

T. J. L. C. 642640

ATTESTATION PAPER.

No. *642640*

15th U. S. Bn., C. E. F.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

- 1. What is your surname? *Crichton*
- 1a. What are your Christian names? *Jack*
- 1b. What is your present address? *Collingwood Ont. Can.*
- 2. In what Town, Township or Parish, and in what Country were you born? *Belfast Ire.*
- 3. What is the name of your next-of-kin? *Jack Crichton*
- 4. What is the address of your next-of-kin? *Belfast (Castle Villa Donegal Park)*
- 4a. What is the relationship of your next-of-kin? *father*
- 5. What is the date of your birth? *1 June 1888*
- 6. What is your Trade or Calling? *Salesman*
- 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? *no*
- 10. Have you ever served in any Military Force? *no*
If so, state particulars of former service.
- 11. Do you understand the nature and terms of your engagement? *Yes*
- 12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } *Yes*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Jack Crichton*, 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.

Jack Crichton (Signature of Recruit)
A. Burman (Signature of Witness)

Date. *14 December 1915*

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Jack Crichton*, 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.

Jack Crichton (Signature of Recruit)
A. Burman (Signature of Witness)

Date. *14 December 1915*

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 *Collingwood* this *25th* day of *Jan* 191*6*
W. G. Duggan (Signature of Justice)

Description of Jack Crichton on Enlistment.

Apparent Age 27 years 8 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 35 1/4 ins.
 Range of expansion 3 1/4 ins.

Complexion Fair

Eyes blue

Hair Light brown

Religious denominations { Church of England
 Presbyterian Yes
 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 declares that he is not subject to fits of any description.

I consider him Fit for the Canadian Over-Seas Expeditionary Force.

Date December 14 1915 Collingwood

Place Collingwood Daniel McKay
 Medical Officer.

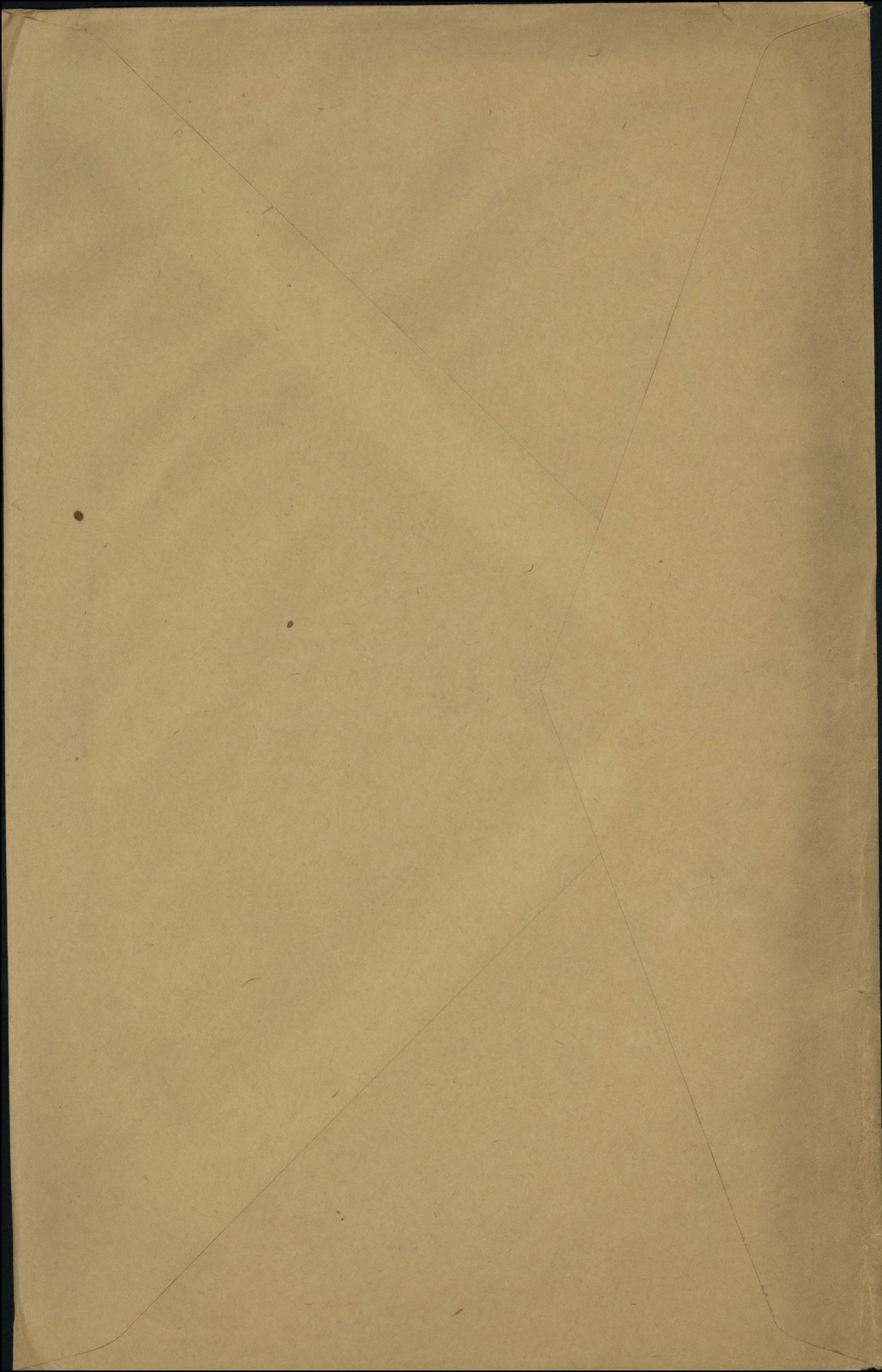
* Insert here "fit" or "unfit."

