

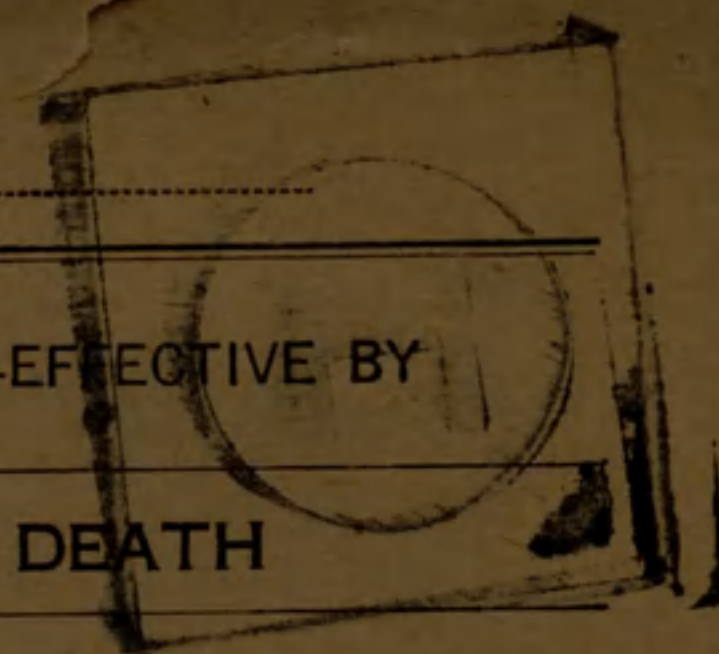
REGIMENTAL DOCUMENTS

NAME **BUTCHER** LEONARD WALTER

Pte REGT. NO. 931065

UNIT #2 Const Bn

H. Q. FILE NO.



37

2

2

2

1

1

1 asw3997

1 msu192

1 Casoc5009a

1 M. H. M. 167

1 R122

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

DEATH

Category

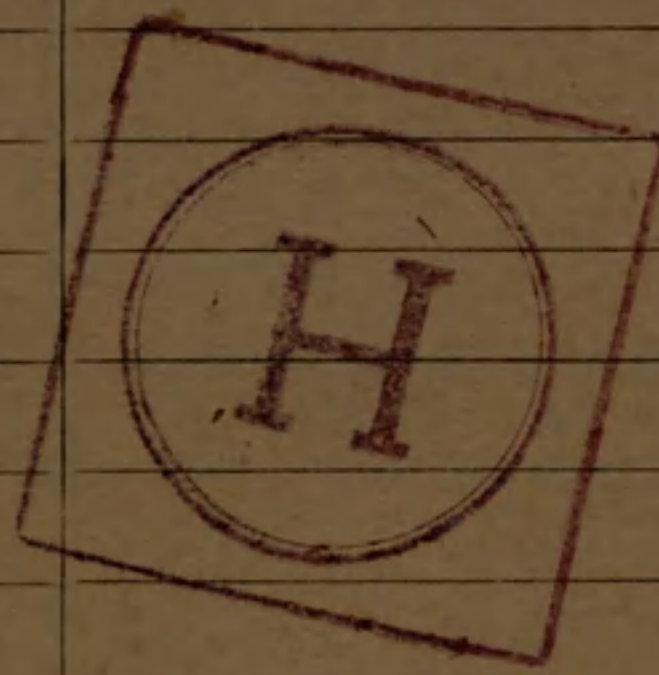
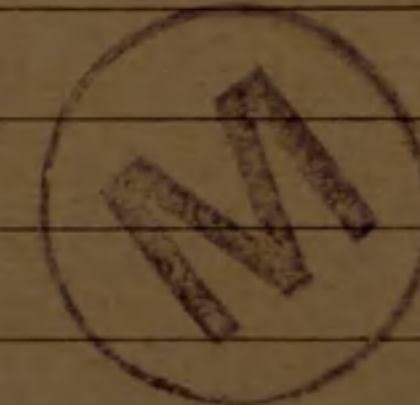
54645

