

Es. S. card. 24/3/16
DUPLICATE

ATTESTATION PAPER.

No. 748807
Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION. (ANSWERS.)

1. What is your name? *Mr. Henry Cox*
 2. In what Town, Township or Parish, and in what Country were you born? *Wilson.*
 3. What is the name of your next-of-kin? *C. Cox*
 4. What is the address of your next-of-kin? *Leeds village*
 5. What is the date of your birth? *Feb 19th 1890*
 6. What is your Trade or Calling? *Farmer.*
 7. Are you married? *No.*
 8. Are you willing to be vaccinated or re-vaccinated? *Yes.*
 9. Do you now belong to the Active Militia? *No.*
 10. Have you ever served in any Military Force? *No.*
If so, state particulars of former Service.
 11. Do you understand the nature and terms of your engagement? *Yes.*
 12. Are you willing to be attested to serve in the } *Yes.*
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }
- W. H. Cox* (Signature of Man.)
A. M. McEwen (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Mr. Henry Cox*, 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.

W. H. Cox (Signature of Recruit)
Date *Mar 13th* 1916 *A. M. McEwen* (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.

W. H. Cox (Signature of Recruit)
Date *MAR 14 1916* *A. M. McEwen* (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 *Inverness* this *14* day of *Mar* 1916

J. P. Forde (Signature of Justice)
J. P. Forde (Signature of Approving Officer)

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

Description of William Henry Cox on Enlistment.

Apparent Age.....19 years 1 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 3/4 ins.

Chest measurement { Girth when fully expanded..... 35 1/4 ins.
 Range of expansion..... 2 1/2 ins.

Complexion..... Ruddy

Eyes..... Blue

Hair..... Light-brown

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

Curved shaped scallion on down of right hand, extending across lower ends of metacarpal bones

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..... March 14, 1916..... S. J. Bennett

Place..... London, Ont......
 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.

William Henry Cox.....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.

S. J. Bennett.....(Signature of Officer)

Date..... MAR 16 1916 191

REGIMENTAL DOCUMENTS

NAME GOX, WILLIAM HENRY

REGT. NO. 748802

UNIT 117th Cps Bn H. Q. FILE NO.

H

S

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

M

H

41375

DEATH

Category

DISCHARGE

Category

DESERTION

1 *W.D. 19*
ATTESTATION PAPER (M.F.W. 23, 133, or 51) ✓

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

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

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

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

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

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

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

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

MEDICAL EXAMINATION (M.F.W. 129)

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

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

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

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

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

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

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

P. 85

R. 149

1 Gas card ✓

1 Ding will ✓

1 Copy ✓

1 Discharge ✓

1 A. 72 ✓

M. T. 8
307
FORM-11-13
1-2-50

१०४९

NAME

Cox, Wm. Henry

RANK & NO.

Pte.

CORPS

117th.

ENLISTMENT, PLACE

Inverness, N. S.

DATE

Mar. 14th 1916

FORMER CORPS

nil.

COUNTRY OF BIRTH

Canada, Nelson, B. C.

NEXT-OF-KIN

Cox, C.

ADDRESS OF NEXT OF KIN

Leeds Village; P. Q.

DISCHARGE, PLACE

DATE

Sailed from Halifax 14/8/16⁵¹⁷ per S.S. Empress of
Britian

MARRIED

SINGLE

Yes

WIDOWER

TRADE OR CALLING

Farmer

RELIGION

Methodist.

DESCRIPTION.

APPARENT AGE

19

YEARS

1

MONTHS

HEIGHT

5

FEET

8 $\frac{3}{4}$

INCHES

CHEST MEASUREMENT

35 $\frac{1}{2}$

INCHES

EXPANSION

2 $\frac{1}{2}$

INCHES

COMPLEXION

Ruddy

EYES

Blue

HAIR

L. Brown.

DISTINGUISHING MARKS

MEDICAL EXAMINATION.

PLACE

Inverness, N.S.

