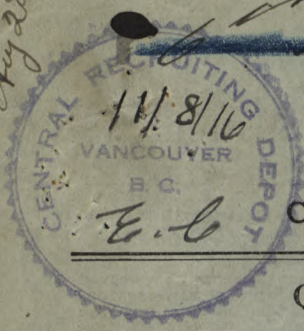


Report on or before Aug 28



ATTESTATION PAPER.

No. 2000

505847

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Original

QUESTIONS TO BE PUT BEFORE ATTESTATION. (ANSWERS.)

- 1. What is your surname? JOHNSTON
- 1a. What are your Christian names? Alie, Stanley
- 1b. What is your present address? Camburton P.O. Vancouver Is.
- 2. In what Town, Township or Parish, and in what Country were you born? Portsmouth, Hampshire England
- 3. What is the name of your next-of-kin? M. A. Johnston
- 4. What is the address of your next-of-kin? India, Lillingstone Rd, Portsmouth Hampshire
- 4a. What is the relationship of your next-of-kin? Mother
- 5. What is the date of your birth? Feb 27th 1878
- 6. What is your Trade or Calling? General Construction
- 7. Are you married? No
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes
- 9. Do you now belong to the Active Militia? No
- 10. Have you ever served in any Military Force? 5 1/2 year British South African police mounted corp
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement? Yes
- 12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Date Aug 11 1916. Al Johnston (Signature of Recruit)
E. Jackson (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Alie Stanley Johnston, 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 11 1916. Al Johnston (Signature of Recruit)
E. Jackson (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 Vancouver this eleventh day of Aug 1916.
W. Henshaw (Signature of Justice)

Stanley

Description of JOHNSTON, Alexander Enlistment.

Apparent Age 38 years 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 5 ft. 5 1/4 ins.

Chest-measure-ment { Girth when fully expanded..... 36 1/2 ins.
 Range of expansion..... 2 1/2 ins.

Complexion Light Grey

Eyes Grey

Hair Brownish Grey

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

Doc. - 3 R.
S. Tattoo - ship & 4 flaps on R. forearm and Star on L. upper arm and eagle wing & spear & "non-gram non paralis" on L. forearm.
Small mole back of neck

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 11th 191 6

Place..... Toronto

J. Buller Capt. Caunce
 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.

Alexander Stanley Johnston..... 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.

H. F. Dyke (Signature of Officer)
 Lieut. Col. MAJOR C. E.
 for C. 6th Field Company Canadian Engineers

Date..... Aug 11th 191 6

(a.o.d.)

REGIMENTAL DOCUMENTS

NAME Johnston Alexander Stanley REGT. NO. 505847 UNIT Cdn. Engs. H. Q. FILE NO. (H)

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

DEATH

Category

08653

DISCHARGE

Category

Demob

DESERTION

2 **S**
2 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)

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

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

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

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

DENTAL HISTORY SHEET (M.F.B. 465)

1 MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

MEDICAL EXAMINATION (M.F.W. 129)

1 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)

1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)

PARTICULARS OF CHARACTER (A.F.W. 3226)

