

ORIGINAL

931902

ATTESTATION PAPER.

No. 2 CONSTRUCTION, D.L. C.E.F.

No. ORIGINAL Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

- 1. What is your surname?..... **Wigfall**
- 1a. What are your Christian names?..... **Jessie**
- 1b. What is your present address?..... **Defroit Mich.**
- 2. In what Town, Township or Parish, and in what Country were you born?..... **Utah S. C. U.S.A.**
- 3. What is the name of your next-of-kin?..... **Sarah Myzike**
- 4. What is the address of your next-of-kin?..... **Edetown S.C. U.S.A.**
- 4a. What is the relationship of your next-of-kin?..... **Mother**
- 5. What is the date of your birth?..... **~~twixt~~ August 15th, 1892**
- 6. What is your Trade or Calling?..... **Fiseman**
- 7. Are you married?..... **Yes** *NO*
- 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?..... **No.**  
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**

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, **Jessie Wigfall**, 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.

Date..... **January 3rd** 191**7** *Jessie Wigfall* (Signature of Recruit)  
*Curry Stuphield* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, **Jessie Wigfall**, 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..... **January 3rd** 19**17** *Jessie Wigfall* (Signature of Recruit)  
*Curry Stuphield* (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 **Windsor Ont.** this **3rd** day of **January** 191**7**  
*James G. Shyne* (Signature of Justice)



Description of Jessie Wigfall on Enlistment.

Apparent Age 24 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. 7 ins.

Both eyes 20/20

Chest measurement { Girth when fully expanded ..... 35-1/2  
 Range of expansion ..... 3 ins.

Complexion Dark

Eyes Dark

Hair Black

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

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 January 3rd ..... 1917

Place Windsor Ont.

*[Handwritten Signature]*  
 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.

Jessie Wigfall ..... 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.

*[Handwritten Signature]* ..... (Signature of Officer)  
 Lt. Col.  
 B. Comd'g No. 2 Construction Battalion, C.E.F.

