

Unit 721<sup>st</sup> Battalion C.E.F. Rank Lieutenant Name H. E. Jekill

## OFFICERS' DECLARATION PAPER.

### CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

#### QUESTIONS TO BE ANSWERED BY OFFICER.

(ANSWERS.)

1. (a) What is your Surname? Jekill
- (b) What are your Christian Names? Henry Edgar
2. (a) Where were you born? (State place and country) Morin Plains, Argenteuil Co., Quebec.
- (b) What is your present address? 3104 Ontario St., Vancouver, B.C.
3. What is the date of your birth? February 5, 1893
4. What is (a) the name of your next-of-kin? Margaret Jane Jekill
- (b) the address of your next-of-kin? 3104 Ontario St., Vancouver, B.C.
- (c) the relationship of your next-of-kin? Mother
5. What is your profession or occupation? school teacher
6. What is your religion? Anglican
7. Are you willing to be vaccinated or re-vaccinated and inoculated? yes
8. To what Unit of the Active Militia do you belong? 11<sup>th</sup> Regt. I. & G. C.
9. State particulars of any former Military Service. 1 1/2 years in 102<sup>nd</sup> R. M. R.  
6 months in 72<sup>nd</sup> Seaforth's Bn.
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.

Henry E. Jekill (Signature of Officer.)

#### 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 June 1<sup>st</sup> 1916 191.....

Place New Westminster B.C. H. M. Purvis  
Captain Medical Officer.

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



OFFICERS' DECLARATION PAPER  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE ANSWERED BY OFFICER

ANSWERS

1. What is your name?  
 2. What is your Christian Name?  
 3. When were you born? (State place and month)  
 4. What is your present address?  
 5. What is the date of your birth?  
 6. What is (a) the name of your next-of-kin?  
 (b) the address of your next-of-kin?  
 (c) the relationship of your next-of-kin?  
 7. What is your present or occupation?  
 8. What is your religion?  
 9. Are you willing to be vaccinated or to receive other medical treatment?  
 10. To what branch of the Armed Forces are you being assigned?  
 11. State your kind of any former Military Service.

CERTIFICATE FOR MEDICAL EXAMINATION

I have examined the above named Officer in accordance with the Regulations of the Army Medical Department and find him to be fit for service in the Canadian Overseas Expeditionary Force.

Signature: \_\_\_\_\_  
 Date: \_\_\_\_\_



C.E.F. REGIMENTAL DOCUMENTS  
WAR SERVICE RECORDS D.V.A.

JEKILL HENRY EDGAR

LT.

121 BN

04406

KILLED IN ACTION 9-8-18





1850  
1850

1850



Surname.

Christian Name.

JEKILL  
Rank.

H. E.  
Unit.

Lieut. 47th. Batt 29th. Batt'n.

No. 24 General Hospital, Etaples. <sup>Date of admission</sup> 18-11-17

Hospital Prince of Wales Hospital. 29-11-17.

Transferred ..... Hosp.

..... Hosp.

..... Hosp.

..... Hosp.

Reported from G.H.Q., Wounded:-1411-17.

Diagnosis Wd. Chest Cont. sev.

Later diagnosis. Reported from G.H.Q.

**KILLED IN ACTION:-9-8-18.**

R.W.

Disposition.

Date.

Discharged:-12-1-18.

19-11-17 834.

20-11-17 835.

C.L. 3-12-17 846-2.

C.L. 17-1-18 835-3. <sup>Remarks.</sup>

C.L. 14-8-18 1059.

C.L. ....

C.L. ....

C.L. ....

C.L. ....

A.M.D. 2 DEPT.

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



Surname

JEKILL

Christian Name

H. E.

Reg. No.

Rank

Lieut.

Unit

47th. Batt.

MEDICAL BOARD held at

Date

Serial No.

London Area

8-1-18.

(1)

do.

23-1-18.

Other Medical Boards at

Date

Serial No.

Seaford Area

23-2-18.

(2)

(3)

(4)

(5)

Condition found by Board

Contus. Chest.

Disposition Recommended

(1) Unfit any service 2 weeks.

Fit Home ser. Unfit Gen. serv. 1 month.

(2) Fit for General service.

(3)

(4)

(5)

PENSIONS & CLAIMS BOARD held at

Date.....

Disposition

Remarks



A.F.B. 104-93

**JEKILL****LIEUT.**Name **Henry** Rank **E. d. far**Reg. No. **9-J 225**Unit **29th Bn.**Next of Kin **Canada**also notify Mrs. Nora & Abraham  
4 Cleveland Garden  
Ealing London W 13

1918

Movement

Place

Casualty

List  
No.Notified  
N/KO.

W.O. List

9-8

Reported GHQ (1439)

**KILLED IN ACTION.**

1059

1023  
10/11  
15/18







NAME

Jekill Henry Edgar

REGT'L No.

H. Q. FILE No. 649.

RANK AND CORPS

Lieut. (47th Bn) (form. 12/1st)

FOLLOWS

CABLE

29th Bn.

No.

NO.

DATE

NATURE OF CASUALTY

FOLLOWS

M. 6383<sup>1-7</sup>

19.11.17

Reported wounded Nov. 14th 1917 ✓

M. 6386<sup>2-3</sup>

20.11.17

Adm. 24th Gen. Hosp. Etaples Nov. 16th 1917. Wound contusions chest see

Jekill Mrs. Margaret-Jane (Mother)  
4180 Ontario St. Vancouver B.C.J.P. 823<sup>2-7</sup>

15-8-18

Kin A. Aug. 9th 1918. ✓



Can Cont.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
834	Rept. from Gen. H. Q	14-11-17	Wounded.
835	# 24 Gen. & Staples	16-11-17	Wd. back chest
846-2	U.S. Prince of Wales. Mary Lebone	N.W. 29-11-17	" " " Ser. 30-12-17
883 <sup>2</sup>	Discharged	" " "	16-2-18
1059 <sup>1</sup>	Rept. from Gen. Hdqrs.	Killed in Action 9-8-18	



No.

RANK

*Leut.*

NAME

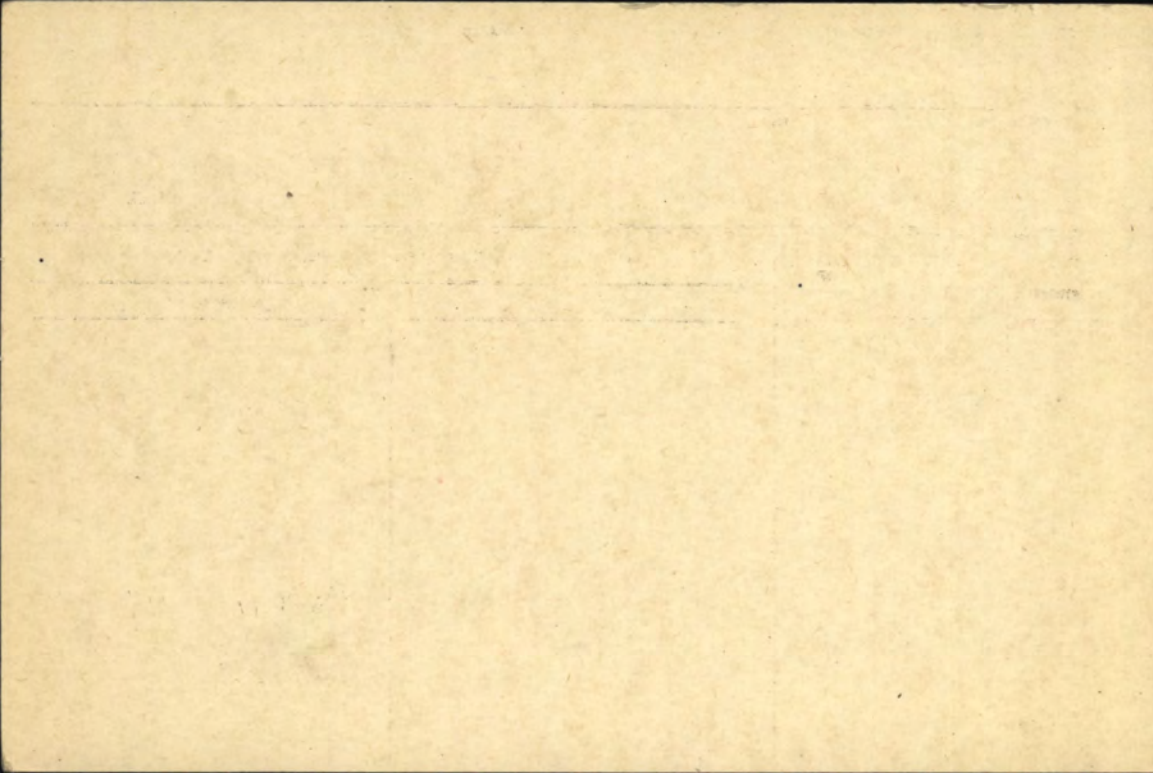
*J. Skill, A.**E.*T. O. S. *1-1-16.**(D.O. 21 of 4-1-16.)*

