

ORIGINAL

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917
 (Class 1)

PH Copy

1. Surname..... **HAWLEY**

2. Christian name..... **Herman Elvett**

3. Present address..... **Magog Que.**

4. Military Service Act letter and number..... **31161 DR.**

5. Date of birth..... **May 16th 1896**

6. Place of birth..... **Waterloo Que.**
(town, township or county and country)

7. Married, widower or single..... **Single**

8. Religion..... **C of E.**

9. Trade or calling..... **Electrician**

10. Name of next-of-kin..... **Mr. Samuel Gale Hawley**

11. Relationship of next-of-kin..... **father**

12. Address of next-of-kin..... **Magog Que.** SUFFICIENT ADDRESS *PH*

13. Whether at present a member of the Active Militia..... **no**

14. Particulars of previous military or naval service, if any..... **no** *MBN.*

15. Medical Examination under Military Service Act:—
 (a) Place..... **Montreal** (b) Date..... **3rd Jan. 1918** *PH*

DECLARATION OF RECRUIT

I, **Herman Elvett HAWLEY**, do solemnly declare that the above particulars refer to me, and are true.

Herman Elvett Hawley (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age..... **21** yrs..... **7** mths.

Height..... **5** ft..... **7** ins.

Chest measurement } fully expanded..... **33** ins.
 } range of expansion..... **2** ins.

Complexion..... **light**

Eyes..... **hazel**

Hair..... **light brown**

Distinctive marks, and marks indicating congenital peculiarities or previous disease.
R.H. 20
R.H. 20
R.E. OK
L.E. OK

Whorwood Lt. Col.

O. C. **1st** Depot Btln.
1st Quebec Regt.

Montreal P.Q. Date **Jan 3, 1918**

PARTICULARS OF RECRUIT DRAUGHT UNDER MILITARY SERVICE ACT, 1917

BREITIT, K. A. S. T. D. D. G. T. R.

MADE IN INDIA

Serial Number	Name	Age	Height	Complexion	Build	Education	Religion	Marital Status	Occupation	Service
1	BREITIT, K. A. S. T.	25	5' 6"	Fair	Medium	High School	Hindu	Single	Farmer	1st Class
2	D. D. G. T. R.	22	5' 4"	Dark	Medium	High School	Muslim	Single	Farmer	1st Class
3		20	5' 2"	Fair	Medium	High School	Hindu	Single	Farmer	1st Class
4		18	5' 0"	Dark	Medium	High School	Muslim	Single	Farmer	1st Class
5		16	4' 8"	Fair	Medium	High School	Hindu	Single	Farmer	1st Class
6		14	4' 6"	Dark	Medium	High School	Muslim	Single	Farmer	1st Class
7		12	4' 4"	Fair	Medium	High School	Hindu	Single	Farmer	1st Class
8		10	4' 2"	Dark	Medium	High School	Muslim	Single	Farmer	1st Class
9		8	4' 0"	Fair	Medium	High School	Hindu	Single	Farmer	1st Class
10		6	3' 8"	Dark	Medium	High School	Muslim	Single	Farmer	1st Class

DECLARATION OF RECRUIT

I, the undersigned, being the parent or guardian of the above-named recruit, do hereby declare that the above-named recruit is a British subject and is fit for military service.

Signature of Recruit

DESCRIPTION ON CARDS OF

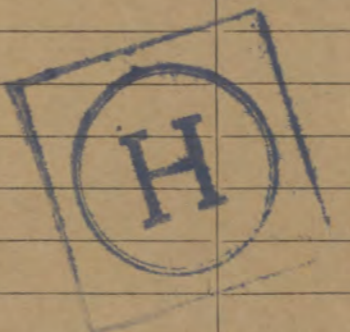
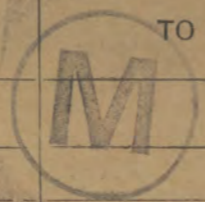
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10		6	3' 8"	Dark	Medium	High School	Muslim	Single	Farmer	1st Class

At the place of recruitment on this 1st day of 1917.