DISCHARGE

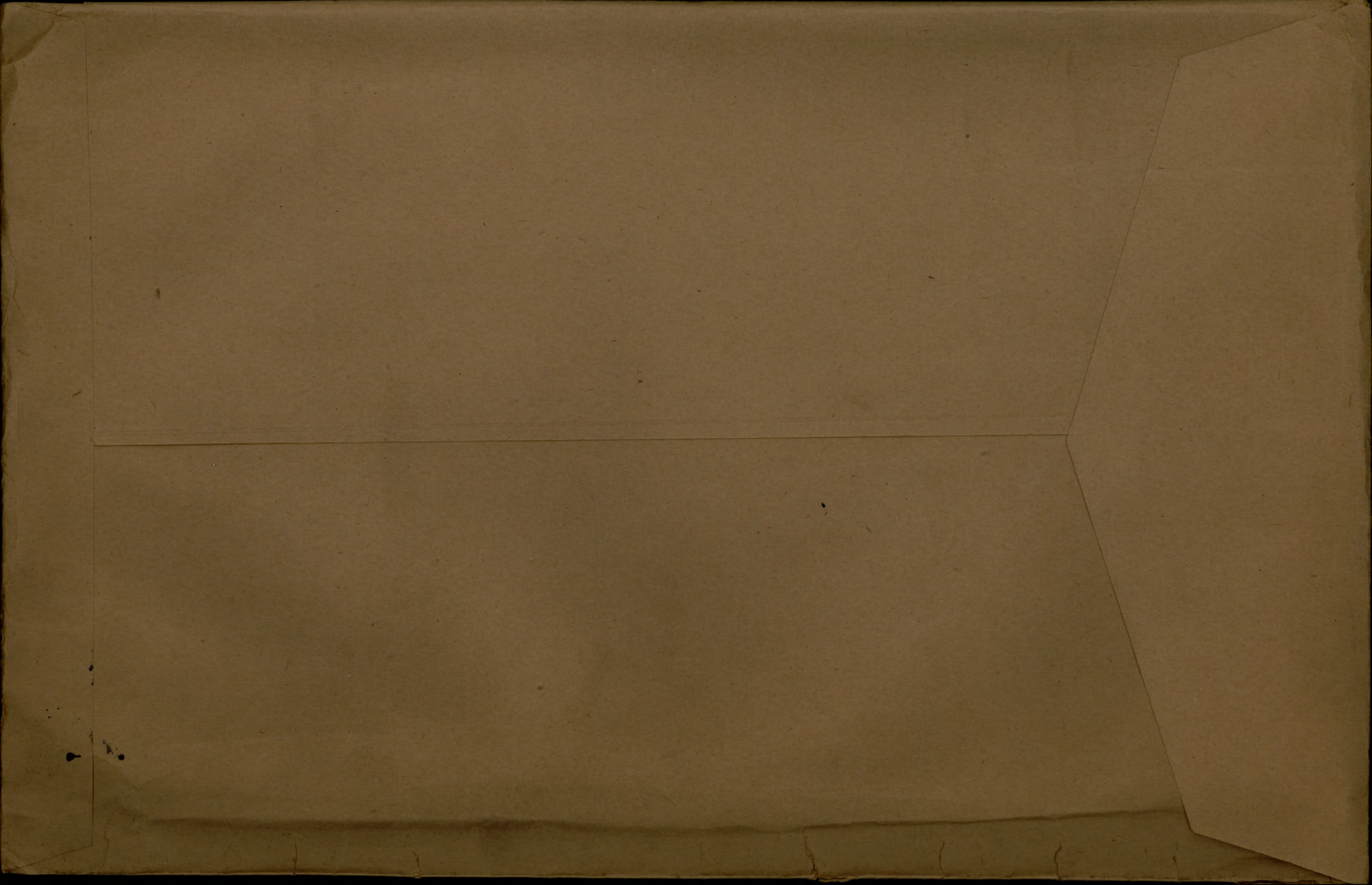
Category

Demobilization

DESERTION



1
2-29
-11-29



ORIGINAL

931065

ATTESTATION PAPER.

No.

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

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname? *Butcher*
- 1a. What are your Christian names? *Leonard Walter*
- 1b. What is your present address? *Glace Bay*
- 2. In what Town, Township or Parish, and in what Country were you born? *Budgetown Barbados*
- 3. What is the name of your next-of-kin? *Mrs. Rebecca Maynard (married again)*
- 4. What is the address of your next-of-kin? *Belmore St. Budgetown Barbados*
- 4a. What is the relationship of your next-of-kin? *Mother*
- 5. What is the date of your birth? *October 1894*
- 6. What is your Trade or Calling? *Labourer*
- 7. Are you married? *no.*
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated? *Yes*
- 9. Do you now belong to the Active Militia? *Yes*
- 10. Have you ever served in any Military Force? *Yes*
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, *Leon H. Butcher*, 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 *July 24* 191*6* *Leonard Walter Butcher* (Signature of Recruit)
J. L. Chapman (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Leon H. Butcher*, 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 *July 28* 191*6* *Leonard Walter Butcher* (Signature of Recruit)
J. L. Chapman (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 *Qydney* this *28* day of *July* 191*6*
J. L. Chapman (Signature of Justice)

M. F. W. 28.
800M-2-18
H. Q. 1972-80 1911

Description of Leonard Walter Butcher on Enlistment.

Apparent Age 22 years months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

Height 5 ft. 6 ins.

Chest measurement { Girth when fully expanded 37 1/2 ins.
 Range of expansion 3 1/2 ins.

Complexion dark

Eyes brown

Hair black

Religious denominations.
 Church of England X
 Presbyterian
 Methodist
 Baptist or Congregationalist
 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 July 31 1916 S. Murray

Place Pictou S. Murray
 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.

Leonard Walter Butcher 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.

D. H. Sutherland (Signature of Officer)

Date AUG 10 1916 1916

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 931065 (Rank) Private

Name (in full) Leonaud Walter Butcher enlisted in
the No 2 Construction Bn.

CANADIAN EXPEDITIONARY FORCE at Sydney on the 28th
day of July 1916

HE served in France

and is now discharged from the service by reason of Demobilization

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

Age 24 years 3 months

Marks or Scars Nil

Height 5ft 6 ins.

Complexion Dark

Eyes Brown

Hair Black

L W Butcher
Signature of Soldier

C. W. Macaloney CAPTAIN.
O. C. DISCHARGE SECTION NO. 9 DISTRICT DEPOT.

Rank

Date of Discharge Sept. 13th 1919

Signed at Halifax NS this 11th day of February 1919

in Military District No. Six

File Reference No. _____

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

No. (Rank) Name

Unit

Address on Discharge *Glacier Bay, New Aberdeen, Glacier Bay, Alaska*

Character and Conduct

Former Occupation *Laborer*

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks

Signed at *Glacier Bay, Alaska* - this day of 19

Name of Officer

Rank

Appointment

On demobilization the particulars called for on the back of this certificate will not be considered.

Uniform not to be worn after date of Discharge, unless authority has first been obtained from G.O.C. District.

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

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

350M.—5-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps.....

Regimental No. 931065 Rank Pte Name Butcher L. W.
C. E. F.

Enlisted (a)..... Terms of Service (a)..... Service reckons from (a).....

Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }

Extended..... Re-engaged..... Qualification (b).....

Report		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				
12.1.19	Oreas. 1/0/S. No. 6 D.D. Wlfr. Coy Co. 22.1.19			Do 29	<u>A. J. Ferguson</u> Lieut. ASST. ADJT. No. 6 DISTRICT DEPOT.
13-2-19	Discharged at Halifa			DO42	<u>B. W. Mackenzie</u> CAPTAIN. O. C. DISCHARGE SECTION No. 6 DISTRICT DEPOT.

(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties.

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

Arms

M. F. W. 54. (A. F. B., 105.)
250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps No 2 Construction Batt. C.E.F.
 Regimental No. 931065 Rank pte Name Leonard Walter Butcher
 Enlisted (a) 28-7-16 Terms of Service (a) period of war Service reckons from (a) 28-7-16
 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) _____

GENERAL CONTROL,
 6 JUN. 1917
 CAN. 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				
		Embarked, Canada	Halifax N.S.	25/3/17	
		Disembarked, England	Liverpool	9/4/17	
		Proceeded Overseas	Seaford	2/5/17	No 2 Coy Quayser Capt. for Capt & Asst
				Landed in France	17-5-17 N.R.
4-6-18	unit	Still with unit	Fulda	4/6/18	K.R. 18/11/18
27-7-18	unit	Granted 14 day leave to	uk.	24-7-18	B213 previous 5 of Aug 1918
10-8-18	so	Returned from leave	Fulda.	10-8-18	B213
21-9-18	so	Awarded one S.C. Badge	"	28-7-18	B213 previous 5 of Oct 1918

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

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
11/12/18.	A.A.G.	Trans. to England England, posted to N.S. Regl Depot Bramshott	Bramshott	14/12/18.	V.R. 344
17-12-18.	N.S. R.D.	T.O.S. attached to 2nd C.B.D. for Ops. Returns.	Bshott	14-12-18.	D.O. 305.
12/1/19	NSRD	ON COMMAND TO CDD Kimmel ^{Ref.} Kimmel S.S. O.M.C. for Trans. to C.E.H. Discharge Canada Sailing no 4 Embarked - England	BRAMSHOTT		PART II D.O. NSRD 313 27 ¹² / ₁₈
					b.a. Knight LIEUT, OFFICER in RECORDS, NOVA SCOTIA REGTL. DEPOT.
					Lieut. for Lt.-Col., A.A.G. Canadian Section, G. H. Q. 3rd Echelon, B.E.F.
					ba Jewell