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.

Jack Crichton 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.

Date 1st Feb 1916 D. MacLachlan (Signature of Officer)
 Lt. Col.
 Com'd'g, 157th, Battn, C.E.F, Barrie



FORM OF WILL.

I, Jack Cuighton, (Name in full)

Regimental Number 642640 serving in 157th O. S. Bn.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I bequeath all my real estate unto

<u>John Cuighton,</u>	} Name and Address of person or persons to whom it is to go.
<u>Castle Ville, Donegal Park,</u>	
<u>Belfast, Ireland,</u>	

absolutely, and my personal estate I bequeath to

<u>John Cuighton,</u>	} Name and Address of person or persons to receive personal estate* (See note).
<u>Castle Ville, Donegal Park,</u>	
<u>Belfast Ireland,</u>	

IMPORTANT NOTE this 29th day of Sept A. D. 1916

**This must be Signed
and Dated by
THE SOLDIER
HIMSELF.**

Jack Cuighton, Signature of Soldier.

*N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

Signature of First Witness G. E. McLenn,

Address of Witness 157th O. S. Bn.

**THE TWO
WITNESSES
MUST
SIGN HERE**

Occupation of Witness Major,

Signature of Second Witness A. K. Moir,

Address of Witness 157th O. S. Bn. C.E.F.

Occupation of Witness Lieutenant.

ESTATES BRANCH

DEC 4 1916

MILITIA DEPT.

CERTIFIED A TRUE COPY

H. Spencer Repp

OFFICER IN CHARGE, ESTATES, M. & D.

FORM OF WILL.

I, Jack Cushton (Name in full)
Regimental Number 642640 serving in 157th O.S. Bn
of the Canadian Expeditionary Force, do hereby revoke all former Wills by me
made and declare this to be my last Will.

70736

I bequeath all my real estate unto

John Cushton
Casite Villa, Donagall Park
Belfast Ireland
Name and Address
of person or
persons to whom
it is to go.

absolutely, and my personal estate I bequeath to

John Cushton
Casite Villa, Donagall Park
Belfast Ireland
Name and Address
of person or
persons to receive
personal estate*
(See note).

**IMPORTANT
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This must be Signed
and Dated by
THE SOLDIER
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this 29th day of Sept A. D. 1916

Jack Cushton Signature of Soldier.

*N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything
except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence
of us both present at the same time, who in his presence, at his request, and in
the presence of each other have hereunto subscribed our names as Witnesses.

**THE TWO
WITNESSES
MUST
SIGN HERE**

Signature of First Witness John Cushton

Address of Witness 157th O.S. Bn

Occupation of Witness

Signature of Second Witness J. P. McNeil

Address of Witness 157th O.S. Bn C.E.F.

