34933
314158

I.D. number No. d'identification	Surname Nom de famille	Given names Prénoms
	BRACKETT	Alonzo

NATIONAL PERSONNEL RECORDS CENTRE
CENTRE NATIONAL DES DOCUMENTS DU PERSONNEL

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location
Lieu Box 989

"CONTENTS CONFIDENTIAL"
"CONTENU CONFIDENTIEL"

ARC – 1048 (86/06)

BRACKETT, Alonzo, #314158

No. 2780076
L/Cpl. BRACKETT, Alonzo
SPECIAL GUARD. C.M.P.C

(2) Demob
(1) Demobilization

34933

2nd Enl. CONTENTS 1st Enl.

3 ATTESTATION PAPER (M. F. W. 23, 133 OR 51) 3
CASUALTY FORM (M. F. W. 54 OR A. F. B. 103) 3
TRAINING HISTORY SHEET (M. F. W. 113)
/ FIELD CONDUCT SHEET (M.F.W. 178 OR A.F.B. 122) 2
REGT. CONDUCT SHEET (M.F.B. 263 OR A.F.B. 121) 1
COMPANY CONDUCT SHEET (M.F.B. 263A OR A.F.B. 121) 1
2 MEDICAL HISTORY SHEET (M.F.B. 313 OR A.F.B. 178) 2
DENTAL HISTORY SHEET (M. F. B. 465)
MEDICAL REPORT (M. F. B. 227 OR A. F. B. 179)
/ MEDICAL EXAMINATION (M. F. W. 129) 1
TRANSFER CLOTHING STATEMENT (M. F. W. 97, OR D. O. S. 2) 1
PROCEEDINGS, COURT OF INQUIRY (M. F. B. 303 OR A. F. A. 2)
DECLARATION, COURT OF INQUIRY (M. F. B. 259 OR A. F. B. 115)
/ LAST PAY CERTIFICATE (M. F. W. 44)
/ PROCEEDINGS ON DISCHARGE (M. F. W. 218 OR A. F. B. 268) 1
PARTICULARS OF CHARACTER (A. F. W. 3226)
/ COPY OF PARCHMENT DISCHARGE CERTIFICATE (M. F. W. 39A) 1
DENTAL CERTIFICATE ON DISCHARGE (C. A. D. C. 5009)
/ UNIT INDEX CARD (M. F. W. 71 OR 192)

15
12 15
19 15
29 16
4

1-R.122
2-a.f.d.1237
1-a.f.d
2-Form C.D.8
1-C.A.D.C.5009a
1-a.f.w.1230
1-a.f.w.3428

No. 11 Overseas Field Artillery [Howitzer] Brigade Ammunition Column.

ORIGINAL

ATTESTATION PAPER.

No. 314158

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your surname?	Brackett
1a. What are your Christian names?	Alonzo
1b. What is your present address?	37 Creighton St. Halifax N.S
2. In what Town, Township or Parish, and in what Country were you born?	Halifax, Halifax Co. N.S.
3. What is the name of your next-of-kin?	James Brackett
4. What is the address of your next-of-kin?	37 Creighton St. Halifax N.S
4a. What is the relationship of your next-of-kin?	Father Canada
5. What is the date of your birth?	28th April 1894
6. What is your Trade or Calling?	Laborer
7. Are you married?	Singll
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9. Do you now belong to the Active Militia?	Yes 3 years
10. Have you ever served in any Military Force? If so, state particulars of former service.	Yes - 1st C.G.A. - ~~1 month~~
11. Do you understand the nature and terms of your engagement?	Yes
12. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force?	Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Alonzo Brackett, 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.

Alonzo Brackett (Signature of Recruit)

Date. Feb. 11th 16 191 . Ayer Macdonald Sgt (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Alonzo Brackett, 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.

Alonzo Brackett (Signature of Recruit)

Date. Feby 11/16 ~~Jan 26~~ 1916 Ayer Macdonald Sgt (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Halifax this 11th day of Feby 191 6

(Signature of Justice)

J. P.

In and for the County of Halifax, N. S.

M. F. W. 23
200 M—9-15
H. Q. 1772-39-841

Description of Alonzo Brackett on Enlistment.

Apparent Age 21 years 9 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height		5- 9 ins.
Chest measurement.	Girth when fully expanded	40 ins.
	Range of expansion	2 ins.
Complexion		Clear
Eyes		Brown
Hair		Brown
Religious denominations	Church of England	
	Presbyterian	
	Methodist	
	Baptist or Congregationalist	
	Roman Catholic	Yes
	Jewish	
	Other Denominations (Denomination to be stated)	

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.)

mole near left

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 declares that he is not subject to fits of any description.

I consider him* fit for the **Canadian Over-Seas Expeditionary Force.**

Date 20 Jan 1916 F McD Munro

Place Halifax, N.S. Capt

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.

Alonzo Brackett having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

D Cameron (Signature of Officer)

FEB 11 1916

Date 191 .

D.C. No. 11 F.A. (Howitzer) B'g'd. Amm. Column CAPTAIN.

CANADIAN EXPEDITIONARY FORCE

War Service Badge Issued
Class. A ....No. 226138

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 314158 (Rank) Corpl.

Name (in full) Alonzo Brackett enlisted in

the 11th. F.A Howitzer Bdge. Amm. Column.

CANADIAN EXPEDITIONARY FORCE at Halifax N.S. on the 11th

day of February 19 16

HE served in France and Belgium, 43rd. Battery CFA

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 25-11/12 Yrs

Height 5'9"

Complexion Clear

Eyes Brown.

Hair Brown.

Marks or Scars NIL.

A Brackett
Signature of Soldier

Date of Discharge

Dispersal Station No. 8
MAY 29 1919
Military District No. 6

O.C. Dispersal Station "B" Major
Issuing Officer

MAY 29 1919
Rank

Date 19

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

M.F.B. 39A.
1049-D.P.-300M-11-18.
H.Q. 1772-39-882.

1.—That discharge certificate must be carried when wearing uniform.

2.—That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing, and

3.—That wearing of uniform renders him liable to usual military discipline, as if on the strength of a unit.

CASE HISTORY SHEET.

Camp Hill Hospital. Halifax Station.

No. 3147-8 Rank Cpl Name Brackett Age 23

Unit P.S.C. Completed years of service Where and how long } C. 1 8/12 E 1 7/12 F 2 6/12

Date of admission 25. 6. 19 Date of discharge July 27/19

Diagnosis Jaundice Place of origin Halifax

CONDITION ON ADMISSION AND PROGRESS OF CASE

Transferred to "J" W.M.

developed jaundice a week ago. Feels fine

Complains of pain in stomach - vomited - dull -

jaundice present; Bile in urine

History of Present Illness Contracted Syphilis in 1913 took no medicinal treatment or injections. In Dec. 1918 was feeling miserable reported sick and had a blood test which gave the Wassermann reaction XXX took eleven injections of Neo-salvarsan and thirteen injections of Mercury Treatment began Dec 11/18 Completed Apr 24/19 was discharged from hospital at Wiley Apr 30. Jaundice appeared about June 15th/19

FAMILY HISTORY Father died at age of 62 of pneumonia 4 months ill bed Mother alive and well One brother died at age of four years Cause not known all other brothers and sisters living and well

TREATMENT

(Especially any specific or special form.) Symptomatic treatment for jaundice

CONDITION ON DISCHARGE, No jaundice present. Heart and lungs

(and disposal made of case.) Normal. Inguinal adenitis. Epitrochlear adenitis

No Post-cervical adenitis. No condylomata

Date July 27/19

Andrew Lorecoff
Medical Officer i/c case.

M. F. B. 313a.
100M.—6-18.
1772—39-439.

A 31830

This is to certify that I have turned over all valuables on my admission to Hospital.

Date 25.6.19

Sgd. A. Bracket

Duplicate.

Former Regtl No. 314158

Permanent Force

C. E. F. 43rd Battery C.F.A.

Surname Brackett Christian Names Alonzo

PERMANENT FORCE OF CANADA

MEDICAL HISTORY OF—

Regtl. No. P.F. 2780076

P.F. Unit Sp Gd. C.M.P.C

Region

TABLE I.—General Table.

Birthplace { Town Herring Cove / Province Nova Scotia

Examined { on 4th day of Feb 1920, / at Halifax N.S.

Declared age 24 years 282 days

Apparent age 25 years

Trade or occupation Painter

Height 5 feet 10 inches. Weight, stripped 160 lbs.

Colour of Hair Dark Complexion Medium

" Eyes Brown

Chest Measurement { Girth when fully expanded 40½ inches. / Range of expansion 3 inches

Physical development Good
(Good, fair or poor)

Vaccination marks { Arm, RIGHT | LEFT / Number too small

When vaccinated 1918

Vison { R.E.—V 20/20 With Glasses { R. / L.E.—V 20/20 { L.

Hearing R. ear Normal L. ear Normal

Identification marks, such as Tattoo, Moles, Scars, etc.—
Mole on back of Left leg

Defects or ailments:—
Nil

Examined and found—

FIT FOR CATEGORY { A / B / C

(Strike out those which do not apply.)

Signature J. M. Bruce Capt
President

Member

Member

Re-examined for posting at

On day of 19

Enlisted { at / on day of 19

	Corps	Regtl. No.
Joined on enlistment	Sp Guard C.M.P.C.	2780076
Transferred to		

TABLE III.—Boards, Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service: Extention, Re-engagement, or Prolongation of Service, Issue of Surgical Appliances, etc.

Date	Brief Details and Signatures

Special remarks: state if a discharged soldier

TABLE IV.—Service Table.

Station or Troopship	Date of Arrival or embarkation	Date of Departure or disembarkation

Became non-effective by

on day of 19

(Signature)

(Rank)

For disposal of this form use K.R. & O. paras. 1594 and 1606.

