178250

CANADIAN GRENADIER GUARDS
OVERSEAS BATTALION (37th)

ATTESTATION PAPER.

ORIGINAL

No. 178250

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? — Holliday
1a. What are your Christian names? — John Herbert
1b. What is your present address? — Queens Hotel Montreal
2. In what Town, Township or Parish, and in what Country were you born? — Marsh Gibbon England
3. What is the name of your next-of kin? — Elizabeth Holliday
4. What is the address of your next-of-kin? — Waterloo Farm Leighton Buzzard Buckinghamshire England
4a. What is the relationship of your next-of-kin? — Mother
5. What is the date of your birth? — Sept 3rd 1892
6. What is your Trade or Calling? — Comm. Traveller
7. Are you married? — No
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? If so, state particulars of former Service. — No
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

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, John Herbert Holliday, 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.

John Holliday (Signature of Recruit)

Date 29th Feb. 1916. A. Sutherland (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, John Herbert Holliday, 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.

John Holliday (Signature of Recruit)

Date 29th Feb. 1916. A. Sutherland (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 St Johns Que. this 29th day of February 1916

A. B. Bickerdike J.P. (Signature of Justice)

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

Description of John Herbert Holliday on Enlistment.

Apparent Age 23 years 6 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 6 ft. 3½ ins.

Chest measurement: Girth when fully expanded 44 ins.; Range of expansion 3 ins.

Complexion Fair

Eyes Brown

Hair D. Brown

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

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

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

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 29th Feb 1916 — R. Lorne Gulday, Major, Medical Officer.

Place St Johns Que

*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.

John Herbert Holliday 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.

F. H. Meighen (Signature of Officer)

MAR 3 1916

Date 191 .

1578/18 amd

DISCHARGE DOCUMENTS

R. O. No.....

30288 H. Q. No.....

Name, HOLLIDAY JOHN HERBERT

Regt, No, 178250 Rank Pte

Corps 87th Bn

Phys. Unfit

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	1
Compulsory Stoppages	
Casualty Forms	1
Proceedings on discharge	1
Corps History Sheet	
Date and No. of Deposit Receipt for Purchase Money and Amount	
Parchment Certificate	
Medical Report for Invalids	1
Medical History Sheet	2
Proceedings of Regt. Court Martial	
Copies of Convictions by Civil Power	
Company Conduct Sheet	1
Clothing Transfer Certificate	1
Inventory of Kit	
Last Pay Certificate	1

Dental Certif — 1
MSW 399 — 1
ASB 122 — 2
ASB 179 — 2
Pd MB — 2
Pay card

R 122 — 1
Pay card —

M. F. W. 62.
100m.—6-17.
H. Q. 1772—89—835.

WILL DESPATCHED TO M. D. 11 JUN 11 1920

Index Card	
Casualty Card	1
Non-Effective Card	
Part II Order Card	1
Change of Address Card	
Honour & Award Card	

R 1-3-20

R 23-3-20

(31)

6 27
25-28
29-28
2

MX 4-2-21 R.R.

R. 149.

Name HOLLIDAY John Herbert *Rank* Pte *Reg. No.* 178250

Unit 1st. Batt.

Next of Kin Mrs. E. Holliday. Leighton Buzzard. Bucks. Waterloo Farm.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
	10.6.5 4.5.					
8-8-16	7 Conv Depot B'logne SW	Inf. Ears Leg, Chr.		A 422	M	8 15.8.16.
28-11.	Disc.to 3 Large Rest Camp.		do	A512.	11196	

Date		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List

No. 178250 RANK Pte. NAME Holliday J. N.

T. O. S. 29-2-16 UNIT 87th Battalion (Canadian Grenadier Guards)
DO 5/10 of 1-3-16

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Feb. 29	mar. 31	✓		
April.		✓		

UNIT SAILED
APR 23 1916

SURNAME. Holliday

CHRISTIAN NAMES John Herbert

REGL. No. 178250 RANK Pte.

UNIT 87th. Batt.

FORMER CORPS Nil

CARD NO.

S.O.S. Dis. 29-5-18

FOLL. II. PII 43 4/8/5/18

11 DD.

NEXT OF KIN.

NAMES IN FULL Holliday, Mrs. Elizabeth

RELATIONSHIP TO SOLDIER Mother

ADDRESS Waterloo Farm, Leighton Buzzard, Bucks., Eng.

CHANGE OF ADDRESS

COUNTRY OF BIRTH England, Marsh Gibbon DATE Sept. 3rd, 1892

PLACE OF ATTESTATION St. Johns, P.Q. DATE Feb. 29th, 1916.

OS 23-4-16. 402/9. R/C. 16-3-18. 8/21 II.

MARRIED SINGLE yes WIDOWER

TRADE OR CALLING Com. Traveller RELIGION Church of England

DESCRIPTION.

APPARENT AGE 23 YEARS 6 MONTHS

HEIGHT 6 FEET 3½ INCHES

CHEST MEASUREMENT 44 INCHES EXPANSION 3 INCHES

COMPLEXION Fair EYES Brown HAIR Dk. Brown

DISTINGUISHING MARKS Nil

MEDICAL EXAMINATION. PLACE St. John's, Nfld. DATE Feb. 29th, 1916.

REGT'L No 178258.

NAME Holliday. John. Herbert.

H. Q. FILE No. 649-

RANK AND CORPS Pte. 1st Bn. (From 87th Bn.

FOLLOWS No.

FOLLOWS

CABLE No.	CABLE Date	NATURE OF CASUALTY
M 11196.	14-8-16.	Admt to 7. Cont. Depot. Boulogne. Aug 8th. 1916. (Shrapnel leg).

L. L. Job 90581—M. & D. 6314.

M. F. W. 42—50M—1-16.
H. Q. 1772-39-893.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
a 422.	No. 7. Const. Depot. Boulogne. Ex No. 3. Can. General. Boulogne.	8-8-16.	S. W. L. Leg. & Chr. Suf Ears
9512	disc to No 3 Large Rest Camp Boulogne.	23-11-16.	S W L Leg

Number 178250 Rank Pte.

Surname HOLLIDAY

Christian Name John Herbert

Units 1st Bn. Can. Inf. Theatre of War France

Date of Service 18-6-16

Remarks Widow ~~Dependent~~ Mrs Emma Holliday King St. Over, Cambs, England

Last Address ~~1365 Cinder St., West Vancouver B.C.~~

Roll No. B. Page 12540

39681

200m.-2-21.M.

S.O.S. 29-5-18. M.D. #11.

649-H-3994.

HOLLIDAY, Pte. J. H., #178250, ~~85~~ 87th Bn. 1st Bn

form

M. & D. (Wife) Mrs. Emma Holliday,
~~1365 Pendee St.,~~
~~W., Vancouver, B. C.~~
King St. (W)
Ovr.
Cambridgeshire, Eng. 10-5-21 WS

P. & S. (Wife) Mrs. Emma Holliday,
Same as above.
(Ser. #845553.)

Mem. C. (Wife) Mrs. Emma Holliday,
Same as above.

Mem. C. (Mother) Mrs. Elizabeth Holliday,
Linslade, Beds, England.

Not Eligible for 14-15 Star

E " " - V.M

E " " - B.W.M.

47138

B.

R.P.

W 44861 FEB 11 1921 DESPATCHED (W) Y-2183 14/3/21 48

FEB 12 1921

M 45-06

Plague Desp. ..... Regn. No. 14621

FEB 16 1923

Scroll Desp. ..... Regn. No. 25269

WX Ret'd 15/3/21 not at address.

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
Holliday	J.H.	178250

Rank	Unit	Co.	Troop	Batty
Pte.	1st Bn.			

Hospital	Date of Admission
3 Can. G.H.Boulogne	8.8.16
Transferred 7 Conv. Depot Boulogne	Hosp. 8.8.16
3 Large Rest Boulogne	Hosp. 28-11-16
	Hosp.
	Hosp.

Diagnosis

(1) Shp. Wd. L.Leg, Chronic Infl. Ears

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnoses: If more than one state present

DISPOSITION	Date	REMARKS
C.L.	15.8.16	A422
C.L.	9-12-16	A512

A.M.D. 2 Dept.

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

R.

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

FILE No. VOL.

SUBJECT

178250 Holliday, John H.

CHARGED TO	PER	DATE	CHARGED TO	PER	DATE
Overlight		3.13.2[illegible]			

THIS CHARGE-OUT AND ABSENT CARD **MUST NOT** LEAVE THE REGISTRY.

FILE No. VOL.

SUBJECT

CHARGED TO	PER	DATE	CHARGED TO	PER	DATE

THIS CHARGE-OUT AND ABSENT CARD **MUST NOT** LEAVE THE REGISTRY.

M. & D. FORM O.S.S.3.
12265—50M—11-22.

ORIGINAL. 178250 DUPLICATE

87th Bn. Canadian Infantry. (Canadian Grenadier Guards)

MEDICAL HISTORY SHEET.

Surname Halliday Christian Name John Herbert

Examined on 29th day of Feb 1916 at St Johns Que.

Approved by A. Lorne C. Geldart

Birthplace City or Town Mayeb Gibbon County England

Rank Major M.O.

25 FEB. 1918

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

Apparent age 23 yrs 6 months

Trade or occupation Com. Traveller

Height 6 Feet 3½ Inches.

Weight 240 Lbs.

Chest measurement Minimum 41 inches. Maximum expansion 44 inches.