UNIT

*121st. Battalion. C. E. F.*M. D. *11.*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916. Jan. 1.</i>	<i>1916. Jan. 31.</i>	<i>L</i>	<i>Returned to duty 22-1-16</i>	<i>D.O. 37 of 24-1-16.</i>
	<i>Feb.</i>	<i>L</i>		
	<i>Mar.</i>	<i>L</i>		
	<i>Apr.</i>	<i>L</i>		
	<i>May</i>	<i>L</i>		
	<i>June.</i>	<i>L</i>		
	<i>July</i>	<i>L</i>		
<i>aug. Pay list not available</i>				
<b>UNIT SAILED</b>				
<i>Aug. 14 1916</i>				





*C. L.*  
SURNAME.

*Jekill 332-125-60*

CARD NO.

CHRISTIAN NAMES

*Henry Edgar.*

FOLL.

*gas*

REGL. NO.

RANK

*Lieut.*

UNIT

*121st. 47th*

FORMER CORPS

*11th. Regt. 102nd. R.M. R. & 72nd. Seaforth's of Can. Br.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

*Jekill, Mrs. Margaret Jane  
(mother)*

RELATIONSHIP TO SOLDIER,

ADDR

*4180, Ontario St., Vancouver,  
B.C. S.A.A.P. 25-9-17*

COUNTRY OF BIRTH

*Canada Argentuil C.P.A.*

DATE

PLACE OF ATTESTATION

*New Westminster*

DATE

*Jan. 1 - 1916*

*author trans m6385-19-11-17*



MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE

Name **JEKILL**  
 Unit **Henry Edgar**  
**47th Bn.**  
 Next of Kin **Canada**

Rank **Lieut.**

Reg. No.

Date 1917	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
14-11	Rep. from GHQ.	WOUNDED		834	M6383	19-11
16-11	24 Gen Co Staples	Md. cont	chest sev	835	M6386	
29 11	Lance Waleston	Marglebone	✓ ✓	846	✓	
12-1	Discharged	(7225)	—	883	✓	





JEKILL, Henry Edgar, Lieut. 29th Bn.

*not elig. for 14-15 star*

MEDALS &  
DECORATIONS

Mrs. Margaret Jane Jekill (Mother)  
~~4130 Ontario St., Vancouver, B.C~~

1298 - 10th Ave. W.  $\frac{1}{3/22}$

Mother, as above.

PLAQUE &  
SCROLL

FEB 18 1921

*Serial No 782804*

Scroll Desp.

Reqn. No 2-214 99

Mother, as above.

MEMORIAL  
CROSS

Plaque Desp.

JAN 10 1922

Reqn. No

P 24134

25485

*7.6* Desp. 00: 2-1920

(m) C 25398



M

671

Number

Rank

*Lieut*

*15*

Surname

*JEKILL.*

Christian Name

*HENRY EDGAR.*

Units

Theatre of War

*France*

Date of Service

*14-8-16.*

*5-9-17*

*9-8-18.*

Remarks

*B.C.R.*

*brother*

**D**

Latest Address

*Mrs. Margaret Jane Jekill  
1298-10<sup>th</sup> Ave W.*

Roll No

*Vancouver BC*

*Page 10263*



Port, ship, and date of arrival

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

DESP APR 12 1922  
REGN NO. 24303

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



# ORIGINAL 121st OVERSEAS BATTALION

## MEDICAL HISTORY SHEET. ORIGINAL

Surname Jerill Christian Name Henry Edgar

Examined on 1<sup>st</sup> day of Jan 1916 Approved by A. H. Williams  
 at New Westminster B.C.

Birthplace { City or Town Morin Flats Rank captain M.O.  
 County Argenteuil les Orléans

Apparent age 23 yrs. EXAMINED FOR RE-ENGAGEMENT.

Trade or occupation school teacher M.O.

Height 5 Feet 10 1/2 Inches. M.O.

Weight 152 Lbs. M.O.

Chest measurement { Minimum 31 inches. M.O.  
 Maximum expansion 36 inches. M.O.

Physical development Good M.O.

Small-Pox Marks None M.O.

Vaccination Marks { Arm Right Left  
 Number - 2

When Vaccinated last 1916 Date 4/4/16 Result OK M.O.

(a) Marks indicating congenital peculiarities or previous disease None M.O.

(b) Slight defects but not sufficient to cause rejection None M.O.

ANTI-TYPHOID INOCULATIONS, ETC.

Date 10/1/16 Result OK M.O.

Date 10/9/16 Result OK M.O.

Date 19/7/16 Result OK M.O.

Date 28/7/16 Result OK M.O.

Date 4/5/18 Result OK M.O.

Enlisted on dry of 191 at

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment				
Transferred to	<u>16th. C.R. Bat.</u>	<u>Lieut</u>		
	<u>47<sup>th</sup> Bn</u>			

### EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Vernon Camp BC</u>	<u>3/8/16</u>	<u>Yell</u>	<u>Dis. En route</u>
<u>131 Berners St</u>	<u>8/18</u>	<u>E.W. Chest.</u>	<u>Capl. Carr</u>
<u>Aspen</u>	<u>23-2-18</u>	<u>..</u>	<u>W. J. Green</u>
			<u>Pres. G. M. Carr</u>
			<u>W. J. Green</u>
			<u>W. J. Green</u>

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.

CANADIAN











INSTRUCTIONS.

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1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

[198] Wt. W.8632—M.2739. 100,000. 9/17. V. & S., Ltd.

[228] Wt. W.1327—P.142. 50,000. 11/17. V. & S., Ltd.



85 284

**MEDICAL BOARD REPORT ON A DISABLED OFFICER.**

(ALSO TO BE USED FOR DISABLED NURSES.)

Station 13 Berners St. London

Date Jan'y 23 18

1. Rank and Name Lt. Henry Edgar JEKILL

2. Unit 47 Cav. Inf.

3. Age 24 4. Total Service 33/12 War Service { (a) at home 8/12  
(b) abroad 17/12

5. Address C/o A.P. Tabraham, Brooklands, Uxbridge Road West Acton W. 3.

STATEMENT OF CASE.

NOTE.—In answering the following questions the Board will carefully discriminate between the officer's statements and evidence recorded in his medical documents. When possible, a statement by his medical attendant should be attached.

6. Disability Contusion Chest

7. Date of origin of disability 14<sup>th</sup> 1/17

8. Place of origin of disability Upres Salient

9. Give concisely the essential facts bearing on the history of the disability (personal and family history, etc.) :—

NOTE.—Boards subsequent to the first should record here the progress of the case since the officer's last appearance.

Reporting after two weeks leave.  
States: That he feels quite fit  
After a very long walk feels a bit tired, but otherwise all right.

OPINION OF THE MEDICAL BOARD.

NOTES.—(i.) The Board will on no account inform the officer of its opinion on any of the following questions.

