

# ATTESTATION PAPER.

No.

Folio.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?.....
2. In what Town, Township or Parish, and in what Country were you born?.....
3. What is the name of your next-of-kin?.....
4. What is the address of your next-of-kin?.....
5. What is the date of your birth?.....
6. What is your Trade or Calling?.....
7. Are you married?.....
8. Are you willing to be vaccinated or re-vaccinated?.....
9. Do you now belong to the Active Militia?.....
10. Have you ever served in any Military Force?..  
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement?.....
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?}

*Thomas Sargent Owens*  
*Montreal Que.*  
*Thomas P. Owens (father)*  
*728 Belgin St Ottawa Ont.*  
*20<sup>th</sup> June 1889*  
*Advocate*  
*No*

*Yes*  
*5<sup>th</sup> Royal Highlanders of Canada*  
*No*

*Yes*  
*Yes*  
*Sargent Owens* (Signature of Man).  
*R. Mather* (Signature of Witness).

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

I, *Thomas Sargent Owens*, 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: *Aug 2<sup>nd</sup>* 1915  
*Sargent Owens* (Signature of Recruit)  
*R. Mather* (Signature of Witness)

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

I, *Thomas Sargent Owens* 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: *Aug 2<sup>nd</sup>* 1915  
*Sargent Owens* (Signature of Recruit)  
*R. Mather* (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 *2<sup>nd</sup>* day of *Aug* 1915.

*J. Mather* (Signature of Justice)

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

(Approving Officer)

*Lieut. Col.*

*O.C. 73rd Bn. Royal Highlanders of Canada, C.E.F.*



# Description of Thomas Sargent Owen on Enlistment.

Apparent Age 26 years 7 months.  
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height 6 ft. 1 1/2 ins.

*Appendix Sec  
 Sec of R. M. M. M.*

Chest measurement { Girth when fully expanded 37 1/2 ins.  
 Range of expansion 35 ins.

Complexion dark

Eyes gray

Hair dark brown

- Religious denominations.
- Church of England.....
  - Presbyterian.....
  - Wesleyan.....
  - Baptist or Congregationalist.....
  - Other Protestants.....  
 (Denomination to be stated.)
  - Roman Catholic..... **X**
  - 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 August 2 1915

*B. A. P. Owen*

Place Montreal

*W. J. ...*  
 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.

Thomas Sargent Owen 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.

..... *W. J. ...* (Signature of Officer)

Date 1915

**O.C. 73rd Bn. Royal Highlanders of Canada, C.E.F.**



Unit 207th Battalion Rank Lieutenant Name Thomas Sargent Owens.

*copy 2/4/16*

*Duplicate*

### OFFICERS' DECLARATION PAPER

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

**207TH BN**

#### QUESTIONS TO BE ANSWERED BY OFFICER

(ANSWERS)

1. (a) What is your Surname? Owens
- (b) What are your Christian Names? Thomas Sargent
2. (a) Where were you born? (State place and country) Montreal, Que. Canada.
- (b) What is your present address? 728 Elgin St., Ottawa, Ont.
3. What is the date of your birth? June 20th, 1889
4. What is (a) the name of your next-of-kin? Thomas P. Owens,
- (b) the address of your next-of-kin? 728 Elgin St, Ottawa, Ont.
- (c) the relationship of your next-of-kin? Father.
5. What is your profession or occupation? Lawyer
6. What is your religion? Roman Catholic
7. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes
8. To what Unit of the Active Militia do you belong? 5th Royal Highlanders of Canada
9. State particulars of any former Military Service. 9 Mos. 73rd R.H. of C. C.E.F.
10. Are you willing to serve in the  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? Yes

The undersigned hereby declares that the above answers made by him to the above questions are true.

X T. Owens (Signature of Officer.)  
Lieut.

#### CERTIFICATE OF MEDICAL EXAMINATION

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider him\* fit for the CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Date Apr. 14 1916

Place Ottawa A. F. Davis  
Cap Medical Officer.

\*Insert here "fit" or "unfit"



OFFICER'S DECLASSIFICATION PAPER

CANADIAN OVERSEAS EXPEDITIONARY FORCE

50714 BIN

QUESTIONS TO BE ANSWERED BY OFFICER

1. Name

2. Age

3. Date of birth

4. Place of birth

5. Present address

6. Date of entry into service

7. Date of discharge

8. Name of unit

9. Name of ship

10. Name of vessel

11. Name of command

12. Name of ship

13. Name of vessel

14. Name of ship

15. Name of vessel

16. Name of ship

CANADIAN OVERSEAS EXPEDITIONARY FORCE

I understand hereby and that this entry shall be used in accordance with the provisions of the Act.

CERTIFICATE OF MEDICAL EXAMINATION

I have examined the applicant and find him to be fit for service in accordance with the provisions of the Act.

I understand hereby and that this entry shall be used in accordance with the provisions of the Act.

