ORIGINAL

ATTESTATION PAPER.

No. 512274

5 Div. Supply Column.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	CRAWFORD
1a. What are your Christian names?	John Alexander,
1b. What is your present address?	217 Shaw St., Toronto, Canada.
2. In what Town, Township or Parish, and in what Country were you born?	County Antrim, Ireland.
3. What is the name of your next-of kin?	Annie Crawford
4. What is the address of your next-of-kin?	Lisrodden, Portglenone, County
4a. What is the relationship of your next-of-kin?	Mother. Antrim, Ireland.
5. What is the date of your birth?	Nov. 12th, 1890.
6. What is your Trade or Calling?	Lathe Hand.
7. Are you married?	Single.
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? If so, state particulars of former Service.	Yes, 2½ Yrs., 48th Hlds., Pte.
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, John Alexander Crawford, 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.

John alexander Crawford (Signature of Recruit)

Date February 29th 1916. W. R. Edmiston (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, John Alexander Crawford, 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.

John alexander Crawford (Signature of Recruit)

Date February 29th 1916. W. R. Edmiston (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 Toronto, Canada this 29th day of ½ February, 1916.

(Signature of Justice)

M. F. W. 23.
600M.—2-16.
H. Q. 1772-39-841.

DIVISIONAL SUPPLY COLUMN
C. E. F.

Description of John Alexander Crawford on Enlistment.

Apparent Age 25 years 3 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 6½ ins.

Chest measurement.
Girth when fully expanded 37 ins.
Range of expansion 4 ins.

Complexion Fresh

Eyes Grey

Hair Black

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

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

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

Scar Thumb L. Hand.

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 February 29t 1916. A O MacLaurin Lieut

Place Toronto, Canada. Medical Officer.

Toronto Recruiting Depot.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

John Alexander Crawford having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

(Signature of Officer) Capt

Date MAR 1 1916 191 .

REGIMENTAL DOCUMENTS

NAME CRAWFORD John Alec REGT. NO. 5722274 UNIT H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)				43696.	
	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob
1	MEDICAL EXAMINATION (M.F.W. 129)					
1	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
1	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	R/22					
2	6D3					
1	6D Europa					
1	P280					
1	Pc					

W. 2559
100M-11-18
47-2 39-1377

129

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Crawford. *Christian Name* John Alexander

Examined { on 29th day of February 1916 / at Toronto, Canada.

Birthplace { City or Town / County Co. Antrim, Ireland.

Apparent age 25 Yrs. 3 Mths.

Trade or occupation Lathe Hand.

Height 5 Feet 6½ Inches.

Weight 126 Lbs.

Chest measurement { Minimum 33 inches. / Maximum expansion 37 inches.

Physical development Good.

Small-Pox Marks Nil

Vaccination Marks { Arm Right. Left. 4 / Number 4

When Vaccinated last Childhood.

(a) Marks indicating congenital peculiarities or previous disease Nil

(b) Slight defects but not sufficient to cause rejection Nil

Approved by A T Maclaren

Rank Lieut M.O.

Toronto Recruiting Depot.

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.
27/3/16		Geo Porter Capt M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
21/3/16		Geo Porter Capt. M.O.
28/3/16		M.O.
3/4/16		M.O.

Enlisted on 29th *day of* February 1916 *at* Toronto, Canada.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	Div. Supply Column.	51227 4		
Transferred to	C.A.S.C.			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
BLANDFORD	6-5-19	Board Categ A	Discharged Cap Cam

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.

M. F. B. 313.
400M.—1-16.
H. Q. 1772-39-439.

DIVISIONAL SUPPLY COLUMN
C. E. F.

Surname Crawford Christian Name John Alexander

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	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.

F—122

LTR.

Rank Name CRAWFORD, John Alexander Reg'l No. 512274

Unit Dft 3/Div Supply Column. If in perm. Corps, What Unit? To C.A.S.C. - T.D. Married or Single Single.

Place and Date of Enlistment Toronto, Canada, 29th Feb, 1916, ~~Feb~~, Place of Birth County Antrim. Ireland.

Name and Address, Next-of-Kin Annie Crawford.

Lisrodden, Portglenone, Co, Antrim, Ireland. Relationship Mother.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No 6153
File R.L.
Category O.R. England

A.F.B. 100 CHECKED 2 JAN 1917

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	Rank	REMARKS. Taken from Official Documents.
		Arrived in England.	S.S. Metagama	5/7/16		
8.5.16	Casb to	T.D.S.	Casb to	Stonecliffe	5/7/16	Pte 129.
21.12.16	—	Sos on preceding Acct	—	—	21.12.16	— 356
27.12.16	Pool	Taken on Strength	Field		22.12.16	Pte IO *85
31-1-17	"	Posted to 1st Div Sup Col	"		31-12-16	Pte II O No 6.
17-1-17	1.D.S. Col	Taken on Strength fr. Earlsdon	— " —		1-1-17	Pte Pte II O. 4
20-3-17	3 Fld Amb	Attchd 3. F. A. for duty.	— " —		3-3-17	" Pte II O. 20. & Pte II O. 20. 10 DSC 24-3-17
19-6-17	Do.	Leaves to be attchd upto 1st D.A. Sup Col.	Field.		5-6-17	" — 1. — 13 F/F 32 10 Aug 23/6/17
1.5.18	CCTMTCoy.	T O S from 1 D.S.C.	Pte.	"	15.4.18	" — 1. 4 10 DSC Pte 14 d. 1.5.18
14-4-19	Cases	T.O.S. from field	"	Witley	12-4-19	
		Disch. in B. I (Demob)			23/3/19	N R 826.