- (ii.) Clear and decisive answers should be filled in by the Board to enable the Ministry of Pensions to come to a reliable decision on the officer's claim to pension, etc.
- (iii.) Expressions such as "may," "might," "probably," should be avoided, if possible.
- (iv.) When there is more than one disability the replies will distinguish between them.

10. Was the disability contracted (a) before entering the service? No

(b) in the service? Yes

11. Was it attributable to military service? Yes

If so, to what specific military conditions is it attributed? S.W.

[Enteric Fever, Dysentery, Malaria, &c., contracted on service in countries where there is a special liability to the disease, are to be regarded as attributable to military service.]

12. If not attributable to, was it aggravated by, military service? N.A.

If so, by what specific military conditions?

13. Is it attributable to, or aggravated by, the officer's own negligence or misconduct? If so, in what way, and to what extent? N.A.

I concur in the findings of the Board of Medical Officers  
for D.A.D.M.S. Canadians,  
D.M.S.



14. What is the officer's present condition?

General physical condition good.  
Colour good.  
Appetite good - Bowels reg. -  
Sleeps fairly well.

Board recommended - One month Active duty with troops in Eng., on acct. of apparently severe contusion.

15. To what degree is the officer disabled at the present time?

(Degrees of disablement should be expressed in the following percentages—100, 80, 70, 60, 50, 40, 20, under 20, or nil.)

16. Is the disability permanent? No

17. If not permanent, how soon is re-examination recommended? One months.

18. Is it necessary that the officer should be re-examined by the same Board? No

19. What treatment is the officer receiving, and where, and from whom? Nil

20. Is the officer in need of special medical treatment of any kind, and, if so, of what nature?

No

21. Does the officer require the constant attendance of another person? No

22. Officers will be classified by the Medical Board under one of the following categories, the probable period of unfitness for the higher categories being stated. Explanation of these categories is in para. 5 of A.C.I. 1677/1917. In case of nurses, omit B. and (i) and (ii) of E.

- A.—Fit for general service.
- B.—Fit for service in a garrison or labour unit abroad.
- C.—Fit for home service:—
  - (i) Active duty with troops.
  - (ii) Sedentary employment only.
- D.—For admission to a command depot.
- E.—Requiring indoor hospital treatment:—
  - (i) In an officers' military or auxiliary convalescent hospital.
  - (ii) In an officers' hospital.
- F.—Permanently unfit for any further military service.

No - one month

yes

23. In the case of officers suffering from neurasthenia found permanently unfit, has A.C.I. 1289 of 1917 been complied with?

N.A.

G.A. Belton M.A. C. M. C. acting President.

J.H.M. Bell. Maj. C.M.C. }  
L.W. MacLellan M.A. C. M. C. } Members.



PROCEEDINGS OF A MEDICAL BOARD

assembled at 13 Berners St. W1 on 8/18  
 by order of A. D. M. S. London Area  
 for the purpose of examining and reporting upon the present state of health of  
 (Rank and Name) Lt. Henry Edgar JEKILL (Corps) 47 Cav. Inf.  
 Age 24 Service 24/12 Disability Contusion Chest  
 Date of commencement of leave granted for present disability 8/18  
 Date on which placed on half-pay for present disability

The Board having assembled pursuant to order, and having read the instructions on the back of the form, proceed to examine the above-named officer and find that

Reporting from P.G.W. Hosp.  
Status Struck on chest R. by flying shell frag. producing  
severe contusion with haemoptysis several days.  
M.C.S. No sign Haemothorax x Ray NO Fract. of ribs or  
Haematoma of Lung - Exam No abnormal signs or symptoms  
P.C. Status that beyond getting tired after a  
walk much quicker than formerly, he feels  
perfectly fit.  
Exam Heart & Lungs - nothing abnormal found.

The Board will classify the officer under one of the following categories, the probable period of unfitness for the higher categories being stated.

- 1. Fit for General Service..... NO - Two weeks
- 2. Fit for service in a Garrison or Labour Battalion abroad. No officer likely to be fit for general service within six months should be classed in this category
- 3. Fit for Home Service..... NO - Two weeks
- 4. Fit for Light Duty at Home..... NO - Two weeks
- 5. Requiring indoor hospital treatment—
  - (a.) In an Officers' Hospital.....
  - (b.) In an Officers' Convalescent Hospital.....
- 6. (a.) Fit for light duty at a Command Depôt.....
- (b.) Fit for treatment only at a Command Depôt.....
- 7. In very special cases such as tuberculosis leave not exceeding six months may be recommended by Medical Boards for special treatment, the Board giving detailed reasons for any such recommendation
- 8. Was the disability contracted in the service?..... Yes
- 9. Was it contracted under circumstances over which he had no control?..... Yes
- 10. Was it caused by military service?..... Yes
- 11. If caused by military service, to what specific military conditions is it attributed?..... S.W.
- 12. If the disability was not caused by military service, was it aggravated thereby, and if so, by what specific military conditions?..... not appl.

I concur in the  
 of the Board  
 here recorded  
 Medical Board  
 Captain D.A.D.M.S.  
 for P.M.S.  
 Canadians

Officer's Address { Rev. J. M. Lester  
Lichborough Rectory  
Lichborough  
Weedon N. Hants.

Signatures { Sumner President.  
J. M. B. Keir Cam.C. Members.  
L. W. MacLennan

[P.T.O.]



## INSTRUCTIONS.

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1. On the occasion of an Officer's first appearance before a Medical Board for his present disability, the circumstances under which the disability was contracted will be fully detailed; whenever possible a statement of the case by his medical attendant will also be attached.

2. In recording the proceedings of subsequent Boards, the progress of the individual since his last appearance will be clearly and concisely stated so as to ensure a continuous medical history of the case being available.

3. Enteric Fever, Dysentery, Malaria, etc., contracted when on service abroad, in countries where there is a special liability to the disease, are to be regarded as caused by military service.

[228] Wt. W.1327—P.142. 100,000. 11/17. V. & S., Ltd.

[235] Wt. W.1984—P.325. 75,000. 11/17. V. & S., Ltd.



Confidential.

To be used in cases of wounds or injuries received in action.  
(For instructions for preparing this report see back of form.)

PROCEEDINGS OF A MEDICAL BOARD assembled by order of \_\_\_\_\_

R. DMS London Area

for the purpose of examining and reporting on the present state of a wound or injury sustained

by Lt. Henry Edgar JERILL

at (Place of injury)

Ypres

on the (Date of injury)

14 X/17

The Board find Struck by flying frag. shell  
right chest - Severe bruising - Haemoptysis  
several days.

MCS No sign Haemorrhage

XRay: No fract ribs or Haematoma Lung

PC states that beyond getting easily tired  
after a walk he is perfectly fit.

Skat & Lunges neg.

No other disability.



The opinion of the Board upon the questions below is as follows:—

- 1.—Has the officer lost an eye or a limb; or has he permanently lost the use of an eye or a limb; or is the injury equivalent to the loss of a limb, and permanent, or likely to be permanent? (Articles 639 to 644 of the Royal Warrant for Pay, &c.)
- 2.—If the case does not come under the category 1:—  
 (a) Was the injury, in the first instance, very severe in character?  
 (b) Are its effects still very severe?
- 3.—If the case is classified under category 2, are the effects of the injury permanent, or likely to be permanent? (Article 646.)
- 4.—Injuries that do not come under the above categories should be classified here, making use of the following terms:—*severe* or *slight* and *permanent* or *not permanent*, as the case may be.
- 5.—For what period, calculated from the date of the wound or injury, is it probable that the officer will be incapacitated for military duty by such wound or injury?