Medical Officer

Signature

Date

Place



- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers.....
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet.....
- Compulsory Stoppages.....
- Casualty Forms.....
- Proceedings on discharge.....
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- Parchment Certificate.....
- Medical Report for Invalids.....
- Medical History Sheet.....
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet.....
- Clothing Transfer Certificate.....
- Inventory of Kit.....
- Last Pay Certificate.....

259-16

*Officers*  
**DISCHARGE DOCUMENTS**

R. O. No.....  
H. Q. No. 602-15-4

*JP*

Name OWENS Thomas Sargent

Regt. No. \_\_\_\_\_ Rank Lieut

Corps 207th Bn

SOS 11-18-18

Died of Wounds

(H)

07873

*Mrs. Smith 10 4/21*

(H)

*1-19  
1-19*

*Doc 58.10 - 1  
mzw67 - 1  
Cassard - 1*

*mx  
3320*



OPEN  
ATIA

7524



✓ ✓ ✓ ✓ ✓  
OWENS, THOMAS SARGENT---Lieut-38th BN.

1631 ✓

*Not elig. for 1914-1915 Star.*

MEDALS &  
DECORATIONS

Mrs. Dorothy S.B.M. Owens. (Widow)  
389 Mountain St.,  
MONTREAL. P.Q.

Scroll Desp. FEB 22 1921 Reqn No. Z. 22340

PLAQUE &  
SCROLL

Widow as above.  
Plaque Desp. DEC 8 1921 Reqn No. P. 9826.

*Serial No. 783558*

CROSS OF  
SACRIFICE

Mrs. Dorothy S.B.M. OWENS. (WIDOW)  
389 Mountain St.,  
MONTREAL. P.Q.

Mother predeceased.

*Desp APR 21 1920 65566.*

*NG*



9<sup>13</sup>

M



Number .....

Rank .....

*a/capt*

Surname .....

*OWENS*

Christian Names .....

*THOMAS SARGENT*

Unit .....

*38<sup>th</sup> Bn*

Theatre of War .....

*FRANCE*

Date of Service .....

*31.5.17*

*4.4.18*

*11.8.18*

Remarks .....

*Widow*

Latest Address .....

*Mrs. Dorothy S. B. M. Owens  
389 - Mountain St.*

Roll No. ....

*Montreal, P.Q.*

*D*  
*Page 4037*



Ms. A. 1. 2 3 346 Desp



Name **OWENS** ✓  
 Unit **T Thomas** Rank **Lieut.** ✓  
**Sargent**  
 Unit **38th Bn.**  
 Next of Kin **Canada**

*File*  
 Reg. No. **9 0172**

*AB. 104-93.*

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
11-8	Rep. from Base (Tel. KA 855	11-8)	Multiple	1056	10734	175
	<u>DIED OF WOUNDS</u>	Bullet Wds.	Multiple	1063		
	<i>Died at 5 base gsm 34 1144</i>					







(602-15-4)

CARD NO. 11  
18

SURNAME. *Owens*

CHRISTIAN NAMES *Thomas Sargent*

FOLL.

REGL. NO.

RANK

*Lieut. Capt. (2nd in Command) Bn.*

UNIT *207th*

FORMER CORPS

*73rd R. H. of C. C. E. F. (9 months) 5th Royal Highlanders*

NEXT OF KIN.

*also notify.*  
CHANGE OF ADDRESS

NAMES IN FULL

*Owens Thomas P.*

*Mrs. D. H. Owens*

RELATIONSHIP TO SOLDIER

*Father*

*389 Mountain*

ADDRESS

*728 Elgin St. Ottawa, Ont.*

*St. Montreal*

*Que.*

*(Auth. Saap. 10/5/12.)*

COUNTRY OF BIRTH

*Canada Montreal P.Q.*

DATE

*June 20th 1889*

PLACE OF ATTESTATION

*Montreal P.Q.*

DATE

*Aug 2nd 1915*

*Formerly enlisted in 43rd Bn. Aug. 2/15. Lieut.*

*L. L. 94504. M. & D. 6512. o/s. 2-6-17  $\frac{862}{7}$*



From the Capt (ord) in Command. 15/5/16. avik.  
Feb 11 82.

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

Lawyer

RELIGION

Roman Catholic

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION.

PLACE

Ottawa, Ont.

DATE

April 14<sup>th</sup> 1916.



No.

RANK

Lieut-Capt: NAME Owens, Thos S

T. O.

3-4-16

UNIT

207th Battalion. C E F.

DO 34-10-4-16

M. D. 3

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.			
FROM	TO		PARTICULARS	AUTHORITY		
1916	1916					
Apr 3	Apr 30	✓	To be capt. of # 4 Coy.	2082-5-6-16		
May		✓				
June		✓				
July		✓				
Aug		✓				
Sept		✓				
Oct		✓				
Nov		✓				
Dec		✓				
1917	1917					
Jan		✓				
Feb		✓				
Mar		✓				
Apr		✓				

(over)



May  
June no a/c n

Reverts to Grant - at once reg.

00127-21-4-17.

