

P.H.  
5/4/16

6<sup>th</sup> Field Coy

# ATTESTATION PAPER.

No.

Folio.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... *John George Kettleiffe Skoyles*
2. In what Town, Township or Parish, and in what Country were you born?..... *Liverpool. Eng.*
3. What is the name of your next-of-kin?..... *Mrs. E. E. Skoyles - Wife*
4. What is the address of your next-of-kin?..... *317. 9<sup>th</sup> Ave. Rosemount. Que*
5. What is the date of your birth?..... *Jan. 22 - 1881*
6. What is your Trade or Calling?..... *Machinist*
7. Are you married?..... *Yes*
8. Are you willing to be vaccinated or re-vaccinated?..... *Yes*
9. Do you now belong to the Active Militia?..... *No*
10. Have you ever served in any Military Force?.. *31st E. Lancashire Regt. 7 yrs.*  
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement?..... *Yes*
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?} *Yes.*

*John G. Skoyles* (Signature of Man).  
*[Signature]* (Signature of Witness).

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

I, *John George K Skoyles*, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the Canadian Over-Seas Expeditionary Force, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Date *Nov. 30* 1914. *John G. Skoyles* (Signature of Recruit)  
*[Signature]* (Signature of Witness)

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

I, *John George K Skoyles*, 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.

Date *Nov. 30* 1914. *John G. Skoyles* (Signature of Recruit)  
*[Signature]* (Signature of Witness)

### CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at *Montreal* this *30* day of *Nov* 1914.

*William S. Medley* (Signature of Justice)

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

(Approving Officer)

# Description of John G. R. Hoyle on Enlistment.

Apparent Age 33 years 11 months.  
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

*H Vacc. marks. left arm*

Height 5 ft. 7 1/2 ins.

Chest measurement { Girth when fully expanded 36 ins.  
 Range of expansion 3 ins.

Complexion medium

Eyes grey

Hair dark brown. scanty

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

## CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him\* fit for the Canadian Over-Seas Expeditionary Force.

Date Nov. 27 1914.

Place Montreal

*H. H. Hueston*  
 App. Amb  
 Medical Officer.

\*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

## CERTIFICATE OF OFFICER COMMANDING UNIT.

John George Roderick Hoyle 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.

*R. Roderick* (Signature of Officer)

Date Nov 30 1914.

*Hoyle*  
 A.O.C. No 179

REGIMENTAL DOCUMENTS

NAME

*Hoyle John G B*

REGT. NO.

*2020*

UNIT

*6<sup>th</sup> J. d. Amb.*

H. Q. FILE NO.

**(S)**

**CONTENTS**

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505  
REFERENCE

NON-EFFECTIVE BY

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

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

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

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

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

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

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

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. 393 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)