1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

2 *Misc.*

1 *Whisp. cert.*

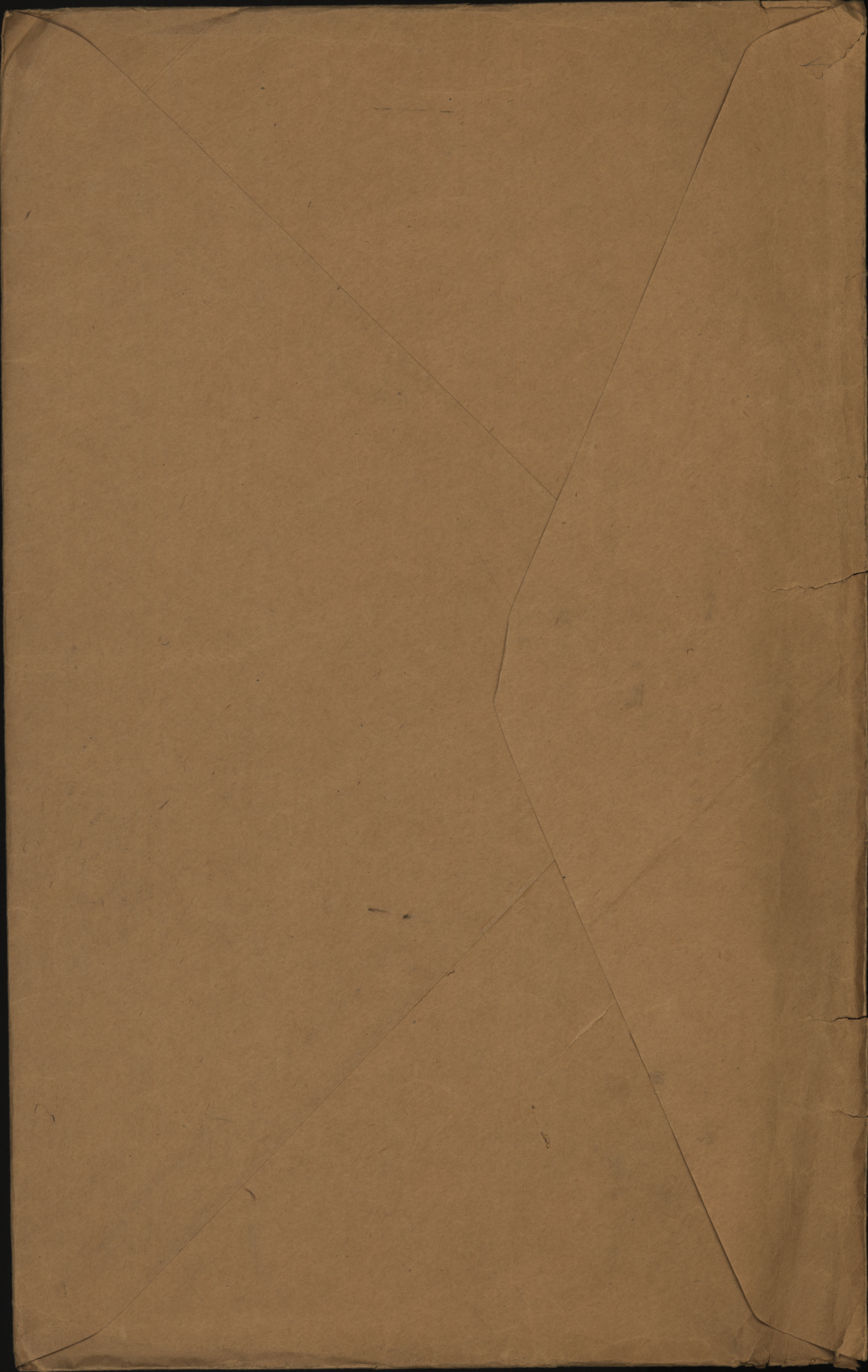
1 *M.F.W. 67.*

1 *C.A.D.C. 5009.*

1 *A.27*

M

H



mek
100
Number 505847 Rank A/sgt

Surname JOHNSTON

Christian Name Alex Stanley

Units C.E. Theatre of War France

Date of Service 23-6-18

Remarks

Latest Address GPO Cumberland
BC

Roll No. B. Page 18127

200m.-2-21.M.

DESP. MAR 17 1923
REG. N. 911
REG. N. 40391

No. 2000 RANK

Pte

NAME

Johnston A S

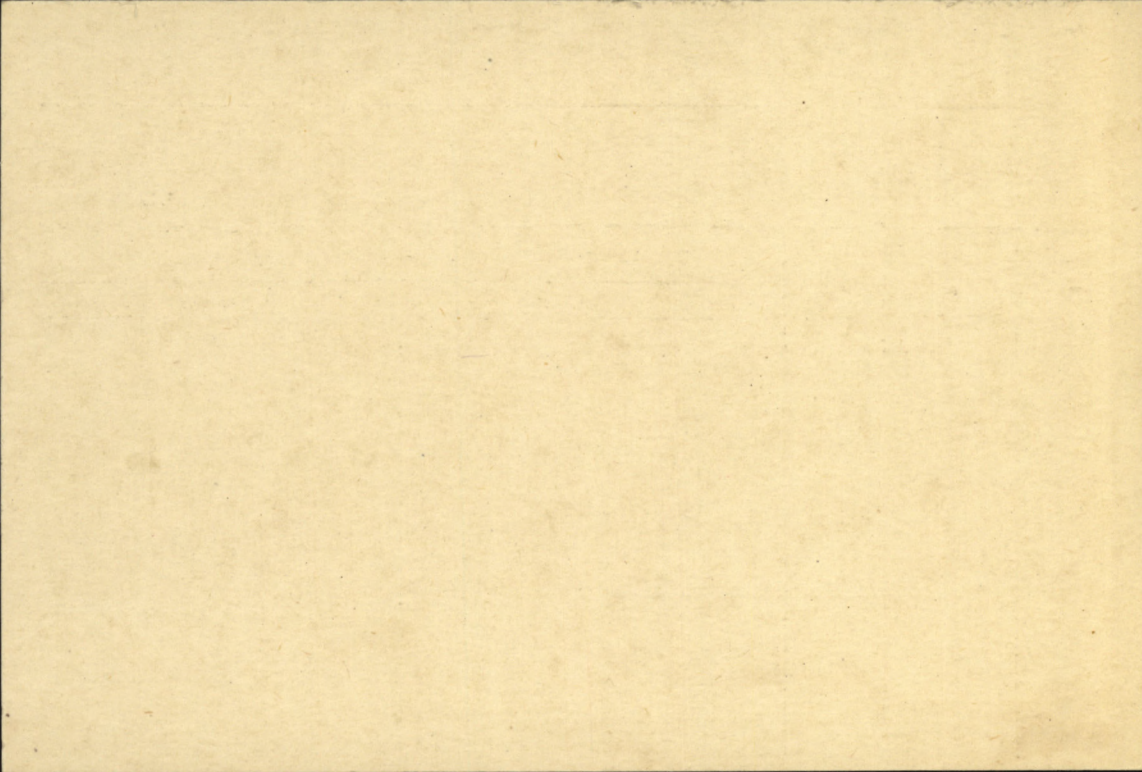
T. O. S. 21-8-16 UNIT

808931-8-16

6th Field Co Can Engineers

M. D. 11

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Aug 21	1916 Aug 25	✓	Transfd to C. & P. 25-8-16	809331-8-16



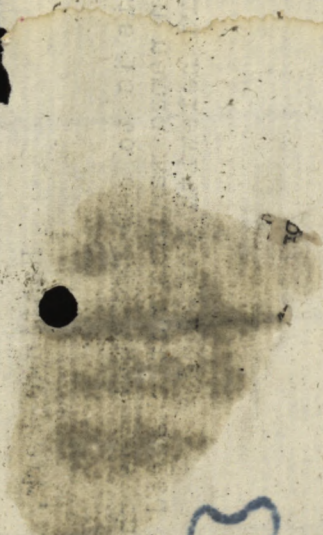
Hastings Park, Vancouver, B. C.

AUG 25 1919

This is to certify that the physical condition of the within named man has not changed since date of Overseas Board herewith attached.

E. J. Whitehouse

Capt., C. A. M. C.



COMMERCIAL

ESTABLISHED

1850

1850

Handwritten signature in blue ink, possibly reading 'J. S. ...'

EYE, EAR, NOSE, AND THROAT CLINIC.

WITNEY.....17-7...1916.

Reg. No. 505847 R.I.M. Spv NAME Johnston

UNIT.....RWing.....

WITHOUT GLASSES.

WITH GLASSES (AS PER PRESCRIPTION BELOW)

SPH.

CYL.

AZIS.

VISUAL ACUITY-- Right. 6/36 WITH.

6/9
6/9

VISUAL ACUITY--- Left. 6/36 WITH.