Occupation of Witness Lieutenant

FORM OF WILL

I, _____ of the County of _____ State of _____ do hereby certify that I am of legal age and sound mind and feeling this to be my last Will

I bequeath all my real estate unto _____

Name and Address of person or persons to whom it is to go

Name and Address of person or persons to receive personal effects

My last Will and Testament I bequeath to _____

I have and remain sane of mind at the time I make this my last Will in which I have disposed of all my property and in the presence of _____ who in my presence at the time and in the presence of _____ other persons have signed and witnessed the same

Signature of testator _____

Signature of second witness _____

Occupation of witness _____

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

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

350M. 5416

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 157th Bn O.S.
 Regimental No. 642640 Rank Rte Name Brighton Jack
C. E. F.
 Enlisted (a) 12/12/15 Terms of Service (a) Amputation two Service reckons from (a) 15/12/15
 Date of promotion to present rank } 8/3/16 Date of appointment to lance rank } Numerical position on roll of N. C. Os. }
 Extended Re-engaged Qualification (b) a salesman
Sergeant

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	17/10/16	
		Arrived	England	28/10/16	14.10.16
16/11/16	157	Appointed as Sgt	Bramshott	1/11/16	D.O. 150. 6/11/16
8/12/16	157	Trans to 125 th	Bramshott	8/12/16	D.O. Pt 11 172
9/12/16	125 th Ch	Taken on Strength	Witley	8/12/16	Adjutant, 157th O.S. Bn., C.E.F. Part II Order 300. 175 th Bn can inf
24/5/17	125th	Decreded overseas for service with 125th Bn	Witley	23/5/17	Part 2 order 144

(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.

Casualty Form - Active Service

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				
19.5.17	CE 125th	Reverts to permanent grade on proceeding overseas.	Witley	19.5.17	Part II Orders No. 139. R.B. Burnell Lieut Asst. Adjutant 125th (Cdn) Inf Bn.
24.5.17	CE 125	Proceeded overseas for service with 4th Bn	Witley	23.5.17	Part II Orders No. 144 R.B. Burnell Lieut Asst. Adjutant 125th (Cdn) Inf Bn.
26-5-17	C.B.D.	Reinforcement	C.B.D.	24-5-17	Pt 2 O. 59 d/- 6-6-17.
12-6-17	1st En Bn	Attach. 1st En Bn.	Field	12-6-17	N.R. Pt 2 O. 65 d/ 30-6-17
16-6-17	do	Is appointed Act-Cpl. "With Pay" while attach. 1st En Bn	Field	13-6-17	B.213 Pt 2 O. 65 d/30-6-17
30-6-17	4th Bn	Arrived Unit	do	24-6-17	B.213 D.C.S.
24-6-17	1st En Bn	Reverts to permanent grade on ceasing to be attached En Bn	do	24-6-17	N.R. Pt 2 O. 68 d/11-7-17.
5-7-17	No.2.E.F.A.	A. Died of Wounds	No.2. C.F.A.	5-7-17	Cas. Rep & K.I. 16-13010 Pt 2 O. No.68 d/ 11-7-17.
					Lieutenant For Lt-Col A.A.G. Can. Section.

CERTIFIED CORRECT
 3 - JUL 1917
 CAN. RECORDS, LONDON

Chas. D. Maxwell

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H. Q. 1772-39-819

To Whom *Mrs. J. J. Swan,* By Whom Assigned *Crichton, Jack*
Address *P.O. Box 996,* Regtl. No. *642640*
Collingwood, Rank *Sergt.*
Ontario. Corps *157th Btn.*
Rate *\$27.00*

OCT 1914

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<div data-bbox="1234 725 1843 992" data-label="Text"> <p>Pensions Notified Date <i>23-7-17.</i> Killed in Action Wounded } Date <i>5-7-17</i> Missing C. L. <i>(21) 7/17</i> Clerk <i>J. A. Gelling</i> Date Noted <i>23-7-1917</i></p> </div>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



1
2
3
4
5
6
7
8
9
10

MILITIA AND DEFENCE
ASSIGNED PAY

M. F. W. 12a.
 50m.-6-16.
 1772-39-819.

Sheet No. 2.

