

REGIMENTAL DOCUMENTS

7353 I

*26/3/19 Pte Austin Louis*

REGT. NO. *931110* UNIT *DD 47*

H. Q. FILE NO.

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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)					<b>DEATH</b>	
1 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category	
1 TRAINING HISTORY SHEET (M.F.W. 113)						
2 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)						
3 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)		<div style="border: 2px solid black; width: 60px; height: 60px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> <span style="font-size: 36px; font-weight: bold;">H</span> </div>			<b>DISCHARGE</b>	
1 DENTAL HISTORY SHEET (M.F.B. 465)					Category	
1 MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					<i>Demob</i>	
1 MEDICAL EXAMINATION (M.F.W. 129)						
1 TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)						
1 PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)						
1 DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)						<b>DESERTION</b>
1 LAST PAY CERTIFICATE (M.F.W. 44)						
1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)						
1 PARTICULARS OF CHARACTER (A.F.W. 3226)						
1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)						
1 <i>MPN 192</i>						
1 <i>CO 6 5009 A</i>						
1 <i>DMS. 1375</i>						
1 <i>was sent</i>						
1 <i>in 20.67</i>						
1 <i>p.c.</i>						
					<i>14.10</i> <i>33-10</i> <i>1</i>	







Card 81K  
27.10.16.

ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? *Austin*
2. What are your Christian names? *Louis*
3. What is your present address? *37 Watson St. West St. John.*
4. In what Town, Township or Parish, and in what Country were you born? *St. John*
5. What is the name of your next-of-kin? *Alice Austin*
6. What is the address of your next-of-kin? *316 Duke St. St. John.*
7. What is the relationship of your next-of-kin? *Mother*
8. What is the date of your birth? *June 8th 1898*
9. What is your Trade or Calling? *Steamer*
10. Are you married? *No*
11. Are you willing to be vaccinated or re-vaccinated and inoculated? *Yes.*
12. Do you now belong to the Active Militia? *No*
13. Have you ever served in any Military Force? *No*  
If so, state particulars of former Service.
14. Do you understand the nature and terms of your engagement? *Yes.*
15. 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, *Louis Austin*, 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.

*Louis Austin* (Signature of Recruit)

Date *Aug. 10th* 1916 *R. R. R. McKeen* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Louis Austin*, do make Oath, that I will be faithful and 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.

*Louis Austin* (Signature of Recruit)

Date *Aug. 10th* 1916 *R. R. R. McKeen* (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 *St. John NB* this *10th* day of *August* 1916

*Ronald J. Hambleton* (Signature of Justice)



Description of Louis Austin on Enlistment.

Apparent Age.....18 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. 3 1/2 ins.

Chest measurement { Girth when fully expanded.....31 ins.  
 Range of expansion.....3 ins.

Complexion.....Colored  
 Eyes.....  
 Hair.....

Religious denominations.  
 Church of England.....CofE  
 Presbyterian.....  
 Methodist.....  
 Baptist or Congregationalist.....  
 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.....Aug 12 1916.

Place.....Pertou

D. M. Murray  
L. F. 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.

Louis Austin.....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.

C. W. Reis Capt.....(Signature of Officer)

Date.....Oct 14<sup>th</sup> 1916.



# CANADIAN EXPEDITIONARY FORCE

## Discharge Certificate

This is to Certify that No. 931110 (Rank) Private

Name (in full) LOUIS AUSTIN enlisted in  
 the 2nd Construction Battalion  
 CANADIAN EXPEDITIONARY FORCE at St. John, N. B. on the 10th  
 day of August 1916.

HE served in CANADA, ENGLAND AND FRANCE.  
 and is now discharged from the service by reason of Demobilization.  
Authority - R.O. 1420 (c)

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

Age 20 years 8 months  
 Height 5 feet 2 inches  
 Complexion Dark  
 Eyes Brown  
 Hair Black

Marks or Scars NIL

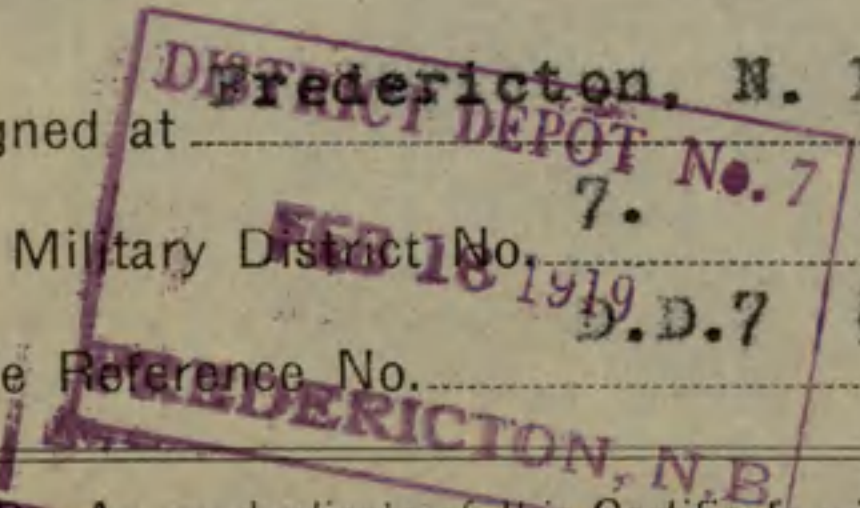
*L. Austin*  
 Signature of Soldier

*W. M. [Signature]*  
 Issuing Officer **MAJOR.**

Date of Discharge FEBRUARY 18, 1919.

O. C. DISTRICT DEPOT NO. 7.

Signed at Fredericton, N. B. this 18th day of February 1919.  
 in Military District No. 7.  
 File Reference No. D.D.7 86-A-112.



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.



CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

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

Unit .....

Address on Discharge .....

Character and Conduct .....

Former Occupation .....

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

Medals and Decorations .....

Remarks .....

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

.....  
Name of Officer

.....  
Rank

.....  
Appointment

On demobilization the particulars called for on the back of this certificate will not be completed.



P. 878.

Extract No.

7

Unit:-

17<sup>th</sup> Rec Bn

Date:-

Reg. No.

Rank

Name

931110

Pte

AUSTIN. L.

Can Sect

Struck off Strength of O.M.F. of C.  
on transfer to C.E.F. Canada.

1427

18-1-19

Acted on

Ledger Ck.



Date of Enlistment

1-4-17

Le 17 contol 3.

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

A

5100

Date of Assignment

Apr 1-1917

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

20	25	30
1-12-17	1-9-18	

P.B. 3257 P.C. 2153 MO. 29301

RATE OF ASSIGNMENT

15			
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PARTICULARS OF SEPARATION ALLOWANCE

No. 931110  
 Rank Pte Promoted Reverted Discharge  
 Soldier's Name Louis Austin  
 Battalion #2 Construction Bn.  
 Beneficiary Mrs Alice May Austin  
 Relationship Widowed Mother  
 Address

PARTICULARS OF ASSIGNMENT

Name Mrs Alice Austin  
 Address 316 Duke St.  
 Change of Address St. John, N.B.  
 1  
 2  
 3  
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total
Sep 30-17		120	90	210
Oct	D57611	20	15	35
Nov.	53396 C	20	15	35 B
Dec	59404 B	20	15	35 B M
1918 Jan/18	60707 F	30	15	45 S
Feb	94809 B	25	15	40 ✓
Mar	91150 A	25	15	40 ✓
April	7890 I	25	15	40 R
May	9257 C	25	15	40 D.
June	17639 B	25	15	40 D.
July	30654 G	25	15	40 C
Aug	33228 G	25	15	40 C
SEP	40867 C	25	15	40 B
OCT	46694 A	25	15	40 A.
NOV	54781 A	25	15	40 -
DEC	63842 A	45	15	60
IAN	73879 B	30	15	45
Feb.		535		

A. 0624-L-1

REMARKS

M.R.O. = 65459 = 30/1/19

M.D #

M. F. W. 128  
400M-6-17-1772-39-1141  
L. L. 22320-M. & D. 7993.

3/1/19 A/c Closed  
 Ret'd per Aquitania  
 Date 25/1/19 F.X. 21/1/19  
 Clerk J.P. Brown









DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

Paymaster's No. .... 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 *Louis* ..... 2. Surname *Austin* .....
3. Rank *Private* ..... 4. Original Unit *1st Can Const Batt* ..... 5. Reg. No. *931100* .....
6. Address, in full, to which future payments of gratuity are to be forwarded *316 Duke St St John N.B.* .....
7. Date of enlistment in the C.E.F. *August 10, 1916* .....
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *Mrs Alice Austin* .....
9. Relationship of such dependent *Mother* .....
10. Address, in full, of such dependent *316 Duke St St John N.B.* .....
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *Not applicable* .....
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:—  
*#2 Can Const Batt Service Overseas from 25/3/17 to 17/1/19* .....
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? *Not applicable in* .....
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service *No* .....
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 *August 10/16 to February 1918 Can Co of Frontier* .....
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* .....