5/12274 Crawford John Alexander

Report. Date.	Report. From whom received.	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.
17.6.19	C.C.T.M.T.C.	Proc to Eng & Posted CASCCD.	Le Havre	29.3.19	D037.
24-6-19	CalbCD	Sos. on Disch. in B.I.	Witley	23-5-19	DO. 150

Army Form B. 103. Regimental Number 5/2274

Casualty Form—Active Service.

Regiment or Corps 3 D.S.C. to cas C D

Rank ..... Surname Crawford Christian Name John Alexander

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...			
		arrived in England. S.S. Metagama			5.5.16
8.5.16	CasCD	TOS	Sheffe	5.6.16	Pte 129.
21.12.16	"	SOS Overseas.	"	21.12.16	— 356.
27.12.16	Pool	TOS	Field	22.12.16	— 85.
31.1.17	"	Posted to 1st D. Sup Col.	"	31.12.16	— 6.
17.1.17	1 D S Col.	TOS from cas Pool	"	1.1.17	— 4.
20.3.17	3 F. Amb.	Att. 3 F. amb:	"	3.3.17	— 20.
19.6.17	Do.	Ceases to be att.	"	5.6.17	— 43
1.5.18	CCTMTCoy	TOS from 1 DSC	"	15.4.18	— 1.
1.5.18	1 DSC.	SOS to C CT MT Coy	"	15.4.18	— 24

(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, &c

(17591.) Wt. W 1887—P 1124. 1,000,000. 6/18. D & S. Form B/103. (E. 1256.)

P.T.O.

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				
		DISCHARGED IN ENGLAND, K.R. & O. Par. 392, Sec. XXV.			
		J. V. Macleynolds Captain. Officer Commanding, No. 2 Canadian Discharge Depôt,			

Army Form B. 103—II.
Part II.

(SERVICE AND CASUALTY FORM Part II).

Regiment or Corps Pte Regimental Number 51227/4

*Substantative Rank Pte Surname Crawford Christian Names John Alexander

*Acting Rank

(* To be entered in pencil to facilitate alteration.)

(A) Report: Date.	(A) Report: From whom received	(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
26/5/19.	6th BD.		Proceeded to England & posted to Base Depot. Witley.		29/5/19	Ltr. 6th 3925. KA. 17/1665. Pte. C. 27/19
			J. G. Causon Capt. for Lt Col 1/c 6th R.D. Havre.			

To be folded on this line.

Nothing to be written in this margin.

W1889—PP1150 500,000 5/18 G.W.P.Co.(3490)

(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 to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer

Nothing to be written in this margin.

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

M. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

W.S.B. class "A" Casualty Form—Active Service.

DIVISIONAL SUPPLY COLUMN
C. E. F.

Unit, Regiment or Corps

Regimental No. 512274 Rank Private Name Crawford, John Alexander

C. E. F.

Enlisted (a) Feb 29/16 Terms of Service (a) D of W. Service reckons from (a) Feb 29/16

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) Cathe Land.

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36. or other official documents.
		Embarked	Canada	Apr 22/16	
		Disembarked	England	May 5/16.	
8/5/16.	Sqfd to	C.A.S.C. T.D. ~~(Auth) B2 Dated~~	Shorncliffe	8/5/16	Pt II O# 129.

CERTIFIED CORRECT.
12 JAN 1917
CANADIAN RECORD OFFICE, LONDON.
21 DEC 1916

O.C. C.A.S.C. T.D.

On draft Overseas C.A.S.C. SHORNCLIFFE 21 DEC 1916

Part II orders 56

Capt.
Adjutant, C.A.S.C., T.D.

DISEMBARKED HAVRE

22-12-16	% Can Base Depot	Having arrived at Can Base Depot as Reinforcements is taken on the strength of CASC Pool	Field	22-12-16	N.R. of Am. Pt II Orders 85 of 27-12-16
23-12-16	do	Left CBD for 1st B/M.T.D.		23-12-16	N.R.
25-12-16	1st B/M.T.D.	Arr. do		25-12-16	N.R.

(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.

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				
6-1-17	C/No 1 Can Div Sdl.	Struck off strength of C.A.S.C. Pool on posting to No 1 Can Div Sdl. (Ref Can Sect. H.R. 6/369.		31-12-16	B 213 Pt. II Ord No 2069 - 31.1.17.
		Taken on strength 1 C. Div. Supply Column.		1.1.17.	Pt. 20. No. 4, 17.1.17.
3.3.17	O.C. Unit.	attached as in War. Est. to 3rd. C.F. Amb.	Field.	3.3.17.	B 213a. Pt. 20. No. 20 dy - 24.3.17.
10.6.17.	3 C.F.A.	Ceases to be attd. to 3rd Fld. amb. as in W.E. on return to Column		5.6.17	B 213 Pt. 20. No. 32 dy - 23.6.17
8.12.17	O.B. No 610.86	Granted 14 days leave	Field	6.12.17	B 213a Pt 2. O. No 62 of 14.12.17
29.12.17	"	Rejoined from leave	"	23.12.17	" " 1 of 7.1.18.
18.1.18.	1st B.M.T.D.	arrived at. 1st B.M.T.D.		18.1.18	ARR No 121. (908)
27.1.18.	"	left. 1st B.M.T.D.		27.1.18	DER No 120 (220)
28.1.18.	"	Sentenced to forfeit 3 days pay for "When on active Service." Failing to comply with an order. i.e. when detailed to parade at 6.25 a.m. for fatigues failed to do. so. 25.1.18.		25.1.18.	B. 2069. Pt. 2. O. No. 5 of 6.2.18
	adj.	S.O.S. No 1 C.D.S.C. to Edm Fusrs Troops M.T. Coy.		14-4-18	B213 file 290/292 A.G. Edm. 7-1-19 / Pt II O. 24/15-5-18 Q.M. Gy.
	"	T.O.S. Edm. Fusrs Troops M.T. Coy. from 1 C.D.S.C.		15-4-18	Pt II O. 19/15-5-18 G.H.Q., Adl. file 290/292 1990 8/24-4-18
28.12.18	Unit	granted leave of absence	31-12-18 to	14-1-19	B213 Pt. II 5/1919.
4/3/19	4 YBD.	TOS		4/3/19.	~~B213~~. NR 2196