L. L. Job 4503 - Req. 6332.

Mrs J. J. Swan

OVERSEAS CONTINGENTS

PAYMENTS.

Name of Soldier *Brighton. Jack*
642640 - Sergt - 157th Bn

Month.	Year.	Cheque No.	Amt.	Remarks.
			<i>\$27⁰⁰</i>	
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		<i>26260</i>	<i>27.</i>	
Nov.		<i>29442</i>	<i>27</i>	
Dec.		<i>an 35218</i>	<i>27</i>	
Jan.	1917	<i>38228</i>	<i>27</i>	<i>538228 cancelled 15/1/17</i>
Feb.		<i>43721</i>	<i>27</i>	<i>27⁰⁰</i>
March		<i>50376</i>	<i>27</i>	<i>27⁰⁰</i>
April		<i>C 1151</i>	<i>27</i>	<i>27⁰⁰</i>
May		<i>Z 7669</i>	<i>27</i>	<i>\$270⁰⁰ CF & 15 31/7/17 J. Gelling</i>
June		<i>Q 14060</i>	<i>27</i>	<i>27⁰⁰</i>
July		<i>E 21326</i>	<i>27</i>	<i>13-7-17</i>
Aug.				<i>03a A/c closed Cas. 31/7/17 da</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

W.B

Total Paid \$270⁰⁰

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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

64264052

4

Accepted

MEDICAL HISTORY SHEET.

Surname Lorichon Christian Name Jaco

Examined { on 14 day of Dec 1915
at Callinwood

Approved by [Signature]

Birthplace { City or Town Duflast
County Antillem

Rank Official M.O.

Apparent age 27

Trade or occupation Salesman

Height 5 Feet 6 Inches

Weight 143 Lbs.

Chest measurement { Minimum 32 inches
Maximum expansion 35 1/4 inches

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right Left yes
Number 2 marks

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

When Vaccinated last 8 years ago

Date	Result	VACCINATIONS.
<u>1916</u>	<u>Aug 22</u>	<u>[Signature]</u> M.O.
		M.O.
		M.O.

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Vision: R 20/20 L 20/20

Willing to vaccinated & inoculated

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>1916</u>	<u>29</u>	M.O.
<u>ap</u>	<u>3</u>	<u>[Signature]</u> M.O.
	<u>8</u>	M.O.

Enlisted on 14 day of Dec 1915 at Callinwood

	CORPS.	REG'T NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>157 Batta</u>	<u>642640</u>	<u>good</u>	<u>15 Dec 1915</u>
Transferred to.....	<u>125th Bn</u>			<u>8/12/16</u>
	<u>4th Bn.</u>			<u>MAY 23 1917</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.

[Signature]

CRICHTON, Pte. Jack, #642640; 4th Bn. H.Q. 649-C-16047

M

M. & D. (Father) John Crichton,
Downview, Coalisland,
Co. Tyrone, Ireland.

P. & S. " Ditto.

(Ser # 785714).

Mem. C. (Mother) Mrs. Martha Crichton,
(Address as above)

Not married.

~~scroll Desp.~~ MAR 1 - 1921 Reqn. No. 234296

Not elig. for ~~Plaque Desp.~~ *ETA*

~~DEC 30 1921~~ Reqn. No. P 22922

E. lig. for V. m.

Desp 11-11-20

" " B. W. m.

B
(m) c 30218

12

M

768

Number 642640 Rank *A/Sgt*

Surname CRICHTON

Christian Name Jack

Units *4th Bn Cany* Theatre of War *France*

Date of Service *12-6-17*

Remarks *(1) John Crichton,*

Latest Address *Downview,*

Coalisland,

Roll No. *B. Page 22289*

Co. Tyrone, Ireland

200m.-6-21.M.