Replies		
As to first wound	As to second wound (if any)	As to third wound (if any)
No		
No		
No		
Slight not permanent		
3 mos.		

of the Board of Medical Officers  
 here recorded in the  
 Captain, D.A.D.M.S.  
 Canadian Forces

Signatures

*W. H. Bell*  
*J. H. M. Bell Maj. C.A.M.C.*  
*W. MacArthur*

Station

Date

13 Berners St

8/18

**INSTRUCTIONS TO BE OBSERVED BY THE MEDICAL BOARD PREPARING THE REPORT.**

1. On the occasion of an officer's first appearance before a medical board, the circumstances under which the wound or injury was sustained will be fully detailed.
2. If the injuries be more than one, they should be numbered and described separately; and should it be considered that, though only "severe" or "slight" in themselves, they represent together the equivalent of a single "very severe" injury, such an opinion may be expressed in the columns provided for that purpose.
3. The board will not express any opinion, either to the Officer examined, or in their report, as to whether he is entitled to compensation, or as to the amount of it, nor will it inform the Officer how the wound or injury has been classified.
4. If an Officer makes any enquiry as to wound gratuity he should be told by the board that he should make application in writing to the Secretary of the War Office.



*Ans.*

FORM OF WILL.

I. **Henry Edgar Jekill** (Name in full)

**Lieutenant** **121st Bn. of the**  
Regimental Number ..... serving in  
the Overseas Military Forces of Canada, do hereby revoke all former Wills  
by me made and declare this to be my last Will.

CANADIAN  
EXPEDITIONARY  
FORCES

I bequeath all my real estate unto

**Margaret Jane Jekill**

**3104 Ontario St.,**  
**Vancouver, B.C.**

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

absolutely, and my personal estate I bequeath to  
**Margaret Jane Jekill**

**3104 Ontario St.,**  
**Vancouver, B.C.**

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

In Witness whereof I have hereunto set my hand

this **21st** day of **November** **1918** A.D.

**H.E. Jekill, Lieut**  
**121st Bn C.E.F.**

Signature.

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

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

**E W Henderson Capt.**  
Name of Witness  
**121st Batta**  
Address of Witness  
**Paymaster.**  
Occupation of Witness  
**G A Hood**  
Name of Witness  
**121st Batta.**  
Address of Witness  
**A Pay Sgt.**  
Occupation of Witness

RECORDS REGISTRY O.M.F. OF C.	
GREEN ARBOUR HOUSE, OLD BAILEY, LONDON, E.C. 4.	
R.L.	
REFD TO <i>A2a3</i>	
30 AUG. 1918	
<i>R</i>	L/R
FIL	CHARGED
TO	SINCE

I hereby certify the above to be a true copy of the original Will now on file in Estates Branch

Date **24<sup>th</sup> Aug. 1918.** *J.A. Wallis*  
For OFFICER I/C ESTATES.

NOTE Died **30-8-18.**  
Transferred **Lieut. H.E. JEKILL. 29th. Bn.**  
**(B.C.) 27196.**

REGISTERED  
WILLS - SECTION  
29 AUG 1918  
ESTATES, O.M.F.C., LONDON.



FORM OF WILL

State of Ohio

I, the undersigned, of the County of \_\_\_\_\_ State of Ohio, do hereby certify that the within and foregoing is a true and correct copy of the original of the within and foregoing will of \_\_\_\_\_ of the County of \_\_\_\_\_ State of Ohio, as the same appears from the records of the probate court of the County of \_\_\_\_\_ State of Ohio, and that the same is a true and correct copy of the original of the within and foregoing will of \_\_\_\_\_ of the County of \_\_\_\_\_ State of Ohio, as the same appears from the records of the probate court of the County of \_\_\_\_\_ State of Ohio.

Witness my hand and seal of office this \_\_\_\_\_ day of \_\_\_\_\_ A.D. 19\_\_\_\_.

Notary Public for the State of Ohio

My commission expires this \_\_\_\_\_ day of \_\_\_\_\_ A.D. 19\_\_\_\_.

In testimony whereof, I have hereunto set my hand and seal of office this \_\_\_\_\_ day of \_\_\_\_\_ A.D. 19\_\_\_\_.

Notary Public for the State of Ohio

My commission expires this \_\_\_\_\_ day of \_\_\_\_\_ A.D. 19\_\_\_\_.

In testimony whereof, I have hereunto set my hand and seal of office this \_\_\_\_\_ day of \_\_\_\_\_ A.D. 19\_\_\_\_.

Notary Public for the State of Ohio

My commission expires this \_\_\_\_\_ day of \_\_\_\_\_ A.D. 19\_\_\_\_.



~~65103~~

# FORM OF WILL.

I, Henry Edgar Jekill (Name in full)

Regimental Number Lieutenant serving in 121<sup>st</sup> Bn.

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

I bequeath all my real estate unto

Margaret Jane Jekill  
3104 Ontario St.  
Vancouver, B.C.

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

absolutely, and my personal estate I bequeath to

Margaret Jane Jekill  
3104 Ontario St.  
Vancouver, B.C.

Name & Address of person or persons to receive personal estate\* (see note).

In Witness whereof I have hereunto set my hand

this 21<sup>st</sup> day of November A.D. 1916

H. E. Jekill, Lieutenant  
Signature.  
121<sup>st</sup> Bn. C.E.F.

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

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

Name of Witness G. W. Anderson Capt.

Address of Witness 121<sup>st</sup> Bn.

Occupation of Witness Paymaster.

Name of Witness Schood

Address of Witness 121<sup>st</sup> Bn.

Occupation of Witness a Paymaster.

ESTATES BRANCH

SEP 20 1918

MILITIA DEPT.



Occupation of *M. Jones*

Address of *M. Jones*

Name of *M. Jones*

Description of *M. Jones*

Address of *M. Jones*

Name of *M. Jones*

and name of *M. Jones*

the original and in the presence of two other persons present subscribed

the foregoing and in full presence of the same and in the presence of

Witness and subscription has been

**The original will was  
29. 8. 18.  
forwarded to Ottawa.**

scribed and in full presence of the same

Witness and subscription has been

Witness

In presence of *M. Jones*

Witness and subscription has been

Witness

Witness and subscription has been  
of *M. Jones*  
Witness and subscription has been

Witness and subscription has been

Witness and subscription has been  
Witness and subscription has been  
Witness and subscription has been

I *M. Jones* and *M. Jones*

Witness and subscription has been

Witness and subscription has been

Witness and subscription has been

Witness and subscription has been

FORM OF WILL



CERTIFIED CORRECT

10 SEP 1917

CANADIAN RECORD OFFICE

Army Form B. 103.

Casualty Form—Active Service.

*Sheet One*

Regiment or Corps 121st OVERSEAS BATTALION Regimental Number \_\_\_\_\_

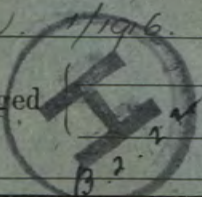
Rank Lieut. Surname Jexill Christian Name Henry Edgar

Religion Co. 16 Age on Enlistment \_\_\_\_\_ years \_\_\_\_\_ months.

Enlisted (a) Jan 1 1916 Terms of Service (a) Period of War Service reckons from (a) Jan 1 1916

Date of promotion to present rank Jan 1 1916 Date of appointment to lance rank \_\_\_\_\_

Extended ( ) Re-engaged ( ) Qualification (b) School Teacher  
or Corps Trade and Rate \_\_\_\_\_



Signature of Officer i/c Records.

*8-12*

Date	Report From whom received	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
		Embarked ... <u>Kalifat Saouda</u>		<u>14.8.16</u>	
		Disembarked... <u>Luxembourg</u>		<u>24.8.16</u>	
<u>9/1/17</u>	<u>21<sup>st</sup> Bn</u>	<u>Trans to 16<sup>th</sup> Res Bn</u>	<u>Bransholt</u> <u>Seaford</u>	<u>8/1/17</u>	<u>PI 1909</u> <u>Thompson</u>
<u>10/1/17</u>	<u>16<sup>th</sup> Res Bn</u>	<u>Taken on Strength.</u>	<u>Seaford.</u>	<u>10/1/17.</u>	<u>121st Battalion "Western Int."</u> <u>Part 2 DD1.</u>
<u>12/2/17</u>	<u>16<sup>th</sup> Res Bn</u>	<u>On bouman 27<sup>th</sup> Officer</u> <u>bourse. G.M.S. Grosbois</u>	<u>Seaford.</u>	<u>12/2/17</u>	<u>Part 2 DD 34</u>
<u>6/5/17</u>	<u>do</u>	<u>Returned from bouman</u>	<u>do</u>	<u>6/5/17</u>	<u>Part 2 DD 117.</u>
<u>16/10/16</u>	<u>121<sup>st</sup> Bn</u>	<u>On bouman French</u> <u>Mortan bourse Tubright</u>	<u>Bransholt</u>	<u>15/10/16</u>	<u>Part 2 DD 255.</u>
<u>23/10/16</u>	<u>do</u>	<u>Returned from bouman</u>	<u>do</u>	<u>21/10/16</u>	<u>Part 2 DD 262</u>

*m.x.*  
*27.9.17*

(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.



