

bc A.M

ORIGINAL
No. 3156117
Folio.

ATTESTATION PAPER.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... Grimard
- 1a. What are your Christian names?..... Jean U.S.A.
- 1b. What is your present address?..... Bremer St. Manchester, N.H. Sub. Adm. (M)
2. In what Town, Township or Parish, and in what Country were you born?..... Ste. Anne de la Parade, Que
3. What is the name of your next-of-kin?..... Arthur Grimard
4. What is the address of your next-of-kin?..... Manchester, N.H. U.S.A. Sub. Adm. (M)
- 4a. What is the relationship of your next-of-kin?..... Brother
5. What is the date of your birth?..... 25th March 1883
6. What is your Trade or Calling?..... Laborer
7. Are you married?..... Single
8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... YES
9. Do you now belong to the Active Militia?..... NO
10. Have you ever served in any Military Force?..... NO
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement?..... YES
12. Are you willing to be attested to serve in the } CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } YES
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? .. NO
14. If so, what was the nature of the disability? .. NIL
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected? .. NO
16. If so, what was the reason?..... NIL

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Grimard Jean, 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.

Jean Grimard (Signature of Recruit)

Date Februaty 7th 1918. *H. Perrier* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Grimard Jean, 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.

Jean Grimard (Signature of Recruit)

Date February 7th 1918. *H. Perrier* (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 Montreal, Que this 7th day of February 1918.

M. Perrier (Signature of Justice)

Description of Grimard Jean on Enlistment.

Apparent Age.....34.....years.....11.....months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height.....5'.....4.....ft.....ins.

Chest measurement { Girth when fully expanded.....37.....ins.
 Range of expansion.....5.....ins.

Complexion.....Medium.....

Eyes.....Brown.....

Hair.....Brown.....

Religious denominations. { Church of England.....
 Presbyterian.....
 Methodist.....
 Baptist or Congregationalist.....
 Roman Catholic.....XX
 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).

R. D. = 30
 L. D. = 30
 R. EAR OK
 L. EAR OK

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*.....for the **Canadian Over-Seas Expeditionary Force.**

Date.....February 7th.....1918.

Place.....Montreal, Que......

Declared **FIT** by **MEDICAL BOARD**
MOBILIZATION CENTRE, M. D. #4
J. J. Milleau
 Medical Officer.
 President, C. M. S.

*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:—

"A" Fit for General Service

CERTIFICATE OF OFFICER COMMANDING UNIT.

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

J. J. Milleau (Signature of Officer)

Date.....February 7th.....1918.

REGIMENTAL DOCUMENTS

NAME

Grimard Jean

REGT. NO. *315-6117* UNIT

H. Q. FILE NO.

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

S

M

Category
Kind

29345

DISCHARGE

Category

H

DESERTION

9-12
28-13
28-13
7

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

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

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

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

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

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

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

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

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

MEDICAL EXAMINATION (M.F.W. 129)

