ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?.....
1a. What are your Christian names?.....
1b. What is your present address?.....
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?.....
4a. What is the relationship 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 and inoculated?.....
9. Do you now belong to the Active Militia?.....
10. Have you ever served in any Military Force?.. If so, state particulars of former Service.
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?

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I,....., 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.

.....(Signature of Recruit)

Date.....191 . .....(Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I,....., 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.

.....(Signature of Recruit)

Date.....191 . .....(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.....this.....day of.....191 .

.....(Signature of Justice)

M. F. W. 23.
200 M.—11-15.
H. Q. 1772-39-841.

Description of John Elsworth Finlay on Enlistment.

Apparent Age 33 years 2 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 6 3/4 ins.

Chest measurement:
- Girth when fully expanded 39 3/4 ins.
- Range of expansion 3 1/4 ins.

Complexion Fair

Eyes Hazel

Hair Dark Brown

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

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

Scar just below right knee on outside.

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 April 29th 1916.

Place Haliburton

Capt.
Medical Officer.
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.

.....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.....191 .

Unit 109th. O/S. Bn., C.E.F. Rank Lieut. Name J.E. Finlay

OFFICERS' DECLARATION PAPER

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE ANSWERED BY OFFICER

(ANSWERS)

1. (a) What is your Surname? Finlay

   (b) What are your Christian Names? John Elsworth.

2. (a) Where were you born? (State place and country) Coboconk, Ont. Can.

   (b) What is your present address? Tory Hill, Ont.

3. What is the date of your birth? March 25th., 1883

4. What is (a) the name of your next-of-kin? Mrs. Harriett Finlay

   (b) the address of your next-of-kin? Tory Hill, Ont.

   (c) the relationship of your next-of-kin? Mother.

5. What is your profession or occupation? Engineer.

6. What is your religion? Methodist.

7. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes.

8. To what Unit of the Active Militia do you belong? 45th. Victoria Regiment.

9. State particulars of any former Military Service Five Years, 45th. Victoria Regt.

10. Are you willing to serve in the

    CANADIAN OVER-SEAS EXPEDITIONARY FORCE? Yes.

The undersigned hereby declares that the above answers made by him to the above questions are true.

John Ellsworth Finlay (Signature of Officer.)

CERTIFICATE OF MEDICAL EXAMINATION

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider him* fit for the CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Date April 29th 1916

Place Haliburton

*Insert here "fit" or "unfit"

Capt. Medical Officer

109th Overseas Battalion, C.E.F.

Medical Officer.

M. F. W. 51

40m.—12-15.

H. Q. 1772-39-917.

Unit ..... *Rank* Lieut. *Name* John Elsworth Finley

OFFICERS' DECLARATION PAPER

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE ANSWERED BY OFFICER

[ANSWERS]

1. (*a*) What is your Surname ? Finley
   (*b*) What are your Christian Names ? John Elsworth
2. (*a*) Where were you born ? (State place and country) Coboconk, Ont.
   (*b*) What is your present address ? Tory Hill, Ont.
3. What is the date of your birth ? March 25th, 1883.
4. What is (*a*) the name of your next-of-kin ? Harriet Finlay
   (*b*) the address of your next-of-kin ? Port Perry, Ont.
   (*c*) the relationship of your next-of-kin ? Mother.
5. What is your profession or occupation ? Engineer.
6. What is your religion ? Methodist.
7. Are you willing to be vaccinated or re-vaccinated and inoculated ? Yes.
8. To what Unit of the Active Militia do you belong ? 45th Victoria Regt.
9. State particulars of any former Military Service .....
10. Are you willing to serve in the

CANADIAN OVER-SEAS EXPEDITIONARY FORCE ? Yes.

The undersigned hereby declares that the above answers made by him to the above questions are true.

John. E Elsworth Finlay (*Signature of Officer.*)

Taken on strength (place) Barriefield Camp, Ont.

(date) 14/8/16.

W. J. Thom Capt.
(*Signature of Commanding Officer.*)
O. C. Special Service Battalion, M. D. No. 3.

CERTIFICATE OF MEDICAL EXAMINATION

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider him* fit for the CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Date Aug 18 1916

Place Barriefield R R Boadhegan
Medical Officer.
Capt A.M.C.

*Insert here "fit" or "unfit

M. F. W. 51
100m.—4-16.
H. Q. 1772. 39-917

REGIMENTAL DOCUME[redacted]

NAME FINLAY JOHN ELLSWORTH REGT. NO. Mapl[redacted]C.R.V. H. Q. FILE NO. 332-45-2

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
4B	ATTESTATION PAPER (M.F.W. 23, 133, or 51)	Rt 4-10-20	~~Personal Services Militia HQ Ottawa~~	~~11-4-19~~	~~Form~~ 06860	DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)		MMC 2-5-19			Category H
	TRAINING HISTORY SHEET (M.F.W. 113)	Feb 8				
	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)	30 9	25			
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
4	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)				M	DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob
	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)		Rt 26-3-20			
	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)		H			DESERTION
	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	MFW 2591					
1	Form C.D.3.					
1	P.880		S.a. & a.o.	11/4/19	Misc-44(mtl)	
3	MFW-67					
2	Misc					
1	D.M.S. 1375					
1	AFA.45					
2	Officers R.L					
	A & A card					
1	D-19					
	Ref S.S Empress of Britain d/23-3-19					

W 2589
100M-11-18
4172-39-1377

068860

Capt	Finlay	John Ellsworth
I.D. number **No. d'identification**	**Surname** **Nom de famille**	**Given names** **Prénoms**

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU PERSONNEL

Location
Lieu 3088

ARC-1048 (rev. 91)

11-E-230

To be made out in duplicate.