Physical development Good

Small-Pox Marks Neo

Vaccination Marks Arm Right. Left. ✓ Number 4

When Vaccinated last 8 yrs ago

Date.	Result.	Vaccinations.
Mar 11/16	Good	A. Lorne C. Geldart M.O.
		M.O.
		M.O.

(a) Marks indicating congenital peculiarities or previous disease Neo. Uneven back teeth

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

Date.	Result.	Anti-Typhoid Inoculations, Etc.
Mar 4/16	Good	A. Lorne C. Geldart M.O.
Mar 11/16	Good	M.O.
Mar 18/16	Good	M.O.

Enlisted on 29th day of February 1916 at St Johns Que.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	Can. G. G.	178250		
Transferred to	O/S Bn			

CANADIAN

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

M. F. B. 313.

200M—11-15.
H. Q. 1772 39-439.

Surname Holliday Christian Name John Identity

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

R. & O. 6045 (*Revised*). 87 Battn 121695 N.E.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Hastings Dec 12 1916.

No. 178250 Rank Pte Name HOLLIDAY J.

Local Unit Clare Overseas Unit 1st Age 23

Examination held at SMB

DISABILITY. Overseas—Local. (scratch one out) D.H. In France 6 mos.

PRESENT CONDITION.

Mitral Systolic Bruit.
Some enlargement.
Pulse 120 f.m.

APPROVED CAPT. C.A.M.C.
FOR A/ADJ-GENERAL AND FOR G.O.C. TROOPS.

BOARD RECOMMENDS:—

1. Fit for Duty ~~[illegible]~~ One months Convalescence
2. Fit for duty after ..... weeks' physical training.
3. Fit for Temporary Base Duty ..... weeks.
4. Fit for Permanent Base Duty .....
5. Discharge .....

Signatures:—

J. R. Chisholm Capt. President.

Members { G. A. Turner Capt.

APPROVED

Dated at Hastings 13 DEC 1916 1916. D. J. McIntyre Capt. For A.D.M.S.

for A.D.M.S., Canadians, ~~London Area.~~ Begbie

R. & O. 4045 (Revised).

PROCEEDINGS OF A MEDICAL BOARD.

Dated at.....1916.

No.....Rank.....Name.....

Local Unit.....Overseas Unit.....Age.....

Examination held at.....

DISABILITY.
Overseas—Local.
(scratch one out)

PRESENT CONDITION.

BOARD RECOMMENDS:—

1. Fit for Duty.....

2. Fit for duty after.....weeks' physical training.

3. Fit for Temporary Base Duty.....weeks.

4. Fit for Permanent Base Duty.....

5. Discharge.....

Signatures:—

.....President.

.....Members

.....

APPROVED

Dated at.....1916.

.....For A.D.M.S.

Form R. & O. 6045
1238-130M-29/11/16.

134360 N.E.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Hastings Jan 23 1916.

No. 178258 Rank Pte Name HALLIDAY J.

Local Unit C. Can. Overseas Unit 1st Age 24

Examination held at S. M. B.

DISABILITY.
Overseas—~~Local.~~
(scratch one out)

(V. D. H.) Dyspnoea on exertion

PRESENT CONDITION.

3 mos. full duty in France — and three mos in Hospital on Convalescence. — This man states that as a boy his endurance was good — but since that time he is short of breath.

C III — clerical.

BOARD RECOMMENDS:—

1. Fit for Duty.....
2. Fit for duty after.....weeks' physical training.
3. Fit for Temporary Base Duty.....weeks.
4. Fit for Permanent Base Duty.....
5. Discharge.....

Signatures:—

Members { [illegible] Capt. ..... President.
T. F. Fulham Capt. .....
.....

APPROVED

Dated at Hastings, Sussex 23 JAN 1917 1916.

D. J. McIntyre Captain C.A.M.C.
for A.D.M.S. Canadians

For A.D.M.S. Hastings

C.A.D.C.5009-10M.
3494-30-8-17.

178 75-0
Holliday J. H.
Pte.

DENTAL CERTIFICATE.

The following Certificates will be attached to the Medical History Sheets of all Other Ranks being returned to Canada for disposal.

B. C. R. D.

Date of Examination.	Present Dental Condition.	In case of loss or decay of teeth. Is the loss due to wounds, injury or disease directly attributed to Active Service?	Has he ever declined Dental Treatment.	Recommendation.
21-2-18.	fit			

1789
Gillespie J. H.
P.
B & R.C.

87th Bn. Canadian Infantry.
(Canadian Grenadier Guards)

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

Hy 41076.105

CERTIFIED CORRECT
Canadian Record Office,
Westminster House,
7, Millbank, S.W.

M. E. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps CANADIAN GRENADIER GUARDS OVERSEAS BATTALION (87th)

Regimental No. 178250 Rank Private Name Holliday, John Herbert

Enlisted (a) Feb. 29/16. Terms of Service (a) Duration of War. C. E. F. Service reckons from (a) Feb. 29/16.

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) (Com. Traveller)

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		Halifax	Apl 23/16	
		Disembarked England		Liverpool	May 5/16	
		Proceeded overseas for service with 1st Bn.			JUN 18 1916	Dominion Expd Force
24-6-16	C.B.D.	Reinforcement.		C.B.D.	24-6-16	N.R. P.T.O. 28 of 14-7-16.
20-7-16	C.B.D.	To unit.		Unit.	21-7-16	N.R. D.O.S. 206.
30-7-16	1st Bn.	Joined.		Unit.	22-7-16	B.213. D.O.S. 208.
5-8-16	3 C.D.A.	S.W.L. Leg.	Adm.	3 C.D.A.	4-8-16	A.36. D.O.S. 318.
			Trans.	10 C.C.S.	4-8-16	
5-8-16	10 C.C.S.	Shell. L. Leg.	Adm.	10 C.C.S.	4-8-16	A.36. D.O.S. 312
			Trans.	1 A.T.	4-8-16	
4-8-16	3 Can. Gen.	G.S.W. Leg. L.	Adm.	3 Can. Gen.	4-8-16	W.3034. — 181.
8-8-16	do.	S.W. L. Leg. Inf. mid. Ear.	To	4 Con. Dep.	8-8-16.	W.3034 — 185.
28-11-16	4 Con. Dep.	do	To 3 Large Res. Camp		28-11-16	W.3034 — 124.
30-11-16	Med. Board Boulogne	Classified "P.B."		Boulogne	30-11-16	Prov. Med. Board R.A.M.C. Boulogne.
11/12/16.	O.C. 3 Large Res. Camp Shorncliffe	Class. "B" & Transfd to	England		11/12/16.	Authy: I.G.C.R.O. No 208 d/25/7/15. Nom. Roll of men transfd to England d/11/12/16.

(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.

Part II P.B. 26/12/16 Embarked Fleet R.R. 622 / 14/12/16.

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				
					Kennedy D.M.S. for Adt. Genl. Can Med. Dist. 6
25-2-17	C.C.A.C.	T.O.S. B.C. Reg. Depot. Detailed to Depot Coy.	Seaford	11-3-17	Pt.2.D.O. 16
9-2-18	B.C.R.D.	Granted permission to wear one Good Conduct Badge	"	9-2-18	" " " 34
19-2-18	B.C.R.D.	On Command to C.D.D. Buxton	Seaford	19-2-18	Pt.2.D.O. 42 H. Williams Capt. For O.C. B.C. REGL. DEPOT.
20 FEB 1918		TAKEN ON STRENGTH C.D.D. BUXTON Pt. 11 ORDER No. 43			J. Lock, Lt. Col. Commanding Canadian Discharge Depôt. Lieut.-Col.
		EMBARKED FOR CANADA FROM LIVERPOOL			J. Lock, Lt. Col. Commanding Canadian Discharge Depôt. Lieut.-Col.
	XI. Cas. Unit	T. O. S. District Depot XI.	Victoria, B. C.	13/4/18	D. O. Pt. II, Para. 2
MAY 23 1918		Posted to Discharge Section Being Physically Unfit for Further Service Under K. R. & O., Can. 1917-377 Auth. Med. Board (App. A. D. M. S. of 5-4-18)		29-5-18	H. S. Andrews Capt. O.C. Discharge Section, District Depot, XI D.O. 43-252 B.
29-5-18					

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 178250 (Rank) Private

Name (in full) John Hubert Holiday enlisted in

the 87th Battalion

CANADIAN EXPEDITIONARY FORCE at St John Que. on the 29th

day of February 1916

HE served in France with 1st Battalion

and is now discharged from the service by reason of having been found medically unfit for further service. Under N.R.O. Par 1913 Par 377 X

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows:—

Age 27 years.

Height 6' 4½"

Complexion Fresh

Eyes Brown

Hair D Brown

Marks or Scars four vaccination marks left arm.

J. Holliday
Signature of Soldier

H. B. Andrews
Issuing Officer

Captain
Rank

O.C. Discharge Sec. D.D. XI
Appointment

Date of Discharge 29th of May 1918.

Signed at Victoria B.C. this 29th day of May 1918

in Military District No. XI

File Reference No. DD.H 1634

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

M. F. W. 39a
200m.—2-18.
H.Q. 1772-39-882

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. 178250 (Rank) Private Name John Herbert Holiday

Unit 87th Battalion.

Address on Discharge Hotel Manitoba Vancouver B.C.

Character and Conduct Very good.

Former Occupation Caterer.

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks European War France. 6 months.
Ore. Gold casualty stupe 4-8-16

Signed at Victoria B.C. this 29th day of May 1918.

