original.

ATTESTATION PAPER.

No.101612

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PU	(ANSWERS).
1. What is your name?	Reia brossley watson
2. In what Town, Township or Parish, and in what Country were you born?	Portage La Rairie, mar
3. What is the rame of your next-of-kin?	(mother) Emilipelvatson
4. What is the Address of your next-of-kin?	ones John Watson Spirit Ken
5. What is the date of your birth?	unde 25th 1893. a
6. What is your Trade or Calling?	Jarmer.
7. Are you married?	ho.
8. Are you willing to be vaccinated or re-	
vaccinated? & inoculated?	Mes.
2. 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.	ho.
11. Do you understand the nature and terms of your engagement?	yes.
12. Are you willing to be attested to serve in the)	Men
Canadian Over-Seas Expeditionary Force?	
	(Signature of Man).
	mak Nowald (Signature of Witness).
DECLAPATION TO BE MAD	E BY MAN ON ATTESTATION.
made by me to the above questions are true, and made, and I hereby engage and agree to serve in to be attached to any arm of the service therein, for between Great Britain and Germany should that we	do solemnly declare that the above answers that I am willing to fulfil the engagements by me now he Canadian Over-Seas Expeditionary Force, and the term of one year, or during the war now existing ar last longer than one year, and for six months after esty should so long require my services, or until legally
dl 1	(Signature of Recruit)
Date 9 Jany 1916	maldowald (Signature of Witness)
OATH TO BE TAKEN B	Y MAN ON ATTESTATION.
bear true Allegiance to His Majesty King George in duty bound honestly and faithfully defend His M	the Fifth, His Heirs and Successors, and that I will as lajesty, His Heirs and Successors, in Person, Crown and obey all orders of His Majesty, His Heirs and Successors, o help me God.
	AB Jalson (Signature of Recruit)
Date 9 Hauy 1916 97	
	OF MAGISTRATE.
	me that if he made any false answer to any of the above
questions he would be liable to be punished as prov. The above questions were then read to the R I have taken care that he understands each questions are the controlled to and the said Recruit has	ided in the Army Act. decruit in my presence. question, and that his answer to each question has been a made and signed the declaration and taken the oath
Gue	day of Justice) (Signature of Justice)
I certify that the above is a true copy of the	Attestation of the above-named Recruit.
7/2	ow were and (Approving Officer)

Description of Reid Cross	ley bration on Enlistment.
Apparent Age 22 years — months. (To be determined according to the instructions given in the Regulations for Army Medical Services.)	Distinctive marks, and marks indicating congenital peculiarities or previous disease. (Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer).
Height 5 ft. 2 ins.	Brown Buth mark
Girth when fully expanded ins.	Brown Borth mark on rieght chigh about Suzi of 5 cent press
Complexion Clear	Surje of 5 cent press
Eyes Gray Hair Dark Brown	
Church of England	
Presbyterian Wesleyan	
Wesleyan Baptist or Congregationalist Other Protestants (Denomination to be stated.)	
(Denomination to be stated.) Roman Catholic	
\Jewish	
CERTIFICATE OF ME	DICAL EXAMINATION.
of rejection specified in the Regulations for Army Me	
free use of his joints and limbs, and he declares that	
Date Date 1916	lian Over-Seas Expeditionary Force.
Place Spirit River Celta	Medical Officer.
*Insert here "fit" or "unfit." NOTE.—Should the Medical Officer consider the Recruit unfit, been attested, and will briefly state below the cause of unfitness:—	he will fill in the foregoing Certificate only in the case of those who have
	*
CODMINICATE OF OPEIC	ER COMMANDING UNIT.
CERTIFICATE OF OFFIC	
inspected by me this day, and his Name, Age, Date	having been finally approved and of Attestation, and every prescribed particular having
been recorded, I certify that I am satisfied with the	correctness of this Attestation.
Au 0 4 6	(Signature of Officer)
Date COMP 191. 9	

Proceedings of Court of Inquiry or on men
reported Missing on Active Service
Attestation Papers
Declaration of change of name.
Authority for special enlistments
Documents of re-enlisted men
Regimental Conduct Sheet
Compulsory Stoppages
Casualty Forms.
Proceedings on discharge
Corps History Sheet
Date and No. of Deposit Receipt for
Purchase Money and Amount
Parchment Certificate
Medical Report for Invalids
Medical History Sheet
Proceedings of Regt. Court Martial
Copies of Convictions by Civil Power
Company Conduct Sheet.
Clothing Transfer Certificate
Inventory of Kit
Last Pay Certificate
a.a.B.1221
× Copy of will: 1
1120 John of Will
M. F. W. 62.

