

Examined { on 17th day of August 1915
at Lindsay

Birthplace { City or Town Bobcaygeon
County Ontario

Apparent age 21 years

Trade or occupation Farmer

Height 5 Feet 8 1/2 Inches.

Weight 139 Lbs.

Chest measurement { Minimum 33 inches.
Maximum expansion 38 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right None Left One
Number One

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection
Two
Top of fingers & thumb
of left hand injured

Enlisted on 17th day of August 1915 at Lindsay

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>Overseas Contgt.</u>			
Transferred to.. ..	<u>45th Victoria Regt.</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.

CASE HISTORY SHEET.

Christie St. Hospital. Toronto Station.
No. 313 Rank. Pte. Name. JUNKIN Age. 25
Unit. R. C. D. Completed years of service ^{Where and how long} C. E. F. 4 years.
R. C. D. 2 1/2 yrs.
Date of admission. 16-5-22 Date of discharge.
Diagnosis. Rt. Inguinal Hernia Place of origin. Toronto

CONDITION ON ADMISSION AND PROGRESS OF CASE

Physical Exam. of Rt. Inguinal Region shows definite Rt. Inguinal Hernia with characteristic signs and symptoms. J. D. M.
17-5-22. Urinalysis negative.
18-5-22. Operation. Rt. Inguinal herniotomy through the usual incision. A definite sac was identified and dealt with in the usual manner. The operation was completed by suturing Poupart's Ligament to the compound tendon under the cord. A vissection of the Pampiniform Plexus of veins was performed at the same time. J. D. Mills.
20-5-22. Post Operative period has been uneventful to date.
6-6-22. Temp elevated this A.M. Acute Parotitis (Left side) Transferred to Isolation.
27-6-22. - Returned from Isolation with the following notes:-
"Made uneventful recovery. No complications. Now free from infectious disease. Return to ward." (sgd) H. A. Elliot.
10-7-22. Condition on Discharge.
Rt. Inguinal Region shows a well healed herniotomy scar, with no evidence of a recurrence of his Hernia. Recommend discharge from hospital to six months light duty.

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT

(Especially any specific or special form)

CONDITION ON DISCHARGE

(and disposal made of case.)

Date. 6-7-22

Medical Officer i/D case Mills.

HISTORY SHEET

Station

Number

Date

Name

Age

Sex

Color

Height

Weight

Build

Complexion

Hair

Eyes

Teeth

Speech

Disposition

Education

Occupation

Religion

Marital Status

Children

Parents

Family

History

Present

Future

Remarks

Signature

Date

Place

Signature

Date

Place

Signature

Date

Place

Signature

Date

Place

Signature

Date

Place

Signature

Date

Place

Signature

Date

Place

Signature

Date

Place

Signature

Date

Place

Signature

Date

Place

Signature

Date

Place

Signature

Date

MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom *Mrs. W. B. Junkin*
 Address *Nogies Creek.*
Ont.

By Whom Assigned *Junkin, J. B.*
 Regtl. No. *724551* (~~*724551*~~)
 Rank *Pte.*
 Corps *109 Battl.*