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? *No*
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?
24. Are you now serving in the C.E.F.? *No* *in* If not, give:—(a) Date of discharge *18/2/19.* (b) Reason for discharge *Demobilization*
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 2 Can Const Batt 17/5/17 to 17/12/18*
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 *No 2 Const Batt 17/5/17 to 17/12/18*
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: *L Austin*

Place of Residence: *310 Duke St*

Declared before me at: *Fredrickton NB*

This *18<sup>th</sup>* 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.

*[Signature]*  
 O. C. Discharge Section  
 For O. C. District Depot No. 7.

**POST DISCHARGE PAY.**

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....

Certified Correct.

District Paymaster.



DUPLICATE

931110

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..... *No. 2 CONSTRUCTION Bn. C.E.F.*

(2) Regimental Number..... *931110*

(3) Full Name of Soldier..... *Louis  
Austin*

(4) Place of Birth..... *St John,  
New Brunswick*

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

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

(b) Present Postal Address.....

(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*



(9) Is your Father alive? No

If so, state name and address X

(10) Is your Mother alive? Yes

If so, state name and address Mrs Alice Burns  
316 Duke St. St John, W. I. B.

(11) If your Mother is a widow X

Are you her sole support, or not? 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? X

Have you made arrangements for payment of your Insurance premium X

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

A. D. White Capt' Jr.  
..... Lieut-Col  
No. 2 Construction Batt'n. C. E. F.  
.....  
Officer Commanding.



Date.....



DUPLICATE

MEDICAL HISTORY SHEET

Lewis

Surname Ausku Christian Name Lewis

Examined { on 12 day of Aug 1916  
at Pictou

Approved by D Murray

Birthplace { City or Town St Johns  
County N.B.

Rank St Amed M.O.

Apparent age 18

Trade or occupation Yeoman

Height 5 feet 3 1/2 Inches

Weight 135 lbs.

Chest measurement { Minimum 30 inches  
Maximum expansion 3 inches

Physical development good

Small-pox Marks none

Vaccination Marks { Arm Right Left left  
Number two

When Vaccinated last 1 3 years

(a) Marks indicating congenital peculiarities or previous disease none

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

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
<u>30/3/17</u>		<u>D Murray</u> M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>18/10/16</u>	<u>S.P.R.</u>	<u>D Murray</u> M.O.
<u>1/11/16</u>	<u>S.P.R.</u>	<u>D Murray</u> M.O.
<u>12/11/16</u>	<u>S.P.R.</u>	<u>G A Dunn</u> M.O.

Enlisted on 10<sup>th</sup> day of August 1916 at St Johns. N.B.

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment		<u>931110</u>		<u>8/12/16</u>
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 Service, on the man becoming non-effective; the date and cause being stated on next page.











DENTAL HISTORY SHEET

PATIENT'S NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHYSICIAN'S NAME: \_\_\_\_\_

INSTRUCTIONS



# 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. 931116 Rank PTE Surname AUSTIN  
(Given name in full)

Louis

Unit or Corps D. D. No. 7 Birthplace St. John N.B.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 137 lbs. Height 5 ft. 2 in. Colour of Eyes Brown  
 Nutrition Good  
 Pulse 88  
 Condition of arteries Soft  
 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

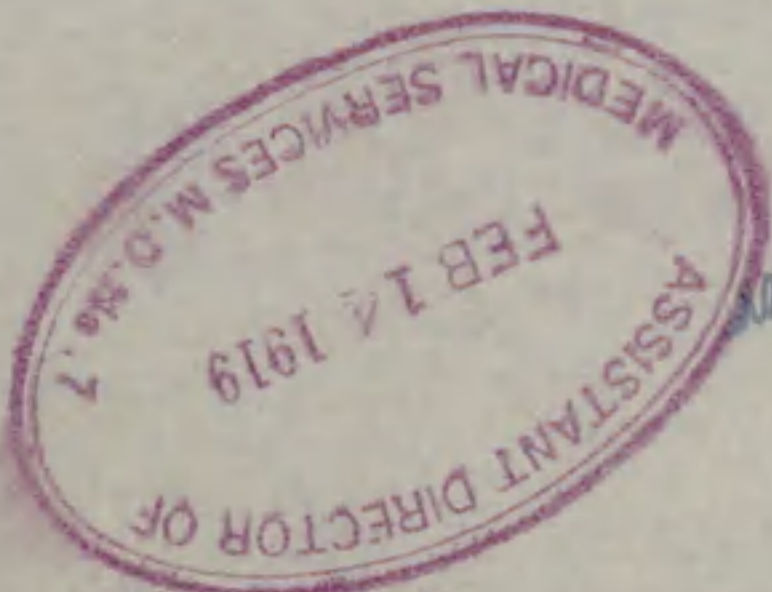
2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)

Nervous System No Genito Urinary Sytem Yes 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.

V. D. G. 22-2-18 to 15-4-18.

Cured  
F. J. Smith Capt. C.A.M.C.  
O/C V.D.



Attention of Medical Officer



**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 *Sudbury, Ont.* (Canada)

Date *14-2-19* ..... Signed *J. B. Moore 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 *L. J. ...*

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

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



[OVER]



**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 AUSTIN Surname L.  
 Unit or Corps 2<sup>nd</sup> Const. Bn. 17<sup>th</sup> Res. (If a soldier) Regtl. No. 931110.  
 Born at St John N.B. on, date 8<sup>th</sup> June 8<sup>th</sup> 1900  
 Signature (for identification) R. Munton

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

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

Weight 150 lbs. no  
 Height 5 ft. 4 in.

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. ? 1016 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

