

92889 *Greg*

# ATTESTATION PAPER.

No.

Folio.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... *Welsh John*
  2. In what Town, Township or Parish, and in what Country were you born?..... *St. John P.E. Island Canada*
  3. What is the name of your next-of-kin?..... *William Welsh*
  4. What is the address of your next-of-kin?..... *55 Reserve St. St. John P.E. Island*
  5. What is the date of your birth?..... *Feb 15<sup>th</sup> 1897*
  6. What is your Trade or Calling?..... *Barber*
  7. Are you married?..... *No.*
  8. Are you willing to be vaccinated or re-vaccinated? *Inoculated J.W.*..... *yes*
  9. Do you now belong to the Active Militia?..... *yes*
  10. Have you ever served in any Military Force?..... *2 yrs 4 Regt. Can Artillery*  
If so, state particulars of former Service.
  11. Do you understand the nature and terms of your engagement?..... *yes*
  12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?..... *yes*
- ..... *John Welsh* (Signature of Man).  
..... *Chas Stewart* (Signature of Witness).

### DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Date *SEP 30 1915* 191..... *John Welsh* (Signature of Recruit)  
..... *Chas Stewart* (Signature of Witness)

### OATH TO BE TAKEN BY MAN ON ATTESTATION.

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

Date *SEP 30 1915* 191..... *John Welsh* (Signature of Recruit)  
..... *Chas Stewart* (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 *Charlottetown* this *30<sup>th</sup>* day of *Sept* 191*5*

..... *Arthur J. Peck* (Signature of Justice)  
..... *Arthur J. Peck* (Approving Officer)  
*H. Col.*

Description of John Walsh on Enlistment.

Apparent Age 18 years 7 1/2 months.  
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.  
 (Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer.)

Height 5 ft. 8 ins.  
 Chest measurement { Girth when fully expanded 36 ins.  
 Range of expansion 2 1/2 ins.  
 Complexion Ruddy  
 Eyes Brown  
 Hair Dark Br

a small mole on right cheek (only mark)

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

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 Sep 29 1915  
 Place Charlottetown 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.

John Walsh 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.

Arthur Seaman (Signature of Officer)  
Lt Col  
 Date OCT 12 1915 1915

92889

# ATTESTATION PAPER.

No.

Folio.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... Welsh John
  2. In what Town, Township or Parish, and in what Country were you born?..... Ch'town P.E. Island Canada
  3. What is the name of your next-of-kin?..... William Welsh
  4. What is the address of your next-of-kin?..... 55 Reserve St. Ch'town P.E. Canada
  5. What is the date of your birth?..... Feb. 15<sup>th</sup> 1897
  6. What is your Trade or Calling?..... Barber
  7. Are you married?..... no
  8. Are you willing to be vaccinated or re-vaccinated? 7 Inoculated J.P...... yes
  9. Do you now belong to the Active Militia?..... yes
  10. Have you ever served in any Military Force?.. 2 yrs 4<sup>th</sup> Regt. Can. Artillery  
If so, state particulars of former Service.
  11. Do you understand the nature and terms of your engagement?..... yes
  12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?..... yes
- ..... John Welsh (Signature of Man).  
..... Chas D Stewart (Signature of Witness).

### DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Date SEP 30 1915 191..... John Welsh (Signature of Recruit)  
..... Chas D Stewart (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.

Date SEP 30 1915 191..... John Welsh (Signature of Recruit)  
..... Chas D Stewart (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 Charlottetown this 30<sup>th</sup> day of Sept 1915

..... Arthur Beane (Signature of Justice)

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

..... Arthur Beane (Approving Officer)

Description of John Walsh on Enlistment.

Apparent Age 18 years 7 1/2 months.  
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.  
 (Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer).

Height 5-8 ft. 8 ins.

A small mole on right cheek  
only mark

Chest measurement { Girth when fully expanded 36 ins.  
 Range of expansion 2 1/2 ins.

Complexion Ruddy

Eyes Brown

Hair Dark Brown

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

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 Sep. 29 1915

[Signature]  
 Medical Officer.

Place Charlottetown

\*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.

John Walsh 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.

[Signature] (Signature of Officer)  
[Signature]

Date OCT 12 1915 1915

REGIMENTAL DOCUMENTS

NAME

*Welsh John*

REGT. NO.

*92889*

UNIT

*24th B. Sig. Bn.*

H. Q. FILE NO.



CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505  
REFERENCE

NON-EFFECTIVE BY

ATTESTATION PAPER (M.F.W. 23, 133, or 51)

CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

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)

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MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

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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)

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COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