H. B. Andrews
Name of Officer

Captain
Rank

O.C. Deschg Ser & D.A.
Appointment

M. D. 11

CANADIAN CONTINGENT EXPEDITIONARY FORCE

No. 11 District Depot
C. E. F.

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 178250 Rank Pte Name Holliday J (87th Bn)

Corps #11 D.D. who was* Discharged

On 29th May 1918, to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1st May 1918, to 29th May 1918, the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month	43	73	Bal. Cr. from prev. month		
Advances by Cheques } No.			Regt'l Pay 29 days at $ 1 c.	29	
Advances by Cheques } No.			Field Allow. 29 days at $ c. 10	2	90
Assigned Pay and Sep'n Allce. No.	43		Separation Allowances* (~~Monthly~~)	24	—
Other charges			Other Allowances* Clothing	8	
Payment on transfer or discharge No.			Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by ~~new unit~~ PDP)	22	83
Total	86	73	Total	86	73

*Give particulars.

A ~~monthly~~ stoppage of $ 19 (†) has (‡) been paid on account of Assigned Pay for the month of 1st to 29th May 1918 and Sep'n Allce. for month of 1st to 29th May 1918 (to) Assignee Mrs E. Holliday

(Address)

(†) Insert amount to be assigned, whether it has been paid or not.
(‡) Insert "not" if amount has not been paid for period of account.

CHECKED BY

On Transfer of an Officer

Outfit Allowance of $ ..... has been paid by Paymaster, Military District No. .....

REMARKS:—

State (1) date of enlistment 29/2/16

(2) if married and if a Separation Allowance Card has been submitted No

(3) cause of discharge ..... authority PO 43

(4) authority for transfer #11 DD

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date 5th June 1918

Place VICTORIA, B.C.

W. E. Gaddes Capt.
Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay-list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.

300M—2-18.
H. Q. 1772-39-903.

R—122

A.C.

Rank | Name HOLLIDAY, John Herbert. | Reg'l No. 178250

Unit 87th. Bn. | If in perm. Corps, What Unit? | Married or Single Single.

Place and Date of Enlistment St. Johns, Que.; 29th. Feb. 1916. | Place of Birth Marsh Gibbon, England.

Name and Address, Next-of-Kin Elizabeth Holliday. Waterloo Farm, Leighton Buzzard, Buckinghamshire, England. | Relationship Mother.

Assigned Pay Monthly $ | Payable to | Relationship

Separation Allowance $ | Payable to | Relationship

Discharge, Date and Place | Reason | Character

N/E. R.B. No. 9157
File R.L.
Category Cas OR

M. X. 4-2-21 R.R.

Report. Date:	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
		Arrived in England	4 MAY 1916		Empress of Britain A.F.B. 103 dtd. 10-7-16.
19-6-16	87th Bn	S.O.S. to 1st Bn (France)	Bramshott	18-6-16	A. II D0.138
14.7.16	1st "	Taken on strength.	France	24.6.16	Pt II 28.
15.8.16.	" "	E. & 3 C.G.H. Boulogne to 7 Con Dep	Boulogne.	8.8.16	C.L.A 422 S.L.L Rgt & Chs In/Ears
9.12.16	" "	D.C. to 3 Large Rest Camp.	"	28.11.16	" 512. " Otitis Media Chronic
26.12.16	" "	Class P.B & Trans to C.C.A.C.	Shoreham	11.12.16	Pt II 73
13.12.16	CCAC	Taken on strength.	Hastings	12.12.16	" 549
24.1.17.	"	Granted permission to Marry without expense to the public	"	22.1.17	Pt II 40.
16.2.17.	do	S.O.S. on Trans to Adm Staff.	"	15.2.17	Pt II 80
16.2.17	C.C.A.C. Staff	Taken on strength and on com sub Office Seaford	"	15.2.17	— 80

2-1-17

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.		Date.	REMARKS Taken from Official Documents.
22.3.17	C.C.A.C Staff.	S.o.S. to Cas.	Hastings		10.3.17	Pt. II 128.
22.3.17	"	Re 20 S. from Staff.	"		10.3.17	Pt. II 128.
22.3.17	"	S.o.S. to D.C. Regt. Sgt. Seaford	"		10.3.17	Pt. II 128. & Bde. Regt Bro. 16.
9.2.18	B.C.R.D	Awarded Good Conduct Badge	Seaford	Pte		Pt II 6.34 & 38d 142-18
20-2-18	" "	On command to C D D Buxton	"	Pte	20-2-18	" " 43
16.3.18	" "	Ceases on command to C D D Buxton & S.C.S. on Embkn to Canada for discharge ~~K R & C Para 392 Sec 16~~ for disposal of A G C Ottawa	"	Pte	27.2.18	" " 65

R.C. 28-7-20

Register No. DH 1458

WAR SERVICE GRATUITY
TO
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. 8836-J9

Regt'l No. 178250 Name John Herbert Holliday
(Christian Name) (Surname)

Unit 87th Bn Rank Pte Date of enlistment

Date of casualty 27-10-1918 B.P.C. File No. 39881

Was service performed overseas? Yes.

DEPENDENT

Name Mrs E Holliday Relationship Widow

Address King Street
Cambregeshire Eng

Amount of Special Pension Bonus $ 80 Abstracted by D Maher

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

Clerk

Audited by

Date

REMARKS: Desch 29 5/18 Query as to W.S.G.
Not Eligible W.S.G. paid in full –

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

R.G. 23

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname Christian Name

Regimental Number Rank

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Address (in full)

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. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

Remarks:

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

A—315.

ASSIGNED PAY.

List 241 "J"

PAID IN ~~CANADA~~.

To whom: Mrs E. Halliday

Address: 4 Ashhurst Rd. Seaford Sussex.

ASSIGNED PAY 20.00 SEPARATION ALLOWANCE 25.00

Rate

Date to Commence: 1.3.18

By whom assigned: Halliday. J.H.

Regtl. No.: 178250

Rank: Pte.

Corps, &c.: B.C.R.A.

ASSIGNED PAY AND SEPARATION ALLOWANCE BEING PAID IN ENGLAND UNTIL ADVICE FROM OTTAWA OF DISCHARGE OF SOLDIER NAMED HEREIN.

Noted on L.P.O.

Month.	Cheque No.	ASSIGNED PAY Amt.	SEPARATION ALLOWANCE Amt. Debited.	REMARKS.
1914 Oct.				Discharged to Canada 23.2.18 A.F.B. 179
Nov.				
Dec.				
1915 Jan.				
Feb.				
March	~~D.60421.~~	~~20~~	~~25~~	retd & cancelled
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
1916 Jan.				
Feb.				
March				

ASSIGNED PAY.

Month	Cheque No.	ASSIGNED PAY Amt.	SEPARATION ALLOWANCE Amt. Debited.	REMARKS.
1916. April				
May	5r905	11		
June	8rr85	11		
July	98550	11		
Aug.	1r965	11		
Sept.	16860r	11		
Oct.	199699	11		
Nov.	r31411	11		
Dec.	r78617	11		
1917. Jan.	3r1143	11		
Feb.	36r500	r3		to adjust Dec & Jan
March	405494	15		
April	449988	15		
May	5r369r	15		
June	A6r88r	15	40 00	A17807 may & June S.a
July	A11r749	r0	r0	
Aug.	A168905	r0	r0	
Sept.	A214889	r0	r0	
Oct.	B110r9	r0	r0	
Nov.	B31545	r0	r0	
Dec.	C7501	r0	r5	
1918. Jan.	B3r5r7	r0	r5	
Feb.	C7976	r0	r5	
March				
April				
May				
June				

L. L. Job 310—M. & D. 6574.

12614

2nd. Contingent

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Duplicate

M. F. W. 12.
50m.—4-16.
H. Q. 1772-39-819.

To Whom Mrs Elizabeth Holliday

Address Waterloo Farm, Ascot
Leighton Buzzard
Beds, Eng.

Rate ~~1/10~~ ~~May 1. 1916~~

15/- 1st Feb 1916 2nd 41610

By Whom Assigned Holliday J.

Regtl. No. 178250

Rank Pte

Corps "A" Coy. 87th Btn. C.G.S.

PAYMENTS

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

RECEIVED FROM
MAY 29 1916
OTTAWA.

ASSIGNED PAY.

By whom assigned J. Holliday

Regtl. No. 178250. Pte a. Co. 87th Bn C. G. G.

Month	Year	Cheque No.	Amt.	Pay Sheet	REMARKS.
			£.	£	
Jan.	1916				
Feb.					
March					
Apl.					
May.		52905	11		
June	✓	82285	11		
July		98550	11		
Aug.		129654	11		
Sept.		168607	11.		
Oct		199699	11		
Nov		231411	11		
Dec.	278617	278617	11		
Jan.	1917	321143	11		
Feb.		362500	23		23 $ to adjust Dec & Jany.
March		405494	15		Checked to 31/3/17 R.N. & a o Pa. Sgt Pay
Apl.		449988	15		
May		536927	15		
June		A6288	15	40 00	A7807
July		A117749	20	20	
Aug.		A168905	20	20	
Sept.		A214889	20	20	
Oct.		B110279	20	20	
Nov.		B31545	20	20	
Dec.		C7501	20	25	

315

M. F. W. 12a.
50m.—4-16.
1772—39—819.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2. (Typewriters Distributing Syndicate) PAYMENTS.

L. L. Job 310.—Req. 6574.

Name of Soldier Holliday J.