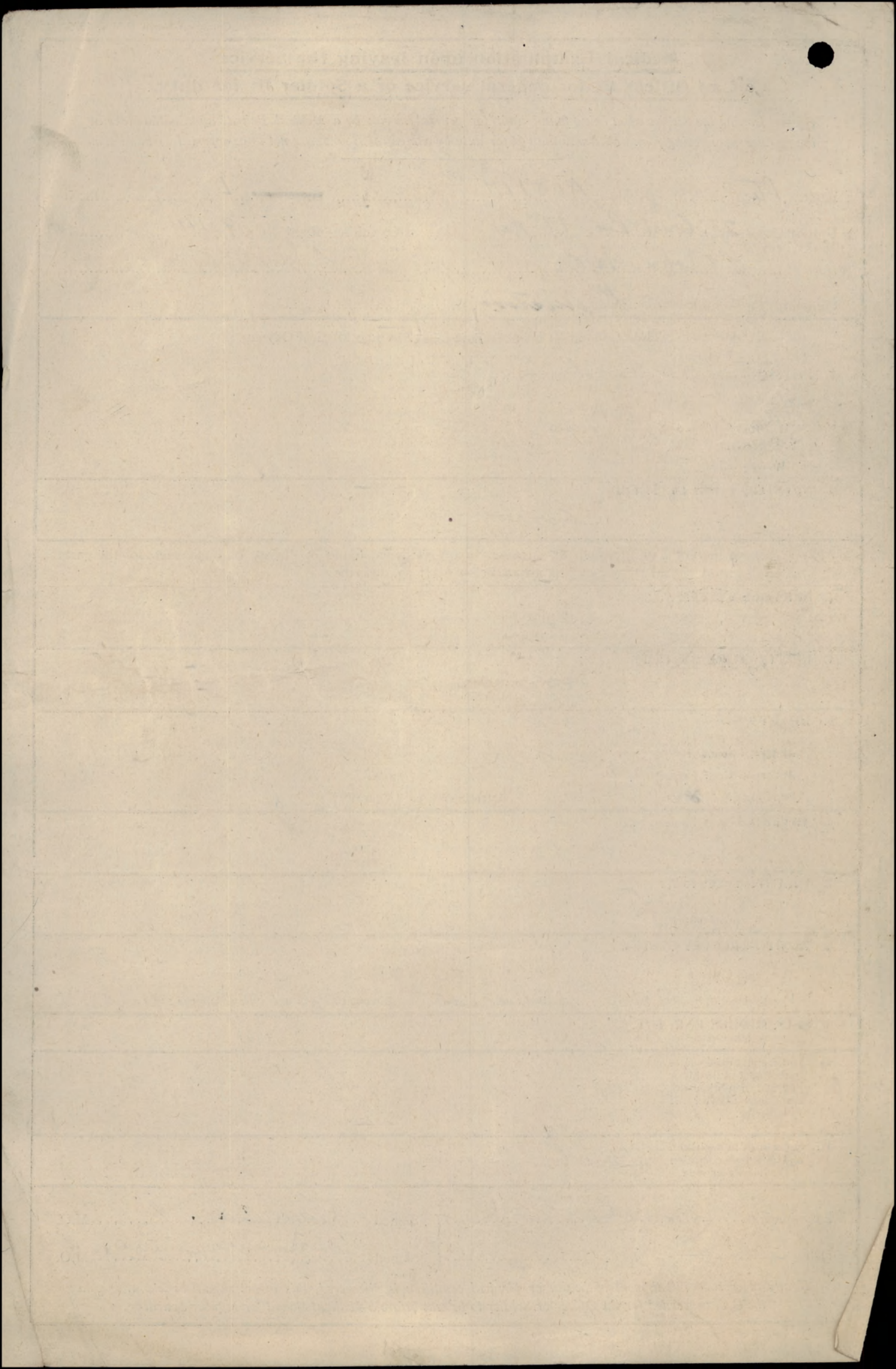
11. Opinion as to the health and physical condition of the one examined?

Good

Examined at Kennel Park { Signed J. H. Munton M.O.  
 Date 2-1-19 { Signed W. H. Munton 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.







**CANADIAN EXPEDITIONARY FORCE.**

M.F.W. 44.  
1183 (D.P.) 250M.-12-18.  
1772-39-903.

**LAST PAY CERTIFICATE**

Regimental No. 931110 Rank Pte Name Austin Louis  
(Surname first)  
Unit ..... who was\* Wisc  
On 18-2-19 191....., to.....  
\*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-2-19 to 18-2-19 191...  
the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month .....		39 79
Regimental Pay..... <u>18</u> days at \$ <u>1.00</u> c.....		18 00
Field Allowance..... <u>18</u> days at \$ <u>10</u> c.....		1 80
Separation Allowance .....		18 00
Clothing Allowance .....		35 00
Post Discharge Pay .....		100 00
*Other Credits .....		
Advances .....		
Separation Allowance and Assigned Pay Cheque No. <u>8606</u> <u>paon 1<sup>st</sup> Pay. W. S. G.</u>	48 00	
*Other Charges <u>C. H. V.</u>	2 25	
Balance on transfer or on discharge, cheque No. <u>9308</u>	162 34	
Total .....	<u>212 59</u>	<u>212 59</u>

\*Give particulars.

A monthly stoppage of \$ 15.00 (†) has been paid (‡) been paid on account of  
Assigned Pay for the month of Jan 191..... }  
and Separation Allowance for month of Feb 191..... } (to) Assignee Mrs. Alice Austin  
+ 1<sup>st</sup> Pay. W. S. G. (Address) 316 Duke St. St. John  
(†) 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.**

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

**REMARKS:—**

State (1) date of enlistment ..... married or single.....  
(2) Separation Allowance, entitled or not Yes (3) Reason for discharge Must  
(4) Authority for discharge or transfer V. D. #7 18/19

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer or soldier.

Date 17-2-19  
Place St. John

[Signature]  
Paymaster District Depot No. ....  
Paymaster.

N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916.  
(B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.  
(C) For purpose of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. As payment of the balance will have been made, the words "on transfer or" will be deleted.  
(D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificates will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.







# CANADIAN ARMY DENTAL CORPS, O.M.F.C. DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) AUSTIN L

REGIMENT 2nd Can Construction Pte No. 931110

Date of Examination in England 6-1-19 Date of Examination in France \_\_\_\_\_



### PRESENT DENTAL REQUIREMENTS

- 1. FILLINGS 5, 8, 9, 29, 31
- 2. EXTRACTIONS 19
- 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
- (b) In England
- (c) In France

*No*

KINMEL PARK,  
NORTH WALES.

Signature of Dental Officer W. H. Havel Capt

### 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.



93110

AUSTIN  
2nd term contribution  
PT

8-1-19

8-1-19

3



MILITIA AND DEFENCE  
 ASSIGNED PAY  
 OVERSEAS CONTINGENTS

To Whom *Mrs Alice Austin,*  
 Address *316 Duke St.,*  
*St. John,*  
*N. B.*

By Whom Assigned *Austin, Louis*  
 Regtl. No. *931110-*  
 Rank *Pte*  
 Corps *2 Construction Btn.*