UNIT SAILED  
JUN 2 1917



NAME

Owens Thomas Sargent

REGT'L. No.

RANK AND CORPS

Lieut 38<sup>th</sup> Bn form 207<sup>th</sup> Bn

H. Q. FILE NO 649

CABLE

NO.

DATE

NATURE OF CASUALTY

FOLLOWS

NO.

FOLLOWS

N of 72 Thomas P Owens 728 Elgin St Ottawa Ont  
 also notify Mrs D. H. Owens 389 Mountain St Montreal Que  
 { 0734 <sup>2<sup>nd</sup> end</sup> 12-8-18 } D of Wds Aug 11<sup>th</sup>/18 G.S.W.'s Mult ✓  
 { H.L. 1056<sup>(1)</sup> 10-8-18 }



LIST NO.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

1060.  
~~1056~~

has should read D of W. in #5 has bly.  
Statn.

11-8-18.



Surname.

Christian Name.

OWENS

T. S.

Rank.

Unit.

Lieut.

38th. Batt'n.

Date of admission.

No. 5 Casualty Clearing Station.  
Hospital.

11-8-18

Transferred ..... Hosp.

..... Hosp.

..... Hosp.

..... Hosp.

Diagnosis.

Reported from Base,  
DIED OF WOUNDS:-11-8-18.  
(Bullet Wds. Multiple.)

Later diagnosis. ....

.....

.....

.....

Disposition.

Date.

10-8-18 1056.

19-8-18 ~~1063-3~~.note.

C.L. ....

Remarks.

C.L. ....

C.L. ....

C.L. ....

C.L. ....

C.L. ....

C.L. ....

A.M.D. 2 DEPT.

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



Surname

Christian Name

Reg. No.

Rank

Unit

MEDICAL BOARD held at

Date

Serial No.

(1)

Other Medical Boards at

Date

Serial No.

(2)

(3)

(4)

(5)

Condition found by Board

Disposition Recommended

(1)

(2)

(3)

(4)

(5)

PENSIONS & CLAIMS BOARD held at

Date.....

Disposition

Remarks



To be made out in duplicate.

DUPLICATE.

DUPLICATE.

H.Q. 54-21-23-53

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins.....  
207th. OTTAWA, CARLETON BATTALION

(2) Regimental Number.....

(3) Full Name of Soldier..... *Owens Thomas Sergeant*

(4) Place of Birth..... *Montreal Canada*

(5) Are you married, or not?..... *Yes*

(6) If married, state,  
(a) Full name of your wife..... *Dorothy Owens*

(b) Present Postal Address..... *728 Elgin Street Ottawa*  
*Ontario*

(7) Are you a widower?..... *No*

(8) Have you any children?..... *No*

If so, give number of boys and girls..... *Nil*

Also their names and ages.....



(9) Is your Father alive?.....**Yes**.....  
If so, state name and address.....**Thomas P. Owens 728 Elgin St. Ottawa.**

(10) Is your Mother alive?.....**No**.....  
If so, state name and address.....**Nil**.....

(11) If your Mother is a widow.....**Nil**.....  
Are you her sole support, or not?..**Nil**.....

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.  
.....**Nil**.....

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.  
.....**Nil**.....

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.  
.....**Has Applied**.....

(15) Are you insured?.....**No**.....  
If so, in what Company?.....**Nil**.....  
Have you made arrangements for payment of your Insurance premium.....**Nil**.....  
If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

*Shagan* Lt. Col.  
Officer Commanding.

Date.....**December 2nd 1916**



207th OTTAWA CARLETON BATTALION  
**MEDICAL HISTORY SHEET**

ORIGINAL

Surname Owens Christian Name Thomas Sargent

Examined { on 20th day of Sept 1916  
 at Ottawa  
 Birthplace { City or Town Montreal  
 County Quebec

Approved by J. Dauby  
 Rank Capt. M.O.

Apparent age 27  
 Trade or occupation Lawyer M.O.  
 Height 6 feet 1 1/2 Inches M.O.  
 Weight 150 lbs. M.O.  
 Chest measurement { Minimum 34 inches M.O.  
 Maximum expansion 37 inches M.O.  
 Physical development Good M.O.  
 Small-pox Marks None M.O.

Vaccination Marks { Arm Right Left x  
 Number Three  
 When Vaccinated last 1900 M.O.  
 (a) Marks indicating congenial peculiarities or previous disease nil M.O.  
 M.O.

(b) Slight defects but not sufficient to cause rejection nil  
 M.O.  
 M.O.  
 M.O.

Enlisted on 20 day of sep 1916 at Ottawa

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	207th			
Transferred to				FEB 15 1918

**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.







# MEDICAL HISTORY SHEET.

Surname Owens Christian Name Thomas Sargent

Examined { on 3<sup>rd</sup> day of August 1915  
 at Montreal  
 Birthplace { City or Town Montreal  
 County Que

Approved by [Signature]  
 Rank Major M.O.