DISCHARGE DOCUMENTS

Name Watson Reid Crossley

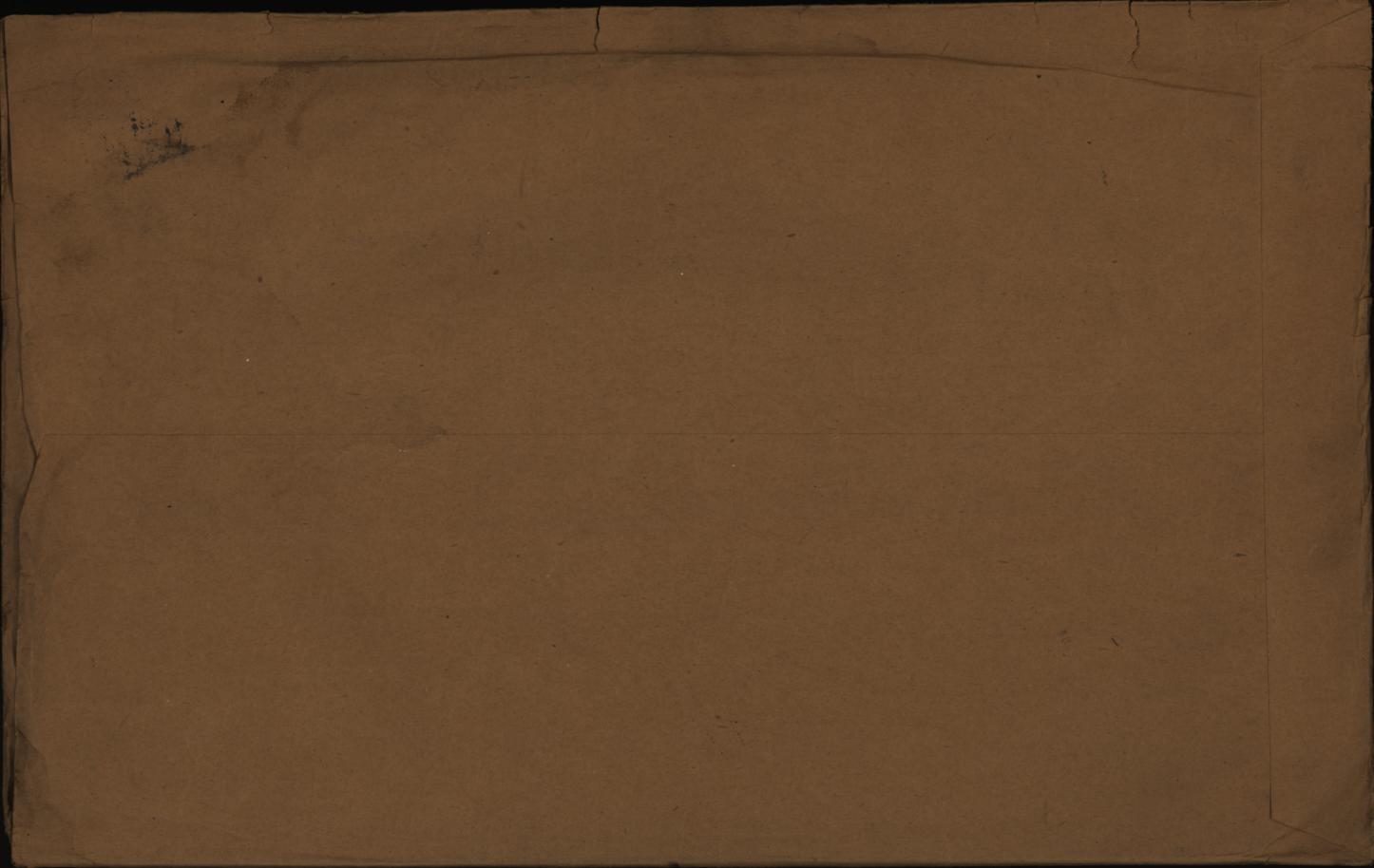
Regt. No/0/6/2 Rank Pte-

Corps Coloch Bn. 10.9, W. 16, 9116

H. Q. No.



C9260°



NAME Matson Reid Crossley D RANK & NO. Pte. 101612 CORPS 66 th. Batt. ENLISTMENT, PLACE & dinonton, DAIR Jan. 9. /1916, FORMER CORPS Mil. COUNTRY OF BIRTH and a Portage La Prairie Man NEXT OF KIN Watson Mrs. Emiline (mother) ADDRESS OF NEXT OF KIN Spirit Piver, Alta. DISCHARGE, PLACE Sailes from Halifay ter S.S. alymphic. 22. 100 m. 9-15. L. L. 85779-M. & D.-6011. 28-4-16, 406 H. Q. 1772 39 839.