Signature of Recruiting Officer

REGIMENTAL DOCUMENTS

NAME Hawley Herman Elvett REGT. NO. 3080625 UNIT _____ H. Q. FILE NO. _____



CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

- 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. 173)
- 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)

15190

DEATH

Category

DISCHARGE

Category

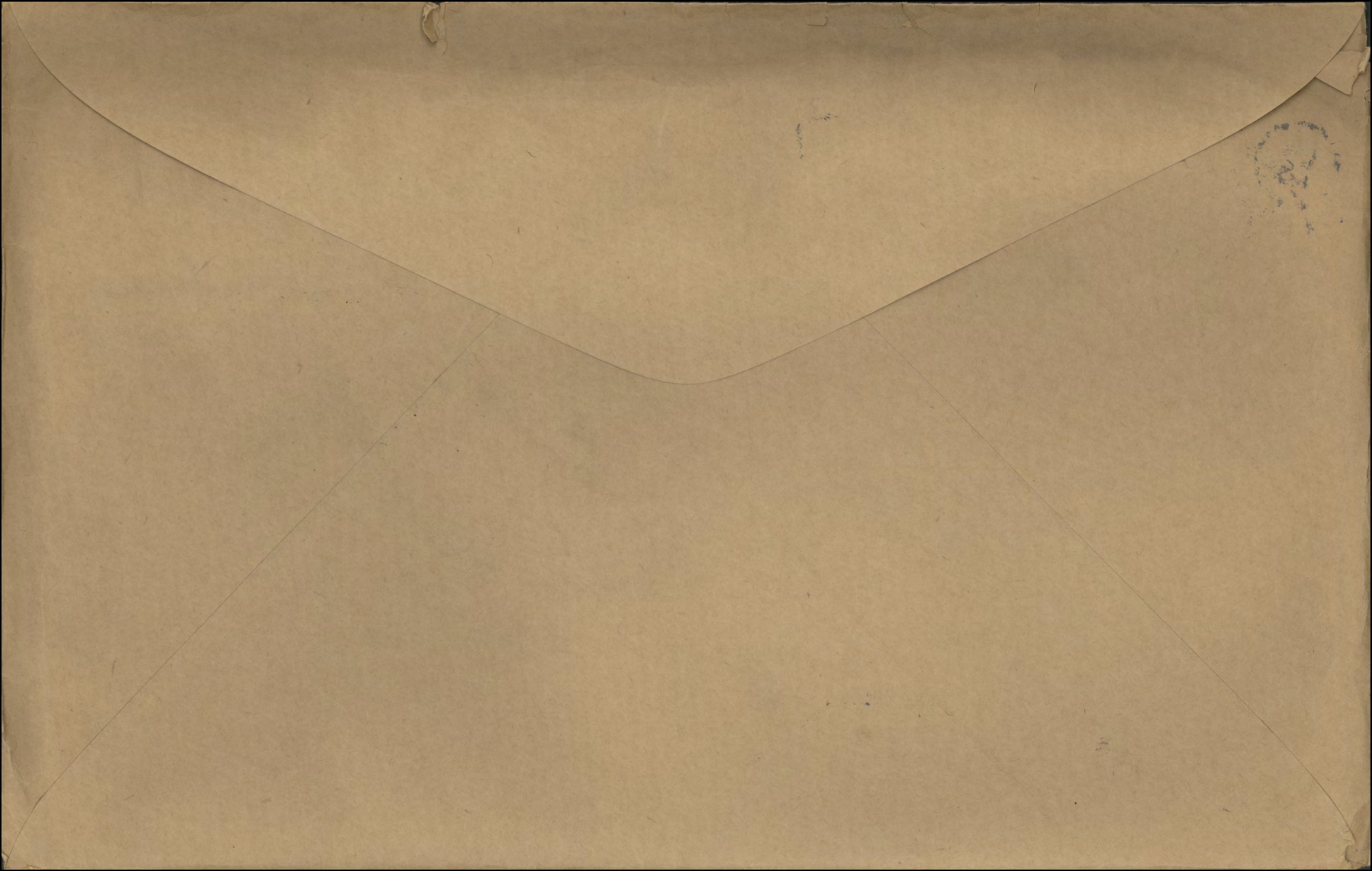
DESERTION

9-5
20-5
23-6

(1)

Handwritten notes:
26
Will Org & copy
R-122

Handwritten notes:
m
3
20
A



Surname

Christian Name or Names

Reg. No.

Hawley

V.E.

3080625

Rank

Unit

Plt

que 14

Cas. List.

11. 10. 18 2342'

RFB

Killed in action 27. 9. 18 A.

*A.M.D. 2 DEPT.
Batt of D.O.M.S. O.M.F.G London*

Cas. List.