Lieut J. E. KILLICK M.E.

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				
3-9-17	16th Cdn Res. Bn.	O. O. S. on transfer to 1st Res. Bn.	Seaford	31-8-17	DOB 2. 235 W. L. Smyth Asst. Adj. 1st Canadian Reserve Batin.
4-9-17	OC 1st	TAKEN ON STRENGTH OF 1st CAN. RES. BATTN.	Seaford	31-8-17	RTI 241
3-9-17	OC 1st	SOS on Proceeding overseas to 47th Bn	Seaford	3-9-17	RTI 240
5-9-17	9.4 C.I.A.S	Arr in France & T.O.S 47th Battalion			Adjutant, 1st Canadian Reserve Battalion.
8-9-17	Do	Left for C.C.R. Camp	France	8-9-17	NR. P.I. 1100 97. NR. 24
10-9-17	9. C.C.R.C	Joined C.C.R. Camp	"	9-9-17	NR 127
29-10-17	Do	Left for Unit	"	29-10-17	NR. 114
3-11-17	9. Unit	Joined Unit for duty	"	31-10-17	N 113.
15-11-17	Do	Wounded in Action	"	14-11-17	CR K.3. 16/31470.
16-11-17	9. HQ 1st Bn	W/Contusions to Chest. Adv. by Genl		16-11-17	W3034/116692
	9. HQ 1st Bn	Invalided (Wounded) and attached to 1st Bn Regt. Depot Seaford.			W/3082/4444.
28-11-17	Stad Antwerp			28-11-17	P.I. 1100 M. of 8/10/17.

J. E. Killick  
Captain  
for Lieut. and adj  
Canadian Section



**Casualty Form—Active Service.**

P. 12  
 CERTIFIED CORRECT  
 7.5.1919

Regiment or Corps..... *121<sup>st</sup> Bn*  
 Rank *Lieut* Surname *Jekill* Christian Name *Henry Edgou*  
 Religion..... Age on Enlistment..... years..... months.  
 Enlisted (a)..... Terms of Service (a)..... Service reckons from (a)..... *14.5.16*  
 Date of promotion to present rank..... Date of appointment to lance rank.....  
 Extended {.....} Re-engaged {.....} Qualification (b).....  
 or Corps Trade and Rate.....

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>Canada 11.5.17</i>		
			Disembarked...		
<i>5.12.17</i>	<i>B.C.R.D.</i>	<i>20 S. Adm Ho Post W. Hosp. Marylebone</i>	<i>Seaford</i>	<i>29.11.17</i>	<i>D.O. 257 C/1846</i>
<i>17.1.18</i>	<i>"</i>	<i>granted 2 wks sick leave</i>	<i>Seaford</i>		<i>For O.C. B.C. REGL. DEPOT.</i>
<i>23.1.18.</i>	<i>"</i>	<i>Boarded 1 mth Home Service.</i>	<i>Seaford.</i>	<i>23.1.18.</i>	<i>Med Bd Edgs.</i>
<i>25.1.18.</i>	<i>"</i>	<i>Reported to B.C.R.D. &amp; Det</i>			
		<i>to Depot Co.</i>		<i>24.1.18.</i>	<i>D.O. 21</i>
					<i>For O.C. B.C. REGL. DEPOT.</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) Signaller, Shoeing-Smith, &c.

[P.T.O.]



J-12

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 Arms Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
30.1.18	B. C. R. D.	Detached to 16 <sup>th</sup> Reserve for duty	Seaford	29.1.18	SO 25 for U.O. B.C. REGU. DEPOT.
12/2/18	16 <sup>th</sup> Res Bn	On conducting Duty to Buxton	Seaford	12/2/18	M 2 DO 43.
14/2/18	do	Returned from Bournemouth	Seaford	14/2/18	M 2 DO. 45
15/2/18	do	ceases to be attached	Seaford	15/2/18	M 2 DO. 46. Lieut. Adj. 18th. Canadian Reserve Battn.
15/2/18	1 <sup>st</sup> Res Bn.	Attached to 1 <sup>st</sup> Bn Res Bn	Seaford	15/2/18	M 2 DO. 39.
26.2.18	1 <sup>st</sup> Res.	ceases to be attached & is taken on strength	Seaford	23.2.18	M 2 DO. 48.
10/4/18	1 <sup>st</sup> Res Bn	PROCEEDED ON DRAFT TO 29 <sup>th</sup> BATT	Seaford	10/4/18	M 2 DO. 86. Capt. R. Williams Adjutant, 1st Canadian Reserve Battalion.
11-4-18	2 CIBS	Am. Rein + 29 <sup>th</sup> Bn	France	11-4-18	SO 37 dt. 20-4-18
15-4-18	"	left for CCR 2	France	15-4-18	UK.
16-4-18	CCR 2	"	"	16-4-18	"
30-4-18	"	left for 29 <sup>th</sup> Bn	"	30-4-18	"
11.5.18	HO 29	"	"	"	B 213
22-6-18	"	To via Cross School	"	17-6-18	" SO 62 dt. 20-6-18
27-6-18	"	from	"	24-6-18	" SO 65 dt. 9-7-18



*Sheet 3*

**CERTIFIED CORRECT**  
29 NOV 1918  
CANADIAN RECORD

**Casualty Form—Active Service.**

Regiment or Corps..... *29th Can Bn*

Rank..... *Serjt* Surname..... *Gekill* Christian Name..... *Henry Edgar*

Religion..... Age on Enlistment..... years..... months

Enlisted (a)..... Terms of Service (a)..... Service reckons from (a)..... *14-8-16*

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.....

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				
<i>11-8-18</i>	<i>G.S.</i>	<i>Killed in Action</i>	<i>FLS</i>	<i>9-8-18</i>	<i>SD 784-14-8-18 Ent. 1439</i>
		<i>Whogau</i>	<i>Major for Lt.-Col., A.A.G.</i>		<i>Canadian Section C.H.Q. 3rd Echelon B.E.F.</i>

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







ET.

Rank and Name JEKILL, Henry Edgar /

Lieut. /

Regimental No.

Name and Address of Next-of-Kin Mother. /

Unit 121st Battn.