H.Q. 54-21-20-53

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

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

---

(1) Name of Overseas Unit which Soldier joins 109th OVERSEAS BATTALION, C. E. F.

(2) Regimental Number

(3) Full Name of Soldier John Ellsworth Finlay Lieut.

(4) Place of Birth Coboconk, Victoria Co. Ontario.

(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? no.

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

300M.—5-16.
1772-39-954.

(SEE OTHER SIDE.)

SEP 1 0 1916

(9) Is your Father alive? No.

If so, state name and address

(10) Is your Mother alive? yes

If so, state name and address Harriet Finlay.
Port Perry, Ont.

(11) If your Mother is a widow yes.

Are you her sole support, or not? yes

(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.

$30 per month. I am the only one of the family single.

(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? Canadian Order of Oddfellows & Great West Life Ass. Coy.

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 13/7/16

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

CONFIDENTIAL. 110253 Army Form A. 4

PROCEEDINGS OF A MEDICAL BOARD

assembled at SHORNCLIFFE (18, Westbourne Gardens, Folkestone.) on Oct 25/16

by order of A. D. M. S. Canadian

for the purpose of examining and reporting upon the present state of health of

(Rank and Name) Lieut J. E. Finlay (Corps) 109th Bn att. C.M.S.

Age 33 Service 9/12 Disability Slight pyorrhoea

Date of commencement of leave granted for present disability not applicable

Date on which placed on half-pay for present disability not applicable

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that this officer has a slight condition of what seems to be pyorrhoea two of his lower front teeth are slightly loose. He was turned down by his M.O. two days ago & was told the dentist would not work for them, as it was out of his area. Should have treatment for this condition

Can. Military School.

The opinion of the Board upon the questions herein is as follows:—

(1.) *a.* Is the officer fit for "General Service"? no

b. If not so fit, how long is he likely to be unfit? 3 weeks

(2.) *a. If unfit for General Service, is he fit for service at home?* yes

b. If not so fit, how long is he likely to be unfit for service at home? not applicable

c. If unfit for General Service at home, is he fit for light duty at home? not applicable

d. If not so fit, how long is he likely to be unfit for light duty at home? not applicable

(3.) Was the disability contracted in the service? yes

(4.) Was it contracted under circumstances over which he had no control? yes

(5.) Was it caused by military service? yes

(6.) If caused by military service, to what specific conditions is it attributed? General service condition

(7.) If the disability was not caused by military service, was it aggravated by it? not applicable

Signatures: K. M. Ferguson Capt — President.

D. F. McIntyre Capt — Members.

I concur in the findings of the Board of Medical Officers here recorded. 28 OCT 1916 Captain, C.A.M.C. For D.M.S. Canadian Contingents.

(5725.) W.16789/M260. 200M. 2/16. C. P., Ltd. Forms A.45 26

(139.) W.5373/M726. 200M. 8/16.

[P.T.O.

Instructions.

1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

D.M.S. 1375.

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

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

Rank: Capt. Name: John Elsworth Surname: Finley

Unit or Corps: Corps Bde. (If a soldier) Regtl. No.:

Born at: Coboconk Ont. on, date: 25-3-83

Signature (for identification): J.E. Finley Capt.

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

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

Weight 155 lbs. Height 5 ft. 6 3/4 ins.

Has Tachycardia
good Physique

2. NUTRITION AND DIATHESIS?

good

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. NERVOUS SYSTEM?

Neg

4. RESPIRATORY SYSTEM.

Neg.

5. HEART?

Abnormal Sounds? Bumpy 1st sound apex

Abnormal Size?

Pulse Rate? 130 Intermittence or irregularity?

6. ARTERIES.—Any hardening? slight

7. DIGESTIVE SYSTEM?

Neg

8. GENITO-URINARY SYSTEM?

Neg

Urinalysis—S.G.? 1020 Reaction? Acid Albumen? Neg Sugar? Neg

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

Neg

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

No

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

fair

Examined at: Bordon

Date: 28-1-19

Signed: Thos Lyon Mag M.O.

Signed: [illegible] Lt. M.O.

If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.