MD
26

Number 3080625 Rank PTE

Surname HAWLEY

Christian Name Herman Elrett

Units 14th Bu Can Coy Theatre of War France

Date of Service 26/6/18 II. -

Remarks (5) Samuel G. Hawley,

Latest Address Box 215
Magog, P.Q.

Roll No.

200m.-2-21.M. B. Page 17632

B

DESP. OCT 25 1927
REGN. NO. 45923

SURNAME.

Hawley

649-H-18986.

CARD NO.

X

CHRISTIAN NAMES

Herman Elvett

FOLL.

REGL. NO.

3080625

RANK

Pte.

UNIT

1st Que. Regt. 1st Dep. Bn (5th R. I.)

FORMER CORPS

mil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Hawley, Samuel Gale

RELATIONSHIP TO SOLDIER

Father

ADDRESS

Magog, P. Q.

COUNTRY OF BIRTH

Canada Waterloo, P. Q.

DATE

May 16th 1896

PLACE OF ATTESTATION

Montréal, P. Q.

DATE

Jan. 3rd 1918

75-2-18-1088

L. L. 6915. M. & D. 6994.

M. F. W. 22. 10056-8-16. H. Q. 1772-39-339.

MARRIED

SINGLE

yes

WIDOWER

TRADE OR CALLING

Electrician

RELIGION

Church of England

DESCRIPTION.

APPARENT AGE

21

YEARS

7

MONTHS

HEIGHT

5

FEET

7

INCHES

CHEST MEASUREMENT

33

INCHES

EXPANSION

2

INCHES

COMPLEXION

Light

EYES

Hazel

HAIR

lt. Brown

DISTINGUISHING MARKS

Nil.

MEDICAL EXAMINATION.

PLACE

Montreal, P. Q.

DATE

Jan. 3rd 1918

Present Address

Magog, P. Q.

REG'T'L. No. 3080685²

NAME Hawley, Herman Elvett

H. Q. FILE NO 649

RANK AND CORPS Pte. 14th Bn. (Form, st Que Regt)

FOLLOWS
NO. 1st Depo
Bn.
FOLLOWS

CABLE

NATURE OF CASUALTY

NO. DATE

N. of K.

Hawley Samuel Gale (Father)
Magog. P.O.

59-10
H 386 13-10-18
H & A 342(1) 11-10-18

K. in A. Sept. 27th 1918.

LIST No.

HOSPITAL

**DATE OF
ADMISSION**

REMARKS



Date

Movement

Place

Casualty

List
No.Notified
N/K O.

W.O. List

128

Hawley. Pte. H. Simon, E. ^{loett} 3080625² 649 A. 18956.

medals + Decorations.

Father ^{14th Jan} 4440

not elig. for 1914-15 Star. Samuel, G. Hawley.

Boy 215 -
Masos. p. 2. M

P.S. -
(Serial no. 767289.)

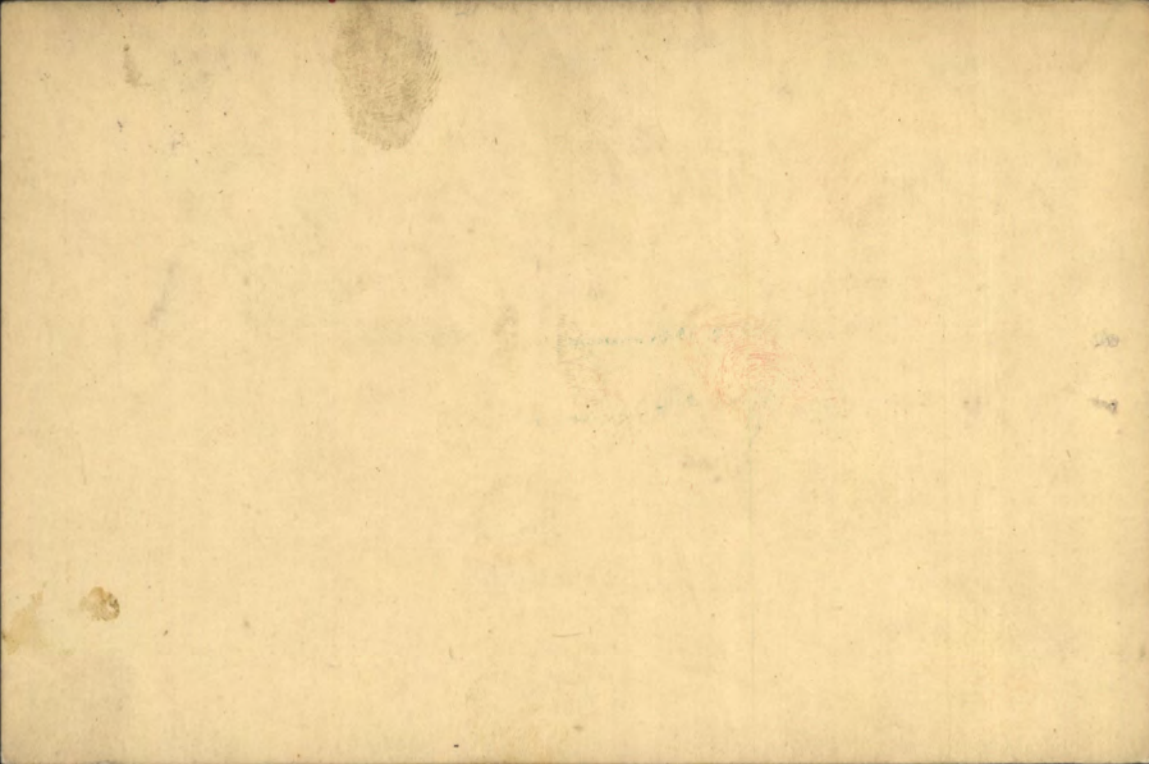
Ditto
Scroll Desp. JAN 14 1921 Req. No. 710334