#178250. Pte. 87th Batt. A "Co"

$4.00

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May		W5854	4	
June		J 9675	4	A/c Closed
July		J 10154	4	Ret'd per Ongar
Aug.		U 14121	4	Date 21/3/18 E.X. 25/3/18
Sept.		M 16741	4	M.D. 11 Clerk M. Brennan
Oct.		M 21406	4	
Nov.		J 26413	4	
Dec.		~~J 34613~~	~~4~~	J34613 Ret'd & Cancelled 5/1/17
Jan.	1917			a/c Closed Dec 1st-16 see Corresp.
Feb.				A.S.P. 62302 7-2-17
March				K.T.23 4/17
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

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.						

L. L. Job 95618—M. & D. 6555.

314

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
15m.—3-16.
H. Q. 1772-39-819.

To Whom (Typewriters Distributing Syndicate)

Address 166-168 Michigan Bldg Chicago Ill.

Rate $ 4.00

MAY 1 - 1916

By Whom Assigned Holliday J. A

Regtl. No. 178 250

Rank Pte

Corps "A" Co 87th Battn (Can Gren Guards)

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				

316

L. L. Job 95618—M. & D. 6555.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

2nd. Contingent

M. F. W. 12.
15m.—3-14.
H. Q. 1772-39-819.

To Whom Mrs Elizabeth Holliday
Address Waterloo Farm Arcot
Leighton Buzzard
Bucks. Eng.
Rate $ 11.00

MAY 1 1916

By Whom Assigned Holliday J.
Regtl. No. 178250
Rank 178250
Corps "A" Co 87th Battn Can Gren Guards

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			Duplicate sent to England.
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				A/c Closed
March				Ret'd per Ongar
April				Date 21/3/18 F X 25/3/18
May				MD#11 Clerk M Brennan
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

ENGLISH

A—315.

ASSIGNED PAY.

List 241 F.

PAID IN ~~CANADA.~~

E

To whom Mrs E. Holliday

Address 4 Ashurst Rd,
Seaford. Sussex

Rate a.p. 20.00 s.a. 25.00

Date to Commence 1/3/18

By whom assigned Holliday Pte.

Regtl. No. 78750

Rank Private

Corps, &c. B.C.K.D.

ASSIGNED PAY AND SEPARATION ALLOWANCE [illegible] ENGLAND UNTIL ADVICE [illegible] OTTAWA OF DISCHARGE OF [illegible] NAMED HEREIN

noted on file

Month.	Cheque No.	Amt.	Amt. Debited.	REMARKS.
1914. Oct.				Discharged to Canada 22/2/18 A.F.B 179
Nov.				
Dec.				
1915. Jan.				
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
1916. Jan.				
Feb.				
March				

ASSIGNED PAY.

Month	Cheque No.	Amt. A.P.	Amt. Debited. S.A.	REMARKS.
1916. April				
May	5 2905	11 00		
June	8 2285	11		
July	98550	11		
Aug.	1 29654	11		
Sept.	168602	11		
Oct.	199699	11		
Nov.	231411	11		
Dec.	278617	11		
1917. Jan.	3 21143	11		
Feb.	36 2500	23		to Aapint Rec'd Jan
March	405494	15		
April	449988	15		
May	5 23692	15		
June	A6 2882	15	40 00	A17807 May + June S.A.
July	A1 27749	20	20	
Aug.	A168905	20	20	
Sept.	A214889	20	20	
Oct.	B110229	20	20	
Nov.	B31545	20	20	
Dec.	C7501	20	25	
1918. Jan.	B3 5227	20	25	
Feb.	C79176	20	25	
March				
April				
May				
June				

A—305.

Ref. No.

MILITIA AND DEFENCE

Separation Allowance.

~~ASSIGNED PAY.~~

To whom Mrs E. Holliday

Address

Canada

By whom assigned Holliday J.H.

Regtl. No. 178250

Rank Pte.

Corps, &c. B.C.R.D.

Rate 25.00

Date to Commence 1/3/18

PAYMENTS.

Month.	Year	Cheque No.	Amt.	Pay Sheet Deduction.	REMARKS.
					8836-J-26
Jan.	1916				A/c Closed 28/2/18
Feb.					Ret'd per Ongar
March					Date 21/3/18 7-6-18
Apl.					M.D.11 Clerk M Brennan
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1917				
Feb.					
March					
April					
May					
June		17807	40 -		May & June S.A.
July		A112449	20		
Aug.		A168905	20		

ASSIGNED PAY.

By whom assigned

Regtl. No.

Month	Year	Cheque No.	Amt.		Pay Sheet		REMARKS.
Sept.	1917	A214889	20	-			
Oct		B11029	20				
Nov		B31545	20				
Dec.		C4501	25				
Jan.	1918	B32524	25				
Feb.		C49146	25				
March							Dupl. sheet rec'd from England. 3-5-18 El.
Apl.							
May							
June							
July							
Aug.							
Sept.							
Oct.							
Nov.							
Dec.							
Jan.	1919						
Feb.							
March							

A—315.

ASSIGNED PAY.

Copy.
~~PAID IN CANADA.~~

To whom Mrs E. Halliday

Address

Canada.

By whom assigned Halliday J. H.

Regtl. No. 178250

Rank Pte.

Corps, &c. B.C.R.D.

	ASSIGNED PAY	SEPARATION ALLOWANCE
Rate	$20.00	$25.00
Date to Commence	1st March 1918	

ASSIGNED PAY AND SEPARATION ALLOWANCE BEING PAID IN ENGLAND UNTIL ADVICE FROM OTTAWA OR DISCHARGE OF SOLDIER NAMED HEREIN. Noted on L.P.C.

8836-J-26

Month.	Cheque No.	ASSIGNED PAY Amt.	SEPARATION ALLOWANCE Amt. Debited	REMARKS.
1914. Oct.				Discharged to Canada.
Nov.				
Dec.				A/c Closed 28/2/18
1915. Jan.				Ret'd per Ongar
Feb.				Date 21/3/18 25/3/18
March				MD#11 Clerk M Brennan
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
1916. Jan.				
Feb.				
March				

ASSIGNED PAY.

Month.	Cheque No.	Amt. ASSIGNED PAY	Amt. Debited. SEPARATION ALLOWANCE	REMARKS.
1916. April				
May	52905	11		
June	82285	11		
July	98550	11		
Aug.	129654	11		
Sept.	168602	11		
Oct.	199699	11		
Nov.	231411	11		
Dec.	278617	11		
1917. Jan.	321143	11		
Feb.	362500	23		
March	405494	15		
April	449988	15		
May	523692	15		
June	A 62882	15		
July	A 112749	20		
Aug.	A 168905	20		
Sept.	A 214889	20		
Oct.	B 11029	20		
Nov.	B 31545	20		
Dec.	B 7501	20		
1918. Jan.	B 32527	20		Dupl. sheet rec'd from England 3-5-18 E.D.
Feb.	C 79176	20		
March				
April				
May				
June				

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

12252/244

Name Halliday, J. H.
Surname Christian Name

Regimental Number 178250 Rank Pte.

Unit D.D. II

Original Unit

District where paid M.D. #II

Date of Discharge

P. D. P. Filing Number 6-234-II

Address (in full) 1369 Pender St. W.
Vancouver, B.C.

Mrs Emma Halliday

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

L. L. 46038—M. & D. 9245.

Total Credits 91 days	FIRST PAYMENT Cheque No. A	Date	Amount 30 days	SECOND PAYMENT Cheque No. B	Date	Amount 30 days	FINAL PAYMENT Cheque No. C	Date	Amount 31 days	Balance Over-payments to be Recovered	Total Amount Paid
175 10	2999	29-5-18	58 00	2899	29-6-18	58 00	2375	30-7-18	336 27	22 83	152 27
~~2527 1st 4412910~~		~~7-11-19~~	~~70 00~~								
~~2527 1st 4412911~~		~~7-11-19~~	~~90 00~~								

Remarks: $22.83 Overpayment by D D. II

M. F. W. 127.
25M.—8-18.
2772-39-1140.

5-5-19
GWM

Dec'n No 12252/244 File No 8836.9.9
Award 13-3 days at $100 per day $ 300 00
S. A. ..... months at $ ... mo. $ .... $
Less F. D. P. collected $ 125 00
$
Less further debit balance $....
Net due paid as below 3249 00

TO SOLICITOR INDEPENDENT

O	Ag. No		Amount		Cheque No		Amount	
1	~~25-27~~	~~417910~~	~~30~~	~~00~~	25-27	417911	30	00
2	~~2259~~	~~422637~~	~~90~~	~~00~~			30	00
3			34	90			30	00
4					~~[illegible]~~	~~480054~~	~~30~~	~~00~~
5	CAN	1597	174	90		486950	30	00
6					CAN	1598	120	00

* 7-4-19 — 7-4-19 — 17.6.19 ✗

422637 - Cancelled by request
Trace 12245 - 9/5/19

* Check # 417910 Cancelled.
with Tracer #12985 - 4/9
GWM

Cheque No 480054 cancelled (gone to Eng) Tr. 13730
" " 486950 " " " " Tr. 14641 3.7.19
T 14641
Hold for letter from 28.7.19
Dep see file 29-7-19
OB

Debit 2.01 AD PS

1365 Pender St, West,
Vancouver, B.C.
Wife - As Above.
Mrs Emma Holliday
~~Dep~~ 4 Ashurst Rd.
Seaford
Sussex
Eng.

Dep/Mrs Emma Holliday
To Mrs Burling
King St
Over.
Cambs.
Eng.

E

Under J.H

M. F. W. 41
1 0M—7-16
1772-39 889.

Name Pte Holliday J.

Regimental No. 178250

Unit 87th Bn.