Apparent age 26  
 Trade or occupation Lawyer  
 Height 6 Feet 1 1/2 Inches.  
 Weight 160. Lbs.  
 Chest measurement { Minimum 35 inches.  
 Maximum expansion 2 1/2 inches.  
 Physical development Good  
 Small-Pox Marks None

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right Left  
 Number 0 5  
 When Vaccinated last 15 years ago

Date	Result	VACCINATIONS.
JAN 29 1916		M.O.
		M.O.
		M.O.

(a) Marks indicating congenital peculiarities or previous disease Appendix Scar. old  
Scar on left thumb.  
 (b) Slight defects but not sufficient to cause rejection

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
Sept 17/15	Good	M.O.
Oct 2/15	Good	M.O.
Oct 16/15	Good	M.O.

Enlisted on ✓ day of August 1915 at Montreal Que

	CORPS	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>73 Bn RMC</u> <u>C.E.F.</u>			
Transferred to.. ..				

### 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.















L.P.C. to 31st May 1917.  
 Not charged  
 N/R effective June 1/17.

JUNE & JULY CHARGED JULY.

*2192*

Assignment as at  
 June 1st 1917.

\$ \_\_\_\_\_

Payment Stopped  
 A. 3 M Form

*To deposit in England.*

*1 July 1917*

Owens,

T. S.

Lieut.

207th Battalion.

60 ✓

Standard Bank of Canada,  
 Ottawa, Ontario.

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







SEPARATION ALLOWANCE

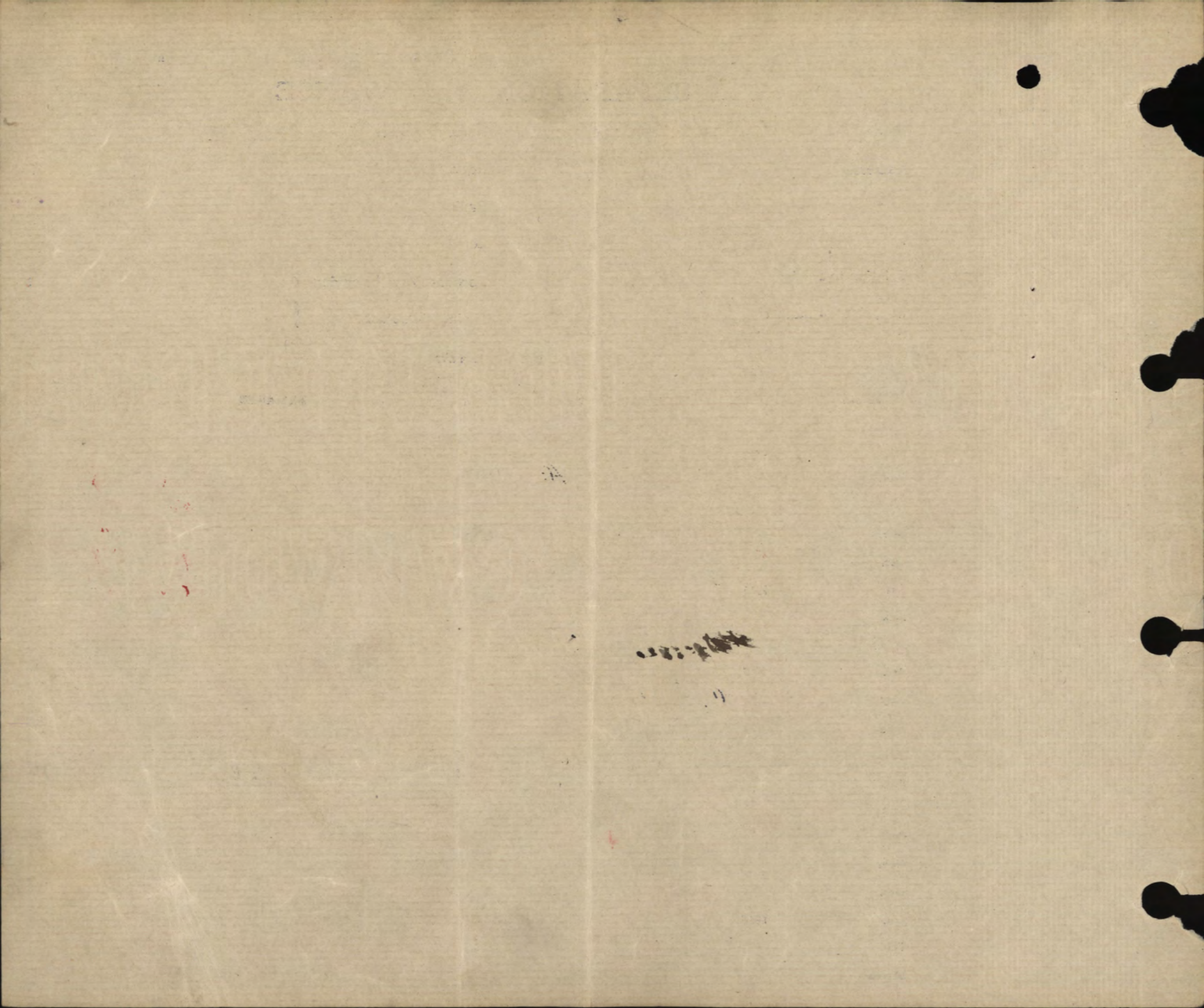
Name *Mrs. Dorothy H. Owens,* Name of Soldier *Owens, Thomas S.*  
 Address *728 Elgin St.,* Regtl. No.  
*Not #44* *Ottawa, Ont.* Rank *Captain (reverts to Capt 28/6/17)*  
*389* Corps *207<sup>th</sup> Batta.* *Donk 26/5/17*  
*Hampton Court Mountain St.* To what Corps belonging } *Same 6/6/17*  
 Relation to Soldier } *wife*  
 wife, child or mother } *Montreal 22* when called out } ✓