DATE

Mar. 14th 1916

REMARKS:

NAME

Cop William Henry

REG'TL No.

748802

H. Q. FILE No. 649

RANK AND CORPS

Pte

5th B.M. Form 117

FOLLOWS

No.

CABLE

NO.

DATE

NATURE OF CASUALTY

FOLLOWS

36-10

14-9-17

Killed in action Sept 1st 1917

M 6055

10-9-17

Killed in action Sept. 12th 1917 rec'd 11-17

A.B. 2090a

Rover

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

A 434	Rept from base Evacuated to field Amb	14-7-17	Impetigo
A 439	Reg. Unit	26-7-17	"
A 10-1	Rept from Base, Killed in Action	1-9-17	(1st Quebec Reg.)

COX, Pte. Wm. Henry, #748802, 5th C.M.R., H.Q. 649-C-14830.

not eligible for a star

M. & D. (Father) Silas T. Cox, ~~SOUTH HAM,~~ P.O.

Inverness. 1.

P. & S. " Ditto.

(Ser. # 765775)

Mem. C. (Mother) Mrs. Mary Cox, Ditto.

Not married.

DESPATCHED *X1266* JAN 26 1921 *8910*

Desp AUG 7 1920 *tm 1617524*

Scroll Desp. _____ Reqn. No *247160*

mk
Plaque Desp. _____ Reqn No *7436* W

M

M.

208

X-Rtd $18\frac{8}{20}$
no Reason stated

L

No. 748802. RANK *Pvt.*

NAME *Box, Wm. H.*

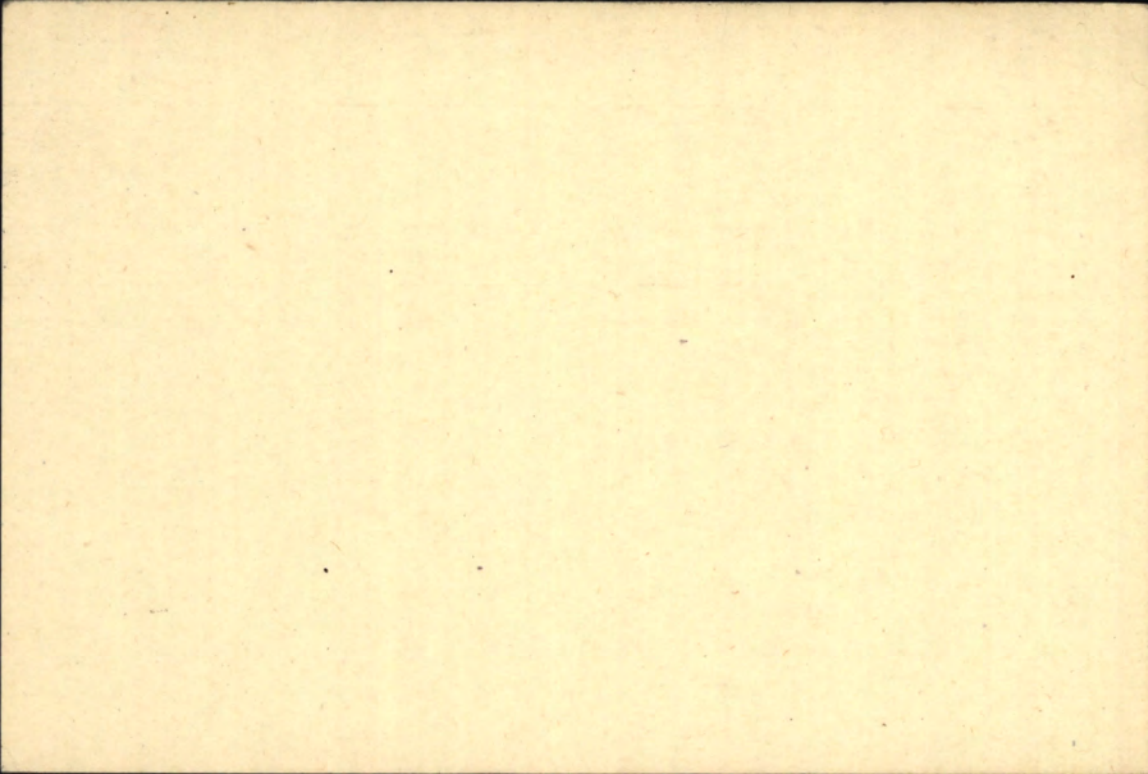
T.O.S. 14-3-16.
 (D.O. 64 of 16-3-16)