*7 copies made  
3 must*

**(M)**  
*6-10-1970*

**DEATH**  
Category  
*J. Hoyle*

DISCHARGE

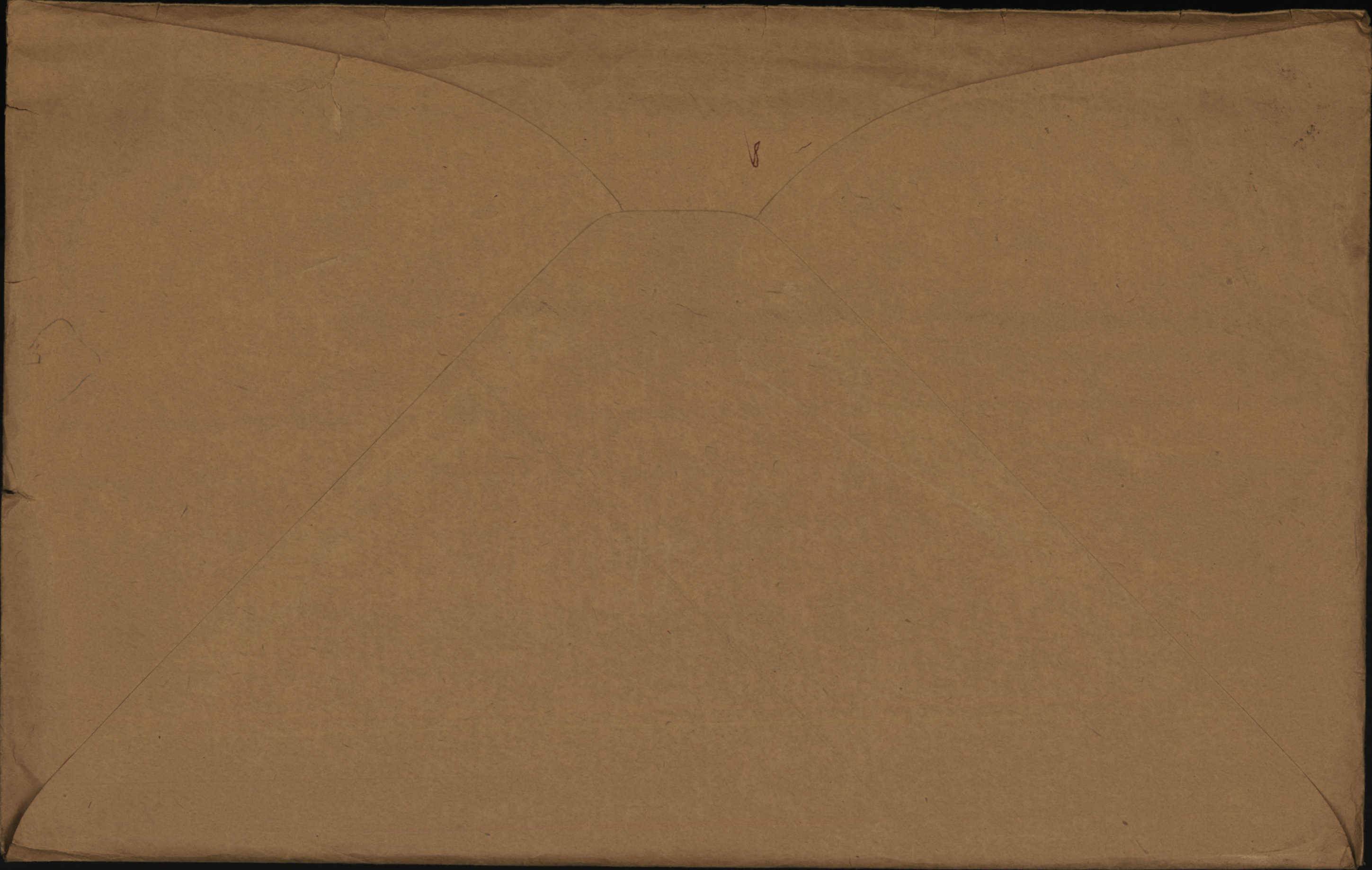
*36754* Category

DESERTION

**(H)**

*1  
1-14  
1-14*

*Hoyle*



*Com* *Woe*  
Number . . . 2020 . . . . . Rank, . . . *Pt* . . . . .

Surname . . . HOYLE . . . . .

Christian Names . . . John George R. . . . .

Unit, *C.A.M.C.* . . . . . Theatre of War, *France* . . . . .

Date of Service, *16-9-1915* . . . . .

Remarks, . . . . .

Latest Address, *Mrs. E. E. Hoyle "Widow"* . . . . .

*90 Mrs. Holmes* . . . . .

Roll No, *970 - Riv. St. Blvd.* . . . . .

*Pages 173*  
*Maison neuve*  
*Montreal, Que. Canada*

G. 12577 *Notes* APR 1 1920

GA 38045 - *all* SEP 12 1921

5

(649-H-226-15.)

SURNAME. *Hoyle*

CARD NO.

CHRISTIAN NAMES

*John George Ratchliffe*

FOLL.

REGL. NO. *2020*

RANK

*Pvt.*

UNIT *No. 6 Fld. Ambr.*

FORMER CORPS

*31<sup>st</sup> E. Lancashire Regt. (7 yrs.)*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

*Hoyle, Mrs. E. E.*

*Wife  
C/o Mrs. Preston,*

*343 Quegnon Lane*

*C.O. 26617. 7-11-18. Lancashire Eng. C.S.V.*

COUNTRY OF BIRTH

*England, Liverpool.*

DATE

*Jan. 22 — 1881.*

PLACE OF ATTESTATION

*Montreal. P.Q.*

DATE

*Nov. 30 — 1914.*

*A.S. 18-4-18<sup>3-9</sup> 2.*

MARRIED

Yes.

SINGLE

WIDOWER

TRADE OR CALLING

Machinist.

RELIGION

Wesleyan.

DESCRIPTION.

APPARENT AGE

33.

YEARS

11.

MONTHS

HEIGHT

5.

FEET

2 1/2.

INCHES

CHEST MEASUREMENT

36.

INCHES

EXPANSION

3.

INCHES

COMPLEXION

Medium.

EYES

Grey.

HAIR

dk. brown scanty

DISTINGUISHING MARKS

4 vacc. marks left arm.

MEDICAL EXAMINATION.

PLACE

Montreal. P. Q

DATE

Nov. 30 - 1914.



JOHN GEORGE RATCLIFFE.

Name HOYLE.

Rank PTE

Reg No. 2020

Unit C.A.M.C. 6 C.F.A.M.B.

343 ~~Yugon Lane~~  
~~198 Brook St.~~  
Preston  
Lancs

Next of Kin

MRS ESTHER E HOYLE.

~~314 QUE AVE, ROSEMOUNT, MONTREAL, CANADA.~~

*Letter*  
Date

C663

Movement

RIC 8710. Phone

Place

Casualty

List No.

Notified N/K O.

England

4-10-18 DIED OF WOUNDS.

~~6 C.F.A.~~  
Pt 2. O No 57 - 21-10-18. 4557

QB<sup>2</sup>  
RD

4446  
24/10.

R.L. 25-11-1998

Date

Movement

Place

Casualty

List  
No.

Notified  
N/K O.

W.O. List

198

Brook St.

Restm

Lease.

NAME

RANK AND CORPS

CABLE

NO. 12-5 DATE

NATURE OF CASUALTY

REG'T'L. No.

H.Q. FILE NO. 649

FOLLOWS

NO

FOLLOWS

NO.	DATE	NATURE OF CASUALTY
2672	10-25-18	DoFW 63d Amb Depot 4 <sup>th</sup> 1918 N.B.G.
Not		Hayle Mrs C. E. (Wife) <i>with C. S.O. gone to England</i>
317		9. Paul Rosemont Montreal P.R.

LIST NO.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
A351	#6 Can. Fld. Amb.	4-10-18	D of Wds. not stated

✓ ✓ ✓ ✓ ✓  
 HOYLE, Pte. J. G. R. #2020 - C.E.F.

6th C. 7 Amb. Camel.

Med & D (Widow)

Mrs. E. E. Hoyle  
 c/o Mrs. Holme,  
 970 Pie IX Blvd

Scroll Desp.

MAR 15 1921

Reqn. No 2-28618

Maisonneuve, Montreal, P.Q.

