

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class ONE)

M.S.A.

1. Surname Savard,

2. Christian name Joseph

3. Present address Fauquier, Ont.

4. Military Service Act letter and number 845869

5. Date of birth 18th. July 1894.

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

7. Married, widower or single Single

8. Religion R.C.

9. Trade or calling Firemen.

10. Name of next-of-kin Ferdina Savard.

11. Relationship of next-of-kin Father.

12. Address of next-of-kin Fauquier, Ont. *W.H.B. Pt. foroc 1st DB2 2nd C.O.R.*

13. Whether at present a member of the Active Militia No.

14. Particulars of previous military or naval service, if any

15. Medical Examination under Military Service Act:—
(a) Place Haileybury (b) Date 30th Nov. '17 (c) Category A-2

DECLARATION OF RECRUIT

I, Joseph Savard, do solemnly declare that the above particulars refer to me, and are true.

Joseph Savard (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age	24	yrs.	2	mths.	Distinctive marks, and marks indicating congenital peculiarities or previous disease. Vacc. on right in childhood. Complaints of kidneys. No signs. Vision Both eyes D.20 Hearing normal.
Height	5	ft.	3½	ins.	
Chest measurement	fully expanded	36½	ins.		
	range of expansion	2½	ins.		
Complexion	Dark				
Eyes	Brown				
Hair	Dark				

John J. ... Major
O. C. Depot Bth. Regt.

Place Hamilton, Ontario. Date 30th November 1917

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

Class

No.

Regiment

Battalion

Company

Platoon

Section

Name

Age

Height

Weight

Complexion

Eyes

Hair

Build

Occupation

Education

Religion

Married

Address

Relationship

Name of next of kin

Particulars of previous military or naval service, if any

Medical Examination under Military Service Act

Date in Day (to Category)

DECLARATION OF RECRUIT

I, do solemnly declare that the above particulars are true and correct.

 (Signature of Recruit)

DESCRIPTION ON CALLING UP

Particulars	Remarks
Apparatus	
Height	
Weight	
Complexion	
Eyes	
Hair	
Build	
Occupation	
Education	
Religion	
Married	
Address	
Relationship	
Name of next of kin	
Particulars of previous military or naval service, if any	
Medical Examination under Military Service Act	

Date in Day (to Category)

 (Signature of Recruit)

 (Signature of Officer)

REGIMENTAL DOCUMENTS

NAME

Sauard Joseph

REGT. NO.

3106954

UNIT

H. Q. FILE NO.

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

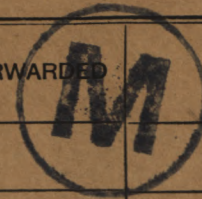
DEATH

Category

DISCHARGE

Category

DESERTION



05508

12-22
12-22
3-22

ATTESTATION PAPER (M.F.W. 23, 133, or 51)
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)
TRAINING HISTORY SHEET (M.F.W. 113)
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)
DENTAL HISTORY SHEET (M.F.B. 465)
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)
MEDICAL EXAMINATION (M.F.W. 129)
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)
LAST PAY CERTIFICATE (M.F.W. 44)
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)
PARTICULARS OF CHARACTER (A.F.W. 3226)
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

1 capcard
1 7P149
1 miss
1 form of Will

MT 121
30/51

REGT'L. No. 31069.54

H. Q. FILE NO 649

NAME

Savard Joseph

RANK AND CORPS

plé 38th Bn form 2nd C.O.R. 1st Depo 4th Bn

CABLE

NO.

DATE

NATURE OF CASUALTY

FOLLOWS

NO.

FOLLOWS

No 11

Berolina Savard (Leather)