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. S72274 Rank PTE Surname CRAWFORD

(Given name in full) JOHN ALEX.

Unit or Corps CORPS DEPOT C.A.S.C. Birthplace PORTGLENONE IRELAND

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

1. GENERAL DESCRIPTION:

Physique GOOD Weight 135 lbs. Height 5 ft. 6½ in. Colour of Eyes BLUE

Nutrition GOOD

Pulse 78

Condition of arteries SOFT

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 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.

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at BLANDFORD (Overseas)

Date 6-5-19 Signed J.W. Bruce Capt Can Med M.O.

I hereby certify that I have read, or have Leard 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 John A Crawford

(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.)

No. 512274 RANK Pte. NAME Crawford. J A

T. O. S. 29-2-16
D. O. 9 29-2-16

UNIT Can. Army Service Corps. 3rd Div. Supply Column

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Feb. 29	1916 Feb. 29 Mar.	— —		

Dm E.

P. 880.

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

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

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, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

1. Christian names John A. 2. Surname Crawford

3. Rank Pte 4. Original Unit C.A.S.C. 5. Reg. No. 512274

6. Address, in full, to which future payments of gratuity are to be forwarded G.P.O. Port Glasgow. County Antrim Ire.

7. Date of enlistment in the C.E.F. 29/2/16 E

8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Annie Crawford.

9. Relationship of such dependent Mother.

10. Address, in full, of such dependent ~~Cuddy~~ Lisrodden. Pt. Glasgow Co. Antrim Ire.

11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? No.

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:—

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?

14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service.

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 29/2/16 to date of discharge with C.A.S.C.

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.

5434. Wt. /30P. 150,000(8). 2/19. S.O.,F.Rd.

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?~~

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 No.

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? No

24. Are you now serving in the C.E.F.? If not, give:—(a) Date of discharge (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 in which you served at the front, and dates of such service with that unit

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?

(b) If so, are you in receipt of full pay and allowances from that Department?

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 a crawford

Place of Residence: Tirroddan Portglenone Co Antrim Ireland

Declared before me at: Blandford Dorset

This 14 day of May 1919.

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths under P.C. 2767, dated 11th Nov., 1918.

MAJOR
OFFICER COMMANDING
C.A.S.C. CORPS DEPOT.

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due

Certified Correct.

District Paymaster.

SURNAME. Crawford

CHRISTIAN NAMES John Alexander

REGL. No. 512274 RANK Pte.

UNIT 3rd Div. Supply Column

FORMER CORPS 2½ Yrs 48th Highrs.

CARD NO.

SOS-Dis. 23-5-19 (p.m.s.) FOLL. G.S. (Orders Cpl. cancelled) 650

NEXT OF KIN.

NAMES IN FULL Crawford, Mrs. Annie

RELATIONSHIP TO SOLDIER Mother

ADDRESS Lisrodeden, Portglenone, Antrim, Ire.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Ireland. Co. Antrim DATE

PLACE OF ATTESTATION Toronto DATE 29/2/16

O/s 28-4-16, 392/05.

L. L. 90389.—M. & D. 6312.

M. F. W. 22. 100m.—1-16. H. Q. 1772-39-839.

MARRIED SINGLE yes WIDOWER

TRADE OR CALLING Lathe hand RELIGION Presbyterian

DESCRIPTION.

APPARENT AGE 25 YEARS 3 MONTHS

HEIGHT 5 FEET 6½ INCHES

CHEST MEASUREMENT 37 INCHES EXPANSION 4 INCHES

COMPLEXION ~~Sallow~~ Fresh EYES Grey HAIR Black

DISTINGUISHING MARKS Scar, thumb left hand.

MEDICAL EXAMINATION. PLACE Toronto DATE 29/2/16

ORIGINAL.

P. 851.

LAST PAY CERTIFICATE.

Military District.....

Dispersal Area.....

No. 51227 Rank Pte Name CRAWFORD J A Unit Case

Nominated for ~~embarkation to Canada~~ discharge overseas Date 20/5/19 Hdqrs 2B

CREDIT.	$	¢
BALANCE FORWARD as at 30/4/19 191	51	95
EARNINGS:—		
From 1/5/19 to 20/5/19		
20 days at $ 1.10	22	
..... days at $		
..... days at $		
ANY OTHER CREDITS:—		
Interest on Deferred Pay nil		
.....		
.....		
X BALANCE DEBIT		
	73	95

PAID

DEBIT.	$	¢
CASH PAYMENTS:—		
23/4/19 A.R. No. 11 ✓ Paying Unit. Amount 4 87		
7/5/19 553 9 73		
11/5/19 786 24 33	38	93
OTHER CHARGES:—		
.....		
.....		
WAR LOAN INSTALMENTS CHARGED:—		
.....		
X ASSIGNED PAY for period from 1/5/19 to 31/5/19 at $ 15 per month in favour of:—	15	
Name Mrs Annie Crawford		
Address Inverdenwat Glenorme Co Antrim Ire		
Relationship		
X SEPARATION ALLOWANCE, if any, in favour of same party as Assignment at $ 20 per month 1/5/19 - 20/5/19 .. 19 35		
X BALANCE CREDIT 20 0 ✓ Deferred Pay nil	20	0 ✓
	73	95

"VICTORY" WAR LOAN

Amount Subscribed - $.....