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

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

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

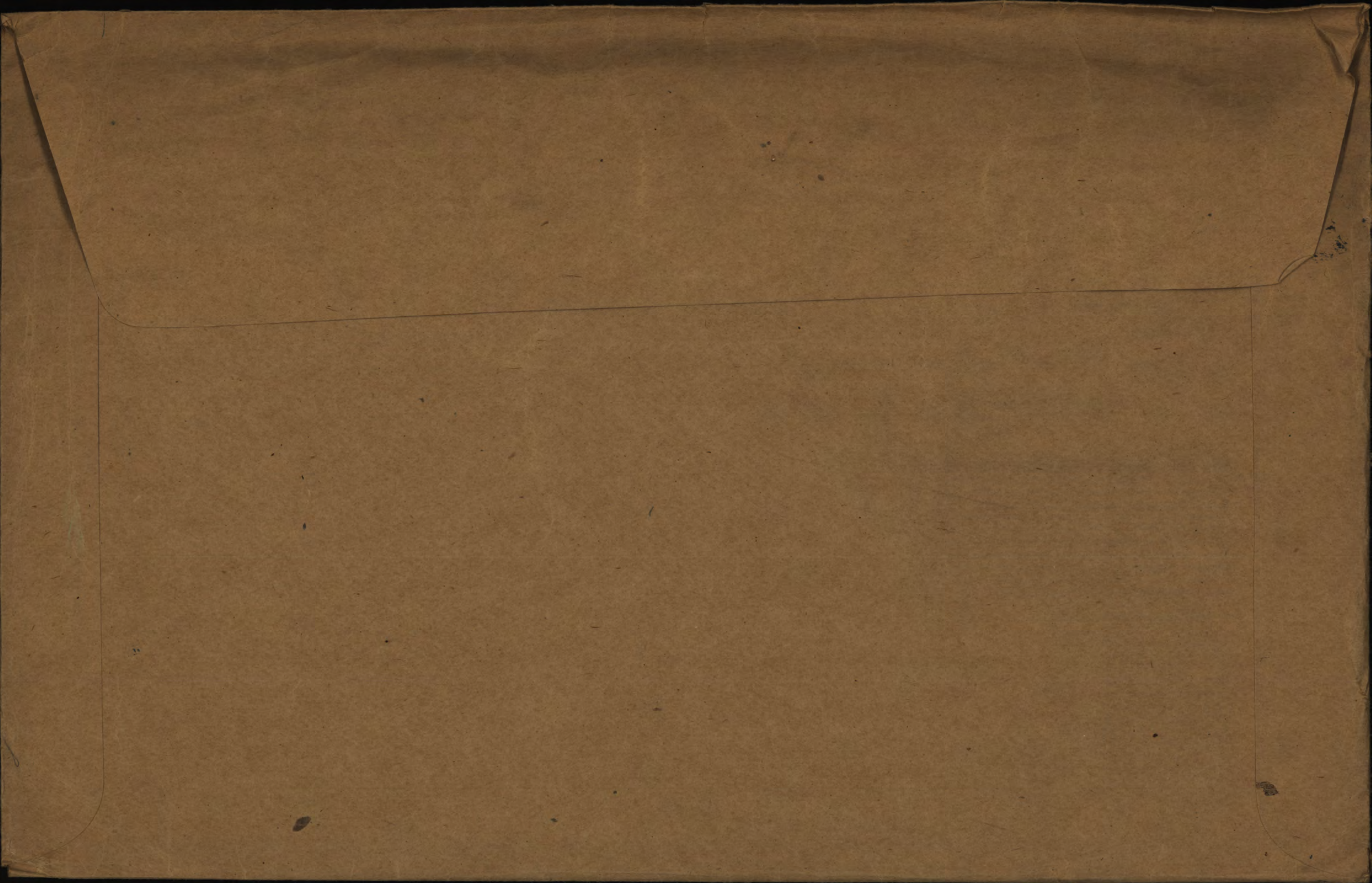
LAST PAY CERTIFICATE (M.F.W. 44)