M. F. B. 313b.
723-D.P.-50M-10-19.
1772-39-439.

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Each entry will be accurate, brief and revelent. 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, etc., will be given in the special syphilis case sheet. Rubber stamps will not be used.	Signature Medical Officer
	Day	Month	Year	Day	Month	Year				

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 2780076 (Rank) Lance/Corporal.

Name (in full) BRACKETT, Alonzo. enlisted in

the Special Guard, C.M.P.C.

CANADIAN EXPEDITIONARY FORCE at Halifax, N.S. on the Fourth

day of Feburary 1920.

HE served in Canada.

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

Auth: R.O. #1328, Para.7 (e), dated 18-11-18

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

Age 25 years 1 month.

Height 5 feet 10 inches.

Complexion Medium.

Eyes Brown.

Hair Dark.

Marks or Scars

Mole on back of left leg.

A Brackett
Signature of Soldier

J.H. Brown. Lieut/Col.
Issuing Officer

O.C. Special Guard, C.M.P.C.
Rank

Date of Discharge March 6th, 1920.

Appointment

Signed at Halifax, N.S. this Sixth day of March 1920

in Military District No. Six.

File Reference No.

SPECIAL GUARD
MAR 6 1920
Canadian Military Police Corps

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

M. F. W. 39a.
250m —6-18.
H. Q. 1772-39-882.

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 this certificate will not be completed.

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. 314158 Rank Cpl. Surname BRACKETT
(Given name in full) Alonzo

Unit or Corps 6 A.R.D. Birthplace Herring Cove, Halifax

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

1. GENERAL DESCRIPTION:

Physique Good Weight 160 lbs. Height 5 ft. 9 in. Colour of Eyes Brown

Nutrition Good

Pulse 72

Condition of arteries Normal

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).

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.

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

[OVER]

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Ripon (Overseas)

Date 29/4/19 Signed L.D. Lewis Capt. R.A.M.C. 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 G. Brackett

(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 a Medical Board.)

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

ORIGINAL. ORIGINAL

MEDICAL HISTORY SHEET.

Surname Brackett Christian Name Alonzo

Examined on 20th day of Jan 1916
at Halifax, N.S.

Birthplace City or Town Herring Cove
County Halifax

Apparent age 21 4 9 mo

Trade or occupation Laborer

Height 5 Feet 9 Inches.

Weight 165 Lbs.

Chest measurement Minimum 38 inches.
Maximum expansion 40 inches.

Physical development Good

Small-Pox Marks nil

Vaccination Marks Arm Right. Left.
Number nil

When Vaccinated last —

(a) Marks indicating congenital peculiarities or previous disease —

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

Approved by F McD Mackay
Capt
Rank M.O.

Date	Fit or Unfit	Examined for Re-engagement,
		11 SEP 1918 M.O.
	A	1 NOV 1918 M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
1/5/16.		[illegible] M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
1-11-16	T A B	[illegible]
3/2/16	Good	A C Wilson M.O.
16/2/16	Good	B Nelson Capt A.M.C. M.O.
27/2/16		B Nelson Capt A.M.C. M.O.

Enlisted on 20 day of January 1916 at Halifax N.S.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	No 11 F. A. (HOWITZER) B'G'D. AM. COLUMN	314158		Jany 20/16
Transferred to..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

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

M. F. B. 313.

100M.—5-15.
H. Q. 1772-39-439.

CANADIAN

Surname Brackett Christian Name Albert

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of Inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
Left Halifax apr 1/16								Arrived Cramshaw apr 12/16			
Left Cramshaw apr 14/16								Arrived Didley apr 14/16			
CAMBRIDGE HOSPITAL ★ ALDERSHOT ★		8	9	18.	13	9	18	Sprained ankle R.	6	Transferred to Basingstoke.	MAJOR, R.A.M.C. REGISTRAR, CAMBRIDGE HOSPITAL, ALDERSHOT.
No 4 Canadian Gen. Hospital, Basingstoke.		13	9	18.	18	10	18	D.	35	Twisted ankle in a shell hole. X-ray negative. Complete recovery.	Major Capt RAMC
Princess Patricia Canadian Red Cross Hospital, Cove[illegible] Camp, Bexhill.	1 OCT 1918	18	10	18.	1	11	18	do	15	Once fit for Duty	D Brackett Pte
CANADIAN SPECIAL HOSPITAL WITLEY, SURREY.		11	12	18	25	1	19	Gonorrhea.	45	APPARENTLY CURED. IRRIGATIONS, LOCAL TREATMENT AND MEDICINES. STOPPAGES AS PER DATES.	[illegible] per [illegible] CAPT. REGISTRAR.

B. L.

Forms
I. 1237
14

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book M3T4839
Year 1918

Regimental No. 314158 Rank. Corp. Surname. Brackett Christian Name. A.

Unit. C.F.C. 43/8 Age. 25 Service. 32/12 26/12

Station and Date. Sept. 13.

Disease Sprained R. Ankle.

OCCUPATION Labourer

~~NEXT~~ OF KIN - Wife { Mrs. A. Brackett, 131 Creighton St, Halifax N.S.

ENLISTED Jan. 1916

ENGLAND April 13. 1916

FRANCE July 16. 1916

WOUNDED ~~accidentally injured on duty~~. Sept. 3. 1918

HOSPITALS # 3 C.F.A.
7 C.C.S.

OPERATIONS

REMARKS Twisted right ankle in a shell hole.
X-ray negative.

1/11/18 Once fit for Duty
No disability
Proceeded to

SUMMARY OF F.M.C.&.M.H.S.

PRESENT CONDITION. Slight stiffness about Right ankle

* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.
[106] W3081/P1296 50m 7/18sv 5 89 Forms/I. 1237/14.

[P.T.O.

Station and Date.	
	Apparently good recovery
	General condition good
1. 10. 18.	Completely recovered.
	To for transfer to Convalescent Hospital
	W. B. Vaughan Capt & Adjt

Princess Patricia Canadian Red Cross Hospital,
Cooden Camp, Bexhill,
16 OCT 1918

Forms
I. 1237
11

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year	314156	Cpl	Brackett	A.
	Unit.		Age.	Service.
	C.F.A.		25.	

Station and Date.

Disease Sprained Ankle. R.
Good progress.

ATS. 1500. 3/9/18.
500/D/1337 10/9/18

Cpl Gunner Lab
RAMC

11 NOV 1918

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

(3205) Wt.W 4234—M 627. 1,000,000, 8/16. C.F.&S. Forms/I. 1237/11.

P.T.O.

Station and Date.	

C.A.D.C. 5009A

6

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

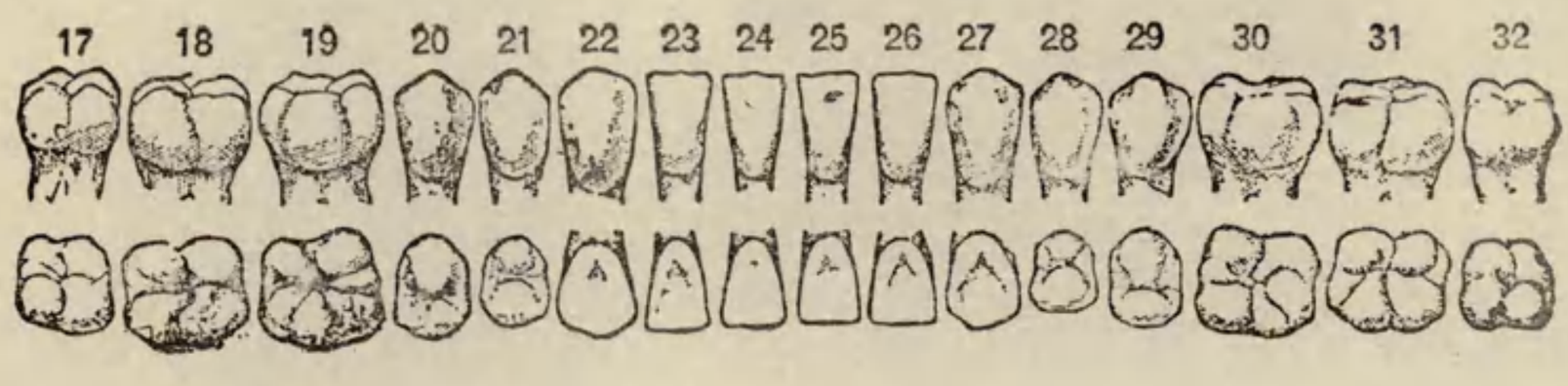
DIRECTIONS TO DENTAL OFFICERS

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

NAME OF SOLDIER (Block Letters) BRACKETT L.

REGIMENT C. A. D. C. RANK Cpl No. 314138

Date of Examination in England 9/5/19 | Date of Examination in France



DENTAL BOARD 9 MAY 1919 RIPON

PRESENT DENTAL REQUIREMENTS

1. FILLINGS —
2. EXTRACTIONS 5.
3. CROWNS —
4. DENTURES
   - (*a*) Full Upper —
   - (*b*) Part Upper —
   - (*c*) Full Lower —
   - (*d*) Part Lower —

ASSISTANT DIRECTOR OF MAY 22 1919 M. D. NO. 6 DENTAL SERVICES

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 yes
- (*b*) In England —
- (*c*) In France —

Signature of Dental Officer R. Roy Capt.

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. 2780076 Rank L/Cpl Surname Brackett, Alonzo
(Give name in full)
age-24 8/12 address. 45A St Johns Ave, Halifax. NS.
Unit or Corps Special Guard. C.M.R.C. Birthplace Herring Cove. N.S.

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

1. **GENERAL DESCRIPTION:**

Physique Good Weight 160 lbs. Height 5 ft. 10 in. Color of Eyes Brown

Nutrition Good

Pulse 72

Condition of arteries Normal

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.)

Mole on back of left leg.

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.

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

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

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.

Signautre .....

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

THIS SECTION FOR USE IN CANADA—

Examined at Halifax N.S. (Canada)

Date 1-3-1923 Signed Surgeon 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 A. Brackett

(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]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-39-1142.