Amount Paid - - .....

Balance due - .....

I hereby Certify that I am satisfied that the balance of my account as shown on this statement is correct.

John A Crawford
(Signature of Soldier.)

BALANCE GIVEN IS SUBJECT TO ANY CHARGES AND/OR CREDITS ENDORSED ON THE REVERSE HEREOF.

23.30
73.30
£4 15 10

THESE PAYMENTS TO DEPENDENTS:— X (Strike out whichever inapplicable.)

X Have been stopped. Effective 1/6/19 191 and will only be re-opened on receipt of instructions from P.M.G., Ottawa, or Military District Paymaster, Canada.

or

X Being a Canadian Payment, cancellation or otherwise of future payments will be dealt with by Ottawa.

COMPILED BY J McGee

CHECKED BY Sinclair

CERTIFIED CORRECT ..... Capt. Lieut

Date 19-5-19

FOR BRIGADIER-GENERAL
PAYMASTER GENERAL, O.M.F.C

ENDORSEMENTS.

DEBITS AND/OR CREDITS SUBSEQUENT TO ISSUE OF L.P.C.

PRIOR TO COMPILATION OF STATEMENT BELOW.

DATE.	UNIT.	A.R. NO. OR OTHER PARTICULARS.	AMOUNT. CR.	AMOUNT. DR.	PAYMASTER'S SIGNATURE.
23-5-19	Discharged.	Pd Underwoods			
	21-5 to 23-5-19 3 days @ 1/2		3 30		[signature]

EXPLANATION OF DEBIT BALANCE :—

STATEMENT OF ACCOUNT.

DATE	PARTICULARS.	DR.		CR.	
	Balance on proceeding to Canada - - -				
	Pay and Allowance from.....to.....				
	Civilian Clothing Allowance - - - - -			35	00
	Advance on account of War Service Gratuity -			70	00
	Assigned Pay for month of.....				
	Boat Expense Money - - - - - -	4	87		
	Train Expense Money - - - - - -	5	00		
	Cheque No..... Balance -				

DEBITS AND/OR CREDITS SUBSEQUENT TO COMPILATION OF ABOVE STATEMENT OF ACCOUNT

DATE.	PARTICULARS.	AC., ROLL NO.	AMOUNT. Dr.	AMOUNT. Cr.	SIGNATURE OF PAYING OFFICER.

PLACE OF EMBARKATION.....

DATE OF EMBARKATION.....

PLACE OF DISEMBARKATION.....

DATE OF DISEMBARKATION.....

H.M. TRANSPORT.....

R

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

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.

NAME OF SOLDIER (Block letters) CRAWFORD, J. A.

REGIMENT C.A.S.C., M.T. RANK Pte. No. 512274

Date of Examination in England 8-4-19 | Date of Examination in France

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 31
2. EXTRACTIONS 2. 3. 32
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? No.

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

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

Signature of Dental Officer W. Rose Capt

25M.—12-18.
T.Q. 1772-39-950

Regional No...... **MEDICAL HISTORY OF—** A.F. B.178.

Regimental No. 512274 *Region*.....

Surname Crawford *Christian Names* John Alexander

TABLE I.—General Table.

Birthplace { Parish..... County Coomby Antrim

Examined { on 29th day of February 1916. at Toronto Canada

Declared Age 25 years 3 days.

Trade or Occupation Lathe Hand

Height 5 feet 6½ inches. Weight..... lbs.

Colour of Hair Black Complexion Fresh

,, Eyes Grey

Chest Measurement { Girth when fully expanded 37 inches. Range of expansion 4 inches.

Physical development .....

Vaccination Marks { Arm, RIGHT. LEFT. Number .....

When Vaccinated.....

Vision { R.E.—V=..... With Glasses { R. L. L.E.—V=.....

Identification Marks, such as Tattoo, Moles, Scars, etc.:—

.....

.....

Defects or Ailments :

.....

.....

Examined and found—

Fit for Grade { I. II. III. IV.

(Strike out those which do not apply.)

Signature .....

Chairman of Medical Board.

Re-examined for posting at .....

On.....day of .....191...

Enlisted { at ..... on.....day of.....19...

	Corps.	Regtl. No.
Joined on enlistment		
Transferred to		

TABLE III.—Boards, Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service; Extension, Re-engagement, or Prolongation of Service, Issue of Surgical Appliances, Particulars of Dental Treatment, etc.

Date.	Brief details and Signature.

Special Remarks: state if a discharged Soldier

.....

.....

.....

.....

TABLE IV.—Service Table.

Station or Troopship.	Date of arrival or embarkation.	Date of Departure or disembarkation.

Became non-effective by .....

on.....day of.....191...

(Signature).....

(Rank).....

M833 Wt.12046/437 400,000 7/18 CLdP 334.

TABLE II.—Only for admissions to Hospital or to the Sick List in Case of Warrant Officers treated in quarters.