Date January 3d ..... 1917



REGIMENTAL DOCUMENTS

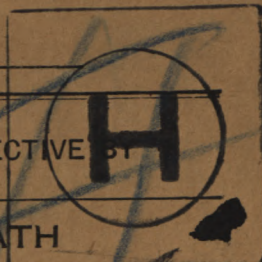
NAME WIGFALL, JESSIE

Pte

REGT. NO. 931.702

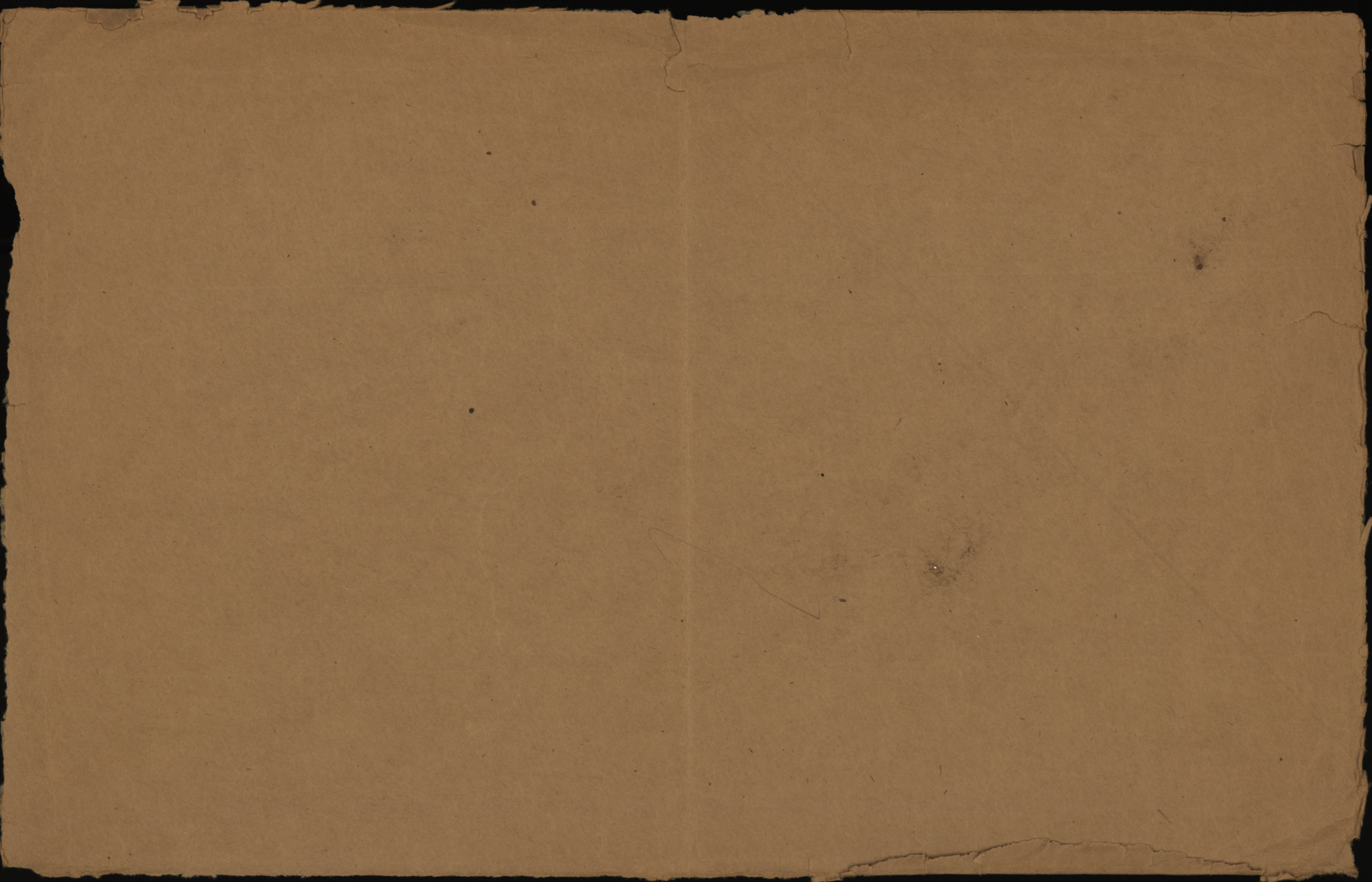
UNIT 2<sup>nd</sup> Const. Bn

H. Q. FILE NO.



CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
<u>2</u> ATTESTATION PAPER (M.F.W. 23, 133, or 51)	<u>10.6.19. JPH</u>		<u>(M)</u>		<b>DEATH</b>
<u>1</u> CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
<u>1</u> TRAINING HISTORY SHEET (M.F.W. 113)					
<u>2</u> FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
<u>1</u> REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
<u>1</u> COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
<u>3</u> MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					<b>DISCHARGE</b>
<u>1</u> DENTAL HISTORY SHEET (M.F.B. 465)					Category
<u>1</u> MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					<u>Demo</u>
<u>1</u> MEDICAL EXAMINATION (M.F.W. 129)					
<u>1</u> TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
<u>1</u> PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
<u>1</u> DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					<b>DESERTION</b>
<u>1</u> LAST PAY CERTIFICATE (M.F.W. 44)					
<u>1</u> PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
<u>1</u> PARTICULARS OF CHARACTER (A.F.W. 3226)			<u>20493</u>		
<u>1</u> COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					<u>3</u>
<u>1</u> <u>General</u>					<u>12-27</u>
<u>3</u> <u>Mis</u>					<u>12-27</u>
<u>1</u> <u>lewd</u>					<u>7 27</u>
<u>1</u> <u>lewd</u>					<u>3</u>







931702

I.D. number

No. d'identification

WIGFALL

Surname

Nom de famille

JESSIE

Given names

Prénoms

**PERSONNEL RECORDS CENTRE**  
**CENTRE DES DOCUMENTS DU**  
**PERSONNEL**

**PERSONNEL RECORDS ENVELOPE**  
**ENVELOPPE DES DOSSIERS DU PERSONNEL**

Location

Lieu

20493

10343

**« CONTENTS CONFIDENTIAL »**  
**« CONTENU CONFIDENTIEL »**







com Number 931702. Rank ~~Pte.~~ *Spr.* **B**

*Wig* Surname WIGFALL.

Christian Name *Jessie*.

Units *CORCE* Theatre of War *France*.

Date of Service *17-5-17*.

Remarks

Latest Address *n.a.* *9.3.21.*

*Gen. Del.*

Roll No. *B. Page 20929* *Windsor*

10m.-8-21."

*Out.*  
*14.3.21*



107

50



NAME

*Wigfall J.*

REGT'L No.

*931702*

RANK AND CORPS

*plie*

*2 con*

H. Q. FILE NO. 649.

CABLE

NO.

DATE

NATURE OF CASUALTY

FOLLOWS

No.

FOLLOWS



LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
a63 <sup>③</sup>	Jura Hosp La Joux (Jura)	4-11-17	Influenza
a71 <sup>③</sup>	Discharged	16-11-17	"
a391	13 <sup>e</sup> at Rouen	3-12-18	736
a402	51 <sup>e</sup> Gen C. Caples	15-12-18	"
B435	Leau. Spec. Witley	29-1-19	42.
B440-2	Discharged	3-2-19	42.



REG. NO.

931702

NAME

(SURNAME FIRST)

Wigbell, J.

RANK

Olt

CORPS

No. 2, Con. Bult-

AGE

24

SERVICE

1/12

NAME OF HOSPITAL

Military

PLACE

Rendon

DATE OF ADMISSION

12. 1. 14.

DISEASE

Gonorrhoea

DISCHARGE

1. 2. 14.

OPERATION

DISCHARGED TO DUTY

Yes

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD







Name **WIGFALL.****JESSE**

Rank

PTE

Reg. No. **931702**Unit **2nd. CONSTR BN.**Next of Kin **U.S.A.**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
<b>4-11-17.</b>	<b>JURA. H. LA JOUX (JURA)</b>		<b>INFLUENZA.</b>	<b>A63</b>		
	<b>HA 16070.</b>					
<b>15-11-17</b>	<b>Discharged</b>		<b>190</b>	<b>A 71</b>		
	<b>16426.</b>					















SURNAME.

Wigfall

K" T CARD NO.

CHRISTIAN NAMES

Jessie

S.O.S. 20-5-19 T. <sup>4</sup>  
FOLL. <sup>100</sup>  
S.O. 149 of 29-5-19 "100"

REGL. NO.

931702.

RANK

Pte.

UNIT

No. 2 Construction Bn.

FORMER CORPS

nil

NEXT OF KIN.

NAMES IN FULL

Muzzike, Mrs. Sarah

RELATIONSHIP TO SOLDIER

Mother

ADDRESS

Edgeton, N.b., U.S.A.

CHANGE OF ADDRESS

COUNTRY OF BIRTH

U.S.A. Utah, ...

DATE

Aug. 15<sup>th</sup> 1893.

PLACE OF ATTESTATION

Windsor, Ont.

DATE

Jan. 3<sup>rd</sup> 1917.

A/C. 25-5-19 <sup>332</sup>/<sub>38</sub> Pte.



*From Halifax per S.S. "Southland" 28/3/17.*

MARRIED

SINGLE *Yes.*

WIDOWER

TRADE OR CALLING

*Fireman*

RELIGION

*Baptist*

DESCRIPTION.

APPARENT AGE

*24* YEARS

MONTHS

HEIGHT

*5* FEET

*7* INCHES

CHEST MEASUREMENT

*35½* INCHES

EXPANSION

*3* INCHES

COMPLEXION

*Dark*

EYES

*Dark*

HAIR

*Black*

DISTINGUISHING MARKS

*nil*

MEDICAL EXAMINATION.

