

59th Regt

38th BATT. C. E. F. Souths & Rest

# ATTESTATION PAPER.

No. 145210

Folio. 96  
B

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

**ORIGINAL**

1. What is your name?..... Leon Greenwood
  2. In what Town, Township or Parish, and in what Country were you born?..... St Jean deschelliers Canada
  3. What is the name of your next-of-kin?..... Freine Greenwood mother.
  4. What is the address of your next-of-kin?..... St Jean deschelliers Quebec
  5. What is the date of your birth?..... 7th March 1892
  6. What is your Trade or Calling?..... Laborer
  7. Are you married?..... Yes
  8. Are you willing to be vaccinated or re-vaccinated?..... yes 108 Hanover St Lebanon N.H. U.S.A.
  9. Do you now belong to the Active Militia?..... no
  10. Have you ever served in any Military Force?..... no  
If so, state particulars of former Service.
  11. Do you understand the nature and terms of your engagement?..... Yes
  12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?..... Yes
- Leon Greenwood (Signature of Man).  
H. H. Morgan Lt Col (Signature of Witness).

### DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Leon Greenwood, 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.

Leon Greenwood (Signature of Recruit)  
Date: Aug 27<sup>th</sup> 191 5 H. H. Morgan Lt Col (Signature of Witness)

### OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Leon Greenwood, 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.

Leon Greenwood (Signature of Recruit)  
Date: Aug 27<sup>th</sup> 191 5 H. H. Morgan Lt Col (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 Greenwood this 27 day of Aug 191 5

O. J. [Signature] (Signature of Justice)  
I certify that the above is a true copy of the Attestation of the above-named Recruit.  
[Signature] (Approving Officer)  
O. C. 77th. [Signature] (Signature of Approving Officer)

Description of Leon Greenwood on Enlistment.

Apparent Age 28 years 5 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. 5 ins.

Appendicitis operation scar.

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

None

Complexion Dark Brown

Eyes Brown

Hair Brown

Religious denominations: { Church of England.....  
 Presbyterian.....  
 Wesleyan.....  
 Baptist or Congregationalist.....  
 Other Protestants (Denomination to be stated.) R.C.  
 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 Aug 26th 1915 1915

Alfred Algreen  
Lieutenant  
 Medical Officer.

Place Cornwall, Ont

\*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.**

Leon Greenwood 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] (Signature of Officer)  
O. G. 77th Overseas Battalion, B. E. F.

Date Aug 27th 1915



18.11.16

DISCHARGE DOCUMENTS

R. O. No. ....

H. Q. No. ....

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms.....

Proceedings on discharge.....