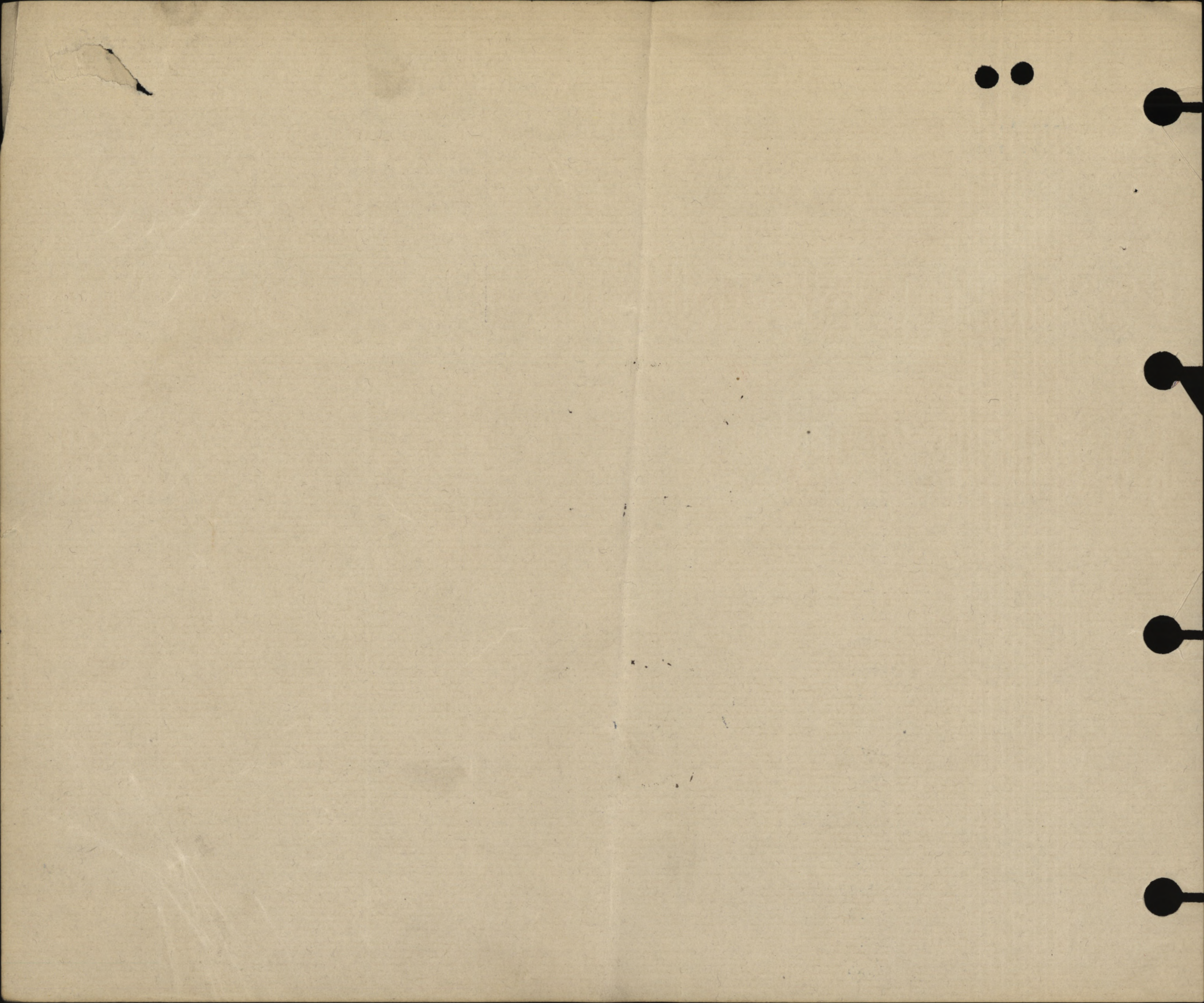
Rate *15⁰⁰ per m.*

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				





MILITIA AND DEFENCE
ASSIGNED PAY

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

Sheet No. 2. Mrs. W. B. Junkin.

OVERSEAS CONTINGENTS

Name of Soldier Junkin, J B
Pl. 109 Batt.

L. L. Job 310.—Req. 6574.

PAYMENTS. # 724551.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.		<u>215479</u>	<u>15</u>	
Sept.		<u>416986</u>	<u>15</u>	
Oct.		<u>921449</u>	<u>15</u>	
Nov.		<u>m 26208</u>	<u>15</u>	
Dec.		<u>237841</u>	<u>15</u>	
Jan.	1917	<u>7k 39259</u>	<u>15</u>	
Feb.		<u>E 45704</u>	<u>15</u>	
March		<u>y 50881</u>	<u>15</u>	
April		<u>v 2724</u>	<u>15</u>	
May		<u>2 9313</u>	<u>15</u>	
June		<u>216771</u>	<u>15</u>	<u>On</u>
July		<u>V 22858</u>	<u>15</u>	<u>B.</u>
Aug.		<u>2 29682</u>	<u>15</u>	
Sept.		<u>U 35831</u>	<u>15</u>	
Oct.		<u>F 42826</u>	<u>15</u>	
Nov.		<u>K 50261</u>	<u>15</u>	
Dec.		<u>M 56622</u>	<u>15</u>	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

\$15⁰⁰

AUG 1 1916

15 R
15 W

B.

2

255⁰⁰

255⁰⁰

mcc

ay.

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.				

