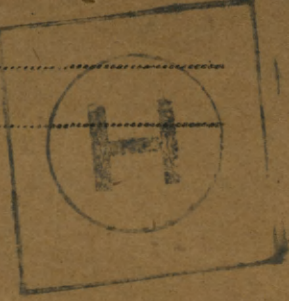


87M
20-12-18

Officers
DISCHARGE DOCUMENTS

R. O. No.

H. Q. No.



- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers..... 1
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet
- Compulsory Stoppages.....
- Casualty Forms..... 1
- Proceedings on discharge.....
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- Parchment Certificate.....
- Medical Report for Invalids.....
- Medical History Sheet..... 2
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet.....
- Clothing Transfer Certificate.....
- Inventory of Kit.....
- Last Pay Certificate.....

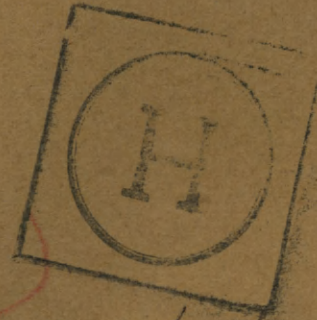
Name **PAULIN ARTHUR HILTON**

Regt. No. _____ Rank *Capt*

Corps *3rd Res Bn. (133rd Bn.)*

Died 13-3-17.

8221



1-25
1-25

AO-296-7661

1 case card
1911/20
copy will
papers

To be made out in duplicate.

H.Q. 54-21-23-53

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

INSTRUCTIONS.

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

(1) Name of Overseas Unit which Soldier joins..... 133rd O.S. Bn. C.E.F.

(2) Regimental Number

(3) Full Name of Soldier..... PAULIN, Arthur Hilton,

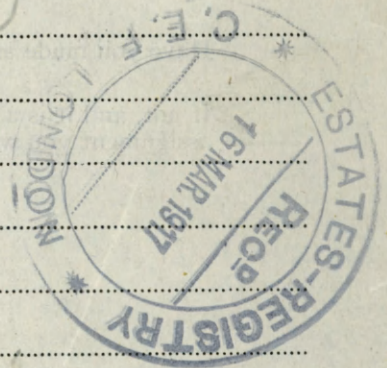
(4) Place of Birth..... Wroxeter, Ontario.

(5) Are you married, or not?..... Married.

(6) If married, state,
 (a) Full name of your wife..... PAULIN, Minnie.
 (b) Present Postal Address..... Simcoe Ontario.

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

(8) Have you any children?..... Yes.
 If so, give number of boys and girls..... 1 Boy.
 Also their names and ages..... Paulin, Arthur Osborne. 11 Years.



(9) Is your Father alive? Yes.

If so, state name and address Paulin, William. Holland, Man Man.

(10) Is your Mother alive? Yes.

If so, state name and address Paulin, Elizabeth. Holland Man.

(11) If your Mother is a widow No.

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.

(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.

Yes.

(15) Are you insured? Yes.

If so, in what Company? TRavellers, & New York Mutual.

Have you made arrangements for payment of your Insurance premium? Yes.

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

A. C. Pratt

*Lieut. Col.
Commanding 133rd, Co. Texas Bn. U. S. F.*

Officer Commanding.

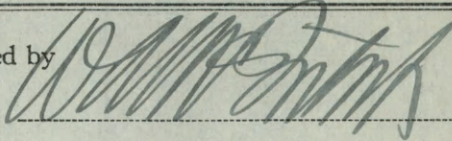
Date 2nd Oct. 1916.

Capt

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Paulin Christian Name Arthur Hilton

Examined { on <u>20th</u> day of <u>Jan.</u> 191 <u>5</u> at <u>Simcoe, Ont.</u>	Approved by 	
Birthplace { City or Town <u>Wroxeter</u> County <u>Huron</u>	Rank <u>Major</u> M.O.	
Apparent age <u>36</u>	Date.	Fit or Unit.
Trade or occupation <u>Merchant</u>	EXAMINED FOR RE-ENGAGEMENT.	
Height <u>5</u> Feet <u>7 1/2</u> Inches.		M.O.
Weight <u>165</u> Lbs.		M.O.
Chest measurement { Minimum <u>35</u> inches. Maximum expansion <u>39</u> inches.		M.O.
		M.O.
Physical development <u>Good</u>		M.O.
Small-Pox Marks <u>None</u>		M.O.
Vaccination Marks { Arm Right Left. Number <u>1</u>	Date.	Result.
	VACCINATIONS.	
When Vaccinated last <u>about eleven yrs. ago.</u>		M.O.
(a) Marks indicating congenital peculiarities or previous disease <u>None except scar on inner side of Left foot.</u>		M.O.
(b) Slight defects but not sufficient to cause rejection	Date.	Result.
<u>None</u>	ANTI-TYPHOID INOCULATIONS, ETC.	
		M.O.
		M.O.
		M.O.