Name of Hospital.	Admitted to Hospital.			Discharged from Hospital.			Disease.	Number of days in Hospital.	Remarks bearing on the cause, nature, or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer.
	Day	Month	Year	Day	Month	Year				

Form P. 812B
7961 10m 1/5/19 D.671

FILE NO. 6431

WAR SERVICE GRATUITY and SEPARATION ALLOWANCE

5122704.

Payable to CRAWFORD. John Alexander. Dependent Mrs Annie Crawford

Address Lisnadden Partglenone Address (mother)

Co Antrim. Ireland

Date	Cheque No.	Gratuity	Payments	Balance Due.	Remarks
May 23	17786		14 7 8		N.I Bal ✓
	17787		6 3 3	20 10 11	
June 30		86 6 0			
30		36 19 9			
30	47068		14 7 8		
30	47069.		6 3 3	82 3 11	
July 23	61723		14 7 8		3 Instal
23	61724		6 3 3	61 13 0	3 "
Aug 18	76388		14 7 8		4 "
18	76389		6 3 3	41 2 1	4 "
Sep 11	98517		14 7 8		5 "
11	98518		6 3 3	20 11 2	5 "
Oct 16	124905		14 7 8	0	Final
16	124906		6 3 6	6	
		123 5 9	123 5 9		

L. L. Job 95618—M. & D. 6555.

6030

Duplicate

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

2nd Contingent

M. F. W. 12.
15m.—3-16.
H. Q. 1772-39-819.

a.f. & a. attached Mrs. Crawford Paper

To Whom Annie Crawford
Address Lisroddan Fort Aldenove County Antrim Ireland

By Whom Assigned Crawford. J.A.
Regtl. No. 512274
Rank Pte.
Corps 3rd D.S.C.

Rate 15.00 MAY 1 1916

OK Allowance Off

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				

RECEIVING SEPARATION ALLOWANCE $ 20
EFFECTIVE Mar 1916
RELATIONSHIP Dep Mother

RECEIVED FROM
MAY 10 1916
OTTAWA.

ASSIGNED PAY.

By whom assigned Crawford, J.A.

Regtl. No. 512274 Pte. 3rd D.S.C.

Month	Year	Cheque No.	ASSIGNED PAY Amt.	SEPARATION ALLOWANCE Pay Sheet	REMARKS.
Jan.	1916				
Feb.					
March					
Apl.					
May.					
June	✓	81744	30.		
July		87964	15		
Aug.		121991	15		
Sept.		151967	15		
Oct		187990	15		
Nov	105	230511	15 105		
Dec.		271012	15.		
Jan.	1917	313015	15	220	TOTAL SEP. ALL. PAID TO 31 JAN. 1917, FROM SEP. ALL. LEDGER.
Feb.		353916	15	20	
March		395320	15	20	
Apl.					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

2769

M. F. W. 11a.
60m.—12-15.
1772—39—818.

OVERSEAS CONTINGENTS

PAYMENTS

Sheet No. 2. Mrs. Annie Crawford wife

Name of Soldier Crawford John Alex. Pte.

L. L. Job 89002.—Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			40
May				
June				
July				
Aug.				
[redacted]				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
[redacted]				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

SEPARATION ALLCE. BRANCH
APR 17 1916
CANADIAN CONTINGENT

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

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.				

L. L. Job 88773—M. & D. 6195.

1 — 3 — 16

Duplicate folio No.

M. F. W. 11.
20m.—11-15.
H. Q. 1772-39-818.

MILITIA AND DEFENCE

SEPARATION ALLOWANCE 2769

Name Mrs. Annie Crawford Lisrodden.

Address Portglenone, Co Antrim Ireland

Relation to Soldier wife, child or mother } ~~Dependent~~ ~~widowed~~ mother

Name of Soldier Crawford, John Alexander

Regtl. No. 513874

Rank Pte.

Corps #3 Dvn. Supply Col.

To what Corps belonging when called out

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

Marriage Certificate Produced MAY [illegible]

Marr: 21-3-88.

SEPARATION ALLOWANCE BRANCH APR 17 1916 CANADIAN CONTINGENT

File this sheet

more details asked for 8/5/16 Rwd

Pay

See new sheet in ledger.

L. L. Job 95618—M. & D. 6555.

273

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

2nd Contingent

M. F. W. 12.
15m.—3-16.
H. Q. 1772-39-819.

E
9R

Mrs.

To Whom Anne Crawford
Address Port Glenone
County Antrim
Ireland

Rate $15.00 MAY 1 1916

By Whom Assigned Crawford. J A.

Regtl. No. 512274

Rank Pte.

Corps 3rd D.S.C.

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			Duplicate sent to Eng.
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

ENGLISH

1 — 3 — 16

L. L. Job 88773—M. & D. 6195.

MILITIA AND DEFENCE

M. F. W. 11.
20m.—11-15.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE 263

Name Mrs. Annie Crawford

Address Portglenone,
Co. Antrim
Ireland

Relation to Soldier wife, child or mother } widowed Mother

Name of Soldier Crawford, John alex.

Regtl. No. 372274

Rank Pte.

Corps # 3 Divisional Supply Co.

To what Corps belonging when called out }

Cost

PAYMENTS

ENGLISH

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				Duplicate sent to England for payment. MAR 30 1916
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
60m.—12-15.
1772—39—818.

Sheet No. 2.

L. L. Job 89002.—Req. 6213.

Mrs Annie Crawford widowed mother Name of Soldier Crawford, John Alex

Pte. 312274

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				Duplicate sent to England for payment MAR 30 1916
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

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.				