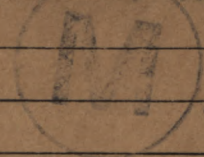
*Misc.*

*R 149*

*See hand*

*R 122*

*Revised 7-11-22*



*Deceased 8-4-53*

DEATH

Category

DISCHARGE

Category

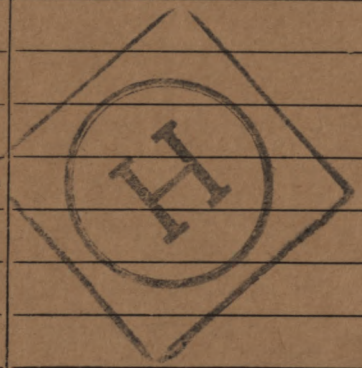
*Demob*

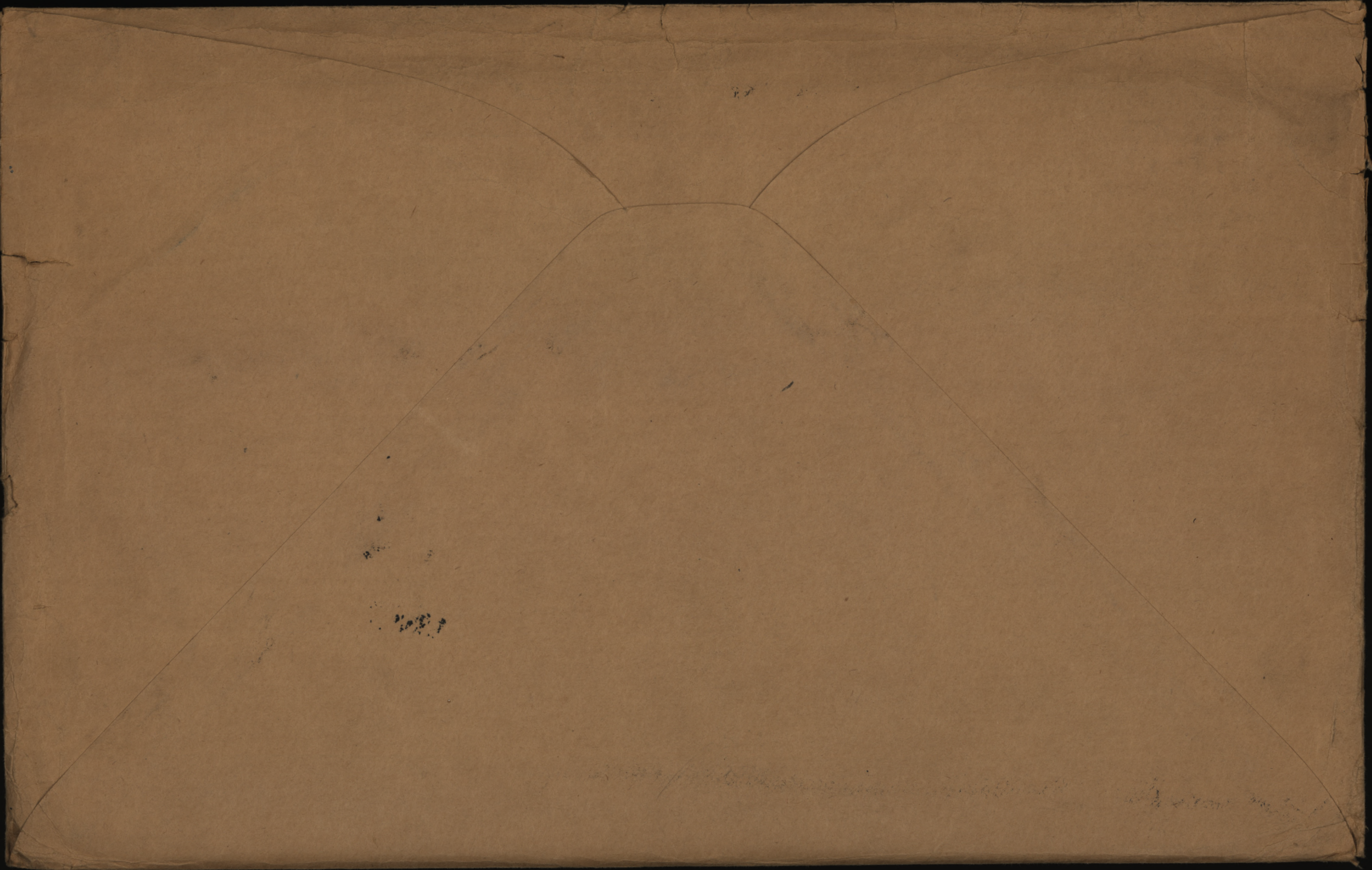
DESERTION

13858

*20-16*  
*17-16*  
*9-16*

*1*

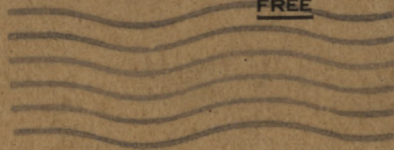




O. H. M. S.



POSTAGE  
FREE



SECRETARY, MILITIA COUNCIL,

DIRECTOR OF RECORDS,

OTTAWA, ONT.

H. Q. Reference

No. 92889 Rank CORPORAL Unit 2<sup>nd</sup> SIEGE.

Surname WELSH

Christian names JOHN.

Kindly forward Medals, to which I am entitled by reason of my service in FRANCE AND BELGIUM.

(Theatre of War)

with 5TH CANADIAN SIEGE BATTERY

(Unit with which served in Theatre of War)

No. 55

Street RESERVE

Town CHARLOTTETOWN.

County QUEENS

J. WELSH  
(Signature)

(WRITE IN BLOCK LETTERS AND IN INK)

FEB 28 1922

B/3165



bm  
com

Number 9 2 8 8 9 Rank Cpl

~~X~~

Surname W E L S H

Christian Name John

~~X~~

Units C G A Theatre of War France

Date of Service 21.9.16

Remarks

Latest Address 55 Reserve St.

Chartolletown

Roll No. P. E. I.

Page 13165  
200m.-2-21.M.

DESP. JUN 8 1922

REGN. NO. 4/37756

No 92889 RANK *Rte*

NAME *Welsh. John*

T. O. S.

*NO 85 of 1-10-15*

UNIT

*#2 Heavy Battery Depot.*

M. D. *6*

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
<i>1915- Oct 1</i>	<i>1915- Oct 31 Nov.</i>	<i>✓</i>		



REG'T'L. No. 92889  
H. Q. FILE NO 649

NAME Welsh John

RANK AND CORPS b pl. 2<sup>nd</sup> Bde Garr. Art. Force

FOLLOWS  
No. #2 Siege  
Bty art.  
FOLLOWS

CABLE

NATURE OF CASUALTY

NO. DATE

n. of K  
12-7.  
Q 683  
Also H.L. Q 384<sup>(2)</sup>

William Welsh (R.N.S.)  
55. Reserve St. Charlottetown. P. E. I.  
1-11-18. Adm. 34. Fld. Amb. Oct 8<sup>th</sup> ret. to  
regl. duty Oct 8<sup>th</sup> 1918. Gsw. R. Leg.

LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS









Surname

Christian Name or Names

Reg. No.

Welsh  
Rank

L.  
Unit

92889

Cpl.

C.A. 2 B Coy.

Cas. List.

34. Lamb.

8-10-18

8-10-18 23842

Sw B Leg Rm.

do

dos

8-10-18

A.M.D. 2 DEPT.

Ch: of D.G.M.S. O.M.E.C. London

Cas. List.

Rank *Pte.* Name WELSH, John. Reg'l No. 92889  
 Unit 98 Seige Batty If in perm. Corps, Married or Single Single.  
 What Unit?  
 Place and Date of Enlistment Charlottetown. 30 Sep 1915. Place of Birth Ch'Town. P.E.I.  
 Name and Address, Next-of-Kin William Welsh, 55, Reserve St. Ch'Town. P.E. Island. Can.

Assigned Pay Monthly \$ Payable to Relationship

Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No. *5007*  
 File *5007*  
 Category *5007*

