

ATTESTATION PAPER.

JGM

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... WHITE,
- 1a. What are your Christian names?..... Thomas John
- 1b. What is your present address?..... 89 Cherry St., Chelsea, Mass. U.S.A.
- 2. In what Town, Township or Parish, and in what Country were you born?..... Yarmouth, N.S., Canada.
- 3. What is the name of your next-of-kin?..... Mrs. Hazel Agnes WHITE
- 4. What is the address of your next-of-kin?..... 89 Cherry St., Chelsea, Mass. U.S.A.
- 4a. What is the relationship of your next-of-kin?..... Wife.
- 5. What is the date of your birth?..... 1894 May 4th
- 6. What is your Trade or Calling?..... Teamster.
- 7. Are you married?..... Yes.
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... Yes.
- 9. Do you now belong to the Active Militia?..... No.
- 10. Have you ever served in any Military Force?..... State Militia (MASS. U.S.A.) 3 yrs. \* J.W.
- 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.
- 13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? .. No.
- 14. If so, what was the nature of the disability? Nil.
- 15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected? .. No.
- 16. If so, what was the reason?..... Nil.

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Thomas John White (Signature of Recruit)

Date 12 November 1917 1917 . (Signature of Witness) S. Douglas

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Thomas John WHITE, 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.

Thomas John White (Signature of Recruit)

Date 12 November 1917 1917 . (Signature of Witness) S. Douglas

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 Montreal, Canada this 13th day of November 1917

(Signature of Justice) Major

**Description of WHITE, Thomas John on Enlistment.**

Apparent Age 23 years 6 months.  
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5-8 ft.  ins.

Chest measurement { Girth when fully expanded 36 ins.  
 Range of expansion 4 ins.

Complexion Medium.

Eyes Brown.

Hair Brown.

Religious denominations.  
 Church of England.....  
 Presbyterian.....  
 Methodist.....  
 Baptist or Congregationalist.....  
 Roman Catholic \*\*\*\*\*.....  
 Jewish.....  
 Other denominations.....  
 (Denomination to be stated.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

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

Eyesight R. D. = 20  
 " L. D. = 20  
 Hearing R. Ear all  
 " L. " all

**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\*..... for the **Canadian Over-Seas Expeditionary Force.**

Date..... 191 ..

Place.....

\*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:—

Declared **FIT** by MEDICAL BOARD  
 MOBILIZATION CENTRE, M. D. 44  
W.C. [Signature] Medical Officer.  
 President, S. M. E.

**"A" Fit for General Service**

**CERTIFICATE OF OFFICER COMMANDING UNIT.**

Thomas John WHITE..... 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] Major  
 LIEUT.-COL. (Signature of Officer)  
 COMMANDING 1ST DEPTG Bn. 1ST QUEBEC REGIMENT.

Date..... NOV 14 1917 .. 191 ..

REGIMENTAL DOCUMENTS

NAME

*White Thomas John*

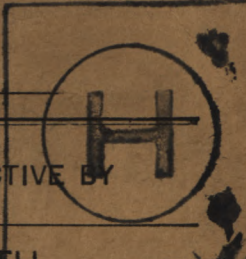
REGT. NO.

*3080, 337*

UNIT

*24<sup>th</sup> Bn*

H. Q. FILE NO.



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DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505  
REFERENCE

NON-EFFECTIVE BY

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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)

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MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