JUN 24 1922

Plaque B&S (Widow) p40882 Address as above

(Serial no. 791257)

Mem Cross (Widow)

Address as above

Mem Cross (Also mother)

Mrs. Ellen Hoyle,  
 37 Tennyson Road,  
 Off Ribbleton Lane, Preston  
 Lancashire, England.

Clig. for star Pte. 6th C.F.A. camel

" " V.M.  
 " " B.W.M.

M.F.

41967

W

W/H

984

N. G. 4049 - JAN 11 1921

777 G 405-25 JAN 11 1921

Surname

Christian Name or Names

Reg. No.

HOYLE.

J.G.R.

2020.

Rank

Unit

Pte.

C.A.M.C. 6FA.

Cas. List.

6. C.F. Amb.

4-10-18.

24-10-18.A351.

N.S.

DIED OF WOUNDS.

*R*

4-10-18.

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

Cas. List.

---



Date.....29-10-18..... No.....

From:- Non-Effective Section Pay 11.

To:- Group G.....

NOTIFICATION OF CASUALTY.

Note that No. 2020 Rank Pte Name Hoyle J.G.R.

Unit 6th F.A. Was D. of w.

On 4-10-18. Auth. C.L. No. a351 Date 24-10-18.

1. Credit pay only to end of month in which Casualty occurred.
2. Issue Assigned Pay and Separation Allowance only for month in which Casualty occurred.
3. Acknowledge this notification by returning two copies thereof to N.E. Section, with following information.

Name, address and relationship of Beneficiary of:-

Assigned Pay if any (either England or Canada) and monthly amount. (If no Assigned Pay in force say "Nil").

Relationship

*wife*

*Mrs Esters Hoyle*  
*343 Preston Lane*  
*7th Preston Lane*

\$ 20.00

Name, address and relationship of Beneficiary of Separation Allowance (if the same as beneficiary of Assigned Pay, say "same") and monthly amount. (If no Separation Allowance in force in England, say "Nil").

Relationship

*wife*

*Same*

\$ 25.00

*Mrs Esther B. Hoyle (wife)*  
*314.9th Avenue Rosemount*  
*Montreal.*

Certified correct,

*Lew*

One copy for Pension Board.  
One copy for Accounts Branch.

Officer i/c Group.

NOTIFICATION OF A LEAVE

Date \_\_\_\_\_  
 From - For-Leave-Section \_\_\_\_\_  
 To - Group \_\_\_\_\_  
 Rank \_\_\_\_\_  
 Unit \_\_\_\_\_  
 Or \_\_\_\_\_

1. Credit pay only to be given in which category of leave  
 2. Leave assigned by and general allowance only for leave in  
 which category occurred  
 3. assigned this notification by returning the report thereon  
 to the Section and the information  
 4. name, address and relationship of beneficiary of  
 assigned pay is any (either England or Canada) and monthly  
 amount. (If no assigned pay is to be given say "Nil")

Relationship \_\_\_\_\_  
 \_\_\_\_\_  
 Name, address and relationship of beneficiary of separation  
 allowance (if the same as beneficiary of assigned pay, say  
 "same") and monthly amount (if no separation allowance is  
 to be given say "Nil")  
 Relationship \_\_\_\_\_  
 \_\_\_\_\_

Certified correct \_\_\_\_\_  
 \_\_\_\_\_  
 One copy for Pension Board  
 One copy for accounts branch  
 Other file group \_\_\_\_\_

Form R.E.124.

For attaching to Orig. & Triplicate A.P.

No. 2020 Rank Pte Name HOYLE J.G.R. Unit CAMC

Next of kin changed from: Mrs Esther E Hoyle (Wife)

317, 9<sup>th</sup> Ave.

ROSEMOUNT

MONTREAL

CANADA

To: Mrs. Esther E. Hoyle, (Wife)  
343, Gregson Lane,  
nr. Preston,  
Lancs.

Authority, R.L.29/a P.846 d/29-10-18 Clerk's initials LSK

WIFE  
MAYLE SARAH ANN  
DORRINGTON

MANAGER  
CANTON

Mr. Nathan J. Hattie  
Boston  
Mass.

## Casualty Form—Active Service.

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

Regiment or Corps 6TH FIELD AMBULANCE,Canadian Expeditionary Force.Regimental No. 2020. Rank Pte Name Hoyle J. G. R.Enlisted (a) Nov 30-14 Terms of Service (a) \_\_\_\_\_ Service reckons from (a) Nov 30-14Date of promotion to } \_\_\_\_\_ Date of appointment } \_\_\_\_\_ Numerical position on }  
present rank } to lance rank } 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. 86, 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. 86, or other official documents.
Date	From whom received				
		<u>Landed in France</u>		<u>16-9-15</u>	
<u>3-10-17</u>	<u>667 Amb</u>	<u>Awarded S.C. Badge</u>	<u>fld.</u>	<u>30-11-16</u>	<u>NY/16-2501) Ptd 67 of 15-10-17</u>
<u>6-10-17</u>	<u>do</u>	<u>Proceeded on leave</u>	<u>do</u>	<u>4-10-17</u>	<u>B213. Ptd 67 of 15-10-17</u>
<u>27-10-17</u>	<u>do</u>	<u>Rejoined from leave.</u>	<u>-</u>	<u>20-10-17</u>	<u>B213 - 71 dt 5/11/17.</u>
<u>25-10-17</u>	<u>do</u>	<u>Sentenced to forfeit 2 days pay under R.W. for overstaying leave 2 days from 9. am 18-10-17 to 10 am 19-10-17</u>	<u>do</u>	<u>21-10-17</u>	<u>A.F.B-2069 Pte. 11 0 73 dt 16/17</u>
<u>8 9 18</u>	<u>-</u>	<u>Granted 14 days leave</u>	<u>England</u>	<u>7/9/18</u>	<u>B213 Ptd na 48 dt 19/9/18</u>
<u>29 9 18</u>	<u>-</u>	<u>Rejoined from leave</u>	<u>Field</u>	<u>13/9/18</u>	<u>B213</u>
<u>6 10 18</u>	<u>-</u>	<u>Evac. to C.S. Wounded</u>		<u>14/10/18</u>	<u>B213</u>
<u>8 10 18</u>	<u>-</u>	<u>Died of Wounds</u>		<u>4/10/18</u>	<u>Rtd na 57 dt 7/10/18</u>
		<u>Quth Can Corps Burial Office</u>			<u>Ref 4B-AC. (KA18-743)</u>