UNIT *117th Battalion*

M.D. *4.*

PAID		SIG OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
<i>1916. Mar. 14.</i>	<i>1916. Mar. 31.</i>	<i>✓ ✓ ✓ ✓</i>		
<i>Apr. May June July Aug.</i>				

UNIT SAILED
 AUG 14 1916



Name *William Henry* Rank *Private* Reg. No. *748802*
 Unit *5th CMB's* *RA 25-6-3234*
 Next of Kin *Canada*

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
<i>14-7-17</i>	<i>Evacuated to Fla Amb Landing</i>	<i>45/34</i>				
<i>26-7</i>	<i>Rejoined Unit</i>		<i>-do-</i>		<i>A439</i>	
<i>1-9</i>	<i>Reported from Base</i>					
	<i>Killed in Action</i>			<i>A. 10</i>	<i>6055</i>	
	<i>SS 241 dated 10-9-17.</i>					

Number

748802

Rank

Pte.

~~B~~

Surname

Cox

Christian Name

William Henry

Units

5th Cdn R

Theatre of War

France

Date of Service

1-12-16

Remarks

(H) Silas T. Coy

Latest Address

Inverness,
P.O.

Roll No.

19

200m. - 6-21.M.

Page 18448

TOTAL SERVICE WHERE
AND HOW LONG

DATE AND PLACE OF ORI

DISEASE OR INJURY

OPERATIONS

RESULT OF OPERATIONS

(A) DATE OF ARRIVAL AT HOSPITAL AS AN ADMISSION

(B) AS A TRANSFER (STATE WHERE FROM)
NAME OF HOSPITAL

DATE OF DISCHARGE TO UNIT

IN CAT

DATE OF DISCHARGE AS AN INVALID

DATE OF DEATH

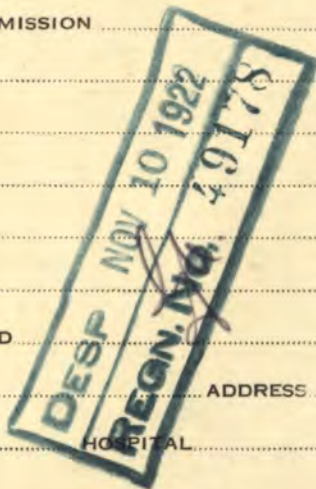
DATE OF TRANSFER (STATE WHERE TO)
NAME OF HOSPITAL

OTHER INDEPENDENT CONDITIONS DIAGNOSED

NEXT OF KIN

ADDRESS

HOSPITAL



M. F. W. 142.

1772-39-1171.

50m.-2-19.

* CROSS O

Surname **COX** Christian Name or Names **W.H.** Reg. No. **748802**
 Rank **pte** Unit **5th. C. M. R.** Co. **1st Que. Regt.** Troop Batty.
 Hospital Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

Impetigo

acute

(1) Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

Reported from Base

Killed in Action 1-9-17

DISPOSITION

Date

CL. 1-8-17 A434 RFB. to F.A.M.B. 14-7-17

8.8.17 A439.

Rej Unit

26.7.17.

14-9-17 A.10

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

MILITIA AND DEFENCE
ASSIGNED PAY

M. F. W. 12a.
 50m.-6-16.
 1772-39-819.

Sheet No. 2.

L. L. Job 4503. -Req. 6332.

Mrs. Silas Coy
 OVERSEAS CONTINGENTS
 PAYMENTS.