*DUE TO SERVICE
*NOT DUE TO SERVICE

HOSPITAL AS AN ADMISSION

(WHERE FROM)

T

IN CATEGORY

INVALID

(WHERE TO)

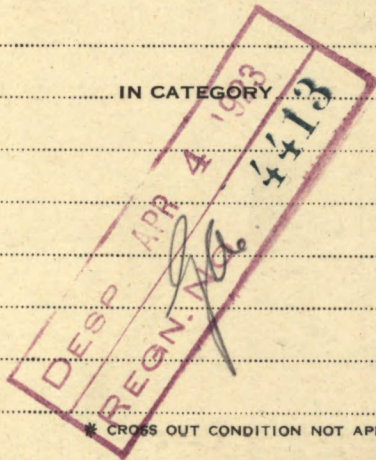
CONDITIONS DIAGNOSED

ADDRESS

HOSPITAL

STATION

* CROSS OUT CONDITION NOT APPLICABLE.



(OVER)

NAME

Brichton, Jack.

REGT'L No.

H. Q. FILE No. 649.

FOLLOWS

No.

RANK AND CORPS

~~Cpl 4th Bn. (Horn) 157th Bn.~~

CABLE

DATE

NATURE OF CASUALTY

FOLLOWS

NO.

NO.	DATE	NATURE OF CASUALTY	FOLLOWS
M5735	17-7-17	Died of wounds July 5th 1917. #2 Fld Ambulance Depot. ✓	
B2090a	11-7-17	Killed of wounds rec'd in action #2 Can Fld Amb France. 5-7-17. Rec'd 30/8/17.	

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 700	#2 Can Fed Amb	5-7-17	Died of wounds. N.S.

No. 642640 RANK *Pfc.*

NAME *Crighton, J* *R*

T. O. S. *15/12/15*
D. O. *27/31/12/15*

UNIT *157th Battalion, C. E. F.*

M. D. *2*

PAID FROM		PAID TO		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	AUTHORITY
1915		1916			PARTICULARS	
<i>Dec</i>	<i>15</i>	<i>Dec</i>	<i>31</i>	<i>—</i>	<i>Prom. Sergt. 8/3/16.</i>	<i>D.O. 13718/3/16.</i>
		<i>1916</i>		<i>—</i>		
		<i>Jan.</i>		<i>—</i>		
		<i>Feb.</i>		<i>—</i>		
		<i>Mar.</i>		<i>—</i>		
		<i>Apr.</i>		<i>✓</i>		
		<i>May</i>		<i>—</i>		
		<i>June</i>		<i>—</i>		
		<i>July</i>		<i>—</i>		
		<i>Aug.</i>		<i>✓</i>		
		<i>Sept.</i>		<i>—</i>		
		<i>Oct.</i>		<i>—</i>		

UNIT SAILED
OCT 17 1916



CARD NO.

SURNAME.

Crickton,

CHRISTIAN NAMES

Jack Sgt.

FOLL.

REGL. NO.

642640

RANK

UNIT

157th Bn.

FORMER CORPS

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

RELATIONSHIP TO SOLDIER

ADDRESS

For full particulars see Crickton.

COUNTRY OF BIRTH

DATE

PLACE OF ATTESTATION

DATE

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE

P. 559
MARRIED OR SINGLE *S.*

PLACE OF BIRTH *Belfast Ireland.*

NAME AND ADDRESS OF NEXT OF KIN
*Brighton Jack.
Belfast, Ireland.*

RELATIONSHIP OF NEXT OF KIN *Father*

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c

PARTICULARS	EFFECTIVE DATE	AUTHORITY
<i>Reverts to Private</i>	<i>10/5/17</i>	<i>P.20 139. 19/17</i>
<i>Appointed Capt.</i>	<i>13.6.17</i>	<i>v. 65/30.6.17</i>
<i>Wounded & ill.</i>	<i>24-6-17</i>	<i>RCCE 1/17</i>
<i>Died of Wounds</i>	<i>7/7/17</i>	<i>C.L.A. 700 17/17</i>