PLACE

*Windsor, Ont*

DATE

*Jan. 3rd 1917.*

*Present address: Detroit, Mich., U.S.A.*



No. 931702 RANK *Pte*

NAME *Wigfall J.*

T. O. S. *3-1-17*

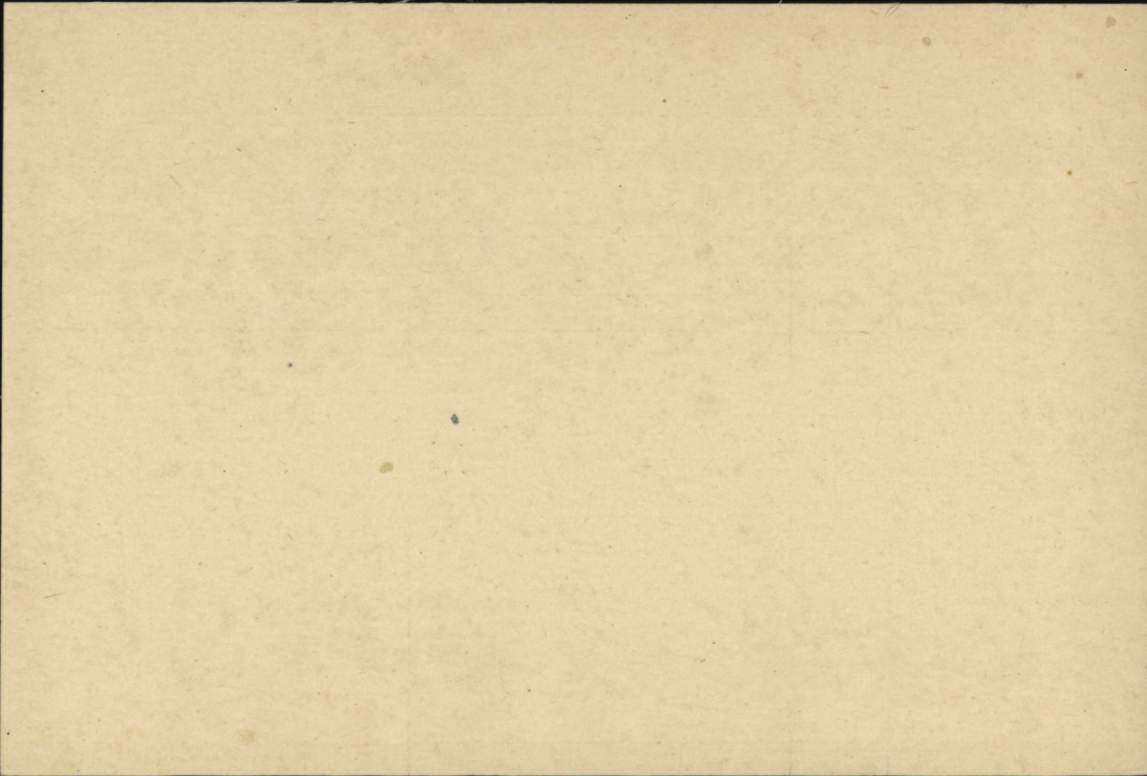
UNIT *No 2. Construction Battalion*

D. O. S. *8-1-17.*

M. D. *6*

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
<i>1917 Jan 3</i>	<i>1917 Jan 31</i>	<i>✓</i>		
	<i>Feb.</i>	<i>✓</i>		
	<i>Mar.</i>	<i>✓</i>		







SURNAME

CHRISTIAN NAME OR NAMES

REG. No.

WIGFALL.

J.

931702.

RANK  
Pte.

UNIT

N.S. 28on.

TROOP

BATTY.

HOSPITAL

DATE OF ADMISSION

Jura Hospt. La Joux Jura.

4-11-17.

1. 1 Stat. Rouen.

HOSP. 3.12.18.

2. St. Germain Hospital

HOSP. 15.12.18

3. Can Sp. Wisley

HOSP. 29.1.19

4.

HOSP.

DIAGNOSIS

Influ'za.

*v. s. c. h.*  
*V.D.S.C.*

2.

3.

DISPOSITION

C.L. 15-11-17. A63(3)

DATE

*D 20 15-11-17*

REMARKS

*Disch 3.2.19*

*24-11-17 241-3.*  
*9.12.18 2391.*  
*21.12.18 A402.*  
*11.2.19 2435.*  
*10.2.19 B4402*

A.M.D. 2 DEPT.

Beh. of D.G.M.S. O.M.F.C. London



EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

2.

3.

4.

5.

6.

7.



CANADIAN SPECIAL HOSPITAL,  
WITLEY, SURREY.

To *M. O.*

*2<sup>nd</sup> Com Bn*

*28-1-* 191*9*

This is to certify that I have this day examined the marginally named and find him free from infective Venereal Disease, skin, vermin, and other infectious diseases.

*No 931702*

*Pte Wiggall*

*2<sup>nd</sup> Com Bn*

*C. S. Tomes*

C.A.M.C.,

Medical Officer,

Canadian Special Hospital.



CANADIAN SPECIAL HOSPITAL  
WILHELM, SURREY

.....

The is to certify that I have this day examined the  
patient named and find him free from infectious  
Venereal Disease, skin venereal and other infectious

.....  
.....  
.....

.....

.....

.....

.....

.....



DUPLICATE

H.Q. 51-21-23-53

To be made out in duplicate.

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.

No. 2 CONSTRUCTION, B'n. C.E.F.

(1) Name of Overseas Unit which Soldier joins.....

(2) Regimental Number 931702.....

(3) Full Name of Soldier Josie Wyfall.....

(4) Place of Birth Utah S.C. U.S.A.....

(5) Are you married, or not? No.....

(6) If married, state,  
(a) Full name of your wife.....

(b) Present Postal Address.....

(7) Are you a widower? No.....

(8) Have you any children? No.....

If so, give number of boys and girls.....

Also their names and ages.....



(9) Is your Father alive? *No*

If so, state name and address

(10) Is your Mother alive? *Yes*

If so, state name and address *Mrs Sarah Myzick Caldwell S.C.*

(11) If your Mother is a widow *No*

Are you her sole support, or not?

(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.

(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.

(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.

(15) Are you insured? *No*

If so, in what Company?

Have you made arrangements for payment of your Insurance premium?

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

Date *Jan 9/17*

*D. H. Smithland* LT. COL.  
C. Comd'g No. 2 Con Officer Commanding. *T. E. E.*



**MEDICAL HISTORY SHEET**

931702

Surname Wigfall Christian Name Jessie

Examined { on 3rd day of January 1917  
 at Windsor Ont.  
 Birthplace { City or Town Utach, S. C.  
 County U. S. A.