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

MD 6

NAME OF SOLDIER (Block Letters) BUTCHER LW

REGIMENT No 2 Conchs Battr RANK Pte No. 931064

Date of Examination in England 31/12/18 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 5, 6, 7, 8, 9, 10, 17

2. EXTRACTIONS 32

3. CROWNS

4. DENTURES
- (a) Full Upper
 - (b) Part Upper
 - (c) Full Lower
 - (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

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

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

KINMEL PARK NORTH WALES

Signature of Dental Officer J. Somerville Capt

W. J. ...
BUTCHER ...
131011

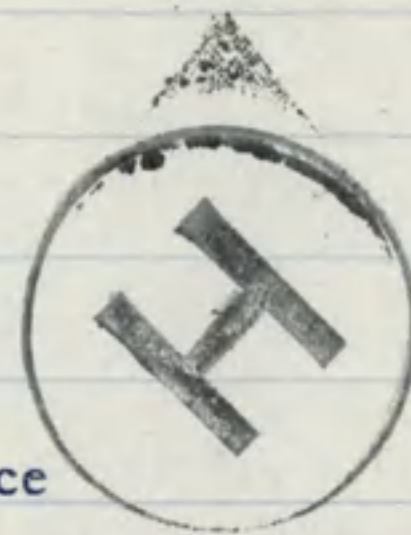
11/10/11

11.01.1.10.11

JM

Rank **Butcher, Leonard Walter.** Reg'l No. **931065**
 Unit **No. 2 Const. Bn.** If in perm. Corps, }
 What Unit? }
 Married or Single **Single.**
 Place and Date of Enlistment **Sydney. 28th July 1916.** Place of Birth **Bridgetown, Barbados.**
 Name and Address, Next-of-Kin **Mrs Rebecca Maynard.**
Melrose St Thomas, Barbadoes. Relationship **Mother.**

Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship



N/E. R.B. No. **6590**
 File R.L.
 Category **OR 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 S.S. Southland		7.4.17	<i>Aw.w.w.</i>
14-6-17	#2 C.C.C.	Arrived in France	Field	17-5-17	115
7.10.18.	2nd C.C.C.	awd one good conduct badge	Field	28.7.18.	NO. 55.
16.12.18	NSRD.	T.O.S. from 2nd C.C.C.	Pte Bishop	14.12.18	NO 305471 / 2nd C.C.C.
27-12-18	NSRD	ok to C. D. D Rhyll		27-12-18	- 313
25.1.19	NSRD.	ceases ok to Rhyll & S.S. to C. F. Canada	Rippon	12.1.19	- 18.

A.F.B. 103 CHECKED
 28 MAY 1917

Medical Examination upon leaving the Service
of an Officer fit for general service or a Soldier fit for duty.

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank Pte Name Butcher Surname Lenord W.
 Unit or Corps 17 Reserve (If a soldier) Regtl. No. 931065
 Born at Barbados W.I. on date October Thirteenth 1893
 Signature (for identification) Butcher Lenord W.

The examination is to be made jointly by two Medical Officers.

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe.

Weight 153 lbs.

Height 5 ft. 6 1/2 ins.

no

2. NUTRITION AND DIATHESIS P

Good

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. NERVOUS SYSTEM P

no

4. RESPIRATORY SYSTEM.

no

5. HEART P

Abnormal Sounds? no

Abnormal Size? no

Pulse Rate? 80

Intermittence or irregularity? no

6. ARTERIES.—Any hardening?

no

7. DIGESTIVE SYSTEM P

no

8. GENITO-URINARY SYSTEM P

Urinalysis—s.g.? 1.020

Reaction? ac

Albumen? 0

Sugar? 0

9. SKIN, MIDDLE EAR, EYE
or any other part?

no

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe.

no

11. Opinion as to the health and physical condition of the one examined?

Good

Examined at Kimber Park

Signed HP 6 M.D. Capt. M.O.

Date 2/1/12

Signed W. J. ... M.O.

If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.

Handwritten text at the top of the page, possibly a header or title, which is mostly illegible due to fading and bleed-through.

Handwritten notes in the upper left and center of the page, including what appears to be a date "1898" and some numbers.

A single, curved handwritten line or scribble in the middle of the page.

Handwritten notes at the bottom of the page, including a date "1898" and other illegible markings.

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. 938063 Rank Pte. Surname Butcher
(Given name in full)
Lincoard Walter Butcher
 Unit or Corps D.D.6 Birthplace Barbadoes

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

1. GENERAL DESCRIPTION:

Physique Good Weight 148 lbs. Height 5 ft. 6 in. Colour of Eyes Dark Brown
 Nutrition Good
 Pulse 72
 Condition of arteries normal
 Vision Rt. 5/6 Left 6/6
 Hearing (conversational voice) Rt. 15 ft.
 Left 9 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 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.

Glacé Bay.
Inw. of Barbados.
Post. Office.

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at(Overseas)

Date

SignedM.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 SECTION FOR USE IN CANADA—

Examined at *Halifax*(Canada)

Date *Feb 10 1919*

Signed *J. W. M. Kaye*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 *J. W. M. Kaye*

(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.)

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

OTTAWA, CANADA.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

If the applicant will enquire at the local Branch of the Canadian Patriotic Fund he will be informed if there is an official who will take this Declaration free of charge.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

- 1. Christian Names *Leonard Walter* 2. Surname *Butcher*
- 3. Rank *Pte* 4. Original Unit *No. 2. Const. Bn* 5. Reg. No. *9310657*
- 6. Address, in full, to which future payments of gratuity are to be forwarded
New Aberdeen
Glace Bay, Cape Breton
- 7. Date of enlistment in the C.E.F. *July 28, 1916*
- 8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *Not applicable*
- 9. Relationship of such dependent *do*
- 10. Address, in full, of such dependent *do*
- 11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *Not applicable*
- 12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
Yes! - #2 Const. Bn. 7-4-17 to 11-12-18
- 13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? *No*
- 14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service *No*
- 15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served *From 28-7-1916*
#2 Const. Bn. (Con. Eng. & Transport), N.S.P.C. (Eng)
to
- 16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department *No*
- 17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? *No*

48

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units.....
No.
19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid.....
No
20. Have you been issued with a War Service Badge? If so, what class?.....
No
21. Have you, during the present war, served in the Imperial Forces?.....
No
22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled.....
Not applicable
23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?.....
No
 (b) If so, was such reversion in consequence of misconduct or inefficiency?.....
Not applicable
24. Are you now serving in the C.E.F. If not, give:—(a) Date of discharge
February 13/19 (b) Reason for discharge.....
25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit.....
26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit.....
Yes #2 Cons. Bn. 17-5-17 to 11-12-18
27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?.....
No
 (b) If so, are you in receipt of full pay and allowances from that Department?.....
Not applicable

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: *J W Butcher*

Place of Residence: *New Aberdeen Glace Bay, C. B.*

Declared before me at: *Halifax, N.S.*

This *11th* day of *February* 19*19*.

