

REGIMENTAL DOCUMENTS

NAME *BAILEY WALTER* REGT. NO. *300756* UNIT *6A RD* H. Q. FILE NO. *1431*

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DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
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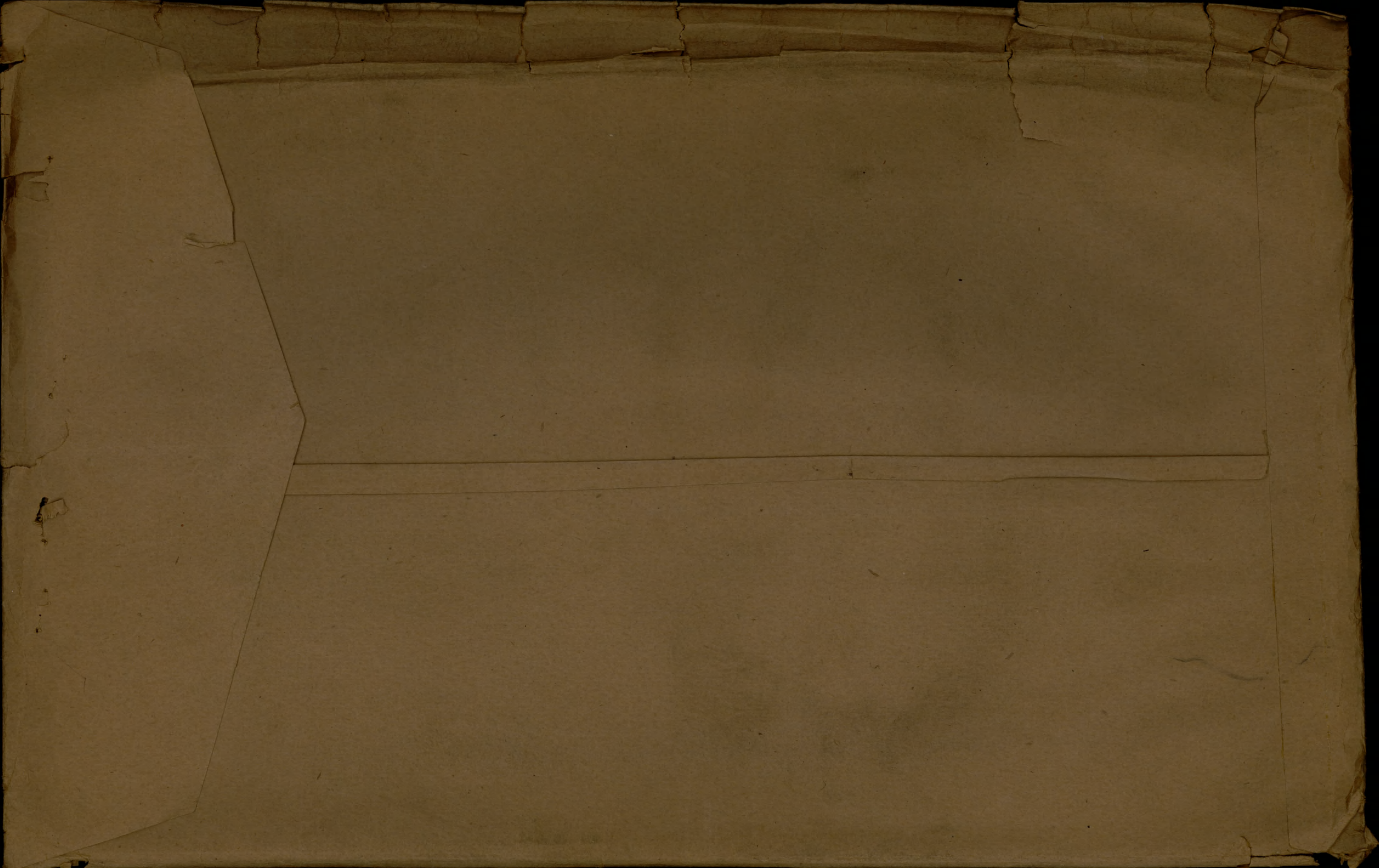
DOCUMENTS ON
RECORDS

Box #
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AO-15-351

COMMANDING FORCES
COMMISSIONS CENTRE
RECORDS SECTION
ROOM



17-6-16
Canada
P

ATTESTATION PAPER.

No. 10
Folio. 1

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... Walter Bailey
2. In what Town, Township or Parish, and in what Country were you born?..... Sherbrooke P.Q.
3. What is the name of your next-of-kin?..... John Bailey
4. What is the address of your next-of-kin?..... 255 London Street Sherbrooke P.Q.
5. What is the date of your birth?..... June 14 1897
6. What is your Trade or Calling?..... Quebec Central Shops
7. Are you married?..... no
8. Are you willing to be vaccinated or re-vaccinated?..... yes
9. Do you now belong to the Active Militia?..... no
10. Have you ever served in any Military Force?..... no
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement?..... yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?..... yes

Walter Bailey (Signature of Man).
E. A. Robertson (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Date Aug 14 1915 Walter Bailey (Signature of Recruit)
E. A. Robertson (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Walter Bailey, do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Date Aug 14 1915 Walter Bailey (Signature of Recruit)
E. A. Robertson (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 Sherbrooke Que. this 17th day of August 1915

Duncan Mackinnon (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

R. H. Fletcher (Approving Officer)

Description of Walter Bailey on Enlistment.

Apparent Age 18 years 2 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. 6 ins.

Chest measurement { Girth when fully expanded 35 1/2 ins.
 Range of expansion 2 1/2 ins.

Complexion light

Eyes grey

Hair brown

Religious denominations { Church of England
 Presbyterian +
 Wesleyan
 Baptist or Congregationalist
 Other Protestants
 (Denomination to be stated.)
 Roman Catholic
 Jewish

none

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 14 1915

Place Sherbrooke

E. A. Robertson Leut AMC
 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.

Walter Bailey 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.

R. H. Fletcher (Signature of Officer)
Major

Date Aug 14 1915

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 300756 (Rank) Gunner

Name (in full) Bailey, Walter enlisted in

the 35th Battery, Canadian Field Artillery

CANADIAN EXPEDITIONARY FORCE at Sherbrooke, P.Q. on the 14th

day of August 1915

HE served in France

and is now discharged from the service by reason of Demobilization.
~~Medical Unfitness.~~

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

Age 21 years, 10 months

Height 5 ft. 6 in.

Complexion Light

Eyes Grey

Hair Brown

Marks or Scars Large pigmented

wart on chest

Bailey, W.
Signature of Soldier

Date of Discharge



Issuing Officer

[Signature]
Rank Lieutenant
Date April 7 1919

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Bailey Christian Name Walter

Examined { on 14 day of Aug 1915
 at Sherbrooke
 Birthplace { City or Town Sherbrooke
 County Sherbrooke

Approved by E. Robertson
 Rank Lieut AMC M.O.

Apparent age 18
 Trade or occupation Quebec Central Ry Ship
 Height 5 Feet 6 Inches
 Weight 126 Lbs.
 Chest measurement { Minimum 33 inches
 Maximum expansion 35 1/2 inches
 Physical development fair
 Small-Pox Marks none

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

Vaccination Marks { Arm Right Left 0
 Number 0
 When Vaccinated last 0

Date	Result	VACCINATIONS.
<u>7/8/15</u>		M.O.
		M.O.
		M.O.

(a) Marks indicating congenital peculiarities or previous disease none

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>7/8/15</u>		<u>J. H. ...</u> M.O.
<u>22/9/15</u>	<u>Good</u>	<u>W. M. Carrick</u> M.O.
<u>6/10/16</u>	<u>1cc</u>	<u>... Reid</u> M.O.

