ATTESTATION PAPER.

No.

Folio. 86300

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS).
1. What is your name?	Albert James Ward
2. In what Town, Township or Parish, and in what Country were you born?	Barking. Essex
3. What is the name of your next-of-kin?	Sister, Florence Eliza Cordell
4. What is the address of your next-of-kin?	126 Grange Road Pleistow. Essex
5. What is the date of your birth?	July 22 - 1877
6. What is your Trade or Calling?	Teamster
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? If so, state particulars of former Service.	no
11. Do you understand the nature and terms of your engagement?	Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?	yes

Albert James Ward (Signature of Man).

C.A. Mynard (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, A. J. Ward, 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.

Albert James Ward (Signature of Recruit)

Date June 15 1915 C.A. Mynard (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, ..., 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.

Albert James Ward (Signature of Recruit)

Date June 15 191 . C.A. Mynard (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 ..... this ..... day of ..... 191 .

W. A. Adams (Signature of Justice)

J.P. Manitoba

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

J.T. Duchesnay (Approving Officer)

O.C. 5 Artillery Brigade

M. F. W. 23.
200 M.—5-15.
H. Q. 1772-89-841.

Description of Albert James Ward on Enlistment.

Apparent Age 37 years 4 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 4 ins.

Chest measurement: Girth when fully expanded 38 ins.; Range of expansion 2 ins.

Complexion Ruddy

Eyes Blue

Hair Med Brown

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

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).

Scar on right wrist

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 June 15 1915 A.D. Cuyler Capt. A.M.C.

Place Winnipeg 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.

A J Ward 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.

L. J. Ducharme (Signature of Officer)

Date June 15 1915 O.C 5th Artillery Brigade C.E.F

REGIMENTAL DOCUMENTS

Pte WARD Albert James REGT. NO. 86300 UNIT 5th Fd Amb R.A.M.C. FILE NO. Inc. 27/9/19

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
H	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
1	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
1	MEDICAL EXAMINATION (M.F.W. 129)					
1	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
	Misc					

H

05538

W. 2589
100M-11-18
4777 33 1377

Number 86300 Rank Gnr.

Surname WARD

Christian Name Albert James

Units C.F.A. Theatre of War France

Date of Service 15-1-16

Remarks

Latest Address 50 Brook Road
Plaistow
Essex
Eng.

Roll No. B Pags 13031

200m.-2-21.M.

DESP. MAY 13 1922
REGN. No 15178

85

No. 86360 RANK Dvr. NAME Ward, A. J.

T. O. S. 15-6-15, UNIT Bde Ammn col. 5th Arty Bde C.F.A.
(B.O.816 of June 8th L)

M. D. 10

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915- June 15	1915- June 30	C		

SURNAME. Ward

CHRISTIAN NAMES Albert James,

REGL. No. 86300 RANK Dr.

UNIT 5th Fld. Art. Bde.

FORMER CORPS Nil

O/S. CARD No.

SOS. 20/5/19. Demob

FOLL. O/S 6.6 & 4/9/19. CCP.

NEXT OF KIN.

NAMES IN FULL Sister Cordell Mrs. Florence Eliza,

RELATIONSHIP TO SOLDIER

ADDRESS 126 Grange Rd., Plaistow, Essex, Eng.

New Next of Kin

CHANGE OF ADDRESS

Mrs. E. Ward

50 Brook Rd.,

Plaistow, London E

S.H.21.38.1.19.2.19.

COUNTRY OF BIRTH England. Barking Essex. DATE July 22nd 1877

PLACE OF ATTESTATION Winnipeg, Man. DATE June 15th, 1915.

O/S. 8-8-15. 167/19.

L. L. 10437. M. & D. 7253.

M. F. W. 22. 100M.—11-16. H. Q. 17 2-39-339.

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Teamster RELIGION Church of England

DESCRIPTION.

