REGIMENTAL DOCUMENTS

Pte NAME ANDERSON MACKERSON REGT. NO. 931363 UNIT 72 Coy R.C. H.Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)	27/3/19				DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob
1	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)					DESERTION
1	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)					
1	M Sup 92					
1	W. M.T. 1375					
1	C. A. W. C. 5009A					
1	M 2 W 67					
1	Pay Cert					
	Pay Cert					

W. 2589
100M-11-18
1772-39-1377

ORIGINAL 931363

ATTESTATION PAPER.

No.

No. 2 CONSTRUCTION, B'n. C.E.F.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS.)
1. What is your surname?	Anderson
1a. What are your Christian names?	Mackerrow
1b. What is your present address?	Hammonds Plains N.S.
2. In what Town, Township or Parish, and in what Country were you born?	Hammonds Plains NS
3. What is the name of your next-of kin?	Samuel Anderson
4. What is the address of your next-of-kin?	Hammonds Plains NS
4a. What is the relationship of your next-of-kin?	Father
5. What is the date of your birth?	Oct 1899
6. What is your Trade or Calling?	Cooper
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? If so, state particulars of former Service.	No
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, Mackerrow Anderson 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.

Mackerrow Anderson (Signature of Recruit)

Date December 9th 1916. P. A. Boehk Sergt (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Mackerrow Anderson, 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.

Mackerrow Anderson (Signature of Recruit)

Date December 9th 1916. P. A. Boehk Sergt (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 Halifax N.S. this 9 day of Dec. 1916.

(Signature of Justice)

A Justice of the peace in and for the City & County of Halifax, N. S.

M. F. W. 23
750M—3-16
H. Q. 1772-39-341

Description of Macherrow Anderson on Enlistment.

Apparent Age 18 years ~~x~~ 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. 3 ins.

Chest measurement:
- Girth when fully expanded 33 ins.
- Range of expansion 2 ins.

Complexion Dark

Eyes Brown

Hair Black

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

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 Dec 9th 1916 D. J. Munderway

Place Halifax N.S. Capt A.M.C.

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.

Macherrow Anderson 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.

D. H. Sutherland LT. COL.
O. Comd'g No. 2 Construction Battalion, C. E. F. (Signature of Officer)

Date DEC 13 1916 191 .

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 931363 (Rank) Private

Name (in full) Mackerron Anderson enlisted in

the #2 Construction Battalion

CANADIAN EXPEDITIONARY FORCE at Halifax, N.S. on the 9th

day of December 1916

HE served in France

and is now discharged from the service by reason of Demobilization

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

Age	19 years 8 months	Marks or Scars	
Height	5 feet 4 inches		
Complexion	Dark		Nil
Eyes	Brown		
Hair	Black		

M Anderson
Signature of Soldier

C W Macaloney CAPTAIN.
Issuing Officer
O. C. DISCHARGE SECTION No. 6 DISTRICT DEPOT.

Rank

Appointment

Date of Discharge February 18, 1919

Signed at Halifax N.S. this 17th day of February 1919

in Military District No. 6 Lieut

File Reference No.

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.

M. F. W. 39a
200m.—2-18.
H.Q. 1772-39-882

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

On demobilization the particulars called for on the back of this certificate should be copied on the proper blank.

No. ..... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

.....

Medals and Decorations .....

.....

Remarks .....

.....

Uniform not to be worn after Date of Discharge unless authority has first been obtained from G. O. C. District

Signed at ..... this ..... day of 19

.....
Name of Officer

.....
Rank

.....
Appointment

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

OTTAWA, CANADA.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

If the applicant will enquire at the local Branch of the Canadian Patriotic Fund he will be informed if there is an official who will take this Declaration free of charge.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

1. Christian names Macherrow ..... 2. Surname Anderson .....

3. Rank private ..... 4. Original Unit 2nd Bn R. Construction 5. Reg. No. 931363

6. Address, in full, to which future payments of gratuity are to be forwarded .....
Hammonds Plain P.O.
Halifax
N.S.

7. Date of enlistment in the C.E.F. 8.12.16

8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Mrs. S. Anderson

9. Relationship of such dependent Mother

10. Address, in full, of such dependent as above

11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? No

12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
Yes 2nd Construction Coy. April 20th 1917 Dec. 4th 1919

13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? .....