C.A.D.C. 5009 A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

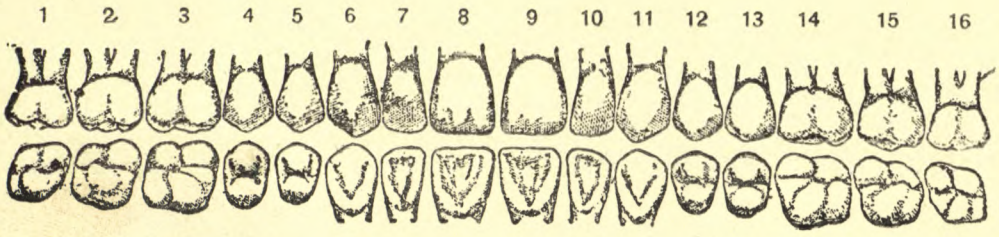
DIRECTIONS TO DENTAL OFFICERS

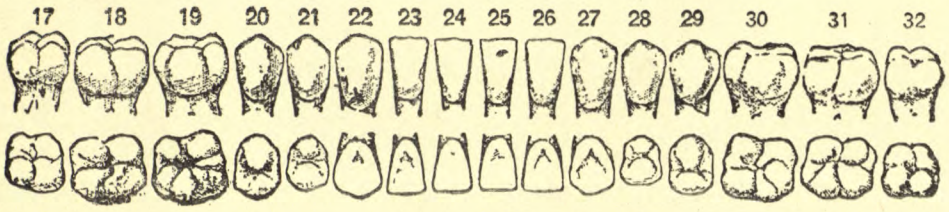
1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.

NAME OF SOLDIER (Block Letters) FINLAY. J. E.

REGIMENT C. R. A. RANK Capt. No.

Date of Examination in England 28-1-19. Date of Examination in France





PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS
3. CROWNS nil.
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
- (c) In France yes.

Signature of Dental Officer Nat. Rutherford Capt.

Dr

ORIGINAL

11-F-230

MEDICAL HISTORY SHEET.

Surname Finley *Christian Name* John Elsworth

Examined { on 29th day of April 1916
at Hahington

Birthplace { City or Town Cobourg
County Victoria

Apparent age 33

Trade or occupation Engineer

Height 5' Feet 6 3/4 Inches.

Weight 155 Lbs.

Chest measurement { Minimum 36 1/2 inches.
Maximum expansion 39 3/4 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right. None Left. Two
Number 2

When Vaccinated last 29/4/16

(*a*) Marks indicating congenital peculiarities or previous disease None

(*b*) Slight defects but not sufficient to cause rejection None

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

Date	Fit or Unfit	Examined for Re-engagement,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
29.4.16	Good.	J McCullock M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
16.5.16	Good	J McCullock M.O.
26.5.16	"	J McCullock M.O.
4.6.16	"	J McCullock M.O.

Enlisted on ..... *day of* ..... *191* ..... *at* .....

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment				
Transferred to..	2nd. Lab. Bn	Lieut		

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.

M. F. B. 313.

150M.—8-15.
H. Q. 1772-39-439.

Surname ..... Christian Name .....

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital.			Dates of Discharge from Hospital.			DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Day	Month	Year	Day	Month	Year				

DUPLICATE

MEDICAL HISTORY SHEET.

Surname Finley *Christian Name* John Elsworth

Examined { on 18 day of Aug 1916
at Barnefield

Approved by P.P. Smallhegan

Rank Capt Asst M.O.

Birthplace { City or Town Cobbank
County Victoria

Apparent age 33

Trade or occupation Engineer

Height 5 Feet 6 1/2 Inches.

Weight 155 Lbs.

Chest measurement { Minimum 36 inches.
Maximum expansion 3 inches.

Physical development good

Small-Pox Marks nil

Vaccination Marks { Arm Right. Left. X
Number 3

When Vaccinated last May 1916

(*a*) Marks indicating congenital peculiarities or previous disease None

(*b*) Slight defects but not sufficient to cause rejection None

Date.	Fit or Unfit.	Examined for Re-engagement.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
		M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
		M.O.
		M.O.
		M.O.

Enlisted on 18 *day of* Feb 1916 *at* Finchley Ont

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	109th Battn CEF	Lieut		
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
	25½.10.16.		3 weeks Home service. R.W. Fergusson President.

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.

M. F. B. 313.

200M—11-15.
H. Q. 1772 39-4°9.

Surname..... Christian Name.....

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital.			Dates of Discharge from Hospital.			DISEASE.	Number of days in Hospital	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Day	Month	Year	Day	Month	Year				

CANADIAN EXPEDITIONARY FORCE

D.W.S-39
L.B.

Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

This is to Certify that (Rank) Captain.

(Name in full) John Ellsworth FINLAY. M.C.

Enlisted in The 109th Battalion.

CANADIAN EXPEDITIONARY FORCE, on the XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

day of XXXXXXXXXXXXXXXXXXXXXXXX 191 AND WAS APPOINTED to COMMISSIONED RANK

in The 109th Battalion.

CANADIAN EXPEDITIONARY FORCE on the Twenty-First day

of February 191 6.

He SERVED in CANADA, England and France, with the 109th Bn., General List., Attached 103rd Battalion., 2nd Canadian Labour Battalion., 12th Battalion, Canadian Railway Troops, and Can. Railway Troops Depot.

and was STRUCK OFF THE STRENGTH on the Third day

of April 191 9 by reason of General Demobilisation.

Dated at Ottawa, this Thirteenth day

of April ~~191~~ 1920.

Awarded the Military Cross, L.G.#30761,-22-6-18.

JM

for. Lt.Col.
Director of Personal Services.