MARRIED WIDOWER TRADE OR CALLING 2 9 YEARS APPARENT AGE 1 FEET 7 INCHES HEIGHT 3 7 INCHES CHEST MEASUREMENT grey HAIR dk DISTINGUISHING MARKS Imonton DATE Jan. 14./191 MEDICAL EXAMINATION. PLACE

H. Q. FILE No. 649-FOLLOWS RANK AND CORPS CABLE No. **FOLLOWS** L. L. Job 90581-M. & D. 6314. M. F. W. 42-50M-1-16.

H. Q. 1772-39-893.

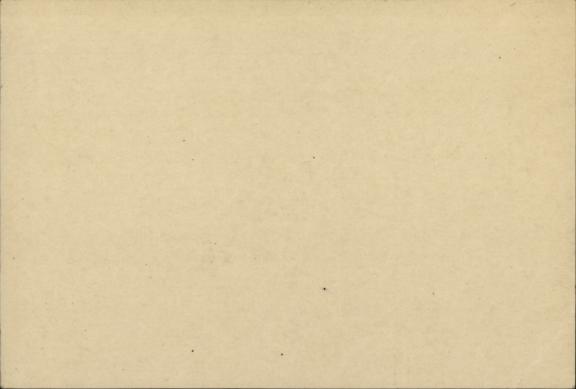
LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
0.203	10.15 Cas, El. Stat	29-6-16	Conjunctivitis Levounds re - 16-9-16
254	Rep. from 88 ase	Died of	lwounds re-
	ceived in a	ction	16-9-16

(D.D.12 of 14-176)

T.O.S. 9-1-16 UNIT 664 Ballalion.

M. D. /3

PAID PAID	SIG.	PROMOTIONS, TRANSF	OMOTIONS, TRANSFERS, DISCHARGES, ETC.				
FROM TO 1916 1916 an 9 Eb. 1 Table 2 That Open.	RECT	PARTICULARS	AUTHORITY				
			UNIT SAILED APR 28 1916				



R. 149. Name WATSON, Reid Rank A)L)Cpl Reg. No. Crossley 101612 Unita9th Battn. R. L. 25. CO-1464 Canada. Next of Kin List Notified Movement Place Casualty W.O. List Date No. N/K O. 1916 26 9 No. 16. Cas. Cerg Station. Conjunctivities 19203 A25401817 29-9 Received in Action

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
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			30.00	110	300 000	
				4		
	STATE OF THE PARTY					

Watson, R.C. (A/L/Cpl) No.101612 66th Bn.

Medals and Decorations (Father) John Watson, Esq., Spirit River,

Plaques and Scroll (Father) John Watson, Esq., Ser. # 805578 address as above.

Memorial Cross. (Mother) Mrs. Emiline Wat son,

APR 2 8 1811 address as abov.

(ley, 6.m. B.w. mague Desp. 3-1922

M 6. 3446 4 DEC 3, 1920

CA Theatre of War Date of Service 4-6-16 Remarks 200m.-2-21.M.

DESP. AUG 15 1922

Surname	Christian Name or Names	Reg. No.
Watson	Re	101612
Rank	Unit Co.	Troop Batty
16	49th Batta	and the same of th
Hospital		Date of Admission
#	- 0 00 P-	/.
Transferred /	5 las. blg Sta	120~Hosp 29.6.16
		Hosp.
		Hosp.
		Hosp.
		riosp.
Diagnosis	Conjunction	10
(1) Later Diagnosis (if o	co gune co	
(2)	changed)	
(3)		
	s: if more than one state present	
	Died of Wounds	16.9.16
DISPOSITION		Date
CP. 18.7.16	5 0203	EMARKS
" 30 q 16	1 - 15/	EMAKAS
30 9.10	# 254 n	. 1 B.
	16 eportes	from Base.
······································		
		Dept. London
		10.2 M.F.C.
		A.M. 8.0.m.
		.O.G.M.
	och.	A.M.D. 2 Dept. C. London
	D.	
		10 m
***********************************	***************************************	W /

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EPITOME OF HOSPITAL TREATMENT.