M.F.W. 44
154 (D.P.) 150M-2-19.
1772-39-903.

CANADIAN EXPEDITIONARY FORCE.

LAST PAY CERTIFICATE

Regimental No. 2780076 Rank L.Cpl. Name BRACKETT. ALONZO
(Surname first)

Unit Special Guard, C.M.R.C. who was* Discharged

On March, 6th 1920 191....., to.....
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1.3.20 to 6.3.20 191... the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month		45 90
Regimental Pay 6 days at $ 1 c 05		6 30
Field Allowance 6 days at $ c 10		60
Separation Allowance		
Clothing Allowance		
Post Discharge Pay		
*Other Credits Extra duty		6 00
Advances		
Separation Allowance and Assigned Pay Cheque No.		
*Other Charges		
Balance on transfer or on discharge, cheque No. A.R.128 5.3.20	58 80	
Total	58 80	58 80

*Give particulars.

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

Assigned Pay for the month of.....191.....
and Separation Allce. for month of.....191..... } (to) Assignee .....

(Address) .....

(†) 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 4.2.20 married or single single

(2) Separation Allowance, entitled or not..... (3) Reason for discharge Demobilization.

(4) Authority for discharge or transfer D.O.# .....

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 March.6th.1920.....

Place Halifax., N.S.....

.....Captain.....
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.

CREDITS, ADVANCES, Etc.

Credits, Advances, Forfeitures, Issues on Repayment, etc., since issue of this L.P.C. are to be entered hereunder:

Date	Place	Cheque No. A.R. No. or Other Particulars.	AMOUNT		Signature of Officer Making Payment.
			Dr.	Cr.	
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....

Veterans Affairs | Affaires des anciens combattants

DEATH NOTIFICATION — *AVIS DE DÉCÈS*

FILE NO — *DOSSIER N°*: 0219659

NAME — *NOM*: Brackett alonzo James

SERVICE NO — *MATRICULE*: 2780076 army WW1
314158 army WW1

DATE OF DEATH — *DATE DU DÉCÈS*: 12/1/81

CPC NO — *CCP N°*: 5220488

WVA — *AAC. N°*: L-18085 army act.
2074444 VA

PLACE OF DEATH — *ENDROIT DU DÉCÈS*: Skeenaview Lodge, Terrace, BC

INFORMATION RECEIVED FROM — *INFORMATION RECUE DE*: Registration of death

y L.

FOR RECORDS MANAGER — *POUR LE GESTIONNAIRE DE POSSIERS*

10/4/81

DATE

DVA 24 (6-79)
7530-21-036-5730

2 — CFRC — *DAFC*

NIC

(9 38 40) W5605—742 300,000 8/15 HWV(8M1268) Forms/W3172/2

Army Form W. 3172.
(In pads of 50.)

Cambridge Hospital.

Ward Hut B. No. of Bed Date 9. 9. 18.

Regl. No.	Rank and Name	Corps	Part to be X-Rayed
3141586	Cpl Brackett.	C. F. A.	Leg.

SHORT HISTORY OF CASE.
(To be completed by M.O. i/c case)

F B.
Leg. right.
Please locate

Signature of M.O. E Rumsey
Date 9/9/18.

REPORT ON RESULT OF X-RAY EXAMINATION.
(To be completed by Radiographer.)

No. of Plate R 601 2/1 9/5

Radiogram
Negative

Signature of Radiographer J. Anderson
Date 10. 9. 18.

HB

Army Form B. 103.

Regimental Number 314158

Casualty Form—Active Service.

Regiment or Corps Composite Bde C.R.A.

Rank Pte Surname Brackett Christian Name Alonzo

Religion R.C. Age on Enlistment 21 years 9 months

Enlisted (*a*) 11-2-16 Terms of Service (*a*) 1 year & 6 mos Service reckons from (*a*) 11-2-16

Date of promotion to present rank ..... Date of appointment to lance rank .....

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

..... or Corps Trade and Rate .....

Occupation Labourer ..... Signature of Officer

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked...			
6-11-18	Comp. Bde. C.R.A.	T. O. S. from C.A.R.D	Bordon	4-11-18	B.O. Pt II 168
7-11-18	Comp. Bde. C.R.A.	On command to C.S. of G for duty	Bordon	6-11-18	B.O. Pt II 169
9-11-18	C.S. of G.	Attached from Can. D.A.R.A.	Bordon	6-11-18	Pt. II, #313.
8-1-19	C.R.A.	Leave to be attached from Comp. Bde. C.R.A. by proceeding to Bde. C.R.A.	Bordon	8-1-19	Pt. II #6

(*a*) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(*b*) Signaller, Shoeing-Smith, &c

(17591.) Wt. W 1887—P 1124. 1,000,000. 6/18. D & S. Form B/103. (E. 1256.)

[P.T.O.

COMPOSITE BRIGADE, CANADIAN RESERVE ARTILLERY.
LIEUT. & ASST. ADJUTANT,
ASST. ADJT.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
13.1.19	Res. Bde C.F.A.	2 OR's from Coup Bde C.F.A.	Bordon	8-1-19	Bo B II 13
~~1-4-19~~	~~C.R.A.~~	~~Lost to 12 Res Bties~~	~~Witley~~	~~1-4-19~~	~~Bo B II 9~~ Cancelled in Pte II 95/5-4-19
		A Brigade Maj for LIEUT. & ASST. ADJUTANT. RESERVE BRIGADE, CANADIAN FIELD ARTILLERY.			
2.4.19.	N. Wing	Attached from C.H.R.D. Ripon	Witley	1.4.19	P.T. II 9
5.4.19	Res Bde CFA	Lost to C.H.R.D	Witley	5-4-19	Pte II 95
		2 Lieut & Asst. Adjt. FOR OFFICER COMMANDING RESERVE BRIGADE, C.F.A.			

Army Form B. 103—2.
Part II.

(SERVICE AND CASUALTY FORM Part II).

WAR SERVICE BADGE
CLASS "A" No

Regiment or Corps Amm. Col 11th F.A Bde Regimental Number 314158

*Substantive Rank Cpl. Surname Brackett Christian Names Alonza

*Acting Rank

(*To be entered in pencil to facilitate alteration.)

(A) Report. Date.	(A) Report. From whom received.	(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.
8.6.04	13.4.16		Arrived in England		13.4.16	S.S. Olympic
25.5.16	11th H. Bde	Pte Do 83	S.O.S. transf to 10th Bde C.F.A.	Hilly	25.5.16	
30.5.16	10th Bde C.F.A.	" 133	T.O.S. from 11th Bde	"	"	
12.7.16	do	" 176	Embarked for France	"	13.7.16	
21.5.17	8th Bde	" 67	T.O.S. from 10th Bde	"	6.5.17	10th Bde 21.5.17
28.7.17	"	" 94	Now known as 8th Army Bde C.F.A.		8.7.17	
14.11.17	"	" 144	Promoted Corporal	Field	11.10.17	
16.9.18	CARD	" 259	T.O.S. from 8th Army Bde	Witley	8.9.18	8th Bde 07-17
6.11.18	Comp Bde	" 168	T.O.S from C.A.R.D.	Bordon	2.11.18	CARD 311-4/18
13.1.19	Res C.F.A.	" 13	T.O.S from Comp Bde	"	8.1.19	Comp Bde 7.11.18 to 7.1.19

Certified true Copy

D. Rance Lieut

FOR LT. COL. I/C RECORDS, C.D.M.F.

To be folded on this line.

Nothing to be written in this margin.

(n26383.) Wt. W. 9693—P. 2068. 500,000. 3/19. S. & S., Ltd. E. 4608.

W.S.B CLASS "A"

(A) Report. Date.	(A) Report. From whom received.	(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.
17.4.19	CARO	107	TOS from Res Bde.	Ripon	5.4.19	
12/5/19	"	DO 132	~~TOS~~ D C.C.C. Shpt	"	10/5/19	
~~4/19~~			~~W~~ D. 6.			

Attached C.C.C. Kinmel Park for return to Canada. Part 11 Orders No._____. Ceases to be attached C.C.C. Kinmel Park on embarking for Canada, Part 11 Order No:____

Commanding_____Wing, 6
Kinmel Park Camp, 19

A.B.S. Mackay ..... LIEUT.
OFFICER I/c RECORDS,

14-5-19 T. O. S. No. 6 D. D. from O/S and posted Dcsp 1st B to fr Do 161
29-5-19 S.O.S. on Discharge

..... Lieut.
Officer I/c Records No. 6 D.D.

Nothing to be written in this margin.

CERTIFIED CORRECT.
28 AUG. 1916
CAN. RECORDS, OTTAWA.

WAR SERVICE BADGE
CLASS "A" No.

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

M. F. W. 54.
150M. 10-15.
H.Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps ~~No. 11 Overseas Field Artillery [Howitzer] Brigade Ammunition Column~~ 43rd Battery 10th Brigade

Regimental No. ~~374138~~ Rank ~~Corp.~~ Name Brackett, Alonzo

C. E. F.

Enlisted (a) ~~26-7-16~~ Terms of Service (a) Duration War Service reckons from (a) ~~26-7-16~~ 11-2-16

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

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

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
APR 1 - 1916		Embarked	Canada		"Olympic"
APR 11 1916	✓	Disembarked	England		"Liverpool"
July 13	✓	Embarked	Overseas Portsmouth	13/7/16	To A. Duty Capt
		Landed in France	Harve	14-7-16	
31-8-16	O/C Unit	Sentenced to 5 days No 1 F.P. For while on Active Service Absent from Parade 30-8-16	Field	30-8-16	A.F.B 2069. Part II O. 185. 8-9-16
11-5-17	C.R.A	S.O.S on being posted to on Reorganization	8th Bde CFA Field	5-5-17	A3/10 Ref AAg., File S 290-90 Part 11 O. 90 d/21-5-17.
11-5-17.	C.R.A.	T.O.S. 8th Bde. CFA.	Field	6-5-17	A.3/10, B.213, d/12-5-17 Pt.II.O. 67, d/21-5-17
3/11/17	O/C Unit	Granted Corporal to L/C	"	11/11/17	Lt. KT 16/29462 A.F.O 114 d/14/11/17
16/11/17	"	Granted Leave	to England	12.11.17	B213 Pt III 1590 d/12/11/17
30/11/17	"	Reported from Leave	Field	[illegible]	B213 Pt II 163 d/13/12/17

(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.