Rate *\$15.<sup>00</sup>*

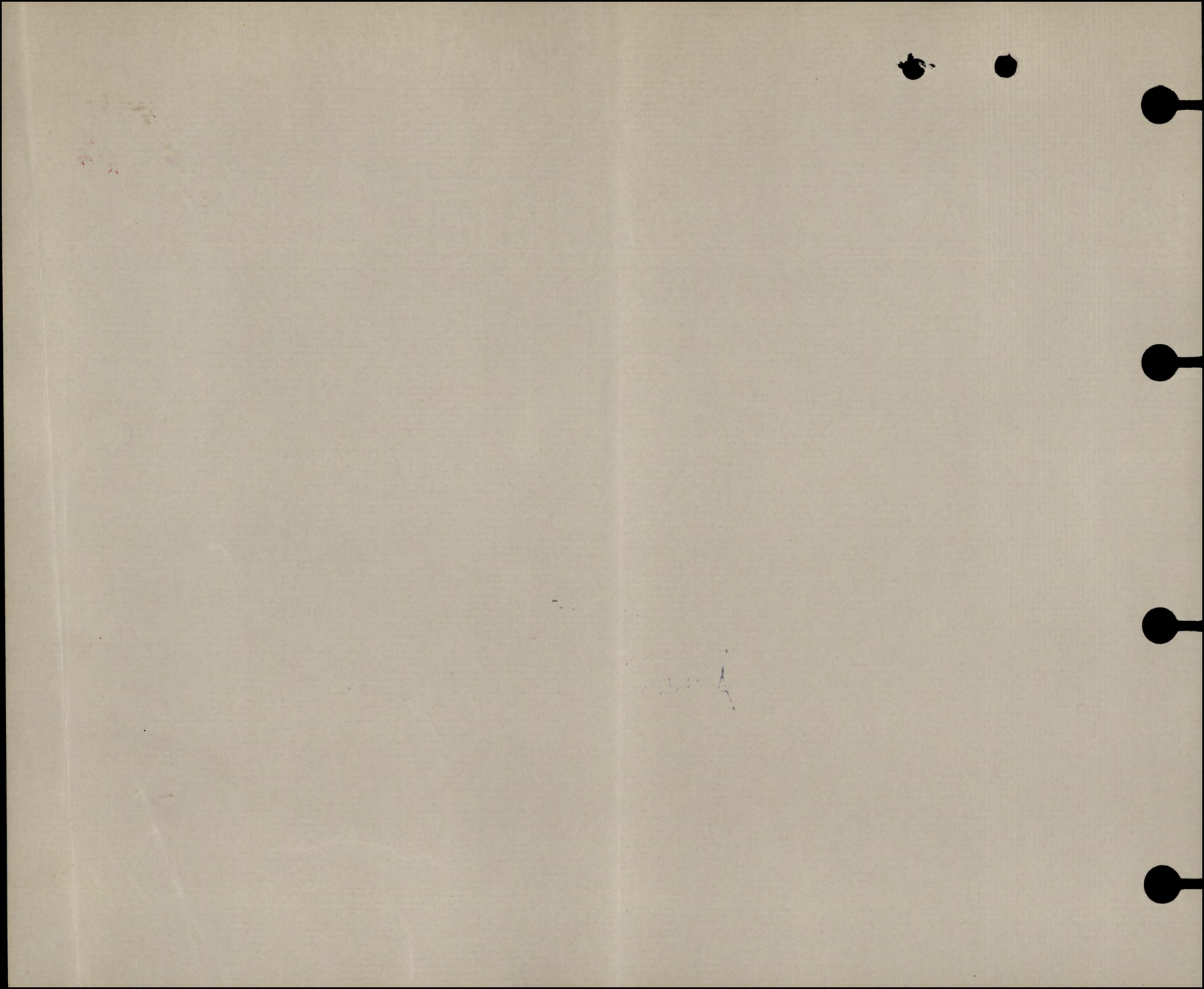
*APR 1917*

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				









ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.  
(Assignee)

*Mrs Alice Austin.*

Name of Soldier

*Austin, Louis*

PAYMENTS.

*931110 - Pte - 2 Const. Btn.*

L. L. Job 5470—Req. 6888.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		<i>Z 4660</i>	<i>15</i>	
May		<i>R 6141</i>	<i>15</i>	<i>15-7/8</i>
June		<i>S 13340</i>	<i>15</i>	<i>15.00</i>
July		<i>S 20247</i>	<i>15</i>	<i>B.</i>
Aug.		<i>T 27238</i>	<i>15</i>	<i>2</i>
Sept.		<i>A 34150</i>	<i>15</i>	<i>25 90.00 1/11 ✓</i>
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

*\$15.00*

*APR 1917*

*CCY.*



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.				



SEPARATION ALLOWANCE

Name *Mrs Alice May Austin*

Name of Soldier *Austin Louis*

Address *316 Duke St.  
St John  
N.B.*

Regtl. No. *931110*

Rank *Pte*

Corps *# 2 Construction Battalion*

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

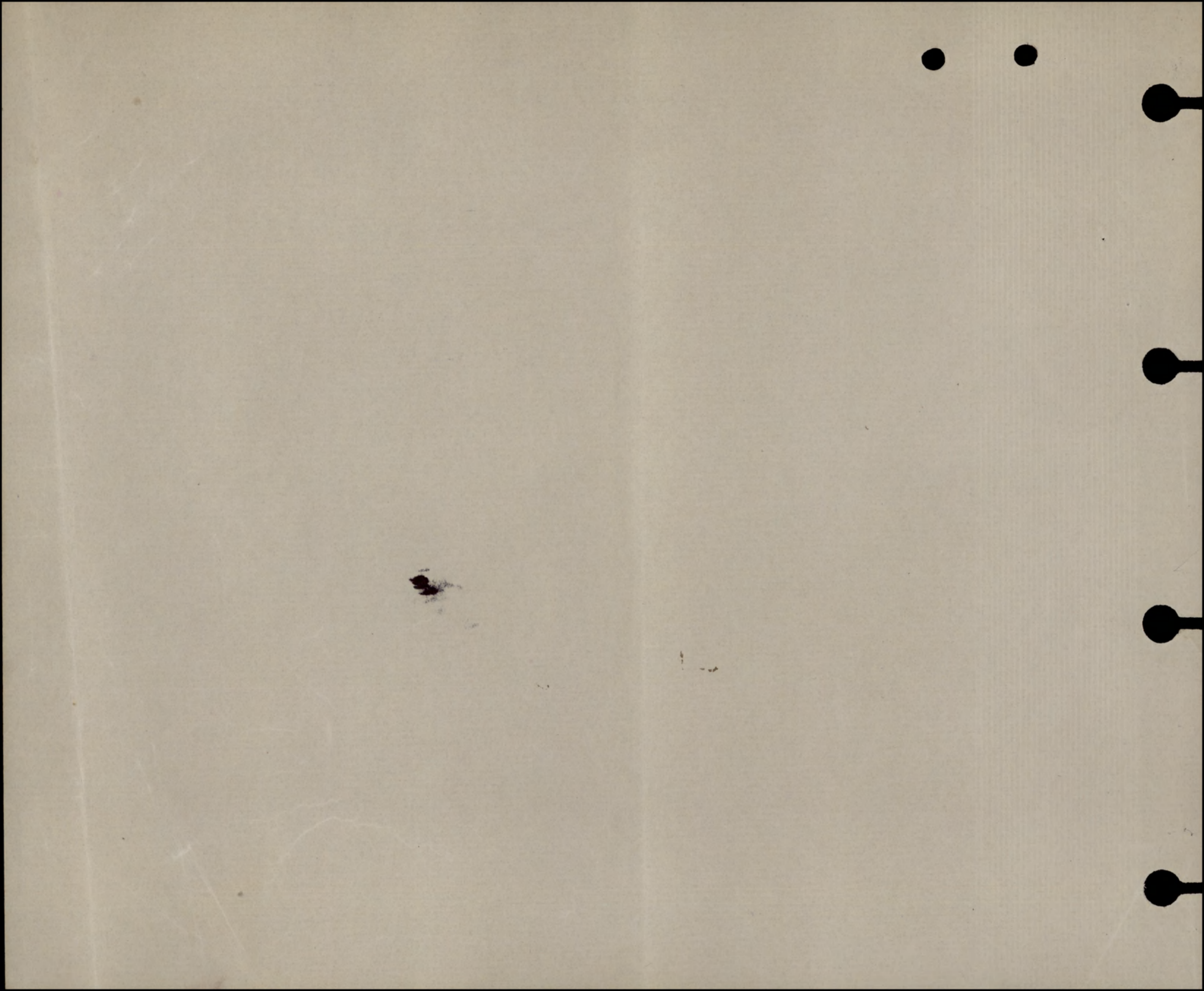
To what Corps belonging }  
when called out } ✓

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				









1-4-17  
MILITIA AND DEFENCE  
**ASSIGNED PAY**  
OVERSEAS CONTINGENTS

M. F. W. 12a.  
50m.-6-16.  
1772-39-819.

Sheet No. 2.

L. L. Job 4503. -Req. 6362.

*Mrs Alice May Austin* *to mother*  
**PAYMENTS.**

Name of Soldier

*Austin Louis*  
*Pte 931110. # 2 const Batten*

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July		<i>A 6047-</i>	<i>80</i>	<i>80 mailed 4/7/17</i>
Aug.		<i>L 13267</i>	<i>20</i>	
Sept.		<i>K 16660</i>	<i>20</i>	<i>120<sup>40</sup> F.M. ✓</i>
Oct.			<i>20</i>	<i>m</i>
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				



MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier \_\_\_\_\_

**PAYMENTS.**

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				



*N. Austin*

J. Pl Rank                      Name                      AUSTIN, Louis.                      Reg'l No.                      931110.

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

Place and Date of Enlistment                      St. John. N. B. 10th Aug. 1916.                      Place of Birth                      St. John. N. B.

Name and Address, Next-of-Kin                      Alice Austin.                      Relationship                      Mother.