14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service .....

15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served 8.12.16 to
2nd Construction Coy.

16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department No

17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? No

M.F.W. 2595.
1772—39—1389.
1160—D.P.—250M-12-18.

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units ....No.....

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid ...No.....

20. Have you been issued with a War Service Badge? If so, what class ? A No 765-59

21. Have you, during the present war, served in the Imperial Forces ? .....No.....

22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled ....No....

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England ? ....No.....
(b) If so, was such reversion in consequence of misconduct or inefficiency? ....No.....

24. Are you now serving in the C.E.F.? ..... If not, give:—(a) Date of discharge .....18-2-19..... (b) Reason for discharge Demob'n

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit ...No.....

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit .....
Yes.....2nd Construction Coy...20.4.17....to...4.12.18

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? ....No
(b) If so, are you in receipt of full pay and allowances from that Department ? .....No.....

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: M Anderson

Place of Residence: as above

Declared before me at: Halifax NS

This 17th day of Feb 1919

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths. A J P in and for the County of Halifax

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
9/c Clear	19 Nil		153 days	280.00
10 Payment War Service Gratuity			70.00	

Certified Correct. H W Dingwall

District Paymaster.

R Macomber

For Paymaster, M.D. 6

FEB 18 1919
Paymaster M.D. 6 Militia Dept

Form B 122.
2353—100M—9-12-16.

J B. Rank | Name ANDERSON, MacKerrow. | Reg'l No. 931363.

Unit No. 2. Const. Bn. | If in perm. Corps What Unit? | Married or Single Single.

Place and Date of Enlistment Halifax. N.S.9th Dec.1916. | Place of Birth Hammonds Plains. N.S.

Name and Address, Next-of-Kin Samuel Anderson.

Hammonds Plains. N.S. | Relationship Father.

Assigned Pay Monthly $ | Payable to

Relationship

Separation Allowance $ | Payable to

Relationship

Discharge, Date and Place | Reason | Character

N/E. R.B. No 6574
Fils R.L.
Category OR CAN

H. W. V., Ld.—9546-16.

Report. 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.
		Arrived in England vid S.S. Southland		7.4.17	
14.6.17	No.2.C.C.C.	Arrived in France Field		14.5.17	Pte DD 115
16-12-18	NSRD	TOS from 2 cc Coy	Bisbitt	CK	14-12-18 + 30d + 71d / 19-12-18 2nd cc Coy
27-12-18	N.S.R.D	T/c to 6 D D Rhyl	"	"	27-12-18 S.O. 313
25.1.19	N.S.R.D	ceases O/C to Rhyl & Ripon	"		12.1.19. — 18
		S.O.S. to C.E.F. Canada			

A.F.B. 103 CHECKED
28 MAY 19

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.					

ORIGINAL

MEDICAL HISTORY SHEET

93363

Surname Anderson Christian Name Mackerrow

Examined on 13th day of Dec 1916 at Truro N.S.

Birthplace City or Town Hammond Plains County Halifax N.S.

Apparent age 18

Trade or occupation Labourer

Height 5 feet 3 Inches

Weight 112 lbs.

Chest measurement Minimum 31 inches Maximum expansion 33 inches

Physical development Good

Small-pox Marks None

Vaccination Marks Arm Right Left Number

When Vaccinated last Never

(a) Marks indicating congential peculiarities or previous disease None

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

Approved by H. V. Kent

Rank Major A.M.C. M.O.

Date	Fit or Unfit	Examined for Re-Engagement	
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.