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

38

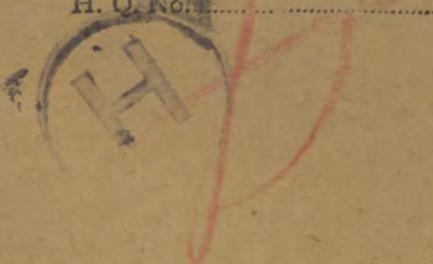
Name GREENWOOD LEON

Regt. No 145211 Rank Pte

Corps 38th Bn CEF

*Died of Wounds 18.11.16*

27014



*Handwritten scribbles and a circled 'M'.*



4-7  
19-8  
29-8

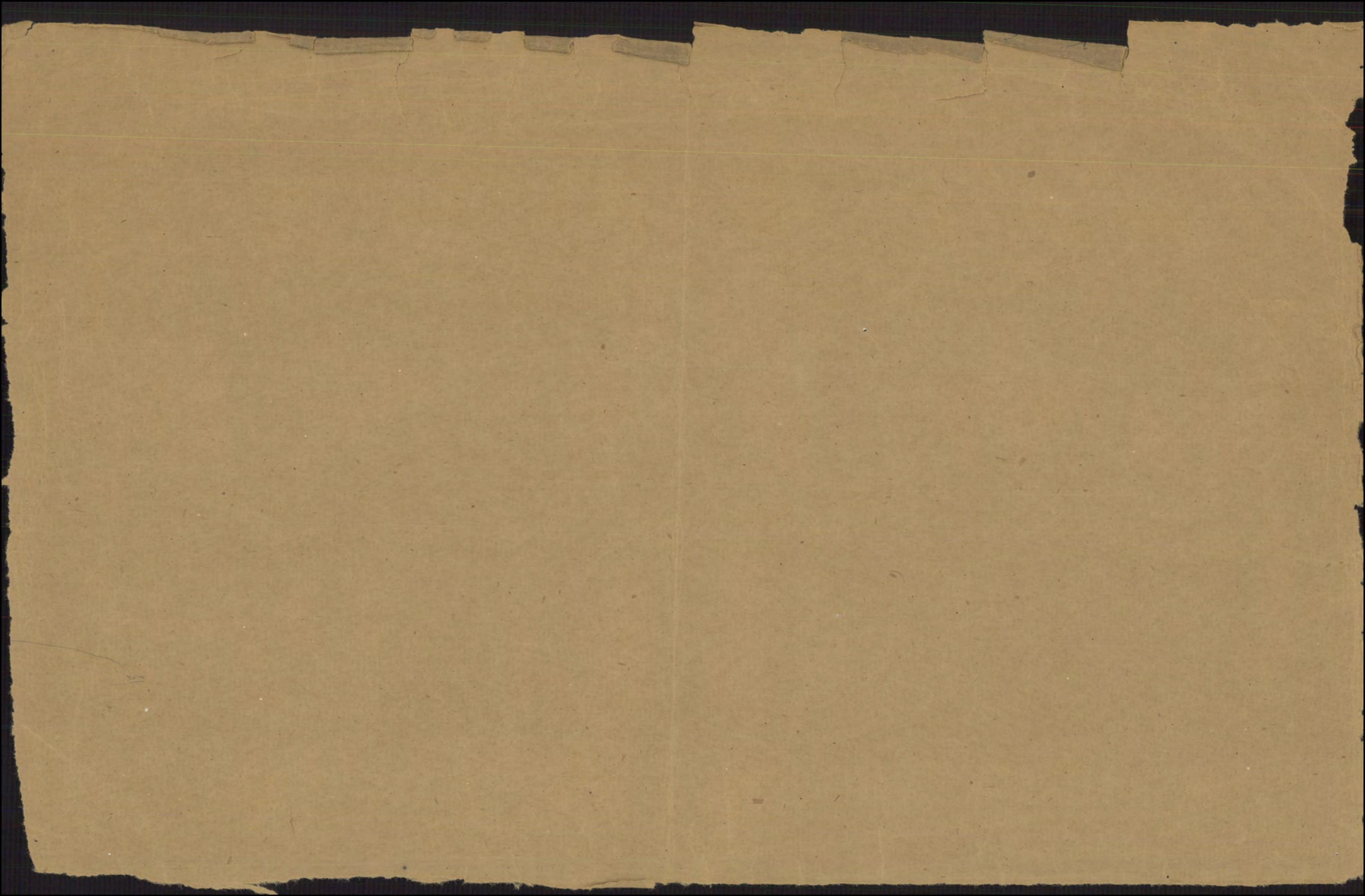
-2-

*d 7 B122-1  
Copy of will -1*

*1 R 149*

*original will  
copy of will*

*Handwritten scribbles in the bottom left corner.*



145211

**I.D. number**  
**No. d'identification**

GREENWOOD

**Surname**  
**Nom de famille**

d.o.w. 18/11/16

LEON

**Given names**  
**Prénoms**

**PERSONNEL RECORDS CENTRE**  
**CENTRE DES DOCUMENTS DU**  
**PERSONNEL**

**Location**  
**Lieu**

3801



# ORIGINAL MEDICAL HISTORY SHEET.

145211  
36

Surname Greenwood Christian Name Leon

Examined { on 26th day of Aug 1915  
 { at Cornwall, Ont.  
 Birthplace { City or Town St Jean Deschillien  
 { County Quebec

Approved by At Ross Alguie  
 Rank Quintonne M.O.

Apparent age 23 years  
 Trade or occupation Laborer  
 Height 5 Feet 5 Inches.  
 Weight 140 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.

Vaccination Marks { Arm Right Left X  
 { Number 2 marks

Date	Result	VACCINATIONS.
<u>23/11/15</u>	<u>Good</u>	<u>N.M. Halkett</u> M.O.
<u>28/4/16</u>	<u>Good</u>	<u>R.A. Kiji Botha</u> M.O.
		M.O.

When Vaccinated last 18 years ago  
 (a) Marks indicating congenital peculiarities or previous disease none

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>8/10/15</u>	<u>Good</u>	<u>N.M. Halkett</u> M.O.
<u>18/10/15</u>	<u>Good</u>	<u>N.M. Halkett</u> M.O.
<u>18/7/16</u>	<u>TAB</u>	<u>Jas. Singer</u> M.O.

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

Enlisted on 27th day of August 1915 at Quebec

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>77th C.E.F.</u>	<u>145211</u>		<u>27 Aug. 1915</u>
Transferred to.. ..	<u>38th</u>			<u>6 Dec. 1915</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.

59th S. & 4th Regt.