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

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

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

2 card
will pay copy
A B 2



No. 3156117 RANK

Pte

NAME

Grimard, Jean,

T. O. S.

8-2-18,

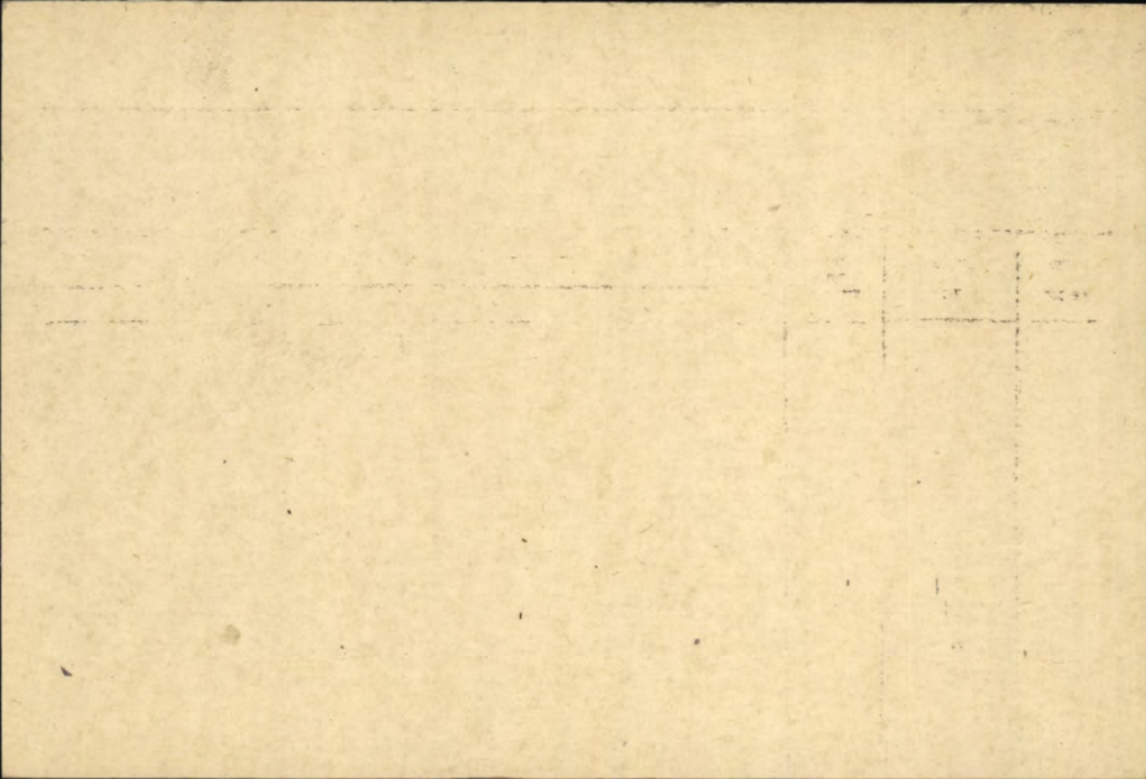
UNIT

2nd Depot Battalionrd Quebec Regt.

RD#1 of 10-2-18.

M. D. H.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918 Feb 8	1918 Feb 15		Overseas 10-2-18	RD#1 of 10-2-18



ER. *D*
Number 3156117. Rank Pte. *B*

Surname GRIMARD.

Christian Name Jean *V*

Units 87th Bn Ban Inf Theatre of War France.

Date of Service 20-8-18. *D.*

Remarks

Latest Address *(B)* Alfred Grimard, Esq.
214 Bremer St.,

Roll No. *B. Page 15380* Manchester, N. H.
USA.
200m.-2-21.M.

DESP JUL 27 1922

REGN. NO. GV47580

NAME

Grimard Jean

RANK AND CORPS

*Pvt. 87th Bn. form 2nd*REGT'L. No. *3156117*

H. Q. FILE No. 649

FOLLOWS

No. *1000000**3rd ARD.* FOLLOWS

CABLE

NATURE OF CASUALTY

NO.

DATE

*amb L.**M. K. 9-4-19.**Arthur Grimard (brother)
214 Bremer St
Manchester N. H. U. S. A.**34-4
P322**17-9-18.**Killed in Action Sept 2nd 1918.**AL 0320**16-9-18.*

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS



8/9/18

649-2-14608

CARD NO.

SURNAME. *Grimard.*

CHRISTIAN NAMES *Jean.*

FOLL.

REGL. NO. *3156 117.*

RANK *Pte*

T.O.S. 8-2-18

UNIT *2nd Que. Regt. 2nd Lf. Bn (3rd P.L.)*

DD FORM NO 41

FORMER CORPS *Inf.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL *Grimard, Arthur.*

RELATIONSHIP TO SOLDIER *Brother.*

ADDRESS *Manchester, N.S. U.S.A.
214 Bremer St.*

and letter 9/4/19-

COUNTRY OF BIRTH *Canada. Ste Anne de la Perade, P. Q.* DATE *Mar. 25th - 1883*

PLACE OF ATTESTATION *Montreal, P. Q.* DATE *Feb. 7th - 1918.*

*"S.S. Sazonia" Halifax 28/2/19. 1089
5'*

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE

m
649- G- 14608

GRIMARD, Pte. Jean, # 3156117 - 87th Bn

Med & D

(Brother) Alfred Grimard Esc.,
214 Bremer Street

Scroll Desp. JAN 14 1923 Reqn. No. Z10140 Manchester, N.H. USA

Plague Desp.