APPARENT AGE 34 YEARS 11 MONTHS

HEIGHT 5 FEET 4 INCHES

CHEST MEASUREMENT 35 INCHES EXPANSION 2 INCHES

COMPLEXION Ruddy EYES Blue HAIR Med., Brown.

DISTINGUISHING MARKS Scar on right wrist.

MEDICAL EXAMINATION. PLACE Winnipeg Man. DATE June. 18th 1915.

Present Address not stated.

(611)—Wt. W1751-1403. 500,000.—5-15.—C. & G. Forms B. 103/1.

Army Form B. 103.

Casualty Form—Active Service.

CERTIFIED CORRECT. Canadian Record Office, Westminster House, Millbank, S.W.

Regiment or Corps 5th Artillery Brigade C.F.A.

W.S.B. CLASS A

Regimental No. 86300 Rank Driver Name Ward A. J.

Enlisted (a) 15-6-15 Terms of Service (a) duration of war Service reckons from (a) 15-6-15

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.
		LANDED IN FRANCE	HAVRE	19 JAN 1916	
31/5/16	C.R.A. 2nd C.D.A.	Struck of strength of 5th C.F.A. 21/5/16- taken on strength of 2nd D.A.C. upon reorganization	FIELD	22/5/16	5th C.F.A.P.ii.o.38D/31/5/16 2nd D.A.C.P.ii.o.22D/31/5/16
24-6-17.	-a- G.	To 4th CDAC	"	24-6-17. 16-1162	" " 134. 9-7-17.
30 6 17	OC	TOS 4th CDAC	"	25.6.17	B213 S/29090 P.II 2 D/9/7/17
15 9 17	OC	Granted 10 days leave	"	7-9-17	B213 P.II. 37 D/25.9.17
22.9.17	OC	Reprimanded	"	20 9 17	" 41 D/2/10/17
8 10 17	OC	Awarded 1 CB		15-6-17	P.II 43D/8-10-17
31-8-18	O/C.	Granted permission to marry. in accordance With Order in Council. Canada. P.C. 1872 D/6-7-17	Field.	~~31-8-18~~	B 213. pt. II Order. 87 D/1918

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

P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
28-9-18	O/C Unit	Proceeds on 14 days leave to UK	Field	29-9-18	B213 pt. 11 Oct. 19
12-10-18	O/C Unit	Joined from Leave	"	10-10-18	9/11/1918 B213.
		Proceeds to England		25 4/19.	

6a Hewett Lieut.
for Lt.-Col., A.A.G.,
Canadian Section

S. O. S. . . OMPC PROCEEDED TO CANADA

R. W. Richards Lt & Adjt
No Fleet 4th Cdn div Amn Col

DISCHARGED IN ENGLAND,
K.R. & O. PAR. 392, SEC. XXV.

O. Langstaff
Captain
Officer Commanding,
No. 2 Canadian Discharge Depôt.

R—122.

Rank Dvr Name WARD Albert James. Reg'l No. 86300.

Unit Amm.Col. 5th Art. Bde. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment C.F.A. Winnipeg. Man. June 15th/15. Place of Birth Barking. Essex.

Name and Address, Next-of-Kin ~~Florence Eliza Cordell. 126 Grange Road. Plaistow. Essex.~~ Mrs Ellen Ward, 50 Brook Road

Relationship ~~Sister~~. Wife

Assigned Pay Monthly $ Payable to

Relationship

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
		Landed England	Plymouth	18-8-15	S.S. Metegama
	Adj 5th Bde C.F.A.	A.W.L. 6 am to 9.20 A.M. Jan 4th forfeit 1 days Pay and Admonished	Shorncliffe	5.1.16	Part II O No 2
14-1-16	" "	Embarked for France.		15 JAN 1916	" " 14
21.5.16	5th Bde C.F.A.	S.O.S. & posted to 2nd D.A.C.	In the Field	21.5.16	Part II O 38
" "	2nd D.A.C.	T.O.S. posted from 5th Bde	" "	22-5-16	" " 22.
9.7.17	" "	S.O.S. to 4th D.A.C.	"	24.6.17	Pt II 124 to 4th D.A.C. 29/7/17
8-10-17	4th D.A.C.	Awarded M.M. G.C. Badge		15.6.17	Pt II 043
10.9.18	"	Granted permission to marry	Del "		Pt II. 87
31-4-19	CARD	T.O.S. from 5th Bde C.F.A. undergoing 1 Yrs detention at Wainsworth Barracks.	"	Wtly 25-3-19	84