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

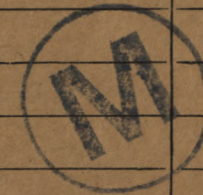
*Misc.*

*EBB*

*1912*

DEATH

Category



DISCHARGE

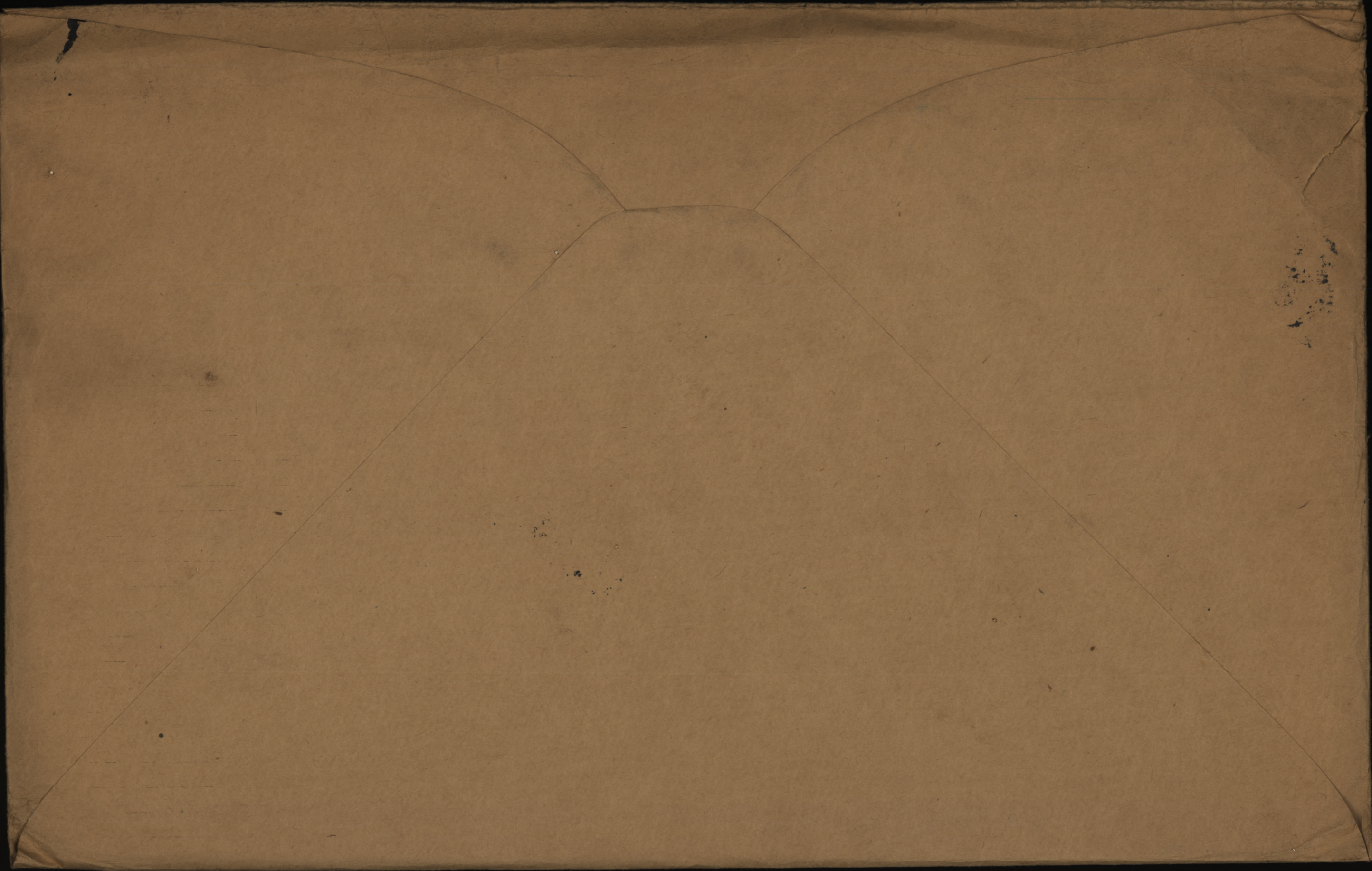
Category

*Demob*

DESERTION

18166





To be made out in duplicate.