C.P.S. -

Please Desp. 23/7/21 Req. No. P149
nil.

B.

D



ORIGINAL ORIGINAL MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

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 HAWLEY Christian name Herman Elvett
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule. 31161 DR
3. Consecutive number on schedule of men reporting for service (if he appears on it) 241
4. Address (including street and number, if any) College St. Quebec.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 3rd day of Jan. 1918 1917, by the undersigned medical board sitting at Montreal QUE.

5. Age as stated 21 Years 7 Months. 6. Apparent age _____ Years _____ Months
7. Height 5 Feet 7 Inches. 8. Weight 120 Pounds.
9. Chest measurement { Minimum 31 Ins. 10. Complexion light { Eyes hazel
Maximum 33 Ins. Hair brn.
11. Physical development. Good { Good Fair Poor 12. Smallpox marks _____
13. Number of vaccination marks { Right arm _____ 14. When vaccinated last _____
Left arm _____
15. Distinctive marks and marks indicating congenital peculiarities or previous disease _____

16. Slight defects but not sufficient to cause rejection
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 A-2

H. L. Baverly President.
W. J. Brown Capt. Member. Amelker Capt. Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>FEB 6 1918</u>		<u>J. A. Gairie Capt. M.O.</u>	<u>3</u>		<u>J. A. Gairie Capt. M.O.</u>
		<u>M.O.</u>	<u>11</u>		<u>J. A. Gairie Capt. M.O.</u>
		<u>M.O.</u>	<u>27</u>		<u>J. A. Gairie Capt. M.O.</u>

Joined 3rd day of Jan. 1918 at Montreal P.Q.

STATION	DATE	DISEASE	RESULT
<u>MONTREAL</u>	<u>FEB 6 - 1918</u>	<u>nil</u>	<u>capt. Amelker President Board</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT
<u>MONTREAL</u>	<u>FEB 6 - 1918</u>	<u>nil</u>	<u>capt. Amelker President Board</u>

N. B.—This sheet is 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.

Signature of Man

RD 20
LD 20
RE OK
LE OK

NOV 1 - 1917

Dr 31161

LOI DU SERVICE MILITAIRE FEUILLE MÉDICALE

3080625

IMPORTANT.—Si le nom de l'homme n'apparaît pas sur la liste des hommes répondant à l'appel, ou s'il n'a pas fait une demande d'exemption ou une déclaration d'être prêt à répondre au service militaire ou, dans le cas où il aurait fait l'une ou l'autre, s'il en ignore le numéro, on l'informerait qu'il doit attacher la copie de cette feuille médicale (qu'on lui remettra) à la déclaration ou à la demande d'exemption qu'il pourra faire en s'adressant à n'importe quel maître de poste en Canada, ou envoyer lui-même après avoir marqué dessus le numéro du reçu qu'il a reçu du maître de poste, au Registraire ou au député Registraire de la Loi du Service Militaire. Dans tous les cas le double de cette feuille médicale sera envoyé par le Bureau Médical au Commandant du District à moins que ce dernier n'ait donné ordre de l'envoyer directement au Registraire ou Député Registraire.