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner of the Administration of Oaths.

[Signature]
 A Commissioner of the Supreme Court in and for the Province of Nova Scotia.

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
<i>Not clear</i>	<i>19.00</i>	<i>19.00</i>	<i>153</i>	<i>280</i>
<i>First Payment</i>	<i>10.00</i>	<i>10.00</i>		<i>330.00</i>
<p>Certified Correct. <i>[Signature]</i> District Paymaster. <i>[Signature]</i></p>				

DUPLICATE

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 No. 2. Construction BATT.

(2) Regimental Number 931065

(3) Full Name of Soldier Leonard Butcher

(4) Place of Birth Barbados B.W.I.

(5) Are you married, or not? no

(6) If married, state,
 (a) Full name of your wife no

(b) Present Postal Address St. Thomas B.W.I.

(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? yes. James Thomas Butcher
If so, state name and address Age Hill St Thomas Barbados B.W.I.

(10) Is your Mother alive? yes. Mrs Rebecca Maynard
If so, state name and address Melrose St. Thomas Barbados - B.W.I.

(11) If your Mother is a widow no
Are you her sole support, or not? yes no

(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.
\$5.00

(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.
Mother
Mrs Rebecca Maynard
Melrose St. Thomas Barbados B.W.I.

(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 no

(15) Are you insured? no
If so, in what Company? no
Have you made arrangements for payment of your Insurance premium? no
If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Date OCT 23 1916

C. W. Reis Capt
ja Officer Commanding.

931065

ORIGINAL MEDICAL HISTORY SHEET.

Surname Butcher Christian Name Leonard Walter

Examined { on 31 day of July 1916
at Pictou

Approved by J M Murray

Birthplace { City or Town Budgetown
County Barbados B.W.I.

Rank LT A.M.C. M.O.

Apparent age 22

Trade or occupation Labourer.

Height 5 Feet 6 Inches.

Weight 152 Lbs.

Chest measurement { Minimum 34 inches.
Maximum expansion 32 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right Left
Number 3

When Vaccinated last 7 years ago

(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection None

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

Date	Result	VACCINATIONS.
<u>15/3/17</u>	<u>Good</u>	<u>Don Murray</u> M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>19/10/16</u>	<u>Left R.</u>	<u>J M Murray</u> M.O.
<u>1/11/16</u>	<u>Left R.</u>	<u>J M Murray</u> M.O.
<u>16/11/16</u>	<u>Left R.</u>	<u>G A Dunbar</u> M.O.

Enlisted on 28 day of July 1916 at Spur

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment				
Transferred to..		<u>931065</u>		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

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

*Name *Butcher, Leonard, Walter* Rank *Private* Regtl. No. *931065*
 Original unit *10th Co. Bn.* Present unit *No 6 D.D.* M. or S. Age *24* Religion *C of E* Fyle Depot *74-B-853*
 Port, ship, and date of arrival *Halifax, N.S. Empress of Britain 22.1.19*
 Next of kin *Rebecca Maynard, (Mother)*
 Address on leave *Glace Bay, P.B.*
 Address on discharge

Transportation issued Yes No Date Character on discharge
 Previous occupation *Labourer* Date and place of enlistment *25th July 1916 Sydney*
 Diagnosis Date of Medical Boards

Date.	Remarks	Pt. 2 Order No.
<i>17.1.19</i>	<i>P.O.S. No. 6 District Depot</i>	<i>29</i>
<i>27.1.19</i>	<i>Posted to Casualty Company</i>	<i>29</i>
<i>13.2.19</i>	<i>Discharged at Halifax, N.S.</i>	<i>42</i>

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

Date.

Remarks.

Pt. 2 Order No.

Date.	Remarks.	Pt. 2 Order No.
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....

M.F.W. 192
150M-6-18.
1772-39-1243.

From Halifax per S.S. "Southland" 28-3-17.

MARRIED

SINGLE *yes*

WIDOWER

TRADE OR CALLING

Labourer

RELIGION

Church of England

DESCRIPTION.

APPARENT AGE

22 YEARS

MONTHS

HEIGHT

5 FEET

6 INCHES

CHEST MEASUREMENT

34 1/2 INCHES

EXPANSION

3 1/2 INCHES

COMPLEXION

Dark

EYES

Brown

HAIR

Black

DISTINGUISHING MARKS

Not Stated.

MEDICAL EXAMINATION.

PLACE

Pictou, N.S.

DATE

July 31st 1916.

Present Address *Glace Bay N.S.*

SURNAME.

Butcher

CARD NO.

✓

CHRISTIAN NAMES

Leonard Walter.

6
Sos Des Mem 613-2-19

REGL. NO.

931065.

RANK

Pte.

FOLL.

DD. 42 of 11-2-19

6 A.A.

UNIT

No 2. Construction (coloured)

Bw.

FORMER CORPS

Nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Maynard, Mrs Rebecca.

RELATIONSHIP TO SOLDIER

Mother.

ADDRESS

Bridgetown, Barbadoes B.W.I

COUNTRY OF BIRTH

B.W.I. Bridgetown B.W.I.

DATE

Oct. 1894.

PLACE OF ATTESTATION

Sydney N.S.

DATE

July 28, 1916.

Q/1 18.3-17

*M/6 25/1/19 256 (Pte)
66*

GRATUITY (IMPERIAL)

CHRISTIAN NAME

SURNAME

REG. No.

SCHEDULE No.

LINE No.