MARRIED OR SINGLE *Single*
 PLACE OF BIRTH *Verlun Ont*
 NAME AND ADDRESS OF NEXT OF KIN *Elizabeth Junkin
 Nogies Creek Ont Can.*
 RELATIONSHIP OF NEXT OF KIN *Mother*
 NAME AND ADDRESS OF NEXT OF KIN
 RELATIONSHIP OF NEXT OF KIN
 SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)
 PAYABLE TO
 RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c. ✓

PARTICULARS	EFFECTIVE DATE	AUTHORITY
<i>Promotion 2nd Lt</i>	<i>5/8/16</i>	<i>80218</i>
<i>Reverts to Rank</i>	<i>6/10/16</i>	<i>B.O. 55-1/10/16</i>

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL
---------------	-----------------	----------	------------------

REG'L. No. *724551* RANK *Pte* NAME *Junkin John Bernard*
 IF IN PERM. CORPS; WHAT UNIT *109th Bn* TRANSFERRED TO *20th Bn* DATE *6/10/16* AUTHORITY *80279*
 PERMANENT FORCE ALLOWANCES TRANSFERRED TO *14th Inf Co* DATE *11/3/17* AUTHORITY *8019-8/3/17*
 PLACE OF ATTESTATION *Lindsay Ont* TRANSFERRED TO *2nd* DATE AUTHORITY
 DATE OF ATTESTATION *Oct 21st 1915* TRANSFERRED TO DATE AUTHORITY
 ASSIGNED PAY MONTHLY \$ *15.00* DATE EFFECTIVE *Aug 1st 1916*
 PAYABLE TO *Mrs W B Junkin Nogies Creek Ont* RELATIONSHIP *Mother*
 ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE
 PAYABLE TO RELATIONSHIP
 STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON
 DISCHARGE DATE AND PLACE REASON AND AUTHORITY
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)
 ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

Checked

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS		
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1	2	3	4	1	2	3	4				CREDIT	DEBIT					
			\$	c.			\$	c.			\$	c.																				No.	DATE
<i>July 31</i>	<i>31</i>	<i>1.00</i>	<i>31</i>									<i>14.70</i>	<i>14.10</i>																		<i>80218 Prom 2nd Lt</i>		
<i>Aug 31</i>	<i>27</i>	<i>5</i>	<i>135</i>	<i>31.10</i>	<i>3.10</i>							<i>35.45</i>									<i>15</i>	<i>6</i>	<i>21</i>	<i>28.53</i>							<i>80219 General 5/8/16</i>		
<i>Sept 30</i>	<i>105</i>		<i>3150</i>		<i>3</i>							<i>34.50</i>	<i>54</i>	<i>31/10/16</i>							<i>15</i>			<i>34.47</i>	<i>28.58</i>						<i>80229 Sick General 1/5/16</i>		
<i>Oct 25</i>			<i>5.25</i>		<i>50</i>							<i>5.35</i>									<i>15</i>			<i>15</i>	<i>19.33</i>						<i>80231 General 18/8/16</i>		
<i>6/31</i>	<i>26</i>	<i>1.</i>	<i>26</i>	<i>26.10</i>	<i>2.60</i>							<i>28.60</i>											<i>180</i>	<i>15.89</i>	<i>32.04</i>						<i>80279 Trans 20th Bn 5/10/16</i>		
<i>Nov 30</i>	<i>30</i>		<i>30</i>	<i>30.10</i>	<i>3</i>							<i>33.00</i>	<i>322</i>	<i>5/10/16</i>							<i>15</i>			<i>17.61</i>	<i>49.43</i>	<i>1.50</i>					<i>Ven chgs 3 days @ 60¢ B. 0296</i>		
<i>Dec 31</i>	<i>31</i>		<i>31</i>	<i>31.10</i>	<i>3.10</i>							<i>34.10</i>	<i>1402</i>	<i>30/1/16</i>							<i>15</i>			<i>28.98</i>	<i>52.55</i>						<i>10 days General @ 60¢ 6.00</i>		
<i>1917</i>			<i>15.30</i>		<i>15.30</i>																											<i>10 days General @ 60¢ 6.00</i>	
<i>Jan 31</i>	<i>31</i>	<i>1.10</i>	<i>34.10</i>									<i>34.10</i>	<i>1380</i>	<i>22/1/16</i>							<i>15</i>			<i>22.85</i>	<i>63.80</i>						<i>14th Bn 2nd Lt</i>		
<i>Feb 28</i>	<i>17</i>	<i>50</i>	<i>30.80</i>									<i>30.80</i>									<i>15</i>			<i>15</i>	<i>79.60</i>						<i>I.O.R. A. 1169 2/4/16</i>		
<i>Mar 10</i>	<i>10</i>		<i>11</i>									<i>11.50</i>									<i>15</i>			<i>15</i>	<i>75.60</i>						<i>Trans 1st Lt 10th Bn 10/19/17</i>		
<i>Apr 30</i>	<i>30</i>		<i>33</i>									<i>33</i>									<i>15</i>			<i>15</i>	<i>106.24</i>	<i>1.50</i>							
			<i>303.40</i>									<i>14.10</i>	<i>317.50</i>								<i>33.98</i>	<i>9.91</i>	<i>24.57</i>	<i>135</i>	<i>7.80</i>	<i>211.76</i>							
			<i>303.10</i>									<i>14.10</i>	<i>317.50</i>								<i>33.98</i>	<i>9.91</i>	<i>24.57</i>	<i>135</i>	<i>7.80</i>	<i>211.76</i>							