Date of enlistment

Place of birth Morin Flats, Argenteuil Co.,

British Columbia, Canada. /

Married (Yes or No)

Date and place of discharge

If in Permanent Force

Reason for discharge

Character on discharge

Promotions or appointments

LEFT CANADA, 14.8.16

(Sister) Margaret Jane Jekill /  
650 Kingway  
3104 Ontario St. Vancouver.

also notify. Miss Sarah E. Labraham

4 Cleveland Garden

Ealing London W13

RL92-225

## 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

Date	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
2.5.17	Scaford	Completed & Passed 1 <sup>st</sup> course C.I.S. ending	BCR	28.4.17	RO 2078. No 552. No 1357
1.9.17	16 <sup>th</sup>	S of S on logs to 1 <sup>st</sup> Res		31.5.17	PT II of 235
4.9.17	Folskell	Spec. of seas to 47 <sup>th</sup> Bn		4/9/17	Can list 44. Ro 3999
11.9.17	47 <sup>th</sup> Bn.	I.O.S. no reinforcement from England.		5.9.17	PO 974.
17.10.17	CRD	Reported from GHA Wounded		14/10/17	GL 934
19.10.17	CRD	Adm No 24. Gen Hospital Etaples		16/10/17	GL 835-
8.12.17	47 <sup>th</sup> Bn.	Inval. Wounded det to BCRD		28/11/17	PT II of 121.
1.12.17	CRD	Adm. Prince of Wales Hosp Marylebone		12.1.18	GL 883
5.12.17	BCRD	In S. Having been adm. to Hospital		29/11/17	GL 846 Cont. Chest Severy
17.1.18	BCRD	Granted 2 weeks sick leave		8/1/18	PT II of 257
30.1.18	BCRD	Detached to 16 <sup>th</sup> Res		24/1/18	PT II of 21
15.2.18	16 <sup>th</sup> Res	Detached to 1 <sup>st</sup> Res		29/1/18	PT II of 25
23.4.18	47 <sup>th</sup> Bn.	S of S Estab. (absent 4 mths)		15/2/18	PT II of 46
				14/3/18	PT II of 30

71 B 158  
114 RCo Rm 1-3-17

1.5.17

1-6-17

17.17

B CR  
29  
A  
N6

H

M

A.F.B. 103  
10 SEP. 1917  
20 DEC. 1917



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				
26.2.18	1 <sup>st</sup> Res	Yon S. from BCRD (F.S.)		23/2/18	P <sub>II</sub> 48 A.F.B. 108:
10.4.18	1 <sup>st</sup> Res	Sy S. on pro of Mas to 29 <sup>th</sup> Batta		10/4/18	P <sub>II</sub> of 86 16 APR. 1918
20.4.18	29 <sup>th</sup> Bata	Yon S. Having arrived from England		11/4/18	P <sub>II</sub> of 37
30.6.18	29 <sup>th</sup> Bata	broe to 6 <sup>th</sup> Corp School		14/6/18	P <sub>II</sub> of 62
				24/6/18	P <sub>II</sub> of 107
14/8/18	ams	Reported for GHQ <u>killed in action</u>		9/8/18	621059 (621059) P <sub>II</sub> of 78 129 <sup>th</sup> Bn A.F.B. 104-93. 2090 <sup>n</sup> Bata Bn. 30/8/18 A.F.B. 104-93 16 NOV. 1918

8150



1  
Register No. 9495-11-3

WAR SERVICE GRATUITY  
TO  
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. 9495-11-3

*EMB*

Reg't No. .... Name Henry Edgar Ferrell  
(Christian Name) (Surname)  
Unit 29th Bn Rank Lieut. Date of enlistment .....  
Date of casualty 9-8-18 B.P.C. File No. 45603  
Was service performed overseas? yes

DEPENDENT

Name Ms Margaret Jane Ferrell Relationship mother  
Address 4180 Ontario Ave,  
South Vancouver

M.F.W. 2652  
26M-6-20.  
H.Q. 1772-89-1473

EMB ..... B.C .....  
Amount of Special Pension Bonus \$ nil Abstracted by a mother

Eligible for Gratuity ..... \$ 240  
Less amount of Special Pension Bonus paid ..... \$ -  
Less Debit Balance of S. A. or A.P. .... \$ .....

Total deductions \$ .....  
Balance due \$ 240.00

Cheque No. 91898925 ✓ Date issued AUG - 4 - 1920

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

Clerk AMMiel

Audited by  
Leo Havard  
Date 31.7.20

\$240

*26*















4180 Ontario St.  
 Vancouver,  
 B.C.

(24-9-17 wt)

MILITIA AND DEFENCE  
 ASSIGNED PAY  
 OVERSEAS CONTINGENTS

M. F. W. 12.  
 50m.—6-16.  
 H. Q. 1772-39-319.

To Whom *Mrs Margaret J. Jekill* By Whom Assigned *Jekill H. E.*  
~~Address~~ *3104, Ontario Street* Regtl. No.  
~~Vancouver B.C.~~ Rank *Lieut*  
 Corps *"C Coy" 151st Batt.*  
 Rate *40.00*

AUG 1 1916

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				





1934

27

11

11

11

11



ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.

Mrs Margaret J Jekill  
PAYMENTS.

Name of Soldier

Jekill H E  
Lieut  
Clk 121 Bu

L. L. Job 310.—Req. 6574.

Month.	Year.	Cheque No.	Amt.	Remarks.
			40. <sup>00</sup>	AUG 1 1916
April	1916			
May				
June				
July				
Aug.		W15806	40	
Sept.		A. 17278	40	
Oct.		A 21850	40	
Nov.		S 26882	40	
Dec.		J 35744	40	
Jan.	1917	W33978	40	<del>Lieut Jekill H E</del>
Feb.		W 40976	40	
March		S 57528	40	40P.
April		N 2217	40	40. Ch
May		N 8863	40	
June		W16697	40	Mc
July		N 22889	40	B.
Aug.		W 31349	40	40
Sept.		L 37008	40	6
Oct.		W 44353	40	
Nov.		W 47938	40	
Dec.		A 46264	40	4180 Ontario St. Vancouver, B.C. 244-11 W.L.
Jan.	1918			650/W
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.				



1. 1. 16

## MILITIA AND DEFENCE

M. F. W. 11.  
20m.—11-15.  
H. Q. 1772-39-818.

## SEPARATION ALLOWANCE

Name Margaret J. Jekill.Name of Soldier Jekill, Henry E.Address ~~3104 Ontario St.~~

Regtl. No.

~~St. J. Vancouver, B.C.~~Rank Lieut.658 Kingsway, Vancouver, B.C.Corps 121<sup>st</sup> Bu

Relation to Soldier

To what Corps belonging

wife, child or mother

Widowed  
Mother.

when called out

4180 Ontario St.

## 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				

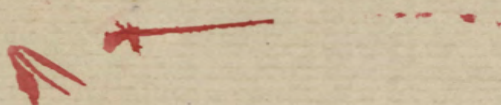


K28340 90 90



NO. 1 30

02 02 02



20

11



## SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

Name of Soldier

L. L. Job 89002.-Req. 6213.

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	A 2000	30	30
May		H 6657	30	30
June		R 7729	30	30
July		M 10167	30	30
Aug.		9 12867	30	30
Sept.		P 16607	30	30
Oct.		X 19182	30	30
Nov.		b 22905	30	30
Dec.		C 26428	30	30
Jan.	1917	H 28950	30	30
Feb.		H 32046	30	30
March		H 35181	30	30 <del>St. 2, 650 Kingsway, Vancouver B.C.</del>
April		J 1431	30	30
May		Q 4651	30	30
June		K 9070	30	30 K 4069 loan. C.L.
July		H 11056	30	30
Aug.		C 13981	30	30
Sept.	2257.	T 17785	30	30 4180 Ontario St.
Oct.		C. 21428	30	B
Nov.		H 24010	30	M
Dec.		M 27148	30	44970/W
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

Mrs Margaret J. Jekill

Jekill Henry E.  
Lieut.



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.				



*Estates Br. file 10-54 to Canada 27<sup>1</sup>/<sub>19</sub>*

*14<sup>12</sup>/<sub>18</sub> - VII - 3*

ASSIGNED PAY.

UNIT.

RANK.

NAME.