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

Enlisted on 14 day of Aug 1915 at Sherbrooke

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>35 Dogwood</u>			
Transferred to..	<u>Batter CFA</u>	<u>300756.</u>		
	<u>1st D.A.C</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>entirely</u>	<u>28/2/19</u>		<u>A. B. ...</u>

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

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.

WITLEY

No. 300756 Rank Gunner Surname Bailey
(Given name in full)
Walter
 Unit or Corps CARD Birthplace Sherbrooke Que.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 126 lbs. Height 5 ft. 6 in. Colour of Eyes Grey
 Nutrition Good
 Pulse 74
 Condition of arteries Good
 Vision Rt. 6/6 Left 6/6
 Hearing (conversational voice) Rt. 21 ft.
 Left 21 ft.

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

Large pigmented wart on chest.

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.

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Walter (Overseas)
Date 28/19 Signed [Signature] 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. Bailey
(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

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

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

Canadian Printing and Stationery Services, London

DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block Letters) BAILEY, W.

REGIMENT CARD. RANK CNR. No. 300756

Date of Examination in England 3-3-49 | Date of Examination in France _____

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



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 7-8-9-10-13-20
2. EXTRACTIONS 2-4
3. CROWNS
4. DENTURES
 - (a) Full Upper
 - (b) Part Upper
 - (c) Full Lower
 - (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? No

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

- (a) In Canada
- (b) In England
- (c) In France

[Signature]
 D. R. S. M. S. No. 4

Signature of Dental Officer W. H. M. S. Capt.

B. E. L. W.

300702

W. B.

CARD

300702

1-2-10-13-21

to

Handwritten signature

The Trustees of the

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY. S

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

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, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

1. Christian names Walter Scott 2. Surname Bailey
3. Rank Gunner 4. Original Unit 35th Battery 5. Reg. No. 308756
6. Address, in full, to which future payments of gratuity are to be forwarded

16 Elmwood Ave
Sharnbrook Que.

7. Date of enlistment in the C.E.F. August 1915
14

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

9. Relationship of such dependent

10. Address, in full, of such dependent

11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?

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:—

sw.

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? sw.

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 England Dec/15 - Sept/16
France Sept/16 - Jan. 1919.

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-enlistment and under what regimental numbers and units.

.....
.....
.....

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.

.....
.....

20. Have you been issued with a War Service Badge? If so what class?

21. Have you, during the present war, served in the Imperial Forces?

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.

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?

(b) If so, was such reversion in consequence of misconduct or inefficiency?

24. Are you now serving in the C.E.F.? If not, give:—(a) Date of discharge

(b) Reason for discharge.

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.

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

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?

(b) If so, are you in receipt of full pay and allowances from that Department?

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:

Place of Residence:

Declared before me at:

This 24th day of March 1919

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths under P.C. 2767, dated 11th Nov., 1918.

S. J. Wakeman B.E. Major

POST DISCHARGE PAY.

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

Certified Correct.

District Paymaster

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

Casualty Form—Active Service.

Unit, Regiment or Corps. 35th Battery

Regimental No. 300756 Rank Gnr. Name Bailey Walter
C. E. F.

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

Date of promotion to } Date of appointment } Numerical position on }
 present rank } to lance rank } roll of N. C. Os. }

Extended..... Re-engaged..... Qualification (b).....

Report		Rec rd of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
16-4-19.	O/S	T.O.S. D.D.#4.	Montreal	27-3-19.	D.O.Pt. II#106.
16-4-19.		S.O.S. D.D.#4. Demob.	Montreal	7-4-19.	D.O.Pt. II#106. R.O. 1420.

Thomas W. Ellsley
 Lieutenant,
 Assistant Adjutant,
 District Depot No. 4

(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.

Casualty Form - Active Service

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				

Casualty Form—Active Service.

413.

Bert R.L. 2-2-91
R.S. 8117

300.956. Regiment or Corps 35th Battery Coyd.

Regimental No. 300956 Rank Gunner Name Bailey Walter

Enlisted (a) 14-8-15 Terms of Service (a) Went to 6 mo. Service reckons from (a) 14-8-15

Date of promotion } Date of appointment } Numerical position on }
to present rank } to lance rank } roll of N.C.Os. }

Extended _____ Re-engaged _____ Qualification (b) Mechanic

CORRECT.

Report Date	From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks
30/12/15	O.C. R. Bde.	Taken on strength Reserve Brigade C. F. A. 29-12-15. B. O.	Shorncliffe	29/12/15	30.12.15. Reserve Brigade C.F.A. Pt. II N 242.
		Drafted to France to 1. D.A.C. 4-5 Nov.	SHORNCLIFFE	18/10/16	Pt. II. 263. 18-10-16
20-10-16	C.B.D.	Reinforcement, Attached 1st Can. Div. Amn. Column.	Field	19-10-16	NR. Pt. 2 0.75 d/- 23-10-16.
25-10-16	CRA	Posted to 2nd CFA Bde. 1st Can. Division.	"	19-10-16	9-137. Pt. 2 0. 87 d/- 8-11-16.
		Taken on 2nd Bde 68A	"	20-10-16	9-137 Part II Ord 100 d 8-11-16
30-1-17	90b. CRA ban corps	Transferred to 1st Div. Anti-Aircraft Battery	Field	14-1-17	412-1 KT III-3165 Pt II Ord. no 16-93-2-11)
2-1-17	O/C Unit	Taken on strength A.A. Battalion	"	15-1-17	B213 Pt 2 O. No 1 d 3-2-17

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

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				
24-2-17	% Unit	attached to Can Corps School of Signalling	Field	20-2-17	B 213 Pt 2 O. No 10 d/5-3-17
11-3-17	do	ceases to be attached to Can Corps on reforming Unit	"	9-3-17	B 213 Pt II O. No 13 d/19-3-17
8-9-17	do	Granted 10 days leave	Paris	2-9-17	" " 62 d/17-9-17
15-9-17	do	Rejoined from leave	Field	13-9-17	B 213 " 64 22-9-17
1-7-18	14 Stationary	P. U. C. Adm.	14 Stationary	1-7-18	H. 2024 G. 271
5-7-18	1 Con. Depot.	Sick	1 Con Depot	5-7-18	do G. 258
2-7-18	62 Hd Amb.	P. U. C. Adm 20.6.18	4th C. C. S.	20.6.18	Adm G. 443
6-7-18	1 Con Depot.	Fit.	5 Rest Camp.	6-7-18	H. 2024 G. 557
do	4th C. C. S.	P. U. C. Adm 20.6.18	24 A. S.	1-7-18	Adm G. 690
do	"E" A. A. Coy	to Hospital	not stated.	20.6.18	B. 213
9-7-18	C. G. B. S.	2. C. S. from Boulogne	"A" Etaples	8-7-18	Com. Roll R. + R. 955
8-7-18	St. Martin's Camp	to Base Depot	"A." do	do	do do 230
14-7-18	C. G. B. S.	Proceeded to Can Corps for	Field	14-7-18	do do 2/1214
20-7-18	"E" Coy C. A. A.	Rejoined Unit	Field	18-7-18	B. 213
25-9-18	do	14 Days Leave of Absence	France	24-9-18	do Pt II B. 50/1918
19-10-18	do	Rejoined from do	Field	15-10-18	do
7-12-18	1/3 Low FA	Orchitis 6/12/18	to CCS.	6-12-18	A 361 N 86
7-12-18	57. A. B. S.	do V. D. E.	to 15 Amb Train.	7-12-18	A 361 N 635
8-12-18	51 Gen	V. D. E.	51 Gen. Hosp	8-12-18	W. 3024 - N 880
7-12-18	Unad	Adm. to Hospital	Field	3-12-18	B. 213
13. 1. 19.	C. G. B. S.	Transferred to Eng 7 Posted to Can. Art. Reg. Depot, Borden.		13. 1. 19.	