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ENGLAND or ~~CANADA~~.	SEPARATION ALLOWANCE. * ENGLAND or ~~CANADA~~.
EFFECTIVE DATE:- 1.5.16	EFFECTIVE DATE:- 1.3.16
AMOUNT:- 15.00	AMOUNT:- ~~25.00~~ 30 00
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.
Mrs. Annie Crawford Lisroddery Port ~~of~~ Glenone Co. Antrim Ire.	Same.
Stopped off 1/6/19	Stopped off 21/5/19
	Now Leave ~~Pass~~ 35 Pass 19 Sept 1921

NAME:- CRAWFORD John Alex.
NUMBER:- 51227

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private

UNIT AND TRANSFERS

ORIGINAL UNIT:- 3 D.P.B.
DATE ACCOUNT FIRST OPENED:- 1.5.16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			Cn. 6 22

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
~~2/4/19~~	112	~~4 8~~		Balance per S.B.			58 95
~~2/5/19~~	553	~~9 7 3~~		Extract			38 93
~~7/5/19~~	986	~~24 33~~		Balance per S.B.			20 02

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE:- Demobilised 20/5/19 2 C.D. 17/5/19 D.B.

Month	PARTICULARS	Cr. 1	Cr. 2.	PARTICULARS	Dr. 1	Dr 2.	Dr. 3.	Dr. 4.	BALANCE	DEFERRED	SEPARATION
Apl.				Bal. Fwd.					52 66		
	P Pay	33		A5607 L.S.D.			15		70 66		25
				5 A.R. 430 16 m 2 bde. 2/4	357				66 49		
				1 " 145 6 le 26. 5/4	446				62 63		
		33			803		15				25
May		34 10							96 73		
				A05704 L.S.D.			15		81 73		25
				1 A.R. 614 6 m 2 bde. 9/5	446				77 27		
		34 10			446		15				25
June		33									
				11 3172 L.S.D.			15		95 27		25
				2 A.R. 866 M.T. Col 5/6	357				91 70		
		33			387		15				
July		34 10									
				Convy L.S.D.			15		110 80		25
				2 A.R. 1026 N.Z.M.J. 5/7	446				106 34		
				1 A.R. 1137 " 18/7	357				102 77		
		34 10			803		15				25
Aug		34 10									
				Cuffe L.S.D.			15		121 87		25
				2 A.R. 1328 N.Z.M.J. 5/8	357				118 30		
				2 A.R. 1529 " 20/8	357				114 73		
		34 10			714		15				25
Sept.		33		A.3441 L.S.D.			15		132 73		25
				A.R. 1756 N.Z.M.J. 5/9	357				129 16		
				A.R. 1992 " 17/9	357				125 91		Cheque 24/9/19
		33			714		15				25

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									12 5 9		
Oct		3 4 10		D 59969. £ 84.5			15		14 4 19		35
				AR 3051 66 K2 19/10	3 13				14 0 9 6		
		3 4 10			3 13		15				25
Nov		33		D 93185 £ 11.6.1			15		15 8 9 6		1 4 0
				AR 2633 K2 M 7 15/4	18 6 6				14 0 3 0		
Dec		3 4 10		653785 £ a.u.11	18 6 6		15		15 9 4 10		30
Jan		3 4 10		7918 £ 9.u.11			15		17 8 5 0		30
		10 1 20			18 6 6		45				100
Feb		30 8 0		£ 75771 £ 9-4-11			165		19 4 3 0		30
				CL 96197 L 5 31/12/18	18 6 7	✓			14 5 6 3		
				8/37 C S C. 31/12/18.	9 7 3 3	✓			4 8 3 0		
Mch		3 4 10		£ 9. u. 11	10 6		15		6 7 4 0		30
		6 19 0		130/1139 C L a. 8/Y	9 7 3				5 7 6 7		
				14 4/158 U B D 11/3	9 3 3		3 6		4 8 3 4		
		6 1 9 0			16 5 0 6		30				60
Apl		33		Q N 5 5 6 4 £ 9. u. 11			15		6 6 3 4		30
				2/1500 L B D 24/3	4 6 6				6 1 6 8		
				12/344 R w n g 8/4	9 7 3				5 1 9 5		
May		22		a 76960 £ 7-1-2			15		5 8 9 5		19 3 5
				31/112 23/4	4 8 7				5 4 0 8		
				53/553 R t e r 1/5	9 7 3				4 4 3 5		
				62/796 B f o r d 7/5	24 33				20 0 2		
		55			53 3 2		30				
	21/5. 23/5 b r o n t i c.	3 3 0		a 95 731 £ 0-12-0					23 3 2		29 7
				155. 23. 5. 19 Discharge	23 32				N I L		
		9 3 3 0			23 32						

MARRIED OR SINGLE: Single

PLACE OF BIRTH: Co. Antrim, Ireland

NAME AND ADDRESS OF NEXT OF KIN: Annie Crawford. Lisrodden, Portglenone, Co Antrim Ireland

RELATIONSHIP OF NEXT OF KIN: Mother.

NAME AND ADDRESS OF NEXT OF KIN:

RELATIONSHIP OF NEXT OF KIN:

SEPARATION ALLOWANCE MONTHLY $ ~~25~~ 1/1/17 EFFECTIVE (DATE) 1.3.16

PAYABLE TO Mrs Annie Crawford Lisrodden Portglenone, Co Antrim Ireland

RELATIONSHIP OF DEPENDANT Widow of Mother

A.P.+A.A. checked C Pepper

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L. NO. 512274 RANK Pte NAME Crawford J. & John Alexander E

IF IN PERMT. CORPS WHAT UNIT — UNIT 3rd D.S.C (cases D)

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION Toronto.