[P.T.O.

Disembarked MEN'S WAR SERVICE BADGE
W.S.B.
43rd Overseas Battery C.F.A.

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 eaqh case.		Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received					
18/2/18	6 Stamb.	~~C~~ PUO	adm Transf	6 Stamb 4 Stamb	18/2/18	A36 D 3367
18/2/18	4 Stamb	PUO	adm	4 Stamb	18/2/18	A36 D 3881
22/2/18	8th A Bde	To Hospital		NS	18/2/18	B 213
23/2/18	1 Cdn Cds	PUO	adm	1 Cdn Cds	23/2/18	A36 D 4387
23/2/18	4 Stamb	PUO	Transf	do	23/2/18	A36 D 4607
25/2/18	26 Gen	PUO	Adm	26 Gen	25/2/18	W3034 D 4607
25/2/18	1 Cdn Cds	PUO	Transf	14 A Train	25/2/18	A36 D 5290
12/3/18	26 Gen	do	Transf	6 Corbfot	12/3/18	W3034 D 7246
12.3.18	6 Corbfot	do	Adm	do	12.3.18	W3034 D 7509
do	do	do	Transf	13 Corbfot	12.3.18	W3034 D 7509
13.3.18	13 Corbfot	do	Adm	do	13.3.18	W3034 D 7539
5-4-18	C&RD	TOS Class A		Base	4.4.18	NR. R&R 775
2/4/18	13 Corbfot	PUO	Transf	Base	2/4/18	W3034 C 2352
15/4/18	C&RD	Left for Unit		Field	15/4/18	NR R&R 1165
26/4/18	8th A Bde	Reported Unit		Field	17/4/18	B 213
7.9.18	1 Sig Gen	Struck Off Rau To		England	7.9.18	W3034 H 8220
7.9.18	at Princess Elizabeth	Invalided Acc Injury & posted to C&RD		Witley	7.9.18	W3083/3737 Para 107 of 17.9.18

Lieut.

for Lt.-Col., A. A. G.
Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

16-9-18	C&RD	TOS from 8th A. Bde C7a		Witley	8-9-18	Pay 259
7-11-18	C&RD	S.O.S. to Comp Bde. C.R.C.		Bordon	1-11-18	LIEUT. FOR LT.-COL. I/C RECORDS, C.O., N.F. Bd. Pte 310

R—122

VES

Rank Jr. 43rd Batty. Name ~~BROCKETT~~ BRACKETT Alonzo Reg'l No. 314158

Unit Amm.Col.11th F.A.Bde. If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Halifax, 11th Feb.1916. Place of Birth Halifax, N.S.

Name and Address, Next-of-Kin James Brockett
37 Creighton St, Halifax, N.S. Canada. Relationship Father

Assigned Pay Monthly $ Payable to

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
S.R.O.604	12-4-16	Arrived in England	12 APR 1916		S.S. Olympic
25-5-16	adj. 11th H.Bde	S.O.S. Trans. 10th Bde. C.F.A.	Witley Camp	25-5-16	Pt II D.O.83
30-5-16	10th Bde C.F.A.	T.O.S. from 11th Brigade	" "	" "	Pt II D.O.133
12 JUL 1916	do	Embarked for France.		12 JUL 1916	Pt II D.O.176
21.5.17	8th Bde	T.O.S. from 10th Bde	Freed	6.5.17	" " 67 40th Bde 90 d/ 21.5.17
28.7.17	8th Bde	now Known as 8th Army Bde	C.F.A.	5.7.17	" 94
14.11.17	" "	Promoted Cpl.	Ser. Field	11.10.17	" 144
16-9-18	C.A.R.D.	T.O.S from 8th A. Bde C.F.A.	Cpl Witley	8-9-18	" 259 Pt II 107 d/ 17/9/18 8th Bde
6-11-18	Comp Bde	T.O.S from C.A.R.D.	Cpl Bordon	1-11-18	" 168 Pt II 311 d/ 7/11/18 C.A.R.D.
13-1-19.	Res C.F.A.	T.O.S from. Comp Bde.	" "	8-1-19	" 13. a comp Bde 10-10-1-19.

314158 **BRACKETT. ALONZO**

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
		Cancelled by P II 95 D 5+19			
[illegible] 19	Rec'd to	Authority Card	[illegible]	5+19	Postal
5+19	" "	T.O.A. to C.A.R.D. ~~Shown as sailed but Cave finding Sailing in U.K.~~	" "	5+19	95 CARD 9/10/17-4-19
13.5.19	6 Wing	T.O.P. from CARD.	cpl Rhyl	13.5.19	133 - CARD 134 14/5/19
14.5.19	"	P.O.P. to Canada	" "	14.5.19	= 134
		To Canada	55-B-84	14-5-19	

L. L. Job 88773—M. & D. 6195.

M. F. W. 12.
20m.—11-15.
H. Q. 1772-39-8.9.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

To Whom Mrs. A. Brackett (wife.)

Address ~~51 Creighton St~~ 63 Sackville St Halifax N. S. 29/5/17

Rate $ 20.00

APR 1 - 1916

By Whom Assigned ~~Mrs.~~ A. Brackett

Regtl. No. 3141158.

Rank Gr.

Corps No 11 D.A. A.A.B.A.C.

PAYMENTS

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

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
15m.—3-16.
H. Q. 1772-39-819.

Sheet No. 2. Mrs. A. Brackett wife

Name of Soldier Brackett A.

L. L. Job 95618—M. & D. 6555.

314158 No 11. F. A. A. B. A. C.

20 00

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	A 4702	20 -	
May		T 5652	20	
June		B 9010	20	
July		D 9309	20	
Aug.		E 10516	20	
Sept.		G 15434	20	
Oct.		G 19965	20	
Nov.		O. 24702	20	
Dec.		A 36127	20	
Jan.	1917	B 37225	20	
Feb.		B 42898	20	20
March		C 49840	20	20
April		L 805	20	20 B.
May		70034	20	
June		H. 13441	20	60 Sackville St Halifax N.S. 29/7/17
July		C 19951	20	13
Aug.		G 27352	20	03
Sept.		F 38651	20	20
Oct.		S 48772	20	
Nov.				$380
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.				

29-3-16.

L- L. Job 310—M. & D. 6574.

MILITIA AND DEFENCE

M. F. W. 11.
50m.—4-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Mrs. A. Brackett.
Address 126 Cunard St. Halifax N. S.

Relation to Soldier wife, child or mother } Wife.

Name of Soldier Brackett A.
Regtl. No.
Rank Gr.
Corps 11th Bde. D.A.C.

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				

Destroy
Dec 4

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

M. F. W. 11a.
50m.—4-16.
1772—39—818.

Sheet No. 2. Mrs. A. Brackett. Wife PAYMENTS. Name of Soldier Brackett. A.

L. L. Job 310.—Req. 6574.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May		P 3019	41	41 Overpaid 21 Cr owing to Dep't
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier .....

PAYMENTS.

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

26-1-16

27

L. L. Job 95618—M. & D. 655

MILITIA AND DEFENCE

M. F. W. 11.
15m.—3-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Elizabeth Brackett

Address ~~51 Creighton St~~ Halifax 63 Sackville N.S

Relation to Soldier wife, child or mother } Wife

Name of Soldier Brackett, Alonzo

Regtl. No.

Rank Gr

Corps No 11 Field Artillery Horse Brigade Ammn. Column

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				

CONSOLIDATED ACCOUNT 5

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
60m.—12-15.
1772—39—818.

L. L. Job 89062.—Req. 6213.

Sheet No. 2. Elizabeth Brackett Wife Name of Soldier Brackett, Alonzo Gnr

Month.	Year.	Cheque No.	Amt.		Remarks.
April	1916	P190	63-	63	E 3041 Cancelled 29/5/16
May		P 3019 E3041	41 20	20	P 3919 Remarks 17-5-16 Corp Lieu 21 00 owing to Sickness
June			— X	—	
July		E6823	19	(19 due)	
Aug.		A13988	20	20	
Sept.		C15283	20	20	
Oct.		C 18514	20	20	
Nov.		D20844	20	20	
Dec.		D24840	20	20	
Jan.	1917	C 28768	20	20	
Feb.		C. 31644	20	20	
March		C 34822	20	20	
April		E 294	20	20	
May	29	M.D. N. 41st	20	20	63 Sackville Halifax N.S.
June		F 7511	20	20	
July		D 11147	20	20	
Aug.		H 13148	20	(20)	
Sept.		G 16959.	20	20	
Oct.		E 23499	20	20	
Nov.				$423	
Dec.					
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

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

Date of Enlistment

~~26-1-16~~ Married 30-3-16

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

B 10701

Date of Assignment

Apr 1/16

RATE OF SEPARATION ALLOWANCE

~~20~~	~~25~~	30	

~~P.C. 3257~~ 1-9-18
P.C. 2753
M031121

RATE OF ASSIGNMENT

20			

wife

PARTICULARS OF SEPARATION ALLOWANCE

No. 31415-8

Rank Gr. Promoted Reverted Discharge

Soldier's Name A. Brackett

Battalion No 11 F.A. D.A.B. A & C.

Beneficiary Elizabeth Brackett

Relationship wife M.F.W. 2554 issued 25/7/18.