W. R. Shapell
 Lieut. for Lt. Col., A. A. G.
 Canadian Section, G. H. J. 3rd Echelon

Temporary

SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103-I.
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.
		300756

(10) Enlistment (b)	(11) Engagement (c)	Initials and Rank of an Officer.
(12) Service reckons from (date)	(13) Special conditions (if any) of enlistment (d)	
(14) Any subsequent variations (if any) of conditions of service	(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)	(Place)	(Signature of Posting Officer)
(19) Pivotal-man (f)	(20) Qualifications (g)	(Date) or (21) Corps trade and rate	
(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, Shoening-smith, &c.

Army Form B. 103 (II.) to be gummed on here if required.
 Nothing to be written in this margin.

W1889—PP 1150 1M 5/18 G.W.P.Co (3490)

(A) Report		(B) Authority of Part II. of Orders	(C) 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.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
Date.	From whom received					

25/2/19 CARD Letter Reported by O.C. C.I. BA as T.O.S.
 29-1-19 OC 51-19 NR/5-1-19 Ref 570
 1/2 Records Forfeits FA and is placed under
 Paris Reg stoppage of pay at the rate of 50% per diem
 whilst in hospital from 8-12-18 to
 29-12-18 (22 days) Auth OC 51 Gen No 19
 AFO 1643 D 4-1-19 Ref R/R 9159 d 8/1/19
 PT 110#1 dated 10-1-19

16/3/19 CARD P11 0076 So to Rhy for R 75 Wally 17/3/19
 J. W. Duncanson
 Lt. b.a.d.

17/3/19 205. G.C.C. Kinmel Park for return to Ca
 Part II Order No.

29 MAR 1919

C.C.C. Kinmel Park on
 Embarking for Canada Part II Order No.
 29 MAR 1919
 APR 11 11 AM
 * ANTONIA *

..... Lieut.
 Officer i/o t.....
 No. 4 M.D. Concentration Wing.

Nothing to be written in this margin.

Rank Pte. Name BAILEY, Walter Reg'l No. 300756
 Unit Dft. 35th Bty. to R.B. If in perm. Corps, }
 C.F.A. What Unit? } Married or Single Single
 Place and Date of Enlistment Sherbrooke, Que. Aug. 14th 1915 Place of Birth Sherbrooke, P.Q.
 Name and Address, Next-of-Kin John Bailey,
 258, London Street, Sherbrooke, P.Q. Canada Relationship

Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship

NJE. R.C. No. 1347
 File No. *laund*
 Category

Discharge, Date and Place Reason Character

Date	Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS
	Date	From whom received				
			Arrived in Eng. Pers. Missionarie		27-12-15	
30-12-15		O.B.R. Bde	Taken on Sh. 3rd Bty. Showcliff		29-12-15	PT II O. 242
23-2-16		"	(Conduct to the Prejudice of good order and Military Discipline 1 days pay R.W.)		23-2-16	PT II - O. 46
18-10-16		O/C R Bde, S.O.S	To Ist D A C S-Cliffe		18.10.16	PT 2, O. 265
23.10.16		O/C 1 Bde	Taken on Strength attached	France	19.10.16	95
8.11.16		"	Ceases to be attached posted to 2 nd Bde	"	19.10.16	87
"		" 2 nd Bde	Taken on Strength	"	20/10/16	100
3.7.17		"	Transfd to Anti-Aircraft Bty	"	14/1/17	16
3-2-17		C.A.A.B.	Transf. from 2 nd Bde C.F.A.	Field	15-1-17	Part II O. 1

A.F.B. 103 CHECKED (N.R)
 REMARKS Taken from Official Documents
 2 - JAN. 1917

A.F.B. 103 CHECKED
 23 OCT. 1916
 W.B.

300756

Dailey W

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 Document
Date	From whom received				
5-3-17	b. A. A. Bty	Att ^d to C. Co of Reg ^t for instruction.	Field	20-2-17	Pr. II D.O. No. 10.
19-3-17	"	Ceases to be att ^d to above.	Int	9-3-17	Pr. II D. 13.
20-1-19	CART	T.O.S. from CA. A. Bty	" Bordon	16-1-19	" 20.
17-2-19	Reg. Battery ban A-A	S.O.S. to C.A. R.D. to Canada	Field	13-1-19,	" 9.
				29-3-19	34 - F - 30
7-3-19	CARTS	Imports 26 days pay & arrears 46 days for away.	Int. Wisley	25-2-19	" 66.
8-3-19	CARTS	S.O.S. K. No 4 Rhyl.	" "	17-3-19	" 77.
2-4-19	Now Sing	SOS to Canada.	" Rhyl.	29-3-19	" 80.

Rank *Ite.* Name *BAILEY, Walter* Reg'l No. *300756*
 Unit *Dft. 35th Bty. to R.B., C.P.A.* If in perm. Corps, What Unit? Married or Single *Single*
 Place and Date of Enlistment *Sherbrooke, Que. Aug. 14th 1915* Place of Birth *Sherbrooke, P.Q.*
 Name and Address, Next-of-Kin *John Bailey,*
258, London Street, Sherbrooke, P.Q. Canada Relationship

Assigned Pay Monthly \$ *10⁰⁰ 1.12.16* Payable to *Mr. John Bailey 387 Bowen Ave. Sherbrooke P.Q.*
 Relationship

Separation Allowance Payable to Relationship

Discharge, Date and Place Reason Character

Date		PAY		Field Allowance		Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days			Rate	Amount						
<i>16 12/15</i>	<i>31 1/16</i>	<i>47</i>	<i>1</i>	<i>47</i>	<i>47</i>	<i>10</i>	<i>4 70</i>	<i>10</i>		<i>26 77</i>	<i>10</i>		<i>46 77</i>	<i>14 93</i>	<i>Dec. Arrive</i>
<i>1 Feb. 29</i>		<i>29</i>		<i>29</i>	<i>29</i>		<i>2 90</i>			<i>19 47</i>	<i>10</i>	<i>1 10</i>	<i>30 57</i>	<i>16 26</i>	<i>1st Pay R.W.P.O. #45.23 7/16</i>
<i>1 Mar. 31</i>		<i>31</i>		<i>31</i>	<i>31</i>		<i>3 10</i>			<i>26 76</i>	<i>10</i>		<i>36 76</i>	<i>13 60</i>	
				<i>107</i>			<i>10 70</i>	<i>10</i>		<i>73 00</i>	<i>40</i>	<i>1 10</i>	<i>114 10</i>		<i>127 70</i> <i>114 10</i> <i>13 60</i>

Checked *fuB*

2nd. Contingent

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

To Whom *John Bailey*

By Whom Assigned *Bartley W.*

Address ~~*189 Bowen Ave*~~
16 Elmwood Ave
Sherbrooke, Que.

Regtl. No. *300756*

Rank *Mr.*

Corps *35 Battery C.P. Co.*

Rate *\$ 10.00*

3/6/17
DEC 1 1915

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	<i>Z 8099</i>	<i>10 -</i>	
Feb.		<i>D 13124</i>	<i>10 -</i>	
March		<i>P 15522</i>	<i>10</i>	
		<i>M 12502</i>	<i>10</i>	



Handwritten notes, possibly a list or set of instructions, located in the upper middle section of the page. The text is faint and difficult to decipher.