Fauquier Ont-

Miss Mellena Boulliau

Fauquier Ont-

12 in a Oct-1st 1918

15-3

NA17

23-10-18

No. 2349-1

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS



✓ Savard, Jos., ✓ Pte. ✓ 3106954 ^{58Bn.} 1st D. Bn. 649-S-23147

Med. & Dec. (UNABLE TO

LOCATE

P. Ser # &

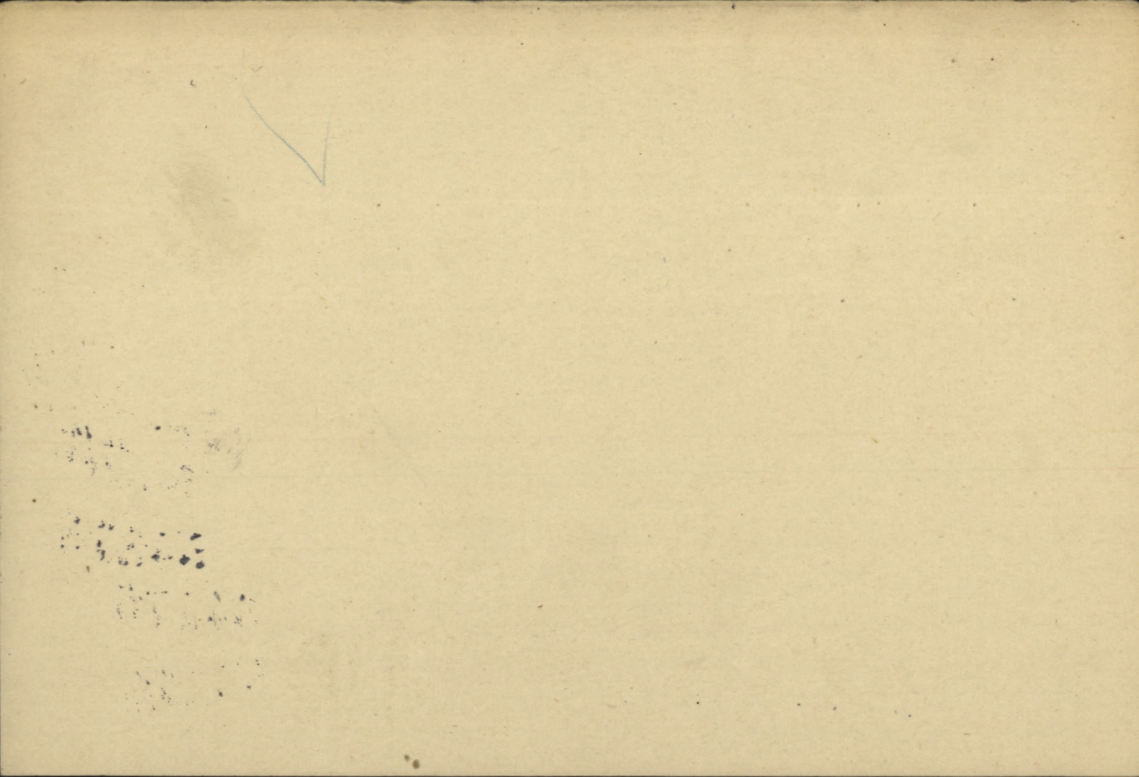
S. 75-9921.

Mem. Cross.

NEXT OF KIN.

54174

not eligible for star
E. Lig. V.M.
M. E. Lig. B.W.M.



M&A

Number 3106.954 Rank pte

B

Surname SAVARO

Christian Name Joseph

Units 58th Div Theatre of War France

Date of Service 18-8-18

Remarks

Latest Address Males to Leo Hoff.

Roll No

200m. 2-21.M. Page 8934

V

D

Next of kin _____

Address on leave _____

Address on discharge _____

Transportation issued Yes _____ No _____ Date _____ Character on discharge _____

Previous occupation _____ Date and place of enlistment _____

Diagnosis _____ Date of Medical Boards _____

Date	Remarks

*—Name will be given in full; surname first.

Date

Movement

Place

Casualty

List
No.Notified
N/K O.

W.O. List

3

Surname

Christian Name or Names

Reg. No.

SAVARD

J.

3106954

Rank

Unit

Pte.

1100 58

Cas. List.

22-10-18A349

RFB KILLED IN ACTION

1-10-18.

~~22-10-18~~ 6r

A.M.D. 2 DEPT.

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

Cas. List.

FORM OF WILL

1268
M.S.A.

I, Joseph Savard (Name in full)

Regimental Number 3106954 serving in 1st Depot Bn. 2nd. C.O.R.

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

I devise all my real estate unto

Miss Melena Boullian (Friend)
Facquier Ont.

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

absolutely, and my personal estate I bequeath to

Miss Melena Boullian (Friend)
Facquier Ont.

Name and Address of person or persons to receive personal estate* (See note).

NOTE

This space for the appointment of Executor if necessary.

IMPORTANT NOTE

This must be signed and Dated by THE SOLDIER HIMSELF.

this 7 day of February A.D. 191

Joseph Savard Signature of Soldier.