Enlisted on 20th day of December 1915 at Simcoe, Ont.

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>133 rd. O.S. Bn.</u>			
Transferred to	<u>Attd. Simcoe B.</u>			<u>4.1.17</u>

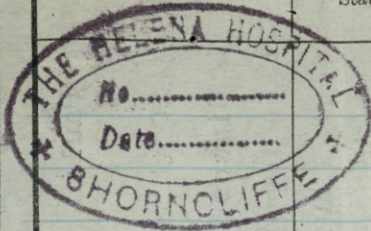
EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

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

Surname PAULIN

Christian Name Arthur Hilton



STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
		10	3	17	13	3	17	appendicitis (op)	3	Appendicitis complicated by General Peritonitis. Med 10.10 a.m. 13-3-1917	<i>Robinson</i> Capt. Off. i/c Helena Hospital, Shorncliffe.

Duplicate Medical History Sheet posted to here. *ay*

Unit 133rd. Bn. C.E.F. Rank Captain Name A. H. Paulin

and P.R. 2/10/16

OFFICERS' DECLARATION PAPER

CANADIAN OVER-SEAS EXPEDITIONARY FORCE
DUPLICATE

QUESTIONS TO BE ANSWERED BY OFFICER

[ANSWERS]

- 1. (a) What is your Surname?..... Paulin
- (b) What are your Christian Names?..... Arthur Hilton
- 2. (a) Where were you born? (State place and country)..... Wroxeter, Huron Co. Ont.
- (b) What is your present address?..... Simcoe. Ont.
- 3. What is the date of your birth?..... Nov. 27th. 1880.
- 4. What is (a) the name of your next-of-kin?..... Mrs. Minnie Paulin.
- (b) the address of your next-of-kin?..... Simcoe. Ont.
- (c) the relationship of your next-of-kin?..... Wife
- 5. What is your profession or occupation?..... Merchant
- 6. What is your religion?..... Presbyterian
- 7. Are you willing to be vaccinated or re-vaccinated and inoculated?..... Yes
- 8. To what Unit of the Active Militia do you belong?..... 39th. Regt.
- 9. State particulars of any former Military Service..... 39th. Regt. 4 years.
- 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.

A. H. Paulin Capt. (Signature of Officer)

Taken on strength (place)..... Simcoe. Ont.
(date)..... Jan. 20th. 1916.

A. C. Pratt
(Signature of Commanding Officer.)
Lt. Col. Command. 133rd. Bn. C.E.F.

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..... Jan. 20th...... 191..... 6.

Place..... Simcoe. Ont.

[Signature]
Major. Medical Officer.

*Insert here "fit" or "unfit"

FORM OF WILL

I, Arthur Hilton Paulin (Name in full)

Regimental Number Captain serving in 133rd O.S. Bn.

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

I devise all my real estate unto my wife

Minnie Paulin,

Simcoe, Ontario

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

absolutely, and my personal estate I bequeath to my wife

Minnie Paulin,

Simcoe, Ontario.

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

I appoint the said Minnie Paulin my sole executrix

NOTE

This space for the
appointment of
Executor if
necessary.

IMPORTANT
NOTE

This must be signed
and Dated by
THE SOLDIER
HIMSELF.

this 2nd day of October A.D. 1916

A. H Paulin Signature of Soldier.

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

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

Signature of First Witness C. F. W. Atkinson Sgt

Address of Witness Port Rowan, Ont

THE TWO
WITNESSES

Occupation of Witness Barrister

MUST
SIGN HERE

Signature of Second Witness J. A. Rumble.

Address of Witness Alma, Ont.

Occupation of Witness Chartered Accountant

See page 1000-1001
AK

Arthur Hilton PAULIN

Captain

Canadian Expeditionary Force

27 November 1880

Wroxeter, Ont.

20 January 1916

Simcoe, Ont.

Canada and Britain

See remarks

See remarks

Captain

British War Medal

Died of illness 13 March 1917 in England.

24 January 1984

*MEB
27-1. McCarey.*



**STATEMENT OF SERVICE IN
THE CANADIAN ARMED FORCES
— WORKSHEET**

**ÉTATS DE SERVICE DANS
LES FORCES ARMÉES DU CANADA
— FEUILLE DE TRAVAIL**

Service Rank or Number — Grade ou numéro matricule

Name — Nom

Captain

Arthur Helton Paulin

1. Branch of Service — Arme de service

Canadian Expeditionary Force

2. Date and Place of Birth — Date et lieu de naissance

27 November 1880

Wroxeter, Ont.

3. Date and Place of Enlistment — Date et lieu de l'enrôlement

20 January 1916

Seneca, Ont.