Handwritten notes, possibly a list or set of instructions, located in the lower middle section of the page. The text is faint and difficult to decipher.

Handwritten notes, possibly a list or set of instructions, located in the lower right section of the page. The text is faint and difficult to decipher.

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.

L. L. Job 89002.-Req. 6213

John, Bailey

Name of Soldier

Bailey

W. 35 Batty Co.

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
				\$ 10. ⁰⁰
April	1916	J 1257	10	-
May		KH474	10	
June		L7606	10	
July		A8127	10	
Aug. ✓		B11592	10	-
Sept.		K 15709	10	
Oct.		K20083	10	
Nov.		K24677	10	
Dec.		C 33483	10	
Jan.	1917	T 36889	10	
Feb.		T42815	10	10 R
March		V 44243	10	10 L
April		J 360	10	10.6
May		T 6253	10	
June		U 12914	10	10.5
July		W 19575	10	by
Aug.		V 26467	10	6
Sept.		U 32738	10	6 \$220. ⁰⁰ NW ✓
Oct.		E47021	10.	
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier.....

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.				

No. 300756 Name Lt. Bailey, W. 1st Batty. Reserve Brigade, C.F.A. Date of enlistment 14/8/15 G.C. Badges }
 Date of last entry in Company, Conduct Sheet } 6.3.16 No. and date of last drunk } Nil. Period not reckoning towards freedom from extra fine }
 Sheet No. ONE. Signature O.C. K. Barrett Character Good
BATTERY LIEUT. Service or Proficiency Pay }

ORIGINAL

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
<u>Shorncliffe.</u>	<u>23.8.16</u>		<u>Nil.</u>	<u>Breaking out of Quarantine from 12.30 p.m. until apprehended by Brigade police. 1.15 p.m.</u>	<u>Gr. Simpson Bdr. Powell Cpl. Wilson.</u>	<u>Remanded to C.O. Reserve Brigade, C.F.A.</u>	<u>30.8.16</u>	<u>K. Barrett LIEUT.</u>	
<u>Shorncliffe.</u>	<u>17.9.16</u>	<u>Gr.</u>		<u>Absent 45 minutes from Town Picquet Parade 4.45 p.m.</u>	<u>Bdr. Springate Cpl. Kent</u>	<u>Forfeited 7 days pay by R.W. 7 days C.B.</u>	<u>18.9.16</u>	<u>K. Barrett Capt.</u>	
<u>SHORNCLIFFE.</u>		<u>Gr.</u>	<u>Nil</u>	<u>behaved correct</u>				<u>Capt</u>	
				<u>Ry Dep</u>					

O/C, I B. RES. B.D.G., C.F.A.

Army Form B. 122

SURNAME

CHRISTIAN NAME OR NAMES

REG. No.

BAILEY.

W.

300756.

RANK

UNIT

Co.

TROOP

BATTY.

Gnr.

C.A. AA.

HOSPITAL

DATE OF ADMISSION

14. Staty. B'logne.

1-7-18.

1 C. D. B'logne.

5-7-18.

1.

57th Cas Coy Stn

HOSP.

6-12-18.

2.

51. S. H. Etaples

HOSP.

8-12-18.

3.

HOSP.

4.

HOSP.

DIAGNOSIS

P.U.O.

1.

Orchitis Lth & V.D.G. 6.

2.

3.

DISPOSITION

dis. 6-7-18.
DATE

C.L. 9-7-18. A288/3.

REMARKS

" 4-1-19

11-7-18 A290-4.

12-7-18 A 291/5.

16-12-18 A 426 (1)

20-12-18 A 430-3.

10-1-19 A 445-2.

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

2.

3.

4.

5.

6.

7.

9295

11.5.15

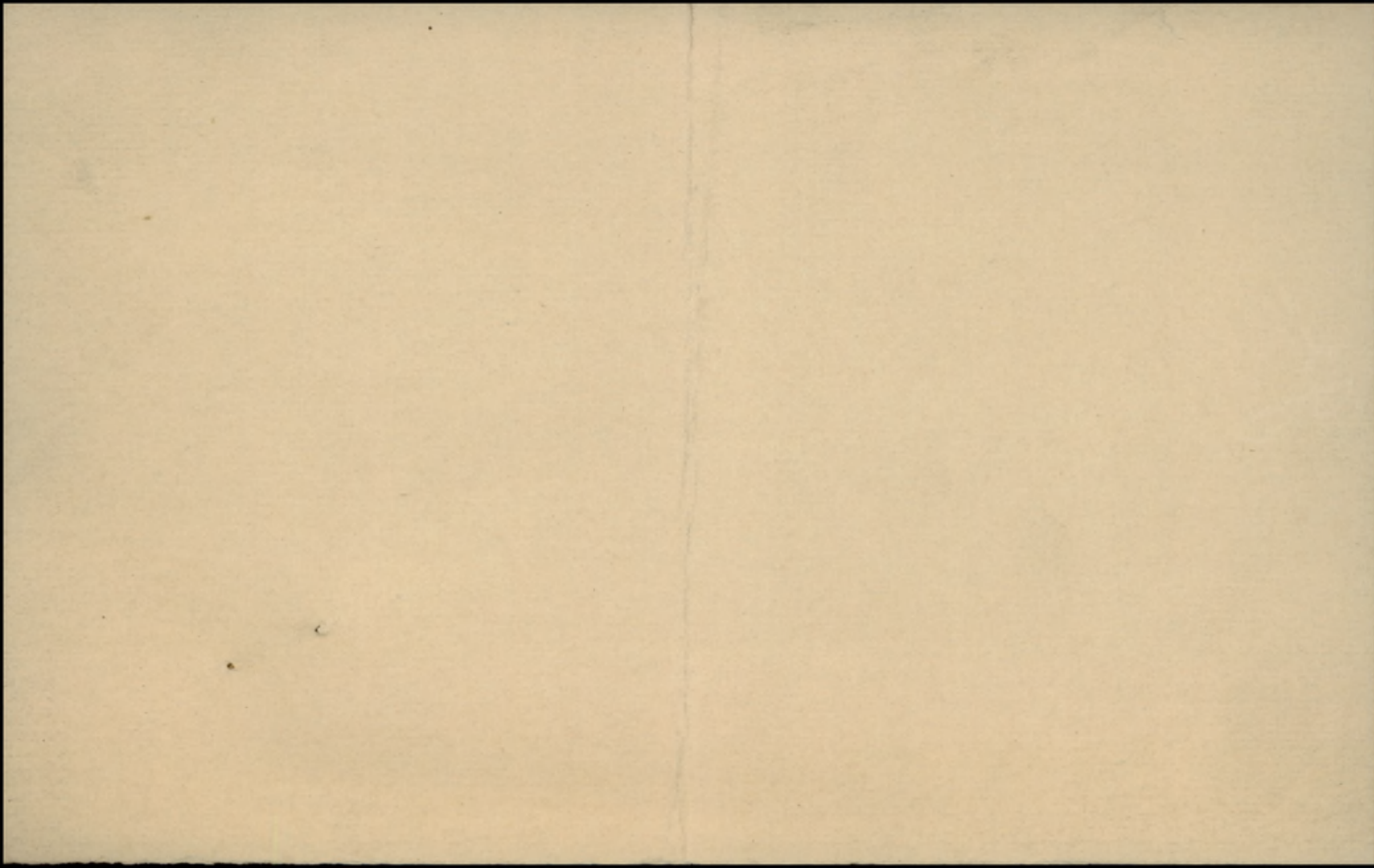
Worsley Hall

8 Canadian I No 1 Co

No 15384 The Bailey W.

gas

DISCHARGED
ON May 25 1915
27 9 Days



Number 300756

Rank Gm

Surname BAILEY

Christian Name Walter

Units C.F.A.