H.Q. 54-21-23-53

## PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

## INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

- (1) Name of Overseas Unit which Soldier joins 1st DEPOT BN. 1st QUEBEC REG'T.
- (2) Regimental Number 3080337
- (3) Full Name of Soldier WHITE, Thomas, John.
- (4) Place of Birth Yarmouth, N.S., Canada.
- (5) Are you married, or not? Yes.
- (6) If married, state,  
 (a) Full name of your wife Mrs. Hazel Agnes White.  
 (b) Present Postal Address 89 Cherry Street, Chelsea, Mass., U.S.A.
- (7) Are you a widower? No.
- (8) Have you any children? two.  
 If so, give number of boys and girls one Boy one Girl.  
 Also their names and ages Lester William White 1 Year and Nine Months  
Mabel Winnifred White Five Weeks.

(9) Is your Father alive?..... **Yes.**

If so, state name and address..... **James. Roland. White. 70 Second Street.  
Chelsea, Mass. USA.**

(10) Is your Mother alive?..... **No.**

If so, state name and address..... **Nil.**

(11) If your Mother is a widow..... **Nil.**

Are you her sole support, or not?..... **Nil.**

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

..... **Nil.**

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

..... **Nil.**

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

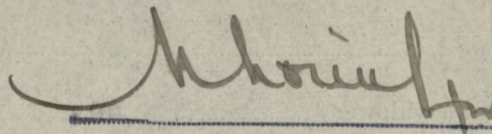
..... **Yes.**

(15) Are you insured?..... **Yes.**

If so, in what Company?..... **Boston Mutual Life Insurance Co.**

Have you made arrangements for payment of your Insurance premium..... **Yes.**

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

  
..... **Major**  
..... **LIEUT.-COL.**  
..... **COMMANDING 1ST DEPOT BN. 1ST QUEBEC REGIMENT.**  
..... **Officer Commanding.**

Date..... **NOV 14 1917**

*ms*

Number *3080337*

Rank *L/Cpl*

Surname *WHITE*

Christian Name *Thomas John*

Units *24<sup>th</sup> Bn. Coy. Theatre of War France*

Date of Service *18-8-18*

Remarks *74 Chestnut St.*

Latest Address *~~118 Broadway~~  
Chelsea.*

Roll No. *Mar.*

*B. Page 12939.*  
200m.-2-21.M. *U.S.A.*

Next of kin \_\_\_\_\_

Address on leave \_\_\_\_\_

Address on discharge \_\_\_\_\_

Transportation issued  Yes  No Date \_\_\_\_\_

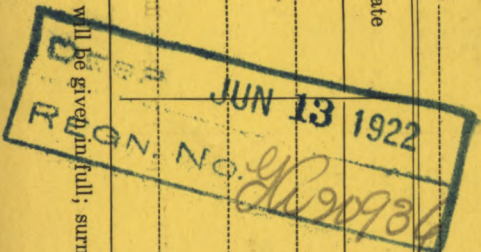
Character on discharge \_\_\_\_\_

Previous occupation \_\_\_\_\_ Date and place of enlistment \_\_\_\_\_

Diagnosis \_\_\_\_\_ Date of Medical Boards \_\_\_\_\_

Date \_\_\_\_\_

Remarks \_\_\_\_\_



\*—Name will be given in full; surname first.



SURNAME.

*White.*

*7*<sup>4</sup> CARD NO.

CHRISTIAN NAMES

*Thomas John.*

*Sold. Dis. 18-5-19<sup>4</sup>*  
FOLL. *Dumb*  
*80.147727-5-19<sup>4</sup> 20*

REGL. No

*3080337.*

RANK

*Pte*

UNIT

*1<sup>st</sup> Depot (1<sup>st</sup> Que. Regt.)*

*Bw.*

FORMER CORPS

*U.S.A. Army 3 yrs.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

*White, Mrs. Hazel Agnes*

RELATIONSHIP TO SOLDIER

*Wife.*

ADDRESS

*89 Cherry St., Chelsea,  
Mass. U.S.A.*

COUNTRY OF BIRTH

*Canada.*

DATE

*U.S. Yarmouth, May 4<sup>th</sup> 1894.*

PLACE OF ATTESTATION

*Montreal, P.Q.*

DATE

*Nov. 13<sup>th</sup> 1917.*

*925-3-18 1140/10*

*R/C. 16-5-19 324/512/c*

MARRIED

*yes.*

SINGLE

WIDOWER

TRADE OR CALLING

*Teamster*

RELIGION

*Roman Catholic*

DESCRIPTION.