CATEGORY RECOMMENDED IS:- B1

GLASSES NOT ORDERED.

ORIGINAL DISEASE OR INJURY.

Myopia
adulscence

DATE OF ORIGIN.

PLACE OF ORIGIN.

CAUSE.

PRESENT DISABILITY.

Refractive Vision

RELAPSE.

CONDITION WAS..... PRESENT PREVIOUS TO ENLISTMENT AND WAS..... Not

BEEN CAUSED BY SERVICE HAS..... Not BEEN AGGRAVATED BY SERVICE.

FOR LONG BOARD.

FOR ~~SECRET~~ BOARD.

D. A. Masucci
CAPT. C. A. M. C.
Eye and Ear Specialist.,
Witley Camp. Surrey.,

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) JOHNSTON A.D.

REGIMENT 4 C.F. RANK 2nd Lt. No. 505847

Date of Examination in England 17-7-19 Date of Examination in France _____



DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated

PRESENT DENTAL REQUIREMENTS

1. FILLINGS

2. EXTRACTIONS 12 16 19

3. CROWNS

4. DENTURES

(a) Full Upper

(b) Part Upper 3 4 8 10 12 13 14 16

(c) Full Lower

(d) Part Lower

See
FOR A. D. D. S.. M. D. No. 11

HAS HE EVER REFUSED DENTAL TREATMENT? _____

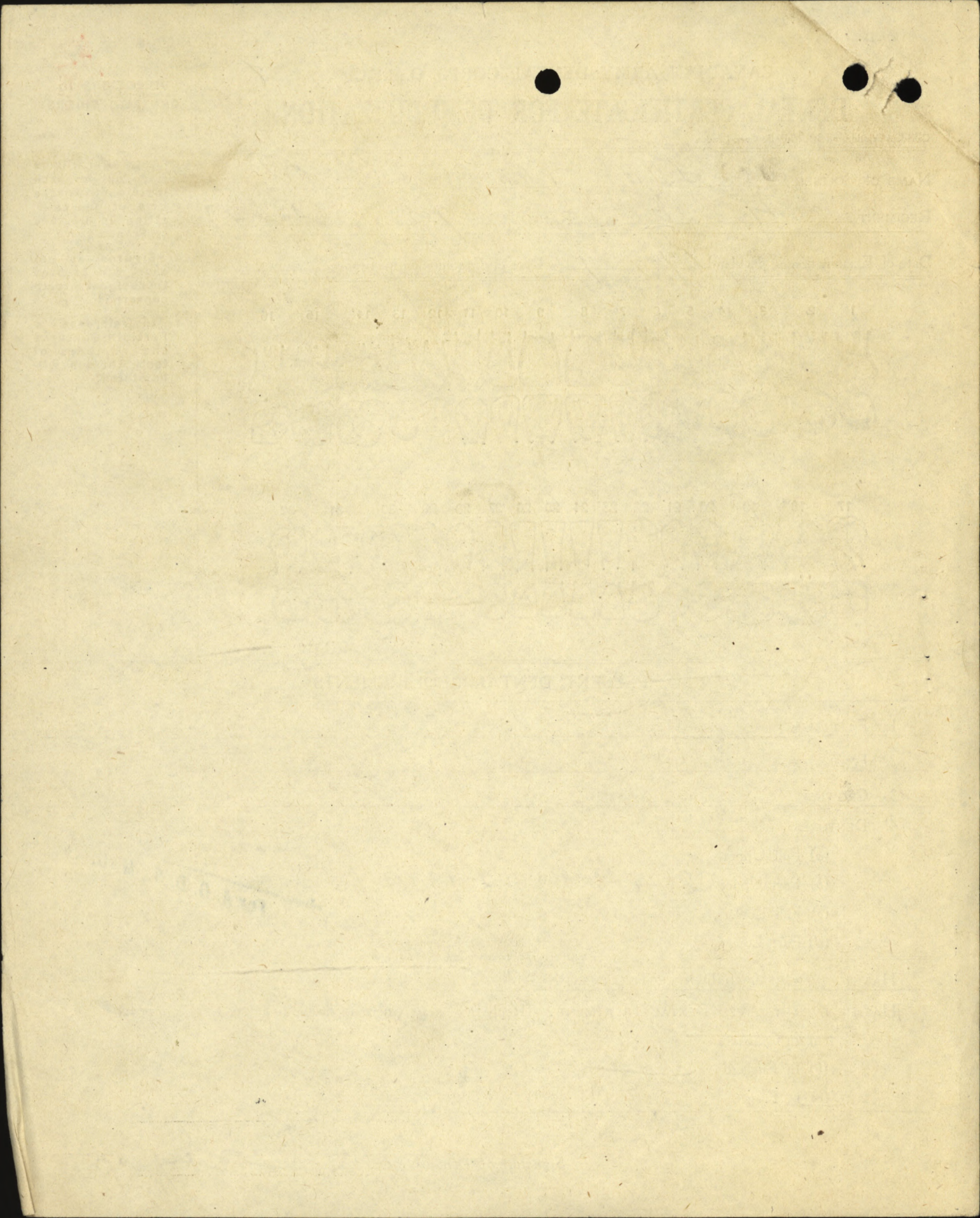
HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)

~~(a) In Canada~~

(b) In England _____

(c) In France _____

Signature of Dental Officer. A. Crosby



18

To be made out in duplicate.

Canadian Engineers

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..... Canadian Engineers

ENGINEER TRAINING DEPOT

(2) Regimental Number..... 505847

(3) Full Name of Soldier..... Johnston Alex Stanley

(4) Place of Birth..... Portsmouth England

(5) Are you married, or not?..... No

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

(b) Present Postal Address.....

(7) Are you a widower?.....

(8) Have you any children?.....

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

Also their names and ages.....

(9) Is your Father alive? no

If so, state name and address _____

(10) Is your Mother alive? yes

If so, state name and address Alexandra Tohuston

Indus Livingstone Rd Portsmouth England

(11) If your Mother is a widow yes

Are you her sole support, or not? no

(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.