Theatre of War France

Date of Service 19.10.16

Remarks _____

Latest Address Shubrooke, 22 Beckett Road

PO

Roll No. _____

B. Page 202 H.

REGT. NO. RANK NAME

UNIT AGE SERIAL NO. IN A. AND D

TOTAL SERVICE WHERE DATE AND PLACE OF OR
AND HOW LONG

DISEASE OR INJURY

OPERATIONS.....

RESULT OF OPERATIONS.....

(A) DATE OF ARRIVAL AT HOSPITAL AS AN ADMISSION.....

(B) AS A TRANSFER (STATE WHERE FROM).....
NAME OF HOSPITAL

DATE OF DISCHARGE TO UNIT..... IN C

DATE OF DISCHARGE AS AN INVALID.....

DATE OF DEATH.....

DATE OF TRANSFER (STATE WHERE TO).....
NAME OF HOSPITAL

OTHER INDEPENDENT CONDITIONS DIAGNOSED.....

7102
30
MAY 1918

Name **BAILEY** *Walter* Rank *gun.*

Reg. No. 300756

Unit *C.A.A. Bty*Next of Kin *Canada*

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918						
1	7 14 Bty. Boulogne		P-U-O	A 288		2370/11
5	7 1 C.A.A. do		do	A 290		2421-3
6	7 5 Rest Camp		do	A 291		2447-10
6-12	57 C.A.A. Bty Sta	Orchelles		A 425		10283
8-12	51 2nd Detach		do	A 426		6256-16
4-1-19	Discharged		do	A 430		6415/8
				A 445		

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 288	14. Stat Boulogne	1-18	P. W. U.
A. 290	1 Com. Dep Boulogne	3-7-18	P. W. U.
A 291	Discharged	6-7-18	" " "
A 426	57 loge S.	6.12.18.	Orchitis L + 20
A 430	51 Geni Etape	8-12-18	" " "
A 445	Disc	4-1-19	20

NAME

Bailey. W.

REGT'L. No. 300756

RANK AND CORPS

Surg. Gen. Art

H. Q. FILE NO 649

FOLLOWS

NO.

FOLLOWS

CABLE

NO.

DATE

NATURE OF CASUALTY

No. 300756 RANK *Plt.*

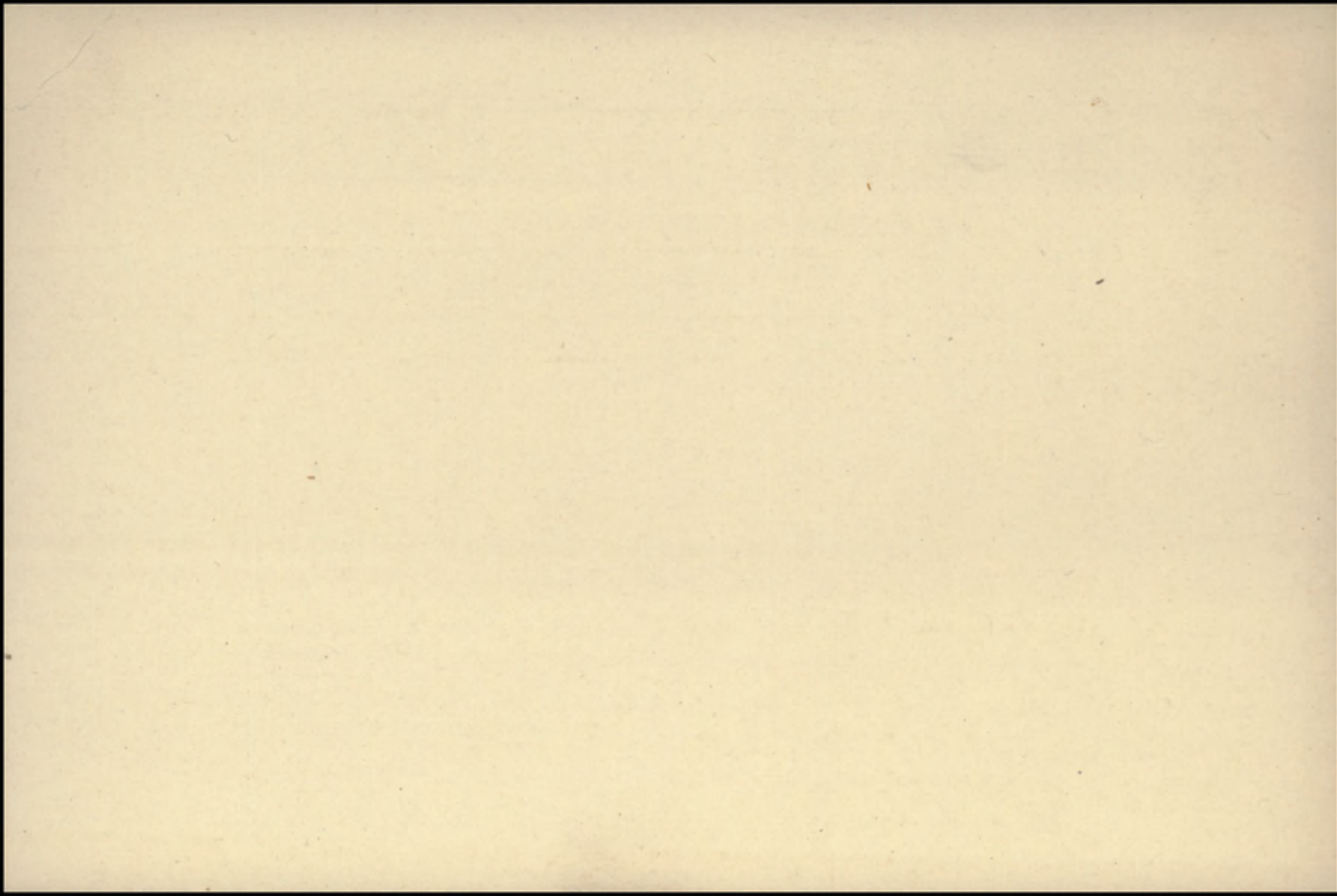
NAME *Bailey W.*

T. O. S. *17-8-15*
202816-8-18

UNIT *35th Battery Co. F. A. H. 1st Howitzer Brigade*

M. D. *11*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915</i>	<i>1915</i>			
<i>aug. 17</i>	<i>aug. 31</i>	<i>✓</i>		
	<i>Sept.</i>	<i>✓</i>		
	<i>Oct.</i>	<i>✓</i>		
	<i>Nov.</i>	<i>✓</i>		
	<i>Dec.</i>	<i>✓</i>		



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

B 405

Dec 1-1918

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

<i>12-</i>	<i>15</i>	<i>per 2m.</i>	
------------	-----------	----------------	--