A.F.B. 103 CHECKED (N.R.) Nov.
5 - JAN. 1917

86300 Ward. A. J.

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
27-4-19	4th D.A.C.	Proc. to Eng.	Fme	Havre	25-4-19 -33
30-4-19	Boring c.c.c.	T.O.S. pending K.T.C.	"	B'Shatt	26-4-19 -13
4.6.19	"	SOS to C(A.R.T.) Pool	"	"	17.5.19 "18
CANADIAN ARTILLERY.					
4-9-19	B Wing	SOS on disc in B.I.	"	London	20519 After Order 6 Amending P.II 18 d/5.6.19

To discharge in B. Isles 20-5-19 Auth K.R.T.O. Para 392 Sec XXV. 831 NR.

(1)

Chf. Paymaster notified
15919

C.A.D.C. 5009A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) WARD. A.J.

REGIMENT 4 Wk C D A C RANK Gnr. No. 86300

Date of Examination in England 28/4/19 Date of Examination in France

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

21-F

PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS 29
3. CROWNS
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower

/

HAS HE EVER REFUSED DENTAL TREATMENT ?

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

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

/

BRAMSHOTT CAMP
HANTS.

Signature of Dental Officer J. Howarth Capt

Embarked Sewell Camp Aug 5/15
Arrived Otterpool Camp Aug 19/15

221

MEDICAL HISTORY SHEET.

Surname Ward Ward Christian Name Albert James

Examined { on 15th day of June 1915
at Winnipeg

Birthplace { City or Town Barkin Essex
County England.

Apparent age 38

Trade or occupation Teamster

Height 5 Feet 4 Inches.

Weight 152 Lbs.

Chest measurement { Minimum 36 inches.
Maximum expansion 2 inches.

Physical development Good

Small-Pox Marks nil

Vaccination Marks { Arm Right. Left.
Number — —

When Vaccinated last 24/6/15

(a) Marks indicating congenital peculiarities or previous disease nil

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

Approved by A R Taylor
Rank Capt A.M.C. M.O.

Date	Fit or Unfit	Examined for Re-engagement,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
24/6/15	Ps	A R Taylor Capt A.M.C. M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
June 2nd/15		A R Taylor Capt A.M.C. M.O.
29.4.17	WAB	Dilo Rt. 6.42.15 M.O.
		M.O.

Enlisted on 15th day of June 1915 at Winnipeg

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	Brigade Ammn. Column.	56300		
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

Surname Ward Christian Name Albert James

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital.			Dates of Discharge from Hospital.			DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Day	Month	Year	Day	Month	Year				

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. 86300 Rank Gunner Surname WARD (Given name in full) Albert James

Unit or Corps 4th D.A.C. Birthplace England

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

1. GENERAL DESCRIPTION:

Physique good Weight 152 lbs. Height 5 ft. 7 in. Colour of Eyes blue.

Nutrition good

Pulse 72 reg

Condition of arteries soft

Vision Rt. 6/12 Left 6/12

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

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

Scar right wrist

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 nil Genito Urinary Sytem nil Cardio-Vascular System no

Special Senses no Integumentary System no Respiratory System no

Disturbance of mentality no Muscular System no Digestive System no

Osseous and Joint System no Any other general condition no

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

Nil

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

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Bramshott (Overseas)

Date 28th April 1919 Signed W. Gauthier 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 Albert James Ward

(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 lescription 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 bv Medical Board.)