M. F. W. 2618a.
30m.—4-19.
1772-39-1428.

CANADIAN EXPEDITIONARY FORCE

Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

This is to Certify that (Rank)

(Name in full)

Enlisted in

CANADIAN EXPEDITIONARY FORCE, on the

day of 191 AND WAS APPOINTED to COMMISSIONED RANK

in

CANADIAN EXPEDITIONARY FORCE on the day

of 191

He SERVED in CANADA

and was STRUCK OFF THE STRENGTH on the day

of 191 by reason of

Dated at Ottawa, this day

of 191

Director of Personal Services

24 K W 1918a

Tons — 1 19

1177 2-20-1918

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

M. F. W. 54.
150M. 10-15.
H.Q. 1772-39-920.

Casualty Form—Active Service.

W.S.B. CLASS "A"

Unit, Regiment or Corps

Regimental No. Capt Rank C. E. F. Name Finlay John Elsworth

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

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

Extended Re-engaged Qualification (b)

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
	31-1-19	C.R.T.D. S.O.S. to Res. Bde CFA	Borden	31-1-19	BO Pt.11 No.31 W. Gray Lieut. for O.C. Comp. Bde. C.R.A.
	8-2-19	Res. Bde. C.F.A. T.O.S. from Can. Railway Troops Base, France, on reporting from Comp. Bde. CRA	Witley	31-1-19	BO Pt.11 No.37
17-2-19.	Can Res. Arty.	S.O.S. to 12th Can Res. Bde, Witley.	Witley.	14-2-19.	PT. II, #48. A. Bell LIEUT. & ASST. ADJUTANT RESERVE BRIGADE, CANADIAN ARTILLERY.
28-2-19	M.P.O.3.	T.O.S. pending sailing	Kimmel P.R.	1-3-19	Pt II D.O. 52.
23-3-19	"	S.O.S. on proceeding to Canada.	"	23/3/19	Pt II D.O. 71 W. G. Barholomew Lt. for O/i/c records No 3

(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				
4-4-19	M.H.Q. Ottawa	T.O.S. C.E.F. in Canada on General Demobilization	M.D. No. 3	23 3/19	C.E.F. R.O. No. 1860-19
12 4/19	M.H.Q. Ottawa	S.O.S. C.E.F. in Canada on General Demobilization	M.D. No. 3	1-4-19	C.E.F. R.O. No. 1884-19

Lieut.
for Director Personal Services

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps 109th Bn C.E.F. Regimental Number

Rank ~~Lieut.~~ Surname Finlay, Christian Name ~~J.E.~~ John Elsworth

Religion Age on Enlistment years months.

Enlisted (a) 21/Feb/16 Terms of Service (a) Service reckons from (a) 23. 8. 1916

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

Extended { } Re-engaged { } Qualification (b) or Corps Trade and Rate

Signature of Officer i/c Records.

Report: Date	Report: From whom received	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
		Embarked ...	Halifax	~~11-8-16~~ 23	S.S.Olympic
		Disembarked...	Liverpool	~~30-8-16~~	
		Posted to C.M. School	Shorncliffe	30-8-16	D.O.CTD.No.
		amended to read Genral	no.4663		~~4635 d/2-9-16.~~
		Attached 103rd Battalion,	Seaford	8-12-16	CMS Pt.II, 114/1, d/ 8-12-16.
		Capt & Adjutant, Canadian Military School.			
6-1-17.	2nd Lt B.	Struck on strength.	Seaford	30/12/16	Pt 10 6.
2-2-17.	"	Proceeded o'seas,	"	2/2/17	Pt 10 3.
					W.H. McBrien Capt. Adjutant, 2nd Can. Labour Battn.

(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.

[P.T.O.

(B99130) W 15012—5156 J. P. & Co., Ltd. Forms/B103/3.

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				
	OC 2nd Lab	Arrived	Havre	10-2-17	NR Landing return 7543 d/3-3-17
18-11-17	Do	Granted 14 days leave	Eng.	15-11-17	B213 P&D 9
		The designation 2nd Can Lab Bn			
		will in future be 12th Bn Can			
		Ry Troops A.G.s A-51-2 M-1			
		d-21 Nov 17 O No 1 d25 Nov 17			
1-12-17	Do.	Rejoined from leave.	Field	1-12-17	B213
22 17/17	Long Gazette	To be Temp Captain	Do	22 17/17	30443 P&D 18 & 28/18
21 6/18	Do	Award Military Cross	Do	21 6/18	30761 P&D 70a 13-7-18
3-8-18	OC unit	Granted 14 days leave	ASC	3 8/18	B213 P&D 80d 10-8-18
24-8-18	do	Returned from leave	do	18-8-18	B213.
5-1-19	CRBD	Trans to Eng for purposes of demobilization and postd to CRT Dep. Witley		4/1/19	NR 576 D.O. 4 d 1919
					Chas B Chapwell
					Lieut. for Lt.-Col., A.A.G. Canadian Section, G.H.Q. 3rd Echelon. B.E.F.
11-1-19	C.R.T.D.	T.O.S. from C.G.B.D. Etaples	Boulogne	4-1-19	B213 P&D 11

88130

FORM OF WILL.