Approved by D. Murray  
 Rank Capt. U.S.A.

Apparent age 24 yrs  
 Trade or occupation Fireman  
 Height 5 feet 7 Inches  
 Weight 157 lbs.  
 Chest measurement { Minimum 32-1/2 inches  
 Maximum expansion 3 inches  
 Physical development fit  
 Small-pox Marks none

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

Vaccination Marks { Arm Right Left  
 Number 2  
 When Vaccinated last 1916  
 (a) Marks indicating congenital peculiarities or previous disease none

Date	Result	VACCINATIONS
<u>11/2/17</u>	<u>L.S.R.</u>	<u>S.S. Shepley</u>
		M.O.
		M.O.
		M.O.

(b) Slight defects but not sufficient to cause rejection  
Both eyes 20/20

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>26/2/17</u>	<u>L.S.R.</u>	<u>S.S. Shepley</u>
<u>16/3/17</u>	<u>L.S.R.</u>	<u>Dau Murray</u>
<u>20/3/17</u>	<u>L.S.R.</u>	<u>Dau Murray</u>
		M.O.
		M.O.
		M.O.

Enlisted on 3rd day of January 1917 at Windsor Ont.

	CORPS	REG'L NUMBER	HABITS	DATE
Joined on enlistment	<u>A. B. Co. 1st Batt. C. &amp; F.</u>	<u>931702</u>		<u>3rd January 1917</u>
Transferred to				

**EXAMINED OR DISCHARGED BY A MEDICAL BOARD**

STATION	DATE	DISEASE	RESULT
<u>Windsor, Ont.</u> <u>J. B. Buisick</u> Major, A. M. C.	<u>2/3/17</u>	<u>on enlistment</u>	<u>Fit</u>
		<u>Murray</u> Capt., A. M. C.	<u>D. L. Stewart</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.



Surname *Myford* Christian Name *Jesse*

STATION	Date of Arrival at the Station	DATES OF						DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer
		Admission into Hospital			Discharge from Hospital						
		Day	Month	Year	Day	Month	Year				
CANADIAN SPECIAL HOSPITAL WITLEY, SURREY		28	1	19	3	19	V.D.	7	For detailed treatment See Temporary M. H.S. Stoppage as per date	<i>W. B. ...</i> CAPT. ...	



DUPLICATE  
**MEDICAL HISTORY SHEET**

931702

Surname Wigfall Christian Name Jessie

Examined { on 3rd day of January 1917  
at Windsor Ont.

Approved by Dau Murray  
Rank Capt M.O.

Birthplace { City or Town Utach, S. C.  
County U. S. A.

Apparent age 24 yrs

Trade or occupation Fireman

Height 5 feet 7 Inches

Weight 157 lbs.

Chest measurement { Minimum 32-1/2 inches  
Maximum expansion 3 inches

Physical development fit

Small-pox Marks none

Vaccination Marks { Arm Right Left  
Number 2

When Vaccinated last 1916

(a) Marks indicating congenital peculiarities or previous disease none

(b) Slight defects but not sufficient to cause rejection  
Both eyes 20/20

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

Date	Result	VACCINATIONS
<u>17/2/17</u>	<u>L.G.H.</u>	<u>S.S. Shepley</u>

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>26/2/17</u>	<u>L.G.H.</u>	<u>S.S. Shepley</u>
<u>16/2/17</u>	<u>L.G.H.</u>	<u>Dau Murray</u>
<u>2/3/17</u>	<u>L.G.H.</u>	<u>Dau Murray</u>

Enlisted on 3rd day of January 1917 at Windsor Ont.

	CORPS	REG'L NUMBER	HABITS	DATE
Joined on enlistment	<u>No 2 Cons.</u>	<u>931702</u>		<u>3rd January 1917</u>
Transferred to				

**EXAMINED OR DISCHARGED BY A MEDICAL BOARD**

STATION	DATE	DISEASE	RESULT
<u>Windsor, Ont.</u>	<u>2/3/17</u>	<u>on enlistment</u>	<u>Fit</u>
<u>S.B. Brinkley</u> Major, A. M. C.		<u>Dau Murray</u> Serg. A. M. C.	<u>D.L. Stewart</u> Capt.

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.



TRIAL HISTORY

Surname *Wegfall* Christian Name *Levise*

STATION	Date of Arrival at the Station	DATES OF						DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer
		Admission into Hospital			Discharge from Hospital						
		Day	Month	Year	Day	Month	Year				
<i>London</i>		<i>12</i>	<i>1</i>	<i>17</i>	<i>1</i>	<i>2</i>	<i>17</i>	<i>Gonorrhoea</i>	<i>23</i>	<i>mcd. Recovered</i>	<i>James Woodman</i>



# CANADIAN ARMY DENTAL CORPS, O.M.F.C. DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

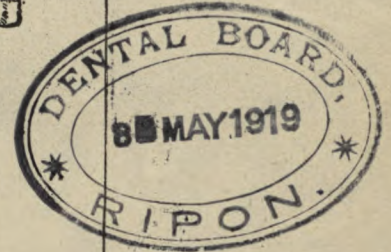
### DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block Letters) WAGFALL J.

REGIMENT NSRD RANK PC No. 931702

Date of Examination in England 8-5-19 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
2. EXTRACTIONS —
3. CROWNS —
4. DENTURES
  - (a) Full Upper —
  - (b) Part Upper —
  - (c) Full Lower —
  - (d) Part Lower —

CONTENTS COPIED  
 C. A. D. C., M. D. No. 1.

2024

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.)

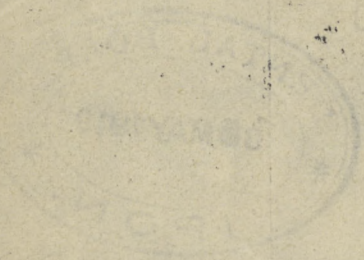
- (a) In Canada —
- (b) In England yes
- (c) In France —

Signature of Dental Officer K. Berry Capt



RECEIVED

1875



Handwritten text, possibly a signature or address, in the center of the page.