UNIT RETIRED OR DISCHARGED FROM

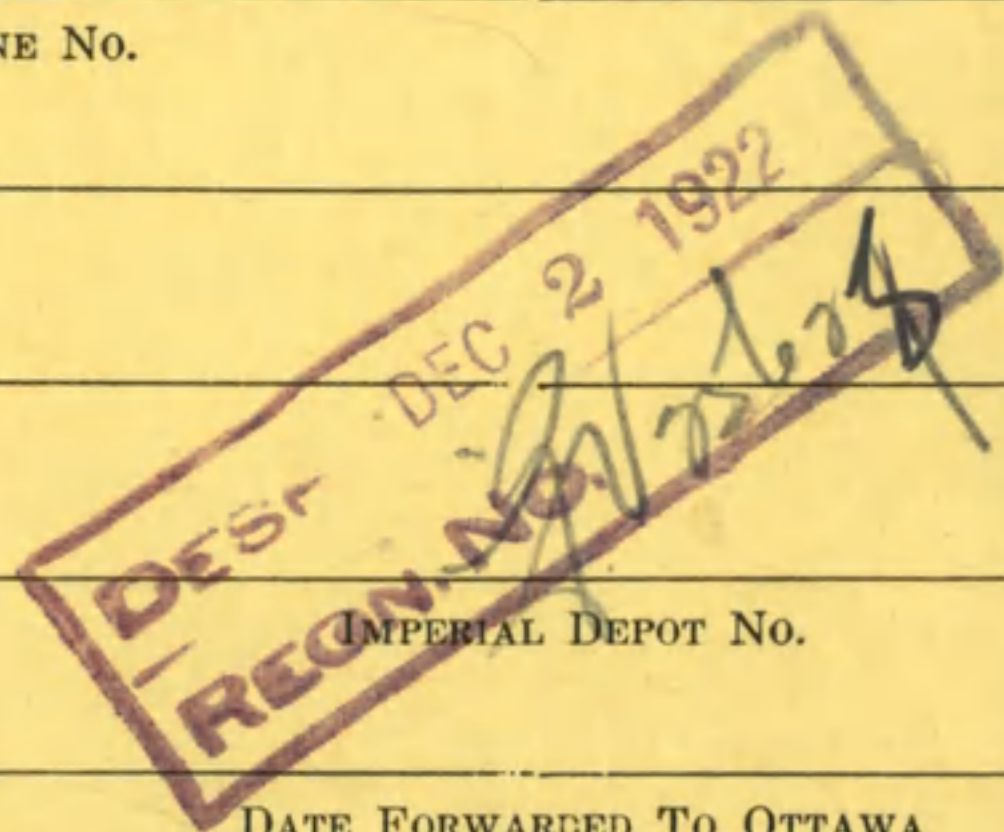
PLACE OF RETIREMENT OR DISCHARGE

DATE RECEIVED FROM OTTAWA

DATE RECEIVED FROM REG. DEPOT.

IMPERIAL DEPOT No.

DATE FORWARDED TO OTTAWA



E.M.H.

Number 931065

Rank

~~Plc~~ *Plc Sp.*

Surname BUTCHER

Christian Name Leonard Walter

Units C.O.R.C.C. Theatre of War France

Date of Service 17/5/17

Remarks

Latest Address New Aberdeen

Glace Bay
C.B.N.S.

Roll No.

200m.-6-21...

Page 22453

HOSPITALS**DATE****DIAGNOSIS**

M. F. W. 2553.

50M-6-19.

1772-39-1332.

Reg. No. 931064 Name Butcher, L.

Rank Plt. Corp. 2 Construction Age 23 Service ✓

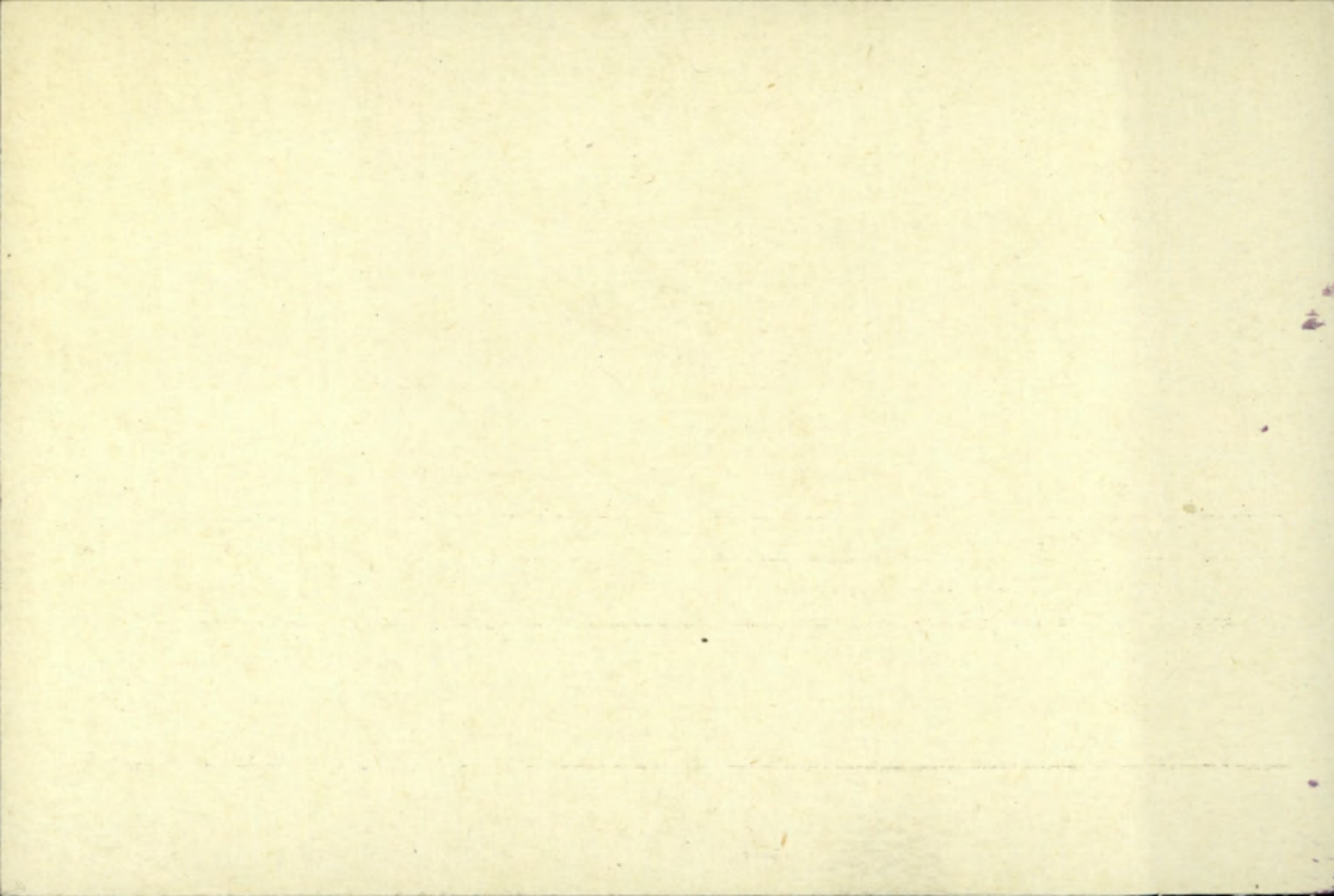
Ledger No. Serial No.