Name of Soldier *Coy Wm. Hy.*
 748820 117 Bn. 15th

Month.	Year.	Cheque No.	Amt.	Remarks.
			15 [—]	SEP 1 1916
April	1916			
May				
June				
July				
Aug.				
Sept.		X17016	15	
Oct.		X22018	15	
Nov.		Y25966	15	
Dec.		K32790	15	South Ham Luce. 25/11/16
Jan.	1917	L22197K	15	
Feb.		B43597	15	15 W
March		R46873	15	15 Lav
April		Q1461	15	15 E.
May		X7479	15	1916.00 25.00
June		O14179	15	15 S
July		C20721	15	15
Aug.		I27932	15	1917.00
Sept.		A34976	15	1917.00
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

YBR

1916

South Ham Luce. 25/11/16
15 W
15 Lav
15 E.
1916.00
25.00
15 S
1917.00
1917.00
Co. F. X. \$195.00 - 30/9/17. 18 Nov 26/9/17.
Aut closed 30/9/17. 18 Nov 26/9/17.

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom

Mrs. Silas Coy

Address

*Leeds Village**South Lam.**P. Q.**25/11/16*

Rate

15—

SEP 1 1916

By Whom Assigned

Coy Wm. Hy.

Regtl. No.

748820 - 748802

Rank

Pte.

Corps

117 Bn. "B"

PAYMENTS

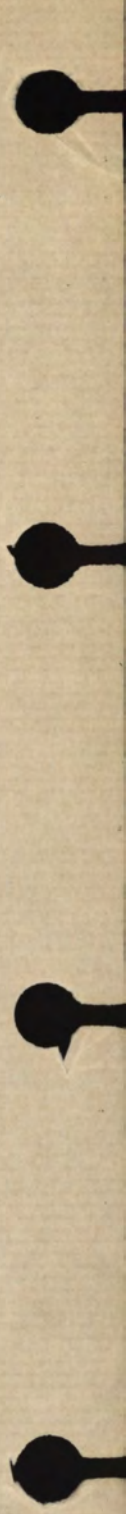
Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



Pensions Notified Date *26/9/17*
 Killed in Action }
 Died of Wounds } Date *1/9/17*
~~Missing~~
 C. I. *(16)* *16/9/17* Clerk *Bonall arch.*
 Date Noted *26/9/17* 1917

ARTICLE
ASSOCIATION
OF...

1944



TLH. Rank Name **COX, William Henry,** ✓ Reg'l No. 748802.
 Unit **117th. Bn.** If in perm. Corps, }
 What Unit? } Married or Single **Single.**
 Place and Date of Enlistment **Inverness, Mar. 13th. 1916.** ✓⁴ Place of Birth **Nelson.**
 Name and Address, Next-of-Kin **C Cox,** ✓
Leeds Village, Quebec. Relationship
 Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship

N/E. R.B. No. **9047**
 File R.L.
 Category **K.A.**

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.				
			<i>Emp. of Britain</i>		
		<i>Arrived in England.</i>		<i>24 AUG. 1916</i>	
<i>1.12.16</i>	<i>O.C. 117th</i>	<i>Transf'd to 5th C.M.R</i>	<i>Seaford</i>	<i>30.11.16</i>	<i>D.S.M.</i>
<i>8.12.16</i>	<i>5th. C.M.R</i>	<i>Taken on Strength,</i>	<i>Field</i>	<i>1.12.16</i>	<i>Pt, 2, O-67</i>
<i>1.8.17</i>	<i>— —</i>	<i>Rept. Evacuated to Field. Am b.</i>		<i>14.7.17</i>	<i>Ch. 434 Impetigo</i>
<i>9.8.17</i>	<i>— —</i>	<i>Rejoined unit</i>		<i>26.7.17</i>	<i>Ch. 439</i>
<i>10.9.17</i>	<i>— —</i>	<i>Killed in action</i>	<i>Field</i>	<i>Pt 1.9.17</i>	<i>Also Pt. 2084. Q.L. 10 (13-9-17)</i>

A.F.B. 103 CHE
 6 DEC. 1916



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

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

Casualty Form—Active Service.