316 Dulse St. St. John. N. B.                      Relationship                      Mother.

Assigned Pay Monthly \$                      Payable to                      Relationship

Separation Allowance \$                      Payable to                      Relationship

Discharge, Date and Place

Reason

Character

H. W. V., Ld.—9546-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
<i>etc</i>					
		Arrived in England via S. J. Southland		7.4.17	
29.8.17		SOS to USRD		17.5.17	Pl 125 (USRD Pro 96 11/17)
14.7.17		7th Res. Att. from 26th Res. Bn.		17.5.17	Pl 118 + Pro 28 2/17
10.7.17	17. Res.	attach from USRD	Bramshott.	6.7.17	Pl 100.162. + Pro 119 of USRD 8/17
1-10-17	"	leaves to be att'd from USRD	"	1-10-17	— 233 + Pl 207 of 5/17 USRD
9-10-17	USRD	SOS to 26th Res Bn.	Whe B'shott.	9-10-17	Pl 210
15.10.17	17th Res.	TOS from 26th Res. Bn.	"	15.10.17	Pl 239 of 9/17 26th Res.
19.4.18		SOS on board to Lt. Col.	"	19.4.18	Pl 245 + Pl 244 26th Res. (50 C.F.C.)
29.5/18	USRD	SOS to 2nd Const Coy	"	28.5/18	Pl 128 O on Gen Pro 36 6/18
16-12-18	USRD	TOS from 2nd Coy	"	14-12-18	Pl 305 + 71 2/19-12-18
27-12-18	USRD	TOS to C.O.O. Rhye	"	27-12-18	Pl 313

CHECKED  
JUN 1918



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.				
31. 1. 19	2nd Col.	<p>sentenced 7 days            2d no 1 for 100 a.s.            (1) Breaking away from troop train while enroute for B.C.D.            (2) Being in Paris without authority            Chaining 18-1-19 M.D. 7.</p>	St. Field	17. 10. 18	<p>Pl. 11. 1.            Hq. to. used for SOS to Canada            16/19</p>
		Sol to can		18-1-19	M.S.A.O-1
24-7-19	N.S.R.S.	<p>Beases on/c to G.S.S. Rhye. + Pte. Wittery            SOS. of this Dept. to G.E. Hbanada            M.D. 7.</p>		18-1-19	S.O. 171.



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 No. 2. Construction Batt. C.E.F. ✓  
 Regimental No. 931110 ✓ Rank pte ✓ Name Louis Austin Louis ✓  
 Enlisted (a) 10-8-16 ✓ Terms of Service (a) period of war ad ~~Sept months of 10-8-16~~ Service reckons from (a) 10-8-16  
 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) Teamster

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				
<del>19/5/17</del>	<del>CO's Court</del>	<del>Embarked at Canada</del>	<del>Halifax N.S.</del>	<del>25/3/17</del>	
<del>19/5/17</del>	<del>CO's Court</del>	<del>Disembarked, England</del>	<del>Liverpool</del>	<del>7/4/17</del>	
<del>19/5/17</del>	<del>CO's Court</del>	<del>Proceeded Overseas</del>	<del>Seaford</del>	<del>17/5/17</del>	<del>Pt 2 Sgt</del>
<del>MAY 23 1917</del>	<del>7th Res Bn</del>	<del>attached from 2nd Const. Co.</del>	<del>Seaford.</del>	<del>18-5-17</del>	<del>B D Pt 4 - 123</del>
<del>27-9-17</del>	<del>7th Res Bn</del>	<del>ceases to be attached from 26th Res Bn</del>	<del>Seaford</del>	<del>13-9-17</del>	<del>Pt 232 of Burlington bop's adj</del>
29.8.17	2nd Const Coy	SOS to NCRD.	B'shott.	17.5.17.	Pt 125.
10.7.17.	17th Res.	att'd from NCRD	"	6.7.17	" 162
1-10-17	"	ceases to be att'd from NCRD.	"	1-10-17	" 233.

*J. W. Jackson*  
 LIEUT:  
 FOR LT: COL: I/C RECORDS, C.O.M.F.

(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]



Austin L. 931110.

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				
11/16/17	H. P. D. D.	I.O.P. reported to depot co.	Bramshott	11/16/17	Pt. II 96
6/17/17	"	On bond to 1st Reg. Inf.	"	6/17/17	Pt. II 119
5/10/17	"	Rel'd. from command	"	5/10/17	Pt. II 207
9/10/17	"	P.O.P. to 26 Reg. Inf.	"	9/10/17	Pt. II 210
11/12/18	A.A.G.	Trans. to England + posted to N.S. Regt Depot	Bramshott	11/12/18	<p>DRACKSON FOR CAPTAIN &amp; ADJUTANT, NOVA SCOTIA REGIMENTAL DEPOT. K.R. 344</p> <p>ba Jewett Lieut. for Lt.-Col., A.A.G. Canadian Section, C.I.O. 3rd Deton. S.E.F.</p>
12-12-18	N.S.R.D.	T.O.S. and attached to 2nd C.C.D. for Q <sup>1</sup> 9 Rations.	Bramshott	14/12/18	D.O. 305
	NSRD	ON COMMAND TO <u>DD Kimmel</u>	BRAMSHOTT		PART II D.O. <u>NSRD 313</u> 27/1/18
<del>10-17-18</del>	<del>NSRD</del>	<del>T.O.S. M.O. Rhyll</del>	<del>Bramshott</del>		<del>ba Knight</del> LIEUT. OFFICER in RECORDS, NOVA SCOTIA REGTL. DEPOT. <del>DOP 115 263</del>



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				
9/10/17	O.C. 20th Res. Bn.	Taken on Strength	Bramshott	9/10/17	D.O. PART II No. 239
15-10-17	O.C. 26TH RES. BN.	STRUCK OFF STRENGTH on transfer to 17th Can Res Bn.	Bramshott.	15-10-17	D.O. Part II No. 244 Wm. M. ... Cap. ...
15 OCT 1917	O.C. 17th Res. Bn.	Taken on Strength	Bramshott	15/10/17	D.O. Part II No. 245
19-4-18	O.C. 17th	SOS on transfer to Gen. For. Corps. Sunningdale.	Bramshott.	19-4-18	Pt. 11. Order. 9B. M. M. ...
29.5.18	O.C. C.F.C. TOR Base Depot, C.F.C.	S.O.S. BASE DEPOT C.F.C. SUNNINGDALE on transfer to 2 Const. Co. France.	Sunningdale	19.4.18	Pt. 11. D.O. 95 PT. II. DO. NO. 128 C.F.C. Mayford
29.5.1918	6465	Having arrived in France as recruit in 2nd Co. 2nd Can Contn Coy.	Contn Coy.	29.5.18	MR. RR. 674 NO. 367 June 1918
3-6-18	Dr	Left for unit	Sld	3-6-18	LR 1253
8-6-18	Dr unit	Joined unit	Sld	6-6-18	B213
18.7.1918	Dr unit	10 day sp No 1. 16.7.18 for using insubordinate language to his superior officers	Sld.	15.7.18	B2069 NO 45 of Aug 1918

CERTIFIED CORRECT  
5 JUN 1918  
CAN. RECORDS, LONDON



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

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

# Casualty Form—Active Service.

250M.—1-16.  
H. Q. 1772-38-920.

Unit, Regiment or Corps 2nd Construction Corps  
 Regimental No. 931110 Rank Pfc Name AUSTIN, Louis  
 Enlisted (a) 2-8-16 Terms of Service (a) Duration of War Service reckons from (a) 2-8-16  
 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) Seaman

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				
		<del>Embarked Halifax</del>	<del>25-3-17</del>		
		<del>Disembarked Liverpool</del>	<del>8-4-17</del>		
		<del>Transferred to N.S.R.D.</del>	<del>Bramshott</del>	<del>22-5-17</del>	<del>Part 11 Order 16</del>
		<del>N.S.R.D. attached to 17th Bn</del>	<del>Bramshott</del>	<del>6-7-17</del>	<del>" " 62</del>
2-10-17	O.C. 17th.	Cease to be attached on return to N.S.R.D?	Bramshott	1-10-17	Part 11 Order 234.
5/10/17	N.S.R.D.	Rel'd from bond & posted to Depot Co.	Bramshott	1/10/17	Part II 207
9/10/17	"	P.O.P. to 26 Feb. Dem.	"	9/10/17	Part II 210

*Mickson Rv.*

FOR O.C. NOVA SCOTIA REGIMENTAL DEPT.