W. A. W. W.

1875



# 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. 931702 Rank Plt Surname WIGFALL  
 (Given name in full)  
 Unit or Corps U.S.R.A. Birthplace Jessie W. S.C. U.S.A.

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

**I. GENERAL DESCRIPTION:**

Physique Good Weight 137 lbs. Height 5-7 ft. Colour of Eyes Brown  
 Nutrition Good  
 Pulse 72  
 Condition of arteries Normal  
 Vision Rt. 6/6 Left 6/6  
 Hearing (conversational voice) Rt. 21 ft.  
 Left 21 ft.

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

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 Yes 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.**

V. N. S. Nov. 1918



# EXAMINATIONS

## THIS SECTION FOR USE OVERSEAS—

Examined at London (Overseas)

Date 5, 15, 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 a Medical Board.)

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



**Casualty Form—Active Service.**

Regiment or Corps No 2 Bn. Leinster Coy  
 Rank Private Surname Wiegall Christian Name Jesse  
 Religion ..... Age on Enlistment ..... years ..... months  
 Enlisted (a) ..... Terms of Service (a) ..... Service reckons from (a) .....  
 Date of promotion to present rank ..... Date of appointment to lance rank .....  
 Extended { ..... } Re-engaged { ..... } Qualification (b) .....  
 or Corps Trade and Rate .....  
 Occupation ..... Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		Embarked ... Disembarked...			
<u>24/10/18</u>	<u>24/10/18</u>	<u>14 days SP No 1. 18-10-18 for</u> <u>W.L. from 10 pm 13-10-18 to 8 am</u> <u>14/10/18. 2 days 1 day pay by R.W.</u>			<u>B2069</u> <u>100639</u> <u>Nov 1918</u>
<u>28/11/18.</u>	<u>O.C.</u>	<u>28 days SP. A.W.L. from 22.00</u> <u>24/11/18. till 08<sup>30</sup> 27-11-18.</u> <u>2 days 3 days Pay. R.W.</u>	<u>Field.</u>	<u>27-11-18.</u>	<u>B2069. P.68</u>
<u>3.12.18.</u>	<u>1<sup>st</sup> Stat Hosp.</u>	<u>"D.S.S." admitted to no 1. Stat Hosp.</u>		<u>3.12.18</u>	<u>M 9165</u>
<u>7/19</u>	<u>no 1 Stat Hosp</u>	<u>2 days Field allowance in place</u> <u>under stoppage of pay at rate of 50d</u> <u>per diem while in Hosp from 3<sup>22</sup>/<sub>4</sub> to 14<sup>22</sup>/<sub>4</sub> (12 dy)</u>			<u>A 501643/9197</u>

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.  
 (b) Signaller, Shoeing-Smith, & (17591.) Wt. W 1887-P 1124. 1,000,000. 6/18. D & S. Form B/103. (E. 1256.)



2383



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				
27-1-19	S/Quartrmstr	Lafet Field allowance replaced under stoppage & pay at 50			a to 164 3/10969
		of the deer while on ship from 15.12.18 to 27.1.19 (44 days)			1/2 29/1919
27-1-19	S/Quartrmstr	V.O.S. Lark		27-1-19	48259/26217
12-2-19	A.A.G.	DDA bbb (Col) on trans to ban to record.			Cdy Sect G.M.2 3rd Ech P.M. 0.3
"	"	List		12-2-19	d/ 12-2-19
"	"	to ban record List on trans from bbb (Col)		13-2-19	Cdy Sect G.M.2 3rd Ech P.M. 0.12 d/ 11-2-19
27-1-19	S/Gen	Invalided sick to England, posted to		27-1-19	A.T. Golden Eagle w. 3083. Ref K. a. 50032 d/ 15-2-19
28-2-19	N.S.R.D.	J.O.S. from 2nd boat			Liut for Lieut. Col. A.A. G. Can Sec. 1st of 3 Ech.
					P. 5 28
					R. 2111
					for 1/2 records on 28
5-2-19	O.C. 6th Res.	J.O.S. on posting from Seafood		3-2-19	P.M. 17 B.O. 27
31-3-19	O.C. 6th Res.	E.O.R.D. Order No 27. is cancelled	Seafood	5-2-19	for P.M. 72 Wymabun



*No. 1 B. Class "A"*

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

*War Service Badge Class "A" No. 1170*  
M. F. W. 54. (A. F. 3.)  
350M.—5-16  
H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps. *#2 Construction Battalion, C E F*

Regimental No. *931702* Rank *Private* Name *Jessie Wigfall*  
C. E. F.

Enlisted (a) *3/1/17* Terms of Service (a) *Duration of War* Service reckons from (a) *3/1/17*

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) *Fireman*

CERTIFIED COPY  
6 JUN 1917  
RAIL RECORDS, LONDON.

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>Embarked Canada</i>	<i>Halifax N.S</i>	<i>25/3/17</i>	
		<i>Disembarked England</i>	<i>Liverpool</i>	<i>17/4/17</i>	
	<i>OO#2 Causton</i>	<i>Proceeded overseas</i>	<i>Seaford</i>	<i>MAY 17 1917</i>	<i>Pt 2 20# Gayer Capt for Capt + Staff</i>
<i>21.5.17.</i>	<i>O.C.</i>	<i>Landed in France 17-5-17 N.R.</i>			
		<i>Forfeits 5 days pay for Making away with Iron Rations</i>	<i>7ld</i>	<i>21.5.17</i>	<i>B2069 P. 2. 109 25/2/17</i>
<i>2.8.17</i>	<i>O.C.</i>	<i>28 Days F.P.#1 for while a defaulter; Breaking out of Camp; Out of bounds at 10 am 29.7.17 till apprehended at 7 am 30.7.17 Forfeits 2 days pay by R.O.</i>	<i>7ld.</i>	<i>30-7-17</i>	<i>B2069 P. 131 13/10/17</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. [P.T.O.]



Army Form B. 213, Army Form A. 36, or in other official documents.