I, John Ellsworth Finlay (Name in full)

Regimental Number Lieut none serving in 2nd Labour Bn.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I bequeath all my real estate unto

Mrs. Harriet Finlay
Port Perry, Ontario

Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

Mrs. Harriet Finlay
Port Perry Ontario

Name and Address of person or persons to receive personal estate* *(See note).*

IMPORTANT NOTE
This must be Signed and Dated by THE SOLDIER HIMSELF.

this 17 day of August A. D. 1916

John Ellsworth Finlay Signature of Soldier.

*N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness W. J. Thorn Capt
Address of Witness Omemee, Ont. Canada
Occupation of Witness Farmer
Signature of Second Witness George Henry Potts Lieut.
Address of Witness Haliburton Ont
Occupation of Witness Lumberman

M. F. W. 82
300M-5-16.
1772-39-983.

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Address of Witness Owemee, Ont. Canada

Occupation of Witness Farmer

Signature of Second Witness George Henry Potts Lieut

Address of Witness Haliburton Ont

Occupation of Witness Lumberman

M. F. W. 82
300M-5-16.
1772-39-983.

MILITIA AND DEFENCE

M. F. W. 11a.
50m.—4-16.
1772—30—818.

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2. Mrs. H. Finlay Mother

Name of Soldier Finlay J. E. Lieut.

PAYMENTS.

L. L. Job 310.—Req. 6574.

Month.	Year.	Cheque No.	Amt.		Remarks.
April	1916				
May					
June					
July					
Aug.		Z 14663	17		17
Sept.		J 14719	30		30
Oct.		H 19073	30		30
Nov.		M 22810	30		30
Dec.		K 21873	30		30
Jan.	1917	M 27212	30		30
Feb.		M 30997	30		30
March		M 34230	30	287	30
April		N 1036	30		30
May		N 4361	30		30
June		R 7997	30		30
July		Q. 11340	30		30
Aug.		V 13782	30		R
Sept.		U 16940	30		30
Oct.		B 21545	30		R
Nov.		V 22552	30		B
Dec.		K 26891	30		30
Jan.	1918				$497
Feb.					
March					
April					
May					
June					
July					

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier

PAYMENTS.

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

L- L. Job 310—M. & D. 6574.

14 8/16.

MILITIA AND DEFENCE

M. F. W. 11.
50m.—4-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Harriet Finlay

Address Port Perry
Ontario

Relation to Soldier wife, child or mother } Mother

Name of Soldier Finlay John E.

Regtl. No.

Rank Lieut.

Corps Special Service Co.

To what Corps belonging when called out } ✓

PAYMENTS

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

D. M. S. 1347.

Surname	Christian Name	Reg. No.
FINLAY	J.E.	D.M.S. 10-F-387

Rank: Lieut. Unit: 109th. Bn.

MEDICAL BOARD held at	Date	Serial No.
(1) C.C.A.C.	25-10-16	

Other Medical Boards at	Date	Serial No.
(2)		
(3)		
(4)		
(5)		

Condition found by Board
Slight Pyorrhoea

Disposition Recommended

(1) Home Service (Gen. Serv. 3 wks.)

(2)

(3)

(4)

(5)

PENSIONS & CLAIMS BOARD held at ..... Date .....

Disposition

Remarks

Canadian Military School, Shorncliffe.

A.M.D. 2 DEPT.

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

Indicate by a P.T.O. if continued on other side.

H. W. & V., Ld.—7025-16.

No | Rank Lieut. | Name Findlay. J. E.

T. O. S. | Unit 109th. Battalion

M. D. 3

PAID FROM	PAID TO	SIG OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Feb. 21	1916 Feb. 29	✓	Att. for Duty, Inst. 23-2-15	D.O. 84. 26-2-16.
		✓		
Mar.		✓		
April.		✓		
May.		✓		
June		✓		
July. 1	July 20.	✓	Discharged.	D.O. 207.
			A/c closed by payments.	

UNIT SAILED
JUL 23 1916

Number ..... Rank CAPT

Surname FINLAY

Christian Name JOHN ELSWORTH

Units ..... Theatre of War FRANCE

Date of Service ~~15-3-17~~ 10-2-17

Remarks .....

Latest Address P.O. Tory Hill

Cape Breton

Roll No. Page 18191

200m.-6-21.... 12-CRt

GRATUITY (IMPERIAL)

CHRISTIAN NAME | SURNAME | REG. NO.

SCHEDULE NO. | LINE NO.

UNIT RETIRED OR DISCHARGED FROM

PLACE OF RETIREMENT OR DISCHARGE

DATE RECEIVED FROM OTTAWA | IMPERIAL DEPOT NO.

DATE RECEIVED FROM REG. DEPOT. | DATE FORWARDED TO OTTAWA

68—D.P.—40M-1-12-19.

SURNAME. Finlay M.C. 22-6-18. L.G. 30761

CARD NO. 3

CHRISTIAN NAMES John Ellsworth

S.O.S. 3-4-19. Auth. R.O. 1884.

FOLL.

REGL. No. /

RANK ~~Lieut~~ Capt. P.O. 1009 10-4-19

UNIT ~~109th~~ (officers Draft)

FORMER CORPS 45th Victoria Regt. 5 yrs.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Finlay, Mrs. Harriet

RELATIONSHIP TO SOLDIER Mother

ADDRESS ~~Tory Hill Ont.~~

Port Perry, Ont.