HOSPITALS

DATE

DIAGNOSIS

HOSPITALS	DATE	DIAGNOSIS
Gen. Hosp. Lums. S.	17.1.17.	Tonsillitis. - G.
Dis. U. duty.	22.1.17.	



No. 931065- RANK Cte

NAME Butcher Leonard Walter

T. O. S. 28-7-16
D. O. S. 31-7-16

UNIT No 2 Construction Battalion

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 July 28	1916 Aug 31	n		
	Sept.	n		
	Oct.	n		
	Nov.	✓		
	Dec.	✓		
1917	Jan 1917	✓		
	Feb.	n		
	Mar.	n		

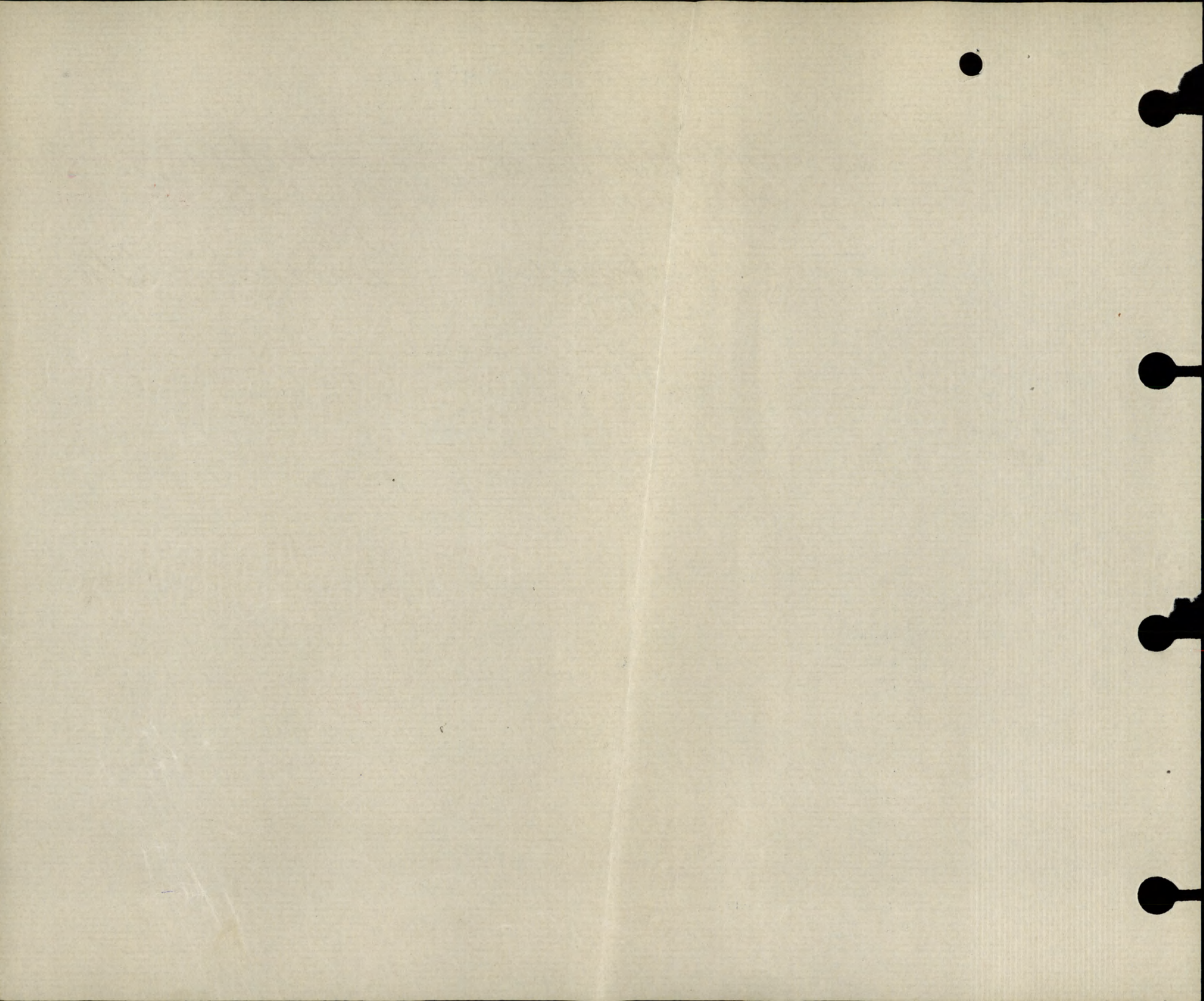
MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom *Mrs Rebecca Naaman* By Whom Assigned *Butcher, Len. Walt.*
 Address *Melrose,* Regtl. No. *931065,*
St. Thomas, Rank *Pte*
Barbadoes, Corps *2 Constr Bn.*
 Rate *\$5.00* *B.W.I.*

APR 1917 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.				
Jan.	1916			
Feb.				
March				





ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

Sheet No. 2.
(Assignee)

L. L. Job 5470—Req. 6888.

Mrs Rebecca Naanan

Name of Soldier

Butcher, Len. Walt.
931065 - Pte - 2 Constr Bn.

931065 - Pte - 2 Constr Bn.
\$5.00

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>APR 1917</i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		<i>C 5859</i>	<i>5</i>	<i>5. B. M. O. #17814</i>
May		<i>C 12107</i>	<i>5. =</i>	<i>5. B. M. O. #20763</i>
June		<i>W 19118</i>	<i>5</i>	<i>B. " " #23618</i>
July		<i>Z 27157</i>	<i>5</i>	<i>Ba " " #26866.</i>
Aug.		<i>X 32893</i>	<i>5</i>	<i>C3</i>
Sept.		<i>U 39608</i>	<i>5.</i>	<i>L</i>
Oct.		<i>G 41437</i>	<i>5</i>	<i>35</i>
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

per

CANADIAN
 ASSIGNED PAY AUDITED

W. Blay
 AUDIT CLERK
 DATE *23.5.19*

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

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.				