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
Date	From whom received				
<i>21-7-16</i>	<i>C.B.S.A.</i>	<i>Arrived in England.</i> <i>S.O.S. of C.B.S.A. to T.O.S. of C.B.S.A.</i>	<i>Horsham</i>	<i>7 DEC 1915</i> <i>2-6-16</i>	<i>S.S. Lapland</i> <i>Pt II D.O. #1</i>
<i>23-6-16</i>	<i>Can. Riv. S. Art</i>	<i>S.O.S. on train to 165th S.B.</i>	<i>Horsham</i>	<i>7-6-16</i>	<i>Pt II D.O. #7</i>
<i>23-6-16</i>	<i>165th S.B.</i>	<i>T.O.S. 165th. Seige. Batty</i>	<i>Horsham</i>	<i>7-6-16</i>	<i>Pt II D.O. #1</i>
<i>20-9-16</i>	<i>"</i>	<i>Embarked for France</i>	<i>Bristol</i>	<i>21-9-16</i>	<i>" - 77</i>
<i>11-1-17</i>	<i>S, S, B</i>	<i>165 S B NOW 5th, S B</i>	<i>FIELD</i>	<i>11, 1, 17</i>	<i>Pt. II, O 4.</i>
<i>28-1-18</i>	<i>"</i>	<i>Amended to read A/Bdr</i> <i>app: Lance-Bombardier</i>	<i>Grv</i>	<i>14-1-18</i>	<i>Pt II 25/2, #</i> <i>Pt II 9</i>
<i>25-3-18</i>	<i>✓</i>	<i>now known as 2nd Bde C.G.A. (Hrd)</i>	<i>✓</i>	<i>20-3-18</i>	<i>-- 24 12th Bde C.G.A. PTO 12</i> <i>194-18</i>
<i>29-7-18</i>	<i>2nd Bde 8 Ga</i>	<i>Promoted Bombardier</i>	<i>"</i>	<i>24-7-18</i>	<i>Pt II 49</i>
<i>8-10-18</i>	<i>"</i>	<i>Promoted Cpl.</i>	<i>Bl.</i>	<i>31-8-18</i>	<i>. 80.</i>
<i>28-10-18</i>	<i>"</i>	<i>Wounded.</i>	<i>"</i>	<i>8-10-18</i>	<i>C.Y.A. 384.</i>

A.F.B. 103 CHECKED  
 17 AUG 1916

92889 Welsh. J.

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				
6.4.19	2 <sup>nd</sup> Lt. C. C.	Proceeded to England	Cpl. Rouen	1.4.19	Pt. II O. 36
18.5.19	Lt.	Severely Reprimanded for Drunkenness	"	10.3.19	After Order 2
4-4-19	5 <sup>th</sup> Lt. S. B.	S.O.S. to 2 <sup>nd</sup> Lt. B.S.B.	"	4-4-19	Pt. II O 1
		to Canada 53-I-95		3-5-19	
2.5.19	2 <sup>nd</sup> Lt. S. B.	S.O.S. to Canada	Cpl Eng.	3.5.19	- 24
18.5.19	2 <sup>nd</sup> Lt. C. C.	Severely reprimanded for N.O.A.S. Drunkenness.		10.3.19	at O. 2

# SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103-1.  
Part I.

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

Nothing to be written in this margin.

W 1889 - P P 1150 1M 5/18 G. V. P. Co (34/10)

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

(10) Enlistment (b) (12) Service reckons from (date) (14) Any subsequent variations (if any) of conditions of service }	(11) Engagement (c) (13) Special conditions (if any) of enlistment (d) (Authority) (date)	Initials and Rank of an Officer.
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(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) (Record of Occupation in Civil life (vide Army Order 93 of 1917)
				Industrial Group No. Trade or Calling Married or Single Particulars of Trade Test  Occupation Cards despatched on (date) Second Occupation Card despatched on (date)

(17) Next of Kin (18) Demobilizer (f) (19) Pivotal-man (f) (20) Qualifications (g)	(Place) (Date) or (21) Corps trade and rate	(Signature of Posting Officer)
(22) Extended {	(23) Re-engaged {	
(24) Miscellaneous entries:—		

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

92889

Cpl John Walsh

320932

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

Arrived in England 2.4.19  
 Transferred from 5CSB to 2C2B 4.4.19  
 Transferred from 04FC to CEF Canada for Dem  
 P.C. N.O. #24, 2/27/19  
 Sedgwick  
 Capt

3-2-19 O'SEAS T. O. S. DISPERSAL STA. "A" CH'TOWN.

Do 134

B. Ritchie  
 For O. G. Dispersal Station

18-4-19 S. O. S. DISPERSAL STA. "A" CH'TOWN.

Do 134

B. Ritchie  
 For O. G. Dispersal Station

**DEMobilization**

AA20142

T. Mauretania  
 d' b Hull: x 5/5/15  
 d' d S'th' on 2/5/15  
 d' d i n g n o 53

Nothing to be written in this margin.

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

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

500M.—9-16

H. Q. 1772-39-9'0.

# Casualty Form—Active Service.

Unit, Regiment or Corps..... *98th. Signal Batty.*  
 Regimental No. *92889.* Rank *Cpl.* Name *Medley, John.*  
C. E. F.  
 Enlisted (a)..... Terms of Service (a)..... Service reckons from (a).....  
 Date of promotion to } Date of appointment } Numerical position on }  
 present rank } to lance rank } roll of N. C. Os. }  
 Extended..... Re-engaged..... Qualification (b).....

Report		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				
<i>18.5.19.</i>	<i>236. (210)</i>	<i>Severely reprimanded 10.3.19. for W.O.A.S. Drunkenness.</i>			<i>20.2.1. / 18.5.19.</i> <i>J. D. R.</i>

(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.





CERTIFIED CORRECT.  
23 AUG. 1916  
CAN. RECORDS

*2nd page c/g a (inset)*

*[Signature]*

Army Form B 103.  
98. *SP to*  
Regiment or Corps 165th Canadian Siege Battery. Regimental Number 92889  
Rank Private Surname Welsh Christian Name John  
Religion R.C. Age on Enlistment 18 years 7 1/2 months.  
Enlisted (a) 30/9/15 Terms of Service (a) Duration 6 mts Service reckons from (a) 30/9/15  
Date of promotion to present rank \_\_\_\_\_ Date of appointment to lance rank \_\_\_\_\_  
Extended { \_\_\_\_\_ } Re-engaged { \_\_\_\_\_ } Qualification (b) \_\_\_\_\_  
or Corps Trade and Rate \_\_\_\_\_  
**W. S. B. CLASS. A** Signature of Officer i/c Records.

Date	Report From whom received	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
		Embarked ...	<i>Halifax</i>	<i>Nov 28/15</i>	
		Disembarked...	<i>Plymouth</i>	<i>Dec 5/15</i>	
<i>7.6.16</i>	<i>Canadian Reserve Depot Horsham</i>				
<i>21/7/16</i>	<i>C.B.S.A.</i>	<i>S.O.S. of C.B.S.A. &amp; J.O.S. of C.D.S.A.</i>	<i>Horsham</i>	<i>2/6/16</i>	<i>part 1120.113.</i>
<i>23/6/16</i>	<i>Can Res S. Art'y Dep.</i>	<i>Trans to 165<sup>th</sup> S.B.</i>	<i>do</i>	<i>7/6/16</i>	<i>" " " 4</i>
<i>20/9/16</i>	<i>165<sup>th</sup> S.B.</i>	<i>Proceeded Overseas</i>		<i>21/9/16</i>	<i>" " " 77</i>
					<i>Lieut. for Colonel i/c Records, C.E.F.</i>
			<i>Boulogne</i>	<i>21-9-16</i>	<i>LR 6582</i>

LANDED IN FRANCE

(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) Signaller, Shoeing-smith, &c.  
[P.T.O.]  
B09130 W 15012-5156 J. P. & Co., Ltd. Forms B103/3.