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

Private Capt.
REG'L. No *642640* RANK *344.* NAME *Brighton Jack. R. & ✓*
IF IN PERMT. CORPS | WHAT UNIT | UNIT *125 Bn* TRANSFERRED TO *125 Bn* DATE *21-12-16* AUTHORITY *P.20.172*
PERMANENT FORCE ALLOWANCES | TRANSFERRED TO *4th Bn* DATE *12.7.17* AUTHORITY *P.20.144*
PLACE OF ATTESTATION *Collingwood Out Can* TRANSFERRED TO *Dep't. L.* DATE *1-8-17* AUTHORITY *C.L.A. 700 17/17*
DATE OF ATTESTATION *15/12/15* TRANSFERRED TO | DATE | AUTHORITY *N. E. BRANCH*
ASSIGNED PAY MONTHLY \$ *2700* DATE EFFECTIVE *Oct. 1/16*
PAYABLE TO *Mrs J. J. Swan Box 996 Collingwood Out. Can.* RELATIONSHIP
ASSIGNED PAY MONTHLY \$ | DATE EFFECTIVE |
PAYABLE TO | RELATIONSHIP |
STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) | EFFECTIVE *1-8-17* | REASON *Died of Wounds 7/7/17*
DISCHARGE DATE AND PLACE | REASON AND AUTHORITY *C.L.A. 700 17-7-17*
ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)
ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)



DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS			
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1	2	3	4	1	2	3	4				CREDIT	DEBIT						
			\$	c.			\$	c.			\$	c.																				NO.	DATE	NO.
<i>1916</i>														<i>14 50</i>	<i>14 50</i>											<i>14 50</i>								
<i>Nov</i>	<i>30</i>	<i>135</i>	<i>40 50</i>	<i>30</i>	<i>15</i>	<i>4 50</i>								<i>45 00</i>	<i>5</i>	<i>9/1/16</i>	<i>81</i>	<i>3/1/16</i>	<i>14 60</i>	<i>4 87</i>	<i>27 00</i>		<i>46 47</i>	<i>13 03</i>		<i>13 03</i>								
<i>Dec</i>	<i>20</i>	<i>135</i>	<i>27 00</i>	<i>20</i>	<i>15</i>	<i>3 00</i>								<i>30 00</i>	<i>105</i>	<i>9/1/16</i>			<i>4 87</i>		<i>27 00</i>		<i>31 87</i>	<i>11 16</i>										
<i>Dec 31</i>	<i>11</i>	<i>135</i>	<i>14 85</i>	<i>11</i>	<i>15</i>	<i>1 65</i>								<i>16 50</i>		<i>115</i>	<i>3/12/16</i>			<i>14 60</i>		<i>14 60</i>		<i>13 06</i>		<i>13 06</i>								
<i>1917</i>																																		
<i>Jan</i>	<i>31</i>	<i>135</i>	<i>41 85</i>	<i>31</i>	<i>15</i>	<i>4 65</i>								<i>46 50</i>	<i>50</i>	<i>1/1/17</i>			<i>14 60</i>		<i>27 00</i>		<i>41 60</i>	<i>17 96</i>		<i>17 96</i>								
<i>Feb</i>	<i>28</i>	<i>150</i>	<i>42 00</i>											<i>42 00</i>	<i>676</i>	<i>9/1/17</i>	<i>677</i>	<i>2/1/17</i>	<i>9 73</i>	<i>2 43</i>	<i>27 00</i>		<i>39 16</i>	<i>20 80</i>										
<i>Mar</i>	<i>31</i>	<i>135</i>	<i>46 50</i>											<i>46 50</i>		<i>756</i>	<i>14/3</i>			<i>9 74</i>		<i>27 00</i>	<i>36 94</i>	<i>30 56</i>										
<i>Apr.</i>	<i>30</i>	<i>135</i>	<i>41 50</i>											<i>41 50</i>						<i>27 00</i>		<i>27 00</i>		<i>27 27</i>	<i>48 56</i>									
<i>May 1-17</i>	<i>17</i>	<i>135</i>	<i>25 50</i>											<i>40 90</i>	<i>71</i>	<i>24/17</i>			<i>9 73</i>		<i>27 00</i>	<i>32</i>	<i>46 78</i>	<i>42 68</i>										
<i>18-31</i>	<i>14</i>	<i>120</i>	<i>15 40</i>																															
<i>June 1-18</i>	<i>18</i>	<i>120</i>	<i>21 60</i>											<i>34 80</i>	<i>131</i>	<i>16-5-17</i>			<i>9 73</i>		<i>27 00</i>		<i>41 60</i>	<i>35 88</i>										
<i>July 1-11</i>	<i>11</i>	<i>120</i>	<i>13 20</i>											<i>13 20</i>								<i>27 00</i>	<i>27 00</i>	<i>22 20</i>										
<i>July 12-31</i>	<i>20</i>	<i>120</i>	<i>22 00</i>											<i>22 00</i>								<i>21 60</i>	<i>44 08</i>											
			<i>382 40</i>											<i>14 50</i>	<i>396 90</i>				<i>77 86</i>	<i>31 64</i>	<i>27 32</i>	<i>32</i>	<i>352 22</i>											