Date of Enlistment

MILITIA AND DEFENCE

16498

Date of Assignment

Separation and Assigned Pay Branch

Apr 1/17

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

5			
---	--	--	--

B

PARTICULARS OF SEPARATION ALLOWANCE

No. *931065*
 Rank *Pte* Promoted Reverted Discharge
 Soldier's Name *Len. Walt. Butcher*
 Battalion *2 Constr. Bn.*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *Mrs. Rebecca Naaman*
 Address *Melrose, St Thomas Barbadoes*
 Change of Address *B.W.I.*
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Oct.</i>			<i>35</i>	<i>35</i>	
<i>Nov</i>	<i>C 59016</i>		<i>5</i>	<i>5</i>	
<i>Dec</i>	<i>D 61906</i>		<i>5</i>	<i>5</i>	<i>Bo</i>
<i>Jan 1/18</i>	<i>E 60410</i>		<i>5</i>	<i>5</i>	
<i>Feb</i>	<i>C 99615</i>		<i>5</i>	<i>5</i>	<i>✓</i>
<i>March</i>	<i>A 106874</i>		<i>5</i>	<i>5</i>	<i>✓</i>
<i>Apr</i>	<i>H 4028</i>		<i>5</i>	<i>5</i>	<i>g</i>
<i>May</i>	<i>H 18793</i>		<i>5</i>	<i>5</i>	<i>g</i>
<i>June</i>	<i>E 17727</i>		<i>5</i>	<i>5</i>	<i>g</i>
<i>July</i>	<i>V 33354</i>		<i>5</i>	<i>5</i>	<i>✓</i>
<i>Aug.</i>	<i>E 30196</i>		<i>5</i>	<i>5</i>	<i>✓</i>
<i>Sept.</i>	<i>H 44471</i>		<i>5</i>	<i>5</i>	<i>✓</i>
<i>Oct</i>	<i>F 48006</i>		<i>5</i>	<i>5</i>	<i>✓</i>
<i>Nov</i>	<i>B 59519</i>		<i>5</i>	<i>5</i>	<i>✓</i>
<i>Dec</i>	<i>M 63593</i>		<i>5</i>	<i>5</i>	<i>✓</i>
<i>1919 JAN. FED</i>	<i>H 75017</i>		<i>5</i>	<i>5</i>	<i>✓</i>
			<i>110</i>	<i>110</i>	

2597 L-5

M. F. W. 128.
400M. 1-17-1772 39-1141
L. L. 2320-M. & D. 1403.

1919

31/1/19 Acc Closed
 Ret'd per *Empress of Britain*
 Date *22-1-19* M.F.W. 187 *29-1-19* M.F.W. 6
 Clerk *J. Goldsmith*
M.F.W. 213 (63172)

CANADIAN
 ASSIGNED PAY AUDITED
W. Black
 AUDIT CLERK
 DATE *23-5-19*

A STENCIL
 HAS BEEN MADE
 FOR THIS ACCOUNT

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

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/AAmount
A/P

Total

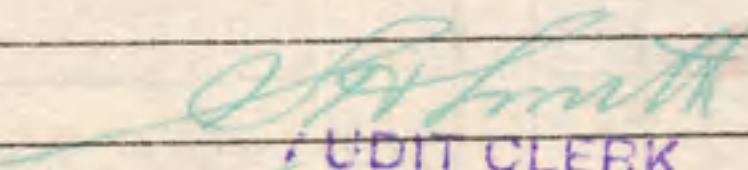
REMARKS

ASSIGNED PAY.	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.	NAME: <i>Butcher Leonard Walter</i>							
EFFECTIVE DATE: <i>1st April 1917.</i>	EFFECTIVE DATE: -	NUMBER: <i>931065.</i>									
AMOUNT: <i>5.00</i>	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	DATE EFFECTIVE							
<i>Mrs Rebecca Naaman</i>				<i>No</i>							
<i>Melrose St Thomas</i>											
<i>Barbados. B.W.I.</i>											
<i>Sept 7.1.19</i>											
UNIT AND TRANSFERS											
ORIGINAL UNIT: <i>2 Construction Bn</i>											
DATE ACCOUNT FIRST OPENED: <i>1st April 1917.</i>											
AUTHORITY		DATE EFFECTIVE	DATE LEDGER SHEET T 56 0	UNIT TRANSFERRED TO							
			<i>Canada</i>								
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS											
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT				
<i>7/11</i>	<i>2627</i>	<i>20 fr. Home</i>	<i>3.13</i>								
<i>25/11</i>	<i>2897</i>	<i>70 fr.</i>	<i>13.00</i>								
<i>9/12</i>	<i>6601</i>	<i>25 fr.</i>	<i>4.16</i>								
<i>18/12</i>	<i>PRSD 3564</i>	<i>42</i>	<i>9.72</i>								
			<i>31.18</i>								
PARTICULARS OF RENDERING NON-EFFECTIVE											
1918 MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
<i>MAR</i>	<i>Bal Ford</i>								<i>231.82</i>	<i>120</i>	
<i>apl</i>	<i>Payra</i>	<i>33</i>		<i>Ass Pay</i>				<i>5</i>			
				<i>AR 284 22/4</i>	<i>3.57</i>				<i>252.68</i>	<i>130</i>	
		<i>33</i>		<i>Ass Pay</i>	<i>7.14</i>			<i>5</i>			
<i>May</i>	<i>P. Pay</i>	<i>34 10</i>		<i>AR 405 9/5 CFC para</i>	<i>3.57</i>						
				<i>AR 419 23/5</i>	<i>3.57</i>				<i>274.64</i>	<i>140</i>	
		<i>34 10</i>			<i>7.14</i>			<i>5</i>			
<i>June</i>	<i>P. P.</i>	<i>33</i>		<i>Ass Pay</i>				<i>5</i>			
				<i>AR 706 7/6 CFC 5</i>	<i>3.57</i>					<i>150</i>	
				<i>868 27/6</i>	<i>3.57</i>				<i>295.50</i>		
		<i>33</i>			<i>7.14</i>			<i>5</i>			
<i>July</i>	<i>PP</i>	<i>34 10</i>		<i>Ass Pay</i>				<i>5</i>			
				<i>AR 946 10/7 EFC 5</i>	<i>3.57</i>						
				<i>AR 1090 25/7</i>	<i>3.57</i>						
				<i>AR 1443 20/7 CFC 5</i>	<i>7.14</i>						
				<i>CP 19931 31/7 LN</i>	<i>21.33</i>				<i>192.23</i>	<i>160</i>	
		<i>34 10</i>			<i>132.37</i>			<i>5</i>			
<i>Aug</i>	<i>PP</i>	<i>34 10</i>		<i>Canal</i>				<i>5</i>			
				<i>CP 20560 28/8 LN</i>	<i>29.20</i>						
				<i>AR 7480 25/8 BFC 5</i>	<i>3.57</i>				<i>188.56</i>	<i>170</i>	
		<i>34 10</i>			<i>32.77</i>			<i>5</i>			
<i>Sep</i>	<i>PP</i>	<i>33</i>		<i>Canal</i>				<i>5</i>			
				<i>AR 1670 5/9 CFC 5</i>	<i>3.57</i>						
				<i>AR 2014 24/9</i>	<i>3.57</i>				<i>209.42</i>	<i>180</i>	
		<i>33</i>			<i>7.14</i>			<i>5</i>	<i>209.42</i>		

* Strike out whichever inapplicable.