(This space to be used, if necessary, in connection with Section 8, overleaf, only.)

[OVER]

M.F.W. 139.
1033 (D.P.) 500M-11-18.
1772-89-1142.

Rank Name WARD Albert James. Reg'l No. 86300.

Unit Amm.Col. 5th Art. Bde. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment C.F.A. Winnipeg. Man. June 15th/15. Place of Birth Barking. Essex.

Name and Address, Next-of-Kin Florence Eliza Cordell. 126 Grange Road. Plaistow. Essex.

Relationship Sister.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
1/8/15	31/8/15	31	1.00	31 -	31	.10	3 10		34 10			34 10			34 10	- -	
1/9/15	30/9/15	30	1.	30	30	.10	3 -		33 -			31 63			31 63	1 37	
1/10/15	31/10/15	31	1.	31	31	.10	3 10	10 -	44 10			17 03			17 03	28 44	B^c Clothing refund.
1/11/15	30/11/15	30	1.	30	30	.10	3 -		33 -			34 06			34 06	27 38	
1/12/15	31/12/15	31	1.	31	31	.10	3 10		34 10			51 10			51 10	10 38	
1/1/16	31/1/16	31	1.	31	31	.10	3 10		34 10			29 39		1 10	30 49	13 99	Paid 1 days pay & wt. 9/12.
1/1/16	29/1/16	29	1	29	29	/0	2 90		31 90			5 74			5 74	40 65	
1/3/16	31/3/16	31	1	31	31	/0	3 10		34 10			5 73			5 73	69 52	✓
				244			24 40	10	278 40			207 78		1 10	208 88		
				244 ✓			24 40 ✓	10	278 40	✓		207 78 ✓		1 10 ✓	208 88	✓	

BALANCE TRANSFERRED TO NEW LEDGER. Checked

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			No.	Date						

A-305

A.P. she sheet - found owner - Forwarded -

Ref. No. 33117

MILITIA AND DEFENCE
ASSIGNED PAY.

To whom	Mrs. F.E.Cordell, (sister)	**By whom assigned**	Ward, Albert James
Address	126, Grange Road, Plaistow, Essex, England.	**Regtl. No.**	86300
		Rank	Gnr.
		Corps, &c.	2nd Sec. 2nd C.D.A.C.
Rate	$ 15.00		
Date to Commence	1st Nov.1916		

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Pay Sheet Deduction.	REMARKS.
Jan.	1916				
Feb.					
Mar.					
April					
May					
June					
July					
Aug.					
Sept					
Oct.					
Nov.	✓ 15.00	262139	15	X	
Dec.		300744	15	X	
Jan.	1917	342469	15	X	
Feb.		381981	15.	X	
Mar.		430486	15.	—	
April					
May					
June					
July					
Aug.					

ASSIGNED PAY.

By whom assigned Ward. Albert. James.
Regtl. No. 86300 Gnr. 2 Sec. 2nd C. D. A. C.

Month.	Year.	Cheque No.	Amount.	Pay Sheet.	REMARKS.
Sept.	1917				
Oct.					
Nov.					
Dec.					
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1919				
Feb.					
March					

Form P. 812B
7961 10m 1/5/19 D.671

FILE NO. 6074

WAR SERVICE GRATUITY and SEPARATION ALLOWANCE

86300.

Payable to WARD Albert James

Address 50 Brook Rd
Plaistow — E 13. — London.

Dependent Mrs Ellen Ward

Address wife.