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				









MILITIA AND DEFENCE  
SEPARATION ALLOWANCE

M. F. W. 11a.  
50m.-4-16.  
1772-39-818.

Mrs. Dorothy H. Owens  
Sheet No. 2.

OVERSEAS CONTINGENTS  
16-11-16  
PAYMENTS.  
wife

Name of Soldier Owens, Thomas S.  
Captain.

L. L. Job 310.-Req. 6574.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.		Gm. 25857	60	mailed 16-12-16
Jan. 1917	1917	Y 30239	40	40 apt 44 Hampton Court,
Feb.		U 33223	40	40 Mountain St. Montreal Qc.
March		G 35933	40	40
April		Z 22113	40	40 389 Mountain St Montreal
May		Y 05329	40	40 Montreal
June		Z 9536	29	29 Bo
July		P 11994	30	30
Aug.		T 15218	30	30
Sept.		Q 19103	30	30
Oct.		V 20926	30	30
Nov.		F 25328	30	30
Dec.		P 27769	30	30 469 Mac
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				



MILITIA AND DEFENCE  
**SEPARATION ALLOWANCE**  
 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.				



MILITIA AND DEFENCE  
 ASSIGNED PAY  
 OVERSEAS CONTINGENTS

M. F. W. 12.  
 25m-4-17.  
 H. Q. 1772-39-819.

To Whom *Standard Bank*

By Whom Assigned *Queen J.S.*

Address

*Ottawa*

Regtl. No.

Rank

*Capt.*

Corps

*207 mm*

Rate

*60<sup>00</sup>*

*JUN 1 1917*

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>To deposit in England            Stop 1st July/17            3 M 16<sup>00</sup>/<sub>17</sub> - 7st. 16<sup>00</sup>/<sub>17</sub></i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



100  
100  
100  
100

100  
100  
100



MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

M. F. W. 12a.  
 18m.-4-17.  
 1772-39-819.

Sheet No. 2.

*Standard Bank*  
 (Assignee)

*British*  
 PAYMENTS.

Name of Soldier

*Owen J. S.*

*207/21*

*Capt*

L. L. Job 10227 - M. & D. 7814.

Month.	Year.	Cheque No.	Amt.	Remarks.
			<i>60<sup>00</sup></i>	<i>JUN 1 1917</i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June		<i>019713</i>	<i>60</i>	
July		<del><i>726409</i></del>	<del><i>60</i></del>	
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

*Account Stopped July 30/17*  
*Cable P. 1. 9. 11. 4 Date 24. 7. 17. G.B.E.*  
*Xabrog Cancelled*

*Obo. W.B.*



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.				



Register No. 00130

WAR SERVICE GRATUITY

A.P. File No. 014089-5-4

TO  
DEPENDENTS OF DECEASED SOLDIERS

*[Handwritten signature]*  
 Reg't No. .... Name Thomas Sargent Owens (Christian Name) (Surname)  
 Unit 38th Bn Rank Lieut Date of enlistment .....  
 Date of casualty 11-8-1918 B.P.C. File No. 47180  
 Was service performed overseas? yes

DEPENDENT

Name Mrs Dorothy H Owens Relationship Widow  
 Address 389 Mountain St  
Montreal P.Q.

Amount of Special Pension Bonus \$ 120 Abstracted by D Maher

Eligible for Gratuity ..... \$ 240.00 M  
 Less amount of Special Pension Bonus paid ..... \$ 120.00  
 Less Debit Balance of S. A. or A.P. .... \$ .....  
 Total deductions \$ 120.00 M  
 Balance due \$ 120.00 M

Cheque No. 9-1901541 Date issued 1918/20 *[Handwritten initials]*  
 Clerk [Handwritten signature]

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

Audited by  
[Handwritten signature] \$120  
 Date 1918/20

*Noted MB*

M.F.W. 2652  
 26M-6-20  
 H.Q. 1772-39-1473







*Estate Br file E1523 to Canada 27 1/2 19*

ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF DATE AUTHORITY

DATE AUTHORITY

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.....