724121

PARTICULARS OF SEPARATION ALLOWANCE

No. *300756*
 Rank *Dr* Promoted Reverted Discharge
 Soldier's Name *W. Bailey*
 Battalion *35th Batty C. F. A.*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *John Bailey* *father*
 Address *16 Elmwood Ave, Sherbrooke*
 Change of Address
 1 *John J. Bailey, 16 Elmwood Ave, Sherbrooke Que.*
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Sept. 30/1917</i>			<i>220</i>	<i>220</i>	
<i>Oct-</i>	<i>E 47041</i>		<i>10</i>	<i>10</i>	
<i>Nov</i>	<i>B 53933</i>		<i>10</i>	<i>10</i>	
<i>Dec</i>	<i>F 56273</i>		<i>10</i>	<i>10</i>	
<i>1918 Jan 18</i>	<i>N 65475</i>		<i>10</i>	<i>10</i>	<i>Pr.</i>
<i>Feb</i>	<i>B 95382</i>		<i>10</i>	<i>10</i>	
<i>March</i>	<i>A 91722</i>		<i>10</i>	<i>10</i>	
<i>Apr</i>	<i>I 8458</i>		<i>15</i>	<i>15</i>	<i>Mrs. A. 18.3/18</i>
<i>May</i>	<i>C 9550</i>		<i>15</i>	<i>15</i>	<i>D.</i>
<i>June</i>	<i>B 18267</i>		<i>15</i>	<i>15</i>	
<i>July</i>	<i>M 21232</i>		<i>15</i>	<i>15</i>	<i>e</i>
<i>July</i>	<i>A 33821</i>		<i>15</i>	<i>15</i>	<i>C</i>
<i>SEP</i>	<i>A 46696</i>		<i>15</i>	<i>15</i>	<i>C</i>
<i>OCT</i>	<i>A 47315</i>		<i>15</i>	<i>15</i>	<i>A.</i>
<i>NOV</i>	<i>A 55404</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>DFC -</i>	<i>B 66099</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Jan/19</i>	<i>B 74445</i>		<i>15</i>	<i>15</i>	<i>a</i>
<i>FEB</i>	<i>A 81144</i>		<i>15</i>	<i>15</i>	
<i>MAR</i>	<i>D 86664</i>		<i>15</i>	<i>15</i>	
<i>APR</i>	<i>C 3703</i>		<i>15</i>	<i>15</i>	
			<i>475</i>	<i>475</i>	

M. F. W. 128
400M-6-17-1772-38-1141
L. L. 22320-M. & D. 7463.

AUDITED.

A/c Closed *30-4-19*
 Ret'd per *Baron*
 Date *4-4-19* M.F.W. 187 *13-4-19 (M.D.H.)*
H. Richter
M.R.O. 89246



22

29

51457

Class IV -

CO. OF E. SALFORD UNION INFIRMARY.

Religious Creed. _____

Name Walter Bailey Age _____ M. S. W. Legt. or Illegt. Occupation _____

Admitted _____ For _____

Where from _____ Remarks _____

Nearest Relative or Friend } 92 95

Ward 92

Diagnosis gas poisoning

Address _____

Result and Date 21. MAY 1915

Transferred to Worsley Hall.

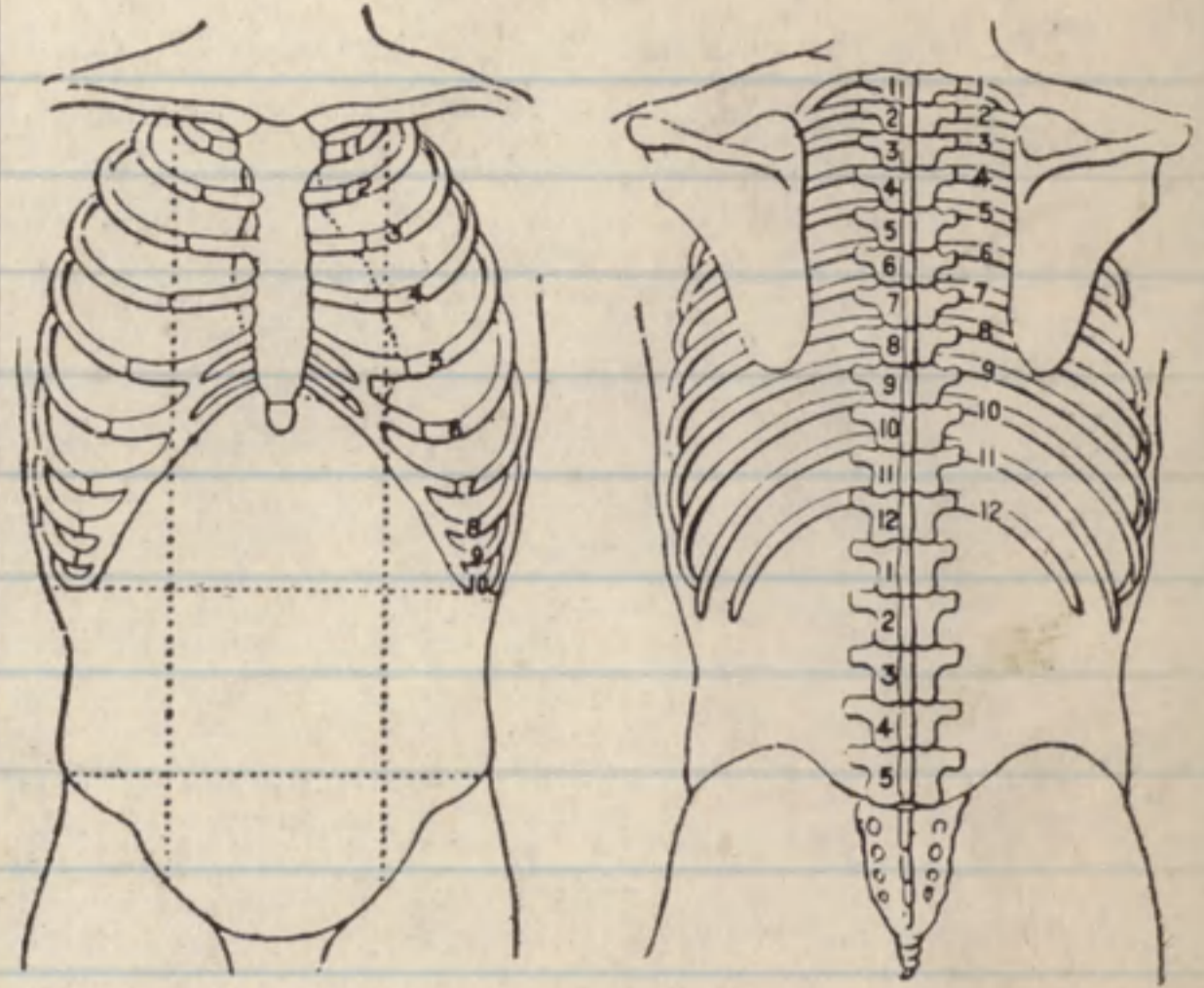
Date 191 <u>5</u>	TREATMENT	Date	Diet	Extras	M.O.
<u>11/5</u>	<u>Ry mist-Tussis</u> <u>3yt 4 lly</u> <u>92.</u>	<u>11/5</u>	<u>1</u>		<u>Cms</u>

Personal and Family History

History of Present Condition

Condition on Admission

T. P. R.



Date	PROGRESS	Date	ANALYSIS OF URINE
-------------	-----------------	-------------	--------------------------

Sp.G. Reac. Alb. Sugar. Bl. Pus. Deposit

In the event of death, apparent cause thereof:

Primary—

Secondary—

NUMBER	RANK	NAME	MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
			Nov	5 Pay	33		cap					13608		
							ab 484	30/11	1119			15408		
							ab 4228	4/12	1866					
			Dec	"	3410		cap		2985		15			
			Jan	"	3410		cap		45		15	16243		
					10120				2985		45			
				Intan Def Pay 3/13/19	1350		Hosp stop 8/12/18 29/12/18							85
							22 Day @ 60 th DoI	3-1-19		1320				
							ab 76	2/1/19	933					
							cap 12720	2/1	973					
							ab 2350	18/1	1460					
							cap 10504	20/1/19	4867					
			Feb	"	3080		cap 15947	25/1	243					
			Mch	"	3410		cap Feb + Mch				30	11287	85	
							ab 576	ChA 28/1	1947					
							26 Day awt	25/1/19 2/2/19. awa						
							25/2/19 Do 66	7/3/19 CalD		5720		3620		
							ab 5365	Conrad 20/3	973			2617		
					7840				11396	5720	30			
			Apr						7040					

8476
1320
30

12796
11287
7717

3570

Los to Conard 29.219
S.L.34 Conard. Mch.