ASSIGNED PAY. ENGLAND OR CANADA. SEPARATION ALLOWANCE. ENGLAND OR CANADA.

NAME:- JUNKIN John Bernard

EFFECTIVE DATE:- 1/8/16

EFFECTIVE DATE:-

NUMBER:- 724551

AMOUNT:- 15⁰⁰

AMOUNT:-

PARTICULARS OF RANK OR APPOINTMENT

NAME, ADDRESS, RELATIONSHIP & AUTHORITY

Mrs W. B. Junkin
Stogies Creek, Ont. (mother)

Stopped 1/2/19
1.7.19

AUTHORITY DATE EFFECTIVE RANK OR APPOINTMENT

Private

UNIT AND TRANSFERS

ORIGINAL UNIT:- 10th Batt.

DATE ACCOUNT FIRST OPENED:- 1st Aug: 1916

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

2nd Bde G.P.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS

Table with columns: DATE OF PAYMENT, NUMBER OF A.R., UNIT PAID BY, AMOUNT, DATE OF PAYMENT, NUMBER OF A.R., UNIT PAID BY, AMOUNT. Includes entries for 27.4.19, 28.4.19, and 12.5.19.

DAILY RATES OF PAY AND ALLOWANCES

Table with columns: AUTHORITY, PAY, F.A., P.F.A., SUBS'CE ALL'CE. Shows a rate of 10.

Cancelled 31/3/19 with CAM note 1/3/19. Ledger Bal. 63.92

PARTICULARS OF RENDERING NON-EFFECTIVE

Main ledger table with columns: MONTH, PARTICULARS, CR 1, CR 2, DR 1, DR 2, DR 3, DR 4, BALANCE, DEBITED, SEPARATION. Includes monthly entries from March 1918 to October 1918.

COMPILED BY H. Thorne
CHECKED BY W. A. Siskovich

NUMBER

724551

RANK

NAME

JUNKIN JB

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									109.91		
Nov	P.P.	33 -		lo. a. p				15.			
Dec	"	34/10		AR 1167 H.M.G. 7-11-18	3.73						
Jan 19	"	34/10		AR 73142 - C.P. 29-11-18	73.00						
				L.C. 123 - H.M.G. 23-11-18	24.33						
				AR 1822 " 30-11-18	7.46						
				" 1747 " 21-11-18	13.06						
				" 75478 - C.P. 3-12-18	7.30						
				" 81783 " 12-12-18	4.87						
				AR & Dec 6 A.P.							
				Cap.	133.95						
Feb	P.P.	10/20		" 21552 - H.M.G. 6/1/19	3.43						
Mar	"	3080		" 2272 " 18/1/19	3.43						
		34/10		" 2368 " 29/1/19	11.19						
				Cap.							
				" 2412 " 5/2/19	3.43						
				Cap.							
				" 2518 - H.M.G. 17/2/19	3.43						
				" 2617 " 5/3/19	3.65						
				Cap.	29.46						
				2725 - C.M.G. 27/3/19	3.65						
Apr		33		31 - 7/4/19	3.49						
May		34/10		165 10 8/8 15/4/19	3.49						
				Cap Apr May	30						
				271 10 6/6 27/4/19	3.49						
				291 - 27/4/19	8.72						
				3769 bbb 12/5/19	53.53						
				Cap	76.37						
June		67 10									
		33		Cap							
				AR 3931 26/5/19 ccc	4.87						
				" 2681 19/6/19 Willy	4.87						
				Cap	9.74						
Sept		33 -		AR 626 27/7/19 Willy	9.73						
				Cap	9.73						

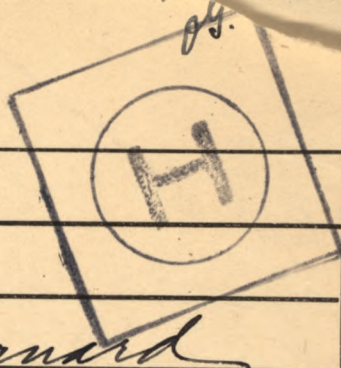
Balance 12/1/19 that 4566 L. 11/16

WAR Service Badge
Class "A" No. 213731

SHORT FORM. 42-2-35

PROCEEDINGS ON DISCHARGE.