4. Theatres of Service — Théâtres de service

Canada & Britain

5. Date and Place of Discharge — Date et lieu de libération

See Remarks

6. Type of Discharge — Genre de libération

See Remarks

7. Rank on Discharge — Grade à la libération

Captain

8. Medals and Decorations — Médailles et décorations

British War Medal

9. Remarks — Remarques

*Recd of illness 13 March 1917 in England
Hospitalized in England as a
result of an eye infection acquired in
Canada*

Date

17 Jan 84

Clerk's Initials — Initiales du commis

gp

(Not for Field Service.)

Army Form B. 2090.

Report of Death of a Soldier to be forwarded to the War Office
immediately after the date of Death.

A.F.B. 2090
5 APR 1917
FORWARDED TO OTTAWA

REGIMENT } 3rd. Can. Reserve Batt. Squadron, }
or } Troop, Battery }
CORPS } or Company }

Regtl. No. _____ Rank Captain

Surname Paulin Christian Names Arthur Hilton

Date and Place of Birth Nov. 27th. 1880. Wroxeter, Huron Co. Ont. Canada

Trade or Calling Merchant.

Enlisted—When and Where _____

Died { Date 13th. March 1917.
Place Helena Hosp. Shorncliffe
Cause of Death* Appendicitis.

* Specially state if died from wounds received in action, or from illness due to field operations or to fatigue, privation, or exposure while on military duty, or from injury including heat-stroke while on military duty (annex a separate statement showing fully the circumstances in which the injury was received).

Account, or (in India) Casualty }
Return, in which the non- }
effective balance will probably }
be included }

Whether he leaves a Will or not _____ { N.B.—State definitely
"Yes" or "No."

(Any Will left should be forwarded with this Report.)

Whether in receipt of an annuity }
for meritorious service, or }
distinguished conduct }

Medals, if entitled to any, }
and how disposed of }

Whether known or supposed }
to have been married }

Married.

If married, whether on }
married Establishment }

Name and address of widow }
and children, if any }

Mrs. Minnie Paulin,

Simcoe,

Ont. Canada.

Latest information as }
to Kin (if any known) }
with address }

As above.

Small Book to be forwarded with this report. If not, explanation must be given.

I hereby certify that ~~the next of kin~~ **Militia Headquarters, Ottawa** has been informed. of this Cas. on the

13-3-17.

_____ Commanding

- _____ Squadron
- _____ Troop
- _____ Battery
- _____ Company

Signed A W Adams **Lieut. Regiment.**

For Lt-Col. i/c Records C.O.M.F

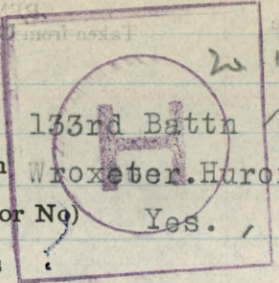
Station and date **London E.C.**

Transmitted **14-3-17.**

_____ Commanding,

_____ Regiment.

Surname PAULIN / Christian Names Arthur Hilton, /
 Rank Captain / Name and Address of Next-of-Kin Wife. /
 Promotion Mrs Minnie Paulin. /
 Simcoe, Ontario, Canada. /
 Unit 133rd Batta /
 Place of birth Wroxeter, Huron Co., Ontario. /
 Married (Yes or No) Yes. /
 Appointments



M

Date of leaving Canada 30.10.16 & 18.11.16 Date and Cause of Resignation

Report		Record of Promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	1 CAR Place	Date	REMARKS Taken from Official Documents
Date	From whom received				
19-11-16	ObCTD	Attached 23 Am		11-11-16	DO 5998 P II 0284
20-12-16	23 Am	seems to be attached on proceeding to 12 Am Det 12 Am & attached 3 Res. Bn		20-12-16 4-1-17 11-1-17	Rec'd 320. P II over 344. 506687. Mina 1. 3 Res R 12 Am.
9 2 17	AG	adm. Trans. to 3rd Reserve Battalion		31-1-17	Ap to O. 277 P (OH) (3 Res)
13-3-17	CR O.	Helena Hosp. S'cliffe		12-3-17	CL 622 - 626 seriously ill
14-3-17	CR O.	Died in Helena Hosp. S'cliffe		13-3-17	CL 623 Appendicitis
14-3-17	6 RO	cause of death (appendicitis operation)			(97B 2090 estate. 12/3/17)
13-4-17	3-Res Bn	Having need in Helena Hospital			CL 626 P II ord. 100.

Report

Date

From whom
receivedRecord of Promotions, reductions,
transfers, casualties, etc., during active
service. The authority to be quoted
in each case.

Place

Date

REMARKS
Taken from Official Documents

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

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

250M.—1-16.

H. Q. 1772-39-929.

Casualty Form—Active Service.