*A. Christie*  
Capt. for Lt.-Col., A. A. G.

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) e.g., Signaller, Shoing Smith, etc., etc., also special qualifications in technical Corps duties. P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				

Rank *Pte* ✓ Name HOYLE John George Ratcliffe *6.7. Amb.* Reg'l No. 2020  
 Unit No. 6 F.A. If in perm. Corps, Married or Single **Married**  
 What Unit? Place and Date of Enlistment Montreal P.Q. 30th Nov. 1914 Place of Birth Liverpool Eng.  
 Name and Address, Next-of-Kin Mrs. Esther E. Hoyle, ~~317~~, ~~9th Avenue~~, ~~Rosemount~~, Montreal.

*MX  
2/1/21 M.J.*

*343, GREGSON LANE W. PRESTON* Relationship Wife  
*(AUTH P846 4/29-10-18) LANCES.*  
 Assigned Pay Monthly \$ Payable to

N/E. R.B. No. *4198*  
 File R.L. *25-H-4908*  
 Category *D.N.*

Relationship  
 Separation Allowance \$ Payable to

*ME*

Relationship  
 Discharge, Date and Place Reason *Pte* Character

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
Date	From whom received				
<i>23.5.15</i>	<i>Adj. G. F.A.</i>	<i>Arrived in England per S.S. Northland</i>		<i>29.4.15</i>	
		<i>1 days pay (A.A.H. 6.2.D)</i>	<i>W. Barrington Camp</i>	<i>19<sup>5</sup>/<sub>15</sub></i>	<i>Pt 10 15</i>
		<i>Embarked for France</i>		<i>16.9.15</i>	<i>Nominal Roll</i>
<i>15.10.17</i>	<i>6 Fld Amb</i>	<i>Granted Good Conduct Badge</i>	<i>Pte Field</i>	<i>30.11.16</i>	<i>Pt II 0.67</i>
<i>24.10.18</i>	<i>6 Amb</i>	<i>Died of Wounds at No 6</i>	<i>Pte Field</i>	<i>4.10.18</i>	<i>62 A 351. Not stated</i>
		<i>6th Field Amb</i>			
<i>21.10.18</i>	<i>6 C.F. Amb.</i>	<i>Died of Wounds</i>	<i>Pte Field</i>	<i>4.10.18</i>	<i>Pt II DO 54</i>

*Wm*





Register No. D 4981

WAR SERVICE GRATUITY  
TO  
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. 9066.87

Reg't No. 2020 Name John George Ratchliffe Hoyle  
(Christian Name) (Surname)  
Unit 6<sup>th</sup> Fld Amb. Rank Pvt. Date of enlistment .....  
Date of casualty 4-10-18 ✓ B.P.C. File No. 56745  
Was service performed overseas? Yes ✓

DEPENDENT

Name M<sup>rs</sup> E. E. Hoyle Relationship Widow  
Address 341 Gregson Lane  
N<sup>o</sup> Preston  
Lancs. England

Amount of Special Pension Bonus \$ 80<sup>00</sup> ✓ Abstracted by J. Ramsay

Eligible for Gratuity ..... \$ 180 ✓  
Less amount of Special Pension Bonus paid ..... \$ 80 ✓  
Less Debit Balance of S. A. or A.P. .... \$ .....

Total deductions \$ 80 ✓

Balance due \$ 100 ✓

Cheque No. 91901823 ✓ Date issued 3 3/8/20 ✓

Clerk at home

REMARKS :  
.....  
.....  
.....  
.....

Audited by  
Kent  
Date 21/8/20

100<sup>00</sup>

29/17

M.F.W. 2652  
25M-6-20.  
H.Q. 1772-80-1473

# POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name Surname Christian Name

Regimental Number Rank Address (in full)

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

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

L.L. 53061—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

630

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
OVERSEAS CONTINGENTS

To Whom *Mrs Esthew Hoyle*  
Address *343 Gregson Lane*  
*Near Preston*  
*Lanes England.*  
Rate *£15<sup>00</sup>*