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				
7-7-17.	OC/Unit	Attd..to CCHA.rest camp <sup>1</sup> / <sub>2</sub>	Field.	5-7-17.	B213.Pt.II.O.80 d/18-7-17
21/7/17	"	Rejoined Unit	"	15/7/17	" " 80 d/30/8/17
1.9.17	"	To CCHA Rest Camp	"	28.8.17	B213
14.9.17	"	Rejoined from do	"	10.9.17	B213
23.11.17	"	Granted leave of absence	"	17.11.17	B213 Pt II 0113 d/3.12.17
21.12.17	"	Rejoined from do	"	16.12.17	" 117 d/27.12.17
18.1.18	"	Appointed lance bombardier	"	14.1.18	" 9 d/28.1.18
13. 7. 18	2 Bde CFA	Promoted Bombardier vice Bar			B213 Pt II 049 d/29 7/18
		(A/cpl) Sherman, J promoted cpl		24.4.18	
28 9 18	do	Promoted Corporal vice cpl			B213 Pt II 080 d/8 <sup>10</sup> /18
		Dolerance, G.R promoted		21.8.18	
30.10.18	34. 2ld. Amph	Swseq.R) Acto Unit		8.10.18	A36/L6061
23.12.18	5 <sup>th</sup> CS Bty	Wounded arm & Rejoined		do	later K17-1392.
6.12.18	do	Granted 14 days leave to UK		3.12.18	B213 Pt II 046 a/1918
27/12/18	1 <sup>st</sup> Bde	Rejoined Unit from leave.		22/12/18	B213 1919
		Proceeded to England		1/4/19	MA
		Attached C.C.C. Kimmel Park for return to Canada. Part II Order No. _____ Ceases to be attached C.C.C. Kimmel Park on entering for Canada, Part II Order No. _____		APR 1919	

Commanding.....  
 Kimmel Park Camp  
 For Lt. Col. A.A.G.,  
 Canadian Section

# CANADIAN EXPEDITIONARY FORCE

## DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 92889 (Rank) Cpl.

Name (in full) John Welsh enlisted in  
the 2<sup>nd</sup> W.B. Depot, Siege Artillery

CANADIAN EXPEDITIONARY FORCE at Charlottetown on the 1<sup>st</sup>  
day of October 1915

HE served in 5<sup>th</sup> B.S.Bty. in France & Belgium

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 22

Height 5' 8"

Complexion Ruddy

Eyes Brown

Hair Dark Brown

Marks or Scars Small mole on

right cheek. One

vac. mark left arm

Small mole on

right cheek. One

vac. mark left arm

John Welsh  
Signature of Soldier

J. Ritchie  
Issuing Officer

Date of Discharge May

Lieut

Rank

Ch' Town 18  
1919

Date May 10 1919

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

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. \_\_\_\_\_ (Rank) \_\_\_\_\_

Name (in full) \_\_\_\_\_ enlisted in \_\_\_\_\_

the \_\_\_\_\_

CANADIAN EXPEDITIONARY FORCE at \_\_\_\_\_

day of \_\_\_\_\_ 19\_\_\_\_

HE served in \_\_\_\_\_

and is now discharged from the service by reason of \_\_\_\_\_

Demobilization \_\_\_\_\_

Medical Certificate \_\_\_\_\_

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

Eye	_____
Height	_____
Complexion	_____
Eyes	_____
Hair	_____
Marks or Scars	_____

Signature of Soldier \_\_\_\_\_

Date of Discharge \_\_\_\_\_

Issuing Officer \_\_\_\_\_

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 unopened envelope to the Secretary, Military Council, Ottawa, Canada.

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) WELSH  
 REGIMENT 5<sup>th</sup> Siege Bty RANK 6PL No. 92889  
 Date of Examination in England 4-4-79 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.



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 17.
2. EXTRACTIONS 6. 16. 11. 18
3. CROWNS \_\_\_\_\_
4. DENTURES
  - (a) Full Upper \_\_\_\_\_
  - (b) Part Upper repair 6. 11
  - (c) Full Lower \_\_\_\_\_
  - (d) Part Lower \_\_\_\_\_

HAS HE EVER REFUSED DENTAL TREATMENT? no

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

- (a) In Canada \_\_\_\_\_
- (b) In England \_\_\_\_\_
- (c) In France Yes

Signature of Dental Officer \_\_\_\_\_

*J. Ross*

W. B. L. 11

W. B. L. 11

W. B. L. 11

(1) In France  
(2) In England  
(3) In Italy  
(4) In Spain  
(5) In Portugal

(6) In Germany  
(7) In Austria  
(8) In Prussia  
(9) In Russia  
(10) In Poland

# 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. 92889 Rank CORP. Surname Welsh  
(Given name in full)  
John  
 Unit or Corps Other Birthplace Chapman RD

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

**1. GENERAL DESCRIPTION:**

Physique good Weight 50 lbs. Height 5 ft. 8 in. Colour of Eyes brown  
 Nutrition good  
 Pulse 76  
 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.)

1 scar neck from

Opinion as to general health and physical condition... good

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

Nervous System No Genito Urinary System No Cardio-Vascular System No  
 Special Senses No Integumentary System No Respiratory System No  
 Disturbance of mentality No Muscular System No Digestive System No  
 Osseous and Joint System No Any other general condition No

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

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Keeneland Park (Overseas)

Date 8.4.19

Signed [Signature] M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature [Signature]

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

THIS SECTION FOR USE IN CANADA—

Examined at ..... (Canada)

Date .....

Signed ..... M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature .....

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

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

[OVER]



ORIGINAL 12884

MEDICAL HISTORY SHEET.

Surname *Welsh* Christian Name *John*

Examined { on *29* day of *Sept* 191*5*  
at *Charlottetown*  
Birthplace { City of *Charlottetown*  
County

Approved by *[Signature]*  
Rank *Lieut Col* M.O.

Apparent age *18*  
Trade or occupation *Barber*  
Height *5* Feet *8* Inches  
Weight *152* Lbs.  
Chest measurement { Minimum *33 1/2* inches.  
Maximum expansion *2 1/2* inches.  
Physical development *Good*  
Small-Pox Marks *None*

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

Vaccination Marks { Arm Right Left  
Number *1*  
When Vaccinated last *1914*

Date	Result	VACCINATIONS.
<i>19/10/15</i>	<i>nil</i>	<i>[Signature]</i> M.O.
		M.O.
		M.O.

(a) Marks indicating congenital peculiarities or previous disease  
(b) Slight defects but not sufficient to cause rejection

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<i>6/10/15</i>	<i>Good</i>	<i>[Signature]</i> M.O.
<i>16/10/15</i>	<i>Good</i>	<i>[Signature]</i> M.O.
		M.O.