Saap 23-8-18.

COUNTRY OF BIRTH Canada Coboconk, Ont. DATE Mar. 25th 1883

PLACE OF ATTESTATION

DATE

6 O/S 22-8-16 5-27/2.

Pl-6 31-3-19 294/3. capt.

L. L. 94504. M. & D. 6512.

M. F. W. 22. 250M.—2-16. H. Q. 1772-39-300.

MARRIED SINGLE WIDOWER

TRADE OR CALLING Engineer RELIGION Methodist.

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE Haliburton Ont. DATE Apl. 29th 1916

Present address Long Hill, Ont.

FORM P. 15
5986—25M—19/1/17

ASSIGNED PAY.	UNIT. NAME OF	DATE	AUTHORITY	RANK.	mess. DATE	AUTHORITY	NAME.
Beneficiary	Gen. List.		Pay. 2. F.D. .60. mess. 1 / 3.60	Lieut.	30 8/16.	A.O. 4635 C.T.D	Name Finlay.
Address	2. Labour Bn.					d/2-9-16.	Initials J.E.
	C.R.T.			Capt.	9 12/17.	F.W.G. 169. 18 12/17.	Bank of Montreal
Amount. $							
Separation Allowance issued. Yes or No.....							

1917-18

DATE 1917	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
April 23	Pay April (R)		108.					
26.	Bank	3017.		108.		—		
May 21.	Pay May R.		111 60					
23.	Bank	6049		111 60		—		
June 19.	Pay R.		108 -					
21.	Bank	9004		108.		—		
July 23.	Pay R.		111 60					
	Bank	13082		111 60		—		
Aug 22	Pay R.		111 60					
	Bank	17394		111 60		—		
Sep 19	Pay R.		108.					
25	Bank	21921.		108.		—		
Oct. 19	Pay R.		111 60					
	Bank	26118		111 60		—		
Nov. 21	Pay R.		108					
	Bank	30681		108		—		
Dec. 14	Pay R.		111 60					
	Bank	35096		111 60		—		
1918. Jan. 9.	Adj. P+A. Lt - Capt 3 12/17 - 31 12/17 @ $1.15 pd.	V. 18903.	99 35					
	Cash	36585		99 35		—		
	Pay R.		147 25				Transferred from Ledger #17 to #27. 5 2/18	
21	Bank	39954		147 25		—		
Feby 23	Pay R.		133					
	Bank.	40995		133		—		
Mch 18	Pay R.		147 25					
14.	Bank	42627	147 25	147 25		—		

FORM P.15
5986—25M—19/1/17

ASSIGNED PAY.	UNIT. NAME OF	DATE	AUTHORITY	RANK.	DATE	AUTHORITY	NAME.
Beneficiary	C.R.I.		Pay 3 G.D. .75 mess. 1 4.75	Capt.			Name Finlay
Address							Initials J.B.
							Bank of montreal
Amount. $							
Separation Allowance issued. Yes or No.....							

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
1918	Balance Forward.							

P—15.

ASSIGNED PAY.	UNIT. NAME OF	DATE	AUTHORITY	RANK.	DATE	AUTHORITY	NAME.
Beneficiary	Gen Hosp			Sergt	30.8.16	D.O. #4635 C.D.D. d/2.9.16	Name Finlay
Address							Initials J. E.
							Bank of Montreal
Amount. $							
Separation Allowance issued. Yes or No.....							

1916-17

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS.
1916								
	P. a. fr. 19-8-16 to 30-9-16 C. Bal.							
Sept 15	Bank. Mess. fr. 30-8-16 to 30-9-16 $13.00			156 80				
22	C. f. Canada. V. 9251		13 00					
	P. a. fr. 19/8/16 to 31/8/16 Mess fr. 30/8/16. V. 9250.		35 80					
	Pay Sept. (R)		108			—		
Oct 19	Pay Oct. R.		111 60					
28	Bank			111 60		—		
Nov. 18	Pay Nov. (R)		108					
27	Bank			108		—		
Dec 12	Pay Dec. (R)		111 60					
19	Bank			111 60		—		
1917. Jany 22.	Pay Jany (R)		111 60					
23	Bank	19288		111 60		—		
Feby 18	Pay Feby (R)		100 80					
21	Bank.	21931		100 80		—		
Mch 21	Pay March (R)		111 60					
23	Bank			111 60		—		
			812 00	812 00				

FORM P. 15.
5986—25M—19/1/17

ASSIGNED PAY.	UNIT.			RANK.			NAME.
	NAME OF	DATE	AUTHORITY		DATE	AUTHORITY	
Beneficiary	2 Labour Bn C.R.T.		Pay $3.00 7.a. 1.00 mess. 1.00 = 5.00	Capt.	3 12/17	G.D.G. 169. 18 12/17	Name Finlay
Address							Initials J.E.
							Bank of Montreal
Amount. $							
Separation Allowance issued. Yes or No.....							