Entered on N.E. Card Index
J. W. Black

Checked by *J. W. Black*
as per pay order ap. Brand
for Act. & recorded on Act.
pay list, Canada.
Balance from Canada

Proceeding Overseas. Reverts to Rank of Lt.
from 18th Lt. P. 20 139 of 1917
from R. 894 of 30/1/17 Order

Transferred to 4th Bn.

Statement of
DEC 10 1917
Account rendered

Statement of
NOV 9 1917
Account rendered

Statement of
FEB 27
34 25
Account rendered

Case A.P. 1/10/16 to 31/7/17. (27000)
C.Y.X. D. 24/7/17.

A.G.R. Rank Name **CRICHTON, Jack** Reg'l No. **642640**
 Unit **157th Bn.** If in perm. Corps, } Married or Single **Single.**
 What Unit? }
 Place and Date of Enlistment **Collingwood, 14th Decr. 1915.** Place of Birth **Belfast, Ireland.**

Name and Address, Next-of-Kin **Jack Crichton,**
Castle Villa, Donegal Park, Belfast, Ireland. Relationship **Father.**

m.x.

4-10 r
R

Assigned Pay Monthly \$ Payable to

Relationship

Separation Allowance \$ Payable to

Relationship

N/E R.B. No.	<i>5600</i>
File R.L.	<i>25-C-2456</i>
Category	<i>Def W</i>

Discharge, Date and Place Reason Character

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 S. S. Cameronia		28/10/16	
16.11.16	157 th	Lo the Acty Sgt	Branchott	8.3.16	<i>Et II Do. 150</i>
8-12-16	157th	Trans to 125th Bn	BRAMSHOTT	8.12.16	Pt. II, DO 172
9-12-16	125th	T O S from 157Bn	WitLey	8 12 16	Pt. II, DO 300
19.5.17	-"	Reverts to perm. grade MR.	do	18.5.17	- - 139. <i>Sp</i>
24-5-17	125TH.	S. O. S, to 4th Bn.	Willey	23.5, 17	D, O, 144 <i>Sp 59/66-17</i>
30.6.17	4 th Bn.	Att. to 1st Can. Int. Bn.	Field.	12.6.17	<i>Pt II O-65</i>
✓	✓	apptd. A/cpl. with pay while act. 1st C. E. Bn.	✓	13.6.17	✓ 65 <i>& P 70 192. 8/6/17</i> <i>Came by P 50-864/307</i> <i>94th Bn</i>
11-7-17	4 th Bn	Disd of Wounds received in action	Field	5-7-17	<i>Pt II O. 68 & 6th. 700.</i> <i>P.T.O.</i>

M.F.B. 103 CHECKED
21 JUN 1917

Report. Date.	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.
11-7-17	H. Balle	Reverts to permanent grade on ceasing to be attached to 1. Cav Central. Balle.	Field.	204-6-17	x P.H.O. 182 d. 8/9/17 P.H.O. 68

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

Oct 1/16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

<i>27.</i>			
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*125031
BWA*

PARTICULARS OF SEPARATION ALLOWANCE

No. *642640*
 Rank *Sgt.* Promoted Reverted Discharge
 Soldier's Name *Jack. Carickton*
 Battalion *15th. Battn.*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *Mrs. J. J. Swan*
 Address *PO Box 996*
 Change of Address *Collingwood*
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>July 31</i>			<i>270 -</i>	<i>270 -</i>	<i>Acct. closed 31-7-17 C.F.X. 31-7-17</i>
			<i>x</i>	<i>x</i>	<i>died of wounds 5-7-17. Pensions notified 23.7</i>
			<i>x</i>	<i>x</i>	<i>C.L. (21) 18-7-17</i>
			<i>x</i>	<i>x</i>	