Enlisted on *1* day of *Oct* 191*5* at *Charlottetown P.E.I.*

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<i>2 N.B. Depot Siege Artillery</i>	<i>92889</i>		
Transferred to..	<i>160th Canadian Siege Battery.</i>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<i>Band</i>	<i>8/4/15</i>	<i>he. a</i>	<i>[Signature]</i>

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.

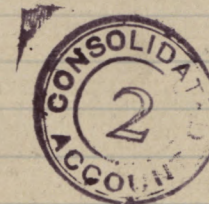


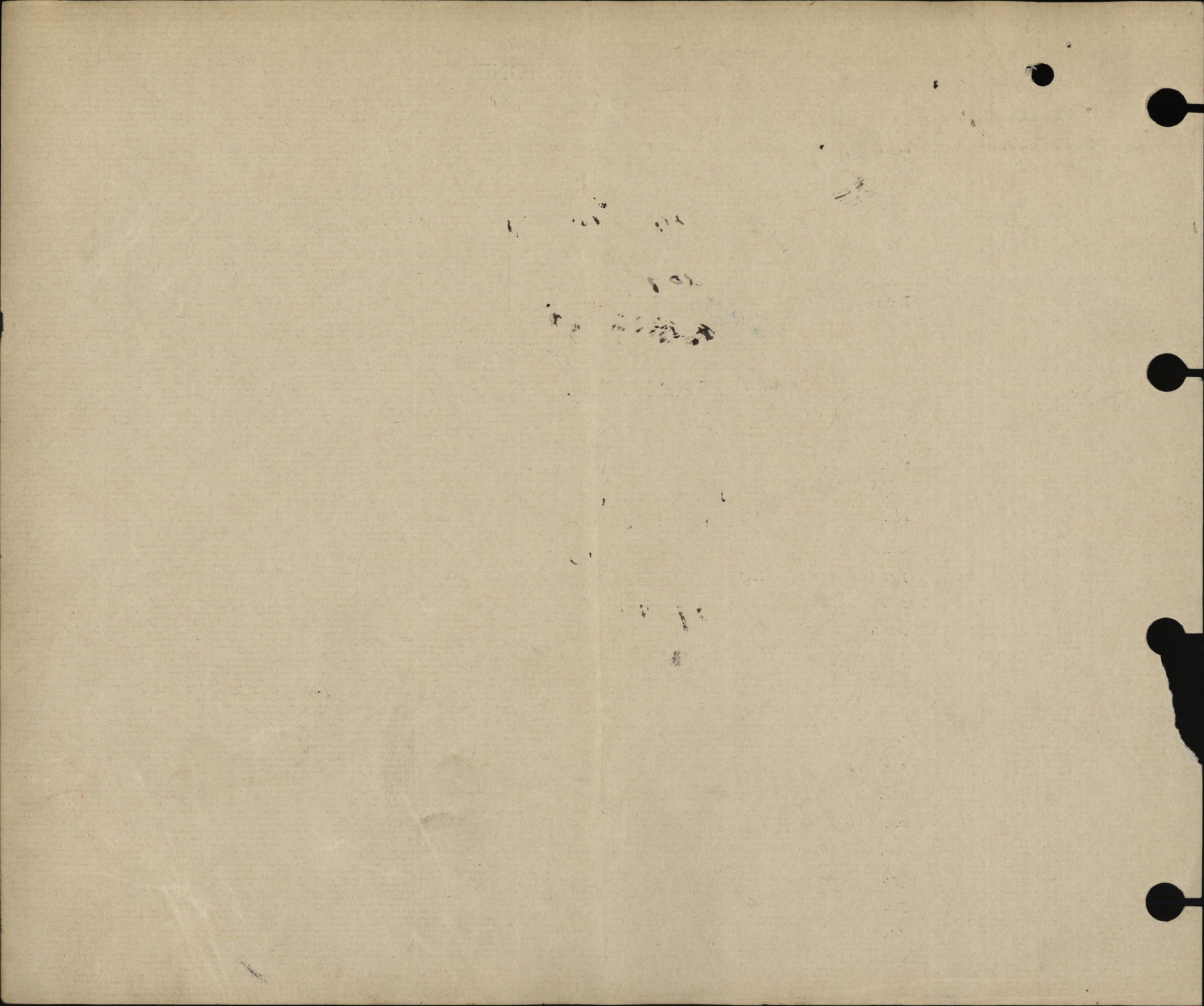
2nd Contingent

MILITIA AND DEFENCE  
ASSIGNED PAY  
OVERSEAS CONTINGENTSM. F. W. 12.  
20m.—9-15.  
H. Q. 1772-39-819.To Whom *Miss Mamie Welsh*  
Address *55 Reserve St.  
Charlottetown  
P.E.I.*By Whom Assigned *Welsh John*  
Regtl. No. *92889*  
Rank *Pr.*  
Corps *No 2 Siege Artillery*Rate *\$15-00**Nov 1-1915*

## PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.		<i>111391</i>	<i>30</i>	
Jan.	1916	<i>Q 11782</i>	<i>15</i>	
Feb.		<i>Q 14679</i>	<i>15</i>	
March		<i>214902</i>	<i>15</i>	





## ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.

Miss Mamie Welsh

L. L. Job 89002.-Req. 6213.

## PAYMENTS.

Name of Soldier

Welsh. John.  
Ridge Path

92889.

Month.	Year.	Cheque No.	Amt	Remarks.
			<del>75</del> 15 <sup>00</sup>	
April	1916	2296	15	
May		4103	15	
June		9209	15	
July		<del>75</del> 7560	15	
Aug.		15887	15	
Sept.		W 20127	15	
Oct.		W 25518	15	
Nov.		M 27487	15	
Dec.		K 35990	15	
Jan.	1917	41208	15	
Feb.		48061	15	
March		963854	15	
April		K 5416	15	15 (W)
May		K 11951	15	
June		19342	15	Eu
July		1625487	15	
Aug.		R 33168	15	
Sept.		71 40475	15	
Oct.		Q 45526	15	
Nov.		T 54252	15	
Dec.		N 63413	15	
Jan.	1918			
Feb.			390	
March				
April				
May				
June				
July				

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

**PAYMENTS.**

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

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

Rank **Pte.** Name **WELSH, John.**Reg'l No. **92889**

P-56

Unit **98 Seige Batty**If in perm. Corps,  
What Unit?