(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.

If dead apply to Mrs Thomas King
"Sister" Indus Livingstone Road
Portsmouth England

(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.

(15) Are you insured? no

If so, in what Company? _____

Have you made arrangements for payment of your Insurance premium? _____

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Date 1/9/16

J. Corbett
Officer Commanding, Lieut. C. E.
Asst. Adjutant Engineer Training Depot.

CANADIAN EXPEDITIONARY FORCE

War Service Badge DISCHARGE CERTIFICATE

Class "A" No. 227473.

THIS IS TO CERTIFY that No. 505847. (Rank) Sapper.
Name (in full) Alexander J. Johnston. enlisted in
the Canadian Engineers.
CANADIAN EXPEDITIONARY FORCE at Vancouver. on the 11th
day of August. 1916.
HE served in 1st Div. Canadian Engineers in
France.
Demobilization.
and is now discharged from the service by reason of Medical Unfitness.

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

Age 40.
Height 5 ft. 5 1/4 in.
Complexion Light.
Eyes Grey.
Hair Grey.

Marks or Scars Tattoo ship
and 4 flags on right forearm.
Star on left upper arm
Small mole back of neck.
Tattoo spur & wings left forearm.

A. S. Johnston
Signature of Soldier.

H. M. Andrews
Issuing Officer.

Date of Discharge

25-8-19.

O.C. DISPERSAL STATION "T" Major

Rank

Date 25-Aug 1919.

N.B. - AS NO DUPLICATE OF THIS CERTIFICATE WILL BE ISSUED, ANY PERSON FINDING SAME IS REQUESTED TO FORWARD IT IN AN UNSTAMPED ENVELOPE TO THE SECRETARY, MILITIA COUNCIL OTTAWA, CANADA.

Var. Services Badge
Class No. 2222

THIS IS TO CERTIFY THAT
[Faint mirrored text, likely bleed-through from the reverse side of the page]

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

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

Casualty Form - Active Service.

Regiment or Corps 4th Bn Canadian Engrs

Rank Spr Surname Johnston Christian Name A. S.

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

Enlisted (a)..... Terms of Service (a)..... Service reckons from (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

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 ...		
			Disembarked ...		
<u>6.7.18.</u>	<u>4 Bn. C.E.</u>	<u>T.O.S. 4 Bn. C.E.</u> <u>Joined Unit</u>		<u>3.7.18.</u>	<u>Pf 0.5 of 19.7.18.</u>
<u>16.11.18</u>	<u>to</u>	<u>Returned from 2 Div R.E. Park</u>		<u>4.7.18</u>	<u>B213</u>
	<u>CC Emb</u> <u>Cam</u>	<u>ENGLAND GROUP 18</u>		<u>14.11.18</u>	<u>B213</u>
				<u>4 AUG 1918</u>	
		S.O.S. ON PROCEEDING TO CANADA.			
		PART II. "H" WING, C.C.O.		<u>17/5/19.</u>	
					<u>J. Hewell</u> <u>Canadian Signaller A. B. C. E.</u>

(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.
 W. 8635-M2733 2000m 9/17 (35611) C. P. & S., Ltd., Form B.103 E/1807. P.T.O.

505847 Johnston AS

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				
20-4-19	H. Wing CCC	T.O.S. FROM 4 TH BN.	WITLEY	15-4-19	DO. 29
24-5-19	" "	S.O.S. TO CANADA	" "	19-5-19	.. 46.
			CERTIFIED CORRECT.		
			<i>R. Williams</i>		
			LIEUT. FOR LT: COL: I/C RECORDS. C.C.O. M.F.		
5-7-19	R. Wing	TOS.	WITLEY.	5-7-19	DO 91
	" "	SOS. OMFC. TO CEF CANADA		8-8-19	
	Embarked Cassandra - 9 AUG 1919				
			<i>[Signature]</i>		
			OFFICER I/C RECORDS. R. WING C.C.O., WITLEY.		
			* T.O.S. No 11 D, D, 9. Aug 19		
			S, O, S. CEF 25 Aug-19-T Area		
			No 11 dd DO 239 Aug-27-19		
			<i>M. Andrews</i>		
			District Depot XI		

CAPTAIN & ADJUTANT,
No. 16 TRANS. ATLANTIC
CONDUCTING STAFF,
C.E.F.

W.S.B. Glass H.

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

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

250M.—1-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

ENGINEER TRAINING DEPOT

Unit, Regiment or Corps

Regimental No. 505847

Rank Sapper

Name

Johnston Alex Stanley

Enlisted (a) 11/8/16

Terms of Service (a) Def. War

Service reckoned from (a) August 11th 1916

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) General Construction

Report Date	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	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
			<u>Embarked Canada</u>	<u>11 NOV. 1916</u>	
			<u>Disembarked England as a Sapper.</u>	<u>11 NOV. 1916</u>	
<u>13 NOV. 1916</u>	<u>C.E.T.D. Canada</u>	<u>Taken on strength of C.E.T.D. Canada</u>	<u>CROWBOROUGH</u>	<u>12 NOV. 1916</u>	<u>Part II Order No. 268</u>
<u>27 FEB. 17</u>	<u>C.E.T.D.</u>	<u>On Command Huntingdon</u>	<u>Crowbars</u>	<u>24-2-17</u>	<u>Part II Ord # 50</u>
<u>18.6.17</u>	<u>C.E.T.D.</u>	<u>To be a/Cpl without pay while doing duty at Huntingdon</u>	<u>Crowbars</u>	<u>18.6.17</u>	<u>Part II Order No 144</u>
<u>28.8.17</u>	<u>C.E.T.D.</u>	<u>To be a/Serjt while engaged on Act. od some Construction</u>	<u>Shoreham</u>	<u>27.8.17</u>	<u>Part II Ord. # 200</u>
<u>26 JAN 1918</u>	<u>O.E.T.D.</u>	<u>Granted Pay for Rank. (Auth B 6/2-154 of 19/1/18.)</u>	<u>Seaford</u>	<u>1/12/17</u>	<u>Auth. A.G. 3. B 2-1-54 on file B. 67 Vol 14</u> <u>Part II Order No. 22</u>
<u>27.5.18</u>	<u>2CEP/B</u>	<u>Off Command Huntingdon</u>	<u>Seaford</u>	<u>27.5.18</u>	<u>Part II Ord 5</u>

(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.]