E. E. E. E.

- 1. Nom de famille..... **Hawley** Nom de baptême..... **Herman**.....
- 2. Numéro de la réponse à l'appel ou de la demande d'exemption d'après le reçu du maître de poste ou la liste.....
- 3. Numéro consécutif de la liste des déclarations (s'il y apparaît).....
- 4. Adresse (y compris la rue et le numéro s'il en existe)..... **Magog, Québec.**.....

Voici les renseignements exacts qui résultent de l'examen du sujet ci-dessus nommé, fait le jour de..... **30th October.**..... 1917, par le bureau médical soussigné siégeant à..... **Magog, Que.**.....

- 5. Âge affirmé..... **21** ans..... **5** mois.
- 6. Âge apparent..... ans..... mois.
- 7. Hauteur..... **5** Pieds..... **7** pouces.
- 8. Poids..... **123** livres.
- 9. Mesure de poitrine { Minimum..... **31** pouces
Maximum..... **33** pouces
- 10. Couleur..... **Fair.** { Yeux..... **Blue.**
Cheveux..... **Fair.**
- 11. Développement physique..... **Good** { Bon
Moyen
Pauvre
- 12. Marques de vérole.....

Signature de l'homme..... *Hawley*

- 13. Nombre de vaccinations { Bras droit.....
Bras gauche.....
- 14. Dernière vaccination.....
- 15. Indices distinctives et indices de particularités congénitales ou de maladie antérieure.....

16. Défauts légers insuffisants pour l'exemption.....
Le sujet nie avoir souffert de { Rhumatisme
Tuberculose
Syphilis } Nous ne trouvons pas de preuve qu'il ait souffert de { Rhumatisme
Tuberculose
Syphilis }
(Rayez la maladie admise ou soupçonnée.)
Nous avons examiné le sujet ci-dessus nommé, conformément aux règlements pour les examens médicaux des F.E.C. et il est classé dans la catégorie **A**

No. 6
Ord. to Schedule by

Commandant **J. A. Laine** *Capit.* **J. A. Laine** *Capit.*
Membre Membre

Date	Résultat	VACCINÉ	Date	Résultat	IMMUNISATIONS, ANTI-TYPHOÏDES, ETC.
FEB 5 1918	J. A. Laine	Capt. O.M.	31	18	J. A. Laine Capt. O.M.
		O.M.	11	18	J. A. Laine Capt. O.M.
		O.M.	21	18	J. A. Laine Capt. O.M.

Enrôlé le..... jour de..... 191..... à.....

CORPS	No. dans le régiment	HABITUDES	DATE
1st DEPOT BN. 1st QUEBEC REG'T.	3080625		

EXAMINÉ OU REFUSÉ PAR UN BUREAU MÉDICAL.

QUARTIER	DATE	MALADIE	RESULTAT
Montreal	Jan 3/18	None	Eyesight R. D. = 30 L. D. = 30
MONTREAL	FEB 6 - 1918	nil.	OK

N. B. Il sera disposé de cette feuille conformément aux règlements du service médical de l'armée, si le sujet devient inapte au service; la date et la cause seront indiquées au verso.

J. A. Laine
President
Board
OK

FORM OF WILL

I, HAWLEY Herman Elvett (Name in full)

Regimental Number 3080625 serving in 1st DEPOT BN. 1st QUEBEC REG'T.

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

Mr Samuel Gale Hawley
Magog 21500th
P. Q. } Name and Address
of person or
persons to whom
it is to go.

absolutely, and my personal estate I bequeath to

Mr Samuel Gale Hawley
Magog 21500th
P. Q. } 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 9 day of January A.D. 1919

Herman Elvett Hawley 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.

Signature of First Witness John R. Gussley

Address of Witness Magog 21500th
Lieut. O. G.
B Co'y. 1st Depot Bn., 1st Quebec Reg't.

THE TWO WITNESSES

Occupation of Witness

MUST SIGN HERE

Signature of Second Witness Richard Ferris

Address of Witness Guy Street Barracks, Montreal

Occupation of Witness Lieut. "B" CO'Y. 1st DEPOT BN. 1st QUEBEC REG'T.

B.

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

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

500M.—9-16

H. Q. 1772-30-920.

Casualty Form—Active Service.

Unit, Regiment or Corps.