Date	Result	Vaccinations	
24/2/17	L. & R.	H V Kent major	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
12/1/17	L and R.	H V Kent Major	M.O.
19/1/17	L and R.	H V Kent Major	M.O.
5/2/17	L and R.	H V Kent Major	M.O.

Enlisted on 9th day of December 1916 at Halifax N.S.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	No 2 Coast Bn C.E.F.	93363		9/12/16
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result

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

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

Surname Anderson Christian Name Macpherson

STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			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
		Day	Month	Year	Day	Month	Year				

C.A.D.C. 5009 A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

MD6

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.

NAME OF SOLDIER (Block Letters) ANDERSON M

REGIMENT No 2 Construct Bttn RANK Pte No. 431363

Date of Examination in England 30/12/18 | Date of Examination in France

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 30 31
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

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 — yes

(*b*) In England ~~yes~~

(*c*) In France — yes

KINMEL PARK, NORTH WALES.

Signature of Dental Officer J. A. Somerville Capt.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 931363 Rank Pte Name Anderson M

Corps MSR who was* Discharged

On 18/2/18 191...., to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1/1/19 191....

to 18/2/18 191...., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month Lab	5	54	Balance Cr. from prev. month	11	15
Advances by Cheques No. 14334	35	00	Regt'l. Pay 49 days at $ 1.00 c.	49	00
Advances by Cheques No. 15746	70	00	Field Allow. 49 days at $ 10 c.	4	90
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges funds		05	Other Allowances* Bounties	35	00
Payment on transfer or discharge No. 15717	59	46	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)	70	00
Total	170	05	Total	170	05

*Give particulars.

A monthly stoppage of $ 15.00 (†) has been (‡) been paid on account of Assigned

Pay for the month of Jan 191.... and Sep'n Allce. for month of Jan 191.... (to) Assignee Mrs M Anderson

(Address) Hammonsplains NS

(†) Insert amount to be assigned, whether it has been paid or not.
(‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer.

Out Allowance of $..... has been paid by Paymaster, Military District No. .....

REMARKS:—

State (1) date of enlistment .....

(2) if married and if a Separation Allowance Card has been submitted .....

(3) cause of discharge ..... authority 18/2/18

(4) authority for transfer .....

NOTE.—Separation Allowance and Assigned Pay Card and Index Card (M.F.W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay List of the Unit.

Date 1/2/19

Place Halifax

W W Mitchell CAPT
Asst No. 6 District Depot
Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit, duplicate to District Paymaster; triplicate to accompany the pay list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.

H.Q. 1772-39-903.
100M-9-18. D.P. 874.

HALIFAX N.S.

D.M.S. 1375.

Medical Examination upon leaving the Service of an Officer fit for general service or a Soldier fit for duty.

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank: Pte Name: Anderson Surname: Mackerrow

Unit or Corps: 17 Reserve (If a soldier) Regtl. No. 931365

Born at: Halifax N.S. on, date: Dec. eight 1897

Signature (for identification): Mackerrow Anderson

The examination is to be made jointly by two Medical Officers.

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe.

Weight 146 lbs.

Height 5 ft. 9 ins.

no

2. NUTRITION AND DIATHESIS?

Good

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. NERVOUS SYSTEM?

no

4. RESPIRATORY SYSTEM.

no

5. HEART?

Abnormal Sounds? no

Abnormal Size? no

Pulse Rate? 80 Intermittence or irregularity? no

6. ARTERIES.—Any hardening?

no

7. DIGESTIVE SYSTEM?

no

8. GENITO-URINARY SYSTEM?

Urinalysis—S.G.? 1018 Reaction? acid Albumen? nil Sugar? nil

9. SKIN, MIDDLE EAR, EYE or any other part?

no

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe.

no

11. Opinion as to the health and physical condition of the one examined?

Good

Examined at: Kinmel Park

Date: 2-1-19

Signed: J. Kennedy Capt. M.O.

Signed: [illegible] M.O.

If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 931363 Rank Pte Surname Anderson
(Given name in full) MacKerron

Unit or Corps D.D. #6 Birthplace Hammonds Plains N.S.