Christian Name *Leon*

Surname *Greenwood*

STATION.	Date of Arrival at the Station.	DATES OF						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.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
<i>St George's Bermuda</i>		<i>9</i>	<i>12</i>	<i>15</i>	<i>24</i>	<i>12</i>	<i>15</i>	<i>Gonorrhoea</i>	<i>16</i>	<i>Liquor 1/2% Potash. Fluid Alkaline. Recovery.</i>	<i>Percey Shelley Lieut Surgeon no. 1011</i>
<i>— —</i>		<i>3</i>	<i>1</i>	<i>16</i>	<i>17</i>	<i>2</i>	<i>16</i>	<i>Gonorrhoea</i>	<i>46</i>	<i>Rest in bed. Amputation of testis. Discharge S.P.A. Penang. Recovery.</i>	<i>Percey Shelley Lieut Surgeon</i>
<i>Prospect Bermuda</i>	<i>May</i>	<i>8</i>	<i>16</i>	<i>Examined for Active Service and found fit.</i>							<i>A. W. Bejibe Thom</i> <i>Duplicate Medical History sheet pasted to here.</i> <i>J. B.</i>



Greenwood, Pte. Leon, #145211, 38th Bn. H.Q. 649-G-4536.

M. & D. (Mother) Mde. Eveline Boisvert,  
108 rue Hanover,  
Labanon, N.H., U.S.A.

P. & S. " Ditto.

Serial No. 761708  
Mem. C. " Ditto.

Scroll Desp. DEC 17 1920 Reqn. No. 75481

Plague Desp. JUN 1 1922 Reqn. No. P39088

*Not relig. for star.*  
*" " U.S.M.*  
*" " B.W.M.*

*mf.*

*supp card destroyed 7-3-21*

*Si*

M 633637

834

REGT'L NO 145211 -

H. Q. FILE NO. 649-

NAME  
RANK AND CORPS

Greenwood Leon

Pte. 38<sup>th</sup> (Form 47<sup>th</sup> (2<sup>nd</sup> P.R.O. Bn)

FOLLOWS

No.

FOLLOWS

CABLE

No.

DATE

NATURE OF CASUALTY

05497- 28-11-16

C  
Died of wounds 2<sup>nd</sup> First Southern  
Midland Cav. Co. Station. Nov. 18<sup>th</sup> 1916 - ✓

A. F. B. 2090a

Died of wounds received in action

Rouen. 24-11-16

18-11-16. (France or Belgium) Rec. 7-2-17.

LIST No

HOSPITAL

DATE OF  
ADMISSION

REMARKS

a-67

O.C. 2/Wt. S. Midland  
Cas. Cl. Stat. rep.

18-11-16

Wied of wounds  
per list a 84 Bayonet wound R. hip & rectum

a 84

com.

Number 145211

Rank Plt

B

Surname GREENWOOD

W

Christian Name Leon

N

Units 38th Bn. Cavalry Theatre of War France

Date of Service 13. 8. 16. D

Remarks

Mother

Latest Address

Mrs Evelyn Boisset  
108-rue Hauvoet

Roll No.

B Page 13744 Labanon, U.S.A.

200m. -2-21.M.

U.S.A.

DESP. JUN 26 1922

REGN. NO.

41575

Name GREENWOOD

Rank Pte.

Reg. No. 145211

Unit Leon  
38th Battn.

Next of Kin U.S.A.

R 25-G-1395

Date 1916	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
18-11	O.C.2/1st South Midland C.C.S.reports.		No. 50 A67.05497.28-11			
<u>DIED OF WOUNDS</u>			Nature of Casualty now ascertained to be Bayonet Wound R.Hip & Rectum.			A84.
M.H.						





NAME

Greenwood, Leon

file #649245-36

D

RANK &amp; No.

Pte

145211

CORPS

47<sup>th</sup> (2<sup>nd</sup> R. D.)

Batt

ENLISTMENT, PLACE

Cornwall, Ont.

DATE

Aug. 27<sup>th</sup>, 1915 M.

FORMER CORPS

Nil

COUNTRY OF BIRTH

Canada St. Jean des Chaillons, P.Q.

NEXT OF KIN

Greenwood, Evalin Mrs. (Mother)

ADDRESS OF NEXT OF KIN

"Now" Mrs. Boisvert - "Mother" (Married)  
18 Hanover St. Lebanon, W. Va. U.S.A.