*Thos Br  
E6RD*

*Pay 2<sup>00</sup>  
Flr 60  
Moog 1<sup>00</sup>  
3 60*

*Lieut*

*3 12/17*

*DG 281 13 1/2  
" 293 10 1/2*

*14 12/18 - II<sup>c</sup>  
Meel 2.  
Name Owens  
Initials Thos S  
Bank of  
Montreal*

*Died of Wounds 11 8/18 b.R. 1086 d/10 8/18*

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
			<i>1179 80</i>	<i>1059 80</i>	<i>120</i>			
<i>Apr 18</i>	<i>Pay R</i>		<i>108</i>					
<i>25</i>	<i>"</i>	<i>Bank 1174</i>		<i>108</i>				
<i>May 15</i>	<i>Pay R</i>		<i>111 60</i>					
<i>23</i>	<i>"</i>	<i>Bank 2623</i>		<i>111 60</i>				
<i>Jun 18</i>	<i>Pay R</i>		<i>108</i>					
<i>25</i>	<i>"</i>	<i>Bank 4144</i>		<i>108</i>			<i>*60 at. Can. CR. d/10 7/18.</i>	
<i>July 17</i>	<i>Pay R</i>		<i>111 60</i>					
<i>26</i>	<i>"</i>	<i>Bank 5607</i>		<i>111 60</i>				
<i>Aug 16</i>	<i>Pay R</i>		<i>111 60</i>			<i>111 60</i>	<i>Pr a to cease</i>	
<i>Nov 21 1919</i>	<i>Add Outfit Allee</i>		<i>100 -</i>			<i>211 60</i>	<i>Lofer to N. E. Ledger</i>	
<i>Apr 14</i>	<i>Cer Bal trans to Ottawa V. 98 list 15 April</i>					<i>211 60</i>	<i>16/18 Make no deposit of</i>	
			<i>1830 60</i>	<i>1499 00</i>			<i>Sp. to h# 28 from h# 22 d/5 9/18</i>	
			<i>60</i>	<i>211 60</i>			<i>Soft ac rendered 5 3/4</i>	
			<i>1770</i>	<i>120</i>			<i>Cer \$211.60</i>	
				<i>1830 60</i>			<i>Dist form to Acty Bch 12 7/19.</i>	



ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF

DATE

AUTHORITY

DATE

AUTHORITY

Beneficiary

Name

Address

Initials

Amount. \$

Bank

Separation Allowance issued. Yes or No.....

DATE

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED  
PAY PAID IN  
CANADA

BALANCE

SPECIAL AUTHORITIES  
To be initialled by P.M. in every case.

INITIALS



ASSIGNED PAY.

UNIT.

RANK.

NAME.

Beneficiary

Address *Canada.*

Amount. \$ *Cancelled*

Separation Allowance issued. Yes or No.....

NAME OF DATE AUTHORITY

*7 Res. Bn.  
(207 Bn.)*

*Pay 2.00  
F. A. .60  
Mess. 1.00  
\$3.60*

*Lieut.  
Capt  
Lieut*

DATE

*10<sup>6</sup>/<sub>17</sub>  
7<sup>11</sup>/<sub>17</sub>  
3<sup>12</sup>/<sub>17</sub>*

AUTHORITY

*Ord. 2663, 11<sup>6</sup>/<sub>17</sub>  
From Canada  
Dy 281 13<sup>11</sup>/<sub>17</sub>  
293 10<sup>12</sup>/<sub>17</sub>*

Name *Owens*  
Initials *Thos. S.*  
Bank *of Montreal.*

*Sheet 1*

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
1917								
June 23	<i>P. F. A. 1-30<sup>6</sup>/<sub>17</sub> Mess p. 10<sup>6</sup>/<sub>17</sub> (TOR. Un. 149) Vo. 9282</i>		<i>99</i>					
	<i>Bank 9157</i>			<i>43 50</i>				
25	<i>A. bal. p. Can. 31<sup>9</sup>/<sub>17</sub> Vo. 532 Canada</i>		<i>4 50</i>			<i>Cr. 60</i>		
July 19	<i>Pay R</i>		<i>111 60</i>					
21	<i>A. P. Can (June + July)</i>				<i>120</i>			
26	<i>Bank 13082</i>			<i>51 60</i>				
Aug 6	<i>Aug P. A. + A. P. chgd in error July Bank 13413</i>			<i>171 60</i>				
14	<i>A. P. July 1917 chgd but not paid Vo 2222 A. P. Can</i>		<i>60</i>					
16	<i>A. P. Can cancelled.</i>							
21	<i>Pay R</i>		<i>111 60</i>					
Sept 1	<i>Advance Sept P. A. Bank 17840</i>			<i>48 67</i>				
3	<i>" " " 17884</i>			<i>59 33</i>				
18	<i>Pay R</i>		<i>108 -</i>					
22	<i>" " " Bank</i>							
Oct 1	<i>Advance Oct P. A. Cash 22047</i>			<i>48 67</i>		<i>48 67</i>		
15	<i>Pay R</i>		<i>111 60</i>					
20	<i>" " " Cash</i>			<i>62 93</i>				
Nov 1	<i>Bal Nov P. A. Cash 26613</i>			<i>108 -</i>		<i>108 -</i>		
16	<i>Pay R</i>		<i>108 -</i>					
26	<i>Diff bet Lts &amp; Cpts rates 7<sup>11</sup>/<sub>17</sub>-30<sup>11</sup>/<sub>17</sub> Vo 17361</i>		<i>27 60</i>					
	<i>" " " Cash 30813</i>			<i>27 60</i>				
Dec. 4	<i>Adv. Dec. P. A. Cash 32531</i>			<i>87 60</i>		<i>87 60</i>		
7	<i>Bill entry H-30<sup>11</sup>/<sub>17</sub></i>		<i>10074</i>					
12	<i>Pay R 1-2<sup>12</sup>/<sub>17</sub> @ Lts rates of 75 3-31<sup>12</sup>/<sub>17</sub> @ Lts " 5<sup>60</sup>/<sub>100</sub></i>			<i>113 90</i>				
14	<i>" " " Bank 35096</i>			<i>26 30</i>				
			<i>855 80</i>	<i>135 80</i>	<i>120 -</i>			