Date	Cheque No.	Gratuity	Payments	Balance Due.	Remarks
May 20	175 74		14 7 8		
	175 75		6 3 3	20 10 11	
June 13		86 6 0			
"		36 19 9			
"			2 3 9		O/Pon S.A. 10 65
" 21	39049		3 19 6		S.A less O/P 10 65
" 23	39048		14 7 8		
July 2.	R 868	2 3 9	41 1 10	84 7 8	Debit Entry made in Error 10 65
22	51237		16 11 5		3rd plus £23·9 above Credit
	51238		6 3 3	61 13 0	3rd
Aug 15	67959		14 7 8		
" 15	67960		6 3 3	41 2 1	
Sept 3	93704		14 7 8	26 14 5	5th
	93705.		6 3 3	20 11 2	
Oct. 8	120140		14 7 8		Final.
8	120141		6 3 6	0/0	
		125 9 6	125 9 6		

18 - 9 - 10
18 - 9 - 8
36 · 19 · 2
11 · 10 · 6
25 · 29

82 - 16 - 2
25 - 9 - 6
17 · 7 · 8

All checked and found correct
ACKLWOOD

MARRIED OR SINGLE S.

PLACE OF BIRTH Barking. England

NAME AND ADDRESS OF NEXT OF KIN Mrs F.E. Cordell
126. Grange Road. Plaistow. Essex.

RELATIONSHIP OF NEXT OF KIN Sister

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 86300 RANK NAME Ward Albert J. James

IF IN PERMT. CORPS WHAT UNIT UNIT 5th Brigade

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION Winnipeg

DATE OF ATTESTATION 15/6/15

TRANSFERRED TO 2nd D.A.C. DATE 5-6-16 AUTHORITY D038

TRANSFERRED TO 4th D.A.C. DATE 1/7/16. 1-11-17 AUTHORITY Request

TRANSFERRED TO DATE AUTHORITY

TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 15. DATE EFFECTIVE 1st November 1916

PAYABLE TO Mrs F.E. Cordell, 126 Grange Rd Plaistow Essex England RELATIONSHIP Sister.

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)

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
March			24	4			24	40						10	275 40																			
April	30	1	30		30	10	3								33	778	17/4	757	23/4					761 ✓	762 ✓					588	9729			
May	31		31		31		3	10							34 10	301	15/5					London May 1/6		756				2433 ✓		7689	16450			
June	30		30		30		3								33																13750 ✓			
July	31		31		31		3	10							34 10	532	13/6					J Kent 62 7/7/16		2537 2561	2561	4867 ✓				5639	11521			
Aug	31		31		31		3	10							34 10	577	16.6	620	13.7															
Sep.	30		30		30		3								33	669	29.7	292						2 61 ✓	2 61 ✓					5 22 ✓	1411 09		12200	2209
Oct	31		31		31		3	10							34 10	771	23-8							2 61 ✓						2 61 ✓	1711 48			
Nov	30		30		30		3								33	846	29-9							2 61 ✓										
Dec.	31		31		31		3	10							34 10	894	16-9	894	18/10					2 61 ✓	2 62 ✓					7 84 ✓	200 74			
Jan	30		30		30		3								33	936	31-10							2 61 ✓				15 20		17 61	216 13		152 50	
Dec.	31		31		31		3	10							34 10	1001	27-11							2 61 ✓										Name Assgt 1-11-16
			51	90			27	90								1030	7/12							2 61 ✓	11 33 ✓			15		31 85	218 68		183	
Jan	31		34	10											34 10	1074	3/12							2 61 ✓				15		1761	235 17		153 50	
Feb	28		30	80											30 80	1108	26-1							2 61 ✓										
Mar	31		34	10											34 10	1126	14-1							2 62				15		2023	2457		154	
Apr	30	1/10	33												32	1250	13/2	1426	24/3					2 64	2 62					2546	2543		154 50	
																1309	24/2	1358	15/3					2 62	2 61									
																						457 353							15	15	272 38		154 50	
			702	90										10	712 90									41 62	27 02	4867	232 11	90	110	44052				

Checked Schaffer

86300 Dvr Ward A J 18

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS
			702	90										10 ·	712 90
May	31	1/-	34	10											34 10
June	30 ·		33	·											33 ·
July	31 ·		34	10											34 10
Aug	31		34	10											34 10
Sept	28		33	·											33 ·
			871	20										10 ·	881 20

ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date
						495322	
20	12/4						
99	26/4						
254	26/5						
171	12/5					Q32895	
						Q69338	
337	14-6						
438	27-6					Q162875	
C.P.R.	11/9						
						Q180761	

CASH PAYMENTS 1	2	3	4
41 62	27 02	48 67	232 11
2 62			
2 62			
2 68			
2 68			24 33
2 68			
2 68			29 20
			9 73
57 58	27 02	48 67	295 37

ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
90	1 10	440 52					
15 ·		20 24	286 24		155 ·		
							D/S 416 2 Aug. Aug 16 C/R #66 not ch'd
15	2 56	47 25	271 99		155 ·		P.R. No. 159 26/9/17.
15		15 ·	291 09		155 50		
15		20 36	305 83		156 ·		
15		53 93	283 90		156 ·	117 90	
165	3 66	597 30	283 90		156 ·	117 90	

Dr 1 Dr 2 Dr 3 Dr 4 Balance

MONTH	PARTICULARS	CR. 1	CR. 2
1917			
30 Sept.	Bal forw'd	~~283 90~~	
Oct.	G.P.	34 10	
		34 10	
Nov-	Dec. Pay	33 ·	
Dec	"	34 10	
1918		64 10	
Jan.	D Pay	34 10	
		341 0	

PARTICULARS	DR. 1	DR. 2	DR 3	DR 4	BALANCE	DEFERRED PAY	SER. & G.
Od a/c a/a 243367			15 ·		283 90		156
					303		156 50
			15				
A/P B34736 27-3-18			15 ·				
AR 275 4 Dab 6-10-17				4 46			
AR 109 4 Dab 20-8-17				2 68			
A/P Rec By 9103 £ 3-1-18			15				
AR 323 4 Dab 14-7-17				2 68			
" 145 " 7-9-17				4 46			
" 152 " 7-9-17				2 68			
" 362 " 8-11-17				4 46			
" 298 " 28-10-17				3 54			
D/M - 62 " 6-8-17				8 92			
" 13 " 20-4-17				2 68			
					303 51	156 50	
		36 59	30 ·				
A/P L. 25103 £ 3-1-18			15 ·				
AR 129 4 Dab 21-11-17				12 49			
D/M - 198 " 21-9-17				2 67			
AR 527 " 27-12-17				8 03			
366				23 10			
D/M - 929 " 7-9-17				97 34	202 08	157	
		120 53	15 ·				

MONTH	PARTICULARS	CR. 1	CR. 2
1918			
Jan	B/fwd		
Feb	D.P.	30 80	
		30 80	
Mar	D.P.	34 10	
		34 10	

PARTICULARS	DR. 1	DR. 2	DR 3	DR 4	BALANCE	DEFERRED PAY	SER. & G.
					20208	157	
A/P. 70568 £ 3-1-18						15	
AR 595 4 Dab 10-1-18					357		
" 636 " 23-1-18					446		209 85
							154
							31 10
							243 95
							37 66
							212 89
AR 696 4 Dab 7-2-18					446		
" 748 " 24-2-18					354		
" 810 " 7-3-18					446		
" 855 " 20-3-18					354		212 89 154 10
					1606	15	

No. 2 Canadian Discharge Depot,
133, Oxford Street. London. W.1.

.....1919.

I HEREBY CERTIFY THAT I desire to secure my discharge in England and waive all claim on the Canadian Government for transportation to Canada for myself and dependents.

I ACKNOWLEDGE RECEIPT OF Certificate of Discharge.

Witness..Mitchell..... SIGNATURE..T. J. Ward.....

DUPLICATE.

For use of A.P. and S.A. Branch, Ottawa.

P. 851 A.

LAST PAY CERTIFICATE.

Military District.....

Dispersal Area.....

No. ..... Rank ..... Name ..... Unit .....

Nominated for embarkation to Canada: Date .....