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				
2-8-17	o.c.	10 Days #2 F.P. for Tralingsburg	Yield	24.7.17	B 2069 P 131 d/13-10-17
10-11-17	o.c.	adm to Java Hosp.		4-11-17	B213
4-11-17	Java Hosp	Influenza adm		4-11-17	W 3034/B 4146
16-11-17	Java Hosp	" Discharged		15-11-17	" - 5074
17-11-17	o.c.	Repa unit from hosp		16-11-17	B 213
27-12-17	o.c.	10 days F.P. N° 2 for awf late from 9 am 23/12/17 until 1 pm 24/12/17. (Forfeit 2 days pay under RW)		24/12/17	B 2069. P 2952 d/9/1/18
12-1-18	occunit	on command to Alcon Det. C 7 Corps		30.12.17	B 213
30/10/17	o.c. Java	Forfeit 70 cents per diem whilst hospital in hosp from 4/6/17 to 2/7/17 (29 days)			P 295. 8 d/13/2/18 A 701643
31/1/18	occunit	Sentenced to 5 days F.P. N° 2 for when on ops. Breaking out of camp after lights out. (2) gambling.		26/1/18	B 2069 P 295. 9 d/16/2/18
25.18	54.6.6.7.6	5 Days F.P. No. 2. for work absent until 12.15 PM. 24.4.18. 2 1/4 hrs.		25.4.18	B. 2069. P 27 d/10.5.18.
27-6-1918	o.c. 42 csc.	10 days F.P. No. 2. 25-6-1918 for (1) Leaving work without permission from 6.30 am to 10.30 am 23-6-1918 (2) Disobedience of Orders. Struck in front of without a pass		23-6-18	B 2069 P 20 39 7 July, 1918



# SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103—  
Part I.

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

Nothing to be written in this margin.

W1889—PP 1150 1M 5/18 G.W.P. Co (3490)

(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)	(11) Engagement (c)
(12) Service reckons from (date)	(13) Special conditions (if any) of enlistment (d)
(14) Any subsequent variations (if any) } of conditions of service }	(Authority) (date)

Initials and Rank of  
an Officer.

(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)	(Place)
(19) Pivotal-man (f)	(Date)
(20) Qualifications (g)	or (21) Corps trade and rate
(22) Extended {	(23) Re-engaged {
(24) Miscellaneous entries:—	

(Signature of  
Posting Officer

**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.



931702 Wigfall Jennie

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received.	Authority of Part II. of Orders	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 <sup>by</sup> invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer
7-2-19	N.S.R.D.	29	T.O.S. FROM <sup>admitted to</sup> <i>C. Coy</i> DISCHARGED FROM <i>Hosp</i>	<i>Ripon</i>	29-1-19	
3-4-19.	N.S.R.D.	76	DISCHARGED FROM <i>Hosp</i> POSTED TO <i>C. Coy</i>	<i>Ripon</i>	1-4-19	

10 MAY 1919 N.S.R.D. S.O.S. to Mil. Dist. No. *1* RHYL RLPON P. IID.O. *108*

*R.E. Apperley*  
LIEUT.  
OFFICER i/c RECORDS,  
NOVA SCOTIA REGTL. DEPOT

*12/5/19* O.C.M.D.C.W.I. T.O.S. For return to Canada, Rhyl *10/5/19* D.O. No *111*

*14/5/19* S.O.S. on Proceeding to C.E.F. Can. Rhyl *14/5* D.O. No *113*

*J.E. Hylie* Lieut.  
Officer i/c W.D.O, for O.C.M.D.C.W.I.

MAY 14 1919 EMBARKED FOR CANADA

To S No. 1 Dist Depot  
Displ. Stn. K. 14-5-19  
SOS Dispersed  
27, 5, 19 D.O, No, 149

*J.E. Hylie*  
O.C. Dispersal Area Sta-K

Nothing to be written in this margin.



# CANADIAN EXPEDITIONARY FORCE

## DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 93/702. (Rank) Private

Name (in full) Jessie Wigfall enlisted in  
the 2<sup>nd</sup> Construction Battalion

CANADIAN EXPEDITIONARY FORCE at Windsor, Ont. on the 3<sup>rd</sup>  
day of January 1917

HE served in France with 54<sup>th</sup> Coy. C.F.C.

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 26 yrs. 9 mths.

Height 5 ft. 4 ins.

Complexion Dark

Eyes Dark

Hair Black

Marks or Scars

nil.

Signature of Soldier

Issuing Officer

Date of Discharge

DISCHARGE SECTION  
MAY 27 1919  
No. 1 District Depot

Rank

gn O.C. Dispersal Area Sta. K.

Date \_\_\_\_\_ 19\_\_\_\_

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



CANADIAN EXPEDITIONARY FORCE  
DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 221 500 (Rank) Private

Name (in full) W. J. ... enlisted in the  
Canadian Expeditionary Force on the 15 day of ... 19...

HE served in ... 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>...</u> Height <u>...</u> Complexion <u>...</u> Eyes <u>...</u> Hair <u>...</u>	Marks or Scars <u>...</u>
----------------------------------------------------------------------------------------------------	---------------------------

Signature of Soldier ...

Date of Discharge ...

Issuing Officer ...

Rank ...

Date ...

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward same to the Secretary, Military Council, Ottawa, Canada.



J.P. Rank **No2. Const Bn.** Name **WIGFALL, Jessé** Reg'l No. **931702.**  
 Unit **No2. Const Bn.** If in perm. Corps **What Unit?** Married or Single **Single.**  
 Place and Date of Enlistment **Windsor. Ont. 3rd Jan. 1917.** Place of Birth **Utah. S.C. U.S.A.**  
 Name and Address, Next-of-Kin **Sarah Myzike. Edertown. S.C...U.S.A.** Relationship **Mother.**

Assigned Pay Monthly \$ Payable to

Separation Allowance \$ Payable to

Relationship

R.B. No. **10518**

File R.L.