APPARENT AGE

*23* YEARS

*6* MONTHS

HEIGHT

*5* FEET

*8* INCHES

CHEST MEASUREMENT

*36* INCHES

EXPANSION

*4* INCHES

COMPLEXION

*Medium*

EYES

*Brown*

HAIR

*Brown*

DISTINGUISHING MARKS

*Nil.*

MEDICAL EXAMINATION.

PLACE

*Montreal, P.Q.*

DATE

*Nov. 13<sup>th</sup> 1917.*

*Present Address - 89 Cherry St.,  
Chelsea, Mass.  
U. S. A.*

W.S.B. CLASS A

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

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

500M.—9-16

H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps *6th Div 1st DEPOT BN. 1st QUEBEC REG'T*

Regimental No. *3080337* Rank *Pte.* Name *WHITE Thomas John*

Enlisted (a) *12th. November 1917* of Service (a) *C.E.F.* Service reckons from (a) *12th. November 1917.*

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) *Seamster*

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				

CERTIFIED CORRECT.  
 26 AUG. 1918  
 RECORDS, LONDON.

		<i>Embarked</i>	<i>Canada</i>	<i>24.3.18</i>	<i>H.M.T.</i>
		<i>Arrived</i>	<i>England</i>	<i>3.4.18</i>	<i>Scandinavian</i>
<i>24.10.18</i>	<i>33rd Res Bn.</i>	<i>Taken on Strength</i>	<i>Tramshott.</i>	<i>4-4-18</i>	<i>DEPT II Co 107</i>
<i>29/8/18</i>	<i>do</i>	<i>Pisted to 24th Bu.</i>	<i>do</i>	<i>18/8/18</i>	<i>D.P. # 231</i>
<i>20.8.18</i>	<i>C. I. B. D.</i>	<i>T. O. S. 24th BN ON ARRIVAL</i>	<i>FRANCE</i>	<i>20.8.18</i>	<i>DO. No. 87 of 1918</i>
<i>20.8.18</i>	<i>C. I. B. D.</i>	<i>S. O. S. TO C. C. R. C.</i>	<i>FIELD</i>	<i>18.8.18</i>	<i>N. R. A732</i>
<i>23.8.18</i>	<i>C. C. R. C.</i>	<i>T. O. S.</i>	<i>"</i>	<i>33.8.18</i>	<i>N. R. D1354</i>
<i>26.8.18</i>	<i>C. C. R. C.</i>	<i>S. O. S. TO UNIT</i>	<i>"</i>	<i>26.8.18</i>	<i>N. R. A1312</i>
<i>6.9.18</i>	<i>UNIT</i>	<i>JOINED UNIT</i>	<i>"</i>	<i>31.8.18</i>	<i>N. P. 1318</i>
		<i>over</i>			<i>B. 213</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.

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				
31. 1. 19	241 Col M	appd. HQ pe vice 835425 HC. Healey deprived of lance stripes	Field.	22. 1. 19	B213 920 17 of 1919
	Eub Camp	Proceeded to England.		7-4-19	N.R. PL 2 O NO
		S.O.S. "U" Wing, Canadian Corps Camp, Witley, on proceeding to Canada 10/5 1919, D.O. No. 18			
		<u>W. Speckley</u> for Officer Commanding.			
27-5-19.	O/S	T.O.S. D.D.#4 Disp.Stn."F"	Montreal	10-5-19.	D.O.Pt.II#147.
27-5-19.		S.O.S. D.D.#4 Demob.	Montreal	18-5-19	D.O.Pt.II#147. R.O. 1420.
		<u>G.H. Stetcher</u> Lieutenant, Assistant Adjutant, District Depot No. 4.			