Married or Single

**Single.**Place and Date of Enlistment **Charlottetown. 30 Sep 1915.**Place of Birth **Ch'Town. P.E.I.**

Name and Address, Next-of-Kin

**William Welsh, 55, Reserve St. Ch'Town. P.E. Island. Can.**

Relationship

Assigned Pay Monthly \$

**15<sup>00</sup>**

Payable to

**Miss Marie Welsh 55 Reserve St  
Ch'Town P.E.I.**

Relationship

Separation Allowance \$


Payable to

Relationship

Discharge, Date and Place

Reason

Character

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						
	<b>Nov 30</b>							<b>10</b>	<b>10</b>							<b>10 00</b>	
<b>Dec</b>	<b>Dec 31</b>	<b>31</b>	<b>1<sup>00</sup></b>	<b>31 00</b>	<b>31</b>	<b>10</b>	<b>3 10</b>		<b>34 10</b>			<b>7 30</b>	<b>15<sup>00</sup></b>		<b>22 30</b>	<b>21 80</b>	
<b>1 Jan</b>	<b>31</b>	<b>31</b>	<b>1<sup>00</sup></b>	<b>31 00</b>	<b>31</b>	<b>10</b>	<b>3 10</b>		<b>34 10</b>			<b>26 76</b>	<b>15<sup>00</sup></b>		<b>41 76</b>	<b>14 14</b>	
<b>1 Feb</b>	<b>29</b>	<b>29</b>	<b>1<sup>00</sup></b>	<b>29</b>	<b>29</b>	<b>10</b>	<b>2 90</b>		<b>31 90</b>			<b>21 42</b>	<b>15</b>		<b>36 42</b>	<b>9 62</b>	
<b>1 Mar</b>	<b>31</b>	<b>31</b>	<b>1</b>	<b>31</b>	<b>31</b>	<b>10</b>	<b>3 10</b>		<b>34 10</b>			<b>14 60</b>	<b>15</b>		<b>59 60</b>	<b>14 12</b>	
				<b>122</b>			<b>12 20</b>	<b>10</b>	<b>144 20</b>			<b>70 08</b>	<b>60</b>		<b>130 08</b>		<b>Checked</b> 





ASSIGNED PAY	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.	NAME: <b>WELSH John</b>
EFFECTIVE DATE: <b>1-12-15.</b>		EFFECTIVE DATE: <b>1/5/19</b>		NUMBER: <b>92889</b>
AMOUNT: <b>15.00</b>		AMOUNT: <b>15.00</b>		PARTICULARS OF RANK OR APPOINTMENT
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.		AUTHORITY
<b>Miss Mandy Welsh</b> <b>55 Reservoir St</b> <b>Charlottetown P.E.I.</b>				DATE EFFECTIVE
				RANK OR APPOINTMENT
				<b>209.28-176 14-1-18 Lt Col</b>
				<b>2049.29-718 29-4-18 2nd Lt</b>
				<b>" 80 7/10/18 31/8/18 Cpl 31/8/18</b>
UNIT AND TRANSFERS				
ORIGINAL UNIT <b>9th Div</b>				
DATE ACCOUNT FIRST OPENED: <b>1-12-15</b>				
		AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S P'D
				<b>5th Div</b>

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
15-3	3081	F 50	935				
3-4	117	R 1	487				
8-4	1374	Rhyl	10486				
1-3	2858	F 95	460				

DAILY RATES OF PAY AND ALLOWANCES				
AUTHORITY	PAY	F.A.	P.F.A.	SUBS CE ALL CE
	105	10		
<b>J &amp; B a. 54</b>	10	10		
<b>J &amp; B a. 54</b>	10	10		

PARTICULARS OF RENDERING NON-EFFECTIVE: <b>30/4 Div to Canada, 6596 Rhyl to Rhyl, 2102</b>													
MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION		
Jan	Balfour								31.81				
Apr	1st	33		AP				15					
				20.8.4-18 26th	446								
				" 16.5.19.4-18	357				4178				
May	1st	33		AP	803			15					
		3410		74.7-5-18 26th	446			15					
				381.7-5-18	357				5285				
June	1st	33		AP	803			15					
		3410		172 7/6	357			15					
		33		598. 19/6	357				63.71				
July	1st	33		AP	714			15					
	Div from 24.4-18 to 31.7-18, 99th	3410		207.7-7-18 26th	357			15					
				746.16.7-18	446				7973				
Aug	1st	3905		AP	803			15					
		3565		844. 4-8-18 26th	357			15	10038				
				936. 16-8-18	357				9324				
Sept	1st	3565		AP	714			15					
		3450		112. 16-9-18	357			15	11274				
				200. 11.7. 6-9-18	357				10917				
									10560				
Oct	"	3450		APay (Can)	714			15					
	from cpl 31/8/18 62 days 25th 20/80 7/10/18	3565		1342 7/10/18	3 1/3			15	12935				
				1472 2 Bde 22/10	3 1/3				12189				ok agreed
					746			15					

COMPILED BY **J. M. M. M.**  
CHECKED BY **J. M. M. M.**

NUMBER	RANK	NAME	MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1918												12189		
Apr				Dec Pay	7320		allow 2 Mon's				30			
May				Cpl Pay	3720		1872 2 Bde 10/11	746						
					11040		CP 45819 2d Lt 3/12/18	12167						
							CP 80158 " 10/12/18	487						
							clt 1849 1 Bde 20/1/18	933						
							allow	12333			15	4396		
					11040			14333			45			
Apr				Cpl Pay	3360		allow				45			
May					3720		clt 2147 " 4/1/19	373						
							2366 " 17/19	746						
							2442 C. Ja 3/1/19	373						
							2569 " 6/2	466						
							2706 " 19/2	466						
							4728 4/3/19	2738						
							allow				15	3314		
					7080			5162			30			
Apr					96						15	5414		
							117 4/4 C.C.C	487						
							1374 8/4 "	4867						
							5006 23/4 R. Park	487	5841			427		
					36			5841			15			
SO S. Canada 3/19 S.L. 53 CARDS														

541  
6753  
5414  
1339

MARRIED OR SINGLE *S.*  
 PLACE OF BIRTH *Charlottetown, P.E.I.*  
 NAME AND ADDRESS OF NEXT OF KIN *Mrs Wm Welsh.*  
*55 Reserve St. Charlottetown P.E.I. Canada.*  
 RELATIONSHIP OF NEXT OF KIN  
 NAME AND ADDRESS OF NEXT OF KIN  
 RELATIONSHIP OF NEXT OF  
 SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)  
 PAYABLE TO  
 RELATIONSHIP OF DEPENDANT

**CASUALTIES, PROMOTIONS, &C.**

PARTICULARS	EFFECTIVE DATE	AUTHORITY
<i>Lt Bdr</i>	<i>14-1-18</i>	<i>509-28-1-18</i>