DISCHARGE, PLACE

auth G.M.W. 0671-29-11-11 4m

Sailed from Halifax Per SS "Grampian" 23-5-16

O/S 3-12-15  $\frac{289}{3}$ 

M. F. W. 22. 100 m. - 9-15.

L. L. 86779-M. &amp; D.-6011.

O/S 23.5-16  $\frac{439A}{9}$ 

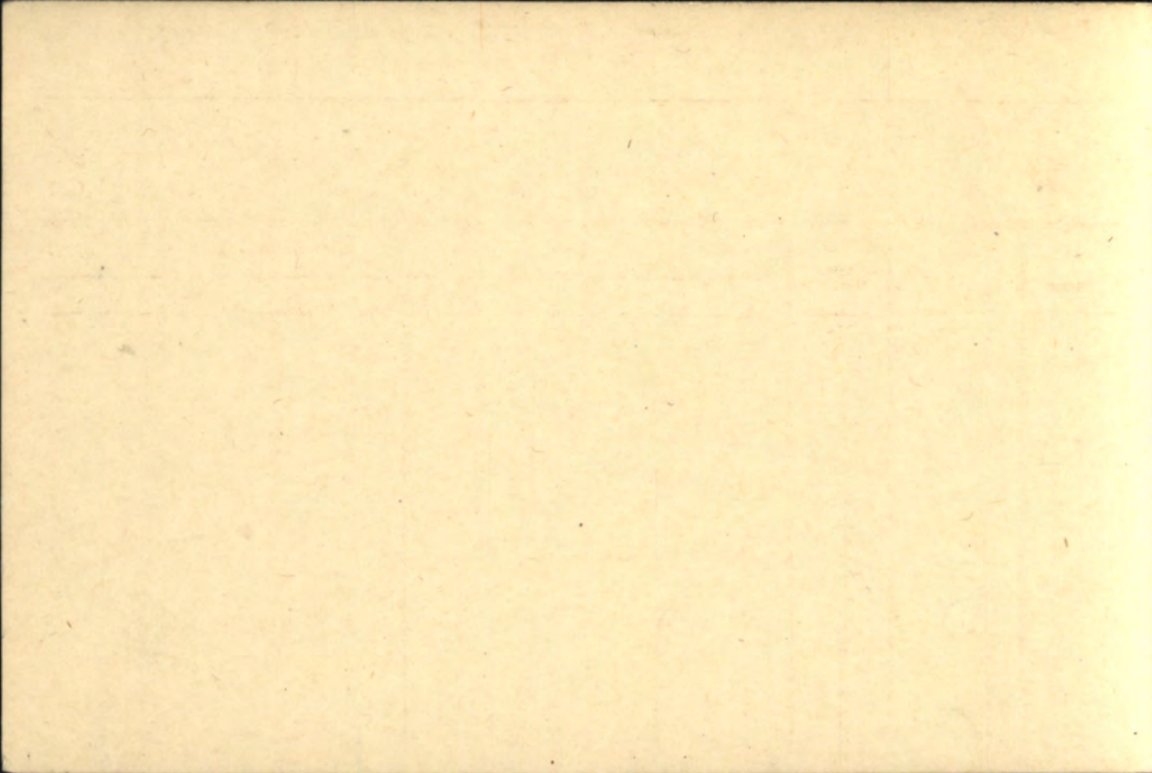
H. Q. 1772-39-839.

REMARKS:

No. 145211

RANK PltNAME Greenwood, LeonT. O. S. 26-9-15 (D.O. 79 of 29-9-15) UNIT 17<sup>th</sup> Battalion, C. E. F.M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Sept. 26	1915. Sept. 30	✓		
	Oct.	✓	Forfeited 2 days pay	D.O. 67 of 18-10-15
	Nov.	✓	Transf'd to 38 <sup>th</sup> Sn. Bermuda	D.O. 98 of 22-11-15 Nov. Paylist.



No. 145-211

RANK

Pte

NAME

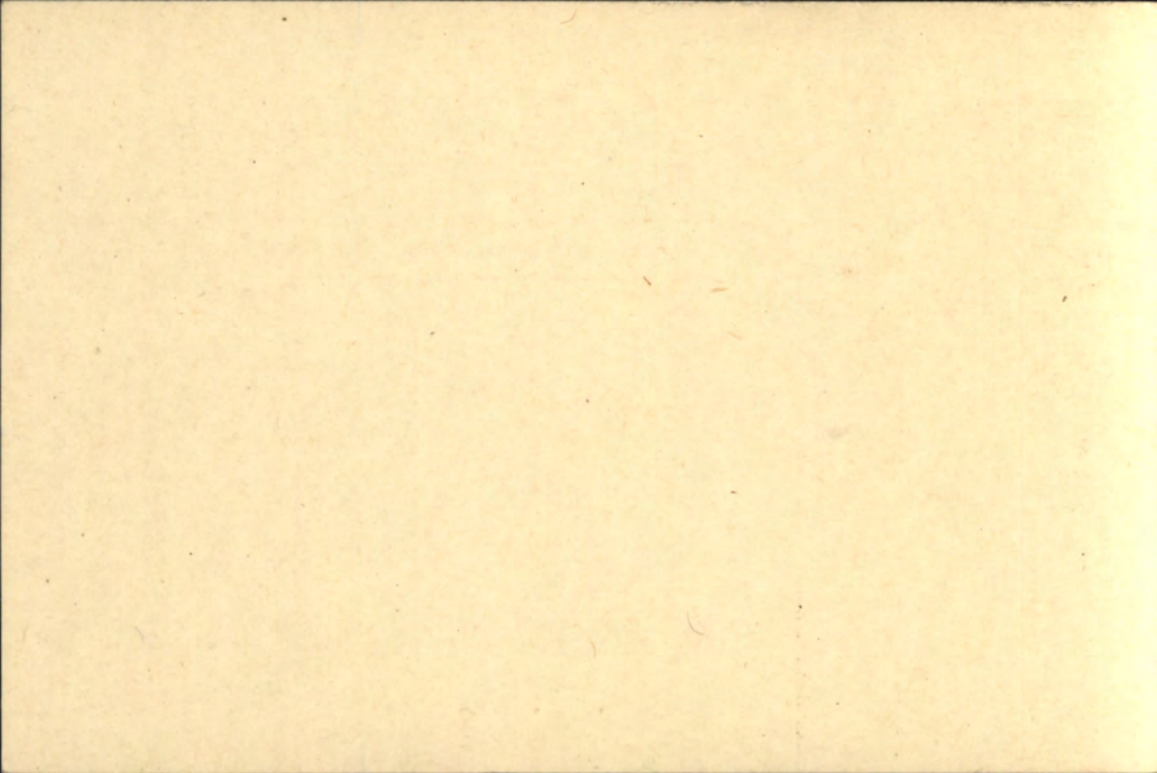
Greenwood, L.