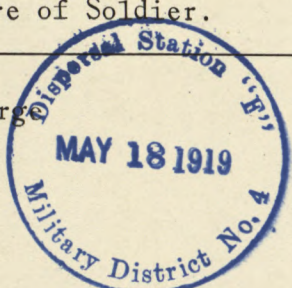
# CANADIAN EXPEDITIONARY FORCE

## War Service Badge **DISCHARGE CERTIFICATE**

Class A, No. \_\_\_\_\_

THIS IS TO CERTIFY that No. 3080337 (Rank) L/C.  
Name (in full) WHITE Thomas John enlisted in  
the 1st Depot Bn 1st Que Regt Canada  
CANADIAN EXPEDITIONARY FORCE at Montreal on the 12th  
day of November 1917  
HE served in 24th Bn (France)  
Demobilization.  
and is now discharged from the service by reason of Medical Unfitness.

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

Age <u>24 years.</u>	Marks or Scars <u>Tattoo right forearm.</u>
Height <u>5 ft. 8 in.</u>	
Complexion <u>Medium</u>	
Eyes <u>Brown</u>	
Hair <u>Brown.</u>	
<u>T. J. White</u> Signature of Soldier.	<u>J. Fisher</u> Issuing Officer Lieutenant Officer in Charge Section, Dispersal Station "F"
Date of Discharge <u>MAY 18 1919</u> 	Rank _____ Date <u>May 18 19</u> 19 <u>19</u>

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.

301077  
WHITE  
The Dept of the Post  
Montreal  
1914  
Member  
No. 10 (France)

24 years  
24.8m  
Member  
No. 10  
1914

Office of the Director General  
Department of the Post



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

## DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

### DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block Letters) WHITE, T.J.  
 REGIMENT 24th Can Bn RANK L/Cpl No. 3080 337  
 Date of Examination in England 10-4-19 Date of Examination in France \_\_\_\_\_

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



### PRESENT DENTAL REQUIREMENTS

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

HAS HE EVER REFUSED DENTAL TREATMENT? No

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

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

*Rhompson capt*  
 for A. D. D. S. M. D. No. 4

Signature of Dental Officer A. Hynes capt

3080 337

WHITE, T.J.  
2441 Com Center St / Apt

10-4-19



# 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. 3080337 Rank Lt Col Surname WHITE  
(Given name in full)  
Thomas John  
 Unit or Corps 24 Battr Birthplace Yarmouth W. S. Can.

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

1. GENERAL DESCRIPTION:

Physique good Weight 155-2st lbs. Height 5-8 ft. Colour of Eyes brown  
 Nutrition good  
 Pulse 75 Regular  
 Condition of arteries opt  
 Vision Rt. 6/12 Left 6/12  
 Hearing (conversational voice) Rt. 20 ft.  
 Left 24 ft.

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

R forearm lacer scars  
bush knee & dagger - scars  
head horse shoe  
L forearm lacer scars  
wrench gash head  
globe & plug.

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 Sytem 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.

Acne - some present now no disability

# EXAMINATIONS.

## THIS SECTION FOR USE OVERSEAS—

Examined at Witley (Overseas)

Date 11-4-19

Signed W. A. Chusheff 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 Thomas J. White

(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 ORIGINAL MEDICAL HISTORY SHEET

Surname WHITE Christian Name Thomas John

Examined { on 13th day of November 1917  
at Montreal, Canada.

Approved by W.C. Gandy  
President, S. M. S.  
Declared FIT by MEDICAL BOARD  
M. D. S. MOBILIZATION CENTRE, M. D. #4  
MONTREAL, P. Q.

Birthplace { City or Town Yarmouth,  
County N.S., Canada.

Date Nov 13 1917 Fit or Unfit "A" Fit for General Service EXAMINED FOR RE-ENGAGEMENT

Apparent age 23  
Trade or occupation Teamster.