Date of enlistment 29/2/16

Place of "

Married (yes or no) yes

Amount of pay assigned monthly $ 20.00

To whom payable Mrs E Holliday

Name and address of next-of-kin

T for R 1-5-18

Date and place discharged Disch'd 29/5/18

Reason for discharge D/O. 43

Character on discharge

1369 Pender St W Vancouver B.C.

Job 5351—M. & D. 6880.

	Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
May	1/5	29/5	29	1.00	29	29	10c	2 90	24 8	63 90				43	43 73	86 73	22.83 Dr. Bal
Adj									27	27			27			27	

M. F. W 41
1 0M—7.16
1772-39 889.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					

Form P. 812B.
79691 5m 18/9/19 D.671

CA FILE NO 7995

WAR SERVICE GRATUITY and SEPARATION ALLOWANCE

Payable to Holliday Mrs Emma

Address c/o Burling, King St, Ever, Cambs.

Dependent Holliday J.H. # 178250

Address Deceased

Date	Cheque No.	Gratuity			Payments			Balance Due			Remarks
1919		24	13	2.							S.A.
Oct.		35	18	9.				60	11	11	Soldiers Portion payable to widow
" 11	125199	60	"	"	12	6	7	48	5	4	P & A Board see C.A.
Nov. 10	131182				20	10	11	27	14	5	
Dec. 12	151846.				14	7	8	13	6	9	
1920 Jan 16	157274				13	6	9	—	0	—	
		60	11	11	60	11	11				

P. 559

MARRIED OR SINGLE

PLACE OF BIRTH Ma

NAME AND ADDRESS OF NE

Waterloo Farm,

RELATIONSHIP OF NEXT OF

NAME AND ADDRESS OF NE

RELATIONSHIP OF NEXT OF

SEPARATION ALLOWANCE M

PAYABLE TO Mrs Ed

~~Hacke~~

RELATIONSHIP OF DEPENDA

Checks

AP Checks 23

	DATE 1916	PAY No. of Days	Rate	Am $
	1-31 5/16	31	1.00	31
herrer	1-17 6/16	17	1.00	17
		13		
	July	31		31
	Aug	31		31
	Sept	30	1	30
	Oct	31	1	31
	Nov	30		30
	Dec	31		31
				23

P. 559

MARRIED OR SINGLE Single

PLACE OF BIRTH Marsh Gibbon, England

NAME AND ADDRESS OF NEXT OF KIN Mrs Elizabeth Holliday
Waterloo Farm, Leighton Buzzard, Bucks, Eng.

RELATIONSHIP OF NEXT OF KIN Mother

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN 25.00 xx 1-12-17

SEPARATION ALLOWANCE MONTHLY $ ~~20~~ 20 EFFECTIVE (DATE) 1-7-17

PAYABLE TO Mrs Emma Holliday (Canada)
~~Hadlow Rd. Seaford Sussex~~

RELATIONSHIP OF DEPENDANT Wife

Cheque to 30/3/17 Rd'd & gall Dr. Sy/Br 9
AP Checked to 30/3/17 found to be Correct
W. Ferguson

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

DATE 1916	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	No.
														43	43 00							
	1-31 5/16	31	1.00	31	00	31	10	3	10						34 10	11	15 5/16	69	31 5/16			
herrer	1-17 6/16	17	1.00	17	00	17	10	1	70						18 70	104	15 6/16					
		13													14 30							
July		31		31		31		3	10						34 10							
Aug		31		31		31		3	10						34 10							
Sept		30	1	30		30	10	3							33							
Oct		31	1	31		31	10	3	10						34 10							
Nov		30		30		30		3							33							
Dec		31		31		31		3	10						34 10							
				23	70			23	20													
				255	20										312 50							

CB 3902 30/6

CB 4352 13/7
CB 6544 9.8
OSB 342 15/8
1039 3 OSB
2 18/9 CB
49 6/10
120 12/10

233 3/11
233 3/11
179 25/10
358 10/11 CCC
11410 1/9 OSB
396 24/11
7905 8/12

Good Conduct

P. 559

MARRIED OR SINGLE Single

PLACE OF BIRTH Marsh Gibbon, England

NAME AND ADDRESS OF NEXT OF KIN Mrs Elizabeth Holliday Waterloo Farm, Leighton Buzzard, Bucks, Eng.

RELATIONSHIP OF NEXT OF KIN Mother

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN 25.00 xx 1-12-17

SEPARATION ALLOWANCE MONTHLY $ ~~20~~ 20 EFFECTIVE (DATE) 1-7-17

PAYABLE TO Mrs Emma Holliday (Canada) ~~Hachurst Rd. Denton Sussex~~

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORIT

ADMISSIONS TO HOSPITAL, &c.

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

1. L.P.C. issued, date. 21/2/18 12/18 DW 20/1 76
2. Authority. A.Z.B. 179
3. Discharged to. Canada
4. Pay Book verified. 21/2/18
5. Balance shown on L.P.C.$. Dr 24.75
6. Balance shown in Ledger Sheet $. Cr 36.21
7. Full particulars of entries making difference between 5 and 6 if any.

No.	Date.	Unit & particulars of entries.	Amount Debit		Amount Credit	
~~59~~	~~4/1/19~~	~~C.C.A.C. Reduce~~	~~2~~	~~56~~		
~~23~~	~~12/4/19~~	~~" Effective~~	~~24~~	~~38~~		
~~530~~	~~25/4/18~~	~~" Overpaid~~	~~19~~	~~44~~		
~~598~~	~~13/2/18~~	~~" Overpaid~~	~~4~~	~~64~~		
~~625~~	~~18/2/18~~	~~" Stopped~~	~~2~~	~~74~~		
Net Difference $ 60.96			60	96		

8. Assigned Pay cancelled. Stopped Eff. 1/3/18
A.Z.M. Forms rendered.

or

9. Separation Allowance and Assigned Pay continued, to dependent in England, and transferred to Accounts Branch for payment. ✓

Certified correct. J.A. Thompson Lieut.
Officer i/c Group. 5

ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	No
	43	43 00							
		34 10	11	15 5/16	69	31 5/16			
		18 70	104	15 6/16					
		14 30							
		34 10							
		34 10							
		33							
		34 10							
		33							
		34 10							
		312 50							

CB D 3902 30/6

CB 4352 13/7
CB D 6584 9.8
OSB 342 15.8
10393 OSB
2 18/9 CB
49 6/10
120 12/10

233 3/11
233 3/11
179 25/10
358 10/11 CCC
11410 1/9 OSB
396 24/11
7908 8/12

Good Conduct

PROMOTIONS, &c.	
EFFECTIVE DATE	AUTHORITY

HOSPITAL, &c.
NAME OF HOSPITAL

REG'L NO. 178250 RANK Private NAME Holliday E John Herbert WORD

IF IN PERMT. CORPS / WHAT UNIT — UNIT 87th Bn. TRANSFERRED TO 1st Bn. DATE 18-6-16 AUTHORITY B.O. 138 19-6-16

PERMANENT FORCE ALLOWANCES — TRANSFERRED TO CCAC DATE C 1/1/17 AUTHORITY Notes

PLACE OF ATTESTATION St. Johns, P.Q. — TRANSFERRED TO WORD. DATE 1-1-17 AUTHORITY

DATE OF ATTESTATION Feb. 29/1916 — TRANSFERRED TO B.C.R.D. DATE 1-2-18 AUTHORITY D.W.

~~15.00~~ ~~1-1-17~~ Solw a.P. 41610 a.P. 6v30v Address Send 17/1/17

ASSIGNED PAY MONTHLY $ ~~15.00~~ DATE EFFECTIVE ~~1.5.16~~ ~~Two Assignments $11.00~~ & ~~$11.00~~ 25 SEP 1916

PAYABLE TO ~~Mrs. E. Holliday, Waterloo Farm, Leighton Buzzard, Bucks, Eng.~~ ~~Typewriting Distributing Syndicate, 166-168 Michigan Bldg., Chicago, Ill, U.S.A.~~ (~~$11.00~~) RELATIONSHIP ~~&~~ Mother

ASSIGNED PAY MONTHLY $ ~~15.00~~ 20.00 DATE EFFECTIVE 1 July 197 (~~$11.00~~) 11.00 a.P. cancelled eff 1.1.19 a.P. 41610

assignee left for Canada (address Unknown)

PAYABLE TO Mrs Emma Holliday ~~Hohwood Rd. Seaford Sussex~~ RELATIONSHIP Wife

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) Stopped EFFECTIVE 1/3/18 REASON Discharged to Canada

DISCHARGE DATE AND PLACE 21/2/18 Canada. REASON AND AUTHORITY Disposal A.F.B. 179.