*Suppression*

(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]



# SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103-1.  
Part I.

(1)*Substantive rank *Acting rank * [To be entered in pencil to facilitate alteration.] (4) Surname (5) Christian Names (6) Army Form, number of, Attestation } Form or Record of Service paper } (7) Whether of British or of Alien origin [vide A.C.I. 578 of 1918] (8) Date of birth as stated on enlistment (9) (a)	(2) Regiment or Corps	(3) Regtl. No.
---	-----------------------	----------------

(10) Enlistment (b) (12) Service reckons from (date) (14) Any subsequent variations (if any) } of conditions of service }	(11) Engagement (c) (13) Special conditions (if any) of enlistment (d)
--	---

Initials and Rank of  
an Officer.

(Authority)

(date)

(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) (Record of Occupation in Civil life (vide Army Order 93 of 1917)
				Industrial Group No. Trade or Calling Married or Single Particulars of Trade Test  Occupation Cards despatched on (date) Second Occupation Card despatched on (date)

(17) Next of Kin (18) Demobilizer (f) (19) Pivotal-man (f) (20) Qualifications (g)	(Place) (Date) or (21) Corps trade and rate	(Signature of Posting Officer)
---	---	-----------------------------------

(22) Extended {	(23) Re-engaged {
-----------------	-------------------

(24) Miscellaneous entries:—

**NOTES.**—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [vide A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoing-smith, &c.

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W1889-PP1150 1M 5/18 G.W.P.Co (3490)



(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received.	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer

28-12-18 17<sup>th</sup> Res

Attached C.C.C. Kimmel Park for return to Canada Part II Orders No. 5. Ceases to be attached C.C.C. Kimmel Park on embarking for Canada, Part II Order No: 18

18-1-19 MD7

*Phumaway*  
For of Commanding in D 7 Wing, Kimmel Park Camp.

Lieut

H. M. T. 'AQUITANIA'  
EMBKD. LVP' E. JAN. 18, 1919  
DEBKD. HALIFAX. N. S.,  
JAN, 24, 1919

18-1-19 England

TAKEN ON STRENGTH DD #7 Flon NB PART II. ORDER No. 29

29-1-19

*W. Rand Newall*  
Capt, & Adjnt,  
For O. C. District Depot No. 7.

"DISCHARGED" FROM HIS MAJESTY'S SERVICE

Auth R 01420

18-2-19

W SQ #41 (18-2-19 Flon NB 18-2-19

*W. Rand Newall*  
Lieut.  
O. C. Discharge Section  
For O. C. District Depot No. 7.

Nothing to be written in this margin.



SURNAME

CHRISTIAN NAME OR NAMES

REG. NO.

*Austin. L.*

*931110.*

RANK

UNIT

Co.

TROOP

BATTY.

*Pte.*  
HOSPITAL

*N.S. 17R.*

DATE OF ADMISSION

*Can. Spec. Witley.*

*23. 7. 18.*

HOSP.

1.

HOSP.

2.

HOSP.

3.

HOSP.

4.

DIAGNOSIS

*N.O.G. 1/2*

1.

2.

3.

DISPOSITION

*Dis. 15. 4. 18.*

DATE

REMARKS

*Ch 27. 7. 18. C. 145.  
18. 4. 18 @ 185.*

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



EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

2.

3.

4.

5.

6.

7.



LOCAL

\*Name AUSTIN Lewis Rank Pte. Regtl. No. 931110

Original unit No. 2 Cons Present unit #2 Cons. # M. or S. Age 21 Religion C.E. Fyle Depot 86-A-112 Ref. H.Q.

Port, ship, and date of arrival Halifax, AQUITANIA 24-1-19

Next of kin Mother Alice Austin, 316 Duke St., St. John, N.B.

Address on leave As Above

Address on discharge

Transportation issued Yes No Date Character on discharge

Previous occupation Teamster Date and place of enlistment 10-8-16 St. John, N.B.

Diagnosis Nil Date of Medical Boards

Date. T.O.S.	Remarks	Pt. 2 Order No.
18-1-19	Casualty Coy. 24-1-19 Leave 26-1-19 to 8-2-19	#29 co. 29
18-2-19	<i>To Discharge Section</i>	<i>co 49</i>
18-2-19	<i>Dis. N.M.S. F.D.S., N.B. D.S.P. #41</i>	<i>(18-2-19)</i>

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



Date.

Remarks.

Pt. 2 Order No.

M.F.W. 192.  
60M.—3-18 (D.P. 353).  
1772-39-1243.



From Halifax per J.S. "Southland" 28-3-17.

MARRIED

SINGLE

yes.

WIDOWER

TRADE OR CALLING

Teamster

RELIGION

Church of England

DESCRIPTION.

APPARENT AGE

18

YEARS

—

MONTHS

HEIGHT

5

FEET

3 1/2

INCHES

CHEST MEASUREMENT

31

INCHES

EXPANSION

3

INCHES

COMPLEXION

Colored

EYES

—

HAIR

—

DISTINGUISHING MARKS

not stated,

MEDICAL EXAMINATION.

PLACE

Pictou, N.S.

DATE

Aug. 19<sup>th</sup> 1916

Present Address:— 37 Watson St., West St. John, N.B.



SURNAME.

*Austin*

7  
4  
CARD NO.  
*80/18279 Memob*  
*NO. 49 of FOLL 75-2-19*  
*71010*

CHRISTIAN NAMES

*Louis*

REGL. No.

*931110*

RANK

*Pte.*

UNIT

*No. 2 Construction*

*Bn.*

FORMER CORPS

*nil.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

*Austin, Mrs. Alice*

RELATIONSHIP TO SOLDIER

*mother*

ADDRESS

*316 Duke St., St. John, N.B.*

COUNTRY OF BIRTH

*Canada*

*St. John, N.B.*

DATE

*June 8<sup>th</sup>, 1898*

PLACE OF ATTESTATION

*St. John, N.B.*

DATE

*Aug. 10<sup>th</sup>, 1916*

*o/s 28-3-14.*

*o/c 25-1-19 258 Pte*  
*723*



MAR 3 1092

DESP.

REGN. NO 5A12-76.



att  
700

~~Pte.~~  
Pte.

Number 931110

Rank

Surname AUSTIN

Christian Name Louis

Units b.o.R.e.l.e. Theatre of War France.

Date of Service 29-5-18

Remarks

Latest Address 316 Duke St  
St John, N.B.

Roll No.

10m.-8-21.M P Page 22154



LIST NO.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
C145.	Leaw. Spec. Witley Camp.	23-2-18.	V. W. G. (N.S. Reg.)
C185.	" " "	15-4-18	" " "



NAME *Austin L.*

REGT'L. No. *931110*

RANK AND CORPS *Pte.*

H. Q. FILE NO 649

CABLE

*17th. R.*

FOLLOWS

No.