T. O. S. 6-12-15- UNIT 38th. Battalion, C. E. 7.

D.O.# 227 of 16-12-15-

M. D. 3

PAID FROM	PAID TO	SIG OR. REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915- Dec 1 1916	1915- Dec 31 1916.	✓	In hospital	Jan payroll.
Jan		O.S.		
Feb		✓		
Mar		✓		
Apr		✓		
May		✓		
June		✓		



Surname *Greenwood* Christian Name or Names *L.* Reg. No. *145211*  
 Rank *Pte* Unit *38 Batt.* Co. Troop Batty.  
 Hospital *H. S. Midland C. C. Station* Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

*S. Bayonet wound R. Hip & Rectum*

(1)

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

*Died of wounds  
of R. Hip 18-11-16.*

DISPOSITION

Date

*eL  
28-11-16 a67  
18.12.16 Q84.*

REMARKS

A.M.D. 2 DEPT.  
Bch. of D.G.M.S. O.M.F.C. London.

# EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.



- 20 -

No. 145211

Name Leon Greenwood

Unit 38th Batt'ln, C.E.F.

MILITARY WILL

In the event of my death  
I give all my property  
and effects to my Mother  
Mrs Eveline Greenwood

108 Hanover St.

Lebanon N.H.

U.S.A.

Signature Leon Greenwood

Rank and Regt. Pte 38th Batt'ln

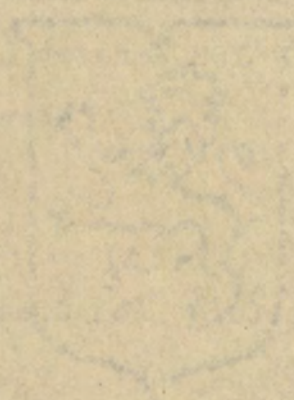
Date 26th July 1916

Certified a true copy

*H. H. H. H.*

Lieut.

*H. H. H. H.*



Carroll County

Deed Book

LTR

Rank

Name

GREENWOOD, Leon

Reg'l No.

145211

Unit

38TH. BN.

If in perm. Corps,  
What Unit?

Married or Single

Married

Place and Date of Enlistment

Cornwall. Aug. 27. 1915.

Place of Birth

St. Jean

Leischillien, Canada.

Name and Address, Next-of-Kin

Eveline Greenwood

108. Hanover St. Lebanon N. H. U.S.A. Relationship Mother

Assigned Pay Monthly \$

Payable to

Separation Allowance \$

Payable to

Relationship

N. E. R. B. Serial

Relationship

Discharge, Date and Place

*AWOL*

Reason

Character

N. E. R. B. No. 25-9-1395  
File No. 103  
Category D. W.  
No 3

*23/11/2011*

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.				
11 8-16	38th.	Embarked For France	Bramshott	13-8-16	Part 2 D. O. 167
24. 11. 16	✓	Died of Wounds	In the field.	18. 11. 16.	P. I. II D. O. 226.
28. 11. 16	✓	bc 2/1 <sup>st</sup> 5 MCCS Died of Wounds	"	18. 11. 16	C. R. #64 Bayonet Wnd. R. Hip Ch. 1581- + Rectum

*DW.*

*AWB. 103. ch. 21/16*



CERTIFIED CORRECT.

30 AUG 1916

CAN. RECORDS, LONDON.

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

Casualty Form—Active Service.

M. F. W. 54.  
150M. 10-15.  
H.Q. 1772-30-920.

Unit, Regiment or Corps 38th Bn. C.E.F.

Regimental No. 145211 Rank Private Name Leon Greenwood.