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer).

1. **GENERAL DESCRIPTION:**

Physique Good Weight 130 lbs. Height 5 ft. 4 in. Colour of Eyes dark brown

Nutrition Good

Pulse normal

Condition of arteries normal

Vision Rt. 20/20 Left 20/20

Hearing (conversational voice) Rt. 15 ft.

Left 15 ft.

Identification marks, scars, or deformities. (Give cause and date of origin).
Nil

Opinion as to general health and physical condition Good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No") (Subjective evidence may be sufficient in certain cases.)

Nervous System No Genito Urinary System No Cardio-Vascular System No

Special Senses No Integumentary System No Respiratory System No

Disturbance of mentality No Muscular System No Digestive System No

Osseous and Joint System No Any other general condition No

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

Nil

Hammonds Plains, Halifax Co., N.S.

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at ....(Overseas)

Date ..... Signed .....M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature .....

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at Halifax.....(Canada)

Date 18/12/19..... Signed W. A. Rumbell Capt .M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to, or during service.

Signature W. Anderson.....

(If not satisfied, M.F.B. 227 will be completed by a Medical Board).

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

[OVER]

M.F.W. 129.
1038 (D.P.) 500M-11-18.
1772-39-1142.

DUPLICATE

To be made out in duplicate.

H.Q. 54-21-20-53

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 ..... No. 2 CONSTRUCTION, B'n. C.E.F.

(2) Regimental Number 931363

(3) Full Name of Soldier ..... Mackenzie Anderson

(4) Place of Birth ..... Hammonds Plains, N.S.

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

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

(b) Present Postal Address X

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

(8) Have you any children? X

If so, give number of boys and girls X

Also their names and ages X

M. F. W. 67.

300M.—5-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes: Samuel Anderson

If so, state name and address Hammonds Plains Ch. S.

(10) Is your Mother alive? Yes Mrs Samuel Anderson

If so, state name and address Hammonds Plains Ch. S.

(11) If your Mother is a widow ~~[illegible]~~ X

Are you her sole support, or not? ~~[illegible]~~ X

(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.

X

(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.

X

(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.

X

(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.

D. A. Sutherland L'T. COL.
O. Comd'g No. 2 Construction Battalion, C. E. F.

Officer Commanding.

Date 26/10/16

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

M. F. W. 54. (A. F. B. [redacted])
350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps .....

Regimental No. 931363 Rank Pte. C. E. F. Name Anderson W.

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

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*) .....

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				
12.1.19	O'seas.	T/o/S. No. 6 D.D. Hfx.	Cary Co.	22.1.19	D029. Anderson Lieut ASST. ADJT. No. 6 DISTRICT DEPOT
18.2.19		DISCHARGED at Halifax, N. S	D048		for R Thistle LIEUT O C. DISCHARGE SECTION NO. 6 DISTRICT DEPOT

(*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				

Awards

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.

Unit, Regiment or Corps #2 Const.Battn.C.E.F.

Regimental No. 931363 Rank Private Name Mackerrow Anderson
C. E. F.

Enlisted (a) 9/12/16 Terms of Service (a) Duration of War & 6 months ~~and 3 yrs Auth. after~~ Service reckons from (a) 9/12/16

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)

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Embarked from Canada	Halifax 25/3/17	25/3/17	
		Disembarked England	Liverpool 8/4/17	8/4/17	Seaforth.
17/4/17.	OC Hr Const Bn	Proceeded Overseas		17/4/17	#2 C.D.# 2227 A. Gaylor Capt for Capt & Adjt
		Landed in France 17-5-17 N.R. Forfeits 5 days pay for straggling while with Iron Rations			
21.5.17.	OC.		Fld.	21.5.17.	B2069 Pr 2.119. 25/7/17.
4-6-18	OC	Struck with unit	Fld	4-6-18	NR. RS. 18/11784
10.8.18.	OC unit	Granted 14 days leave.	Uk.	9-8-18	B213 Pr 50.47 August 1918
31.8.18	do.	Reported from leave	Field	27.8.18	B213.