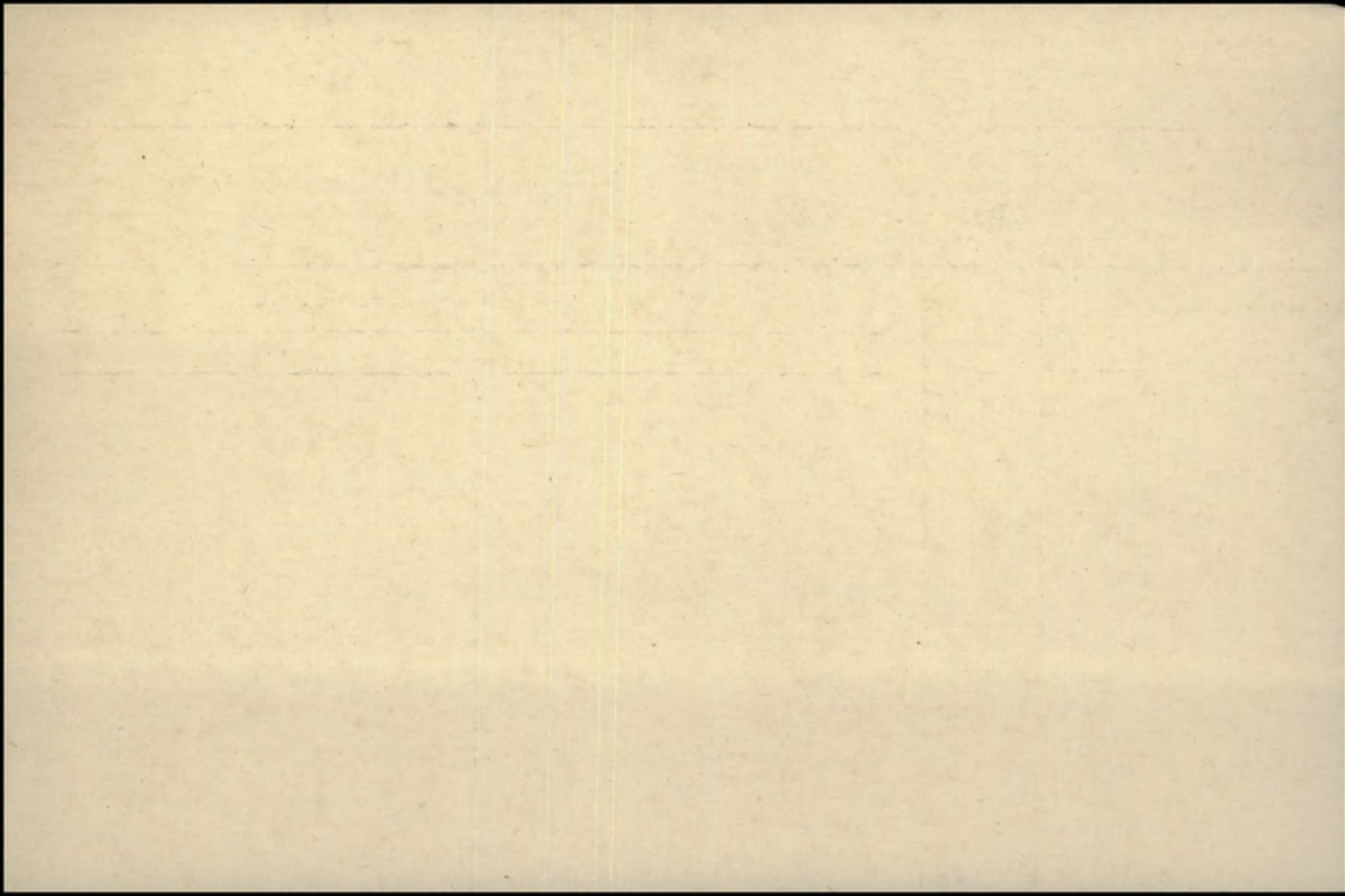
DATE

NATURE OF CASUALTY

No.

FOLLOWS







No. 931-110 RANK Pte.

NAME Austin Louis.

T. O. S. 10-8-16  
D. O. H. 14-8-16

UNIT No 2. Construction Battalion

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Aug 10	1916 Aug 31	n.		
	Sept.	n		
	Oct.	n		
	Nov.	✓		
	Dec.	✓		
1917 Jan	1917 Feb.	✓		
	Mar	n		



Reg. No. 931110 Name Austin, L.

Rank Pte. Corps 2 Instruction Age 17 Service

Ledger No. Serial No.

HOSPITALS

DATE

DIAGNOSIS

HOSPITALS	DATE	DIAGNOSIS
Gen. Hosp. Bruno H.S.	7-3-17	hemorrhoids
dis. to duty	25-3-17	



**HOSPITALS****DATE****DIAGNOSIS**

M. F. W. 2553.

50M-6-19.

1772-39-1332.









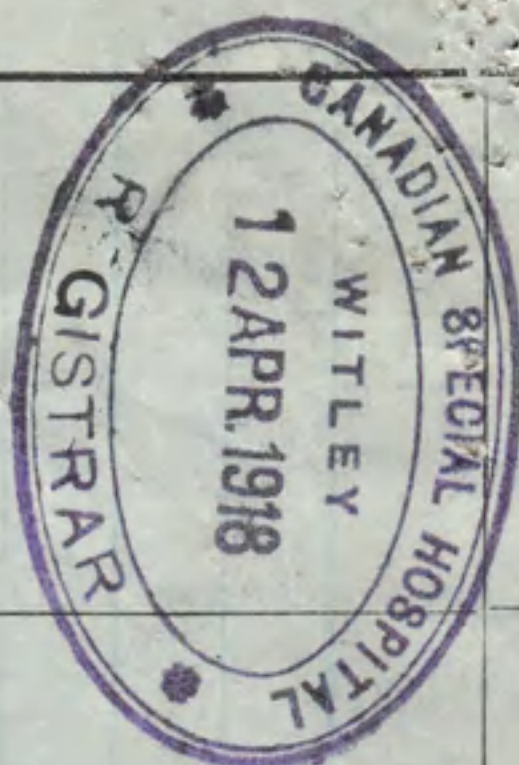






Surname AUSTIN

Christian Name Louis



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 administered; if not, the general 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		
				22	2	18	15	4	18		
				Scurvy						53	Approximate and approximate dates
											W.H. Power Capt

Temporary. H-4-1-9 K

Army Form B. 178.

To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Austin Christian Name L.

TABLE I.—GENERAL TABLE.

Birthplace .. Parish S. John County New Brunswick

Examined .. .. on 12 day of August 1916

at S. John N.B.

Declared Age .. .. 18 years .. .. days.

Trade or Occupation .. .. Teamster

Height .. .. 5 feet 3 1/2 inches.

Weight .. .. .. lbs.

Chest Measurement { Girth when fully Expanded 31 inches.

{ Range of Expansion 3 inches.

Physical Development .. ..

Vaccination Marks { Arm .. .. Right .. .. Left .. ..

{ Number .. ..

When Vaccinated .. ..

Vision .. .. { R.E.—V=  

{ L.E.—V=  

(a) Marks indicating congenital peculiarities or previous disease .. .. (a)

.. ..

(b) Slight defects but not sufficient to cause rejection .. .. (b)

.. ..

Approved by .. (Signature) D. J. Mc Kay

(Rank) Med

Medical Officer.

Enlisted .. .. at S. John, N.B.

on 10 day of August 1916

Joined on Enlistment .. ..

Transferred to .. ..

Became non-effective by .. ..

on .. .. day of .. .. 191 ..

(Signature) .. ..

(Rank) .. ..



Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
Chichester Military	4	5	17	11	6	17	hemorrhoea.	36	Injections & Iodine	<i>[Signature]</i> CAPT-RAMC



# M.D. No. 7

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

AUDITOR: [Signature] PAYMASTER: [Signature]

M. OR S.

REGT. No. 931110

RANK P6

NAME (IN FULL) Austin, Louis

NEXT OF KIN Alice Austin Mother

PARTICULARS EFFECTIVE DATE AUTHORITY

ORIGINAL UNIT C.E.F. 2nd Coon Bn IF IN P.F. WHAT UNIT? "Aquitania" 25-1-19

ADDRESS 316 Duke St. St. John NB

PLACE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

IS SEPARATION ALLOWANCE PAID? Yes DATE EFFECTIVE 10-8-16

ASSIGNED PAY \$ 15.00 DATE EFFECTIVE No 2 W.W. 1-2-19

TO WHOM PAID See A.P. RELATIONSHIP

PAYABLE TO Mrs Alice Austin, W. Mother RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS

ADDRESS 316 Duke St. St. John NB

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE Fredericton DATE 18/2/19 REASON Demob. AUTHORITY S.O. 49 IF ENTITLED TO POST DISCHARGE PAY

5 x 100 = 500

BALANCE FROM PREVIOUS ACCOUNT

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	CREDIT	DEBIT	CREDIT	
Dec						29 09												39	09	Credit Bal Enq. & P. 7.1-12-18
Jan	31	1.10	34 10	11 20	30 00	75 30				9 73	4 87	30 00			43 00		94 60	39	79	Credit Bal 31-1-19. S.O. A.P. Paid by 00 or Sub. 26-1-19. W-10-2-19. D.O. 29
Feb	18	1.10	19 80	18 00	35 00	72 80				162 34			48 00		2 25		212 59	100 00		59 81 64
					500	500									30 70		100	400		not paid as above
															30 70		100	300		Ball 602, 6108 - 1/19
															30 70		100	200		393244-39245-19/4/19
															30 70		100	100		OK 3852707 ad. 4/19
															894		894	9106		DN 57918. AF 10 26/19
															30 61 06		91 06			Non-effective
						500 00	500 00										500 00	894 150 00	341 06	500 00















\* Strike out whichever is applicable.