Height 5 feet 8 Inches

Weight 141 lbs.

Chest measurement { Minimum 32 inches  
Maximum expansion 36 inches

Physical development Good

Small-pox Marks Nil

Vaccination Marks { Arm Right Left  
Number 1

When Vaccinated last Child

(a) Marks indicating congenital peculiarities or previous disease

Date	Result	VACCINATIONS
<u>DEC 1 1917</u>	<u>A.B. Vipond</u>	<u>M.O.</u>

(b) Slight defects but not sufficient to cause rejection

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>3/1/18</u>	<u>A.B. Vipond</u>	<u>M.O.</u>
<u>21/1/18</u>	<u>A.B. Vipond</u>	<u>M.O.</u>
<u>27/1/18</u>	<u>A.B. Vipond</u>	<u>M.O.</u>

Enlisted on 12th day of November 1917 at Montreal, Canada.

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<b>1st DEPOT BN. 1st QUEBEC REG'T.</b>			
Transferred to	<u>24 Bn</u>	<b>3080337</b>		

### EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT
<b>MONTREAL</b>	<b>MAR 19 1918</b>	<u>Nil</u>	<u>A2. All clear</u>

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



ET.

Rank

Name

WHITE, Thomas John  
If in perm. Corps,  
What Unit?

Reg'l No. 3080337

Unit 6th Dft 1st Bn QUE

Married or Single Married.

Place and Date of Enlistment Montreal, November 12th, 1917.

Place of Birth Yarmouth, N.S.

Name and Address, Next-of-Kin Mrs Hazel Agnes White,

89, Cherry St, Chelsea, Mass. U.S.A.

Relationship Wife

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason

Character

N/E. R.S. No 26466  
O R CANADA

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.				
		Arrived in England.		3-4-18	S/S SCANDINAVIAN
17.4.18	23 Res	T.O.S.	Rehott	4.4.18	DO 107
19.8.18	23 Res	S.O.S to 24 Bn	Pte DO	18.8.18	P.H.O. 231.
27.8.18	24 Bn	T.O.S from 23 Res	Pte Field	20.8.18	P.H.O. 87.
15.2.19	---	App'd Lt Col.	" "	22.1.19	DO 11
11.4.19	" "	Proc. to England	HC Havre	7.4.19	" 23
11.4.19	Junig Occ.	T.O.S from 24 Bn	" Witley	9.4.19	" 4
		Proc to Canada		10.5.19	64-F-137
10-5-19	J'W'NG	S.O.S CAN	W. TLY	10-5-19	DO 18.1

F.B. 103 CHECKED  
AUG. 1918





1916 NUMBER 3080337 RANK ~~Cpl~~ <sup>Sgt</sup> ~~Pl~~ <sup>Pl</sup> NAME WHITE Thomas John

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
	<i>Real Forward</i>								34 62		
Nov	R Pay	33		Cap				20	47 62		
				AR 2032 5 <sup>th</sup> ODB. 16-11-18	3 73						
				" 2453 " 26-11-18	13 06				30 83		
Dec	R Pay	34 10		Cap				20	44 93		
1919											
Jan	R Pay	34 10		Cap				20	59 03		
		101 20			16 79			60			
				AR 2034 5 <sup>th</sup> ODB 29-12-18	7 79				51 24		
Feb				" 4192 " 6/1/19	2 77				47 47		
				" 4770 " 27-1-19	3 73				43 74		
	R Pay	60 80		Cap	15 29			20	54 54		
	<i>Diff R Pay of Chgo 22/1/19 to 28/2/19 120 11 15/2/19 24/12</i>	1 90							56 44		
Mar	H/C Pay	35 65		AR 5268 " 12-3-19	3 73				52 71		
		68 35		Cap	19 02			20	68 36		
				AR 5830 " 24-3-19	3 73				64 63		
				" 6358 " 8-3-19	18 25				46 38		
				" 6617 " 13-3-19	3 65				42 73		
				" 7205 " 21-3-19	3 65				39 08		
		68 35			48 30			40 -			
Apr	H/C Pay	34 50						20			
				AR 551 Jwing COO 11-4-19	48 67				4 91		
May	H/C P	35 65		26 91 " " 29-4-19	9 73				4 82	P.P.C End.	
		34 50			58 40			20			

39.08  
14.50  
53.58  
49.67  
4.91

SOO Canada - Eff 10-5-19  
Dairies, list 64. @ R 10



DAT  
09.37

SHORT FORM.