P & S

Reqn. No. P21810

(Brother) Hercule Grimard Esc.,
Prescott St.
Manchester, N.H. USA

Mem Cross

(NIL)

not elig. for star.

" " V.M.
m.f. " " B.W.M.

40414
a



Surname

Christian Name or Names

Reg. No.

Grimard

J.

3156117.

Rank

Unit

Que 87

Plc

Cas. List.

16.9.18 a330

L. F. B. Killed - Action 2.9.18.

A.M.D. & DEPT.
Bull of D.G.M.S. O.M.F.C. London.

Cas. List.

ORIGINAL

MILITARY SERVICE ACT, 1917.

3156117

MEDICAL HISTORY SHEET.

ORIGINAL

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar

- 1. Surname Grimard Christian name Jean
- 2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule.....
- 3. Consecutive number on schedule of men reporting for service (if he appears on it).....
- 4. Address (including street and number, if any)..... Bremer St. Manchester, N.H.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the _____ day of _____ 1917, by the undersigned medical board sitting at _____

- 5. Age as stated 34 Years 11 Months.
- 6. Apparent age _____ Years _____ Months
- 7. Height 5 Feet 4 Inches.
- 8. Weight 118 Pounds.
- 9. Chest measurement { Minimum 33 Ins. Maximum 37 Ins.
- 10. Complexion Medium { Eyes Brown Hair Brown
- 11. Physical development Good { Good Fair Poor
- 12. Smallpox marks Well
- 13. Number of vaccination marks { Right arm _____ Left arm 1
- 14. When vaccinated last Feb 9-1918
- 15. Distinctive marks and marks indicating congenital peculiarities or previous disease _____

- 16. Slight defects but not sufficient to cause rejection Tattoo both arms
- The man denies having had { Rheumatism Tuberculosis Syphilis We find no evidence of past { Rheumatism Tuberculosis Syphilis (Strike out disease admitted or suspected.)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category A2

W. Williams President. H. Aubrey Member. W. W. ... Capt Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
11/2/18		<u>Subsequent Capt</u> M.O.	11/2/18		<u>Subsequent Capt</u> M.O.
		M.O.	17/5/18	<u>Typhoid</u>	M.O.
		M.O.	24/5/18	<u>Typhoid</u>	M.O.

Joined 7th day of February 1918 at Montreal, Que

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>2nd Dp. Bn.</u>	<u>3156117</u>		<u>7-2-18</u>
Transferred to.....	<u>2nd Que. Rgt.</u>			
	<u>87 Bn</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT

FORM OF WILL.

Name in full.

1011

I Jean Guinard

Regimental Number 3156117 serving in 10th Can. Res. Bn.

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

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

I DEVISE and BEQUEATH all my real estate unto

[Handwritten signature]

absolutely, and my personal estate I bequeath to

Name & Address of persons or person to receive personal estate (see Note 1.)

Alfred Guinard
Manchester Alsace St.
New Hampshire
U.S.A.

Fill in Date and Year.

IN WITNESS WHEREOF I have hereunto set my hand this fourteenth day of March A.D. 1918.

Jean Guinard
(Signature)

Signed by the said Testator as his last Will and Testament, the same having been read over and explained to him, in the presence of us both present at the same time who at his request and in his presence and in the presence of each other have subscribed our names as witnesses.

ESTATES BRANCH

NOV 1 1918

MILITIA DEPT.

Name of Witness L. A. Besterman

Address of Witness 10th Can. Res. Bn.

Occupation of Witness Sgt.

Name of Witness L. A. Proulx

Address of Witness PAYMASTER, 10TH. RES. BATT'N.

Occupation of Witness

N.B.—Personal Estate includes pay, effects, money in Bank, ~~insurance policy~~, in fact everything except real Estate.