5th Det 1st DEPOT BN. 1st QUEBEC REGT.

Regimental No. 3080625 Rank Private Name HAWLEY Herman Elvett

C. E. F.

Enlisted (a) 3-1-18 Terms of Service (a) CEP War of War Service reckons from (a) 3-1-18

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				
		Embarked Canada	18/2/18		Saxonia
		DISEMBARKED	England	4-3-18	
15.3.18	23rd. Res. Batt'n.	Taken on strength from Canada	Bramshott.	5.3.18.	D.P. 11 I. 74
27-6-18	do	Posted to 14th Batt.	do	26-6-18	D.P. 11 I. 74 M. J. Elvett 1st Dep. Bn. Regt. 1917
	C. B. D.	ARRIVED C. B. D.	FRANCE	28.9.18	N. R. D 289.18 645 PART II ORDERS No 82 D 4.7.18
	C. B. D.	LEFT C. B. D. FOR	14 Bn	13.9.18	N. R. D 1343
	O. C. 14 BN	ARRIVED 14 BN	FIELD	15.8.18	B. 213 D 178.18

(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.]

CERTIFIED CORRECT.
4 JUL 1918
CAN. REGTS., LONDON

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				
30910	Unit	Killed in action	India	27918	Letter No. 17/220 P. O. 135/1918
					for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

5th DftlstBn, 1st Que Lec

E.E.

Rank

Name HAWLEY, Herman Elvett

Reg'l No. 3080625

Unit

If in perm. Corps, }
What Unit? }

Married or Single Single

Place and Date of Enlistment Montreal P.Q. Jan. 3rd 1918

Place of Birth Waterloo, Que.

Name and Address, Next-of-Kin Mr Samuel Gale Hawley,

Magog, Quebec.

Relationship Father

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

N/E. R.B. No. 14564

File R.L. 25. H. 4796.

KILLED IN ACTION
Category

Discharge, Date and Place

Reason

Character

H. W. & V., Ld.—9546-16.

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.				
		Arrived in England		4-3-18	S/3 SAXONIA
15 3 18	23 rd Res	Taken on Strength	Behott	Pte 5 3 18	2074
27-6-18	-d.-	S.O.S. to 14 th B ⁿ	"	36.6.18	178 14 th B ⁿ 82 14-7-18
6-10-18	14 th B ⁿ	Killed in action	Old	Pte 27-9-18	80 135

R.B. 14564 CHECKED JUL 1918

ASSIGNED
PAY

CANADA.

SEPARATION
ALLOWANCE.

ENGLAN
CANADA

EFFECTIVE
DATE:- 1/2/18.

EFFECTIVE
DATE:-

AMOUNT:- \$15.

AMOUNT:-

NAME, ADDRESS, RELATIONSHIP & AUTHORITY

WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S
WORD "SAME" ONLY TO BE WRITTEN IN THIS SP

Mr. Samuel Gale Hawley (Father)
Magog, Quebec.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS

UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE
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

PARTICULARS OF RENDERING NON-EFFECTIVE:-

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS
March	Bal Forward			
April	P. Pay.	33		loan ap. April AR 69. 15/4/18. AR 178. 30/4/18
		33-		*
MAY				ap. AR 354. 15.5.18.
	P.P.	34 10		AR 554. 31.5
		34 10		
JUN	P.P.	33-		ap. AR 709. 15.6. " 902. 29.6.
		33		
JUL	P.P.	34 10		A.P. ban (July AR 1258. 6.7.18. " 1438
		34 10		
Aug	P.P.	34 10		A.P. ban (Aug) AR 1554 6.7.18 " 523. 3 rd Sept
		34 10		
Sept	P.P.	33		A.P. ban (Sep) AR 579. 1 st Dec. " 614. 3 rd Oct
		33		
				Ab0980 Bal to

cha 342 11/18

Handwritten notes in red ink, including "Handwritten" and "27 9-18".

Handwritten scribble in the top left margin.