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				
16 24/5/18	Le C.R.B.	Posted to 2 C.C.R.B. from 6 C.R.B.	Seaford	21/5/18	Part II Ord. 117 ✓
21/5/18	2 C.C.R.B.	2 C.C.R.B. from 6 C.R.B.	Seaford	21/5/18	Part II Ord. 1 ✓
June 20/18	2 C.C.R.B.	Reverts to rank of Sapper for purpose of procedure	Seaford	21/6/18	Part II Ord. No 26 ✓
June 24/18	2 C.C.R.B.	S.O.S. of 2nd Lt C.R.B. to 6th Pool France	Seaford	23/6/18	Part II Ord. No 29 Lieut. O.E. Adjutant, 2 C.C.R.B.
29-1-18	W.O. Letter	Rept. for duty with D.F.W. (Aviation) W.O. 26-2-17 empl. as stockkeeper at Wytton, Woodrome Huntingdonshire from 26-2-17 to 9-4-17 Transf. to Bury Aerodrome Hunt. as stockkeeper from 10-4-17 prom to A/Sgt. with pay from 1-12-17 for good work (vide W.O. letter 59/7166 D.F.W. (Aviation) dt/28-12-17 & 12-1-18 & A.G. Can. 2-1-54 dt/10-1-18)			Auth. W.O. letter dt/29/18 on file B.L. 28-28. VI-V-US P. LIEUT. FOR LT: COL: I/G RECORDS, C.O.M.F.
24.6.18	CGBD	Arrived in France & TOS CER Pool as Reinforcement		24.6.18	NR696 P.74

CERTIFIED CORRECT.
8 - JUL 1918
CAN. RECORDS, LONDON.

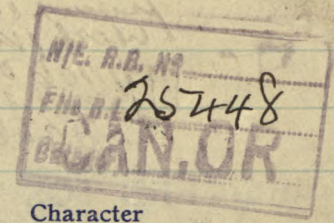
2 JUL 1918 66RC

2 JUL 1918 8/75

FH Rank Name JOHNSTON, Alec Stanley Reg'l No. 505847
 Unit Dft. 19 C E.T.D. If in perm. Corps, Married or Single **Single**
 What Unit ?
 Place and Date of Enlistment **Vancouver, 11. Aug. 1916.** Place of Birth **Portsmouth, Hampshire, England.**
 Name and Address, Next-of-Kin **M.A. Johnston.**
 'Indus' Livingston Rd. Portsmouth, Hamps. Eng. Relationship **Mother.**
 Assigned Pay Monthly \$ Payable to

*11 Bn 66
Pending*

Separation Allowance \$ Payable to Relationship
 Discharge, Date and Place Reason Character



ENGINEER S

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.				
		With actg Rank of Lt 1st Lt.			
		Arriv. in England, S.S. Caronia		11.11.16	R
13.11.16	C.E.T.D.	T.O.S.	Crowbars	12.11.16	PT II D.O. 268.
27-2-17	"	"On Command" Wylton Hill, Hunton	Crowbar	24-2-17	PT II 50
18.6.17	"	To be Lt unpaid	"	17.6.17	" 144
28.8.17	"	To be Lt without pay	Shoreham	27.8.17	" 200
19.1.18	Major D.A.G. for Brigadier AG bdu	appt a/sqt with pay	London	1.12.17	auth AG 3 B2-1-54 on file RE-67
26.1.18	C E T D	" " " "	Seaford	" "	Jul 14 PT II 022
29.1.18	War office letter	Reptd for duty with DFW (aviation) W. O 26.2.17 Empl. as Storekeeper at Wylton aerodrome Huntingdonshire from 26.2.17 to 9.9.17 Jfr to Bury aerodrome, Huntingdonshire (over)			

505847 Johnston A.S.

Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
29.1.18	War office	as storekeeper from 10.9.17 prom to A/Sgt with pay from 1.12.17 for good work vide HQ letter 59/7166 DFW (Aircraft) d/28.12.17 and 12.1.18 and A.G. Com 2-154/10.1.18			auth. War office letter of 29.1.18 on file P.L. 28-28
21.5.18	IInd. CERB	TOS from CETD Seaford	21-5-18	DO, 1	CETD, DO
20.6.18	---	<u>Reverts to Spr to Proc O/S</u>	---	A/Sgt	21.6.18 P.I. 26
24.6.18	IInd. CERB	S.O.S to CERPool	Seaford.	23-6-18	DO-xxlX of 6.8.18 74/P.15 7/18
28-7-18	4th. Bn. CE	T.O.S. from CERPOOL	Field	3.7.18	DO-5 CERP, DO, 75.18/7.18
20.4.19	H Wing	TOS from 4th Bn	Witley	15.4.19	DO 29
24-5-19	H Wing	SCS TO CANADA	Witley	19.5.19	DO 46.
19.7.19	H Wing	Sgt. J.L. Aust. F.O.S. find at Pan Witley D 35-4-19 Canada 9-8-19	Witley	7.7.19	DO 55
18-8-19	R Wing	S.O.S to Canada	Witley	9-8-19	DO 111

CHECKED
 1918
 411-1018

ORIGINAL

Alexander Stanley

MEDICAL HISTORY SHEET

Surname **JOHNSTON** Christian Name **Alex Stanley** 505847

Examined on 11th day of August 1916
at Vancouver

Approved by J. Buller Rank Captain M.O.

Birthplace { City or Town Louthree, Portsmouth
County Hampshire Eng

Apparent age 38

Trade or occupation Prov. Police

Height 5 feet 5 1/4 Inches

Weight 145 lbs.