Unit, Regiment or Corps 133rd. O.S. Battalion, C.E.F.

Regimental No. _____ Rank Capt. Name PAULIN Arthur Hilton
C. E. F.

Enlisted (a) 20-1-16 Terms of Service (a) Duration of war. Service reckons from (a) 20-1-16

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) Merchant. Capt. Cert.

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				

		Embarked	Canada	30-10-16	
		Disembarked	England	11-11-16	
12-11-16	OC, 133rd	Attached to 23rd Bn	Dibgate	12-11-16	Pt II 261
12-11-16	23rd. Bn.	Posted to General List and attached 23rd. Bn. C.E.F.	Dibgate	12-11-16	Lieut For OC.133rd Bn
20.12.16.	23rd. Bn.	Ceases to be attached 23rd. Bn. on transfer to 12th. Bn. W. Sandling.		20.12.16.	D.P. II 0.320.
					Lieut. for. O.C. 23rd. Bn. C.E.F.
1.12.16.	12th.	Attached to 12th Bn from General List.		20.12.16.	Pt. II 344.

(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, Shooing 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				

4.1.17. 12th

ceases to be attached to 12th Bn on attachment to 3rd Res. Bn.

W. Sandling.

4.1.17. Pt. 11. 4.

Captain & Adjutant.

Capt. & Adjutant.

4.1.17 O.C. 3rd Res Bn Attached to 3rd Res Bn W. Sandling

4/1/17 Pt. 11. 4. 1

19/2/17 Gen. Lic. Taken on Strength 3rd Res. do.

31/1/17 Part II BMO. 47

3/4/17

O.C. 3rd Res. Bn. C.E.F.

Struck of Strength having died in Helena Hod.

W Sandling

13.3.17 CL 623

11/3/17

Pt. 11. En. O.

109

W. Sandling
act. adj. Lt. Col.

O.C. 3rd RESERVE BN. C.E.F.

REG'T'L NO _____

H. Q. FILE NO. 649-

NAME Paulin Arthur Milton

RANK AND CORPS Capt. 3rd. Reserve Bn. (Form. No 33th. Bn)

FOLLOWS
No 33th. Bn

CABLE

NATURE OF CASUALTY

FOLLOWS

No.	DATE	NATURE OF CASUALTY
777. 126	12-3-17	b. Seriously ill Helena Hosp. Shorncliffe Mar. 12th. 1917. (Appendicitis)
M185	13-3-14	Died of Appendicitis at Helena Hosp. Shorn. March. 13th /14
B2890	London E.C.	" " " " " " Date received 24-4-14.

LIST No

HOSPITAL

DATE OF
ADMISSION

REMARKS

622	Helena Shorncliffe	12-3-17	Appendicitis seriously ill
623	" "	13-3-17	" Died. Cause of death Appendicitis oper- ation as per list 626(3).

Name PAULIN, Rank Capt.

Reg. No. 9-P-497

Unit Arthur Hilton

3rd. Res. Bn.

A.F.B. 2090

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
12-3-17	Helena Hosp. S'cliffe		SERIOUSLY ILL Appendicitis	622	M. 126	
13.3.17	<u>Dead</u> Cause of death		appendicitis <u>Operation</u>	623	M. 185	
				626		

No

RANK

NAME

T. O. S.

UNIT

M. D.

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS

AUTHORITY

PAID
FROM

PAID
TO

SIG.
OR
REC'T

DESP. REGR. NO. 118123
 APR 8 1922

Number.....Rank **CAPT** ~~B~~

Surname, **PAULIN**.....

Christian Name, **ARTHUR HILTON**.....

Units.....Theatre of War **ENG.**..

Date of Service, **30.10.16**.....**13.3.17**..

Remarks.....widow.....**D**
1st Co R.

Latest Address, **Mrs. Minnie Paulin**.....
221 Norfolk St. N......

Roll No. **a Page 1268**.....**Simcal**
Ont.

✓
✓
✓
✓
PAULIN, Arthur Hilton, Capt. 133rd Bn. 0

✓
3rd Reg. Bn.

MEDALS &
DECORATIONS

Mrs. Minnie Paulin (Widow)
221 Norfield St. N., Simcoe, Ont.

PLAQUE &
SCROLL

Widow, as above.

MEMORIAL
CROSS

Widow, as above. ALSO
Mrs. Elizabeth Paulin (Mother)
Holland, Man.

Serial No 783584

Not elig. 14/15 star
Not elig. U.M.
Not elig. B.W.M.

Scroll Desp. FEB 23 1921 Reqn. No 2, 22728

Plaque Desp. OCT 27 1921 Reqn. No P 13729

PA
821

W/M

NO. 33118 NOV 26 1920

NO. 33131 NOV 26 1920

SURNAME.

Paulin

(332-39-1)

CARD NO.