Relationship

Category **CAN**

Discharge, Date and Place

Reason

Character

H. W. V., Ld.-9546-16.

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 via J.F. Southland		7.4.17	Arrived
14-6-17	2 <sup>nd</sup> CEC	Arrived in France	Field	17.5.17	P 115
14-4-17	1 <sup>st</sup> Lt. 2 <sup>nd</sup> Con	Tura Hospital La Tour	Re Tura	4.11.17	cl. 53. Influenza.
23-11-17	"	Field	"	18.11.17	cl. 71
12.7.19	2 <sup>nd</sup> CEC	SOS & transferred to Can Record hist	Field	12.7.19	cl. 3 (6. Ph. Do. 12.14.2.19)
11-2-19	2 <sup>nd</sup> CEC	forfeit field Allow + is placed under stoppage pay at rate 50% pdem while in Hosp 15-12-18 to 27-1-19	Field		- 2
7.2.19	1 <sup>st</sup> Lt. 2 <sup>nd</sup> Con	TOS on posting from EORD.	Repton	29.1.19	Do 29
5-2-19	6 <sup>th</sup> Res. Can.	TOS on posting from EORD.	" Seaford	3-2-19	" 27
28-2-19	Reenlist	SOS on being mov'd to England & posted to General Depot	" Field	27-1-19	" 16

A.F.B. 103 CHECKED  
30 MAY 1917

Cancelled by 6<sup>th</sup> Res PTC  
72 of 31-5-19

N.S. ...  
Gen Depot



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>Serial 75-K-35-A 14-5-19</i>					
15-5-19	1 MDC Wing	SOS from NSRD <del>Sister</del>	Himmel Park	11-5-19	REF NO: 114.
15-5-19	— " —	SOS to CEF Canada	— " —	14-5-19	— 114.
10-5-19	NSRD	SOS on trans to MDC W6		10-5-19	— 108.



Pte Wryfull J.  
931702

V.D.S. CLINIC,  
Hut 34, Camp 38,  
R I P O N, Yorks.

The marginally named other rank has received a full Army course of treatment for V.D.S. and is free from syphilitic lesions. He may be permitted to proceed to Canada, where he should be placed under observation, and given treatment, if necessary.

Chas P Tennant

Major, C.A.M.C.  
Officer i/c V.D.S. Clinic



PA 1700

1700 PA

1700 PA

The following is a list of the names of the persons who have been

admitted to the office of the Secretary of the State since the

1st of January 1870 to the 1st of January 1871.

The names are arranged in alphabetical order.

The names of the persons who have been admitted to the office

of the Secretary of the State since the 1st of January 1870

to the 1st of January 1871 are as follows:

1. A. B. C.

2. D. E. F.

3. G. H. I.

Geo. W. Jones

1700



53800-17

FORM to be used (1) when a Soldier is placed under Medical Surveillance for Venereal Disease. (2) for furnishing information between Medical Officers when cases are transferred from one Station to another.

Corps	Company	Regimental No.	Rank and Name	* Date on which case originally came under treatment
2nd Gen Bn.		931702	Pvt. Wiegall, J.	25-1-19
6-2-19 N+Hg 13-2-19 " " 20-2-19 " " 27-2-19 Hg only 5-3-19 wash gam 10-3-19 obs 2pm				REMARKS

To 66

Station and date 29/1/19.

Chilton

The Officer who places the man under surveillance will prepare this form in duplicate. One copy will be forwarded to the Officer Commanding, and the other to the Medical Officer who will have the surveillance of the man. When any circumstances arise likely to interfere with the regular attendance of men on the continued treatment list, such as transfer to another station, musketry courses, imprisonment, and especially furlough, their Commanding Officer will apprise the Medical Officer of the fact.

\* When cases are transferred Medical Officers will be careful to insert the date on which the case was first placed on a syphilis register, irrespective of the number of registers the case may have passed through.















ASSIGNED PAY	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.	NAME: <b>WIGFALL Jesse</b>
EFFECTIVE DATE: <b>1 April 1918.</b>		EFFECTIVE DATE: -		NUMBER: <b>931702</b>
AMOUNT: <b>15.00</b>		AMOUNT: -		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>Wm Sarah Myzike - mother Edelton S.E. USA.</b>				DATE EFFECTIVE
<b>Stop Effct. 31.3.18. ASM. Form. 3/5/19. Stopped 1.5.19. My</b>				RANK OR APPOINTMENT
				UNIT AND TRANSFERS
				ORIGINAL UNIT: <b>2 Construction Bn</b>
				DATE ACCOUNT FIRST OPENED: <b>1 APR 1917</b>
				AUTHORITY
				DATE EFFECTIVE
				DATE LEDGER SHEET T'S'D
				UNIT TRANSFERRED TO
				<b>1/6. 1/6. Canada</b>

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
<del>3/3</del>	<del>10011</del>		<del>9.73</del>	<del>1/4</del>	<del>3179</del>		<del>180</del>
<del>4/1</del>	<del>1011</del>		<del>14.60</del>				
			<b>24.33</b>				

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE: **Disof Canada 1.5.19. AR 6619 m.d. Refon**

1918'	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
MAR	Bal Forward								269.66	147	
Apr	P. Pay	33		b.a.p.				15			
				AR 133 6/4 CFC 201	3.57						
				315 20/4 - " -	3.57				280.52	162	
		33			7.14			15			
May	P.P	34	10	b.a.p.				15			
				5 days # 2 25/4/18 for a.w.L							
				from Wky Party 10 am to 12.15 pm							
				24/4/18 2 1/2 hrs. Bo 27 1/2 2 Con Bn		5.50					199
				AR 738 2/5 CFC 1	4.46				289.66	157	
June	P. Pay	33		a. Pay				15			
				AR 925 7/6 CFC 1	3.57						192
				1121 22/6	3.57				300.52		
		33			7.14			15			
July	Play	34	10	10 day FR 2: 24/6/18 6.30 am							
				leaving work without permission 10.30 am							
				Disobedience found on Mont 25/6/18							
				without a pass found on Mont 25/6/18							
				AR 3039 2 Con 6/18		11.00					
				Can at				15			
				AR 1520 22/7 CFC 1	3.57				305.05	207	
		34	10		3.57	11.00		15			
Aug	Play	34	10	Can at				15			
				AR 1715 6/8 CFC 1	3.57						
				AR 1962 22/8	3.57				314.01	222	
		24	10		7.14			15			
Sep	P.P.	33		Can at				15			
				AR 2215 6/9 CFC 1	3.57						
				AR 2456 23/9	3.57				327.87	231	
		33			7.14			15			