1.	Hospital		Adm.
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2.			2014-14
3.	A to be		
4.	4004		
5.			42.01.24.09
6.			
7.		w master was good stage.	n ranga kah

MEDICAL HISTORY SHEET.

Surname W Cu	son	Chri	istian I	Vame?	reid	Oross	ley
Examined on 13	day of hor-	1915	Appro	ved by	Ja	Histo	31
(City or Town	Porlage L			Ran	k /	a in	M.O
	Mant Ca		Date	Fit or Unfit	EXAM	IINED FOR RE-ENGAG	EMENT,
Apparent age		nonly					WO
Trade or occupation							M.O
Height	Feet	7 Inches.					M.O
Weight		Lbs.					М О
Chest measurement	imum						M.O
(Max	ximum expansion						M.O
Physical development	Food						M.O
Small-Pox Marks		••••					M.O
Vaccination Marks { Arn	Right.	Left.	Date	Result		VACCINATIONS.	
vaccination Marks { Nur	mber		.0.		2	1	7
When Vaccinated last			Sels	24	1/40	The	M.O
(a) Marks indicating co	ngenital peculiaritie	es or previous					M.O
disease Brown lin	He mark on	right					M.O
Hugh Dine of	a mickel		Date	Result	ANTI-	TYPHOID INOCULATION	NS, ETC.
(b) Slight defects but	not sufficient to car	use rejection	le	-	7	1	
			ملک	**	à	10	M.O
				and .	(h	htm	M.O
						V	M.O
Enlisted on 13 da	y of hor-		1916	at C	Spirit	River &	da
	Corrs	REGT'L NUMB		Habits		DATE.	
Joined on enlistment	6.E. 4	[01919]	٥			hst 13	1915
Transferred to	th. Bn.						
EXAM	INED OR DISC	CHARGED	BY A	MED	ICAL E	BOARD.	
STATION.	DATE.		DISEASE.			RESULT.	

F. 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.

Date of Arriv		rrival Dates of						Number	Remarks on nature of the disease: how induced: if mild or severe; if com-		
STATION.	at the	in	Admissio to Hospi	tal.	fro	Discharg m Hosp	ital.	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.	of Medical Office
Station	Station.	Day	Month	Year	Day	Month	Year		Hospital	appliances supplied Particulars of prophylactic inoculations.	
4										A CONTRACTOR OF THE PARTY OF TH	
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	*			190	2000						
7							816				
			4								
4			1000				10+3				



101612 - MERL Walson. - 49th Battalion.

_ 22 _

If page 20 with Military Will is removed, state on this page to whom it has been forwarded and

Will has been left in charge of Ino Watson. Spirit River alberta. Canada
Watson P. B. Me
101612 49Bu

a162-213/19,

8_244_21_3_17

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

Casualty Form—Active Service.

Init Regiment or Corps 66th. O. BATTALION C. F. F.

	promotion to sent rank.	} Date of appointm to lance rank Re-engaged.		ro	rical position on l of N. C. Os.
Date	From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
. B. I	Onas D. Lan streng Left	ded in France. Taken on the 49th Cdn. Bn. 8/6/16 ved Unit for duty 1/6/16	Red Eu	8/6/16. 14/6/16. 9/6/16	27 Thoy 1916 27 Thoy 1916 Consessed Bath. G. E. F.
,6	6. C. C. S. 8. C. FA	Rejoined Ghit Conjunctivities Adm Defestive eyesight adm	15. C. C. S. 8 C. FA 8 R. S. #3	22.6.6.	B 213. A 36 A C S. 177 KJ. 137/1716. KJ. PIE Olo # 56 9

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

(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

	Report	Record of promotions, reductions, transfers, casualties, etc., during active service, as re-			Remarks •
Date	From whom received	ported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	taken from Army Form B. 213. Army Form A. 36, or other official documents.
				A.	for L' Col. A. A. B.
	1				

MILITIA AND DEFENCE ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 1:
50m.-4-16.
H. Q. 1772-39-81

O ROM

To Whom Matson Matson Address Spirit River alta

Regtl. No. 101612

Rank Dte

Corps 66 Batter CE J

REMARKS

Rate 5.