CREDIT.	$	¢
BALANCE FORWARD as at 191		
	7	42
EARNINGS:—		
From 1-4-19 to 31-5-19		
30 days at $ 1.10	53	90
.....days at $.....		
.....days at $.....		
ANY OTHER CREDIT:—		
Interest on Deferred Pay. May 20/19	2	28
X BALANCE DEBIT	15	60

"VICTORY" WAR LOAN

Amount Subscribed - $.....

Amount Paid - - .....

Balance due - .....

I hereby Certify that I am satisfied that the balance of my account as shown on this statement is correct.

.....

(Signature of Soldier.)

DEBIT.

CASH PAYMENTS:—

Date	A.R. No.	Paying Unit	Amount
4-4	5		39
2-5	117		2 49
11-4	24		2 65
30-4	163		93

OTHER CHARGES:—

.....

.....

WAR LOAN INSTALMENTS CHARGED:—

.....

X ASSIGNED PAY for period

from ..... to ..... at $ ..... per month in favour of:—

Name Mrs E Ward

Address 50 Birch Road Plaistow Essex

Relationship Wife E.13

X SEPARATION ALLOWANCE, if any, in favour of same party as Assignment at $ ..... per month

X BALANCE CREDIT

$	¢
83	63
10	30
10	77

BALANCE GIVEN IS SUBJECT TO ANY CHARGES AND/OR CREDITS ENDORSED ON THE REVERSE HEREOF.

THESE PAYMENTS TO DEPENDENTS:— X (Strike out whichever inapplicable.)

X Have been stopped. Effective ..... 191 ..... and will only be re-opened on receipt of instructions from P.M.G., Ottawa, or Military District Paymaster, Canada.

or

X Being a Canadian payment, cancellation or otherwise of future payments will be dealt with by Ottawa.

COMPILED BY .....

CHECKED BY .....

Date 20/5/19 191

CERTIFIED CORRECT .....

Capt. / Lieut

FOR BRIGADIER GENERAL
PAYMASTER GENERAL, O.M.F.C

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 86300.

2 Rank. Gnr.

3. Name. Ward. Albert James.

4. Unit. C.F.A. 0M7C.

5 Date of Discharge 20/6/19. Place Shoeburyness

6 Reason for Discharge.....

K. R. & O. Para. 392 Sec. XXV

(Being Demobilized in England-C.R.O. 5222)

7. Authority. DB 17.519

8. Proposed Residence after Discharge.....

50 Brook Road

Plaistow E13

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.? A-1-B2079

A J Ward

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place. W.O. CANADIAN DISCHARGE DEPOT LONDON

Date. 20/5/19

Signature.....

(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No.		
2. Rank.		
3. Name.		
4. Unit.		
5. Date of Discharge		Place
6. Reason for Discharge.....		
7. Authority.		
8. Proposed Residence after Discharge.....		
9. CERTIFICATE TO BE SIGNED BY SOLDIER.		

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

M. F. W. ?.....

.....

.....

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place.....

Date.....

.....

Signature.....

(O. C. Discharging Unit.)

M.F.H. 218a—300m.-11-18—1773-38-113.

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. 46

Dental History Sheet.....Militia Form B. 466

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

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

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY	ENGLAND OR ~~CANADA~~. £4/6	SEPARATION ALLOWANCE. £4/6	* ENGLAND OR ~~CANADA~~
EFFECTIVE DATE:- ~~1-11-16~~ 1/10/18		EFFECTIVE DATE:- 1/10/18	
AMOUNT:- 15/-		AMOUNT:- 30/-	

NAME:- WARD. Albert James

NUMBER:- 863006

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Gunner

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 H. Cordell~~
~~126 Grange Road~~
~~Plaistow Essex~~
Eng
Sister

Same

Mrs Ellen Ward Wife
50 Brook Road
Plaistow, London E.13
Stopped 1/6/19

UNIT AND TRANSFERS

ORIGINAL UNIT:- 5th Brigade R.F.A.