CHRISTIAN NAMES

Arthur Hilton

FOLL.

D

REGL. NO.

RANK

Capt.

UNIT

133rd

Bn

FORMER CORPS

39th Regt (4 yrs)

NEXT OF KIN.

NAMES IN FULL

Paulin Mrs. Mennie,

CHANGE OF ADDRESS

RELATIONSHIP TO SOLDIER

Wife

ADDRESS

Simcoe, Ont.

COUNTRY OF BIRTH

Canada Wroxeter, Huron Co, Ont

DATE

Nov 27th 1880.

PLACE OF ATTESTATION

Simcoe, Ont

DATE

Jan. 20th 1916.

MARRIED

yes.

SINGLE

WIDOWER

TRADE OR CALLING

Merchant

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION.

PLACE

Simcoe, Ont.

DATE

Jan 20th 1916

Present Address - Simcoe, Ont.

Surname

Christian Name

Reg. No.

Rank

Unit

MEDICAL BOARD held at

Date

Serial No.

(1)

Other Medical Boards at

Date

Serial No.

(2)

(3)

(4)

(5)

Condition found by Board

Disposition Recommended

(1)

(2)

(3)

(4)

(5)

PENSIONS & CLAIMS BOARD held at

Date.....

Disposition

Remarks

Paulin. A. H.

Capt. 3rd. Res. Bn.

Helena Hosp. Shorncliffe. 12-3-17.

Appendicitis. Ser. ill. 12-3-17.

Cause of death, Appendicitis operation.

D I E D :- . 13-3-17.

C.L. 13-3-17. 622.

14-3-17. 623.

17-3-17. 626-3.

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

R.A.

Register No. DP618

WAR SERVICE GRATUITY
TO
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. 14281. a. 54

OK

Regt'l No. Name Arthur Hilton Paulin
(Christian Name) (Surname)
Unit 15 - Ba. Rank Capt. Date of enlistment
Date of casualty 13-3-17 B.P.C. File No. 755-
Was service performed overseas? yes ✓

DEPENDENT

Name Miss Mary A Paulin Relationship Widow
Address 221 Norfolk St. 4.
Sierra
Calif.

Amount of Special Pension Bonus \$ 133.33 Abstracted by Miss E. M. Ross

Eligible for Gratuity \$ 240.00 ✓
Less amount of Special Pension Bonus paid \$ 133.33 ✓
Less Debit Balance of S. A. or A.P. \$ —

Total deductions \$ 133.33 ✓
Balance due \$ 106.67 ✓

Cheque No. 91900093 ✓ Date issued 12-8-20 ✓

Clerk J. North

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

Audited by
Kent
Date 11/8/20

106.67

DP618

M.F.W. 2652
25M-6-20.
H.Q. 1772-39-1473

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname

Christian Name

Regimental Number

Rank

Address (in full)

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

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

L.L. 53961—M. & D. 9721

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

Remarks:

M. F. W. 127
 300M-1-19
 1772-38-1140

N/R effective Nov 1/16.

L.P.C. to October 31/16. ✓

Nov Dec chgd Dec.

Assignment as at
November 1st 1916. ✓

Paulin,

A. H. ✓

Captain.

133rd Battalion.

~~40~~

\$ 40⁰⁰

Payment Stopped
A. 3 M Form

*1/17. died of
appendicitis*

Mrs. M. Paulin,
Simcoe, Ontario.

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

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

Mrs. Minnie A Paulin ^{wife}
PAYMENTS. ^{Capt.}Name of Soldier Paulin, A. Hilton

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

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	H3525	134 -	134 to adjust
May		H6236	40	40 18831 Cancelled.
June		H4379	40	40 34379 Cancelled. Revised
July		H8866	40	40 5657 Cancelled.
Aug.		H9017	40	40 mailed 30-6-16
Sept.		H12731	40 -	40
Oct.		Z16884	40	40
Nov.		H20062	40	40
Dec.		H22735	40	40
Jan.	1917	H26284	40	40
Feb.		C30816	40	40
March		C33700	40	40
April		D36285	40	40
May		H2748	40	40
June		D6536	40	40
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

Pension Granted... 1/6/17 ✓
 B.P.C. to Recover \$... nil
 Clerk G. G. Bell Date 6/6/17

Pensions Notified DATE 15-3-17 ✓
 Killed in Action DATE 13-3-17

ACCOUNT CLOSED

DATE.....PER.....

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	1920			
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.				
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.
(Assignee)

Mrs. Minnie Paulin wife
PAYMENTS.

Name of Soldier *Paulin, A. R.*
Captain 133rd. Bn.