ADMISSIONS TO HOSPITAL, &C.			
DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L No. *92889.* RANK *Gunner* NAME *Welsh, John*  
 IF IN PERM. CORPS } UNIT *98<sup>th</sup> Siege Batt<sup>y</sup>.* TRANSFERRED TO *165<sup>th</sup> Siege Batt<sup>y</sup>.* DATE *1-7-16* AUTHORITY *D.O.# 1.23%*  
 WHAT UNIT }  
 PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY  
 PLACE OF ATTESTATION *Charlottetown.* TRANSFERRED TO DATE AUTHORITY  
 DATE OF ATTESTATION *30<sup>th</sup> Sept. 1915.* TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY \$ *15.00* DATE EFFECTIVE *1-12-15*  
 PAYABLE TO *Miss Mamie Welsh, 55 Reserve St. Charlottetown P.E.I.* 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)

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS	
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1	2	3	4	1	2	3	4				CREDIT	DEBIT				
			\$	c.			\$	c.			\$	c.																				No.
			<i>122</i>				<i>1220</i>							<i>10</i>	<i>14420</i>									<i>60</i>			<i>130 08</i>	<i>14 14</i>				
<i>April</i>	<i>1-30</i>	<i>30</i>	<i>1.</i>	<i>30</i>	<i>10</i>	<i>3</i>									<i>33</i>	<i>71</i>	<i>15</i>	<i>16</i>					<i>15</i>			<i>22 30</i>	<i>24 82</i>					
<i>May</i>	<i>1-31</i>	<i>31</i>	<i>1.</i>	<i>31</i>	<i>10</i>	<i>2</i>	<i>10</i>								<i>34 10</i>	<i>4</i>	<i>10</i>						<i>15</i>			<i>41 77</i>	<i>17 15</i>					
<i>June</i>	<i>30</i>	<i>30</i>		<i>30</i>		<i>3</i>									<i>33</i>								<i>15</i>			<i>15</i>	<i>35 15</i>					
<i>July</i>	<i>1-31</i>	<i>31</i>	<i>213</i>	<i>31</i>		<i>21 30</i>					<i>10</i>	<i>24 4 30</i>	<i>30</i>	<i>30</i>	<i>30</i>	<i>10</i>	<i>24</i>	<i>15</i>	<i>16</i>				<i>15</i>			<i>20 9 15</i>						
<i>Aug</i>	<i>1-31</i>	<i>31</i>	<i>31</i>	<i>31</i>		<i>3 10</i>						<i>34 10</i>	<i>6</i>	<i>15</i>	<i>3</i>	<i>10</i>	<i>6</i>	<i>15</i>	<i>7</i>				<i>15</i>			<i>32 04</i>	<i>39 25</i>	<i>100</i>	<i>38 28</i>			
<i>Sept.</i>	<i>1-30</i>	<i>30</i>	<i>30</i>	<i>30</i>		<i>3</i>						<i>33</i>	<i>28</i>	<i>15</i>	<i>8</i>	<i>35</i>	<i>15</i>	<i>9</i>	<i>16</i>				<i>15</i>			<i>39 33</i>	<i>32 95</i>					
<i>Oct.</i>	<i>1-31</i>	<i>31</i>	<i>31</i>	<i>31</i>		<i>3 10</i>						<i>34 10</i>	<i>20</i>	<i>30</i>	<i>10</i>	<i>6</i>	<i>13</i>	<i>15</i>	<i>10</i>				<i>15</i>			<i>15</i>	<i>52 05</i>					
<i>Nov.</i>	<i>1-30</i>	<i>30</i>	<i>30</i>	<i>30</i>		<i>3</i>						<i>33</i>	<i>13</i>	<i>15</i>	<i>10</i>	<i>6</i>							<i>15</i>			<i>22 84</i>	<i>62 21</i>	<i>150</i>	<i>60 71</i>			
<i>Dec.</i>	<i>1-31</i>	<i>31</i>	<i>31</i>	<i>31</i>		<i>3 10</i>						<i>34 10</i>	<i>28</i>	<i>15</i>	<i>16</i>	<i>36</i>	<i>3</i>	<i>12</i>					<i>15</i>			<i>17 61</i>	<i>78 70</i>	<i>300</i>	<i>78 70</i>			
<i>Jan.</i>	<i>1-31</i>	<i>31</i>	<i>109</i>	<i>31</i>		<i>34 10</i>						<i>34 10</i>	<i>36</i>	<i>3</i>	<i>12</i>	<i>44</i>	<i>16</i>	<i>12</i>	<i>51</i>	<i>5</i>	<i>1</i>		<i>15</i>			<i>31 56</i>	<i>81 24</i>					
<i>Feb.</i>	<i>1-28</i>	<i>28</i>	<i>30 80</i>									<i>30 80</i>	<i>59</i>	<i>19</i>	<i>1</i>	<i>68</i>	<i>17</i>		<i>105</i>	<i>28</i>	<i>3</i>		<i>15</i>			<i>17 62</i>	<i>94 42</i>	<i>3. 50</i>	<i>90. 92</i>			
<i>March</i>	<i>1-31</i>	<i>31</i>	<i>110</i>	<i>31</i>		<i>34 10</i>						<i>34 10</i>	<i>79</i>	<i>14</i>	<i>2</i>	<i>86</i>	<i>2</i>	<i>13</i>	<i>96</i>	<i>11</i>	<i>3</i>		<i>15</i>			<i>28 07</i>	<i>100 45</i>	<i>4.</i>	<i>96 45</i>			
			<i>53570</i>									<i>10</i>	<i>54570</i>										<i>240</i>			<i>44525</i>	<i>100 45</i>					



WAR SERVICE BADGE CLASS A

M.D.S.

SERVICE GROUP 19

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

OCCUPATIONAL GROUP 23

(Demobilization.)

John Welsh  
Father  
A. Barber  
31-12-40

MRC

1. No. 92889

2 Rank. CPL

3. Name. Welsh John

4. Unit. 1st CB

5 Date of Discharge MAY 18 1919 Place CHARLOTTETOWN, P.E.I.

6 Reason for Discharge Demobilization

WAR SERVICE BADGE CLASS A  
NUMBER 311830 ISSUED.

H

7. Authority. 201420

8. Proposed Residence after Discharge. Charlottetown P.E.I.

*Decided 8/4/53*

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.? 29

John Welsh  
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.  
Place CHARLOTTETOWN, P.E.I. H.M.T. Mauretania  
Sailing No 53  
Date MAY 10 1919 Emb'k'd S'th' on 3/5/19  
Disem'd'b Halifax 9/5/19

Signature J. P. Ritchie  
(O. C. Discharging Unit.)

SHORT FORM  
PROCEEDINGS ON DISCHARGE  
(Demobilization)

1. No.	
2. Rank	
3. Name	
4. Unit	
5. Date of Discharge	
6. Reason for Discharge	
7. Authority	
8. Proposed Release Date	

TESTIMONY TO BE SIGNED BY SOLDIER

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

.....  
.....  
.....  
Signature of Soldier

CONFIRMATION

The signature of the above named man is hereby confirmed.