FORM OF WILL

Name of testator _____
 Testamentary Number _____
 I, the testator, do hereby declare that this is my last Will and Testament, and I hereby bequeath all my real and personal estate unto _____

Name & Address of person or persons to receive bequest (see Note 1) _____
 I hereby bequeath unto _____

Date of Will _____
 Signed by me _____

Name of Witness _____
 Address of Witness _____
 I, the witness, do hereby certify that the testator is of sound mind and memory, and that he has read and approved the contents of the foregoing Will, and that he has signed the same in the presence of me, and that he has signed the same in the presence of the testator, and that he has signed the same in the presence of the testator.

ESTATES BRANCH
 NOV 1 1918
REGISTERED
WILL SECTION
27 MAR 1918
 ESTATES, O.M.F.C., LONDON.

Personal Estate includes pay, shares, bonds, and other securities, and also includes any property which may be held in trust for the testator, and also includes any property which may be held in trust for the testator.

FORM OF WILL

85-

I, Grimard Jean (Name in full)
Regimental Number 9156117 2nd Depot Bn. 2nd Quebec Regiment
serving in

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

I devise all my real estate unto

Alfred Grimard
Manchester, N.H. U.S.A.
Name and Address
of person or
persons to whom
it is to go.

absolutely, and my personal estate I bequeath to

Alfred Grimard
Manchester, N.H. U.S.A.
Name and Address
of person or
persons to receive
personal estate*
(See note).

NOTE

This space for the appointment of Executor if necessary.

IMPORTANT NOTE

This must be signed and Dated by THE SOLDIER HIMSELF.

this 8th day of February A.D. 1918
Jean Grimard Signature of Soldier.
mark

*N.B. Personal estate includes ~~property, 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.

Signature of First Witness H. Perrier
Address of Witness Lecl St Barracks, Montreal

THE TWO WITNESSES MUST SIGN HERE

Occupation of Witness Soldier
Signature of Second Witness B. Hanson
Address of Witness Lecl St Barracks Montreal
Occupation of Witness Soldier

FORM OF WILL

Vertical text on the left side, possibly bleed-through from the reverse side of the page.

I, the undersigned, of legal age and sound mind, do hereby declare this to be my last will and testament, and I do hereby bequeath, devise and dispose of all the property which I own at the time of my decease to the following persons, to wit:

1. I bequeath to my dear wife, Mrs. [Name], the sum of \$1000.00, to be paid to her immediately upon my decease.

2. I bequeath to my dear daughter, Miss [Name], the sum of \$500.00, to be paid to her immediately upon my decease.

I hereby declare that I am not making this will under any duress, constraint, or undue influence, and that I am fully aware of the nature and extent of the property which I am disposing of, and of the persons to whom I am bequeathing the same.

In testimony whereof, I have hereunto set my hand and seal at the city of [City], State of [State], this [Date] day of [Month], 19[Year].

Casualty Form - Active Service.

Regiment or Corps 2nd Depot. Bn. 2nd Quebec Rgt
 Rank Pte Surname Grimard Christian Name Jean ✓
 Religion P. C. Age on Enlistment 34 years 11 months ✓
 Enlisted (a) 7.2.18 Terms of Service (a) O. of. W. Service reckons from (a) 7.2.18
 Date of promotion to present rank..... Date of appointment to lance rank.....
 Extended { } Re-engaged { } Qualification (b) Laborer
 or Corps Trade and rate.....
 Occupation..... Signature of Officer.....

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked ...	Canada	18.2.18	
		Disembarked ...	England	4.3.18	
5.3.18	10 th Can Res Bn	10.5 on arriving from Canada	Witley	4.3.18	D.O.P.I. 57 ✓
21-8-18	O. C. 10th. Res. Bn.	Transf. to 23 rd Bn. C. E. F. on proceeding overseas	B'sholt	20-8-18	D. P. 11. O. 197 ✓
			4 Ass-Adj.	10th. Can. Res. Bn.	
21/8/18	23rd. CAN. RES. BN.	TAKEN ON STRENGTH	B'sholt	20/8/18	D.P. II. O. No. 293
21-8-18	do	lasted to 87 th Bn	Branchet	20.8.18	D.P. II. O. No. 293

CERTIFIED CORRECT.
 29 AUG 1918
 CAN. RECORDS, 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) Signaller, Shoeing-Smith, &c.
 W. 8655-31253 2000m 9/17 (35611) C. P. & S., Ltd., Form B.103 E/1807, P.T.O.