Address

PARTICULARS OF ASSIGNMENT

Name Mrs Elizabeth A. Brackett

Address ~~63 Sackville St~~ Halifax

Change of Address

1 131 Creighton St Halifax N.S. N.S. 3-1-18 TDV

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
					✓	File 1971-a-3.
					✓	M.F.W. 2554 of 18/1/18 ZPK
Oct. 31-17		423	380	803		Suspend s/a & a/p with reply Pat Sochy
Nov - 8	55882	20	20	40		Ruling CB 1971 a 3 mar 13 18 12/7
Dec D	59954	20	20	40	Bo	S
Jan ⋮		~~20~~	~~20~~	~~40~~		
Arrear April G	2147	105	xx	105 ✓	H	#A.C.O. 1460
May E	12128	25		25 ✓	H.	
June D	20103	25		25 ✓		
July V	27883	25		25 ✓		
AUG. C	32015	25	20	45 ✓		
1/18 to 31/7/18 July K	3139	xx	140	140 ✓	H.	A.C.O.# LA 840.
~~Sept. C~~	~~32015~~	~~25~~	~~20~~	~~45~~ ✓		
Sept. D	38302	25	20	45 ✓		
OCT. F	42112	25	20	45 ✓		
NOV - B	53693	25	20	45 ✓		
DEC. A	67480	45	20	65 ✓		
JAN 19 H	69709	30	20	50 ✓		
FEB. J	78847	30	20	50		
MAR ~~P~~ F	~~2604~~ 85264	20	20	40		
APR - G	861	20	20	40		
May D	6105	20	20	40	✓	
		908 ~~20~~ 28	760			

Pay S.A. from date suspended. A.P. to remain suspended. Auth S.B. 25-3-18. M.R.O. 1c effective 1-5-18. J.P. Hastie 5/4/18. April cheque G2147 - 105.00 xx Mailed 6-4-18. M.R.O. alteration No. LA 1656 - issued 29/7/18 JPH. A.P. Reopened from date suspended Per A2m. K3139 Mailed 1-8-18. Paid 42 refund requested 27/8/18 deduct 16 made for recover. m.o. alt. 83150

Cr. Slip # 5050 Rems for 30.00 for (Mar Apr May) KB 27/9/19

Cr. Slip # 5360 Rems for 17.00 recovered by A2m. authy letter 11/7/19 KB 24/7/19

AUDITED.

~~F85264~~ F85264 Cancelled #10319 #A.C.O. 16298 Mailed 27-3-19

A/c Closed 31-5-19

Ret'd per Minnekahda

Date 23/5/19 M.F.W.187 30/5/19

Closed K Smith

M.R.O. 11775 Desx. Rems KB 30/5/19

M. F. W. 128
400M.—6-17—172-89-141
L. L. 2250—M. & D. 1933.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400M.—6-17—1172-39-1141
L. L. 22320—M. & D. 7983.

E. M. W.

Number 314158 Rank Cpl

Surname BRACKETT

Christian Name alonzo

Units Co. - F. A. Theatre of War France

Date of Service 14/7/16

Remarks

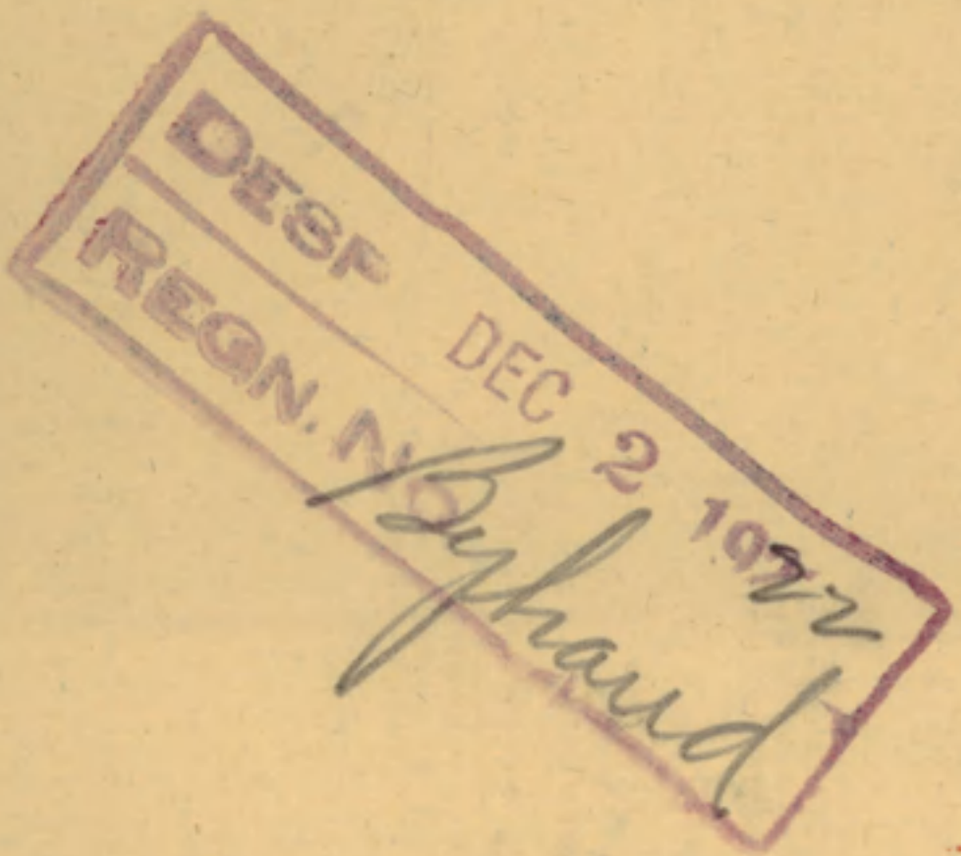
Latest Address 48 a St. Johns Ave

P. N. W. M. P. Commons

Comm. H. Q. Ottawa ~~Halifax~~ N. S.

Roll No. 19779

200m.-6-21...


DESF
DEC 2 1977
REGN. N

No. 314158 RANK Corp. NAME Brackett A.

T.O.S. 26-1-16
D.O. 128 7-2-16

UNIT Ammunition Columbia 11th Howitzer Brigade

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Jan. 26 mar.	1916 Feb. 29	V V	app Prov. Cpl. 1-2-16 Reduced to ranks 1 Gr. 18-3-16.	D.O 15-110-2-16. Trans pay list

Form DMS 1401.

A. & D. CARD

No. 4 Canadian Gen. Hospital ..... HOSPITAL.

Basingstoke.

AT .....

A. & D. No. M3 / 4839 PL. OF ACTION France

RANK Corp REG. No. 914158 UNIT C7A. 43/8 SICK OR WOUNDED

NAME Blackett A AGE 25 RELIGION RC

PLACE IN HOSPITAL Bk.

DIAGNOSIS Sprained R ankle

ADMITTED 13.9.18 FROM Shaeraehot

DISCHARGED ..... TO .....

TRANSFERRED 18.10.18. R.A.C.C.P. Berkhill

SERVICE AT HOME 6 mos IN FIELD 26 mos

RESULTS .....

(See Document Card for M.H. Sheet and other Documents.)

P.T.O.

REMARKS.

Form R. 149.

alonga

Name BRACKETT Rank ~~Cpl~~ Reg. No. 314158

Unit ~~5th Bde C.F.C. Capable Ch.A.~~ C.A.R.D.

Next of Kin Canada

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
18-2	to Can Hosp		D.N.O.	a/175		13991
23-2	from Can Cas Clg Stat		do	a/179	14263	
25-2	26 G Type Etaples		do	a/183	14465	
11-3	to Conv Depot Etaples		do	a/195	14324	
13-3	13 Conv Depot Rouen		do	a/196	14344	
2-4	Discharged		do	a/212	14615	
3-9	to Can Cas Stat		Gas Poisoning	B343	1343	16186
8-9	Cambridge Type Aldershot		do	B345	16189	
14-9	to Can Gen Type Bramshott		do	B346	26643	
19-10	P.P. CR x	Berkine	do	B380	29715	
1-11	Discharged	—	do	B391	9103	
	RL Will proceed 1-11-18. Res Type Widely					C.A.B.2.8

over

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
12.12.18	Can Stec	Wisley	42	64 29		1080
	R.A.F. to 429. 19.12	Kastbhg 20		64 38.		5955
24.1.19	Discg	do	do	64 62		1319
7.4.19	PP to R to Buckhill		42	65 43		10231
19.4.	Dis to. PP to R to Buckhill		20	65 43		3394

7/5 Rics for adm + Diagnosis

NAME Brig Kettle

RANK AND CORPS Cpl. Can Arty

REGT'L. No. 314158

H. Q. FILE No. 649

FOLLOWS No.

FOLLOWS

CABLE

No.	Date

NATURE OF CASUALTY

L. L. 31493. M. & D. 8476.

M. F. W. 42 - 100M.—28-11-17.
H. Q. 1772-39-893.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
A179	#1 Can Cas Clrstat	23-2-18	(8B) Pleu
A182	#2 Can Staples	25-2-18	"
A195	#6 Canad Red Cross Hospital Shipley	11-3-18	"
A196	#13 Canadian Military Hospital Orpington	13-3-18	"
A2120	Leeds	2-4-18	(8B) Pleu
A343	Cardiff Stret	3-9-18	fractibula
B345	Cambridge Aldershot	8-9-18	"
B349	H Can Red Basingstoke	14-9-18	"
B380	8 Can Red Cross Hospital Bickley	15-10-18	"
B391	Leeds	1-11-18	"
C429	Can Spec Witley	12.12.18	H2 2v appl H C 438 20
C462	Leeds	24-1-19	

Reg. No. 31458 Name Brackell A

Rank Spr Corps S & R Age 25 Service 6/18 E 12/12 D 76/12

Ledger No. Serial No. A 31830

24

HOSPITALS	DATE	DIAGNOSIS
Camp Hill Halifax S & R	25-6-19 28-7-19	Jaundice C

P. T. O.

HOSPITALS	DATE	DIAGNOSIS

M. F. W. 2553.
50M-6-19.
1772—39-1332.

Form DMS 1401.