Extract from a.s.s. Do 14-10-16
 Pay restricted to 20% claim for duration of War

ASSIGNED PAY.	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.	NAME:- BAILEY Walter							
EFFECTIVE DATE:-	1 st April 1918	EFFECTIVE DATE:-		NUMBER:- 300756							
AMOUNT:-	15%	AMOUNT:-		PARTICULARS OF RANK OR APPOINTMENT							
NAME, ADDRESS, RELATIONSHIP & AUTHORITY				AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT					
Lt John Bailey (father) 187 Bowen Avenue Sherbrooke P.Q.						General					
Stopped 1 st April 1919				UNIT AND TRANSFERS							
Enc on a.s.s. 30/1/19				ORIGINAL UNIT:- Off to Res Bde							
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS				DATE ACCOUNT FIRST OPENED:-							
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S/D	UNIT TRANSFERRED TO
29/2	5167	CKA	19.47					0016	9.2.17		A A Craft
25/3/19		52 Day Pay + Ullie	57.70								
		Share 57.20	77.7								
PARTICULARS OF RENDERING NON-EFFECTIVE:-				Impk con 3/3/19 Auth NR 3983 WPA-3/3/18 Wtdly MD49 Bde 3522							
MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
31-3-18	Bal. Fnd								192.98	135	
Apr.	f.p.	33		Cap				15			
				ARH 23/4/18	2.68						
				WAR 53 30-4-18	5.35				202.98	135	
		33			8.03			15			
May	f.p.	34	10	A.P.				15			
				AR 90 18/5	2.68						
				.160 30/5	5.35						
		37	10		8.03			15	214.02		
June	h.t.	33		AP				15			
				AR 217 20/6	4.46						
				AR 268 30/6	3.57				223.99	135	
		33			8.03			15			
July	f.p.	34	10	A.P.				15	243.09		
				AR 6117 1/3D 14/7/18	4.46				238.63		
		34	10		4.46			15			
Aug	"	34	10	AP				15			
				AR 134 19/8/18	11.60				246.13	135	
		34	10		11.60			15			
Sept	"	33		A.P.				15			
				1 st loan Dis 1046 24/9/18	10.71				253.42		
				G.D. Paris 9094 28/9/18	35.69				217.73		
		33			46.40			15			
Oct	"	34	10	Cap				15	234.83		
				AR 9654 Paris 20/10/18	46.64						
				AR 10101 5/10	21.44						
				AR 140 8/10	25.19				143.54		
				AR 435 29/10	7.44				136.08		
		34	10		100.78			15			

83-20

MARRIED OR SINGLE *S*

PLACE OF BIRTH *Sherbrooke P.Q.*

NAME AND ADDRESS OF NEXT OF KIN *Mr John Bailey
258 London St. Sherbrooke P.Q. Canada.*

RELATIONSHIP OF NEXT OF KIN

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

REG'L No. *300456* RANK *Gunner*

NAME *Bailey Walter*
1st D.A.C. DATE *23/10/16* AUTHORITY *D.O. 265 18/10/16*
Anti Aircraft Batteries

IF IN PERM. CORPS WHAT UNIT

UNIT *Anti Aircraft Batteries*

TRANSFERRED TO

DATE

AUTHORITY

PERMANENT FORCE ALLOWANCES

TRANSFERRED TO

DATE

AUTHORITY

PLACE OF ATTESTATION *Sherbrooke Que.*

TRANSFERRED TO

DATE

AUTHORITY

DATE OF ATTESTATION *Aug. 14 1915*

TRANSFERRED TO

DATE

AUTHORITY

ASSIGNED PAY MONTHLY \$ *15.00* ~~10.00~~ DATE EFFECTIVE *1-12-15* *1-1-18*

PAYABLE TO *Mr John Bailey, 187 Bowen Ave. Sherbrooke P.Q.* RELATIONSHIP *Father*

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

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)

Pay restricted to 20¢ per day (Extract from A.S.P.D. 18-10-16)

Checked *Pauler*

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS											
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE				AMOUNT		1	2	3	4	1	2				3	4				CREDIT	DEBIT									
			\$	C.						\$	C.																	NO.	DATE	NO.	DATE	NO.	DATE	NO.	DATE	
			10700							1000	12770					7300	4000	110	11410	1360																
<i>Apr 30</i>	<i>30</i>	<i>1.00</i>	<i>30 00</i>	<i>30 10</i>	<i>3 00</i>			<i>33 00</i>	<i>1502 Cdn 1610 Cdn</i>		<i>34 10</i>					<i>974</i>	<i>973</i>			10 00	<i>29 47</i>	<i>17 13</i>														
<i>May 31</i>	<i>31</i>	<i>- 31</i>	<i>3 10</i>					<i>34 10</i>	<i>1712 May 1830 May</i>		<i>33 -</i>					<i>973</i>	<i>1217</i>			10 00	<i>31 90</i>	<i>19 33</i>														
<i>June 30</i>	<i>30</i>	<i>- 30</i>	<i>3 00</i>					<i>34 10</i>	<i>1929 1876</i>		<i>34 10</i>					<i>973</i>	<i>1217</i>			10 00	<i>24 60</i>	<i>27 73</i>														
<i>July 31</i>	<i>31</i>	<i>- 31</i>	<i>3 10</i>					<i>34 10</i>	<i>2092 30% 2193 14/7</i>		<i>34 10</i>					<i>973</i>	<i>1217</i>			10 00	<i>31 90</i>	<i>29 93</i>														
<i>Aug 31</i>	<i>31</i>	<i>- 31</i>	<i>3 10</i>					<i>34 10</i>	<i>2329 31/7 2502 19/8</i>		<i>34 10</i>					<i>974</i>	<i>244</i>			10 00	<i>22 18</i>	<i>41 85</i>														
<i>Sept 30</i>	<i>30</i>	<i>- 30</i>	<i>3 -</i>					<i>33 -</i>	<i>2622 31/8 2772 15/9</i>		<i>33 -</i>					<i>1460</i>	<i>1460</i>			<i>1000</i>	<i>1000</i>	<i>41 05</i>	<i>770</i>	<i>48 00</i>	<i>26 85</i>										<i>7 1/2 days pay D.O. 218. 17/6.</i>	
<i>Oct 22</i>	<i>22</i>	<i>22</i>	<i>2 20</i>					<i>24 20</i>			<i>24 20</i>					<i>10 00</i>				10 00	<i>10 00</i>	<i>41 05</i>													<i>1/2 day pay AWL D.O. 206 19/9/16</i>	
<i>Nov 23/10-30/11</i>	<i>39</i>	<i>39</i>	<i>3 90</i>					<i>353 20</i>	<i>2997 R. Rate 12/0</i>		<i>353 20</i>					<i>7300</i>						<i>31 90</i>	<i>52 05</i>	<i>56 50</i>										<i>Trans. 1st D.A.C. 23/10/16</i>		
<i>Dec 31</i>	<i>31</i>	<i>31</i>	<i>3 10</i>					<i>42 90</i>	<i>2852 " " 28/0</i>		<i>42 90</i>					<i>14 60</i>						<i>12 62</i>	<i>72 53</i>	<i>63 00</i>	<i>10 53</i>											<i>D.O. 265. 18/10/16</i>
<i>1917 Jan 31</i>	<i>31</i>	<i>31</i>	<i>3 10</i>					<i>34 10</i>	<i>1st R. Rate 1/11</i>		<i>34 10</i>					<i>2620</i>						<i>12 62</i>	<i>95 01</i>	<i>68 50</i>												<i>To Anti Aircraft Batteries 9/2/17. 18/16. 3/2/17.</i>
<i>Feb 1-8</i>	<i>8</i>	<i>8</i>	<i>8 80</i>					<i>8 80</i>	<i>175 1st R. 19/11</i>		<i>8 80</i>					<i>2620</i>						<i>10 00</i>	<i>93 81</i>	<i>72 50</i>	<i>40 69</i>											
<i>Feb. 9/25</i>	<i>22</i>	<i>22</i>	<i>22 00</i>					<i>22 00</i>			<i>22 00</i>					<i>2 62</i>						<i>2 62</i>	<i>113 19</i>													
			<i>485 10</i>					<i>10 495 10</i>			<i>10 495 10</i>					<i>56 16</i>	<i>65 71</i>	<i>27 14</i>	<i>73 150</i>	<i>9 90</i>	<i>381 91</i>															