L. L. Job 5470—Req. 6888.

Month.	Year.	Cheque No.	Amt.	Remarks.
				NOV 1 1916
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.		<i>J 31734</i>	<i>40</i>	
Dec.		<i>Z 36453</i>	<i>40</i>	
Jan.	<i>1917</i>	<i>V 40786</i>	<i>40</i>	
Feb.		<i>R 44413</i>	<i>40</i>	
March		<i>H 52277</i>	<i>40</i>	
April	<i>40-2</i>	<i>I 5913</i>	<i>40</i>	
May		<i>F 11278</i>	<i>40</i>	
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

40

200%
120 *6.7.4. P.F. 26/3/17* *E. Madley*
assignee dependent
40 cont to continue till Pension granted
open - 26/3/17 *E. Madley*
40 cu

F. X. Rend. Date *Total* By *280.00*
E.F.X. " Date *2.4.9.17* By *S.M.C.*

Pension Granted *1/6/17*
B.P.C. to Recover \$.....
Clerk *J. P.R.* Date *6/6/17*

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.	1919			
Jan.				
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.		1920		
Dec.				
Jan.				
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

No.

RANK *Capt.*

NAME

*Paulin Arthur Kilton.*T. O. S. *20-1-16 (201479)* UNIT *133rd. Battalion C.E.F.*
*24-2-16.*M. D. *2.*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916</i> <i>Jan. 20th</i>	<i>1916</i> <i>Jan. 31st</i>	<i>✓</i>	<i>Trans. from 39th Regt. 20-1-16.</i>	<i>DO. 122 of 25-5-16.</i>
	<i>Feb.</i>	<i>✓</i>		
	<i>Mar.</i>	<i>✓</i>		
	<i>April.</i>	<i>✓</i>		
	<i>May.</i>	<i>✓</i>		
	<i>June.</i>	<i>✓</i>		
	<i>July.</i>	<i>✓</i>		
	<i>Aug.</i>	<i>✓</i>		
	<i>Sept.</i>	<i>✓</i>		
	<i>Oct.</i>	<i>✓</i>		

UNIT SAILED
OCT 30 1916

20-1-16

2167

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

Name *Mrs. Minnie A. Paulin*
Address *Suncos, Ont.*

Name of Soldier *Paulin, A. Hilton*

Regtl. No.

Rank *Capt.*

Corps *133rd Battⁿ*

Relation to Soldier }
wife, child or mother } *wife*

To what Corps belonging }
when called out }



PAYMENTS

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

ACCOUNT CLOSED
DATE.....PER.....

MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

Mrs.
 To Whom *Missie Paulin,*
 Address *Simcoe, Ont.*

wife

By Whom Assigned *Paulin, A. H.*

Regtl. No.

Rank *Captain.*

Corps *133rd Bn.*

Rate *40* ^{*26*} **NOV 1 1916**

E. Egan

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				

*Deed of apppendicit 13/3/17 6.204 / 15/3/17
 26/3/17 E. S. Malley*

ASSIGNED PAY.

UNIT.

RANK.

NAME.

Beneficiary

Address

Amount. \$ 40⁰⁰ 1.11.16

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

NAME OF DATE AUTHORITY

Gross
DATE AUTHORITY

133
3 Res.

Capt

12.11.16 *M. Canada*
D.O. 6011 CTD
20.11.16

Name *Paulin*
Initials *A. H.*
Bank *of Montreal*

Canada

Died of appendicitis 13³/₁₇ C.L. 623-111³/₁₇

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
1917								
Apr. 1	Brought For ^d					107 25	<i>P.A. to be carried forward.</i>	<input checked="" type="checkbox"/>
May 19	Opd. L.A. 14-31 ³ / ₁₇ . N# 837. P.E.			8550			<i>Sp. to N.E. Ledger</i>	
19	Transfd to NE Branch N# 861. NE Br.			2175			<i>Transf. p. Ledger 22 to Ledger 5</i>	
July 12	Pay March 14-31 ³ / ₁₇		8550				<i>13⁴/₁₇</i>	
12	Transfd NE Branch N# 1156			8550				

Apr. 1

Brought For^d

May 19 Opd. P.A. 14-31³/₇. N# 837. P.E.

8550

19 Transfd to NE Branch N# 861. NE Br.

2175

July 12 Pay March 14-31³/₇

8550

12 Transfd NE Branch N# 1156

8550

P.A. to be carried
107 25 forward.
Apr. to N.E. Ledger
Transf. p. Ledger 22 to Ledger 5
13 4/17

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.