LOCAL

Princess Patricia Canadian Red Cross Hospital, HOSPITAL.

A. & D. CARD

T 2540 A

AT Cooden Camp, Bexhill

A. & S. No. 314158 PL. OF ACTION Mitley

RANK Cpl REG. NO. UNIT Can Res Art SICK OR WOUNDED

NAME Brackett A AGE 26 RELIGION RC

PLACE IN HOSPITAL ow 1

DIAGNOSIS V. D. D.

ADMITTED 6-4-19 FROM Can Res Art Camp Hp Witley

DISCHARGED 19 4 1919 TO Art. Regt. Drf. Ripon

TRANSFERRED

SERVICE AT HOME 38/12 IN FIELD

RESULTS

DISCHARGED TO DUTY.

Cmd

(See Document Card for M.H. Sheet and other Documents.)

[P.T.O.

REMARKS.

Form DMS 1401.

T 32166.

A. & D. CARD

Princess Patricia Canadian Red Cross Hospital HOSPITAL.

AT Cooden Camp, Bexhill.

Reg. A & D. No. 314158 PL. OF ACTION Arras

RANK Cpl REG. NO. UNIT C. Fd 1 43rd Bty SICK OR WOUNDED

NAME Brackett A AGE 25 RELIGION RC

PLACE IN HOSPITAL Div H

DIAGNOSIS Spr. Ankle (R)

ADMITTED 18-10-18 FROM No 4 CCS Basingstoke

DISCHARGED 1-11-18 TO Res. Bde. Art. Witley

TRANSFERRED

SERVICE AT HOME 31/12 IN FIELD 26/m

RESULTS

DISCHARGED TO DUTY.

Cat A

(See Document Card for M.H. Sheet and other Documents.)

P.T.O.

REMARKS.

Laborer

NAME Brackett. G. REGT. No. 3/4/5-8.

RANK AND UNIT Cpl. 4th Bn. Can. Art.

NEXT OF KIN

CABLE		NATURE OF CASUALTY
No.	DATE	

M. F. W. 42—100M.—8-18.
H.Q. 1772 39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
6 5-43.	P. P. 6. R-6. Barhill	7-4-19	42
65-43.	" " " Res.	19-4-19	

FORM D M.S. 1359
1438 50M 3-1-17.

UNIT PRINCESS PATRICIA CANADIAN RED CROSS

RANK— Cpl NAME— Brackett A REG. NO.— 31415 UNIT— C-7 a

Lesion Sprained ankle 3-9-18.

Treatment

Commenced

Remarks 19.10.18. Good

22.10.18 Massage to Rt. ankle. 9 DD (pupil) R.A.M.C.

25.10.18. Disc Massage RR Returned to Canada Capt Cameron

Disch. 1/11/18

Barber pupil

OVER.

	Treatm't.	Initial.	Treatm't.	Initial.	Treatm't.	Initial.
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23	Massage	W.P.				
24	"	W.P.				
25						
26						
27						
28						
29						
30						
31						

Date Treatment Commenced ..... 19 .....

M. F. W. 71—500M.—6 18.
1772—39—961.

NAME Brackett, Alonzo.

REGIMENTAL NO. 2780076 RANK L/Cpl.

ENLISTED AT Halifax. N.S. PROMOTIONS, &c. AND DATE

DATE 4 Feb 1920.

IF SERVED PREVIOUSLY. STATE UNIT. &c. 43rd Battery C.F.A. 4 years 10 mos.

~~MARRIED. WIDOWER. OR~~ SINGLE

NEXT OF KIN Mrs Theresa Brackett RELATIONSHIP Mother

ADDRESS OF 45a St Johns Ave Commons Halifax.

ASSIGNMENT OF PAY $ — C. — TO —

ADDRESS —

SEPARATION ALLOWANCE. ENTITLED OR NOT —

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR

CASUALTIES, &c.

NATURE E.G. ABSENCE, PROMOTION, &c.	PART II. D. O.		REMARKS IF IN HOSPITAL, NOTE NAME, &c.
	NO.	DATE	
J. O. S. 4.2.20	No 36	5.2.20	
Ackr L/Cpl vide para	"	"	
SOS on demobilisation with effect 6.3.20 Authy R.O. 1388 para 4(a) dd 18.11.19	66.	6.3.20	

Surname Brackell

Christian names A

Regtl. No 278076 Rank Pte

Unit C.M.P.C. Spec. Guard

H. Q.

M. D. No 6

T. O. S. Feb 4 19 20

D. O. Pt. II 36 of 5.2.20

S. O. S. 19

Reason

Auth.

Next of kin

Relationship

Address

Also notify:

BORN—Place

Date

ATTESTED—Place

Date

O/S

R/C

W. 22—50M.-3-19. 1772-39-839.

FORM D M.S 1300

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
BRACKETT	A.	314158.

RANK	UNIT	CO.	TROOP	BATTY.
Cpl.		CA.8B.		

HOSPITAL — DATE OF ADMISSION

4 CFA/ — 18-2 18.

1. 1 Can. Cas. Clg. Stn. — HOSP 23. 2. 18.
2. 26. Gen. Staples. — HOSP 25-2-18.
3. 6 Can. Def Etaple — HOSP. 11. 3. 18.
4. 13 Can. Dp Ironside — HOSP. 13. 3. 18

DIAGNOSIS

PUO. at.

1 Frac. Fibula Acc. h,

2- V.D. S.y.

V.D. G.h.

3 V D S. h

DISPOSITION — DATE

CL. 23-2-18. A175.

28. 2. 18 A179
4-3-18 @ 182 (2)
19. 3. 18 A195. 3.
20. 3. 18 A196. 5.
10.4.18 @ 3
11-9-18 @ 348.2
12-9-18 B/345-1.
17. 9. 18 B 349 (2)
23-10-18 B 380-2
5. 11. 18 B 391. 2
19-12-18 C 429.
2. 1. 19 C 43 8 Note Re C 429 correct klein
30. now asc as V D G & not V D S.
7. 1. 19 C 462.
4 5. 19 C 543.
DO

REMARKS

Dis 5.4.18
Dis 1.11.18
" 24.1.19
x " 19.4.19.

A.M.D. 2 DEPT.
Bch. of D.R.M.S. CAIRO

EPITOME OF HOSPITAL TREATMENT

	HOSPITAL	ADM.
1.	7 C. C. S.	3.9.18
	Cambridge H., Aldershott.	8-9-18
2.	4. Can. Gen. Basingstoke	14.9.18
	P.P.C.L.I. Bexhill	19-10-18
3.	Can Spec Witley	12-12-18
	P.P.C.L.I. Bexhill	7.4.19.
4.		
5.		
6.		
7.		

AUDITOR 6 | PAY MASTER 1363

Munnehahda May 23/19

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

M. OR S. | REGT. NO. 314158 | RANK Capt. | NAME (IN FULL) Brackett A. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Yes $ 30 | DATE EFFECTIVE 1.6.19

TO WHOM PAID Same as A.P. | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Trans	14-5-19	Lo. 161

ORIGINAL UNIT Atty | IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION

DATE OF ATTESTATION

TRANSFERRED TO 43 St. Johns Ave. | DATE | AUTHORITY

TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ 200.00 | DATE EFFECTIVE 1.6.19

PAYABLE TO Mrs A. Brackett | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS Bank of Montreal, Main Branch, City.

ADDRESS 131 Creighton St. Halifax

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE Halifax | DATE 29-8-19 | REASON Demob | AUTHORITY Lo. 161 | IF ENTITLED TO POST DISCHARGE PAY

C.R.L.

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.		TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.		TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																		By Bal. Cash allce in M.O.G.
31/5/19		+10			26	48																												Aggn. Boat cat 1/3
	120				35	00																												Bal Due cat 3
					70	00		131	48							487	50	121	61									131	48					
					W.S.G. S.A.											WAR SERVICE GRATUITY W.S.G. S.A.																			
183 days			420	00	180	00		600	00													70	00					350		180				Lt Pay cat 1/3
																						67	60	48	00	1200		280		120				8777 41-2 2-379
																										240								Cl. Pay cat 1/3
																						70						210		120				" 2 days at 120
																								30				210		90				T.O.S. (ESC) 24.6.19 (7176)
																						70		30				140		60				S.O.S ISC 26.7.19
																						70		30				70		30				89985-5 1-8-19
																																		1115751 8-8-19
																																		113370 3-9-19
																																		150 1/2 3 30 25-2-19
																																		7765-75-C 25-2-19
			420	00	180	00		600	00							417	60	168	00	14	40							600	00					
																																10	00		
																																		Completed
			18	00	6	00																				11	00				XX	XX		Overcharged $10.00 S.A. 1915086 2-2-20

certified that all payments due on this acct. have been paid.

A. Chan CAPT.
For Senior Officer Pay Services, M. D. 6

JUN 26 1919

200M-3-19.—L. L. 58788-I.I. & D. 9985.
M. F. W. 2596.
1772-39-1390.