*One pay cancelled  
12/1/17 See that  
Cr. comes through  
in Aug for \$600  
Chgd in error*

*18-6-5 40<sup>50</sup>/<sub>100</sub>*

*But Fwd*



ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF DATE AUTHORITY

DATE AUTHORITY

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.....

7 Res Bn

Lieut

Name Owens  
Initials JS  
Bank of Montreal

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
1918			855 80	735 80	120 -			
	<i>Brt Fwd.</i>		nil					
Jan 8	Adv Jan P & A.			48 67		48 67		
16	Pay R.	35494	111 60					
21	"	Bank 39441		62 93				
Feb 14	Pay R.		100 80					
21	"	Bank 40995		100 80				
Mar 12	Adv Mar P & A £10	Bank 41741		48 67				
18	Pay R.		111 60					
25	"	Bank 42637		62 93	120 -			
			1179 80					
				105 9 80				



E.T. Surname

OWENS

Christian Names

Thomas Sargent.

NR 7<sup>th</sup> Res Bn 7-17

Lieut.

Name and Address of Next-of-Kin

Wife.

Mrs Dorothy H. Owens.

728. Elgin St. Ottawa. Ontario.

Canada.

Rank  
Promotion  
Unit 207th Bn to Eastern. Ont. Regt:  
Place of birth Montreal. Quebec. Canada  
Married (Yes or No) Yes.

Appointments

Date of leaving Canada

31-5-17

7m 0 164

Date and Cause of Resignation

Report		Record of Promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case	80R Place 66	Date	REMARKS Taken from Official Documents
Date	From whom received				
15-11-14	4 <sup>th</sup> R. Bn	S. O.S. to E.O.R.D. & attached to the open berth of the Brownie Shaver Co. for Canada		4-11-14	T.O.S. Pt II std. 250 E.O.R.D. Pt II std. 246.
19-11-14	W.O.	To be actg. Capt. while spec. empld		7-11-14	Low. Coy. 30388. Pt II std 3
7-12-14	4 <sup>th</sup> R. Bn	Having reported from London to Depot		4-12-14	S.O.S. Pt II std 274 E.O.R.D. Pt II std. 295.
17-12-14	W.O.	Relinquishes Rank of actg. capt. on clearing		3-12-14	L. G. 30430 Pt II std 3. 4 <sup>th</sup> R. Bn
16 2 18	6th Res. Bn	T.O.S. from 7th Reserve Battalion		15/2/18	Pt II O-40
6 4 18	6 <sup>th</sup> Res	Sold to 38 <sup>th</sup> Bn proceeding overseas		4 4 18	Pt II 81
15 4 18	38 <sup>th</sup> Bn	T.O.S. as reinf from England		4 4 18	Pt II 82.
10 8 18	RAMS	Reported from Base Died of Wounds		11.8 18	Ch 1056.
19. 8. 18	a	Died of Wounds 11 <sup>th</sup> Car. Bty. station			e 11063 A.F.B. 104. 93. 2090 Telade Branch 29/8/18

8094

A.F.B. 103.  
18 APR. 1918

A.F.B. 103.

31 AUG. 1918







12 APR 1918

Casualty

Service.

Regimental Number.....

Regiment or Corps.....

Rank *Lieut.* Surname *Quens* Christian Name *Thomas Sargent*

Religion *R.C.* Age on Enlistment *26* years..... months.

Enlisted (a) *4.8.15* Terms of Service (a) *War* : Service reckons from (a) *4.8.15-31.5.17*

Date of promotion to present rank..... Date of appointment to lance rank.....

Extended {.....} Re-engaged {.....} Qualification (b) *Capt Musketry*  
or Corps Trade and Rate.....