250M.—1-16.
H. Q. 1772-39-920.

Unit, Regiment or Corps OVERSEAS BATT., C. E. F.

Regimental No. 748302 Rank Private Name William Henry Cox
C. E. F.

Enlisted (a) 14-3-16 Terms of Service (a) Duration of war Service reckons from (a) 14-3-16

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

Extended _____ Re-engaged _____ Qualification (b) _____

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.
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Embarkation Canada Aug. 14/16
Arrival England Aug. 24/16
 Proceeded for Overseas Service. NOV 27 1916 Part. II Order, 284
Transferred to 5th C. M. R. NOV 30 1916 De Stewart Lieut. & Asst. Adjt. for O.C. 11th E.T. Bn. I. S. n.

	<u>O.C. C. B. D.</u>	<u>Landed in France, Taken on strength 52nd 5 Cdn M.R. Bn. 1-12-16</u>		<u>Nom. Roll d/ Pt II D.O. 7 d/ 8/12/16.</u>	
	<u>— do. —</u>	<u>Left for Unit, Field 22/12/16</u>		<u>Nom. Roll d/ 22/12/16.</u>	
	<u>O.C. 52nd Bn.</u>	<u>Arrived Unit for duty 25/12/16</u>		<u>B. 213 d/ ACS 193 8/17.</u>	
	<u>21.7.17</u>	<u>0058 M.R. Impetigo.</u>	<u>Field.</u>	<u>14.7.17 73213 002 259</u>	
	<u>28.7.17</u>	<u>" " Support Unit.</u>	<u>" "</u>	<u>24.7.17 33213 002 261.</u>	
	<u>" "</u>	<u>126 Fa. Impetigo</u>	<u>To Duty.</u>	<u>22.7.17 234/33420</u>	
	<u>22.7.17</u>	<u>106 Fa. Impetigo.</u>	<u>86 Fa.</u>	<u>15.7.17 226/25234 002 267.</u>	
	<u>3.9.17</u>	<u>0256 M.R. Killed in action</u>	<u>Field</u>	<u>11-2. d/ 3/9/17</u>	

CERTIFIED CORRECT.
8 DEC 1916
C.M. REPORTS, LONDON

(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.

Captain for Lt.-Col., A. A. G.
Canadian Section, G. H. Q. 3rd Division, B. E. F.
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				

14338

✓

FORM OF WILL.

57081

no card

I, William Henry Cox (Name in full)

Regimental Number 748802 serving in 117th E F 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

My Mother Mrs Mary Cox
Leeds Village
Que

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

absolutely, and my personal estate I bequeath to

My Mother Mrs Mary Cox
Leeds Village
Que

Name & Address of person or persons to receive personal estate* (see note).

In Witness whereof I have hereunto set my hand

this 13th day of October A.D. 1916

W H Cox Signature.

*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.

Name of Witness W E Sullivan

Address of Witness Wellbourne Que

Occupation of Witness Capt 117th E F Bn

Name of Witness H E Brown

Address of Witness Danville Que

Occupation of Witness Sgt 117th E F Bn

ESTATES BRANCH

NOV 6 1917

MILITIA DEPT.

FORM OF WILL

3. I, _____ (Name in full)
 Registered Number _____
 of the Canadian Expeditionary Force do hereby make this my last Will
 by my words and declare this to be my last Will

I bequeath all my real estate
 Name & Address _____
 to person or
 persons to whom
 it shall go.

absolutely, and my personal estate I bequeath to
 Name & Address _____
 of person or
 persons to receive
 personal estate
 (see note)

In Witness Whereof I have hereunto set my hand
 this _____ day of _____ 191____
 at _____

Signed and acknowledged by the Testator, and by 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.