AUDITOR | PAYMASTER

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

M. OR S. Single. REGT. No. 2780076. RANK L/Cpl. NAME (IN FULL) Brackett, Alonzo.

NEXT OF KIN Theresa Brackett, RELATIONSHIP Mother
ADDRESS 45a St Johns Ave. Commons, Halifax. N.S.
IS SEPARATION ALLOWANCE PAID? DATE EFFECTIVE
TO WHOM PAID RELATIONSHIP
ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
T.O.S.	4-2-20	D.O. 36
Appt. 2/Cpl.	4-3-20	D.O. 36

ORIGINAL UNIT C.E.F. 43rd Battery 67th | IF IN P.F. WHAT UNIT? Special Guard CMP6 | (BLOCK LETTERS SURNAME FIRST) MD.6.
PLACE OF ATTESTATION Halifax N.S. | TRANSFERRED TO | DATE | AUTHORITY
DATE OF ATTESTATION 4-2-20. | TRANSFERRED TO | DATE | AUTHORITY
ASSIGNED PAY $ Nil. | DATE EFFECTIVE
PAYABLE TO | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS
ADDRESS
STOP PAYMENT FORM ASSIGNED PAY RENDERED. DATE | EFFECTIVE
DISCHARGED | PLACE | DATE | REASON | AUTHORITY | IF ENTITLED TO POST DISCHARGE PAY
Halifax. N.S. | 6-3-20. | Demobz | D.O. 466

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.			TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.			TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT 4-2-20																																			
29.2.20	26	1.15	29	90	26	-			55	90	121	27/2					10	-													10	-			45	90	
Mch.	6	1.15	6	90	6	-			58	80					128	5/3					58	80									58	80				
					45	90																														
			36	80	77	90			114	70							10	-			58	80									68	80			45	90	

True Copy
B Brackett
6-12-20

200M-3-19.—L. L. 58788-M. & D. 9985.
M. F. W. 2596.
1772-39-1398.

MARRIED OR SINGLE S.

PLACE OF BIRTH Halifax, NS.

NAME AND ADDRESS OF NEXT OF KIN James Brackett.
37 Creighton St. Halifax, NS.

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
Should have been reduced to pte. on Offr from 11th Bde	16-6-16	30.83, 25/5/16
Struck Corpl	11/10/17	DO 444 17/11

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 314153 RANK ~~Corpl~~ Cpl NAME Brackett Alonzo C.E.F. 30.83

IF IN PERMT. CORPS, WHAT UNIT — UNIT 11th Bgde. A.F. TRANSFERRED TO 10th Bgde. DATE 16/6/16 AUTHORITY 25/5/16

PERMANENT FORCE ALLOWANCES — TRANSFERRED TO 8th Bde CFA DATE 31-7-17 AUTHORITY 30.90, 21-8-17

PLACE OF ATTESTATION Halifax — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION February 11th 1916 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY MONTHLY $ 20.00 DATE EFFECTIVE 1/4/16.

PAYABLE TO mrs. Alonzo Brackett, 51 Creighton St. Halifax, NS. RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

C1

DATE 1916	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 NO.	1 DATE	2 NO.	2 DATE	3 NO.	3 DATE	4 NO.	4 DATE	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
														10	10																1000				clothing acct.
Apr	30	1.10	33 00		30	10	3 00								36 00			83 22/5/16						2 43				20 00		22 43	23 57			
May	31		34 10		31	10	3 10								37 20	122 15/5											4 86	20		29 73	31 04			
1-15 June	15		16 50		15		1 50								18									4 87				20		20	29 04			
16-30 June	15		16 50		15		1 50								18			77 15/6/16						4 87	2 43	4 86		60		72 16	4 87	4 17			
July	31		34 10				3 10								37 20	159 20/6		287 31/7						14 60	4 87			20		39 47	39 90			
																		84 15/8							2 67									
Aug	31		34 10				3 10								37 20	24 77/7		65 29/7						2 67	2 67			20		27 86	49 04		49 04	30.3 185, 5/9/16 5 days No. 1 FP
Sept	30		33				3								36 00	118 29/8								2 67				20	5 50	28 17	57 17		57 17	
																182 20/9								2 67									
Oct	31		34 10				3 10								37 20	150 29/9								2 67				20		25 24	69 08			
																250 30/10								2 67									
Nov	30		33				3								36 00	216 15/10								2 67				20		25 24	79 84		79 84	
Dec	31		34 10				3 10								37 20									2 67				20		20 00	99 04		99 04	
1917 Jan	31	1.10	37 50													306 30/11								2 67	2 61			20	19 90	49 75	89 29		89 29	199 days pay as Sgt. Reverted
															34 10	278 9/11		36 0 22/12																
Feby	28		30 80												30 80	308 1/12		38 5 /1						11 30	2 67			20		36 58	77 62			
			394 90											10	404 90									51 77	26 76	4 86		720	26 40	827 79					

Checked A. Brackett

Dlf 158 CORP Brackett, Alonzo

DATE 1917	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
Fwd.			39	90										10	40									51 77	25 26	86		70	25 40	227 29	77 61			77 61	
Mch	21	10	34	10											34 10	640	22/12	550	5/1	343		WAR LOAN	7 67	7 67		69 26	70		107 65	9 76			9 76	
Apl	30		30	00											30 00												70		70 00	77 76				
May	21		34	10											34 10	27	17/4						7 67				70		77 67	30 95			30 95	
June	30		33	00											33 00	165	29/6						7 67				70		80 58	26 16			26 16	
July	30		33											10	33 00												70		70 00	49 16			49 16	20.90, 21-5-17 Ffd. £8 15/- Bde CFA
	1		1	10											1 10														50 26				
Aug	31		34	10											34 10	303	25/6						268				20		22 68	61 68				
Sept	30		33												33			483		344 304	11/6			268	357 268		20		28 93	65 75				
			630	30										10	640 30								72 89	35 80	11 11	69 35	360	25 40	574 55				

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR 3	DR 4	BALANCE
Oct 1	Brought Forward	~~65 45~~							65 75
	Corp Pay 1/3	34 10		AP			20		79 85
		34 10					20		
Nov	Gpl Pay	33		AP			20		
	Term Insp 4/11/17 Pvt 1st Cl 1/11/17 Sta Insp 21 10	5 10		AR 699 8 Rds 9/10/17		4 46			
				CR 1273 7/11/17		4 87			
				CR 1458 25/11/17		2 43			
				AR 635 8 Rds 24/9		2 68			
				AR 749 — 23/10		3 57			
Dec	Cpl Pay	37 20		AP			20		
				AR 841 8 Rds 12/11		4 46			
				AR 857 — 24/9		2 68			
				Wh AR 669 10 Rds 1/9		5 35			84 65
		75 30				30 80	40		
Jany	Cpl Pay	37 20		AP			20		
				AR 825 8 Rds 9/11		4 46			
				" 1535 — 14/11		9 73			
				" " — "		18 67			
				" 934 — 7/12		14 28			
				" 1005 — 21/12		5 35			1936
		37 20				82 49	20		

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR 3	DR 4	BALANCE
May	Corp Pay		33 60	AP				20	19 41
				Allotm Mar 1/1		5 35			
				1157 — 28/1		5 35			
				1215 — 6/2		5 35			16 91
			33 60			16 05		20	
			33 60			16 05		20	
Mar	Corp Pay		37 20	AP				20	
				AR 8878 - 8 Rds 16/3/18		8 92			25 19
			37 20			8 92		20	

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:- 1/4/16		EFFECTIVE DATE:-	
AMOUNT:- 20ᵒᵒ.		AMOUNT:-	

NAME:- BRACKETT Alonzo

NUMBER:- 314158

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 Alonzo Brackett
51 Creighton St.
Halifax
N.S.

Stop- 1-6-19

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
D.O.144 14/10/17	11/10/17	Corpl

UNIT AND TRANSFERS

ORIGINAL UNIT:- 11th Bde A.F.A.

DATE ACCOUNT FIRST OPENED:- 1/4/16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
	31/7/17		8th Bde

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 10	- 10		

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
~~26/3~~	~~6r 73~~	~~C R A~~ £1-1-0	~~5 11~~				
~~7/4~~	~~39x~~	~~Cordeux~~ 2-0-0	~~9 73~~				
~~21/4~~	~~316x~~	~~Rep~~ 1-10-0	~~7 20~~				
~~24/4~~		~~Repm~~ 3-0-0	~~14 60~~				
			36 74				

Dis-706a 3/5/18- 8.08. Repm 6 3/5/19 Repm 6r 26. 48/100

PARTICULARS OF RENDERING NON-EFFECTIVE

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
March	Bal Fwd.								25 19		
Apr.	Corpl. Pay	36 -		Cap.				20	41 19		
				717 CGBD. 14/4	1 78						
				774 " 7/4	4 46						
				77 8th Bde 24/4	5 35						
				DN-8430-13th Cd. 16-3-18	3 57				26 03		
		36			15 16			20			
May	Corp Pay	37 20		Cap				20	43 23		
				8974 13 Con Dep 31/3	3 57						
		37 20			3 57			20	39 66		
June	Corp Pay	36 -		Cap.				20	59 66		
				329. 18/6	8 92						
		36			8 92			20	46 74		
July	Corp Pay	37 20		Cap				20			
				408 11/7	3 57				60 37		
		37 20			3 57			20			
Aug	"	37 20		Cap				20	77 57		
		37 20						20			
Sept	"	36 00		Cap				20	93 57		
				6117 4 C G Hosp 17/9	4 87				88 70		
		36			4 87			20			
Oct	"	37 20		ar.6865. 4.10.18. 4C GH Basingstoke	4 87						
				Cap				20	105 90		
				ar 9652. 23/10	4 87						
				" 9544. 22/10.	4 87				91 29		apd.
		34 20			1461			20			
				Q4006 11/4. 15/10/18.	04						
				ar 254. 13/11/18. cka.	4 84						
				ar.d645 16.11.18 till 09.00 18.11.18 3 days pay C.S.of Gunn to 324. 20.11.18		3 60					
					491	3 60					

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									91 29		
				Forw.	4 91	3 60					
				CP 73266 30/11/18	43 00						
				AR 1099. 28/11/18	14 60						
				" 914 26/11/18	4 84						
	CR Nil Dec & Jan	110 40		Cap	97 38	3 60		60	40 41		
		110 40			97 38	3 60		60			
				14158 19/12 C.R.A.	4 99						
				5315 28/ C.S.H.	2 43						
				4442 11/2 C.R.A.	4 87						
				5076 24/2 "	24 33						
Feb	Cpl	33 60		Cap				20			
Mch	Cpl	37 20		Cap				20			
				5594 11.3 CRA	4 87				30 02		
		70 80			41 49			40			
Apr & May	Cpl. Pay.	73 20		C. A. P.				40	63 22		
				57/2 - 7/4 - 1 Bexhill	9 73						
				6x73 - 25/5 - C. R. A.	5 11						
				2x50 12/4 "	7 30						
				3583 - 29/4 "	14 60				26 48		
		73 20			36 74			40			

S. O. S. to Can. 14/5/19 - S. L. 55. M. D. 6.

63 22
36.74
26.48

30.02
33 20
63 22
36 74
26.48

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. Pay Certificate (C.A.P.C. 5003a).
6. Field Conduct Sheet (A.F.B. 122).
7. Proceedings on Discharge (M.F.B. 218a).
8. Discharge Certificate (M.F.W. 30).
   (Enclosed in Special envelope (S.C.M.).
9. Copy of Discharge Certificate (M.F.W. 30a).
10. Dispersal Certificate (C.D.3).
11. Statement (Statement C.M.G. Form (D.O.S. 2)a,
    or Casualty Certificate (D.S.).
    (Enclosed in Envelope M.F.W. 3506).