DATE ACCOUNT FIRST OPENED:-

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
Request		1/11/19	4 Dab
	1/6/19	14/6/19	N.E. "J"

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
		At May	~~15~~				
19-4	3034		~~2 65~~				
30-4	668		~~73~~				
			91 65				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1/00	10		

PARTICULARS OF RENDERING NON-EFFECTIVE:- 20/5/19 Disch England Auth DB 2 COD C.Bal 40.97

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
31/3/18	Bal Fwd								212 89	157-	
Apr.	P.	33		Nckl A39124 L 3-1-8			15				
				AR 8 4 Dab 8/3/18	354						
				" 52 " 18/4/18	446				222 86		
		33-			803		15				
May	G.C.	34 10		B2921 L 3-1-8			15				
				AR 105 4 Dab 2/5/18	357						
				" 178 " 9-5-18	446				203 93		
		34 10			803		15				
June	"	33-		B27320 L 3-1-8			15				
				AR 325 4 Dab 26-6-18	446						
				" 371 " 30-6-18	357				243 90	157	
		33-			803		15				
July	G.P	34 10		B90122 L 3-1-8			15				
				AR 524 " 3-7-18	446						
				250 " 15-7-18	357				254 90		
		34 10			803		15				
Aug	G.P	34 10		L 2515 L 3-1-8			15				
				AR 313 4 DR 1-8-18	446						
				349 " 15-8-18	357				266 47	157	Encroachment on Def Pay 26/9/18
		34 10			803		15			121 67	
Sept	G.P	33-		L 85317 L 3-1-8			15		288 04	35 33	
				AR 465 " 7-9-18	357						
				460 " 14-9-18	357						
				L P38471 " 26-9-18	121 67					35 33	
				477 " 28-9-18	357						
				AR 10/25 7624 " 26-9-18	97 33				54 33		
		33-			229 41		15				

Fwd

NUMBER 86300 RANK Lnce. NAME WARD, Albert James

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
				Forward					54 33	35 33	agreed 9/11/18
Oct	3 P.	34 10		b 88171 £3.1.8			15.				
				582 4 D.A.C. 17.10	3 73				69 70		
		34 10			3 73		15				
Nov	✓	33 —		D 83976 £3.1.8			15 —				
				653 4 D.A.C. 6/11	3 73 —						
Dec.	✓	34.10		642352 £ 3-1-8.			15				
				809 4 D.A.C. 19/11.	13.06						
				My Equal ✓ £13-10-0. Sep Cheque 1-10-18 to 31-12-18.							90
				908. 4 D.A.C 6/12	3.73						
Jan	✓	34.10		F 41842 £ 9-4-11.			15		105. 38 34 90	35 33	30.
		101.20			20 52		45				120
Feb	✓	30 80		ak 980 31/12/18	3 73				140 28		
				" 1116. 4/1/19.	3 73						
				F 8924 3 £ 9-4-11			15				30
				ak 3093. 31/1/19.	18 66						
				" 1215 14/1/19	3 73						
				95240. £ 9. 4. 11			15				30
				ak 1341. 8/2/19.	3 73						
				ak 1469. 20/2/19.	3 73						
				" 1581 6/3/19.	3 65						
				" 1655. 19/3/19.	21 90						
Mar	✓	34 10							44 42		
		64 90			62 86		30		47 18		60
Apr		33		A 40464 Apr £ 9-4-11			15		12 46 60		30
May	1-20 Incl	22		52 4/4 4 DAC	3 49				21 98		
	Int on D Pay	22 18		117 9/4 "	3 49				13 26 62		
		77 18		A 25365 May £ 7-1-3	6 98		15				19 36
				3034 19/4 4 DAC	3 65						
				668 1/5. C.C.C	73	83 63			40 97		
		77 18			83 63		30				49 36
June				Apa Rem. 8 & 9. Final Settlement of Pc	40 97				Nil		
					40 97						

final st

NON EFFECTIVE. ACT.