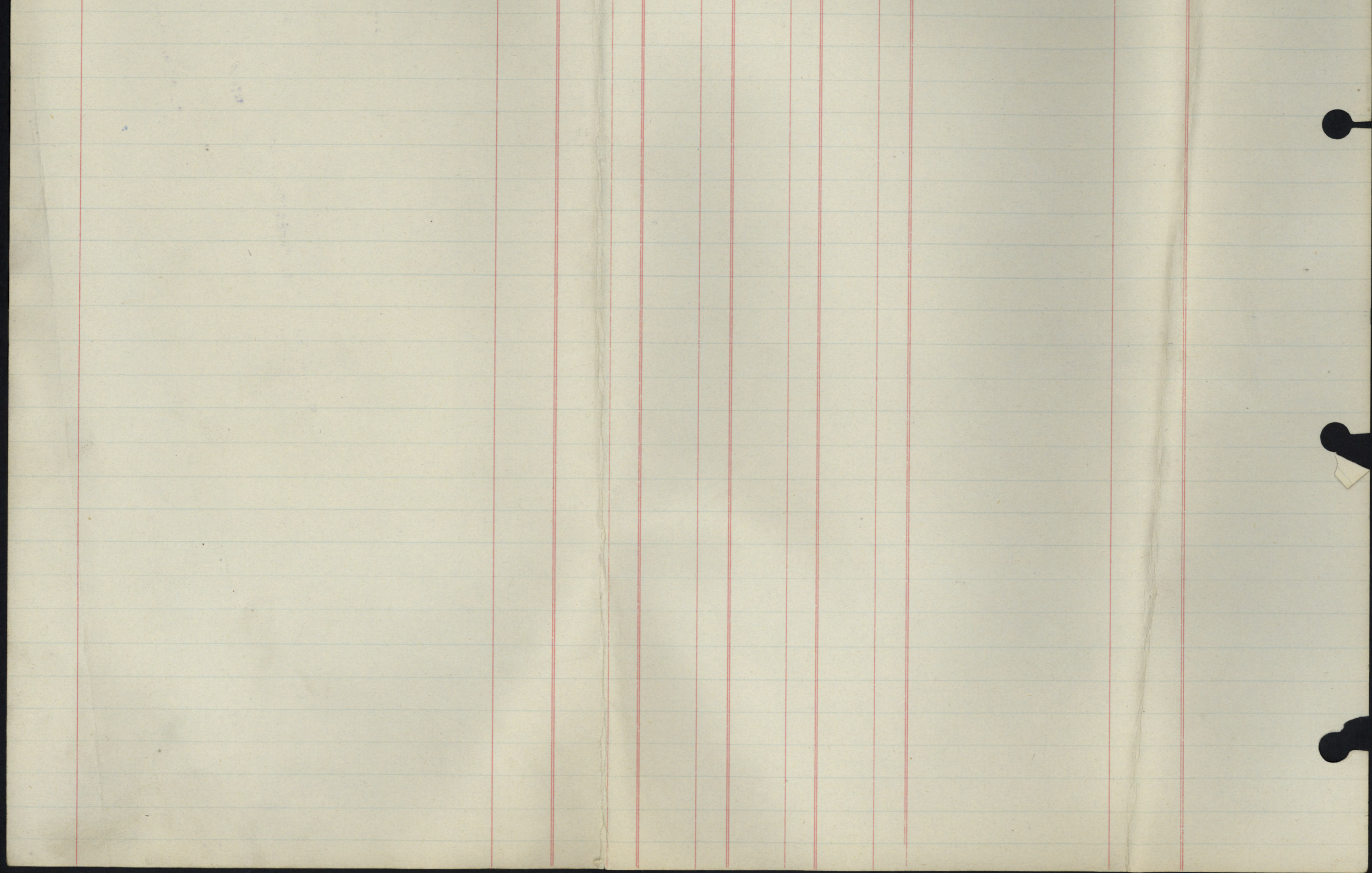
DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

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

INITIALS



ASSIGNED PAY.

UNIT.

5

RANK.

NAME.

Beneficiary

133rd Br.

Capt.

Mess DATE

AUTHORITY

12-11-16 From Canada

Name Paulin,

Address Canada

DB #60116.70.

Initials A.S.

d/20-11-16.

Bank of Montreal.

Amount. \$ 40⁰⁰ 1-11-16.

Separation Allowance issued. Yes or No.

Deed of appendicitis 13³/₇ 626 623 14³/₇

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								
Nov. 23	PA A. 1-30 ¹¹ / ₁₆ Messing 12-30 ¹¹ / ₁₆ Bank					91.50		
Dec. 11	a. p. can. 2 mos. Pay Dec. R.					80		
	Feb 1 ¹¹ / ₁₆ - 30 ¹¹ / ₁₆ bank rates, Mess 12 ¹¹ / ₁₆					147.25		
						131.50		
1917	15 Bank					107.25		
Jan 16	a. p. can					40		
22	Pay Jan R					147.25		
26	Bank	19288				107.25		
Feb 19	Pay R.					133		
	a. p. can					40		
22	Bank	21932				93		
Mar 13	a. p. can					40		
20	Pay R.					147.25		
	X							