Beneficiary

Address

Amount. \$

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

NAME OF

DATE

AUTHORITY

*Men*  
DATE

AUTHORITY

Name

Initials

Bank of Montreal

*16 Res B=*

*May 2<sup>12</sup>  
7a 600  
June 1  
3.60*

*Lieut- 24<sup>8</sup>/<sub>16</sub> 7-Canada  
R.O#85.648  
(B's sh. H.)  
d 29<sup>8</sup>/<sub>16</sub>.*

*Canada*

*1 Res  
29 Br.*

*40*

*7.1<sup>8</sup>/<sub>16</sub>*

*Killed in Action 9<sup>8</sup>/<sub>18</sub> b. L. 1059 d/14<sup>8</sup>/<sub>18</sub>*

DATE

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED  
PAY PAID IN  
CANADA

BALANCE

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

INITIALS

*1918.*

*Apr 11*

*18*

*24*

*May 8*

*16*

*23*

*June 6*

*15*

*24*

*July 11*

*18*

*24*

*Aug 10*

*15*

*Nov 21*

*21*

*1919*

*May 21*

*A.P. Loan*

*April Pay (R)*

*Bank 1173*

*108*

*68*

*40*

*A.P. Loan*

*May Pay (R)*

*Bank 2623*

*111 60*

*71 60*

*40*

*A.P. Loan*

*June Pay (R)*

*Bank 4126*

*108*

*68*

*40*

*A.P. Loan*

*July R.*

*Bank 5607*

*111 60*

*71 60*

*40*

*A.P. Loan*

*Pay R.*

*111 60*

*40*

*Add Outfit Allow*

*100 -*

*Deductions fr. Add outfit Allow  
of 1/2 compensation for lost kit*

*17 94*

*153 66*

*Per Bal trans to Ctl List 42 May 10544*

*153 66*

*Pa'd to Cease  
Refer. to N.E. Ledger.  
No deposits  
Transferred 6/28/19 59/18*

*Statement of as rendered  
Fr 153.66.  
Put form to Accty 12/20/19*



ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF

DATE

AUTHORITY

DATE

AUTHORITY

Beneficiary

Address

Amount. \$

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

Name

Initials

Bank

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

Amount.

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

NAME OF

DATE

AUTHORITY

DATE

AUTHORITY

Name

Initials

Bank of

16<sup>th</sup> Reg Bn  
1st Reg Bn

For 20<sup>th</sup>  
F.A. 600, 700, 800  
Total 3<sup>60</sup> pd

Lieut

Mess  
24<sup>th</sup> 8/6

From Canada  
PO#85 Lt. D.  
(Bramshott.)  
d/29-8-16

JEKILL  
H.E.  
Bank of Montreal

Canada.

\$40<sup>00</sup> Fr. 1-8-16

DATE

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED  
PAY PAID IN  
CANADA

BALANCE

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

INITIALS

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
1916 April 18	A.P. Canada				40			
23	Pay April (R)		108					
25	Bank	3017		68				
May 16	A.P. Canada				40			
18	Pay May (R)		111 60					
24	Bank	6029		71 60				
June 18	A.P. Can.				40			
18	Pay June (R)		108					
20	Bank	9012		68				
July 17	A.P. Can.				40			
18	Pay July (R)		111 60					
25	Bank	13082		71 60				
Aug 16	A. Pay Can.				40			
20	Pay Aug (R)		111 60					
22	Bank	17394		71 60				
31	Rations 1-27 <sup>7</sup>	4320					E 1.16.0	
Sept 1	Adr. Sept Pr A. \$10-0-0	Direct Bank 17807		48 67		48 67		
12	A.P. Can.				40			
15	Pay Sept (R)		108					
22	Bank	21814		19 33				
Oct 3	Rations 11-30 <sup>7</sup>	5159					E 1.6.8	
9	A.P. Can.				40			
11	Pay Oct (R)		111 60					
20	Bank	26118		71 60				
Nov 14	A.P. Can.				40			
15	Pay Nov (R)		108					
22	Bank	30733		68				



ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF

DATE

AUTHORITY

DATE

AUTHORITY

Beneficiary

Address

Amount. \$ 40<sup>00</sup>

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

16 Reg. Bn.

Lieut

From Canada  
No. 55 C.T.D.  
Branchott  
d/29-8-16

Name Jekill  
Initials H. E.  
Bank of Montreal

Canada

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
------	-------------	---------	-----	-----	-----------------------------	---------	--	----------

1914 Dec 6	A.P. Loan Pay Dec (R)				40			
10			111 60					
13	Bank 35096			71 60				
1918 Jan 8	A.P. Loan Pay Jan (R)				40			
15			111 60					
22	Bank 39425			71 60	XX 60			
30	Sick leave 9-23 1/8	12993					£1-10-10 #7 50	
Feb 9	A.P. Loan Pay Feb (R)				40			
12			100 80					
15	Indem lost kit	11514					6-13-0 #32 36	
		11734					14/6 3 53	
16	Adv. Feb Ha £10-0-0 direct cash	40501		48 64				
19	Bank 40953			12 13				
21	Travelle 3 3/4	14396					15/- #3 65	
Mar 4	A.P. Loan Pay Mar (R)				40			
13			111 60					
14	Travelle 12-14 2/8	16075					1-10-0 #7 30	
22	Bank 42610			71 60				



ASSIGNED PAY.

UNIT.

RANK.

Treas. DATE

AUTHORITY

NAME.

Beneficiary

121<sup>st</sup> Bn.

Lieut.

24-8-16 From Canada

Name Jekill

Address Canada.

P.O.#85 C.T.D.

Initials H.E.

Amount. \$ 40<sup>00</sup> fr 1-8-16.

(Brampton)

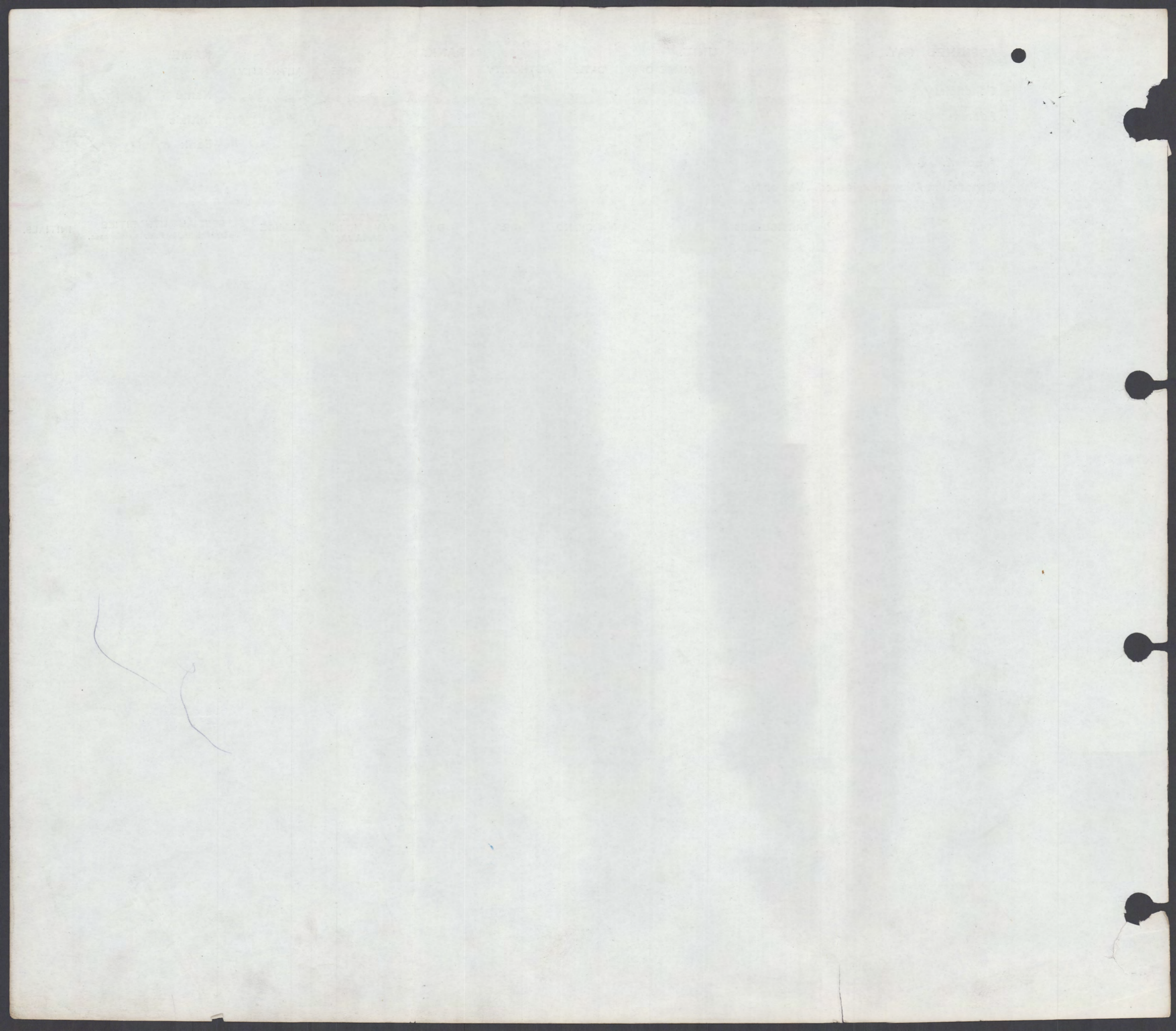
Bank of Montreal.

d/29-8-16.