Month

MAY 1 1916

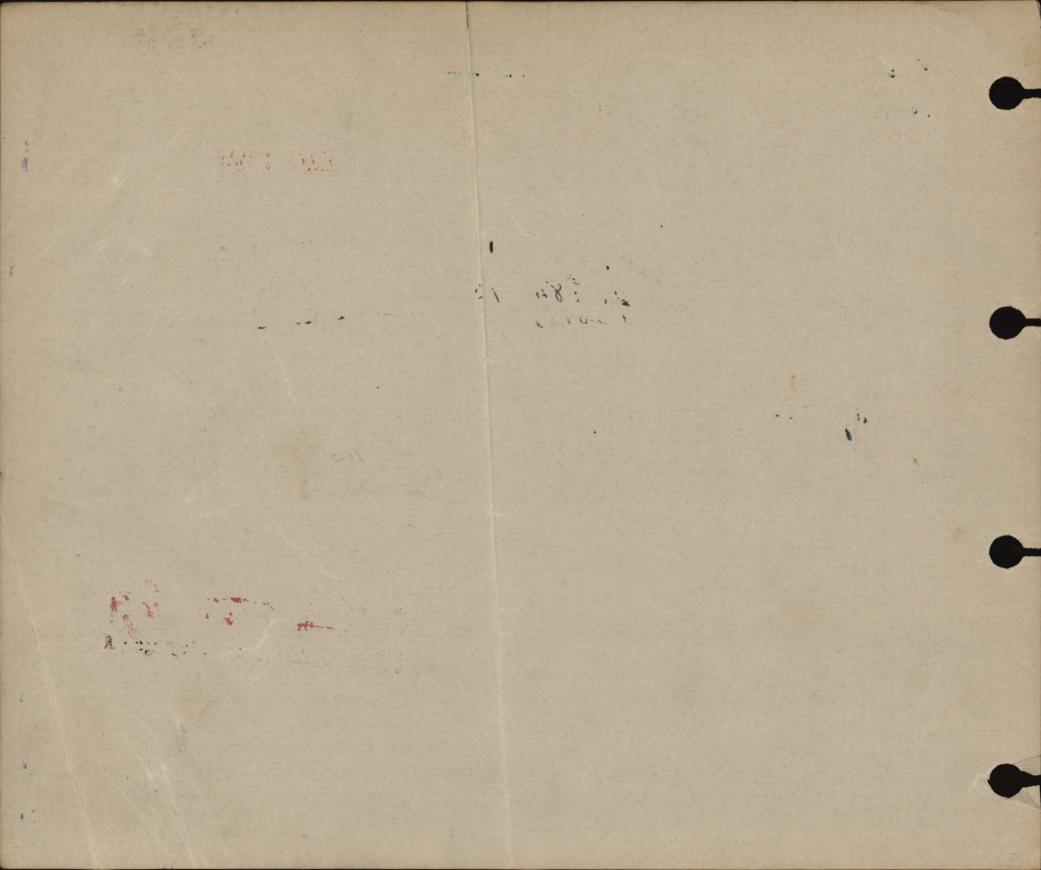
Amt.

Cheque No.

Year

PAYMENTS

					-
244	Aug.	1914		Casualties	
	Sept.			Casuatives	
	Oct.				
	Nov.				
	Dec.				100
	Jan.	1915			
	Feb.				
	March				1
	April				16
	May				
	June				
	July				
	Aug.			1/41, 1.15	
	Sept.			Thon payment 1 16	
	Oct.				
	Nov.			Deil of wounds seft 16/16 62.00	
	Dec.			2 50 M / 3/11 30 76	
	Jan.	1916		3/1 Wes 9/6 92 29/	
S	Feb.			Stop payment 1 16 Deil of wounds sept 16/16 61.63) 3 M Oct 3/16 JM 29/12/16	
	March				
	ECHANICAL PROPERTY.		THE REAL PROPERTY.	"自然是一个,我们就是一个,我们就是一个,我们就是一个,我们就是一个,我们就是一个,我们就是一个,我们就是一个,我们就是一个,我们就是一个,我们就是一个,我们	1



MILITIA AND DEFENCE VERSEAS CONTINGENTS Name of Soldier PAYMENTS. 101612 L. L. Job 310.--Req. 6574. Amt Month. Year. Cheque No. April 1916 May June July Aug. Sept Oct. Nov. Dec. 1917 V 36897 15 -Jan. Feb. March April May June July Aug. Sept. Oct. Nov. Dec. 1918 Jan. Feb. March April May June July