War Service Badge

PROCEEDINGS ON DISCHARGE.

Class A, No. 273421

(Demobilization.)



1. No. 3080337

2. Rank. Lance Corporal

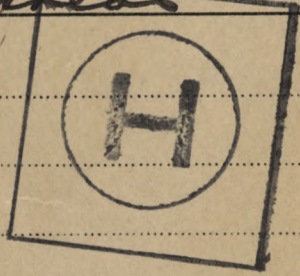
3. Name. White Thomas John.

4. Unit. 24th Gen. Cans.

5. Date of Discharge 18-5-19.

Place Montreal

6. Reason for Discharge Demobilization



7. Authority. D.D.#4 R.O. 1420 @D.O.Pt.II#147.

8. Proposed Residence after Discharge 118 Broadway, Chelsea Mass U.S.A.

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.? B 39 Montreal

MAY 18 1919

T. J. White

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Montreal

Date MAY 18 1919

Signature J. Fisher Lieutenant  
Officer in Charge, Discharge Section, Dispersal Station "F"  
(O. C. Discharging Unit.)



LIST OF DISCHARGE DOCUMENTS

Militia Form W. 28	Attestation Paper, Triplicate
Militia Form W. 188	or Particulars of Receipt
Militia Form W. 178 or A.F.B. 122	Field Conduct Sheet
Militia Form W. 51 or A.F.B. 103	Casualty Form
Militia Form W. 41	Last Pay Certificate
	Certificate that missing documents are unobtainable
Militia Form B. 318 or A.F.B. 178	Medical History Sheet
M.F.B. 227, A.F.B. 170 or A.F.A. 46	Proceedings of Medical Board
Militia Form B. 465	Dental History Sheet
M.F.W. 129 or D.M.S. 137B	Medical Report
Militia Form B. 283	Regimental Conduct Sheet
Militia Form B. 283A	Company Conduct Sheet

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate.....	Militia Form W, 28
or Particulars of Recruit.....	Militia Form W. 133
Field Conduct Sheet.....	Militia Form W. 178 or A.F.B. 122
Casualty Form.....	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate.....	Militia Form W. 44
Certificate that missing documents are unobtainable.....	
Medical History Sheet.....	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board.....	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet.....	Militia Form B. 465
Medical Report.....	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet.....	Militia Form B. 263
Company Conduct Sheet.....	Militia Form B. 263a

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

Group..... *B*

Checked by No. .... *11*

Date..... *8 MAY 1919*

Date of Enlistment 12/11/17

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

1<sup>st</sup> Apr. 1918

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

25 <sup>00</sup>			
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RATE OF ASSIGNMENT

20 <sup>00</sup>			
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## PARTICULARS OF SEPARATION ALLOWANCE

No. 3080337  
 Rank Pte. Promoted Reverted Discharge  
 Soldier's Name Thos John White  
 Battalion 1<sup>st</sup> Depot Bn 1<sup>st</sup> Que., Regt. 6<sup>th</sup> Dfl.  
 Eeneficiary M<sup>rs</sup> Hazel Agnes White  
 Relationship Wife  
 Address 89 Cherry Street  
Chelsea, Mass, U.S.A.