*N.B. Personal estate includes p.p., effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

Signature of First Witness W.A. Macpherson Capt.

Address of Witness Cunthland B.C.

THE TWO WITNESSES

Occupation of Witness C.E.F.

MUST SIGN HERE

Signature of Second Witness H. Johnson #

Address of Witness Grimsby Ont

Occupation of Witness C.E.F.

FORM OF WILL

MANE NICKAM

REGISTERED
BRITISH
MAST
TRADE
GEN

[Faint, mostly illegible text, likely bleed-through from the reverse side of the page]

MILITARY SERVICE ACT, 1917.

3106954

ORIGINAL
MEDICAL HISTORY SHEET.

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

1. Surname SAVARD Christian name Joseph
 2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 845869
 3. Consecutive number on schedule of men reporting for service (if he appears on it) 564
 4. Address (including street and number, if any) Fauquier, Ont.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 30th. day of Nov. 1917, by the undersigned medical board sitting at Haileybury #18.

5. Age as stated 24 Years 2 Months. 6. Apparent age 24 Years _____ Months
 7. Height 5 Feet 3½ Inches. 8. Weight 121 Pounds.
 9. Chest measurement { Minimum 34 Ins. 10. Complexion Dark { Eyes Brown
 { Maximum 36½ Ins. { Hair Dark
 11. Physical development GOOD { Good Fair Poor 12. Smallpox marks No
 13. Number of vaccination marks { Right arm one 14. When vaccinated last Childhood
 { Left arm _____

15. Distinctive marks and marks indicating congenital peculiarities or previous disease
Complains of kidneys - No signs.

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

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category AA2.
 17. (a) Vision R. 20 L. 20
 (b) Hearing. R. o.k. L. o.k.

Signature of Man *Joseph Savard*

W. H. Hartyn President.
Geo. D. McLaughlin Member. *W. DeLoraine* Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
8-2-18	<i>H.R.</i>	<i>Indomine</i>	10/1/18	<i>TAB</i>	<i>T.C.V.</i>
			M.O.	<i>18</i>	M.O.
			M.O.	<i>11-2-18</i>	M.O.
			M.O.	<i>13-2-18</i>	M.O.

DUPLICATE
MEDICAL BOARD

Joined _____ day of _____ 191_____ at _____

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<i>1st Depot Bn. 2nd Co R</i>	<i>3106954</i>		<i>21 AUG 18 1918</i>
Transferred to.....	<i>8th Res. Bn.</i>			
	<i>68TH BN.</i>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT

MILITARY SERVICE ACT, 1917.

3106954

MEDICAL HISTORY SHEET.

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

1. Surname Savard Christian name Joseph
 2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 845869
 3. Consecutive number on schedule of men reporting for service (if he appears on it) 564
 4. Address (including street and number, if any) Fauquier Ont.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 30th day of Nov. 1917, by the undersigned medical board sitting at Hailebury Ont. # 18

5. Age as stated 24 Years 2 Months. 6. Apparent age 24 Years _____ Months
 7. Height 5 Feet 3½ Inches. 8. Weight 121 Pounds.
 9. Chest measurement { Minimum 34 Ins. 10. Complexion dark { Eyes brown
 { Maximum 36½ Ins. { Hair dark
 11. Physical development. good { Good Fair Poor 12. Smallpox marks nil
 13. Number of vaccination marks { Right arm 1 14. When vaccinated last childhood
 { Left arm _____

15. Distinctive marks and marks indicating congenital peculiarities or previous disease
Complains of kidneys no signs

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

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category A2 Vision both eyes 20
 Hearing normal.

D.M. Martyn President.

Geo. D. McTaggart Member. W. Clermond Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>8-2-18</u>		<u>M.O.</u>	<u>8-2-18</u>		<u>M.O.</u>
		<u>M.O.</u>	<u>11-2-18</u>		<u>M.O.</u>
		<u>M.O.</u>	<u>13-2-18</u>		<u>M.O.</u>

Joined 30-11-17 day of 191 at Toronto

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment				
Transferred to.....				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT

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

Signature of Man Joseph Savard

CERTIFIED TRUE COPY
 FOR: LT.-COLONEL
 O. C. Mobilization Centre
 HAMILTON, ONT.

M.S.A.

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

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

350M.—5-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

1st DEPOT BN, 2nd C. O. B.