*Thomas Sargent* Adjutant  
20th (Cinema) Cavalry Battalion  
Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
			Embarked <i>Halifax</i> <i>31.5.17</i>		
			Disembarked <i>WINEPOOL</i> <i>10.6.17</i>		
14-6-17	OC 7th Res Bn	T.O.S. from Canada	Seaford	10-6-17	PO 142
14-6-17	OC 7th Res Bn	On command No 1 Train. area	Seaford	10-6-17	Pt2 DO142
<del>9-7-17</del> <del>20.8.17</del>	<del>OC 7th Res Bn</del>	<del>off command No 1 Train. area</del>	<del>Seaford</del>	<del>7-7-17</del>	<del>Pt2 DO 165</del>
25-7-17	OC 7th Res Bn	On command O.I.B.	Seaford	25-7-17	Pt2 D.O. 177
15-9-17	OC 7th Res Bn	Off command O.I.B.	Seaford	15-9-17	Pt2 D.O. 222
7-11-17	OC 7th Res Bn	On command H.C. London	Seaford	4-11-17	Pt2 DO 258
15-11-17	OC 7th Res Bn	S.O.S. to E.O.R.D.	Seaford	4-11-17	Pt2 DO 276
			<i>Thomas Sargent</i>		Capt. & Adjt.
					7th Reserve Battalion.

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







**CERTIFIED CORRECT**  
**31 AUG 1918**  
**CANADIAN RECORD OFFICE**

Army Form B. 103.

Sheet II

Regimental Number .....

Active Service.

Rank..... Lt. Regiment or Corps..... 207 Bn Christian Name..... J. Sargent  
 Surname..... Owens Age on Enlistment..... years..... months.....  
 Religion..... Terms of Service (a)..... Service reckons from (a)..... 31.5.17  
 Enlisted (a)..... Date of promotion to present rank..... Date of appointment to lance rank.....  
 Extended (.....) Re-engaged (.....) Qualification (b).....  
 or Corps Trade and rate.....  
 Occupation..... Signature of Officer.....

Date	Report	From whom received	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 of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
				Embarked	Canada	31.5.17
				Disembarked		2032
5.4.18		C.O.D.	T.O.S. 28th Bn.			11.4.18 21-15.4.18
10.4.18		C.C.R.C.	Joined		10.4.18	NR
17.5.18		"	To Unit:		17.5.18	NR 2744
18.5.18		38th	Joined		17.5.18	B213
11.8.18		566.S	Died of Wounds.			W.I.R.E. N. 888. M.A.-T. 15685
			G.W. multiple.		566.S	11.8.18 20.7.12 8/18
			gmbrown			Lieut for Lt Col. adg Camp Sec 3rd Ech G.H.O.

27-2-22







Date of Enlistment

16-11-16

MILITIA AND DEFENCE

Date of Assignment

## Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

30			
----	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

2122

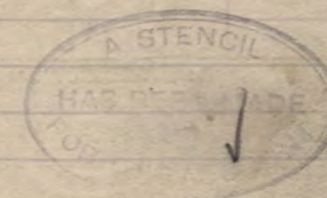
## PARTICULARS OF SEPARATION ALLOWANCE

No. \_\_\_\_\_  
 Rank *Lieut* Promoted \_\_\_\_\_ Reverted \_\_\_\_\_ Discharge \_\_\_\_\_  
 Soldier's Name *Thomas S. Owens*  
 Battalion *207<sup>th</sup> Batt<sup>n</sup>*  
 Beneficiary *Mrs. Dorothy H. Owens*  
 Relationship *Wife* *J.M.F.W 2554. 27<sup>th</sup> 18*  
 Address *389 Mountain St, Montreal Que.*

## PARTICULARS OF ASSIGNMENT

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 Change of Address \_\_\_\_\_  
 1 \_\_\_\_\_  
 2 \_\_\_\_\_  
 3 \_\_\_\_\_  
 4 \_\_\_\_\_

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917					File 014089-T-4
Dec 31		469		469	
Jan 18	L 67928	30 ✓		30 ✓	S.A. Captain. Reverts to Lieut. 28-5-17 to act as per rotation below n.p.m.d. 26-5-17. Sever made 18-2-18 6-6-17 Acting Capt Nov. 7 <sup>th</sup> Adjut at Capt's rate from 1-12-17 to 31-12-17 and Lieut's from 1-1-18 File 014089-T-4. MacNeil. 15-2-18 Act closed 31-8-18 Died of wounds 11-8-18 Pers notified 15-8-18 C. J. L. rendered 13. 5. 18. CEM M 2015-8-18
Feb 18	U 74400	10 ✓		10 ✓	
Feb	B 75029	30 ✓		30 ✓	
Mar	F 93335	30 ✓		30 ✓	
Apr	F 8935	30		30 ✓	
May	T 14055	30		30 ✓	
June	P 21076	30		30 ✓	
July	G 31686	30		30 ✓	
Aug	R 40147	30		30	
		719		719	





Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
------	------------	------------	------------	-------	---------

M. F. W. 128  
 4004, 6, 17, 177, 239-1111  
 L. L. 2220-M. & D. 1683.