Chest measurement { Minimum 34 inches
Maximum expansion 2 1/2 inches

Physical development Good

Small-pox Marks

Vaccination Marks { Arm Right Left
Number 3 —

When Vaccinated last Childhood

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Vis 20 each eye
20 with glasses Particular good vision
and accustomed to outdoor life
Tab 13.6.18 H. 20

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

Date	Result	VACCINATIONS
21.10.16		<u>W. H. Buller ext...</u>
		M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
23.9.16		<u>W. H. Buller ext...</u>
21.10.16		<u>W. H. Buller ext...</u>
14-11-16		<u>ERS</u>
21-11-16		
13.6.18		
		M.O.
		M.O.

Enlisted on 11th day of August 1916 at Vancouver BC

	CORPS	REG'L NUMBER	HABITS	DATE
Joined on enlistment	<u>6th Field Co</u> <u>C. E.</u>	<u>2000</u> <u>505847</u>		<u>21/8/16</u>
Transferred to	<u>Canadian Engineers</u> <u>ENGINEERS POOL</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT
<u>Witley</u> <u>WITLEY CAMP, SURREY.</u> <u>26.7 1919</u>	<u>23/4/19</u>	<u>Def Vision</u>	<u>BT Horellman to LPH</u> <u>to BT Jonesman to LPH</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.

505847 Spr Johnstone Asst Stanley 1755
7/27

DATE	PAY			FIELD ALLOWANCE			WORKING OR SPECIAL PAY			ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS									
	NO. OF DAYS	AMOUNT		NO. OF DAYS	AMOUNT		NO. OF DAYS	AMOUNT					1	2	3	4	1	2	3	4				CREDIT	DEBIT												
		RATE	\$		C.	RATE		\$	C.																				RATE	\$	C.						

MONTH PARTICULARS CR.1 CR.2 PARTICULARS DR.1 DR.2 DR.3 DR.4 BALANCE

PER SEP. RED. ALLGE. PAY ENG.

~~192 09 166~~

Oct P.P. 34 10 226 19 181

Nov Dec - 64 10 1392. 8 1/2 GST. 48 67 244 62

67 10

911

Jan 1918. Pay of Rank 12 40

46 50 303 52 236

58 90

Feb 42 00 345 52

42 00 46 50

PL 164-1-4c. Cf M. 26117.267 21 90 392 02

3259 Jan 18. 17 03 55 90

3359 Dec 17. 17 03 536 00

46 50 336 06 255

46 50 58 96

* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.
EFFECTIVE DATE:-		EFFECTIVE DATE:-	
AMOUNT:-		AMOUNT:-	

NAME:- **JOHNSTON. A.B.**

NUMBER:- **505847**

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
While emp. by Air Ministry O.C. Letter Pay 7/11	1-12-17	Sgt.
Air Min. order letter 17/5/18 Sg. 7/16-10 B.A.M.	25/1/18	Spr. reverts on return to C.B.J.D.
20-6-18 Pt II 26 2 nd C.E.R.B.	21-6-18	Spr.

UNIT AND TRANSFERS

ORIGINAL UNIT:- **C.B.J.D.**

DATE ACCOUNT FIRST OPENED:- **1/12**

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S F O	UNIT TRANSFERRED TO
-----------	----------------	---------------------------	---------------------

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
14/19 25		* Can Eng Pay	3 65				
28-22/23		H.C.C.	29 33				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 35	15		
	1 00	10		

PARTICULARS OF RENDERING NON-EFFECTIVE:-

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
Mar 31	Bgd								336 06	253	
Apr 1/30	Sgt's P.	45		A.F.O 1823 2/3/18 RE. Ramey Hants	17 03				364 09	270	
May 31	" " 1-24 5/1918 @ 1 st 26 ⁰⁰	45		✓ May/18 ✓	14 03						
	Spr " 28-31 7/1918 @ 1 st 17 ⁰⁰	43 70		w/r 1147 25/2 2 nd C.E.R.B.	9 13				380 97	285	
June	Spr Pay	43 70			26 76					300	
July		33 -		w/r 20. 3/6 2 nd C.E.R.B.	19 47				394 50		
		33 -			19 47						
Aug		34 10		w/r 365 24/7 H nd "	3 57				420 57		
		34 10		w/r 185 11/7 "	4 46						
Aug	Spr Pay	34 10			8 03						
Sep		34 10		w/r 490 - H.C.E.B. 14 ⁸ /18	3 57				451 10		
		33			3 57				33		
		33		536.9 9/18 4 C.B.	7 14				484 10		
		33		221. 28 9/18 5 C.B.	3 57				10 71		
Oct		34 10			7 14				473 39		
		34 10		918. 29 7/8 4 C.B.	3 73						
Nov		67 10			3 73				503 76		
Dec		34 10		600 26 4/8 5 C.B.	13 06						
Jan		10 120							591 90		
Feb		30 80		1251. 7 1/2 4 C.B.	3 77						
				1051 15 12/8 "	6 49						
				1140 27 7/8 "	1 30						
				1355 21 7/8 "	3 77						
Mar		34 10		1451. 9 7/8 "	3 73						
				1586 23 2/19 "	3 73						
				1414 11 3/19 "	3 65						
				6400	26 44						

Records
Pro + appo

Canada 3/29
hedger cred Bal \$ 688 1/4
h.c. credit Bal \$ 587 7/8

Compiled by Dawley Barber
Checked by A.B. Johnston

NUMBER

RANK

NAME

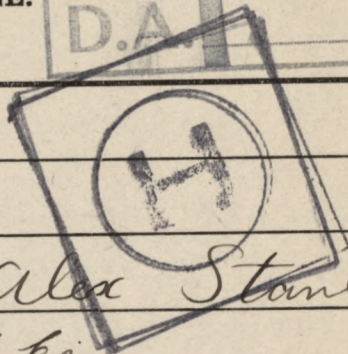
MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
		6490			2644				59190		
				2029. 21.3/19. H CE	365				62671		
		6490			30.00						
Apr		33		25. 7 th /19	3.65					450.00	
	Interest on Deferred pay.	20.06		2293. 29 th /19 N.Wing. W.	97.33				54779		
		2.06			100.06						
				103143 Bal. 6/26/18 3	973				57806		
				AT 2. 33.59 7/5/19 200 21.00 7/1/19 awarded	973						
				25 days 9/1/19 17/4/19 100000	973						
				9/1/19 2 11/7/19 = 96 days							
				20205 CEED 6/1/19							
					10560				44246		
					10560						

Class "A" Badge No. 227473 Issued

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)

O.G. 1
S.G. 26
D.A.T.