1918-19 Entered to add Outfit allce 1 8/18

1919-20

DATE 1918	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
apl. 18	Pay R		142 50					
25		Bank 1191		142 50		—		
May	Pay R		147 25					
25		Bank 2649		147 25		—		
June	Pay R		142 50					
26		Bank 4158		142 50		—		
July	Pay R		147 25					
25		Bank 5634		147 25		—		
aug 20	Pay R		147 25					
23		Bank 7207		147 25		—		
Sept 18	Pay R		142 50					
25		Bank 9162		142 50		—		
Oct 19	Pay R		147 25					
21		Bank 10403		147 25		—		
	add. Outfit allce		100					
		Bank 10930		100		—		
Nov 20	Pay R & incr. F.A. 12 9/18 - 31 10/18		162 50					
25		Bank 12502		162 50		—		
Dec	Pay R		155					
16		Bank 13770		155		—		
Jan	Pay R.		155					
25		Bank 15558		155		—		
Feb	Pay R.		140					
14	Bal Feb Pa	Bank 16364		140		—	Retd. to Com. 31.3.19	
27	Adv. Mar. Pa	Bank 17229		155		Dr 155	CPC to 28 (Witley) Lefs. to N.C. Ledger	
March	Pay R.		155			—		
			188 4 00	188 4 00	over		to 2 12 9 19.	

FORM P. 15.
5986—25M—19/1/17

ASSIGNED PAY.	UNIT. NAME OF	DATE	AUTHORITY	RANK.	DATE	AUTHORITY	NAME.
Beneficiary	C.R.T.			Capt.			Name Finlay
Address							Initials J. E.
							Bank of Montreal
Amount. $							
Separation Allowance issued. Yes or No.....							

DATE 1919.	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
	Balance carried forward					nil		
Apl. 16	A.R. 213 Kimmel Pk. 19 3/19 £5-0-0 List 53 Apl. Vo 594 Gen. A/c Endorsed on P.C.			24 33				
30	Dr bal. tfrd to Can.	No. 452	24 33			—0—		

TLH.

Surname FINLAY? / M.C.

Rank ~~Lieut.~~ Captain

Promotion

Unit 109th Battn

Place of birth Cobconk, Ont. /

Married (Yes or No)

Appointments

Christian Names John Elsworth, / 2nd Lab Bn

Name and Address of Next-of-Kin Mother, /

Harriet Finlay, /

Port Perry, Ont. Canada

SAILED 23-8-16 H Q 593-6.1

Date of leaving Canada

Date and Cause of Resignation

Report Date	Report From whom received	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
	G.O.C.		Gen List		DO 4663
2-9-16	C.T.D.	Taken on strength & posted to ~~C.M.S.~~ 30/8/16.			D.O. 4635
7.11.16.	21 Bn	~~S.O.S. on arrival 20 reinf.~~ Cancelled by Pt II ord 77.		~~29.10.16~~	~~Pt II ord 73~~
14.12.16	O/C Can Con Brighton	Attached to 103rd Battalion	Brighton	8.12.16	R0509. Pt II ord 322 103rd Bn
5.1.17	Brighton	Rfd to 2nd Can Labor Battn, Seaford		30.12.16	R.O. 871 Pt II ord 8. 103rd Bn.
6.1.17.	2nd Lab Bn	Lobe Lieut & Company withdrawn			Pt II ord 6. date illegible on order
16-4-17	W.O.	From Gen List to be temp Lt — Lab Bn		7.4.17	L.G. 30021
25.11.17.	2nd Lab.	Granted 14 days leave to England		30-12-16 / 15/11/17	Pt II 91
22.12.17.	W.O.	Lobe Temp. Capt. C.R.T.		3.12.17.	L.G. 30443.
22.6.18.	W.O.	Awarded the Military Cross			L.G. 30761
10.8.18	12th CRT	Granted 14 days leave to UK.		3.8.18	Pt 2 980.
16.1.19	-do-	SOS and Est and posted to CRTD.		4.1.19	Pt 2 94
11.1.19	RBCFA	TOS from CGBD (12th CRT)		3.1.19	Pt 2 911
1.3.19	RB, 670	T'ferred to MD, Wing 3		27.2.19	Pt 2 960
24.3.19	MD ~~Wing 3~~	SOS on proceeding to Canada		23.3.19	Pt 2 971

13396

A.F.B. 108.

14 FEB. 1917

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				
		Sailed for Canada		23 3 19	SK 33

H

I.D. 3

PROCEEDINGS OF AN OFFICER OR NURSING SISTER STRUCK OFF STRENGTH OF THE CANADIAN EXPEDITIONARY FORCE

1. RANK	Capt		
2. NAME	FINLAY John Ellsworth.		
3. UNIT	12. C.R.T.		
4. DATE STRUCK OFF STRENGTH	1-4-19.	PLACE	
5. REASON	Demobilization SoS C&F Canada 1-4-19		
6. AUTHORITY	R 61884		
7. PROPOSED RESIDENCE	Forest Hill. Ont		

H

This folder should contain the following documents:

1. Declaration Paper, M. F. W. 51, or Attestation Paper, M. F. W. 23.
2. Casualty Form, A. F. B. 103 or M. F. W. 54.
3. Medical History Sheet, M. F. B. 313 or A. F. B. 178.
4. Proceedings of Medical Boards, A. F. A. 179 or M. F. B. 227.
5. Medical Report M. F. W. 129.
6. Dental History Sheet, M. F. B. 465.
7. Last Pay Certificate, M. F. W. 44.
8. Certificate as to Missing Documents.