C.L.

AUDITOR *[Signature]* PAYMASTER *[Signature]*

B 1352

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

REGT. No. *300756* RANK *Gnr* NAME (IN FULL) *BAILEY, WALTER S*

M. OR S. _____

RELATIONSHIP *[Circled]* PARTICULARS *10 Strength* EFFECTIVE DATE *29 3 19* AUTHORITY *D.O.S 106 Supp # 2, 3, B*

ORIGINAL UNIT C.E.F. *Arty 1* PLACE OF ATTESTATION _____ TRANSFERRED TO _____ DATE _____ AUTHORITY _____

DATE OF ATTESTATION _____ TRANSFERRED TO _____ DATE _____ AUTHORITY _____

ASSIGNED PAY \$ *15.00* DATE EFFECTIVE *1-5-19*

IS SEPARATION ALLOWANCE PAID? *No* DATE EFFECTIVE _____

TO WHOM PAID *Mr. J. Bailey, 16 Elmwood Ave* RELATIONSHIP *W.S.G. same address* ANY CHANGE IN ASSIGNEE OR ADDRESS _____

ADDRESS *Sherbrooke Que Can*

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE _____ EFFECTIVE _____

DISCHARGED *Montreal* PLACE *7-4-19* DATE *Demob* REASON *D.O.S 106 Supp # 2, 3, B* AUTHORITY *[Signature]* IF ENTITLED TO POST DISCHARGE PAY _____



MONTH	PAY AND F.A.		OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL 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	
<i>31/3/19</i>				<i>25 97</i>														<i>61. Bal. Eng. L.P. 25 97</i>
<i>1-4-19</i>			<i>35 00</i>															<i>25 97</i>
<i>13-4-19</i>	<i>13</i>	<i>1.10</i>	<i>14 30</i>	<i>70 00</i>			<i>OK</i>	<i>4 87</i>	<i>5 00</i>	<i>120 40</i>	<i>15 00</i>		<i>6 60</i>		<i>151 87</i>	<i>6 60</i>		<i>W.S.G. 70 00</i>
																		<i>PA. exp. from 1/1/19 to 13/4/19 68 yrs. 6</i>
																		<i>U.S. 15 00 for April 1919</i>
																		<i>Discharged 20 2/1/19 52 days Pa</i>
																		<i>6 60 577 446 6 19</i>
			<i>Other Credits</i>															<i>Balance Soldier Dependents</i>
			<i>W.S.G. S.A.</i>	<i>Total</i>														
			<i>420</i>	<i>420</i>														
<i>7 5 19</i>			<i>50</i>	<i>50</i>														<i>298845</i>
<i>7 6 19</i>																		<i>902581</i>
<i>7 7 19</i>																		<i>1060668</i>
<i>4 8 19</i>																		<i>1269781</i>
<i>6 9 19</i>																		<i>152377</i>
																		<i>ASMA 6-7</i>
																		<i>Final</i>

BALANCE FROM PREVIOUS ACCOUNT

LIST OF DISCHARGE DOCUMENTS.

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

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

Group..... *a*
 Checked by No. *23*
 Date *20/3/19*

Cat H
S.G. 22
OG 7

17 MAR 1919
 SHORT FORM. **M**
 PROCEEDINGS ON DISCHARGE.
 (Demobilization.)

129
F
H

1. No. <i>300756</i>	
2. Rank. <i>Gnr</i>	
3. Name. <i>Bailey Walter</i>	
4. Unit. <i>C.A.R.D.</i>	
5. Date of Discharge <i>7-4-19</i>	Place <i>Montreal</i>
6. Reason for Discharge <i>Sherbrooke Demobilization</i>	
WAR SERVICE BADGE. CLASS "A" No. <i>276129</i>	
7. Authority. <i>R.O. 1420 D.D. #4cD.O.Pt II. 106</i>	
8. Proposed Residence after Discharge. <i>Sherbrooke P.Q.</i>	
9. CERTIFICATE TO BE SIGNED BY SOLDIER.	
I hereby acknowledge that at the undernoted place and date I received my discharge Certificate	
M. F. W. ?.....	<i>Montreal</i> <i>April 7-19</i> <i>Signature of Soldier.</i>
10. CONFIRMATION.	
The discharge of the above named man is hereby confirmed.	
Place.....	<i>Montreal</i>
Date.....	<i>April 7th 1919</i>
Signature.....	(O. C. Discharging Unit.) <i>[Signature]</i>

Office of Discharge Section, Dispersal Station

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Table with 2 columns: Date, Brief details, and signature. Entries include inoculations on 9-8-15, 22-9-15, and 6/10/16.

Table IV.—Service Table.

Table with 6 columns: Station or Troopship, Date of arrival or embarkation, Date of departure or disembarkation, Station or Troopship, Date of arrival or embarkation, Date of departure or disembarkation.

the Officer in Charge of Records Canadian Contingents.

Identify the foregoing to be a true copy of an original entry on a Medical History Sheet of this man.

DUPLICATE

To be used (a) for recruits enlisting direct into the Regular Army and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname BAILEY Christian Name WALTER

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Sherbrooke County Sherbrooke
Examined ... (on 14th day of August 1915 at Sherbrooke)
Declared Age ... 18 years ... days.
Trade or occupation ... Quebec Central Ry. Shops
Height ... 5 feet 6 inches.
Weight ... 126 lbs.
Chest Measurement { Girth when fully Expanded 33 inches. Range of Expansion 35 1/2 inches.
Physical Development ... Fair
Vaccination Marks { Arm ... Right Left Number ...
When Vaccinated ...
Vision ... { R.E.—V= L.E.—V=
(a) Marks indicating congenital peculiarities or previous disease ...
(b) Slight defects but not sufficient to cause rejection ...

Approved by (Signature) E.A. Robertson (Rank) Lieut. A.M.C. Medical Officer.

Enlisted ... (at Sherbrooke on 14th day of August 1915.

Table with 2 columns: Corps, Regtl. No. Entry: 35 Overseas Btn. C.F.A. 300756

Transferred to ...

Became non-effective by on day of 191

This Medical History Sheet has been compared with the corresponding Attestation Paper, and errors made in and have been taken from the Attestation Paper. (Signature) (Rank)

In Charge of Records, Canadian Contingent.