SEPARATION ALLOWANCE.	ENGLAND or CANADA.	NAME: HAWLEY, Norman & Co.		
EFFECTIVE DATE:-		NUMBER:- 2080675.		
AMOUNT:-	PARTICULARS OF RANK OR APPOINTMENT			
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT		
		Private.		
UNIT AND TRANSFERS				
ORIGINAL UNIT:- 1 st Depot Bn, 1 st Quebec Regt.				
DATE ACCOUNT FIRST OPENED:-				
AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S P D		
		UNIT TRANSFERRED TO		
A082.	4.7.18	28.6.18	22.7.18	14 th Bn.
Dead	1.10.18	21.10.18		18 th Bn.
V-BOOKS			UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK	
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	

CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
							570		
33		loan ap April.				15-			
		AR 69. 15/4/18. 23 Res Bn	487						
		AR 178. 30/4/18. do.	243				1640		
33		ap.	730			15-			
		AR 354. 15.5.18. 23 Res Bn.	730				140		
34 10							590		
							2820		
34 10		AR 554. 31.5.18 do	973			15	1847		
			1703						
33		ap.				15-	3647		
		AR 909. 15.6.18. do.	973				2674		
33		" 902. 29.6.18 "	973			15	1701		
			1946						
34 10		A.P. ban (July)				15	3611		
		AR 1258. 6.7.18. do.	446				3165		
		" 1438 " 27.7.18	446				2719		
34 10			892			15	4629		
34 10		A.P. ban (Aug)				15	4183		
		AR 1554 6.7.18. do.	446						
		" 523. 3 rd Det Bn. 24.8.18	357			15	3826		
34 10		A.P. ban (Sept)	803			15	5626		
33		AR 599. 1 st Det. 5.9.18	357				5269		
		" 612. 3 rd Det Bn. 14.9.18	357			15	4912		
			714						
		A60980 Bal to Ottawa 2 1/2	4912						
			4912						

AR 342 11/18

PAY BOOK CHECKED
 Date: 16-12-18
 By: SMITH

NE STATE
 3-7-19
 1912

APPOINTMENTS.
PROMOTIONS AND REVERSIONS.

MARRIED OR SINGLE

Single

PLACE OF BIRTH

Waterloo, Que.

NAME OF NEXT OF KIN

Mr Samuel Gale RELATIONSHIP *Father*

ADDRESS

Inagog, Que.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

NAME OF NEXT OF KIN

RELATIONSHIP

ADDRESS

DATE ADMITTED	ADMISSIONS DATE DISCH'D	V. OR A.	TO HOSPITAL, &C. NAME OF HOSPITAL.

SEPARATION ALLOWANCE.

SEPARATION ALLOWANCE MONTHLY \$

EFFECTIVE (DATE)

STOPPED EFFECTIVE (DATE)

PAYABLE TO

REASON

RELATIONSHIP

AUTHORITY

AUTHORITY FOR ISSUE

REMARKS

SEPARATION ALLOWANCE MONTHLY \$

EFFECTIVE DATE

STOPPED EFFECTIVE (DATE)

PAYABLE TO

REASON

RELATIONSHIP

AUTHORITY

AUTHORITY FOR ISSUE

REMARKS

NEW PAYBOOK ISSUED

NEW PAYBOOK ISSUED

PERIOD		PAY AND FIELD ALLOWANCE			WORKING PAY			SEPARATION ALLOWANCE	ASSIGNED PAY CREDITS	ANY OTHER CREDITS	TOTAL CREDITS	SEPARATION ALLOWANCE	CASH PAYMENTS DURING THE MONTH			
FROM	TO	NO. OF DAYS	RATE	\$	C.	NO. OF DAYS	RATE	\$	C.	\$	C.	\$	C.	1	2	3
MONTH		PARTICULARS		CR. 1	CR. 2	PARTICULARS		DR. 1	DR. 2	DR. 3	DR. 4	BALANCE				
28 FEB 1918.		BALANCE FROM CANADA,									15.80					
<i>Mar. p/p</i>				<i>34 10</i>			<i>Adm ap. Bohett 43</i>		<i>487</i>							
							<i>" 2086 23/6 273</i>		<i>24 33</i>							
							<i>tan ap.</i>						<i>15 570</i>			

NTS.
REVERSIONS.

EFFECTIVE DATE	AUTHORITY

REG'L. No. 3080625 RANK Pte. NAME Hawley Herman Elvett

PLACE OF ATTESTATION Montreal P.Q. DATE OF ATTESTATION 3/1/18 ORIGINAL UNIT 1st Depot Bn 1st Que Reg 23rd Can Res

ASSIGNED PAY

PARTICULARS OF TRANSFERS

PER MONTH \$ 15⁰⁰ DATE EFFECTIVE 1/2/18 AUTHY. (1)

PAYABLE TO Samuel Gale Hawley, Magog, Que, Canada RELATIONSHIP Father

PER MONTH \$ DATE EFFECTIVE AUTHY. (2)

PAYABLE TO

RELATIONSHIP

PER MONTH \$ DATE EFFECTIVE AUTHY. (3)

PAYABLE TO

RELATIONSHIP

PER MONTH \$ DATE EFFECTIVE AUTHY. (4)

PAYABLE TO

RELATIONSHIP

DISCHARGE DATE AND PLACE

REASON AND AUTHORITY

STOPPED EFFECTIVE (1)

CAUSE

DATE A3M FORMS REND.