H.M.T.S. EMPRESS OF BRITAIN.
EMBARKED 23-3-19
DISEMBARK(E) 31 3 19

W.S.B. CLASS "A" No

M. F. W. 2591.
20M—11-18.
1772-39-1380.

25-4-19 SW

1. Triplicate Declaration Paper (M F.W. 51), or Triplicate Attestation Paper (M.F.W. 23).
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. Proceedings on Striking Off Strength (M.F.W. 2591).
7. Last Pay Certificate (P. 41)
8. War Service Gratuity Form (M.F.W. 2595).
9. Sundry Documents.

(c) Is the Officer fit to perform any duties not coming within the above categories? If so, specify the nature of the duties which he might perform.

.....not applicable.....

Date of Enlistment 1-1-18
~~14-8-16.~~

MILITIA AND DEFENCE

Separation and Assigned Pay Branch F

OVERSEAS CONTINGENTS

1997 ~~2102~~ Date of Assignment

RATE OF SEPARATION ALLOWANCE			
30	40.00		

RATE OF ASSIGNMENT			

11 Lt FS Jic

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Lieut Promoted Capt Reverted Discharge

Soldier's Name John E. Finlay

Battalion Special Service Co. (Can Ry Serv)

Beneficiary Mrs Harriet Finlay.

Relationship Mother. M F W 255 to reg 1/5/18

Address Port Perry Ontario.

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

2

3

4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
						M F W 255 to reg OK Jg 30-7-18 5956-J-7
Dec 31		497		497		m F W 2554 Ret'd OK 11-10-18
Jan	V 66707	30		30	P	
Feb	U 78062	50		50		mailed 27-3-18 Cheque $50.00 to adjust grant.
Mch	W 85432	40		40	adj cheque 253	to Capt 1-4-18 Eng. routine
Apr	~~1340~~ G 10911	40		40	cancelled	orders 28-12-17 mailed 4-3-18
May	Q 17477	40		40	L	MRO. 1 by rendered 2-3-18
June	M 20265	40		40	a	$50.00 Feb mailed 4-3-18
July	O 34477	40		40	a	MRO 1 Brend 26-3-18 Jg.
Aug	M 35558	40		40		
Sept	R 47105	40		40	a	
Oct	R 51634	40		40	L	
Nov	L 59972	40		40	L	
Dec	V 65019	40		40	L	
Jan	Q 73193	40		40	L	
FEB	U 80289	40		40	L	
MAR	L 83272	40		40		
APR						

A/c Closed 31-3-19

Ret'd per Empress of Britain

Date 31-3-19 M.F.W.187 Rend.

Clerk A.J.B. 7-4-19

M.R.O. 88927 - M.D.

AUDITED

CONSOLIDATED ACCO

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22520—M. & D. 7693.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS

M. F. W. 128
400M.—6-17—1772-89-1141
L. L. 22320—M. & D. 7693.

AUDITOR | PAYMASTER

M. OR S.

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

REGT. NO. | RANK Capt. | NAME (IN FULL) FINLAY, John Ellsworth (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Yes | DATE EFFECTIVE

TO WHOM PAID: Mrs Harriet Finlay, Mother | RELATIONSHIP

ADDRESS: Port Perry, Ont.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Reg. Pay $3.00		
# Allce $1.00		
Capt. John E. Finlay		
Bank of Montreal		
Lindsay		
Ont.		

ORIGINAL UNIT C.E.F. C.R.A. | IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ Nil | DATE EFFECTIVE

PAYABLE TO | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE Kingston | DATE 3/4/19 | REASON Demob. | AUTHORITY R.O.1884. | IF ENTITLED TO POST DISCHARGE PAY

F. 37

540

MONTH 1919.	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	$	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					
March																											8	00			8	00					O/pd Miss. Allce May 24-31, 1919.
																																					Cr. Capt. pay & All. of Apr. 1-3, 1919
April	3	4.00	12	00					12	00							24	33													24	33					Cash adv. Nihmd. PK #5, 19/3/19.
																	75	00													75	00	~~107 33~~ 95	33			Cash adv. ck #22031, 31/3/19.
			W.S.G.		S.A.						War Service Gratuity												W.S.G.		S.A.												M. IW 2595 Rec.
183 days @	4.00		732	00	240	00																							95	33							Dr. Bal. as per above J.F.M.
					400	976																							~~107 33~~								Cr. Sep. Allce. 1-4-19 to 3-4-19.
																							268	67													1st 2nd & 3rd Payments W.S.G.
																									124	00											Ck. 933535. 21-6-19
																															488	-	368	-	120	-	1st 2nd & 3rd Payment Sal.
																																					Ck. 933536. 21-6-19
																							124	-	40						652	-	244		80	-	936891-92 July 2/19.
																							120		40						812	-	124		40		957705-6 July 31/19.
																							124	-	40						976	-	—		—		1302267-8 Sept. 2/19.

200M-3-19.—L. L. 58788-... & D. 9985.
M. F. W. 2.96.
1772-39-1390.