Dft. 2nd Depot BN 2nd Que, REGT

LTR

Rank

Name

GRIMARD, Jean

Reg'l No.

3156117

Unit

If in perm. Corps, }
What Unit? }

Married or Single

Single

Place and Date of Enlistment

Montreal. Feb, 7th, 1918.

Place of Birth

Ste Abbe de

Name and Address, Next-of-Kin

Arthur Grimard

la Perade Que.

Manchester N.H.

USA.

Relationship

Brother.

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason

Character



N/E. R.B. No 13038
File R.L. 2593036
KILLED IN ACTION

*mx.
22/2/1918*

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
			Arrived in England	4-3-18	S/S SAXONIA
5-3-18	10 th Res	Taken on Strength	Witley Pt	4-3-18	DO 57 ^{183rd} _{29.8.18}
21-8-18	---	S O S to 23 rd Res Bn	B'Skott	20-8-18	Pt ID 197 + 23 rd Res Do 233 d/21/18
21-8-18	23 Res	S O S to 84 th Bn of Sea	---	20-8-18	Do 233. 84 th Bn Do 45 d/25/18
16-9-18.	Q.R.	Killed in Action.	Field	2-9-18	Call. 320.
11.9.18	84 th Bn	---	---	2.9.18	Pen. 85

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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.					



* Strike out whichever inapplicable.

ASSIGNED PAY	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.	NAME:- CRIMARD <i>fran</i>				
EFFECTIVE DATE:-		EFFECTIVE DATE:-		NUMBER:- 315617				
AMOUNT:-		AMOUNT:-		PARTICULARS OF RANK OR APPOINTMENT				
NAME, ADDRESS, RELATIONSHIP & AUTHORITY				WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.				
				AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT		
					RE			
				UNIT AND TRANSFERS				
				ORIGINAL UNIT:- 2. Que. Dep. Br.				
				DATE ACCOUNT FIRST OPENED:- 16.2.18				
				AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'3'0	UNIT TRANSFERRED TO	
							2. QRD.	
				00.75. 25.8.18	22.8.18		87 Br	
				Head	1-10-18		"u.c." "D"	
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS				UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK				
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	
				DAILY RATES OF PAY AND ALLOWANCES				
				AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
					1	10		

PAY BOOK CHECKED
Date 13-11-18
By *[Signature]*
S.E. BRANCH.

PARTICULARS OF RENDERING NON-EFFECTIVE:-

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
31-3-18	bal. fwd								1990	2250	
April	p.p.	33-		AR 52 12/4/18. 10 Res Br	487				4316	3750	
		33-		AR 146. 24.4.18 do	487						
MAY				AR 264. 15/5/18. 10 Res.	487				6929		
	pp	3410		AR 402 26/5/18 do	487				10259		
		3410			487				9752	5250	
JUN	p.p.	33-		AR 503 13.6.18. do.	487				13052		
		33		AR 630. 26.6.18. do.	487				12565		
		33			487				12078	6750	
JUL				AR 785. 15.7.18 do.	487				11591		
	p.p.	3410		AR 730. 15.7.18. do.	2920				8671		
		3410		AR 914. 26.7.18. do.	487				12081		
		3410			3874				11594	8250	
AUG	p.p.	3410		AR 1064 15.8.18 do.	430				15004		
		3410		AR 1089. 30.8.18. Echo Details	357				14274		
		3410			1087				13917	9750	
SEP		33							17217		
		33									
Feb	Int on Debit	375							17592		
		375									

NON EFFECTIVE ACT.

112.50
NE SOL. 17-1-19
Ca. 17592