6-3-39



1. No. 505847

2. Rank Sp4

3. Name JOHNSTON Alex Stanley

4. Unit 4th Bn 6 Co

5. Date of Discharge 25/8/19 Place Vancouver B.C.

6. Reason for Discharge DEMOBILIZATION

7. Authority No 11 dd DO 239 Aug-27-19 11.8.16

8. Proposed Residence after Discharge G.P.O. Cumberland B.C.

C.B.



9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate M. F. W. ?

A.S. Johnston
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place _____

Date _____

Released 11-Dec-1938
649-J-13888

Disposal Station
AUG 25 1919
Military District No. 11

MEDICAL DOCUMENTS
FORWARDED TO
S.G.R. OR B.P.C.
ON 28-8-19

Signature H.A. Andrews.
(O.C. Discharging Unit.)

PROCEEDINGS ON DISCHARGE
(Mobilization)

001
26



1. No. 202747
 2. Rank 2nd Lt.
 3. Name JOHN W. STANLEY
 4. Unit 1st Lt. 1st Regt. 1st Div. 1st Army
 5. Date of Discharge 10/10/45
 6. Reason for Discharge



7. Address
 8. Proposed Residence after Discharge
 9. Signature of Soldier

CERTIFICATE TO BE SIGNED BY SOLDIER

I hereby acknowledge that at the indicated place and date I received my discharge Cer-

tificate M. F. W. 1

Signature of Soldier

CONFIRMATION

The discharge of the above named man is hereby confirmed.

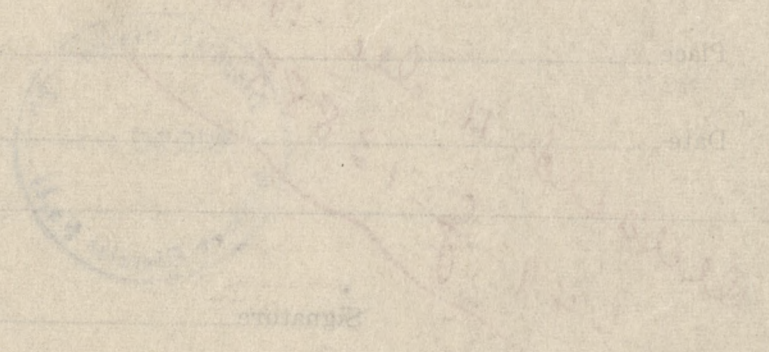
Place

Date

Signature

(O.C. Discharge Table)

Handwritten notes and stamps in the bottom left corner, including a date '10-28-45' and a signature.



LIST OF DISCHARGE DOCUMENTS

Medical Form W-132	Statement Paper, Discharge
Medical Form W-132	of Particulars of Record
Medical Form W-132 or A.F.R. 118	Final Conduct Sheet
Medical Form W-34 or A.F.R. 108	Summary Form
Medical Form W-44	Last Pay Certificate
	Certificates that missing documents are unobtainable
Medical Form B-316 or A.F.R. 118	Medical History Sheet
Medical Form B-316 or A.F.R. 118	Proceedings of Medical Board
Medical Form B-462	Dental History Sheet
Medical Form W-139 or D.M.S. 137B	Medical Report
Medical Form B-362	Residential Conduct Sheet
Medical Form B-287a	Company Conduct Sheet



LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate.....	Militia Form W. 23
or Particulars of Recruit.....	Militia Form W. 133
Field Conduct Sheet.....	Militia Form W. 178 or A.F.B. 122
Casualty Form.....	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate.....	Militia Form W. 44
Certificate that missing documents are unobtainable.....	
Medical History Sheet.....	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board.....	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet.....	Militia Form B. 465
Medical Report.....	M.F.W. 129 or D.M.S. 1375
Regimental Conduct Sheet.....	Militia Form B. 263
Company Conduct Sheet.....	Militia Form B. 263a

1. Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122).
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
(Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment (Statement Q.M.G. Form (D.O.S. 2), and Clothing)
12. Last Pay Certificate (P. 851)
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Smiddy documents.

Group B
 Checked by No. 10
 Date 8-8-19

THIS FORM WILL BE USED FOR ALL RANKS
MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

MAS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Witley Camp. DATE 26-7-19.

1. 1 (a) Unit "T" Dispersal (b) Regimental No. 505847 (c) Rank Spr.

(d) Surname JOHNSTON (e) Christian name Alex Stanley.

(f) Home address Cumberland, Vancouver Island, B.C.

(g) Next of Kin Mrs. M.A. Johnston. (h) Relationship Mother

(i) Address of Next of Kin Indus. Livingston Rd. Porthsmouth, Eng.

2. Age last birthday 41 Date of birth 27-2-1878.

3. Enlistment, or Appointment (if an Officer) (a) Place Vancouver, B.C. (b) Date 11-8-16.

4. Personal description:

(a) Height 5' 5 $\frac{3}{4}$ " (b) Weight 140 Est (c) Complexion Fair
(stripped)

(d) Colour of hair Brown (e) Colour of eyes Blue (f) Identification marks, Scars, etc.

tattoo both forearms & lt arm.

5. Former trade or occupation Engineer.

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	2	349

	PERIODS	
	From	To
Canada	11-8-16	1-11-16.
England	1-11-16	3-6-18.
France or other theatres of War	3-6-18.	14-4-19.