DATE OF ATTESTATION 29th Feb 1916.

TRANSFERRED TO 1st D.S.C	DATE 16.2.17	AUTHORITY 10.0 3/2/17
TRANSFERRED TO ~~3rd Bn.~~ 3rd Can. Fd Amb	DATE 11/8/17	AUTHORITY June A. Rolls
TRANSFERRED TO 1st Div Sup Col	DATE 1/11/17	AUTHORITY Nom Roll
TRANSFERRED TO	DATE	AUTHORITY

E

ASSIGNED PAY MONTHLY $ 15.00 WM1 DATE EFFECTIVE 1.5.16

PAYABLE TO Annie Crawford Lisrodden Port Glenone County Antrim Ireland RELATIONSHIP Mother

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

E

DATE	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 DATE	2 No.	2 DATE	3 No.	3 DATE	4 No.	4 DATE	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
April	30													21 40	21 40																21 40				Canada
May	31	1.00	31	-	31	10	3	10							34 10	1321	1428.							9 73	14 60			15		39 33	16 14 N				
June	30	"	30	-	30	"	3	-							33 .													15		15	34 14				
July	31	"	31	-	31	"	3	10							34 10	1840	1976							9 73	14 81			15		29 60	38 64				
Aug	31	"	31	-	"	"	3	10							34 10		2275 15/8								9 73			15 -		24 73	48 04				
Sept	30	"	30		30		3								33		4/3/17 31/7							4 87	9 73			15		29 60	51 64				
Oct 13	31	"	31		31	"	3	10							34 10		2607 30/9		4481 1/10					4 87	9 73			15		29 60	55 94				
Nov.	30	"	30		30		3								33		2907 31/10		2907 15/11					4 86	9 73			15		29 59	59 35				
Dec	31	"	31		31		3	10							34 10		3106 31/11		3446 15/12					4 86	14 60			15		34 46	58 99				
1917			24 50																															
Jany	31	1.00	34 10												24 10													15		15	78 09				
Feb. 1-15	15	1.00/10	16 50												16 50													15		15	79 59				
16-28	13		14 30												3.41 50 14 30		837 2/2/17			13/1				5 23		2 61 2 67 4 34		150		7 84	86 05				
March	31	1.10	34 10				2 60								2 60 34 10		865 15/3			1st 1/3 2nd 31/3 1139 3rd Dec				5 23		2 61		1526		2 60 24 2	92 94				
															260 00																				
Total			368 50				260							21 40	389 90									46 77	72 99	12 20		165 00	260 00	556 96					

Pd 6.10.16. D.A. 3/11/17

Acct 31.3.17

5122 PH Pte Crawford J.A.

DATE 1917	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
Mch 31	Sold		36	85	0		26	0						21 40	6 H 99									46	77	72	99	12	20	165 00	260		55	96	92	94				
Apl	30	1 10	33				20							53	53 00					31	4/2	48478					34	9		15	20		38	49	107	45				
May	31		34	10			20								5H 10							56784								15	20		35		126	55				
June	30		33				20								53 -			3 Hd Amb		107	7/5						3	57						137						
																				80	20/4	a 25906					3	49		15	20		42	06	137 49		✓	137 49	
July	31		34	10			20								54 10							a 104226								15	20		35	-	156	59		✓	156 59	
																						a 128025								15	20		35		152	59				7th Hd to 7th Can. I. Amb. 11-8-17
Aug 1-10	10		11				20								31									3	57				15	20		7	14	168	55				
11			23	10											23 10	141	15/5													15	20		35		186	55				
Sept			33				20								33	193	5/6					198142		3	57															
																						↓																	
																						996								15	20								

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
Oct 1	C/Bal	~~186~~ 211 55.							186 55.		
	PP.	34 10.		B 996			15				
				AR. 385 1st C Cut Bk 15/11/17	2 68.						
				" 561 15th Bk 29/11/17	2 67						
				" 848 CC Sub Col 19/6/17	2 67.						
				" 1014 " " " 3/7/17	2 68						
				" 1693.1 3rd SW " " 7/7/17	2 67.						
				" 1500 " " " " 23/8/17	2 67						
				" 1320 " " " " 28/8/17	2 68				186 93.		
		34 10			18 72		15				
Nov	P.P.	33		B. 30423 £7.3.10			15				
				AR 1962 1256. 5/10/17	# 46						
				AR 2017 " 18/10/17	3 57						
				AR. 1796 " 20/9/17.	2 67						
Dec	P.P.	34 10		C 1043. £8.4.5 (Dec)			15				
				Cl. 2352. 8/12/17	73				140 33		
Jan 1	P Pay	67 10			85 70		30				
		34 10		C 6667 £6.4.5			15				
				AR 1941 5/12 CCSC	97 33						
				" 2273 17/1 "	12 49						
				2231 25/1 "	4 46						
		34 10			114 78		15	45 15		25	

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
									45 15		
									60 95		
									15 79		25
Jany		30 80		CK 16006 £8.4.5						15	
				AR 2755. 6646. 1/1/18		4 46					
				" 3192 Deduction 31/1		3 57					
				3 days pay and Parkin 33/1/4 D0 5037 1/1/18 10.2.Ca							
						330					
				AR 3023 CCSC 5/2		4 46				45 16	25
		30 80				17 89				64 26	25
Mch		34 10		D 50507 £8.4.5		330				15	
				AR. 3107 6626 19/2		3 57					
				" 3162 " 5/3		4 46					
				" 3463 " 19/3		8 03					
						3 57				52 66	
						11 60				15	25

Number 5-12274 Rank Pte

Surname CRAWFORD

Christian Name John Alexander

Units L.A.S.C. Theatre of War France

Date of Service 22-12-16

Remarks

Latest Address Lisrodden Portglenone
Co. Antrim Ireland

Roll No. W.R. Regt 21048

200m.-6-21.M.