(Demobilization.)



P

1. No. 724551

2. Rank. Pte

3. Name. Jenkin, John Bernard

4. Unit. 4th Co. M.G.B.

5. Date of Discharge July 23/19 | Place Kingston on

6. Reason for Discharge Demob. DEMOBILIZATION

7. Authority PD 1894

8. Proposed Residence after Discharge Nozies Creek 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. 839

J. D. Jenkin

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

Date JUL 28 1919



Signature

J. F. Hickey Lt. Captain

for O. C. Dispersal Area Station H (O. C. Discharging Unit.)

82

E. R. J.

SHORT FORM
PROCEEDINGS ON DISCHARGE
(Demobilization)

1	No.	12345
2	Rank	Private
3	Name	John A. Smith
4	Unit	1st Infantry Division
5	Date of Discharge	July 28, 1919
6	Place	San Francisco, California
7	Reason for Discharge	Demobilization
8	Proposed Residence after Discharge	San Francisco, California
9	CERTIFICATE TO BE SIGNED BY SOLDIER I hereby acknowledge that at the undated place and date I received my discharge Certificate M. F. [Signature]	
10	CONFIRMATION The discharge of the above named man is hereby confirmed. Place: [Signature] Date: [Signature] [Circular Stamp: District No. 9, JUL 28 1919, Demobilization Division, War Dept.] [Signature] Mr. O. C. [Signature] [Signature]	

LIST OF DISCHARGE DOCUMENTS

1. Certificate of Discharge, Medical Form W-133
 2. Certificate of Discharge, Medical Form W-133 or A.F.B. 123
 3. Certificate of Discharge, Medical Form W-51 or A.F.B. 110
 4. Certificate of Discharge, Medical Form W-44
 5. Certificate of Discharge, Medical Form B-313 or A.F.B. 113
 6. Certificate of Discharge, Medical Form B-313 or A.F.B. 113
 7. Certificate of Discharge, Medical Form B-313 or A.F.B. 113
 8. Certificate of Discharge, Medical Form B-313 or A.F.B. 113
 9. Certificate of Discharge, Medical Form B-313 or A.F.B. 113
 10. Certificate of Discharge, Medical Form B-313 or A.F.B. 113

11. Certificate of Discharge, Medical Form B-313 or A.F.B. 113
 12. Certificate of Discharge, Medical Form B-313 or A.F.B. 113
 13. Certificate of Discharge, Medical Form B-313 or A.F.B. 113
 14. Certificate of Discharge, Medical Form B-313 or A.F.B. 113
 15. Certificate of Discharge, Medical Form B-313 or A.F.B. 113
 16. Certificate of Discharge, Medical Form B-313 or A.F.B. 113
 17. Certificate of Discharge, Medical Form B-313 or A.F.B. 113
 18. Certificate of Discharge, Medical Form B-313 or A.F.B. 113
 19. Certificate of Discharge, Medical Form B-313 or A.F.B. 113
 20. Certificate of Discharge, Medical Form B-313 or A.F.B. 113

21. Certificate of Discharge, Medical Form B-313 or A.F.B. 113
 22. Certificate of Discharge, Medical Form B-313 or A.F.B. 113
 23. Certificate of Discharge, Medical Form B-313 or A.F.B. 113
 24. Certificate of Discharge, Medical Form B-313 or A.F.B. 113
 25. Certificate of Discharge, Medical Form B-313 or A.F.B. 113
 26. Certificate of Discharge, Medical Form B-313 or A.F.B. 113
 27. Certificate of Discharge, Medical Form B-313 or A.F.B. 113
 28. Certificate of Discharge, Medical Form B-313 or A.F.B. 113
 29. Certificate of Discharge, Medical Form B-313 or A.F.B. 113
 30. Certificate of Discharge, Medical Form B-313 or A.F.B. 113

LIST OF DISCHARGE DOCUMENTS.

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

1. ~~Triplicate~~ Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
(Enclosed in special envelope (260M))
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851). *& dup*
13. Pay Certificate (V.B. 61).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sanitary Documents

Group..... **B**

Checked by No..... **17**

Date..... **11/7/19**

C.M.P.