7. Original disease, or injury Myopia

(a) Date of origin Adolescence (b) Place of origin England

(c) Cause Congenital.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

(Defective Vision) Parti al

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Objective:- Gen'l condition good.

Eye Report- Witley- 17-7-19.

R.V. 6/36 6/9

L.V. 6/36 6/9 Bi

Myopia

Sgd. F.A. MacNeil. Cat. CAMO

Subjective:- Defective Vision.

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above? (Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System.....	No	Cardio-Vascular System.....	No	Genito-Urinary System.....	No
		(If pulse rate is abnormal, B. P. will be taken.)		(Albumen and Sugar will be excluded.)	
Special Senses.....	No	Respiratory System.....	No	Integumentary System.....	No
Disturbances of Mentality.....	No	Digestive System.....	No	Muscular System.....	No
Osseous and Joint Systems.....	No	Any other general condition.....	No		

10. (a) History (of the condition referred to in Section 9 (a).)

Vision has been defective since childhood.

Does not know cause.

MHS - 20/80 each eye - with Glasses 20/20

10—(b) (If or give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (a).)

Malaria 1901- Recovery.

(c) (Here give a description of wounds, scar, and deformities.

4 (f)

11.—(a) Did the disabling condition have its origin before enlistment? Yes

(b) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

No

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? (a) no (b) no

The regimental documents will be referred to.

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

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? Permanent

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

Nil

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? (If the answer is "yes" state nature of treatment required and probable duration)

No

16. Can the former trade or occupation be resumed? Yes (If not, briefly state why)

17. Recommendations

S.J. Staples. Capt. CAMC.

Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned, A. S. Johnston, have heard the description of my disability and present condition read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.)

I complain in addition of

JHM

A. S. Johnston. Capt. Spr. Rank. Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

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

Yes- we concur.

19. Is the invalid fit for

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

20. It is certified that the invalid

(a) ~~Does require treatment.~~ (Give the nature of the condition and of the treatment required and its probable duration.)

- (b) Does not require treatment.
 (c) ~~Should pass under his own control.~~
 (d) ~~Should not pass under his own control.~~
 (Strike out condition not applicable.)

21. It is recommended that the invalid be ~~discharged.~~ (When not for discharge add special recommendation.)
 R.T.C. Auth. A. G. Telg. 9083 of 11-11-18.

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

P.J.O'Dwyer. Capt. CAMC. President.

PLACE.....Witley Camp, Surrey.

DATE.....26-7-19.

J.H. Macdonald. Capt. CAMC Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

President.

PLACE.....

DATE.....

Members

APPROVED BY

APPROVED BY

J.T. Wright. Capt. CAMC.

for Assistant Director of Medical Services.

Director-General of Medical Services.

DATE.....26-7-19.

CERTIFIED TRUE COPY

A.D.M.S. HEADQUARTERS
 CANADIAN CO. DATE CAMP

27 JUL 1919

Handwritten signature

WITLEY SECTION.

Cassandra 21g. 8. 19

AUDITOR *Rm* PAYMASTER *AS*

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

REGT. No. *50584* RANK *SPR* NAME (IN FULL) *JOHNSTON. A.S.*

M. OR S.	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?	(BLOCK LETTERS SURNAME FIRST)
NEXT OF KIN		<i>English L.P.C. adjusted to</i>	<i>30.4.19</i>				
ADDRESS					PLACE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
					DATE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				ASSIGNED PAY \$	DATE EFFECTIVE	
<i>No.</i>					<i>Nil</i>		
TO WHOM PAID	RELATIONSHIP				PAYABLE TO	RELATIONSHIP	ANY CHANGE IN ASSIGNEE OR ADDRESS
						<i>Alex Stanley Johnston</i>	
ADDRESS					ADDRESS	<i>Royal Bank of Canada</i>	
						<i>Cumberland. V.I. B.C.</i>	
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE	
					DISCHARGED	PLACE DATE	REASON AUTHORITY IF ENTITLED TO POST DISCHARGE PAY
						<i>M.D. No XI 25.8.19</i>	

MONTH	PAY AND F.A.		OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGIMENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS
	NO. OF DAYS	RATE			AMOUNT	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2					COL. NO. 3	DEBIT	
<i>30.4.19</i>	<i>110</i>			<i>587.79</i>													
<i>12.5.19</i>	<i>122</i>	<i>110</i>	<i>734.20</i>	<i>35</i>	<i>169.20</i>			<i>R Wing Boat Train</i>	<i>9.79</i>	<i>4.84</i>	<i>5-</i>		<i>19.60</i>			<i>587.79</i>	<i>25th other ex. clothing</i>
								<i>cheque</i>	<i>807.39</i>				<i>807.39</i>	<i>70-</i>		<i>737.39</i>	
												<i>5.50</i>	<i>5.50</i>	<i>75.50</i>		<i>755.89</i>	<i>5th other chg over paid 5 days</i>
War Service Gratuity																	
Service 3 years months																	
								<i>Aug 19</i>	<i>1590.43</i>				<i>64.50</i>			<i>755.89</i>	
								<i>Oct 18</i>	<i>1580.26</i>				<i>70.</i>	<i>3</i>		<i>645.39</i>	
								<i>Nov 25</i>	<i>1589.32</i>				<i>70.</i>	<i>4</i>		<i>645.39</i>	
								<i>Dec 25</i>	<i>1604.73</i>				<i>70.</i>	<i>5</i>		<i>70.</i>	
								<i>Jan 25</i>	<i>1607.87</i>				<i>70.</i>	<i>4</i>		<i>70.</i>	
																<i>420.00</i>	

Certified that all payments have been made on this account for which cover BALANCE FROM PREVIOUS ACCOUNT
 has been received to date.
Paymaster, Demobilization M.D. No. 51

I certify that all payments of War Service Gratuity have been made according to the period of the M.F.W. 2595 received.
Officer in Charge War Service Gratuity M.D. No. 11