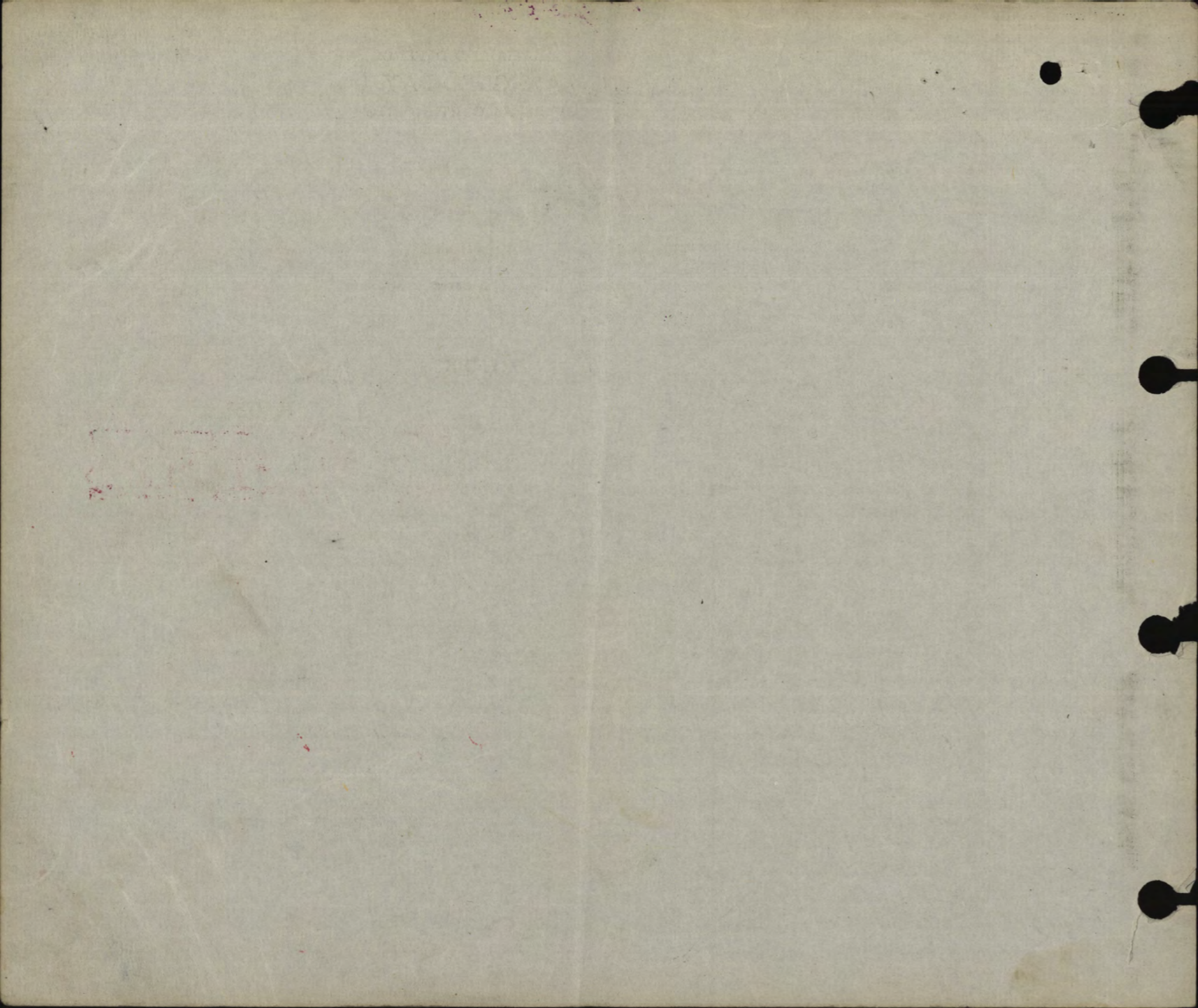
By Whom Assigned *Hoyle J. G. L.*  
Regtl. No. *2020*  
Rank *P/O*  
Corps *# 6. Field Amb Co.*

APR 1 1915

PAYMENTS

Month	Year	Cheque No.	Amt.
Aug.	1914		
Sept.			
Oct.			
Nov.			
Dec.			
Jan.	1915		
Feb.			
March			
Apr.		<i>0.350</i>	<i>15 -</i>
May		<i>M 722</i>	<i>15 -</i>
June		<i>P. 4881</i>	<i>15 -</i>
July			
Aug.			
Sept.			
Oct.			
Nov.			
Dec.			
Jan.	1916		
Feb.			
March			

REMARKS  
**ENGLISH**  
*9066-J-7*  
*Deceased sent England.*  
KILLER ACTION }  
DIED OF WOUNDS } DATE *4-10-18*  
C. L. No. *348* (vol. *35*) DATE *31-10-18*  
M. R. O. .... TO DESTROY RENDERED  
B. P. C. FORM 1 & C. F. X. COMPLETED ON FILE  
CLERK *S. I. De May* DATE *6-10-18*  
*Per Cable Col. No. 8-7-15*



30/11/14

M. F. W. 11  
4m. 11-14  
H. Q. 1772-39-819  
418

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

Name *Ms Esther E. Hoyle*

Name of Soldier *Hoyle, John G. R.*

Address ~~317 9th Ave.~~  
*343 Gregson Lane*  
*W. Preston*  
*Launce. England. Montreal*

Regtl. No.  
Rank *Pte.*  
Corps *Field Ambulance*

Relation to Soldier  
wife, child or mother *Wife*

To what Corps belonging

when called out  
**ENGLISH**  
PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.		<i>E 840</i>	<i>20</i>	
Jan.	1915	<i>41912</i>	<i>20</i>	
Feb.		<i>E 3665</i>	<i>20</i>	<i>20.</i>
March		<i>H 1245</i>	<i>20</i>	<i>- 20</i>
Apr.		<i>H 2817</i>	<i>20</i>	<i>- 20</i>
May		<i>J 2600</i>	<i>20</i>	<i>- 20</i>
June		<i>E 11043</i>	<i>20</i>	<i>20</i>
July				<i>20</i>
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