A.C. Rank **JUNKIN, John Bernard.** ✓ Reg'l No. **24551** ✓

Unit **109th. Bn.** If in perm. Corps, }
 What Unit? } Married or Single **Single** ✓

Place and Date of Enlistment **Lindsay, Oct. 21st. 1915.** Place of Birth **Verlun. Ontario.** ✓

Name and Address, Next-of-Kin **Elizabeth Junkin.** ✓
Nogies Creek, Ontario. ✓ Relationship **Mother.** ✓

Assigned Pay Monthly \$ Payable to Relationship **16139**
1-12
2-33

Separation Allowance \$ Payable to Relationship

Discharge, Date and Place Reason Character

H. W. & V., Ltd.—7165-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
Date.	From whom received.				
5		Arrived in England per H. M. T. 2810		31-7-16	
5.8.16	O.C. 109 th	App'd Prov. L. Col	Weney		Pt. II D.O. 218
6.8.16	✓	Admitted to Hoopl	Connought	5.8.16	Pt. II D.O. 219 ^{C. 219} Venerable
16.8.16	✓	Disch'd from Hoopl	✓	14.8.16	Pt. II D.O. 229 ^{C. 229} C. L. 6
18.8.16	✓	Admitted to Hoopl	Bramshott	18.8.16	Pt. II D.O. 231 ^{C. 231} Venerable
22-10-16	✓	Discharged from Hoopl	✓	20-8-16	" II O296 "
5.10.16	✓	S.O.S. to 20 th Batta	Bramshott	5.10.16	Pt. II D.O. 279 ^{C. 279} W.C.
11-10-16	20 th Bin	T.O.S. from 109 th Bin	Field	6-10-16	" II 55.
do.	do.	Reverts to rank of Private	do	do.	do.
8-3-17	"	Transf. to 14 th Gen. M. G. Coy.	"	16-1-17	Pt. II O ⁿ 19

A.F.B. 108 CHICAGO
 11 6 1915

75
724551

Jenkins 803

Report.	Record of promotions, reductions, transfers, casualties, etc., during active service.	Place.	Date.	REMARKS
Date.	From whom received.	The authority to be quoted in each case.		Taken from Official Document
12.5-17	14 th M G Co	Y. O. S. from 20 th Batta	Field	17-1-17 P ^{ro} 28
3.4.17	"	Adm No 1 Gen Hosp	Etaples	27.3.17 LA 243 95w
16.4.17	"	No 6 Gen Depot	"	7.4.17 - A 252 wall
19.4.17	"	Base Details	"	9.4.17 - A 255
13.12.17	✓	Adm. No 4 Gen F. Amb.	Field	9.12.17 - 88. NO 9
22.12.17	✓	To 2 Can. Fd. Amb.	Pt: ✓	10.12.17 - A 96 ✓
22.12.17	✓	Discharged to Duty	✓	14.12.17 - A 96 ✓
15.3.18	2 nd Div M G Co	Tfd to M G Corps	✓	1.3.18 P ^{ro} 80
		On Strength 2 nd Bn. CM G Co. 19-3-1918		
19-8-18	2 nd Bn M G Co	Wounded	do	8-8-18 GLA 295
24-8-18	do	Injured accidentally	do	5-8-18 P ^{ro} 82
10-18	4 th Bn M G Co	To S from 2 nd Bn M G Co	Pt	Died 2-10-18 P ^{ro} 170 2 nd M G Co 104-16-10-18
12-5-19	CC Camp	To S from 4 th CM G Co	Pt	Witley 10-5-19 - 27
12-5-19	4 th CM G Co	Proc to Eng	✓	Field 1-5-19 - 39
10-6-19	CC	Sos. of CM G Co	✓	Witley 6-6-19 - 46
506-H-18 d 12.7.19				
27.6.19	3 rd M G Co	To S Having reported	Pt	Witley 25.6.19 P ^{ro} 178
2.7.19	Records	Sos. Transfer to M Wing	✓	27.6.19 - 282. 4 th M Wing 79.
9.10.19	Records	Sos to Canada	London	12/7/19 404

54432

Junkin, J.B. Pte. 724551 20th Batt'n, C.E.F.

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

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

- 20 -

Perforated sheet for Will from Pay Book of Reg.

No. 724551

Name John Bernard Junkin

Unit C. Co 109th Bn Can Inf.

Military Will.