(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.

CERTIFIED COPY OF RECORD
JUN 1917
DAN. DRODRIGO

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				
11/12/18.	A.A.G.	Trans. to England & posted to N.S. Reg. Depot & Bramshott		14/12/18.	K.R. 344
					C.A. Hewett Lieut. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.
17-12-18	N.S.R.D.	T.O.S. & attached to 2nd C.C.D for Qrs & Rations.	Bramshott	14/12/18.	D.O. 305.
		NSRD ON COMMAND TO CDD Kinmel Park Rhyl BRAMSHOTT			PART II D.O. NSRD 313 27/12/18
					C.A. Knight LIEUT. OFFICER I/C RECORDS, NOVA SCOTIA REGTL. DEPOT.
12/1/19		S.O.S. & M.F.6 on ~~transfer~~ to C.E.F. Discharge Canada Sailing No 4 RMS Hammond Kinmel Park.			
		Embarked - England		12/1/19	

L-L.Job 5470—M. & D. 6888

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H. Q. 1772-39-819

To Whom Mrs Sam Anderson,
Address Hammonds Plains, Halifax Co., N.S.
Rate $15.00

APR 1917

By Whom Assigned Anderson, Mackenzie
Regtl. No. 93363.
Rank Pte
Corps 2 Constrn Btn

PAYMENTS

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

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2. Mrs Sam Anderson
(Assignee)

Name of Soldier Anderson, Mackrow

PAYMENTS. 93/363 - Pte - 2 Construction Bn -

L. L. Job 5470—Req. 6888.

$15.00

APR 1917

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		Z 4655	15	
May		J6530	15	15. 7/.
June		J13139	15	15. 8.
July		J19942	15	s
Aug.		L27039	15	03
Sept.		K33739	15 -	90. ✓
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

CANADIAN
ASSIGNED PAY AUDITED
AUDIT CLERK
DATE 16/9/19

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.					

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch A

2623

OVERSEAS CONTINGENTS

Date of Assignment Apr 1, 1917

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

$15			

PARTICULARS OF SEPARATION ALLOWANCE

No. 931363

Rank Pte. Promoted Reverted Discharge

Soldier's Name Mackerow Anderson

Battalion 2 Constrn Battn.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Sam Anderson

Address Hammonds Plains, Halifax Co. N.S.

Change of Address

1

2

3

4

U 377 M. 26

Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
30/9/17			90	90		
Oct	G 51400		15	15		
Nov	C 52638		15	15	T	
Dec.	F 54962		15	15	M	
Jan	A 54248		15	15	B	
Feb.	B 92476		15	15		
Mar	G 99711		15	15		
April	H. 7508		15	15		
May	A 12460		15	15		
June	B 15304		15	15		
July	Y 28286		15	15		
Aug	A 30813		15	15		
Sept.	A 37503		15	15		
Oct.	A 44146		15	15	M	
Nov	A 52233		15	15	M	
Dec.	B 63900		15	15	M	
Jan	B 71521		15	15	M	
Feb.			330	330		

A/c Closed Emily P. Baker

Ret'd per

Date 22-1-19 M.F.W.187 29-1-19 MD. 6

No 62582

CANADIAN ASSIGNED PAY AUDITED

AUDIT CLERK

DATE 16/19

CONSOLIDATED ACCOUNT

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22520—M. & D. 1493.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400M.—6-17—1772-39-141
L. L. 22320—M. & D. 7993.

*Name ANDERSON. M. Rank PTE. Regtl. No. 931363

Fyle Depot 74-A-272

Original unit 2 BN.R.C Present unit #6 D. D. M. or S. Age 18 Religion Bapt. Ref. H.Q.

Port, ship, and date of arrival Halifax. N. S. "Empress of Bretain" 22-1-19.

Next of kin Father. Samuel Anderson.

Address on leave Hammonds Plain. Halifax. N. S.