NUMBER	RANK	NAME	MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
												209 47		
Oct				Pay	3410		cat				5		190	
							2784. 12/19 5656.	373						
							2315 26/10 1	373				231 06		
					3410			7-6			5			
					33		cat				5		200	
					3410		x679 11/11 ✓	373						
Dec				let. on det. pay.	875		2897. 26/11 ✓	1306						
					7595		cat				5			
							6601 10/12 Base.	466						
							3564. 19/12 RR	973				26573 ✓		
					7595			3118			10			
							26 10/1 Rhyt BRP	973				25600		
								973						

S/D Canada 11/1/19
 Bo 18 25/1/19 RR.

CANADIAN
 ASSIGNED PAY AUDITED

 AUDIT CLERK
 DATE 2.27/19

912 931065 Butcher - R.W

500

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.							No.	DATE	No.	DATE	No.	DATE	No.	DATE																										
													149.62																																		
<i>Oct real</i>																																															
<i>Nov. P.P.</i>																																															
<i>ARR. 28th C.A.C.</i>													3		57																																
<i>- 841. 12th -</i>													3		57																																
<i>" 963. 25th -</i>													3		57																																
<i>" 1051. 10th -</i>													3		57																																
<i>DEC - -</i>																																															
<i>ARR. 617 11th - Jura prof</i>													3		57																																
<i>JAN 1918 P.P.</i>																																															
<i>ARR. 1251. 23rd 2 cont. re</i>													12		49																																
<i>" 1425. 21st - - -</i>													7		14																																
<i>FEB - - - -</i>																																															
<i>ARR. 1880. 24th C.A.C.</i>													3		57																																
<i>" 1893 4/1/18 Jura</i>													3		57																																
<i>MAR 1918</i>																																															
<i>ARR. 2009 - 14th C.A.C. Jura</i>													7		14																																
<i>" 2317 - 18th Jura</i>													7		14																																

CANADIAN ASSIGNED PAY AUDITED
 AUDIT CLERK
 DATE *2/3/19*

E of B 21/1/19

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

REGT. No. 931065 RANK Pte NAME (IN FULL) Butcher CW

Form with fields: M. OR S., NEXT OF KIN, ADDRESS, IS SEPARATION ALLOWANCE PAID?, TO WHOM PAID, ADDRESS, ORIGINAL UNIT, PLACE OF ATTESTATION, DATE OF ATTESTATION, ASSIGNED PAY, PAYABLE TO, ADDRESS, STOP PAYMENT FORM, DISCHARGED, PLACE, DATE, REASON, AUTHORITY, IF ENTITLED TO POST DISCHARGE PAY.

BALANCE FROM PREVIOUS ACCOUNT

Table with columns: MONTH, PAY AND F.A., OTHER CREDITS, TOTAL CREDITS, ACQUITTANCE ROLLS, CASH PAYMENTS, ASSIGNED PAY, REG-MENTAL CHARGES, OTHER CHARGES, TOTAL DEBITS, BALANCE (DEBIT, CREDIT), PARTICULARS OR REMARKS.

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

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263.	Attestation Paper, Militia Form B. 235.
Squadron } Battery } Conduct Sheet, " B. 263a.	Proceedings on Discharge " B. 218.
Company }	
Copies of Convictions, by C. P. in MS.	In the case of recruits who are rejected on final approval, the discharge documents will consist of (a) Proceedings on Discharge. (b) Attestation. (c) Medical History Sheet (in the event of such having been prepared.)
Med. Hist. Sheet, Militia Form B. 313	
Medical Report for Invalid* " B. 227.	
Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.	

*Only if discharged "Medically unfit."

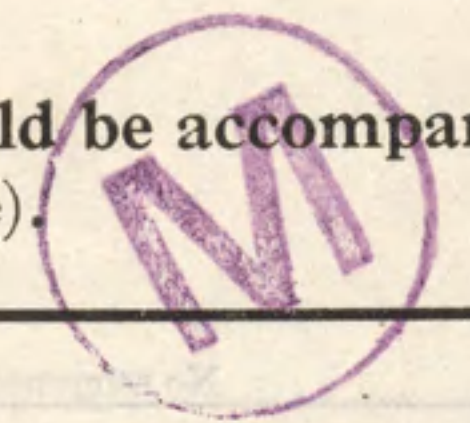
N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

This space to be for numbers

Proceedings on Discharge.



(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page)



No. <u>931065</u>	
Rank <u>Private</u>	
Surname <u>Butcher</u>	
Christian Name <u>Leonard Walter</u> <small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company) <u>No 2 Lewis B. Co.</u>	
Date of Discharge <u>February 13th 1919.</u>	
Place of Discharge <u>Halifax N.S.</u>	
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age <u>24</u> years <u>3</u> months.	Descriptive Marks
Height <u>5</u> feet <u>6</u> inches.	
Complexion <u>Dark</u>	<u>Net.</u>
Eyes <u>Brown</u>	
Hair <u>Black</u>	
Trade <u>Labour</u>	
Intended place of residence <u>New Brunswick</u> <u>Glouce Bay</u> <u>N.B.S.</u>	
(To be given as fully as practicable.)	
2. The above-named man is discharged in consequence of <u>Demobilization</u>	
<small>N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.</small>	
3. Conduct and character while in the service have been, according to the records, etc.	
<small>N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.</small>	
4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)	

M. F. B. 218.

100M. - 1-17.
H. Q. 1772-39-113.

(OVER)

5. He is in possession of the following number of G. C. Badges:

When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page.

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....
To be copied by the Commanding Officer on the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (Squadron or Battery), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place).....
(Date)..... Commanding.....

8. Certificate to be signed by the Soldier on Discharge

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place) Halifax N.S. J. W. Butcher (Signature of Soldier.)

(Date) 11th Feb 1919 Geo. Fox (Signature of Witness.)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

(Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to.....(the date to which the Record of Service is completed).....years.....days.
Total.....years.....days.

11. Confirmation of Discharge.

The discharge of the above-named man is hereby confirmed.

(Place) Halifax N.S. J.S. Davis Major (Signature) LIEUT. COL. No. 6 DISTRICT DEPT.

(Date) February 13, 1919

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

List of Discharge Documents.

101

J. W. Butcher

Table with columns for document type and number. Includes items like 'Reg. Conduct Sheet', 'Medical History Sheet', 'Statement of Man's Account on Transfer and Last Pay', etc.

N.B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.