Unit, Regiment or Corps.....
 Regimental No. 3106954 Rank Pte. Name SAVARD Joseph
 Enlisted (a) 30.11.17 Terms of Service (a) Six months after Service reckons from (a) 30.11.17
 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) FIREMAN

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				
FEB 15 1918	<i>Res</i>	<i>Transferred to 8/8 Draft</i>	<i>HAMILTON, ONT</i>	FEB 15 1918	<i>S B Watson</i> Adj't, 1st Depot Bn, 2nd C. O. B.
		<i>Embarked</i>	<i>Canada</i>	<i>21/2/18</i>	
		<i>Disembarked</i>	<i>(England)</i>	<i>4/2/18</i>	
14-3-18	8 th Res.	T.O.S. from Canada ✓	E. Sandling	21-2-18	Pt. 2 D. O. # 73
19 AUG 10 1918	<i>8th Res.</i>	<i>Proceeded overseas for Service with 58th Bn</i>	<i>Wiley</i>	18 AUG 1918	<i>DO-231</i>
	<i>O.C.C.B.D.</i>	<i>Landed in France. Taken on strength 58th Cdn. Bn.</i>	<i>20.8.18</i>	<i>Pt II D.O. 87/1285</i>	<i>NO'T FOR O.C. CANADIAN RES. B</i>
	<i>— do. —</i>	<i>Left for 6116</i>	<i>23.8.18</i>	<i>Nom. Roll d/1354</i>	
	<i>C.C. Bn.</i>	<i>Arrived</i>		<i>d/1312</i>	
29.8.18.	<i>6116</i>	<i>To Unit.</i>		<i>29.8.18.</i>	<i>NR-1481.</i>
31.8.18.	<i>58 Bn.</i>	<i>Joined</i>			<i>B. 213</i>
3.10.18		<i>Wounded</i>		<i>1.10.18.</i>	<i>K.I. 18/19538.</i>
17.10.18.		<i>now killed in action</i>		<i>1.10.18.</i>	<i>6116 No. 102.</i>
					<i>4.2 No. 119/78</i>

(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.

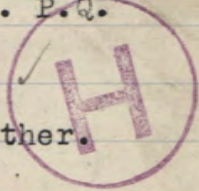
Casualty Form - Active Service

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				

MX
30/5/18

G.C. Rank **SAVARD. Joseph.** Reg'l No. **3106954.**
 Name **SAVARD. Joseph.** If in perm. Corps, }
 Unit **1st Bn 2nd C O Regt** What Unit? }
 Married or Single **Single.**
 Place and Date of Enlistment **Hamilton. 30th. Nov. 1917** Place of Birth **Quebec. P.Q.**

Name and Address, Next-of-Kin **Ferdina Savard,**
Pauquier. Ont Canada. Relationship **Father.**



Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

N/E. R.B. No. **4506**
 File N.L. **258 5673** *4/11/18*
 Category **HA.**

Discharge, Date and Place Reason 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>14.3.18</i>	<i>8th Rec</i>	<i>T-O-Strength</i>	<i>Witley Pte</i>	<i>21.2.18</i>	<i>S/S MELITA D.O, 73</i>
<i>19/8/18</i>	<i>do</i>	<i>SOS o/s to 58 Bn</i>	<i>Witley Pte</i>	<i>18/8/18</i>	<i>Do 231 & 58 Bn Do 87 9/23 8/18</i>
<i>17.10.18</i>	<i>58th Bn</i>	<i>Killed in action</i>	<i>Field "</i>	<i>1.10.18</i>	<i>Do 119. 4888. 3494/22.10.18</i>

arrived in England 4-3-18

ASSIGNED PAY. CANADA. SEPARATION ALLOWANCE. ENGLAND OR CANADA.

NAME: SAVARD, Joseph.

EFFECTIVE DATE: 1-2-18-18. EFFECTIVE DATE:

AMOUNT: 15⁰⁰ 15⁰⁰/₁₀₀. AMOUNT:

PARTICULARS OF RANK OR APPOINTMENT

NAME, ADDRESS, RELATIONSHIP & AUTHORITY	WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.	AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
Rev. Priest Reigourdi.	APR			Pte.
Staguir. Ont. Canada (Friend)	SP			
Stopped off 1/11/18				

UNIT AND TRANSFERS

ORIGINAL UNIT: 1st Depot Bn. B.O.P.