ASSIGNED PAY.	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.
EFFECTIVE DATE: 1/4/19		EFFECTIVE DATE: -	
AMOUNT: 15 <sup>00</sup>		AMOUNT: -	

NAME: **AUSTIN Louis**  
NUMBER: **931110**

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 Alice Austin  
316 Duke St. St John N.B.  
(Mother)*

PARTICULARS OF RANK OR APPOINTMENT		
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		<i>Private</i>

*Stopped Effect 1/1/19*

UNIT AND TRANSFERS			
AUTHORITY	DATE EFFECTIVE	DATE LOGSHEET T'S'D	UNIT TRANSFERRED TO
			<i>2 Const Bn</i>
			<i>1/4/19</i>
			<i>U.S.R.D.</i>
			<i>2 C Const Bn</i>

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
<i>12/1/18</i>		<i>7 Sup Ar #1</i>	<del><i>7/10</i></del>				

DAILY RATES OF PAY AND ALLOWANCES				
AUTHORITY	PAY	F.A.	P.F.A.	SUBSCE ALL'CE
	<i>1 00</i>	<i>10</i>		

PARTICULARS OF RENDERING NON-EFFECTIVE: *Discharge 1/1/19 Auth U.S.R.D. Non Rec 161-7/1/18 Ld file 59-09 Ld file 66-79*

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
<i>March 31</i>	<i>Balance forward</i>								<i>23 26</i>		
<i>Apr</i>	<i>Pd pay</i>	<i>33</i>		<i>Can ar</i>				<i>15</i>			
				<i>IRB 27/4/18 to 1/4/18 53d cloe 1/89 1/4/18</i>		<i>31 80</i>					
				<i>Q 263 18/4/18 17<sup>th</sup> Rm</i>	<i>6 31</i>						
				<i>4/10 115 26/4/18 "</i>	<i>4 87</i>				<i>1 72</i>		
		<i>33</i>			<i>11 18</i>	<i>31 80</i>		<i>15</i>			
<i>May</i>	<i>PP</i>	<i>34 10</i>		<i>Can</i>				<i>15</i>			
				<i>AR B 582 Bn 14/5/18</i>	<i>4 87</i>						
				<i>AR B 802 - 25/5/18</i>	<i>4 87</i>				<i>7 64</i>		
		<i>34 10</i>			<i>9 74</i>			<i>15</i>			
<i>June</i>	<i>PP</i>	<i>33</i>		<i>Can</i>				<i>15</i>			
				<i>AR 716 2 Const Bn 7/6/18</i>	<i>3 57</i>						
				<i>AR 867 2 Const Bn 27/6/18</i>	<i>3 57</i>				<i>18 50</i>		
		<i>33</i>			<i>7 14</i>			<i>15</i>			
<i>July</i>	<i>PP</i>	<i>34 10</i>		<i>Can</i>				<i>15</i>			
				<i>AR 945 10/7 CFB 5</i>	<i>3 57</i>				<i>34 03</i>		
		<i>34 10</i>			<i>3 57</i>			<i>15</i>			
<i>Aug</i>	<i>PP</i>	<i>34 10</i>		<i>Can ar</i>				<i>15</i>			
				<i>10 days P.F. 18/7/18 using the insubordinate language to his sup. off</i>		<i>11 00</i>					
				<i>AR 45 2 con 7/8/18</i>							
				<i>AR 1252 10/7 CFB 5</i>	<i>3 57</i>						
				<i>AR 4005/450 25/5/18 CFC</i>	<i>1 46</i>						
				<i>AR 4005/131 7/5/18 CFC</i>	<i>9 55</i>						
				<i>AR 1479 25/8 CFB 5</i>	<i>3 57</i>				<i>23 98</i>		
		<i>34 10</i>			<i>1 8 15</i>	<i>11 00</i>		<i>15</i>			
<i>Sep</i>	<i>PP</i>	<i>33</i>		<i>Can ar</i>				<i>15</i>			
				<i>AR 1669 5/9 CFB 5</i>	<i>3 57</i>						
				<i>AR 2014 2/9</i>	<i>3 57</i>				<i>34 84</i>		
		<i>33</i>			<i>7 14</i>			<i>15</i>			



NUMBER 931110

RANK

Plc

NAME

AUSTIN

Louis

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
				Brothwards					3484		
Oct	P.P.	3410		cab				15			
				AR 2283 19/9/18 b4c	373						
				AR 2314 26/10/18 b4c	373			15	4648		
		3410			746						
Nov.	P.P.	33-		cab				15			
Dec		3410		AR 2678 11/11/18 etc	373						
				AR 2896 24/11/18 b4c *5	1306						
				cab				15	6679		
		6710			1679			30			
				Sent to 7 day 11*1. 12/11/19 20/11/19		770					
				AR 268 10-1-19 End. on 10/19	973				4936		
					973	770					



112

Regtl. No. 931110 Rank Private  
 Name AUSTIN Lewis  
(Christian Names in full) (Surname)  
 Unit 17<sup>th</sup> Res Regt. No 2 Construction  
or Corps

Next of kin Mother

Intended place of Residence S<sup>t</sup> Johns NB

**COVER**

**FOR**

**DISCHARGE DOCUMENTS.**

Occupation Steamster

# 7

Service in France 9 months

Category A1

DISTRICT DEPOT No. 7  
 DISPATCHED  
 FEB 20 1919  
 File No.

H. M. T. 'AQUITANIA'  
 EMBKD. LVR'E. 11 V. 13. 1919  
 D. BKD. HALIFAX. N S.  
 JAN. 24. 1919



## List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263	Attestation Paper Militia Form W. 23
Squadron } Battery } Company }	or
	Particulars of Recruit " W. 133
Conduct Sheet, " B. 263a	Proceedings on Discharge " B. 218
or	
Field Conduct Sheet " W. 178	
Copies of Convictions, by C. P. in MS.	
Med. Hist. Sheet, Militia form B. 313	In the case of recruits who are rejected on final approval, the discharge documents will consist of
Casualty Form " W. 54	(a) Proceedings on Discharge.
Medical Report for Invalid§ " B. 227	(b) Attestation.
Dental History Sheet " B. 465	(c) Medical History Sheet.
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.

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.*

This space to be for numbers.

## Proceedings on Discharge.

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

No.	931110
Rank	Private
Surname	AUSTIN
Christian name	LOUIS
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	District Depot No. 7,
Date of discharge	February 18th, 1919.
Place of discharge	Fredericton, N. B.
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age.....20.....years.....8.....months.	Descriptive marks "NIL"
Height.....5.....feet.....2.....inches.	
Complexion Dark	
Eyes Brown	
Hair Black	
Trade Teamster	
Intended place of residence   316 Duke St., (To be given as fully as practicable.)   St. John, N. B.	
2. The above-named man is discharged in consequence of Demobilization	
Authority for discharge.....R.O. 1420 (c).....	
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.	
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)

DISTRICT DEPOT No. 7  
FEB 18 1919  
FREDERICTON, N.B.



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)..... Fredericton, N. B. *L. M. Wilson* (Signature of Soldier.)

(Date)..... February 17th, 1919. *H. P. Thoburn* (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)..... Fredericton, N. B.

(Signature)..... Major

(Date)..... February 18th, 1919.

O.C. DISTRICT DEPOT NO. 7.

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.)

List of Discharge Documents. Includes fields for Date of enlistment (10-8-16), Date left Canada (25-3-17), Date returned to Canada (25-1-19), Service in Canada, England and France, and Disability (None). Signed by *L. M. Wilson*.