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

C

ACQUITTANCE ROLLS 2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
													30	60	12	40	Bal. B/f. from Canada
69	31/16 5					12 17 ✓	7 30 ✓			15 00			34 47		12	03	
						7 30 ✓				15 00			22 30		8	43	
															22	73	
		CBD 3902 3076						4 26 ✓		15 —			19 26		37	57	
										15 —			15 —		56	67	
		CD 4352 13/7 CBD 6584 9.8 OSB 342 15.8						4 35 ✓ 4 36 ✓ 3 49 ✓		15			27 20		62	47	
		10393 OSB 29/8 2 18/9 CBD 49 6/10 " 120 12/10 "						3 49 ✓ 4 36 ✓ 2 62 ✓ 2 62 ✓		15			28 09		68	48	
		233 3/11 CBD 233 3/11 " 179 25/10 CCC 358 10/11 CCC. Bd 11410 1/9 OSB. 396 24/11 CCC 7908 8/12 CBD.						5 53 ✓ 2 62 ✓ 2 62 ✓ 2 62 ✓ 1 88 ✓ 1 34 ✓ 4 36 ✓		15			25 47		76	01	—
						19 47	7 30	59 22	30 60	120			23 65	9	75	91	—

Good Conduct Badge D.O. 34 9/2/18 1st Div Bn

148250 Pte Holliday

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4
1917			255	70											317 50												
Jan 31	31	1/-	34	10										15 36	34 46					1657 12/12 CCC						2 43	
Feb	28		30	80											30 80	1457 bbalf 26/1.				1723 18/2				4 87		24 00	
Mar 1/3	31		34	10										5 11	5 11 34 10			H.Q.S.I. Lafond.		5 10/3.						9 73	
Apl	30		33												33												
May			~~33~~												~~33~~												
	1		1	10											1 10												
June 1	30		33				40								73												
July	31		34	10			20 ~~40~~								54 10												
Aug	31		34	10			20								54 10					16 Rec. 3/10 28/7/17						7 30	
																				110 1 Rec. 30/4						9 73	
Sept	30		33				20								~~53~~.					63 " 14/4						7 30	
															433 27									4 84		60 82	

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	E. D. & D.	BALANCE	DEFER-RED PAY	SER. ALLOC. ENG.
		~~180 13~~						180 13		
Oct	PP	34 10		B 11029		20		194 23	20	
		34 10				20			20	
Nov. 30	P.P.	33		B. 31545 £8. 4. 4		20			20	
Dec. 31	✓	34 10		C. 7501 £9. 4. 11		20			25	
				Dn		40			45	
				AR. 181. 31-8-17. B.C.R.D.	9 73					
				✓ 101. 15-7-17. ✓	19 47					
				✓ 210. 15-5-17. 1 Res. Bn.	14 60					
				✓ 1525. 15-8-17. B.C.R.D.	9 74					
				✓ 273. 31-5-17. 1 Res.	24 33					
				✓ 264. 15-10-17. B.C.R.D.	12 17					
				✓ 799. 31-10-17 ✓	9 73					
				✓ 208. 15-9-17. ✓	9 73					
				✓ 236 29-9-17 ✓	24 33			87 50		
		67 10			133 83	40			45	
1918. Jan 31	P.P.	34 10		B32527. £9-4-11.		20			25	
				DnAR 128. 31/7/17 BCRD	9 73.					
				✓ ✓ 55. 30/6/17. 1 Res.	24 33					
				✓ ✓ 349. 30/11/17. BCRD.	9 73					
		34 10			43 79	20			25	

MONTH	PARTICULARS	CR. 1	CR. 2
Jan.	Pd.	34 10	
Feb	P.P.	30 80	
	Uncredited 4 50 on Sick Fur Jan 1917	4.50	
		35 30	
Mar.			
Apr			
July	C/n 246, acct Bde Sailing 7/28/2/18		26 76

day J.H.

Cash Payments 2	Cash Payments 3	Cash Payments 4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
			120		236 59	75 91				
	2 43									Q4005 1467 31/7/16 87 Bn
	24 03		15	86	42 62	82 75				Granted A.F. 18/7/16 to 18/1/17 Boston
										19.IV.16 C.E.A.C
			15		14 87	93 62				Granted 1/17 Demoted
										Sick Leave 19/21 - 23/2/17 D.O. 92 23/2 Hosp. 7 days @ 13¢
	9 73		15		24 73	108 16				
			165							449988
			15		15	126 16				
										523692
			15		15	144 16				
						145 26				
			15 40		55	163 26				A62882
			20 20 40		40	177 36				A112749 12/2 to July; Unauthorized 17807 1st May to June
	7 30		20 20		47 30	184 16				a168905
	9 73 7 30		20 20		57 03	180 13				a7147887
	60 82		210							

Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Deferred Sep. Fed. Allce. Pay Eng.
34 10			43 79		20		87 50	25
		DW						
		AR. 329. 15-11-17. B.6.R.D.	9 73					
		✓ 370. 6-12-17. ✓	19 47				28 61	
34 10			72 99		20			25
30 80		C49146 29-4-11			20			25 00
		O/C 7 days 22/2 to 2/18		7 70			31 41	
4.50							36 21	
		AR 530 25/1/18 10 Rec. Bn.	19 47					
		Draft. 23 15/4/17 " "	24 33				7.59	
35 30			43 80	7.70	20			25 00
		AR. 598 13/2/18 10 Rec.	4.87					
		" 625 20/2/18 "	9.73					
		" 59 19/1/17 C.C.a.c.	2.55				24 74	
			17.15					
		O/C 7 days 31/3/18 Drafted	2 01				26 75	
			2 01					
	26 76	Diff in exchange		01			0	
	26.76			01				

(Wife) Emma Holiday, Hotel Manitoba, Vancouver, B.C.

(Medical Officers will please read this Form carefully before using it. See instructions, page 4.)

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O'S, AND MEN

MEDICAL HISTORY OF AN INVALID

No. X1, C/c HOLLIDAY STATION New Westminster, B.C. DATE Mar. 27, 1918

1. (a) Unit 87th Bn. (b) Regimental No. 178250 (c) Rank Pte.

(d) Surname Holiday (e) Christian name John Herbert

2. Age last birthday 27 Date of birth Sep. 3, 1890

3. Enlisted at St. Johns, Que. on Feb. 29, 1916

4. Personal description :—

(a) Height 6' 4½" (b) Weight 240 (stripped) (c) Complexion fresh

(d) Colour of hair D. brown (e) Colour of eyes brown (f) Identification marks

Vacc. 4 left

5. Address after discharge (for the use of the Board of Pension Commissioners.)

Hotel Manitoba, Vancouver, B.C.

6. Former trade or occupation Caterer

7. (a) Service

Years	Days
2 1/12	24

	Periods From	Periods To
Canada	Feb. 29, 1916	Apr. 10, 1916
England	Apr. 10, 1916	June 26, 1916
France	June 26, 1916	Dec. 12, 1916
England	Dec. 12, 1916	Mar. 17, 1918
Canada	Mar. 17, 1918	Present

(b) Has he been Overseas? Yes

8. Present disease or disability (use authorized nomenclature if possible). V.D.H.

(a) Date of origin 1911 (b) Place of origin U.S.A.

(c) Cause* Rheumatic fever

*(Here include original disease or injury)

9. Present condition. (Important, to be a full description of the present disabling condition or conditions).

Pulse at rest 100, after touching toes ten times 140, is regular. There is a pronounced systolic murmur at apex. Heart is enlarged to nipple line. Systolic thrill on palpitation. Complains of dyspnoea in climbing a hill or stairs, walking fast or running. Could do 2 miles on the level walking slowly, any attempt at walking fast causes dyspnoea and palpitation. Complains of feet swelling on occasions at the end of the day. Lungs normal. Incapacity due to partial loss of function of heart.

[After describing all abnormalities, anatomical and functional, contributing to present incapacity (see section 11) state whether such incapacity is directly due to (a) weakness, (b) loss (complete or partial) of an organ or member or of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

M. F. B. 227.

15 M.-6-17.
772-39-117.

10. History ;

Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination

Vacc. 4 left.

11. To what extent, state in percentages, is capacity to earn a livelihood in the untrained labour market reduced? If there is more than one disabling condition, estimate the incapacity due to each, and that due to all combined.

40% should decrease in 6 mos.

12. Did the disability arise on or off duty? Before enlistment

13. Was a Court of Inquiry held? No

14. If the disabling condition had its origin before enlistment, has it been aggravated on service? Yes

Yes 20% (50% aggravation) No.

(If the answer is in the affirmative, state in percentages, to what extent the soldier is incapacitated by that aggravation.)

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? No

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

16. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? Permanent should improve in 6 mos.

17. Treatment (Case reports, general or special, should be secured and attached where possible).

Hospitals in France

18. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

No, he had 4 months treatment in hospital with no improvement

19. Can the former trade or occupation be resumed? Yes

20. Recommendations

Discharge Class E. Medically unfit.

Medical Board.

Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier.)

I, the undersigned J. Holliday have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of

J. Holliday

Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

21. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticized.

Concurs

22. Is the soldier fit for

(a) General service, (Category A) (~~Yes~~ or No).
(b) Service abroad, not general service, (" B) (~~Yes~~ or No).
(c) Home service, (Canada only), (" C) (~~Yes~~ or No).
(d) Temporarily unfit, (" D) (~~Yes~~ or No).
(e) Unfit for service in Categories A, B and C, (" E) (Yes or ~~No~~).

23. It is certified that the soldier

(a) ~~Does require treatment.~~
(b) Does not require treatment.
(c) Should pass under his own control.
(d) ~~Should not pass under his own control.~~

(Strike out condition not applicable).

24. It is recommended that the soldier be discharged. (When not for discharge add special recommendation).

Discharge Class E. Medically unfit

President.

Members.

STATION New Westminster, B.C.

DATE Mar. 27, 1918.

APPROVED BY

DATE APR 5 - 1918

For Assistant Director of Medical Services.

A.M.C. M.D. 1

APPROVED BY

DATE

Director-General of Medical Services.

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned,.....understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....

Should the refusal of the soldier to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

INSTRUCTIONS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
3. In answering the questions, Medical Officers will carefully obtain and record the soldier's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the soldier concerned, from witnesses, or from documents.
4. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space on this page.
5. The nomenclature of diseases to be followed is that described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London, (1915), by Messrs. Harrison and Sons.