*Duplicate sent to England 10/7/15.*

For Cheque G. 1913 see.  
~~to the~~ H  
following G. 1496  
Mrs Linn Bone and

1303 2nd. Contingent

MILITIA AND DEFENCE  
ASSIGNED PAY  
OVERSEAS CONTINGENTS

*Duplicate*

To Whom *Mrs Esther Hayle*  
Address *343 Gregson Lane,  
Near Preston  
Lancashire, England.*

By Whom Assigned *Hayle J. R.*  
Regtl. No. *2020*  
Rank *Pvt.*  
Corps *# 6 Field Unit.*

*APSA checked  
OK Grane*

Rate *April 1/15  
May 1/15  
Oct 1/15*

REC'D  
MAILED 7 AUG 1915

PAYMENTS

OTTAWA

Month	Year	Cheque No.	Amt.
Aug.	1914		
Sept.			
Oct.			
Nov.			
Dec.			
Jan.	1915		
Feb.			
March			
April		<i>8350</i>	<i>15-</i>
May		<i>71722</i>	<i>15-</i>
June		<i>21881</i>	<i>15-</i>
July			<i>-</i>
Aug.		<i>25747</i>	<i>15</i>
Sept.		<i>42189</i>	<i>15</i>
Oct.		<i>52880</i>	<i>25</i>
Nov.		<i>43572</i>	<i>25</i>
Dec.		<i>92744</i>	<i>25</i>
Jan.	1916		
Feb.			
March			<i>150</i>

RECEIVING SEPARATION ALLOWANCE

*May. OK...*

RECEIVING SEPARATION ALLOWANCE \$ 20 ✓  
EFFECTIVE Decr 1914 ✓  
RELATIONSHIP *Wife* ✓

*Do not make any payments July  
per cable Col Ward 8-7-15*

Carried Forward.

# ASSIGNED PAY.

By whom assigned *Hoyle J. G. P.*

Regtl. No. *2020 P/E*

*6<sup>th</sup> Field Amb.*

Month	Year	Cheque No.	ASSIGNED PAY	Pay Sheet ALLOWANCE	REMARKS.
Jan.	1916	<i>112071</i>	<i>25</i>	<i>-</i>	
Feb.		<i>130839</i>	<i>25</i>	<i>-</i>	
March		<i>153901</i>	<i>25</i>	<i>-</i>	
Apl.		<i>9726</i>	<i>25</i>	<i>-</i>	
May.		<i>37618</i>	<i>20</i>	<i>-</i>	
June		<i>63461</i>	<i>20</i>	<i>-</i>	
July		<i>99163</i>	<i>20</i>	<i>-</i>	
Aug.		<i>130631</i>	<i>20</i>	<i>x</i>	
Sept.		<i>172141</i>	<i>20</i>	<i>x</i>	
Oct.		<del><i>203230</i></del>	<i>20</i>	<i>x</i>	
Nov.	<i>5390</i>	<i>238227</i>	<i>20</i>	<i>x</i>	
Dec.		<i>279761</i>	<i>20</i>	<i>x</i>	
Jan.	1917	<i>321660</i>	<i>20</i>	<i>x</i>	
Feb.		<i>863933</i>	<i>20</i>	<i>20</i>	
March		<del><i>456669</i></del> <i>429045</i>	<i>20</i>	<i>20</i>	
Apl.			<i>470</i>	<i>560</i>	
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					



TOTAL SEP. ALL. PAID TO 31 JAN. 17  
FROM SEP. ALL. LEDGER.



30/11/14

MILITIA AND DEFENCE

Duplicate

16418

5137

### SEPARATION ALLOWANCE

Name *Mrs. Esther E. Hoyle*  
 Address *343 Grogson Lane  
 W. Preston  
 Lancs. England*

Name of Soldier *Hoyle, John (Lt Partridge)*  
 Regtl. No. *2020*  
 Rank *Pte.*  
 Corps *Field Ambulance.*

Relation to Soldier  
 wife, child or mother } *Wife*  
*G.P.O. Preston.*

To what Corps belonging  
 when called out } *2000 26.5.16*

### PAYMENTS

4229 M. CO.

Mont <sup>h</sup>	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>Marriage Certificate Produced AUG 30 1915 JAS.</i>
Sept.				
Oct.				
Nov.				
Dec.		<i>E 840</i>	<i>20 -</i>	
Jan.	1915	<i>G 1912</i>	<i>20 -</i>	
Feb.		<i>E 3665</i>	<i>20 -</i>	
March		<i>H 1245</i>	<i>20 -</i>	
Apl.		<i>H 2817</i>	<i>20 -</i>	
May		<i>G 2600</i>	<i>20 -</i>	
June		<i>E 11043</i>	<i>20 -</i>	
July				<i>FILE</i>
Aug.		<i>H. 12658.</i>	<i>40 ..</i>	
Sept.		<i>L. 9488.</i>	<i>20 ..</i>	
Oct.				
Nov.				
Dec.			<i>60 .</i>	
Jan.	1916			
Feb.				
March				

*4000*

*60* } *204777-89*  
*60* } *242165/77* *60*

SEPARATION ALLOWANCE.

Name of Dependant <i>Hoyle. Mrs. Esther Ellen</i>		Name of Soldier <i>Hoyle. John G. R.</i>	
Relation to Soldier <i>wife.</i>		Regtl. No. <i>2020</i>	
1 <i>343 Gregson Lane.</i>		Rank <i>Pte.</i>	
<i>W. Preston. Lancs</i>		Corps	
P.O.		To what Corps belonging	
2		when called out	
P.O.		P.O.	