MILITIA AND DEFENCE

ASSIGNED PAY

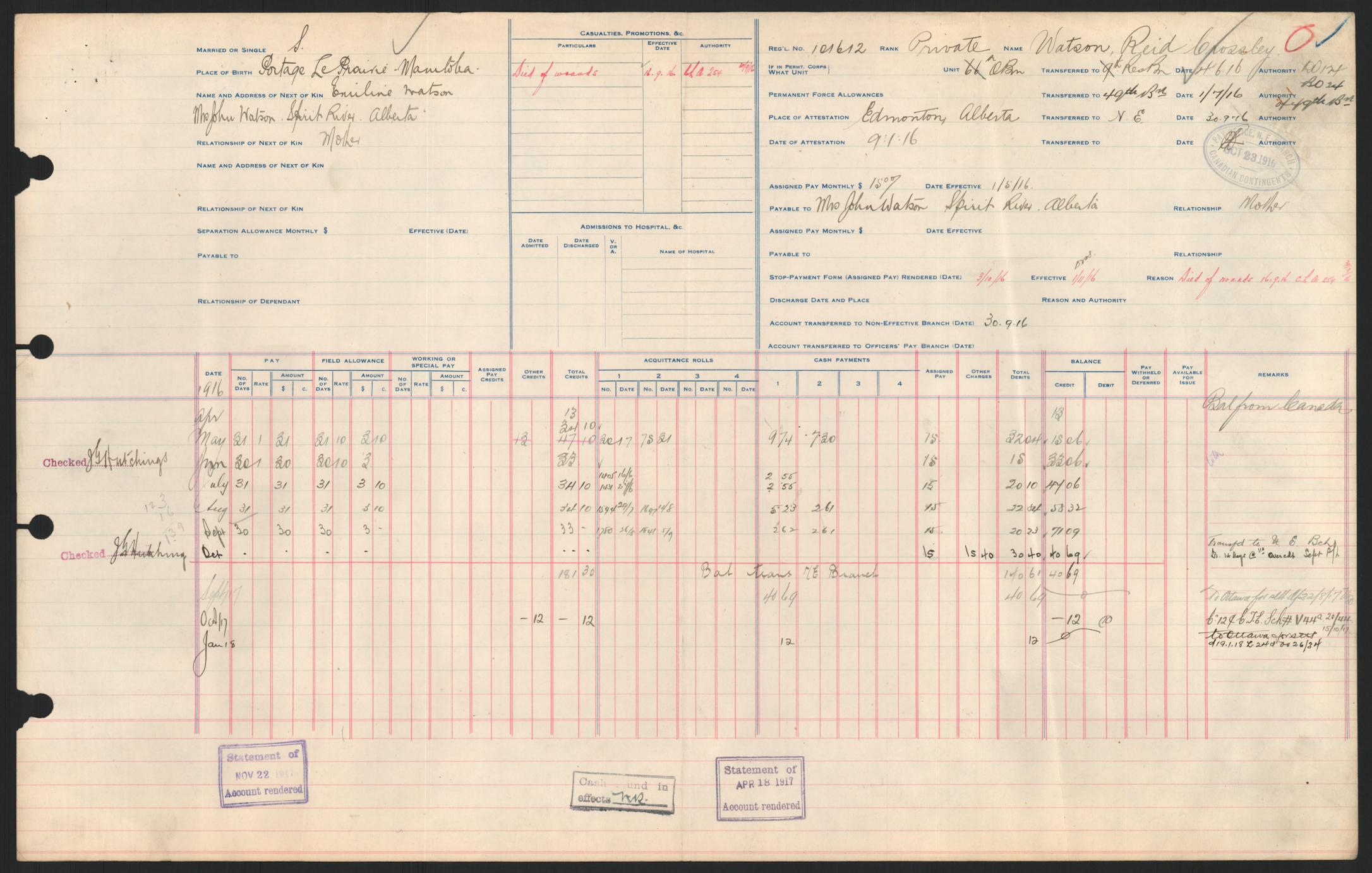
OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier_

			2**		PAYMENTS.			
	Month.	Year.	Chaque No.	Amt.	Remarks.			
	Aug.	1918						
	Sept.							
	Oct.		1 to					
	Nov.				1 1 Y. W.			
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DATE

| DATE | PAY | FIELD ALLOWANCE | WORKING OR SPECIAL PAY | ASSIGNED PAY | CREDITS | C. | DAYS | RATE | \$ | C. | DAYS | C. | D ASSIGNED OTHER TOTAL PAY CHARGES DEBITS BALANCE

PAY
WITHHELD
OR
FOR
DEFERRED

ISSUE CASH PAYMENTS BALANCE REMARKS

				Same		
Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.	
Date.	From whom received.	The authority to be quoted in each case.	-3000		Taken from Omeiai Documents.	
V						

			***	1		