NUMBER	RANK	NAME	MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
			Oct									32787.237		
				p.p.	3410.		696. 7.10. C.F.C. 1.	373.						
							cap.					15.	34324.52	
					3410.			373.				15.		
			Nov		33.		3115 8.11 ✓	373.						
			Dec		3410.		14 days 2. Pr of opr. and 10 days		1650.					
			Jan		3410.		21 days. Same. Int. 10. 7. 20. 63. 9/11/18.							
							cap.					15.	267.	
							3377 75.11 ✓	1306.						
							cap.					15.	282.	
							28 days 2. Pr. No. 2/1/18. and 2500 24/1/18.		3410.					
							15 230 27. 11. 18. 2nd 3 days. Kw. 2nd 3 days. 20. 63. 10/11/18.							
							cap.					15.	23205.299	
					10170.			1679	6060			45.		
			Feb		3080.		1843. 11.1. 65 RD	466.						
			Mar		3410.		cap.					15.	312.	
							13.12.16. 4. 15. 18. 12 days.		720.					
							20. 1. 31. 19. 2 months.							
							18/1/18 - 27. 1. 19. 44 days.		2640.					
							20. 12. 11. 2. 19. 2nd Con. Cont.		420.					
							1/2/19 - 2. 2. 19. 7 days.							
							20. 27. 2. 2. 19. 4th Rec. Cont.							
							cap.					15.	329.	
							6087. 3. 7. Willey	.12.						
							8520. 10. 2. Eves.	73.						
							8983. 16. 2. ✓	487.						
							9736. 20. 3. ✓	973.						
							9347. 12. 3. ✓	730.						
								9968	3780					
			Apr		64190.		cap.					30.	26247.40	
					33.							15.	24777.147	
					15	20785.	82	14	✓					
							1143. 16. 1. Endorsed.	2433.						
					180-	10041.	31. 3. ✓	973.						
							2146. 30. 4. Endorsed.	✓	4867.					
							2686. 4. 5. ✓	✓	3407.					
					4881	180-		13140.					32688.	

Let's analyze 14/5. Rd 75



SHORT FORM.

PROCEEDINGS ON DISCHARGE

(Demobilization.)



M.D. 1

(4)

1. No. 931702 MAY 14 1919

2. Rank. Pte DISEMBARKED, HALIFAX, 24-5-19

3. Name. Wiggall Jessie

4. Unit. 2nd Conch. Reserve :- NSRD.

5. Date of Discharge MAY 27 1919 Place LONDON, ONT.

6. Reason for Discharge. Category :- A.I.I. (H)  
 Occ. Group :- 4  
 Next of Kin :- mother  
 Religion :- Baptist

7. Authority. RO 1894 Destination :- Detroit Mich

8. Proposed Residence after Discharge. GPO Windsor ont Casualty :- yes  
 Decorations :- nil  
 Service in France :- 2 1/2 Mths

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. ?

J. Wiggall  
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place LONDON, ONT.

Date MAY 27 1919

Signature [Signature] (O. C. Discharging Unit.)



PROCEEDINGS ON DISCHARGE  
(Continuation)

1. Name of Debtor	W. J. ...
2. Date of Discharge	...
3. Reason for Discharge	...
4. Proposed Residence after Discharge	...
5. Authority	...
6. Proposed Residence after Discharge	...
7. Service in France	...
8. Dozens	...
9. Family	...
10. Testimony	...
11. Religion	...
12. Text of ...	...
13. Doc. Group	...
14. Category	...

CERTIFICATE TO BE SIGNED BY JUDGE

I hereby certify that at the instant place and date I received the foregoing Certificate  
 M. R. W.  
 Signature of Judge

CONFIRMATION

The discharge of the above named man is hereby confirmed.

Signature  
 Date  
 Signature







**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

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Group..... A

Checked by No. 19

Jsc

Date..... 13-5-19



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

67  
8614  
2.1.14

Apr 1st 1918

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

# W

5313

15-00			
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### PARTICULARS OF SEPARATION ALLOWANCE

No. \_\_\_\_\_  
 Rank \_\_\_\_\_ Promoted \_\_\_\_\_ Reverted \_\_\_\_\_ Discharge \_\_\_\_\_  
 Soldier's Name \_\_\_\_\_  
 Battalion *2<sup>nd</sup> Construction Bn*  
 Beneficiary \_\_\_\_\_  
 Relationship \_\_\_\_\_  
 Address \_\_\_\_\_

### PARTICULARS OF ASSIGNMENT

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 Change of Address \_\_\_\_\_  
 1 \_\_\_\_\_  
 2 \_\_\_\_\_  
 3 \_\_\_\_\_ 15 15.00  
 4 \_\_\_\_\_  
 MRS. SARAH WYZIKE  
 EDETOWN,  
 S.C., U.S.A.  
 % 931702 PTE. J. WIGFALL  
 FIFTEEN DOLLARS

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Sept 1934</i>	<i>46-7438</i>		<i>15</i>	<i>15</i>	<i>660 rend. 24-4-18.</i>
<i>Apr</i>	<i>H 918</i>		<i>15</i>	<i>15</i>	<i>30-4-18 Adj col P 4880 rend 29-4-18 Lt.</i>
<i>May</i>	<i>H 21931</i>		<i>15</i>	<i>15</i>	<i>cc # 949 may 18-5-18. CHK 21931 W Case 28/5/18 Jmb. H-918 conc 18-5-18. Stenit withdrawn pending better address 18-5-18. 2018-5-11-11</i>
					<i>A. P. closed from date Suspended. 31-5-18. Kuthy. of P.M. G. 15 letter on file. Soldier does not desire to appoint another one. Assignee is deceased. M.R.O. L.P. 91738 - to D, rend. 21/5/19. Rk. (K)</i>

AUTHORITY FOR NEW ACCT.

M. F. W. 128.  
 COM. G. 7-1772-38-1441  
 L. L. 2320-M. & D. 7593.

.....A/c Cleared  
 .....Ret'd per.....  
 .....Date.....F.X.....  
 .....Clerk.....

AUTHORITY FOR NEW ACCT. *27th 28th 28th*  
*M.R. Shorub 28th 28th*