Name of Witness _____
 Address of Witness _____
 Occupation of Witness _____
 Name of Witness _____
 Address of Witness _____
 Occupation of Witness _____

DEPARTMENT OF THE ARMY

CANADIAN ARMY DENTAL CORPS

1950

DEPARTMENT OF THE ARMY
CANADIAN ARMY DENTAL CORPS
1950

MEDICAL HISTORY SHEET.

748802

Surname Cox Christian Name Wm. Henry

Examined { on 14th day of March 1916
at Immers Dan

Approved by S. J. Bennett, M.D.

Birthplace { City or Town Wesley, P. I.
County Imperial

Rank _____ M.O.

Apparent age 19 yrs.

Trade or occupation Farm

Height 5 Feet 8 3/4 Inches.

Weight 145 Lbs.

Chest measurement { Minimum 32 3/4 inches.
Maximum expansion 35 1/4 inches.

Physical development Good

Small-Pox Marks no

Vaccination Marks { Arm Right Left
Number 2

When Vaccinated last Aug 1912

(a) Marks indicating congenital peculiarities or previous disease _____

(b) Slight defects but not sufficient to cause rejection _____

Date.	Ft or Unfit.	EXAMINED FOR RE-ENGAGEMENT.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	VACCINATIONS.
<u>7/15/16</u>		<u>282</u>
		M.O.
		M.O.
		M.O.

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>3/1/16</u>	<u>+</u>	<u>1/2 B S D</u>
<u>6/23/16</u>	<u>1B</u>	<u>282</u>
<u>7/5/16</u>	<u>1B</u>	<u>282</u>
		M.O.
		M.O.
		M.O.

Enlisted on 14 day of March 1916 at Immers Dan

	CORPS.	REG'L NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>117TH EASTERN TOWNSHIPS O/S BATTALION C. E. F.</u>	<u>748802</u>		<u>19/3/16</u>
Transferred to	<u>5th L.M.A.</u>			<u>NOV 30 1916</u> <u>NOV 27 1916</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.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Sept 1-16

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

<i>15</i>			
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748823
1917

PARTICULARS OF SEPARATION ALLOWANCE

No. *7488202 (748802)*
 Rank *Pte* Promoted Reverted Discharge
 Soldier's Name *Wm Hy. Cox*
 Battalion *"B" Co 117th Battr*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *Mrs Silas Cox*
 Address *South Hamm. Y. I.*
 Change of Address
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>1917</i> <i>Sept 30.</i>		<i>1</i>	<i>195.</i>	<i>195.</i>	<i>acct closed 30.9.17. C.F.X. 30.9.17. killed in action 1.9.17. Pensions notified 26.9.17. C.F.X rendered 8/3/18 J.R. Ritchard</i>

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

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PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date

Cheque No.

Amount S/A

Amount A/P

Total

REMARKS

M. F. W. 128
 400M-6-17-1772-38-141
 L. L. 2320-M. & D. 1383.

No. 746402 Name W. H. Cox
 Date of last entry in Company Conduct Sheet }
 No. and date of last drunk }
 Sqn., Batty., or Company } 86 Corps, 117TH EASTERN TOWNSHIPS, O/S BATTALION C. E. E.
 Date of enlistment } 14-3-16 G.C. Badges }
 Service or Proficiency Pay }
 Period not reckoning towards freedom from extra fine }
 Sheet No. One }
 Signature O.C. Company, etc. } J. B. Buntell
 Character } Good

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
		NOV 30 1916		Transferred to 5th C.M.R.	NOV 27 1916			Lieut. & Asst. Adj. for O.C. 117th E.T. Battalion.	
				Reported 5th C.M.R. Bn. 25-12-16					
				Killed in action 1/9/17	Part II 84		10/9/17		
								J. B. Buntell	
								ADJUTANT 5th C. M. R. BN.	

Army Form B. 122

5th C. of C.

C. in a

1-9-17

From L.

2-10-17