Group A

Checked by No 2C
A.F.M.

Date 13/5/19

11 MAY 1919

War Service Badge
Class "A" No. 226178

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

H

M

C.A.M.C. 11th Bde

1. No. 314158
2. Rank. Corp.
3. Name. Brackett Alonzo.
4. Unit. CAMC. (Orig 11th Bde Amm Clmn) France 43rd Battery C.F.A.
5. Date of Discharge 29-5-19 Place Halifax NS.
6. Reason for Discharge Demobilisation.
   Next of Kin Wife
   Occupation Labourer Group 7
   Service 26 mos Group 7
   Category A1 R.C.
7. Authority. R.O. 1420
8. Proposed Residence after Discharge 131 Creighton St. Halifax NS.

Dispersal Station B

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W. ?

G. Brackett
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place HALIFAX, N.S. MAY 22 1919

Date

Signature Major
O.C. Dispersal Station B
(O. C. Discharging Unit.)

21-2-36 AS

M.F.B. 218a—300M.-11-18—1772-39-113.

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

SPECIAL GUARD
MAR 6 1920
Canadian Military Police Corps

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 2780076

2 Rank. Lance/Corporal.

3. Name. BRACKETT, Alonzo.

4. Unit. Special Guard, C.M.P.C.

5 Date of Discharge Mar. 6, 1920 Place Halifax, N.S.

6 Reason for Discharge Demobilization.

7. Authority. R.O. #1328, Para. 7 (e), dated 18-11-18.

8. Proposed Residence after Discharge

45 A. St. John's Ave.,

Commons, Halifax, N.S.

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.? 39.

A. Brackett

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Halifax, N.S.

Date March 6th, 1920.

Signature J. H. Brown Lieut./Col.
(O. C. Discharging Unit.)
O.C. Special Guard, C.M.P.C.

M.F.B. 218a—300M.-11-18—1772-39-113.

2-2-56
AS

MILITARY AND FAMILY HISTORY SHEET.

1. Service at Home and Abroad (including former service of re-enlisted men, when allowed to reckon towards Increased Pay for Length of Service or Pension).

COUNTRY	FROM	TO	YEARS	DAYS	N.B.—The country only to be shown—it is not necessary to show separately the services in the different stations of the same country.

Initials of Officers.

2. Passed classes of Instruction ....

3. Campaigns .....

4. Wounded .....

5. Effects of wounds.

6. Special instances of gallant conduct .....

7. Medals, Decorations and Annuities .....

8. Particulars as to Marriage .....

(a) Christian and surname of woman to whom married and whether spinster or widow; (b) Place and date of marriage; (c) Name of officiating Minister or Registrar, and (d) Name of two witnesses.				Date of being placed on Married Roll.	Initials of Officers.
(a)	(b)	(c)	(d)		

9. Particulars as to Children .....

Christian Name	Date and Place of Birth		Date and Place of Baptism, and Name of Officiating Minister

NOTE.—These entries are to be made from time to time as they occur, and initialled by the officer making the entry. Deaths at 8 and 9 to be indicated by deleting in Red Ink, giving date, etc., directly above.

Triplicate.

PERMANENT FORCE OF CANADA

ATTESTATION PAPER.

REGT. NO. P.F. 2780076

FORMER REGTL. No. 314158

(1) PERMANENT FORCE

P.F. UNIT Sp. Gd C. M. P. C.

(2) C.E.F. 48th Battery C.F.A.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

[ANSWERS]

1. What is your surname? Brackett
2. What are your Christian names? Alonzo
3. What is your present address? 45a St Johns Ave Commons Halifax
4. What are particulars of your birth? (a) 26 Apl 1895 (b) Herring Cove (c) Halifax (d) County N.S.
   (a) date, (b) town, (c) township or parish, (d) country.
5. Are you a British subject? Yes
   (If not, to what country do you owe allegiance.)
6. What languages, other than English, do you speak? none
7. Are you single? yes Married? — or Widower —
8. What is your trade or calling? Painter
   (See Attestation Paper completion guide.)
9. What is your religious persuasion? R.C.
   (See Attestation Paper completion guide.)
10. Are you willing to be vaccinated or revaccinated and inoculated? yes
11. Have you ever served in any Military Forces? Alonzo Brackett 43rd Battery C.F.A. 4 years 10 months
    (If so, give particulars of former service.)
12. Are you willing to be attested in the Permanent Military Forces of Canada? Yes
13. Have you ever been discharged from any branch of H.M. Forces as medically unfit? no
14. If so, what was the nature of the disability? —
15. Have you ever offered to serve in any branch of H.M. Forces and been rejected? no
16. If so, what was the reason? —

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Alonzo Brackett, do sincerely and solemnly declare that to the best of my knowledge and belief, the above answers to the foregoing questions made and signed by me are true; and that I am willing to be attested for the term of 3 mos apprent, provided His Majesty should so long require my services, or until legally discharged, and do understand the nature and terms of this engagement.

Alonzo Brackett — Signature of man.

Wm Scott L/Cpl — Signature of witness.

Dated this Fourth day of February 1920 at Halifax N.S.

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Alonzo Brackett, do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

Alonzo Brackett — Signature of Recruit.

T.O.S. Sp Guard C. M. P. C. D.O.

CERTIFICATE OF MAGISTRATE, JUSTICE OF THE PEACE OR ATTESTING OFFICER.

The recruit above-named was cautioned by me that if he made any false answers to any of the above questions he would be liable to be punished as provided by law.

The above questions and answers were then read to the recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath.

before me, at Halifax this 4th day of February 1920 ~~191~~.

N. S. F. Spreadborough — Signature of Magistrate, Justice or Attesting Officer.

Royal Canadian Dragoons — Office or Rank and Unit or Appointment.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT.

M. F. B. 235.
15M-10-19-D.P.755.
1772—39—87.

Auth P.M. File 128. 2.10.19.

DESCRIPTION OF Brackett, Alonzo. ON ENLISTMENT

AND CERTIFICATE OF MEDICAL EXAMINATION.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 4th day of Feby 1920, by the undersigned Medical Board sitting at Halifax N.S.

1. Age as stated 24 Years 9 Months
2. Apparent Age 24 Years 9 Months
3. Height 5 Feet 10 Inches
4. Weight 160 Pounds.
5. Chest Measurement — Minimum 37 1/4 Ins. / Maximum 40 1/4 Ins.
6. Complexion Medium — Eyes Brown / Hair Dark
7. Physical development Good (Good / Fair / Poor)
8. Smallpox marks
9. Number of Vaccination marks. — Right arm 2 small / Left arm Nil
10. When vaccinated last 1918
11. Distinctive marks and marks indicating congenital pecularities or previous disease (Should the Medical Officers 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).

Mole on back of left leg

12. Slight defects, but not sufficient to cause rejection
13. The man denies having had (Rheumatism, Tuberculosis, Nervous or Mental disorder. Epilepsey, Syphilis, Asthma.)
14. We find no evidence of past (Rheumatism, Tuberculosis, Nervous or Mental disorder. Epilepsey Syphilis Asthma)

(Strike out disease admitted or suspected)

We have examined the above named man in accordance with the Permanent Military Forces of Canada Regulations for medical examinations, and he is placed in Category **A**

15. (a) Vision R. 20/20 L. 20/20.
(b) Hearing R. Normal L. Normal.

J.H. Brown Capt. President.

Member Member.

(Any special remarks of Medical Officers may be added below.)

PARTICULARS OF NEXT-OF-KIN.

Name and Relationship.	Address.	Subsequent Changes.
Mrs Theresa Brackett Mother	45a St Johns ave Commons Halifax	

CERTIFICATE OF OFFICER COMMANDING UNIT.

Alonzo Brackett 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, and that his service reckons from the 4 day of February ~~191~~ 1920

Date 4th Feb: 1920 191

J.H. Brown. Major (Signature of Officer)
O.C. Special Guard. C.M.P.C.

NOTE.—Service reckons from date commenced to draw pay. A.A. (1914), Part II., S.S. 100, para. (2).

STATEMENT OF THE SERVICES OF NO. 2,780,071 C.M.P.C. NAME Brackett, Alonzo.

Corps	Squadron, Battery, Company or Detachment	Promotions, Reductions, Transfers, Casualties, Etc.	Place.	Rank Shown	Effective Date.	Authority for Entry. Part II. D.O. Cas. List, Etc.	Authority for Entry. Dated	Service towards completion of engagements. Years	Service towards completion of engagements. Days	Signature of Officers Certifying Correctness of entries.
Sp. Guard C.M.P.C.		Service towards engagement reckons from 4th Feb 1920 joined at Halifax	Halifax	Pte	4/2/20					
		Appointed L/Corpl with pay	"	L/C	"					
		Total services as above				36	5.2.20			