C. E. F.

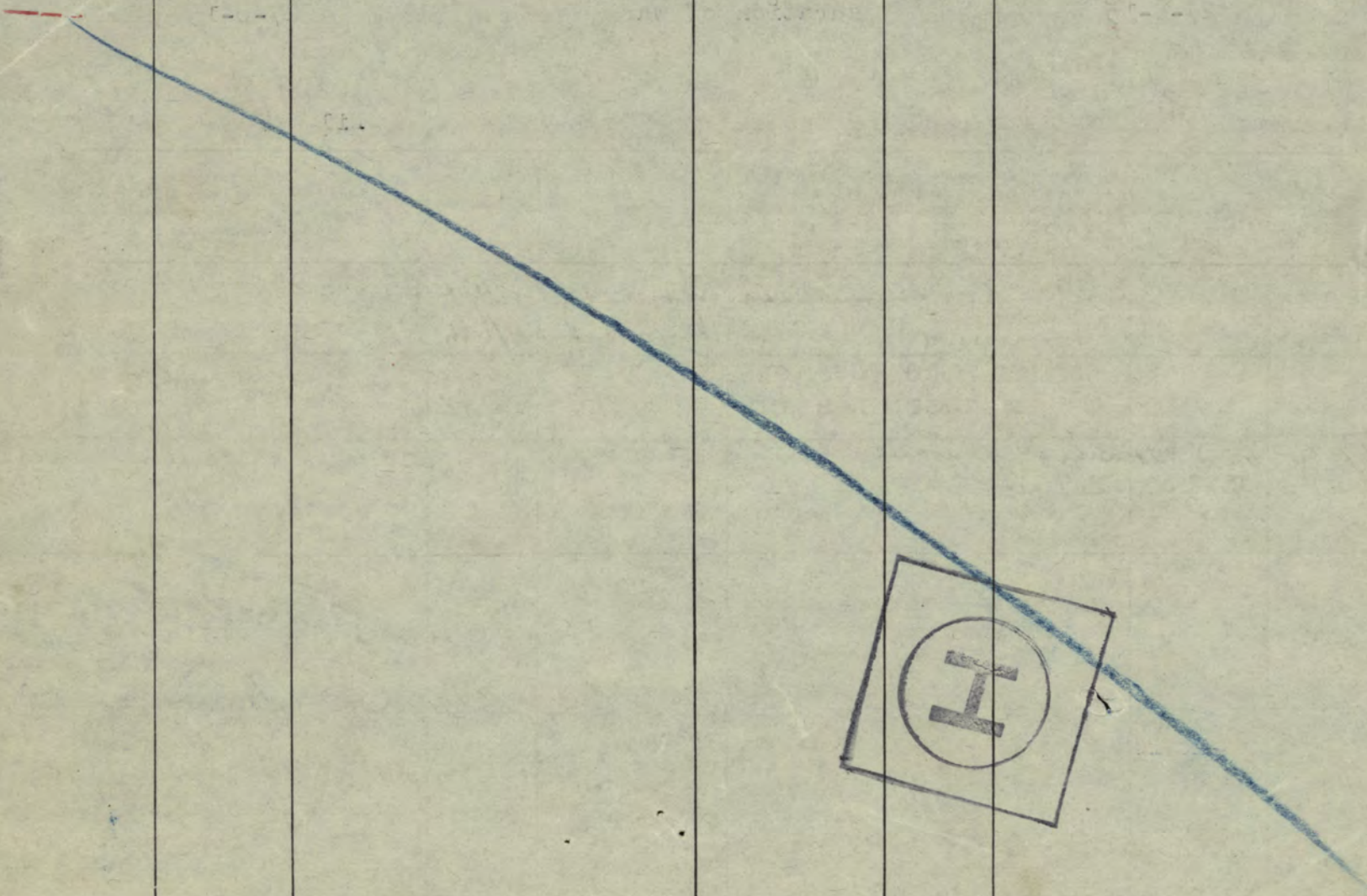
Enlisted (a) 27-8-15 Terms of Service (a) duration of war Service reckons from (a) 27-8-15

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) N1 (Labourer)

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked <u>Hampshire</u>	Bermuda	29/5/16	Per. S.S. "Grafton"
		Arrived	Plymouth	9/6/16	
		PROCEEDED FOR SERVICE OVERSEAS DISEMBARKED	HAVRE	13/8/16 14-8-16	Lieut. Colonel 38th Bn. Can. Expeditionary Force
19. 11. 16	2/1st. S. Mid. C. C. S.	Died of wounds rec'd in action.	Field	18. 11. 16	CC. 2/1st. S.M.-C.C.S. rep. Can Sect I 137-2232 PCS 43-4/24. 11. 16. P. II O. 226-4/24. 11. 16.
					<i>James M. J. J.</i> Lieut. Colonel 38th Bn. Can. Expeditionary Force

(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.