Address on discharge Same.

Transportation issued Yes No Date Character on discharge

Previous occupation Cooper. Date and place of enlistment Halifax. N. S. 9-12-15.

Diagnosis Date of Medical Boards

Date.	Remarks	Pt. 2 Order No.
12-1-19	T. O. S. #6 D. D. and posted to CASY. COY. 22-1-19	D. O. 29
18-2-19	Discharged. H. M. S.	D. O. 48

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

(over)

Date.	Remarks.	Pt. 2 Order No.

M.F.W. 192
150M—6-18.
1772-39-1243.

No. 931363. RANK Pte NAME Anderson. Macherson.

T. O. S. 9-12-16 UNIT No 2 Construction Battalion

D.O. 102 14-12-16

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Dec 9.	Dec 31	✓		
1917 Jan	1917	✓		
Feb.		✓		
Mar		✓		

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263	Attestation Paper or Particulars of Recruit	Militia Form W. 23 " W. 133
Squadron / Battery / Company } Conduct Sheet, or Field Conduct Sheet	" B. 263a " W. 178	Proceedings on Discharge	" B. 218
Copies of Convictions, by C. P.	in MS.		
Med. Hist. Sheet,	Militia form B. 313		
Casualty Form	" W. 54		
Medical Report for Invalid§	" B. 227		
Dental History Sheet	" B. 465		
Last Pay Certificate	" W. 44		
Duplicate Discharge Certificate	" W. 39A		
‡Form of Will	" W. 82		

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet.

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

N.B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

War Service Badge
Class "A" # 76559
Issued.
AW

This space to be for numbers.

Proceedings on Discharge.

M

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page.)

No. 931363

Rank Private

Surname Anderson

Christian name Mackerroon

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) #2 Construction Battn.

Date of discharge February 18, 1919

Place of discharge Halifax, N.S.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 19 years 8 months.
Height 5 feet 4 inches.
Complexion Dark
Eyes Brown
Hair Black
Trade Cooper
Intended place of residence (To be given as fully as practicable.) Hammonds Plains Halifax Co., N.S.

Descriptive marks Nil

I

2. The above-named man is discharged in consequence of

Demobilization

Authority for discharge

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

3. Conduct and character while in the service have been, according to the records, etc.

N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

M. F. B. 218.

200M.—5-18.
H. Q. 1772-39-113.

(OVER)

5. He is in possession of the following number of G. C. Badges

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company, *(Squadron or Battery,* and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place).....

(Date).....

Commanding.....

8. **Certificate to be signed by the Soldier on Discharge**

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page, and that I have received my permanent discharge certificate.

(Place) Halifax N.S. M Anderson *(Signature of Soldier.)*

(Date) February 17/19 Geo Oxley *(Signature of Witness.)*

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. **Additional Certificate in the case of a Soldier who takes his discharge on his own request.**

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

.....*(Signature of Soldier.)*

10. **Statement of Service.**

Service toward Engagement to.... (the date to which the Record of Service is completed).....years.....days.

Total.....years.....days.

11. **Confirmation of Discharge.**

The discharge of the above-named man is hereby confirmed.

(Place) Halifax N.S.

(Date) 27-2-19

(Signature) D A MacRae LIEUT. COL.

No. 6 DISTRICT DEPOT.

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

Nil.

M Anderson

18/2/19

AUDITOR | PAYMASTER

M. OR S. E of Britain 21-1-19

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

REGT. No. 93/363 RANK NAME (IN FULL) Anderson W (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? No. DATE EFFECTIVE

TO WHOM PAID RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. NSR IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION TRANSFERRED TO DATE 52 AUTHORITY

DATE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY $ 18.00 DATE EFFECTIVE 1-2-19