PART I. 1634 Form (D.M.S. 1312). A.F.B. 179 Canada (Revised). 3737. 50M.

Reserved for M.H.C.

Regt. No. 178250 Rank PTE Surname HOLIDAY Christian Name JOHN HERBERT

Unit or Corps—(a) Overseas from United Kingdom 1ST BATT (b) In United Kingdom 1ST RES

Born at—Town MIRSH GIBBON County or Province BUCKS Country ENGLAND

Date of Birth—Day 3RD Month SEPTEMBER Year 1892 Age 26 yrs 6 months.

Joined at ST JOHNS GUE. Date 21ST FEBRUARY 1916

Former Trade or Occupation CATERER

Permanent marks or peculiarities that will serve for future identification :—

VACCINATION — FOUR — LEFT ARM.

1

Height—feet 6 inches 4 Colour of eyes BROWN

Signature of Soldier (*for identification purposes*) John Herbert Holliday

Medical Report.

☞ *The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully discriminate between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents bearing on the case. He will plainly state the existence of any of the disability prior to the soldier joining for the present war.*

1. DISABILITY (*State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted*). (*Follow the official nomenclature as far as possible.*)

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (*a*) SHORTNESS OF BREATH. SLIGHT PAIN LEFT CHEST — SWELLING OF FEET

Disabilities Group (*b*) —

Disabilities Group (*c*). —

2. CAUSE OF DISABILITY. (*Follow the official nomenclature in stating the disease or injury.*)

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	V.D.H.	ENGLAND	1908
(*ii.*) As to Group (*b*) above.	—	—	—
(*iii.*) As to Group (*c*) above.	—	—	—

NOTE.—By Active Service is meant Service with the Colours in Canada, United Kingdom, or elsewhere during the present war (since August 4th, 1914).

3. Is the disability due to disease contracted or injuries received prior to Active Service ?

(*i.*) As to Group (*a*) above ? YES If yes, has Active Service aggravated it ? YES

(*ii.*) As to Group (*b*) above ? — If yes, has Active Service aggravated it ? —

(*iii.*) As to Group (*c*) above ? — If yes, has Active Service aggravated it ? —

4. Is the disability due to disease contracted or injuries received while on Active Service—

(*i.*) As to Group (*a*) above ? NO

(*ii.*) As to Group (*b*) above ? —

(*iii.*) As to Group (*c*) above ? —

PART I. (*continued*).

5. If a cause of disability was an injury received on Active Service, was it received—

(*i.*) While on duty? not app. (*ii.*) While off duty? not app.

(*iii.*) Was a Court of Inquiry held? not app. (*iv.*) Where? not app. (*v.*) When? not app.

(*vi.*) Opinion of the Court? not app.

6. HISTORY OF THE CASE. (*State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records*).

History of Rheumatic Fever twelve years ago — in bed about five months — no [illegible] attacks since but several attacks of tonsilitis. While in France was invalided to England with this condition — had a months leave to "rest up" — Has been acting as batman for past ten months — Unable to do only light work. In France three months.

7. PRESENT CONDITION. (*Give previous and present weight if likely to indicate progress of disability.*)

Complains — Shortness of breath — pain — left chest — slight swelling of feet. Dyspnoea

Exam — looks like healthy individual — Says if he walks more than half a mile is completely played out and becomes very dizzy. Pulse 110 per minute — very poor sustained and fall away quickly — Increased to 140 upon exertion and of a running nature — Marked systolic murmur at apex — propagated to axilla also aortic systolic murmur over aorta and propagated down left of sternum. slight swelling of feet. Heart not enlarged other systems normal.

8. OPERATION. (*i.*) Was one performed? no

(*ii.*) If so, state what. —

(*iii.*) Was one advised and declined? —

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto unless there is evidence to the contrary.

9. (*i.*) Is there loss or decay of teeth attributable to Active Service? No

(*ii.*) If so, describe. —

10. DO YOU RECOMMEND:—

(*a*) Fit for duty? no

(*b*) Fit for base duty? Yes B111 not likely to be raised to a higher category — six months

(*c*) Invalid to Canada? —

(*d*) Discharge from the Service as permanently unfit? —

Date of Report 7 Feb. 18 1918

Station Seaford

Signed J. W. Macleod Capt
Officer in medical charge of case.

I have satisfied myself of the general accuracy of the above Report, and concur therein *except

T. J. Graham Capt (Officer i/c / S.M.O. / Hospital / Brigade) Strike out one of these.

Dated at Seaford Station, on Feb 18 1918

* Delete if inapplicable.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

☞ *Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.*

11. Is the disability fully indicated in Part I. (1)? yes
If not, indicate it.

12. Is the cause of the disability fully indicated in Part I. (2)? yes
If not, indicate it.

13. Was the disability caused or aggravated by— (*a*) Negligence of the Soldier { Caused? no / Aggravated? no } (*b*) Misconduct of the Soldier { Caused? no / Aggravated? no }

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(*Estimate at none*, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, *or* 100%.)
Not appl.

15. THE PENSIONABLE DISABILITY.—*see Part I.* (3). *Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate).*
What part of the entire disability estimated next above in (14) is due to causes arising during Active Service?
(*Estimate at none*, $\frac{1}{8}$, $\frac{2}{8}$, $\frac{3}{8}$, $\frac{4}{8}$, *or all.*)
Not appl.

16. Permanency of the Pensionable Disability estimated next above in (15).
(*i.*) Is it permanent? Not appl.
(*ii.*) If not permanent, what is its probable minimum duration (*in months*)?

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable? Not appl.

18. Remarks.

19. Recommendation:—(*a*) Fit for duty? no
(*b*) Fit for base duty? yes B III not +
(*c*) Invalid to Canada? no
(*d*) Discharge from service as permanently unfit? no

Classification for the Military Hospitals Commission.

Date of Board 18-2-18

Station Seaford

Signatures of the Board. { U Wallace Capt. President. / J McMurtry / J J Gilbes Capt

APPROVED.

Approved

Dated at Seaford, Sussex. 18 Feb 1918

A.D.M.S. T J Gutman Captain C.A.M.C. for A.D.M.S. Canadians

Station 191

Proceedings of the Pensions and Claims Board on the Soldier mentioned in Part I.

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the day of 191

Members of the Board :—

The Board having considered the evidence of the soldier marginally named, together with the documents submitted, recommend :—

Dated at this day of 191

Signatures of the Board

.....
President.

.....

.....

.....

Reserved for M.H.C.

Regt. No. 178250 Rank Pte. Surname Holliday Christian Name John Herbert.

Unit or Corps—(a) Overseas from United Kingdom 1st Battn. (b) In United Kingdom 1st Res.

Born at—Town Mirshgibbon County or Province Bucks. Country England.

Date of Birth—Day 3rd Month September Year 1892 Age 25 yrs. 6 months.

Joined at St Johns, Quebec. Date 21st Feb. 1916.

Former Trade or Occupation Caterer.

Permanent marks or peculiarities that will serve for future identification:—

Vaccination - Four - Left Arm.

Height—feet 6 inches 4 Colour of eyes Brown.

Signature of Soldier (*for identification purposes*) John Herbert Holliday.

Medical Report.

☞ *The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully discriminate between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents bearing on the case. He will plainly state the existence of any of the disability prior to the soldier joining for the present war.*

1. DISABILITY (*State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted*). (*Follow the official nomenclature as far as possible.*)

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (*a*) Shortness of Breath slight pain Left Chest. Swelling of feet.

Disabilities Group (*b*)

Disabilities Group (*c*).

2. CAUSE OF DISABILITY. (*Follow the official nomenclature in stating the disease or injury.*)

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	V.D.H.	England	1908.
(*ii.*) As to Group (*b*) above.			
(*iii.*) As to Group (*c*) above.			

NOTE.—By Active Service is meant Service with the Colours in Canada, United Kingdom, or elsewhere during the present war (since August 4th, 1914).

3. Is the disability due to disease contracted or injuries received prior to Active Service?

(*i.*) As to Group (*a*) above? YES If yes, has Active Service aggravated it? YES.

(*ii.*) As to Group (*b*) above? If yes, has Active Service aggravated it?

(*iii.*) As to Group (*c*) above? If yes, has Active Service aggravated it?

4. Is the disability due to disease contracted or injuries received while on Active Service—

(*i.*) As to Group (*a*) above? NO.

(*ii.*) As to Group (*b*) above?

(*iii.*) As to Group (*c*) above?

5. If a cause of disability was an injury received on Active Service, was it received—

(*i.*) While on duty? Not applicable (*ii.*) While off duty? Not applicable

(*iii.*) Was a Court of Inquiry held? Not applicable (*iv.*) Where? (*v.*) When?

(*vi.*) Opinion of the Court? Not applicable.

6. HISTORY OF THE CASE. (*State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records*).

History of Rheumatic Fever ten years ago - in bed about five months. No more attacks since but several attacks of Tonsilitis. While in France was invalided to England with this condition. Had a month's leave to "rest up". Has been acting as Batman for the last ten months. Unable to do only lightest work. In France three months.

7. PRESENT CONDITION. (*Give previous and present weight if likely to indicate progress of disability.*)

Complains. Shortness of breath - pain in left chest - slight swelling of feet - Dizziness.
Exam:- Looks like healthy individual. Says if he walks more than half a mile is completely played out and becomes dizzy. Pulse 118 per minute - very poorly sustained and fall away quickly. Increased to 140 on exertion and of a running nature - Mitral syostolic murmers at apex - propagated to auxilla, also aortic ~~xxxxxx~~ systolic murmer over aortic area. Propogated down right of sternum. Slight swelling of feet. Heart not enlarged. Other systems normal.