Mch. 10 to be carried forward
 10 to N.B. Ledger

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								
Nov. 23	PA. 1-30 ¹¹ / ₁₆ Messing 12-30 ¹¹ / ₁₆ Bank					91.50	91.50	
Dec. 11	a. p. bank. 2 mos.					80		
	Pay Dec. R.			147.25				
	PA 1 ¹¹ / ₁₆ -30 ¹¹ / ₁₆ bank rates, Mess 12 ¹¹ / ₁₆			131.50				
1917	15 Bank					107.25	0	
Jan 16	a. p. Can					40		
22	Pay Jan R			147.25				
26	Bank	19288				107.25	0	
Feb 19	Pay R.			133				
	a. p. Can					40		
22	Bank	21932				93	0	
Mar 13	a. p. Can					40		
20	Pay R.			147.25			107.25	
	X							

A. P. 40.00

Mch.
 to be carried
 forward
 to N. & Ledger

Separation Allowance issued. Yes or No

Bank

Date	No. of Days	Regt. Rate	Amount Regimental	F. A.	Messing	Other Credits	Total	Ass. Pay	Charges	Bank	Debit Balance	Credit Balance		Initials
------	-------------	------------	-------------------	-------	---------	---------------	-------	----------	---------	------	---------------	----------------	--	----------

ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF DATE AUTHORITY.

Mess. DATE AUTHORITY

Beneficiary Mrs. M. Paulin
Address Simcoe, Ont.

133rd Bn.
3 Res Bn.

Capt.

12^{1/16}. Fr. Canada
D.O.#6011622
d/20-11-16.

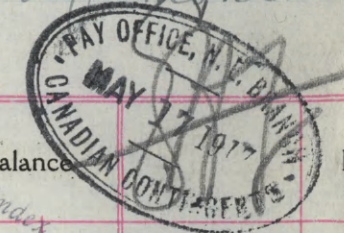
Name Paulin
Initials A.H.

Amount \$ 40.00 fr. 1^{1/16}. Cancelled fr. 1^{4/17}.

Bank of Montreal.

Separation Allowance issued. Yes or No

Died of Appendicitis 13^{3/17} C.L. 623. E.H. 3/17



Date	No. of Days	Regt. Rate	Amount Regimental	F. A.	Messing	Other Credits	Total	Ass. Pay	Charges	Bank	Debit Balance	Credit Balance	Initials	
1916.														
1-11-16		#3 pay.												
30-11-16	30	.75 F.A. #1 Mess.	90	22 50	19		131 50	40		91 50				
1-12-16														
31-12-16	31		93	23 25	31		147 25	40		107 25				
1-1-17														
31-1-17	31		93	23 25	31		147 25	40		107 25				
1-2-17														
28-2-17	28		84	21	28		133	40		93				
1-3-17	13		39	9 75	13		61 75			39 75		21 75		
30-3-17	21		93	23 25	21		147 25	40				107 25		
Gr Balance												\$ 21 75		
No Recd.												107 25		
July 31-3-17	18		54	13 50	18		85 50							
Sept.									107 25					

Messing fr. 12^{1/16}

21 75
107 25

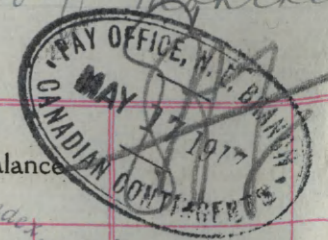
\$ 21 75
107 25

107 25
to for all 28^{1/16} 1150

Statement of
AUG 16 1917
Account rendered

Amount \$40.00
 Separation Allowance issued. Yes or No

Died of Appendicitis 13^{3/17} C.L. 623.



Date	No. of Days	Regt. Rate	Amount Regimental	F. A.	Messing	Other Credits	Total	Ass. Pay	Charges	Bank	Debit Balance	Credit Balance	Initials
1916													
1-11-16													
30-11-16	30	\$3 pay \$.75 F.A. \$.1 Mess	90	22 50	19		131 50	40		91 50			
1-12-16													
31-12-16	31		93	23 25	31		147 25	40		107 25			
1-1-17													
31-1-17	31		93	23 25	31		147 25	40		107 25			
1-2-17													
28-2-17	28		84	21	28		133	40		93			
1-3-17	13		39	9 75	13		61 75			34 7		21 75	
30-3-17	31		93	23 25	31		147 25	40				107 25	
<i>Cr Balance</i>													
July 14-3-17	18		54	13 50	18		85 50					21 75	
Sept.									107 25			107 25	

*MB Recd.
 July 31-3-17
 Sept.*

*107 25
 Rec'd for bar
 for 11-28-17 180*

Statement of
 AUG 16 1917
 Account rendered

(Ass Pay ban 200⁰⁰) as per A. 2593-1-12. of 7/17 list #16