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				
					



Register No. *04867*

WAR SERVICE GRATUITY  
TO  
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. *7397-L-2*

*69*  
Reg't No. *145211* Name *Leon Greenwood*  
(Christian Name) (Surname)  
Unit *2nd R 10* Rank *Pte.* Date of enlistment.....  
Date of casualty *18. 11. 16.* B.P.C. File No. *97418*  
Was service performed overseas? *yes*

DEPENDENT

Name *Mrs E. Boisvert, nee Greenwood* Relationship *wid. Mother*  
Address *108 Hanover St,  
Lebanon,  
N.H., U.S.A.*

Amount of Special Pension Bonus \$ *nil* Abstracted by *M. Knopf*

Eligible for Gratuity ..... \$ .....

Less amount of Special Pension Bonus paid..... \$ .....

Less Debit Balance of S. A. or A.P..... \$ .....

Total deductions \$ .....

Balance due \$ .....

Cheque No..... Date issued.....

REMARKS :

*not eligible no S.A.  
paid*

Clerk

*J. Lebourt*

Audited by

Date

M.F.W. 2652  
25M-6-20.  
H.Q. 1772-39-1473

# POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name \_\_\_\_\_ Surname \_\_\_\_\_ Christian Name \_\_\_\_\_

Regimental Number \_\_\_\_\_ Rank \_\_\_\_\_ Address (in full) \_\_\_\_\_

Unit \_\_\_\_\_

Original Unit \_\_\_\_\_

District where paid \_\_\_\_\_

Date of Discharge \_\_\_\_\_

P. D. P. Filing Number \_\_\_\_\_

Rates:—Regimental pay \$ \_\_\_\_\_ per diem; Field Allowance \$ \_\_\_\_\_ per diem. Separation Allowance \$ \_\_\_\_\_ per month.

L.L. 53961—M. & D. 9721

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. P	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

M. F. W. 127  
 300M-1-19  
 1772-39-1140

Remarks.



*nr*

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

62

To Whom *Mrs Evelyn Greenwood*  
 Address *108 Hancock St  
 Lebanon, N.H.  
 U.S.A.*

By Whom Assigned *Greenwood Leon*  
 Regtl. No. *145211*  
 Rank *Pte*  
 Corps *BC 38 Bata*

Rate *15<sup>00</sup>/<sub>100</sub>*

JUN 1 - 1916

**PAYMENTS**

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<div style="border: 2px solid black; padding: 10px; display: inline-block;"> <p><i>Casualties</i></p> </div> <p><i>Died of wounds 18<sup>th</sup> Nov/16 CL(8) 29/11/16</i></p> <p><i>Stop payments Dec/16</i></p> <p><i>Died of wounds 5<sup>th</sup> Nov. 13<sup>th</sup> 1916 - July 12/17</i></p> <p><i>J.V. 5-12-16</i></p>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

Handwritten text, possibly a signature or initials, located in the center of the page. The text is faint and difficult to decipher, but appears to consist of several lines of cursive or shorthand writing.

**ASSIGNED PAY**

OVERSEAS CONTINGENTS

PAYMENTS.

Sheet No. 2.

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

*M*  
*Ms Evelyn, Greenwood*

Name of Soldier

*145211*

*63 Greenwood, Leon*  
*B Co 38 Bnlt*

Month.	Year.	Cheque No.	Amt.	Remarks.
			<i>15<sup>00</sup></i>	<i>JUN 1 - 1916</i>
April	1916			
May				
June		<i>D6133</i>	<i>15</i>	<i>Casualties</i>
July		<i>W 12267</i>	<i>15</i>	
Aug.		<i>S 13921</i>	<i>15</i>	
Sept.		<i>T 17549</i>	<i>15</i>	
Oct.		<i>T 22692</i>	<i>15</i>	
Nov.		<i>R 22291</i>	<i>15</i>	
Dec.		<del><i>m 30922</i></del>	<del><i>15</i></del>	<i>a/c closed cas</i> <i>" " Dec/16 JAG</i> <i>per notes per pensions</i>
Jan.	1917		<i>90</i>	
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

*sm3.*

*Cancel*

*Total*  
 F. X. Rend. Date ..... By ..... \$ 90-  
 E. F. X. " Date *16/12/17* By *JAG*

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

*M. S.*

PLACE OF BIRTH

*St. Jean Leischillian Canada*

NAME AND ADDRESS OF NEXT OF KIN

*Eveline Greenwood  
108 Hanover St. Lebanon NH Usa.*

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
<i>Died of Wounds</i>	<i>18/11/16</i>

ADMISSIONS TO HOSPITAL, &c.