Month.	Year.	Cheque No. or Postal Draft Book No.	Amount. \$ c.	Amount. £ s. d.	Date.	REMARKS.
		Brought Forward ...	<i>320 -</i>			
Apl.	1916	<i>B 4254</i>	<i>20</i>	<i>00</i>		
May		<i>B. 10736</i>	<i>20</i>	<i>-</i>		
June		<i>B. 20614</i>	<i>20</i>	<i>-</i>		
July		<i>B 34947</i>	<i>20</i>	<i>-</i>		
Aug.		<i>B 44274</i>	<i>20</i>	<i>-</i>		
Sept.		<i>B. 46600</i>	<i>20</i>	<i>-</i>		
Oct.		<i>B 50275</i>	<i>20</i>	<i>-</i>		
Nov.		<i>B 46245</i>	<i>20</i>	<i>-</i>		
Dec.		<i>B 83210</i>	<i>20</i>	<i>-</i>		
Jan.	1917	<i>B 96787</i>	<i>20</i>	<i>-</i>		
Feb.			<i>520 -</i>	<i>00</i>		Total Separation Allowance paid to end of January 1917
Mar.						
Apl.						
May						
June						
July						
Aug.						
Sept.						
Carried Forward ...						



TRANSFERRED TO ASSIGNED PAY LEDGER

*[Signature]*

*[Signature]*

ENTERED

CHECKED

Rank

Name HOYLE John George Ratcliffe

Reg'l No. 2020

Unit No. 6 P.A.

If in perm. Corps,  
What Unit?

Married or Single Married

Place and Date of Enlistment Montreal P.Q. 30th Nov. 1914

Place of Birth Liverpool Eng.

Name and Address, Next-of-Kin Mrs. Esther E. Hoyle, 317, 9th Avenue, Rosemount, Montreal.

Oct. 1915 Increase

Relationship Wife

Assigned Pay Monthly \$25 X 8

Payable to

Mrs. Esther E. Hoyle

Reduced to 20xx from 1<sup>st</sup> May 1916

Relationship

~~317 9th Avenue  
Rosemount Montreal~~  
J. Preston Law

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason

Character

Date 1915		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						
1/4	30/4	30	1	30	30	10	3		33			32 60				40	Paid in Cash
1/5	31/5	31	1	31	31	10	3 10	40	34 50			12 50 15	1 10	58 60	5 90	19/5	1 day pay 10/46 22
1/6	30/6	30	1	30	30	10	3	5 90	38 90			15 15		30	8 90		
1/4	31/4	31	1	31	31	10	3 10	8 90	43			15 15		20	13		
								13				45 10					
								2									
April	31	31	1	31	31	10	3 10 15		49 10			14 60 15			29 60	19 50	
Sept	30	30	1	30	30	10	3	19 50	52 50			8 93 15			23 93	28 57	
Oct	31	31	1	31	31	10	3 10	18 57	62 67			26 12 25	88	28 49	34 18	32 60	88 cents
Nov	30	30	1	30	30	10	3	34 18	67 18			5 29 25		30 29	36 89		
Dec	31	31	1	31	31	10	3 10	36 89	70 99			16 84 25		41 84	29 15		
Jan	31	31	1	31	31	10	3 10	29 15	63 25			5 24 25		30 24	33 01		
Feb	29	29		29	29	10	2 90	33 06	91			2 62 25		27 62	37 29		
1/3	31	31		31	31		3 10	37 29	71 39			2 20 8 25		47 08	24 31		
								24 31									
					366			36 60	2 40 60			153 31 22 5		1 98 380	29 24 31		



\* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND OR <del>CANADA</del>	SEPARATION ALLOWANCE.
EFFECTIVE DATE:- 1/5/16		EFFECTIVE DATE:- 1.12.14
AMOUNT:- 20 <sup>00</sup>		AMOUNT:- 25

NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS WORD "SAME" ONLY TO BE WRITTEN

*Mrs Esther Hoyle wife Same.*  
*343 Gregson Lane*  
*Mr. Preston, Lancs*

*sub stated advise pay 11/12/14 in A.P. etc or address*

*Died of wounds 4/10/18*  
*C.L. 1351. 24/10/18: 6<sup>th</sup> Fed Amb.*

R

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES BY INSERTION OF DATE CHARGED IN RED

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID
					NES	Rendered
					NES	Balance
						Ledger "

PARTICULARS OF RENDERING NON-EFFECTIVE:-

MONTH	PARTICULARS	CR 1	CR 2	PA
<i>Apr</i>	<i>A.P.</i>	<i>33</i>		<i>A9328- @AR 16</i>
<i>May</i>	<i>"</i>	<i>33 34/10</i>		<i>(17) " 9 93081- @AR 18</i>
<i>June</i>	<i>"</i>	<i>34/10 33</i>		<i>(13) " 292 - B32610</i>
<i>7/18</i>	<i>"</i>	<i>23 34 10</i>		<i>298610 R 211. 25</i>
<i>8-18</i>	<i>"</i>	<i>34 10 34 10 34 10</i>		<i>C.44410</i>
<i>Sept</i>	<i>"</i>	<i>33</i>		<i>D18972 A499. 6/9 - 653 7/9 - 1062 30/9</i>
<i>Oct</i>	<i>"</i>	<i>33 34/10 34/10</i>		<i>D71977</i>

NON-EFFECTIVE

SEPARATION ALLOWANCE. NAME: HOYLE John Geo Ratchiffe  
 EFFECTIVE DATE: 1.12.14 NUMBER: 2020.  
 AMOUNT: 25 PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.	AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
Life	Same.			Private