## PARTICULARS OF ASSIGNMENT

Name  
 Address  
 Change of Address  
 1  
 2 MRS. HAZEL AGNES WHITE,  
89 CHERRY ST.,  
CHELSEA, MASS., U.S.A. 20 25 45.00  
 3 % 3080337 PTE THOS. JOHN WHITE  
 4 FORTY FIVE DOLLARS

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<u>Apr. 1918</u>	<u>4-11990</u>	<u>25</u>	<u>20</u>	<u>45</u>	<u>Cancelled by CCO. 29<sup>th</sup> 48. G. ady C.O. already issued for SA</u> <u>See original ledger sheet in current ledger</u>

AUTHORITY  
 FOR  
 NEW ACCT.

M. F. W. 128.  
 400M. 5-17-1772 39-1141  
 L. L. 22220-M. & D. 7993.

AUTHORITY  
 FOR  
 NEW ACCT. V.P.  
M. D. L. B. L. ...  
M. Shipley 24/4/18.



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

12=11=17

1<sup>st</sup> Apr 1918

OVERSEAS CONTINGENTS

### RATE OF SEPARATION ALLOWANCE

90 <sup>00</sup>	25	30	
	1-12-17		

### RATE OF ASSIGNMENT

20 <sup>00</sup>			
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1134

W 10779

### PARTICULARS OF SEPARATION ALLOWANCE

No. **30 80 337**  
 Rank **Pte** Promoted Reverted Discharge  
 Soldier's Name **Thomas John White**  
 Battalion **1<sup>st</sup> Depot Bn 1<sup>st</sup> Quebec Regt**  
 Beneficiary **Mrs Hazel Agnes White**  
 Relationship **Wife**  
 Address **89 Cherry St Chelsea Mass. U.S.A.**  
**M. 7. N. 2554 Renalds. 23<sup>1</sup>/<sub>2</sub>**

### PARTICULARS OF ASSIGNMENT

Name **Mrs Hazel Agnes White**  
 Address **89 Cherry St. Chelsea Mass. USA**  
 ① **118 Broadway** Change of Address  
 1  
 2  
 3  
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total
1917				
Dec	53600	37		37
Jan 18	64019	25		25
				<u>62 00</u>
Apr.	2978	75		75
"	11790	25	20	45
"	1191		20	20
May	2179	25	20	45
June	16937	25	20	45
July	28383	25	20	45
Aug.	41234	25	20	45
Sept.	55477	25	20	45
Oct	70541	25	20	45
Nov.	85113	25	20	45
Dec.	92813	45	20	65
Jan 1919	115626	30	20	50
Feb	128527	30	20	50
Mar	140210	30	20	50
Apr	8596	30	20	50
May	16001	30	20	50
June		<u>507</u>	<u>280</u>	<u>787</u>

File 019259-2-30.

**R** - mailed 19<sup>12</sup> ① MRO 16687 alteration Renalds 23<sup>1</sup>/<sub>2</sub>  
 S.A. here re-opened as per letter from PM in Det. this Soldier proceeded overseas with Draft No 6. on 21-2-18. therefor this allowance should be paid  
 3. mailed 11<sup>4</sup>/<sub>18</sub>. here from 1<sup>st</sup> Regt. state when News Roll for the draft came for A.P.  
 Cancelled by CLO. 29<sup>18</sup>. Camp No 35-16  
 LP 4690. 29<sup>18</sup>. mailed 30.4.18

**PAYMASTER PAYING**  
 From 1-2-18  
 To.....  
 M & # 4

A/c Closed 31/5/19.  
 Ret'd per... Olympic  
 Date 16/5/19. M.F.W 18<sup>1</sup>/<sub>19</sub> M.D. 4.  
 Closed 26/5/19. M.F.W 18<sup>1</sup>/<sub>19</sub> M.D. 4.  
 M.D. 4. 85135 Destroy  
 H.

Authority for  
 M.A. 4. B. 1  
 M Shipley 24<sup>4</sup>/<sub>18</sub>  
 M. F. W. 128  
 4001-6-17-1772-33-1141  
 L. L. 25220-M. & D. 1863.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

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PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
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M. F. W. 128  
400M-6-17-1772-39-141  
L. L. 23320-M. & D. 7583.