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

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS.
1916								
Sep 2	Pr a 1-31/8/16. miss <sup>ap. #48</sup> 24/8/16. Bank.			48 60				
19	" " " " " 9.7925		88 60					
	Pay Sept. (R)		108					
23	A.P. Can. Aug Sept.			80				
26	Bank			68				
Oct 19	Pay Oct. (R)		111 60					
23	A.P. Can			40				
26	Bank			71 60				
Nov 22	A.P. Can			40				
24	Pay Nov (R)		108					
" 28	Bank			68				
Dec 11	A.P. Canada			40				
" 12	Pay Dec (R)		111 60					
" 15	Bank			71 60				
1917								
Jan 17	A.P. Can.			40				
22	Pay Jan. (R)		111 60					
23	Bank	19289		71 60				
Feb 17	A.P. Can.			40				
20	Pay Feb (R)		100 80					
24	Bank.	21932		60 80				
March 3	A.P. Can.			40				
20	Pay March (R)		111 60					
24	Bank.	24838		71 60				







**MEDICAL CASE SHEET.\***

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
T 357, loc 77DT Year 1914		Lieut.	FERKILL	HE
		Unit.	Age.	Service.
		47 Can Ball.	24	2 3/12 yrs
Station and Date.	Disease	Contusion Chest <u>IV</u> , 3		
P.M.P. 29. XI. 17.	Wounded at Ypres.	on 14. XI. 17.		
	Admitted 9. Can. F.A. same day thence to 3 <sup>rd</sup> Australian C.C.S.			
	Contusion of anterior chest wall, left, from a fragment of shell. Continued haemoptysis.			
	Admitted 24 General H. 16. XI. 17.			
	Had definite haemoptysis for several days after admission. Chest wall much bruised. No evidence of haemothorax. X-ray negative to any fracture of ribs or haematoma of the lung.			
30. XI. 17.	No abnormal signs or symptoms.			
1. XII. 17.	Doing well.			
<del>12. 12. 17</del>	Transferred from W.R. no abnormal signs.			
	R. Robertson Capt. R.A.M.C.			

\*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.



Station  
and Date.

4. 1. 18.

Does not complain of any definite symptoms except  
slight cough. General condition improved.

Board.

Recommended Convalescent Home.  
(Seaside).

W. J. Johnston  
Capt. U.S.A.



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

1-1-14

# Separation and Assigned Pay Branch

1335

Aug 1-16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

30.	Nil.		
-----	------	--	--

RATE OF ASSIGNMENT

40			
----	--	--	--

1320  
02

referred to  
P.A. B. 9.10.18

PARTICULARS OF SEPARATION ALLOWANCE

No. \_\_\_\_\_  
 Rank Lieut Promoted \_\_\_\_\_ Reverted \_\_\_\_\_ Discharge \_\_\_\_\_  
 Soldier's Name H. E. Jekill  
 Battalion 121st Batta  
 Beneficiary Mrs. Margaret J. Jekill  
 Relationship Widowed mother M.F.W. 2554-29-9-18  
 Address 4180 Ontario St. Vancouver B.C.

PARTICULARS OF ASSIGNMENT

Name Mrs Margaret J. Jekill *mother*  
 Address Suite #650 Kingsway Ave  
4180 Ontario St. Vancouver B.C. *Change of Address*  
 1  
 2  
 3  
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total
Dec 31/17		720	680	1400
Jan 1/18	67591	30	40	70
Feb	E 65708	30	40	70
March	2 98858	30	40	70
Apr	5 13240	30	40	70
May	F 9092	30	40	70
June	6 19142	30	40	70
July	R 28848		40	40
Aug	7 34529		40	40
		900	1000	1900
Nov.	M 5761	60		60
		960	1000	1960

9495-H-3 18/6/18  
 REMARKS  
 S.A. suspended 1/7/18 per folio 8 - closed from date suspended P.A.B. ruling folio #11. Cawel 2-8-18.  
 "Killed in Action" 9/8/18 per C.L. # 273-17/18.  
 Pensions notified 22/8/18 C.F.X. 22/8/18 etc.  
 a/c closed.  
 Total S.A. \$ 900.  
 .. A.P. \$ 1000.  
 \*Med 18-11-18.  
 \*S.A. for July & Aug. acc. 7314 Rev. 15-11-18.

Pension Granted. SEP. 1-18.  
 B.P.C. to Recover \$ .....  
 Clerk J.P.L. Date Oct 4-18.

M. F. W. 128  
400M. 6.17. 1772-38-114  
L. L. 22520-M. & D. 7483.

91.P. O.L.F. 2/8/18-22/18  
CONFIRMED  
J  
UNIT







Devonshire



George V

by the

Kingdom of Great Britain and Ireland, and of the  
the Seas, King Defender of the Faith, Emperor of India  
To Our Trusty and well beloved Henry Edgar Jehill  
We reposing especial Trust and Confidence in your Loyalty  
Presents Constitute and Appoint you to be an Officer in  
of Canada from the Seventeenth day of November  
You are therefore carefully and diligently to discharge your  
Lieutenant or in such higher Rank as we may  
to promote or appoint you to, of which a notification will be made  
you are to exercise and well discipline in Arms, both the infantry  
under you and use your best endeavours to keep them in good  
do hereby Command them to Obey you as their superior Officer  
Orders and Directions as from time to time you shall receive  
according to Law. In pursuance of the Trust hereby reposed

In Witness Whereof Our Governor General  
hath hereunto set his hand and Seal at Our Governor's Office  
this Second day of June. in the  
Nine Hundred and Sixteen  
Year of Our Reign.

To Henry Edgar Jehill  
Gentleman

By Command of His Excellency

1 11<sup>th</sup> Regiment (Irish Fusiliers of Canada)

Deputy





18625

**George V** by the Grace of God of the United Kingdom of Great Britain, Ireland and the British Dominions beyond the Seas, Emperor of India.

Our beloved Henry Edgar Jekill, Gentleman Greeting.  
In Confidence in your Loyalty, Courage and good Conduct, do by these presents appoint you to be an Officer in Our Active Militia of our Dominion of Canada  
the 12 day of November 1915

and diligently to discharge your Duty as such in the Rank of Second Lieutenant or such higher Rank as we may from time to time hereafter be pleased to appoint you to, of which a notification will be made in the Canada Gazette, and to observe the discipline in Arms, both the inferior Officers and Men serving under you, and to endeavour to keep them in good Order and Discipline. And we do hereby command you to Obey you as their superior Officer, and you to observe and follow such Orders and Instructions in time to time you shall receive from Us, or any your superior Officer, in full and perfect Obedience of the Trust hereby reposed in you.

In Witness Whereof Our Governor General of Our Dominion of Canada has caused these presents to be signed by him, and set his hand and Seal at Our Government House in the City of Ottawa the 12 day of June in the Year of Our Lord One Thousand Eight Hundred and Sixteen and in the Seventh Year of Our Reign.

By Command of His Excellency The Governor General,  
*John Dill*  
Surgeon-General.  
Deputy Minister of Militia and Defence.