(over)

DATE AND PLACE OF ORIGIN

*DUE TO SERVICE
*NOT DUE TO SERVICE

SPITAL AS AN ADMISSION

WHERE FROM)

IT

IN CATEGORY

INVALID

WHERE TO)

DITIONS DIAGNOSED

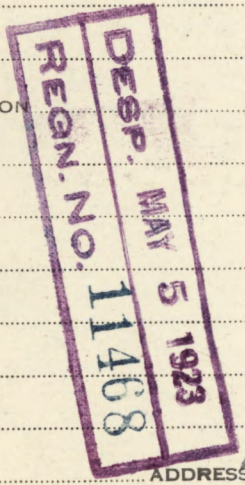
ADDRESS

HOSPITAL

STATION

* CROSS OUT CONDITION NOT APPLICABLE.

(OVER)



15-11

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 512274

2 Rank. Pte

3. Name. Crawford John Alexander

4. Unit. C.A.S.C.

5 Date of Discharge 23/5/19 Place 2 C.D.D.

6 Reason for Discharge

K. R. & O. Para. 392 Sec. XXV
(Being Demobilized in England-C.R.O.5222)

7. Authority. D.B. 2.P.2268 17.5.19

8. Proposed Residence after Discharge

Lisrodden
Portglenone, Co Antrim Ireland

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.? A 7/3 2079

John A Crawford
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place No. 2 CANADIAN DISCHARGE DEPOT LONDON

Date 23/5/19

Signature A Lieut Colonel
(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-118.

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

Army Form B. 103—2.
Part II.

(SERVICE AND CASUALTY FORM Part II).

Regiment or Corps Casc T D. Regimental Number 512274

*Substantative Rank ____ Surname Crawford Christian Names J. A.

*Acting Rank ____
(*To be entered in pencil to facilitate alteration.)

To be folded on this line.

Nothing to be written in this margin.

(n2638.) Wt. W. 9693—P. 2068. 500,000. 3/19. S. & S., Ltd. E. 4602.

(A) Report. Date.	(A) Report. From whom received.	(B) Authority of Part II. of Orders.	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty.	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer.
			Arrived in England. S.S. Metagama		5/6.	
8/6/16	CascTD	P II/129	TOS.	Sheffe	5/6.	
21/12/16	—"—	—356	SOS Dead.	"	21/12/16.	
27/12/16	Pool	—85	TOS.	Field	22/12/16.	
31/1/17.	"	—6.	Posted to 1 D S C.	"	31/12/16.	
17/1/17.	1 D S C.	—4	TOS from casual	"	1/17.	
15/8	C C T M T	—1	TOS from 1 D S C.	"	15/4/18.	
15/8	1 D S C	—24	SOS to C C T M T Coy	"	15/4/18.	

Disch in B. I. (Dep't) 23/5/19 as 19826

D. Dwen Capt
for Lt Col I/C Records

(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 to be invariably named.	Place of casualty.	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer.

Nothing to be written in this margin.

Name Crawford Enl. 29-2-16.

Date of Embarkation for England 22-4-16.

Proceeded to France 21-12-16 Returned to England 29-3-19

demob.

Date returned to Canada

P.R.2855.

L.G. & M. Eng "Loftkit" 21-12-29

S—203

1-3-16

Copy of Attested Sheet.

Folio 2769

MILITIA AND DEFENCE.

SEPARATION ALLOWANCE.

Name Mrs Annie Crawford

Address Lisrodden
Portglenone
Co. Antrim
Ireland.

Relation to Soldier wife, child or mother Dependent Mother

Name of Soldier Crawford John Alexander

Regtl. No. 52274

Rank Pte

Corps. #3 Div Supply Col.

To what Corps belonging when called out

PAYMENTS.

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			Marriage Certificate Produced May 5 1915. Married 21/3/88. Mothers Dependency verified by statutory declaration and Doctors certificate of total incapacity of husband
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

FILE

MILITIA AND DEFENCE. S. 203.

SEPARATION ALLOWANCE.

Name of Dependant: Mrs Annie Crawford
Relation to Soldier: Dependent Mother
1 Lisrodden 3
Portglenone
P.O. Co Antrim P.O.
2 Ireland 4
P.O. P.O.

Name of Soldier: Crawford John Alexander
Regtl. No. 51227
Rank Pte
Corps # 3 Div Supply Col
To what Corps belonging when called out

Month.	Year.	Cheque No. or Postal Draft Book No.	Amount. $ c.	Amount. £ s. d.	Date.	£ s. d.	REMARKS.
		Brought Forward ...					
Apl.	1916						
May							
June		A. 3455	80 -	16 8 9	24-6-16	✓	80 - £16.8.9 44
July		B. 33394	20 -	✓			
Aug.		B. 42988	20 -				
Sept.		B5-0015	20	✓			
Oct.		B59758	20 -				
Nov.		B 75510	20				
Dec.		B. 86888	20 -	✓			
Jan.	1917	B. 98974	20 -	✓			
Feb.		K. 220					Total Separation Allowance paid to end of January 1917
Mar.							
Apl.							
May							
June							
July							
Aug.		TRANSFERRED TO ASSIGNED PAY LEDGER.					
Sept.							
		ENTERED				CHECKED	
		Carried Forward ...					