STOPPED EFFECTIVE (2)

CAUSE

DATE A3M FORMS REND.

STOPPED EFFECTIVE (3)

CAUSE

DATE A3M FORMS REND.

STOPPED EFFECTIVE (4)

CAUSE

DATE A3M FORMS REND.

ACCOUNT TRANSFERRED TO N.E. BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

To UNIT	EFFECTIVE DATE	AUTHORITY

CASH PAYMENTS DURING THE MONTH			
1	2	3	4
c.	\$ c.	\$ c.	\$ c.

ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS
\$ c.	\$ c.	\$ c.

BALANCE CARRIED FORWARD	
CREDIT	DEBIT
\$ c.	\$ c.

NUMBER OF ACQUITTANCE ROLLS		NUMBER OF S.A. AND A.P. CHEQUE	
1	2		

REMARKS.

ALL CASUALTIES, PROMOTIONS, &c., TO BE NOTED. ALSO PARTICULARS OF "OTHER CREDITS" OR "OTHER CHARGES"

80

70

OTHER CHARGES	TOTAL DEBITS	BALANCE CARRIED FORWARD		NUMBER OF ACQUITTANCE ROLLS		NUMBER OF S.A. AND A.P. CHEQUE	REMARKS. ALL CASUALTIES, PROMOTIONS, &c., TO BE NOTED. ALSO PARTICULARS OF "OTHER CREDITS" OR "OTHER CHARGES"
		CREDIT	DEBIT	1	2		
c.	\$ c.	\$ c.	\$ c.				

14

PAID FROM PAYROLL

Date of Enlistment

MILITIA AND DEFENCE *Enlisted 3-1-18*

Date of Assignment

Separation and Assigned Pay Branch

H

4602

1-2-18

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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AUTHORITY
FOR
NEW ACC'T.

n.r.

RATE OF ASSIGNMENT

15.00			
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PARTICULARS OF SEPARATION ALLOWANCE

No. *3080625*
 Rank *Pt.* Promoted Reverted Discharge
 Soldier's Name *Hawley H. E.*
 Eattalion *1st. Bpt. Bn. 1st. Ave. Regt.*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *Mr Samuel Gale Hawley*
 Address *Magog Ave.*
 Change of Address
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total
<i>Mar 19/18 M</i>	<i>76521</i>		<i>30</i>	<i>30</i>
<i>April 1</i>	<i>11138</i>		<i>15</i>	<i>15</i>
<i>May D</i>	<i>6629</i>		<i>15</i>	<i>15</i>
<i>June A</i>	<i>19105</i>		<i>15</i>	<i>15</i>
<i>July W</i>	<i>32089</i>		<i>15</i>	<i>15</i>
<i>Aug D</i>	<i>31690</i>		<i>15</i>	<i>15</i>
<i>Sept C</i>	<i>39195</i>		<i>15</i>	<i>15</i>
<i>Oct E</i>	<i>46067</i>		<i>15</i>	<i>15</i>
			<i>135</i>	<i>135</i>

8225-H-6

REMARKS

New Service Ordered W/B 18-3-18

KILLED IN ACTION }
 DIED OF WOUNDS } DATE *27-9-18*
 C. L. No. *333 Fol. 3* DATE *16-10-18*
 M. R. O. *12192* TO DESTROY RENDERED *19-10-18*
 B. P. C. FORM 1 & C. F. X. COMPLETED ON FILE
8225-H-6
 CLERK *L. M. Wilson* DATE *19-10-18*

6 F. 2 16 3-19

5-18 H/10

La. Thousand
5-3-18
 M. F. W. 128.
 40789-51-1772 38-1111
 L. L. 2320-M. & D. 7883.

W. H. Thurman 1-3-18

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

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
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M. F. W. 128.
 400mc. 5-17-1773 89-1141
 L. L. 22320-M. & D. 7893.