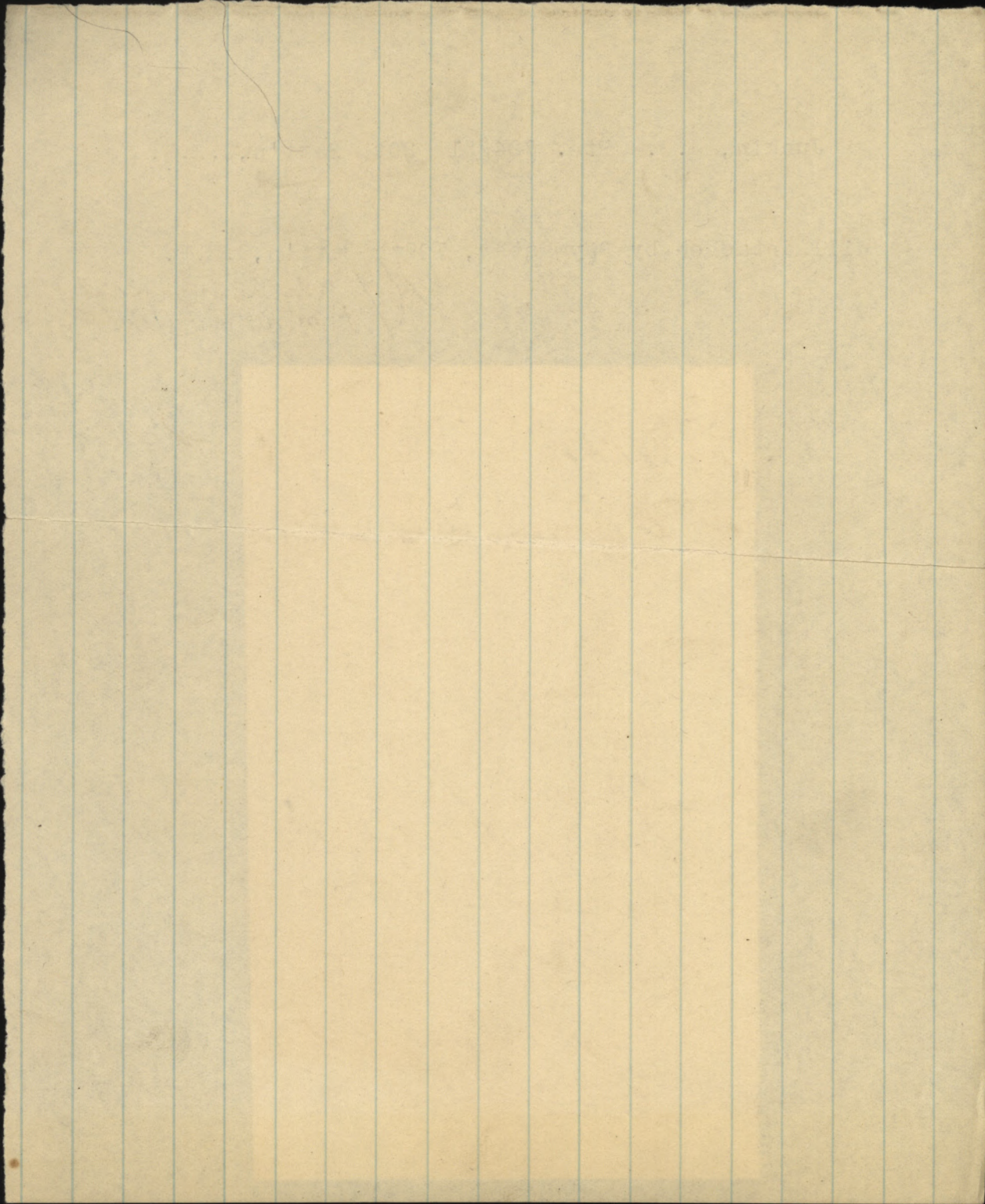
I give and bequeath all
my personal belongings
and effects to my mother
Mrs Elizabeth Junkin;
No 111 Cerub, Peterboro Co
Ontario, Canada

Witnes
E. J. Hall

Signature J. B. Junkin

Rank and Regt. Pte 109th Bn Can Inf

Date October 3/1916



On the afternoon of the 5th day
of Aug. 1918 about 4.30 p.m.
I was washing my mess tin
behind my billet Pte Junkin
was pumping ~~pumping~~ water
a few yards from me. I heard
the sound of glass breaking and
on turning around seen that
the pump handle had gone
through the window and Pte
Junkin's hand badly cut.
There is no doubt in my mind
but that the wind blew the
window open and that it
happened purely accidental.