UNIT AND TRANSFERS  
 ORIGINAL UNIT: 6 Fld amb.  
 DATE ACCOUNT FIRST OPENED: -  
*Advise pay 11 of any change in A.P. det or address*  
*transfers 4/10/18*  
*4/10/18: 6<sup>th</sup> Fld Amb.*

AMOUNT	DATE OF PAYMENT	NUMBER OF A.P.	UNIT PAID BY	AMOUNT
		NES	Rendered	
			NES Balance Dr	18 39
			Ledger "	Dr 18 39

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1	-	-	10

Read

CR. 1	CR. 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
		Balance.					39 51		
33		A9328- 9-4-11			20		52 57		25
		② AR 16. 10/2/18	446				148 05		
		① " 98 25/5 do	354				44 48		
33		93081- 9-4-11	80 1/2		20		58 58		25
340		② AR 189 1/2 - do	4 16				54 12		
		③ " 292 25/5 - do	354				50 55		
340		- B31610.B 9.4.11	89 3		20		63 55		25
33		A98810 2 9.4.11			20		77 65		25
34		R211. 25.6.18.	48 67				28 98		
34		C.44410 2 9.4.11	45 67		20		43 08		25
3410					20				25
33		D18972 2 9.4.11			20		56 08		25
		A499. 4/9/18	2	77 87			21 79		
		- 653 7/9/18		8 92			30 71		
		- 1062 30/9/18	16	1 78			32 49		25
35		D7977 2 9.4.11	88 57		20		18 39		25
3410					20				25
3410					20				25

NON-EFFECTIVE ACT.









EFFECTIVE DATE		AUTHORITY
30/11/16		D067.15/10/17

New A.S.P.B. issued by R.P.M 1/5/17  
 REG'L. No. 2020 RANK Pte NAME Boyle John Geo Ratcliffe

IF IN PERMT. CORPS WHAT UNIT	UNIT # 6714	TRANSFERRED TO	DATE	AUTHORITY
PERMANENT FORCE ALLOWANCES		TRANSFERRED TO	DATE	AUTHORITY
PLACE OF ATT STATION	Montreal	TRANSFERRED TO	DATE	AUTHORITY
DATE OF ATTESTATION	30th Nov 1914	TRANSFERRED TO	DATE	AUTHORITY

ASSIGNED PAY MONTHLY \$15.425 DATE EFFECTIVE 1<sup>st</sup> May 1<sup>st</sup> Oct 1915  
 PAYABLE TO Mrs Estlin Boyle - 343 Gregson Lane W Preston Lanes. RELATIONSHIP

ASSIGNED PAY MONTHLY \$20<sup>xx</sup> DATE EFFECTIVE 1<sup>st</sup> May/16  
 PAYABLE TO above RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON  
 DISCHARGE DATE AND PLACE REASON AND AUTHORITY  
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)  
 ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

HOSPITAL, &c.

ACQUITTANCE ROLLS					
2		3		4	
No.	DATE	No.	DATE	No.	DATE

CASH PAYMENTS						ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS	
1	2	3	4	CREDIT	DEBIT									
		153 31				225	198	380 29	2431					
315	28/4	523 - 2 62 -				25		32 85	2456					
391	31	2 55 - 2 55 -				20		25 10	33 46					
750	15/6	2 56 -				20		22 56	43 90					
431	5/7	2 61 -				20		25 23	52 47					
434	15/7	2 62 -				20		25 23	61 64					
467	13/8	2 61 -				20		25 23	69 41					
489	19/9	2 62 -				20		25 23	69 41					
		FR 62 - 30/9				73		95 62	789					
529	15/11	523 - 2 61 -				20		27 84	13 05					
		11 33 -				200		31 33	1582					
621	31/12	2 62 -				20		27 86	22 06					
675	14/1	2 62 -				20	35	22 97	29 89					
		27 43	26 04	153 31	73	450		742 11	29 89					
		37 43	26 04	153 31	73	450	2 33	742 11	29 89					

Kniff A 76 3069 - 26/1/17



ASH PAYMENTS

ASH PAYMENTS			ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
2	3	4				CREDIT	DEBIT			
604	15331	73	450	233	742 11	29 89				
261			20 560		31 34	32 65				AFSA 3/12/17
262			20 20		560	69 20	16 45			
		29 20	20 20		42 61	27 94				
	32	262	20 20		48 29	32 65				
			20 20		40	46 75				
	268		20 20		45 35	33 50				
	268		20 20		42 68	65 82				Nil
			20 20							

DRS CR CR PARTICULARS DR.1 DR.2 DR.3 DR.4 BALANCE DEBIT CREDIT MAY END

FILE No.

2020

VOL.

SUBJECT

Doyle J. G.

CHARGED TO

PER

DATE

CHARGED TO

PER

DATE

Et

29-11-25

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



OFFICERS - ALL ARMS - For Names

WILL

In the event of my Death  
I give the whole of my Property +  
Effects to - My Wife.

Esther Ellen Hoyle.

Signed: Ph<sup>o</sup>

J. R. Hoyle

Sep 9<sup>th</sup> 1915

343. Gregson Lane

H<sup>r</sup> Preston

Lanes.

1/9  
1/10  
1/11  
1/12

# 2020 P. J. R. HOYLE

# 6. Can Field Ambulance

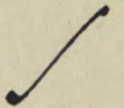
121616

Address of Beneficiary

343. Gregson Lane

H<sup>r</sup> PRESTON.

Lanes.



2020. PE J.G.R. HOYLE

#6 Can. Field Ambulance