8. OPERATION. (*i.*) Was one performed? NO.

(*ii.*) If so, state what.

(*iii.*) Was one advised and declined?

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto unless there is evidence to the contrary.

9. (*i.*) Is there loss or decay of teeth attributable to Active Service? NO.

(*ii.*) If so, describe.

10. DO YOU RECOMMEND:—

(*a*) Fit for duty? NO.

(*b*) Fit for base duty? YES. B-111. Not likely to be raised to a higher category in six months.

(*c*) Invalid to Canada? NO.

(*d*) Discharge from the Service as permanently unfit? NO.

Date of Report Feb. 18th 1918 Signed G.W.MacNeil. Capt.
Officer in medical charge of case.

Station Seaford.

I have satisfied myself of the general accuracy of the above Report, and concur therein except

T.F. Graham. Capt. (Officer i/c Hospital / S.~~M.O.~~ ~~Brigade~~) Strike out one of these.

Dated at Seaford Station, on Feb. 18th 1918.
Delete if inapplicable.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

☞ *Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.*

11. Is the disability fully indicated in Part I. (1)? yes.
If not, indicate it.

12. Is the cause of the disability fully indicated in Part I. (2)? yes.
If not, indicate it.

13. Was the disability caused or aggravated by—
(a) Negligence of the Soldier — Caused? no. Aggravated? no.
(b) Misconduct of the Soldier — Caused? no. Aggravated? no.

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(*Estimate at none*, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, *or* 100%.)
not appl.

15. THE PENSIONABLE DISABILITY.—*see Part I.* (3). *Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate).*
What part of the entire disability estimated next above in (14) is due to causes arising during Active Service?
(*Estimate at none*, $\frac{1}{5}$, $\frac{2}{5}$, $\frac{3}{5}$, $\frac{4}{5}$, *or all.*)
not appl.

16. Permanency of the Pensionable Disability estimated next above in (15).
(*i.*) Is it permanent? not appl.
(*ii.*) If not permanent, what is its probable minimum duration (*in months*)?

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable? not appl.

18. Remarks.

19. Recommendation:—(*a*) Fit for duty? no.
(*b*) Fit for base duty? yes,Biii.not likely to be raised in 6 months.
(*c*) Invalid to Canada? no.
(*d*) Discharge from service as permanently unfit? no.

Classification for the Military Hospitals Commission

Date of Board 18-2-18.

Station Seaford.

Signatures of the Board. Sgd. N.C. Wallace. Capt. CAMC. *President.*
J. McKee. Capt.
J.Z. Gillies. Capt.

Approved 18-2-18.

Dated at Seaford, Sussex.

A.D.M.S. [signature]
Captain, C.A.M.C.
for A.D.M.S. Canadian

Station

191

Proceedings of the Pensions and Claims Board on the Soldier mentioned in Part I.

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the day of 191

Members of the Board :—

The Board having considered the evidence of the soldier marginally named, together with the documents submitted, recommend :—

Dated at this day of 191

Signatures of the Board

President.

(Wife) Emma Holiday, Hotel Manitoba, Vancouver, B.C.

(Medical Officers will please read this Form carefully before using it. See instructions, page 4.)

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O'S, AND MEN

MEDICAL HISTORY OF AN INVALID

No. X1, C/c

STATION New Westminster, B.C. DATE Mar. 27, 1918

1. (a) Unit 87th Bn. (b) Regimental No. 178250 (c) Rank Pte.

(d) Surname Holiday (e) Christian name John Herbert

2. Age last birthday 27 Date of birth Sep. 3, 1890

3. Enlisted at St. Johns, Que. on Feb. 29, 1916

4. Personal description :—

(a) Height 6' 4½" (b) Weight 240 (stripped) (c) Complexion fresh

(d) Colour of hair D. brown (e) Colour of eyes brown (f) Identification marks

Vacc. 4 left

5. Address after discharge (for the use of the Board of Pension Commissioners.)

Hotel Manitoba, Vancouver, B.C.

6. Former trade or occupation Caterer

7. (a) Service

	Years	Days
	2 1/12	24

	Periods	
	From	To
Canada	Feb. 29, 1916	Apr, 10, 1916
England	Apr. 10, 1916	June 26, 1916
France	June 26, 1916	Dec. 12, 1916
England	Dec. 12, 1916	Mar. 17, 1918
Canada	Mar. 17, 1918	Present

(b) Has he been Overseas? Yes

8. Present disease or disability (use authorized nomenclature if possible). V.D.H.

(a) Date of origin 1911 (b) Place of origin U.S.A.

(c) Cause* Rheumatic fever

*(Here include original disease or injury)

9. Present condition. (Important, to be a full description of the present disabling condition or conditions).

Pulse at rest 100, after touching toes ten times 140, is regular. There is a pronounced systolic murmur at apex. Heart is enlarged to nipple line. Systolic thrill on palpitation. Complains of dyspnoea in climbing a hill or stairs, walking fast or running. Could do 2 miles on the level walking slowly, any attempt at walking fast causes dyspnoea and palpitation. Complains of feet swelling on occasions at the end of the day. Lungs normal. Incapacity due to partial loss of function of heart.

[After describing all abnormalities, anatomical and functional, contributing to present incapacity (see section 11) state whether such incapacity is directly due to (a) weakness, (b) loss (complete or partial) of an organ or member or of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

M. F. B. 227.

15-M.-6-17.
1772-39-117.

4

10. History ;

Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination

Vacc. 4 left.

11. To what extent, state in percentages, is capacity to earn a livelihood in the untrained labour market reduced ? If there is more than one disabling condition, estimate the incapacity due to each, and that due to all combined.

40% should decrease in 6 mos.

12. Did the disability arise on or off duty ? Before enlistment

13. Was a Court of Inquiry held ? No

14. If the disabling condition had its origin before enlistment, has it been aggravated on service ? Yes

Yes 20% (50% aggravation) No

(If the answer is in the affirmative, state in percentages, to what extent the soldier is incapacitated by that aggravation.)

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment ? No

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

16. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one ? Permanent should improve in 6 mos.

17. Treatment (Case reports, general or special, should be secured and attached where possible).

Hospitals in France

18. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit ?

No, he had 4 months treatment in hospital with no improvement

19. Can the former trade or occupation be resumed ? Yes

20. Recommendations

Discharge Class E. Medically unfit.

Medical Board.

Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier.)

I, the undersigned J. Holliday have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of

J. Holliday

Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

21. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticized.

Concurs

22. Is the soldier fit for

(a) General service, (Category A) (~~Yes~~ or No).
(b) Service abroad, not general service, (" B) (~~Yes~~ or No).
(c) Home service, (Canada only), (" C) (~~Yes~~ or No).
(d) Temporarily unfit, (" D) (~~Yes~~ or No).
(e) Unfit for service in Categories A, B and C, (" E) (Yes or ~~No~~).

23. It is certified that the soldier

(a) ~~Does require treatment.~~
(b) Does not require treatment.
(c) Should pass under his own control.
(d) ~~Should not pass under his own control~~.

(Strike out condition not applicable).

24. It is recommended that the soldier be discharged. (When not for discharge add special recommendation).

Discharge Class E. Medically unfit

W D Lawrence Capt. *President.*
W W Denning Capt. } *Members.*
G E Lucas Capt.

STATION New Westminster, B.C.

DATE Mar. 27, 1918.

APPROVED BY J Arrgutart Capt.

DATE APR 5 - 1918 For *Assistant Director of Medical Services.*

A.M.C. M.D. 11

APPROVED BY

DATE *Director-General of Medical Services.*

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned,.....understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....

Should the refusal of the soldier to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

INSTRUCTIONS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.

2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.

3. In answering the questions, Medical Officers will carefully obtain and record the soldier's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the soldier concerned, from witnesses, or from documents.

4. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space on this page.

5. The nomenclature of diseases to be followed is that described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London, (1915), by Messrs. Harrison and Sons.

AUDITOR | PAYMASTER

Hu 2939

M. OR S.

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

REGT. No. 178250 RANK Pte NAME (IN FULL) HOLIDAY, John, H.

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. XI District Depot | IF IN P.F. WHAT UNIT? | BLOCK LETTERS SURNAME FIRST

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ | DATE EFFECTIVE

PAYABLE TO | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS 1369 Pender St. W. Vancouver B.C. | deceased

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE | DATE 29-5-18 | REASON | AUTHORITY | IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.			$	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. No. 1 NO.	DATE	COL. No. 2 NO.	DATE	COL. No. 3 NO.	DATE	CASH PAYMENTS COL. No. 1 $	C.	COL. No. 2 $	C.	COL. No. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.			TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																													2	01			2	01	2	01			D/Vr n/231 Seaford 1/3/18
																																							Passed to Suspense Acct 8/1/19 #187
																													Passed to Suspense #87										8/1/19 -
																																							ok in Suspense ALB 9/10/20 -
																													Certified that all payments have been made on this account for which covering authority has been received to date. Lieut., Paymaster, Demobilization Pay M.D. No. 11										Classified 26/1/21 8836-J.A.
																													Refund permit issued for 2.01 A.E. Hepenstal 4-10-20										

200M-3-19.—L. L. 38788-A. & D. 9985.
M. F. W. 2596.
1772-39-1390.

Sir Wifes address

0 90
2 50
3 40