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

DATE	PAY			FIELD ALLOWANCE			WORKING OR SPECIAL PAY			ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE RECEIPTS					
	NO. OF DAYS	RATE	AMOUNT	NO. OF DAYS	RATE	AMOUNT	NO. OF DAYS	RATE	AMOUNT				ACQUITTANCE RECEIPTS					
													\$	c.	\$	c.	\$	c.
<i>1916</i>																		
<i>June 30</i>	<i>100</i>		<i>30 00</i>	<i>30</i>	<i>10</i>	<i>3 00</i>						<i>33 00</i>	<i>18</i>	<i>13 6/16</i>	<i>62</i>	<i>3 7/16</i>		
<i>July 31</i>	<i>"</i>		<i>31 -</i>	<i>31</i>	<i>"</i>	<i>3 10</i>						<i>34 10</i>	<i>107</i>	<i>15 7/16</i>				
<i>Aug 31</i>	<i>"</i>		<i>31 -</i>	<i>31</i>	<i>"</i>	<i>3 10</i>						<i>34 10</i>	<i>158</i>	<i>1 5/16</i>				
<i>Sept 30</i>	<i>"</i>		<i>30 -</i>	<i>30</i>	<i>"</i>	<i>3 -</i>						<i>33 -</i>	<i>206</i>	<i>22 9/16</i>				
<i>Oct 31</i>	<i>"</i>		<i>31 -</i>	<i>31</i>	<i>"</i>	<i>3 10</i>						<i>34 10</i>	<i>306</i>	<i>30 2/16</i>				
<i>Nov 18</i>	<i>18</i>		<i>18 -</i>	<i>30</i>	<i>"</i>	<i>3 -</i>						<i>21</i>	<i>422</i>	<i>2 1/16</i>				
			<i>18 -</i>									<i>33</i>	<i>363</i>	<i>16 10/16</i>				
<i>Dec</i>												<i>189 30</i>	<i>481</i>	<i>15 11/16</i>				

*Checked*

*July 17*

*Canadian Gov. - Pay (90.00) in Agreement with Ottawa Slip*

Statement of  
JUN 8 1917  
Account rendered

AUTHORITY  
 bk A67. 28<sup>11/16</sup>

REG'L. No. 145211 RANK *Pto* NAME *Greenwood Leon*  
 IF IN PERM. CORPS | UNIT *38th Batt* TRANSFERRED TO *NE Br.* DATE *19/11/16* AUTHORITY *CL A67. 28<sup>11/16</sup>*

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY  
 PLACE OF ATTESTATION *Barnwall* TRANSFERRED TO DATE AUTHORITY  
 DATE OF ATTESTATION *27 Aug/15* TRANSFERRED TO DATE AUTHORITY



ASSIGNED PAY MONTHLY \$ ~~1500~~ DATE EFFECTIVE *1 June 16*  
 PAYABLE TO *Mrs. Eoeline Greenwood, 108 Hanover St. Lebanon N.H.* RELATIONSHIP *Mother USA*

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE  
 PAYABLE TO RELATIONSHIP  
 STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *28/11/16* EFFECTIVE *1/12/16* REASON *Died of Wounds. 18<sup>11/16</sup> (P.O. 226-24<sup>11/16</sup>) C.L. A67. 28<sup>11/16</sup>*

DISCHARGE DATE AND PLACE *19/11/16 Guild* REASON AND AUTHORITY *Died of Wounds. 18<sup>11/16</sup>. CL A67. 28<sup>11/16</sup>*  
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) *19/11/16*  
 ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

Entered on N.E. Card Index *EJ*  
 Checked by *J.E. Wheeler*

ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
3	4		1	2	3	4	CREDIT				DEBIT				
O.	DATE	No.	DATE												
				973	730			1500		3203	97				
				730				15-		2230	1277				
				730				15-		2230	2457				
				262				15-		1762	3995				
				523				15-		9425					
				261				15-		2023	5382				
				262				15-		2285	5797				
				4265	730			45	<del>1320</del> 120	382	4815				
								90	120	14115					
														<i>Died of Wounds. 18<sup>11/16</sup>. CL A67. 28<sup>11/16</sup></i> <i>Trans to NE Br. 19<sup>11/16</sup></i> <i>for error in calculation of field alle...</i> <i>now pay list \$300 should be 11.00</i>	
														<i>Followed on for Det. 9-7-17 1125</i>	

HQ. 593. -i-12. d/20. 12. 16







Perforated sheet for Will from Pay Book of Reg.

No. 145211

Name Leon Greenwood

Unit 38<sup>th</sup> Batt<sup>le</sup> C.C.F.

Military Will.

In the event of my death  
I give all my property  
and effects to my Mother  
Mrs Evelyn Greenwood  
108 Hanover St.  
Lebanon N.H.  
U.S.A.

Signature Leon Greenwood

Rank and Regt. The 38<sup>th</sup> Batt<sup>le</sup>

Date 26<sup>th</sup> July 1916

33104