DATE ACCOUNT FIRST OPENED: 1-3-18

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'OP'D	UNIT TRANSFERRED TO
	8/1-9-18	21-9-18	58 Bn
Kin A.	1-11-18	26.11.18	B.N.E.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBSCE ALL'CE
	1 00	10		

PARTICULARS OF RENDERING NON-EFFECTIVE: Kin A 1/10/18 B.L.A. 349 22/10/18 ASPB. Inj. 11-12-18

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
March 31	Bal Forward								26.23		
April	P Pay	33		AR 171. 10. 18 8 Res. AR 500	4.87			15			
				AR 4005. 17. 4-18 8 Res.	26						
				AR 776. 28. 4. 18	4.87				34.23		
May	P Pay	33		AR 995. 5. 5. 18	29.20			15			
		34 10		1699. 23.	9.73				14.40		
		34 10			38.93			15			
June	P Pay	33		AR 2329. 13. 6. 18	7.30			15			
				2665. 26.	9.73				15.37		
		33			17.03			15			
July	P Pay	34 10		AR 2918. 10. 7. 18	9.73			15			
				3461. 26.	9.73				15.01		
		34 10			19.46			15			
Aug.	P Pay	34 10		AR 3735. 11. 8. 18	9.73			15			
				4018. 17. 8. 18	4.87				19.51		
		34 10			14.60			15			
Sept	P Pay	33		AR 1747. 10/8/18	40			15			
				AR 1162 14/9/18 GCIB	3.57						
				" 1350 21/9/18	3.57						
		33			7.54			15	29.97		
Oct.	✓	34 10		car.				15	49.07		
		34 10									
				Balanced forward							

156 compiled 10.3.19 Agh
Credit Bal 49.07

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

01152

Feb. 1-18

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

AUTHORITY
FOR
NEW ACC'T. } *N.R.S*

RATE OF ASSIGNMENT

13 ⁰⁰			
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PARTICULARS OF SEPARATION ALLOWANCE

No. *3106954*
 Rank *Pte* Promoted Reverted Discharge
 Soldier's Name *Savard Joseph*
 Battalion *1st Depot Bn. 2nd Co. R. G. Co.*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *Rev. Priest Rigourdi*
Miss Mellena Boullian (Friend)
 Address *Farguier, Ontario*
 Change of Address
 1
 2
 3
 4

Sarah Hill 28-2-18

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Feb 1918</i>	<i>C 78024</i>	✓	<i>15</i>	<i>15</i>	<i>R</i>
<i>Mar</i>	<i>M 79659</i>	✓	<i>15</i>	<i>15</i>	<i>R</i>
<i>Apr</i>	<i>4 11151</i>	✓	<i>15</i>	<i>15</i>	
<i>May</i>	<i>U 18600</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>June</i>	<i>U 24528</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>July</i>	<i>E 23938</i>		<i>15</i>	<i>15</i>	
<i>August</i>	<i>M 36491</i>		<i>15</i>	<i>15</i>	
<i>Sept</i>	<i>X 46361</i>		<i>15</i>	<i>15</i>	
<i>Oct</i>	<i>L 50847</i>		<i>15</i>	<i>15</i>	
<i>Nov</i>			<i>15</i>	<i>15</i>	

16036-9-39

M.R.O. 10. 18/3/18. c 78024 Remanded 15/3/18 mev
Assignee changed to Rev. Priest Rigourdi
effective 1-10-18 Per 277 form 17. 2/18. M.R.O.
8272 rendered re same. 20/9/18 M.P.

IN ACTION }
 CE WOUNDS } DATE *1-10-18*
 C. L. No. *3. H. 5* DATE *28-10-18*
 M. R. O. *15481* TO DESTROY RENDERED *5-11-18*
 B. P. C. FORM 1 & C. F. X. COMPLETED ON FILE
16036-9-39
 CLERK *M.P.* DATE *5-11-18*

CLERK DATE
 B. P. C. FORM 1 & C. F. X. COMPLETED ON FILE
 M. R. O. TO DESTROY RENDERED
 C. L. No. DATE

EFX Rend 28³/₉

M. F. W. 128.
 FORM 6-7-1772-38-1141
 L. L. 22220-M. & D. 1903.

Date of Enlistment _____

MILITIA AND DEFENCE

Date of Assignment _____

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

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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.
40M. 6-7-172-35-1161
L. L. 22220-M. & D. 1992