H.M.T. [Signature]

.....  
.....  
Signature

.....  
.....  
Signature

LIST OF DISCHARGE DOCUMENTS

Attestation Paper, Triplicate	Miss Form W. 23
or Particulars of Discharge	Miss Form W. 108
Field Conduct Sheet	Miss Form W. 103 or A. P. B. 103
Classify Form	Miss Form W. 61 or A. P. B. 104
Last Pay Certificate	Miss Form W. 49
Certificate that missing documents are unobtainable	
Medical History Sheet	Miss Form H. 113 or A. P. B. 113
Proceedings of Medical Board	Miss Form A. W. 1 or A. P. B. 44
Dental History Sheet	Miss Form H. 114
Medical Report	M. R. W. 112 or A. P. B. 112
Regimental Conduct Sheet	Miss Form C. 22
Company Conduct Sheet	Miss Form C. 23

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

Group A

Checked by No. 20 1116

Date 23 APR 1919



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

*Nov. 1/1915*

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

# W 4359

RATE OF ASSIGNMENT

<i>15</i>			
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*42/11/15*

### PARTICULARS OF SEPARATION ALLOWANCE

No. *92889*  
 Rank *Gr.* Promoted Reverted Discharge  
 Soldier's Name *John Welsh*  
 Battalion *#2 Siege Arty.*  
 Beneficiary  
 Relationship  
 Address

### PARTICULARS OF ASSIGNMENT

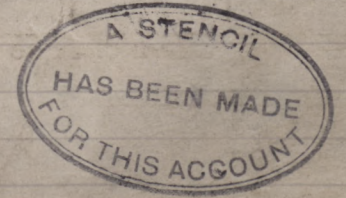
Name *Miss Mamie Welsh*  
 Address *5-5 Reserve St.*  
 Change of Address *Charlotte Town P. E. I.*  
 1  
 2  
 3  
 4

<i>1919</i>	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Dec 31</i>			<i>390</i>	<i>390</i>	
<i>Jan</i>	<i>X 72085</i>		<i>15</i>	<i>15</i>	<i>W</i>
<i>Feb</i>	<i>W 71749</i>		<i>15</i>	<i>15</i>	<i>ack</i>
<i>March</i>	<i>X 91913</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>April</i>	<i>W 14050</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>May</i>	<i>W 19894</i>		<i>15</i>	<i>15</i>	<i>✓✓</i>
<i>June</i>	<i>R 27674</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>July</i>	<i>B 22996</i>		<i>15</i>	<i>15</i>	
<i>Aug</i>	<i>V 37131</i>		<i>15</i>	<i>15</i>	
<i>Sept</i>	<i>V 47409</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Oct</i>	<i>K 51236</i>		<i>15</i>	<i>15</i>	<i>L</i>
<i>Nov.</i>	<i>Q 57213</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Dec.</i>	<i>N. 64695</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>1919 Jan</i>	<i>N. 73936</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Feb.</i>	<i>V. 79054</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Mar</i>	<i>M 89066</i>		<i>15</i>	<i>15</i>	
<i>Apr</i>	<i>V 1292</i>		<i>15</i>	<i>15</i>	
<i>May</i>	<i>V 7298</i>		<i>15</i>	<i>15</i>	<i>J</i>
			<i>645</i>	<i>645</i>	

*019086-f-49.*

*A/c Closed 31/5/19*  
*Ret'd per... Mauretania..*  
*Date. 9/5/19 M.F.W. 187 M.D.C.*  
*Closed 16/5/19 Smelway*  
*MR OR P. 83618 Destroy*  
 MAY 16 1919 C

M. F. W. 128.  
 40 MC. 6. 7-1-72-39-1141.  
 L. L. 22240-M. & D. 7993.



### Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Rank                      Promoted                      Reverted                      Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128.  
 Form. 6. 7-1-72-31-1141  
 L. L. 22340-M. & D. 1993.

Mauretania 9.5.19

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

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

REGT. No. *92889* RANK *Cpl.* NAME (IN FULL) *Welsh J.*  
 IF IN P.F. WHAT UNIT? *5-b.S.B.* (BLOCK LETTERS SURNAME FIRST)

M. OR S.	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	PLACE OF ATTESTATION	TRANSFERRED TO	DATE	AUTHORITY
NEXT OF KIN		<i>None</i>	<i>3-5-19</i>	<i>Dec. 142</i>					
ADDRESS									
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				ASSIGNED PAY \$	DATE EFFECTIVE			
					<i>15-00</i>	<i>1.6.19</i>			
TO WHOM PAID	RELATIONSHIP				PAYABLE TO	RELATIONSHIP	ANY CHANGE IN ASSIGNEE OR ADDRESS		
					<i>Mrs M. Welsh</i>	<i>M/S</i>			<i>664</i>
ADDRESS					ADDRESS				
					<i>55 Reginald St.</i>				
					<i>Charlottesville P.S.D.</i>				
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE			
					DISCHARGED	PLACE	DATE	REASON	AUTHORITY
					<i>Halifax</i>	<i>18-5-19</i>	<i>Dismot</i>		<i>Dec. 142</i>

*G.P.P. 62.1.6. Admitted*

MONTH	No. OF DAYS	PAY AND F.A.		OTHER CREDITS	TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS		
		RATE	AMOUNT		COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3	DEBIT	CREDIT									
<i>30.4.19</i>																					<i>Debit Bal. Capt. Allen</i>
<i>18.5.19</i>	<i>18</i>	<i>120</i>	<i>21 60</i>	<i>35 ad 70</i>	<i>126 60</i>								<i>4 87</i>	<i>5 00</i>	<i>83 47</i>	<i>15 00</i>		<i>13 39</i>	<i>4 87</i>	<i>126 60</i>	<i>Capt. 2</i> <i>Capt. 3</i> <i>Bul. in Dr. W. P. R. C.</i> <i>for May. War at R.P.C.</i>
				<i>W.S.G. S.A.</i>																	<i>WAR SERVICE GRATUITY, WSG S.A.</i>
				<i>183 days</i>	<i>420 00</i>	<i>420 00</i>							<i>70 00</i>					<i>350 00</i>			<i>St. Payment W.S. Grat.</i>
													<i>70 00</i>					<i>280 00</i>			<i>14-6-19 # 601034</i>
													<i>70 00</i>					<i>210 00</i>			<i>16-7-19 # 889012</i>
													<i>70 00</i>					<i>140 00</i>			<i>11-8-19 # 1116427</i>
													<i>70 00</i>					<i>70 00</i>			<i>10-9-19 # 1137085</i>
													<i>70 00</i>					<i>70 00</i>			<i>11-11-19 # 1509410</i>
					<i>420</i>	<i>420 00</i>							<i>420 00</i>					<i>420 00</i>			

BALANCE FROM PREVIOUS ACCOUNT

Certified that all payments due on this acct. have been paid.  
*[Signature]*  
 For Senior Officer Pay Services M. D. 6

MAY 30 1919