Cpl. D McLean.

#198939

Signed in presence of

W. H. H. Capt.

2nd Bu. C. M. S. C.

This space to be for numbers.

12-2-65
COK

Proceedings on Discharge.

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

No. <i>145035</i>	
Rank <i>Private</i>	
Name <i>John Bernard Jenkins</i> <small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company) <i>77th, OVERSEAS BATTALION, C. F. E.</i>	
Date of Discharge <i>Oct 2 - 1915.</i>	
Place of Discharge <i>ROCKCLIFFE CAMP</i>	
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age..... <i>21</i> years..... <i>10</i> months.	Descriptive Marks. <i>Top of thumb & two fingers on left hand injured.</i>
Height..... <i>5</i> feet..... <i>8 1/2</i> inches.	
Complexion <i>Fair</i>	
Eyes <i>Blue</i>	
Hair <i>Light Brown</i>	
Trade <i>Drummer</i>	
Intended place of residence. <small>(To be given as fully as practicable.)</small>	
2. The above-named man is discharged in consequence of <i>Having been found medically unfit for further service. Discharge authorized 31-26-5-80-6 of 24-9-15</i>	
<small>N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.</small>	
<small>To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.</small>	3. Conduct and character while in the service have been, according to the records, etc. <i>Good</i>
	<small>N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company.</small>
<small>To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.</small>	4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.) <i>None</i>

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

None

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

6. Medals and Decorations.....

None.

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

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

(Place) Rockcliffe Camp.

D. R. Sturt Lt Col

(Date) Oct 2/1915

Commanding 77th Overseas Bn C. E. J.

8. Certificate to be signed by the Soldier on Discharge.

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

(Place) Rockcliffe Camp Bernard J. J. J. (Signature of Soldier)

(Date) Oct 2/1915 D. R. Sturt Major (Signature of Witness)

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

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

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

..... (Signature of Soldier.)

10. Statement of Service.

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

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

11. Confirmation of Discharge.

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

(Place) Rockcliffe Camp

(Signature) D. R. Sturt Lt Col.

(Date) Oct 2/1915

Comd 77th Bn

Reservations referred to at Para. 8.

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

List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia Form B. 263.</p> <p>Squadron } Battery } Conduct Sheet, " B. 263a. Company }</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia Form B. 313.</p> <p>Medical Report for Invalid* " B. 227.</p> <p>Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.</p> <p>*Only if discharged "Medically unfit."</p>	<p>Attestation Paper, Militia Form B. 235.</p> <p>Proceedings on Discharge " B. 218.</p> <hr/> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p style="padding-left: 40px;">(a) Proceedings on Discharge.</p> <p style="padding-left: 40px;">(b) Attestation.</p> <p style="padding-left: 40px;">(c) Medical History Sheet (in the event of such having been prepared).</p>
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N.B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

J-4398 Aug 1/16

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

15.			
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PARTICULARS OF SEPARATION ALLOWANCE

No. 724551
 Rank *Pte* Promoted Reverted Discharge
 Soldier's Name *J. B. Jenkins*
 Battalion *109 Battr*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *Mr. W. B. Jenkins*
 Address *Hogies Creek Cont*
 Change of Address
 1
 2
 3
 4

109 Battr

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917					
Dec 31 1917			255	255	
Jan 1918	M 70295		15	15	<i>D</i>
Feb	L 71052		15	15	
Mar	K 90720		15	15	
Apr	J 16103		15	15	
May	F 12089		15	15	
June	F 14134		15	15	
July	R 31719		15	15	
Aug	H 36974		15	15	
WB. Sept	J 46222		15	15	
Oct	N 50488		15	15	<i>o</i>
Nov	B 55108		15	15	<i>o</i>
Dec	Z 67286		15	15	<i>o</i>
Jan	K 71038		15	15	<i>o</i>
Feb	G 79822		15	15	
Mar	G 86217		15	15	
Apr	A 1067		15	15	
May	W 4778		15	15	<i>M</i>
June	R 10678		15	15	<i>M</i>
July	Z 12508		15	15	
			540	540	

M. F. W. 128
400M-6-17-1772-88-141
L. L. 22320-M. & D. 7983.

A/c Closed 31.7.19.
 Ret'd per *Royal George*
 Date 22.7.19
 Clerk *Ed Johnson* M. 160105171