PAYABLE TO Mrs S. Anderson RELATIONSHIP

ADDRESS Hammonds Plains Hx Co NS

ANY CHANGE IN ASSIGNEE OR ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE DATE 18/7/18 REASON AUTHORITY DD48 IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	C.	TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	BALANCE CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					
					11	20			11	20																05						05			11	15	Lub 00 39
1-1-19 18/2/18	19	10	53	90	35	00	11	15	100	00							143 34 35 00		157 17 59 46							05	15	54								
																			157 40 70 00												170	05	70	00			
	153	280							280																												
											March 8/19	5311							70																210		
																			70																140		1550449 1814/19
																			70																70		554914 12-5-19
			280	-					280	-									280	-											280	-			Nil		595115 12-6-19

W. S. Ly Payments Completed

H. A. Allum Lt

30M-11-18.—L.L. 50877-M. & D. 9553.

P. 550

Married or Single: S.

Place of Birth: Hammonds Plains N.S.

Name and Address of Next of Kin: Samuel Anderson, Hammonds Plains N.S.

Relationship of Next of Kin: Father

Name and Address of Next of Kin:

Relationship of Next of Kin:

Separation Allowance Monthly $: Effective (Date):

Payable to:

Relationship of Dependant:

Casualties, Promotions, &c

Particulars	Effective Date	Authority

Admissions to Hospital, &c

Date Admitted	Date Discharged	V. or A.	Name of Hospital

Reg'l No. 931363 Rank: Name: Anderson Isaac Kerrow

If in Permt. Corps What Unit: Unit: 2 Con Bn

Permanent Force Allowances

Place of Attestation: Halifax N.S.

Date of Attestation: 9 Dec 16

Assigned Pay Monthly $15.00 Date Effective 1/4/17

Payable to: Mr Samuel Anderson, Hammonds Plains, Halifax Cty N.S. Relationship: Father

Assigned Pay Monthly $ Date Effective

Payable to Relationship

Stop-Payment Form (Assigned Pay) Rendered (Date) Effective Reason

Discharge Date and Place Reason and Authority

Account Transferred to Non-Effective Branch (Date)

Account Transferred to Officers' Pay Branch (Date)

Transferred to	Date	Authority

Date	Pay No of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
							Separation							12 55	12 55																12 55				Bal from Canada.
Apr/30	30	1.10	33	00										33 00														15		15 -	30 55			30 55	
MAY 19.	31	-	34	10										34 10		35	1-5							9 73				15		29 60	35 05			35 05	
																12	19-4							4 57											
JUN 1-30	30	-	33	00										33 00		67	14/55							4 57				15		19 87	48 18			48 18	
July 1-31	31	-	34	10										34 10														15	5 50	20 50 ~~19 87~~	61 78			61 78	Forfeits 5 days pay 21-6-17 D.O. 119. 25-7-17
Aug 1-31	31	-	34	10										34 10											2 57 3 57 3 57 2 57			15 -		15 -	80 88			80 88	
Sep 1-30	30	-	33	—										33 —														15 —		29 28 ~~84 60~~	84 60				
			201	30										12 55	213 85									19 47		14 28		90 -	5 50	129 25	84 60				

Month	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Deferred Pay	Ser. Allce. Eng.
Sep	Bal	~~84 60~~ 60							84 60		
Oct	P.P.	34 10		A R 56 27/31 bonus on aft. 1st	3 57			15.			
				-474.13 5/12 " " " "	3 56				96 57		
		34 10			7 13			15			

No. 931363. Anderson. McK 15.00

DATE	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 DATE	2 No.	2 DATE	3 No.	3 DATE	4 No.	4 DATE	CASH PAYMENTS 1	2	$	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
MONTH	PARTICULARS				CR. 1		CR. 2		PARTICULARS					DR. 1	DR. 2	DR. 3		DR. 4		BALANCE															
	Oct. Bal																			96	57														
Nov	P.P.				33	–												15																	
									AR 815. 28/9/17 C&C					3	57																				
									" 839. 12/10/17 "					3	57																				
									" 961 25/10/17 –					3	57																				
DEC	" "				34	10			" 1079. 10/11/17 "					3	57			15.		119	39														
					67	10								14	28			30																	
JAN 1918	P.P.				34	10												15.																	
									AR. 1249. 23/11/17 2 Consolt Bon					12	49.																				
									DN. AR 615. 11/9/17 C&C.					3	57																				
									AR 1423. 21/12/17 2 Con –					7	14					115	29														
			34	10	–	–								23	20	–	–	–	15.																
FEB	"		30	80					Assigned Pay									15																	
									AR. 1869. 24/1/18. C&C.					3	57																				
									" 1592 4/1/18 Jura					3	57																				
			30	80										7	14			15		123	95														
MAR 1918	"		34	10					Assd Pay									15																	
									AR 2009. 14/3/18. C&C Jura					7	14																				
									" 2376 18/3/18 –					7	14																				
			34	10										14	28			15		128	77														

CANADIAN
ASSIGNED PAY AUDITED
AUDIT CLERK
DATE .....

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ~~ENGLAND OR~~ CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:-	1st April 1917	EFFECTIVE DATE:-	
AMOUNT:-	15.00	AMOUNT:-	

NAME:- ANDERSON. MacKenzie

NUMBER:- 931363.

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.

Mrs Samuel Anderson (Father)
Hammonds Plains
Halifax Cty N.S.

Stopped 1-1-19

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:- 2nd Construction Bn

DATE ACCOUNT FIRST OPENED:- 1st April 1917

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			Canada Section

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
9/2/18	662	CFC	[illegible]				
18/2/18	3562	B.A.D.G.	9				
			14 39				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 -	- 10		
	Ledger Bale	73 43		

PARTICULARS OF RENDERING NON-EFFECTIVE:- Discharged to Canada 3/2/18 NR 161 7/2/18 To C = 59.06

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
MAR.	BALANCE FORWARD								128 77		
Apl	Pte	33 -		Ass Pay				15			
				aR 1. 9/4. CFC Jura	3 57						
				aR 263 22/4 — " —	3 57				139 63		
May	P. Pay	33 -			7 14			15 -			
		34 10		Ass Pay				15 -			
				aR 404 9/5 CFC Jura	3 57						
				aR 418. 23/5 - — " —	3 57				151 59		
		34 10			7 14			15 -			
June	P.P.	33 -		b.a.p.				15 -			
				aR 705. 7/6 CFC 5	3 57						
				" 867 27/6 "	3 57				162 45		
		33			7 14			15			
July	P.P.	34 10		BAP				15			
				aR 945. 10/7 CFC 5	3 57						
				aR 1089 25/7 " "	3 57				174 41		
		34 10			7 14			15			
Aug	P.P.	34 10		Can AP.				15			
				CP. 22886 13/8/18 L/N	97 33						
				aR. 1252 10/8. CFC 5	7 14						
				aR 2682 10/8. CFC 5	58 40				30 64		
		34 10			162 87			15			
Sep	P.P.	33		Can AP				15			
				aR 1669 5/9 CFC 5	3 57						
				aR 2014 24/9 "	3 57				41 50		a/a
		33			7 14			15			

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
	Bal. For'd.								41 50		
Oct	P.P.	34 10		Cab				15			
				aR 2283 17/10/18 C.F.C.	3 73						
				aR 2314 26/10/18 ———	3 73				53 14		
		34 10			7 46			15			
Nov	O.P.	33 –		Cab				15			
Dec	P.P.	34 10		aR 2678 11/11/18 C.F.C.	3 73						
				aR 2896 26/11/18 ———	13 06						
				Cab	4 66			15	73 45		
				aR 6562 10/12/18 C.G.B.D	2 73						
				aR 3562 18-12-18. 2 Can 6.	9 73				59 06		
		67 10			31 18			30			
				aR 9. 10-1-19. Endorsed on Tele	9 73				49 33		
					9 73						
				S.O.S. - Canada — 12/1/19	00 18.	25-1-19					

CANADIAN
ASSIGNED PAY AUDITED
AUDIT CLERK
DATE 16/5/19