

ATTESTATION PAPER.

75/61
No.
Folio. 29th Bⁿ

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

- 1. What is your name?..... *Davie, James Alexander*
 - 2. In what Town, Township or Parish, and in what Country were you born?..... *Largo, Ayrshire, Scotland*
 - 3. What is the name of your next-of-kin?..... *Mother Lillias*
 - 4. What is the address of your next-of-kin?..... *Hunter St. Auchterarder, Perthshire, Scotland*
 - 5. What is the date of your birth?..... *Sept. 17 1882*
 - 6. What is your Trade or Calling?..... *Warehouseman*
 - 7. Are you married?..... *No*
 - 8. Are you willing to be vaccinated or re-vaccinated?..... *Yes*
 - 9. Do you now belong to the Active Militia?..... *Yes*
 - 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*
- James A. Davie*.....(Signature of Man).
Robert Brown.....(Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *James Alexander Davie*....., do solemnly declare that the above answers made by me to the above questions 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.

James A. Davie.....(Signature of Recruit)
Date *Nov. 9* 1914. *Robert Brown*.....(Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *James Alexander Davie*....., 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.

James A. Davie.....(Signature of Recruit)
Date *Nov. 9* 1914. *Robert Brown*.....(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 *Vancouver* this *11th* day of *November* 1914.

James B. Brown.....(Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.
.....(Approving Officer)

161 B 1

Description of James Alexander Davie on Enlistment.

Apparent Age 32 years months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height 5 ft. 7 1/2 ins.

Chest-measur-ment { Girth when fully expanded 36 ins.
 Range of expansion 5 ins.

Complexion Dark

Eyes Grey

Hair Black

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

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 Nov. 9 1914.

Quinn H. M. Duggan
 Lt.

Place Vancouver BC.

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:—

COPY ATTESTATION

SUBSTITUTED FOR ORIGINAL OF DUPL
 ATTESTATION, IN ACCORDANCE WITH K
 REGULATIONS (CANADA) PARA 1288

SIGNATURE OF W.S. Johnson
 Lieutenant-Colonel
 Commanding 29th (Vancouver) Battalion Canadian
 Expeditionary Force.

STATION Nanaimo

CERTIFICATE OF OFFICER COMMANDING UNIT.

DATE 11/11/14

James Alexander Davie 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.

Quinn H. D. Duggan

Lieut. Colonel
 Commanding 29th (Vancouver) Battalion Canadian
 Expeditionary Force.

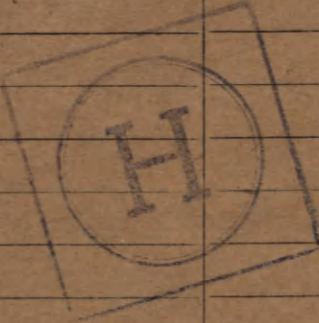
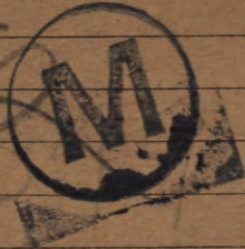
Date 11/11/14 1914.

REGIMENTAL DOCUMENTS

NAME DAVIE, JAS. ALEXANDER (Pvt.) REGT. NO. 75161 UNIT 29th Div H. Q. FILE NO. _____

9
S

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)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)				04460	
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
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) - 1					<i>Demob</i>
MEDICAL EXAMINATION (M.F.W. 129)					
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
LAST PAY CERTIFICATE (M.F.W. 44)					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
<i>C. A. P. C. 5009</i>					
<i>Case card</i>					
<i>C 307</i>					
<i>CW 3</i>					
<i>pay card</i>					
					4-7
					19-7
					29-7
					2



SURNAME. *Davie.*

CHRISTIAN NAMES *James Alexander.*

REGL. NO. *75161*

RANK *Pte.*

UNIT *29th.*

FORMER CORPS *Nil.*

H. *Area 9.*
CARD NO. *20.5.910.20-3-10.*
Demos.
FOLL. *1st*
Anti-A. 2.9/10.4.4.2.2.

Batt.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL *Davie, Mrs. Lillias.*

RELATIONSHIP TO SOLDIER *Mother.*

ADD *88 High St. Auchterarder,
Perthshire, Scot.*

54-21-38-1 9-7-17.

COUNTRY OF BIRTH *Scotland. Ayrshire.*

DATE *Sept 17/82*

PLACE OF ATTESTATION *Vancouver, B. C.*

DATE *9/11/14*

Q/S. 20/5/15. 5/5. *Q/c 18-3-19. 284/5.*

MARRIED

SINGLE

Yes.

WIDOWER

TRADE OR CALLING

Warehouse

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

32 YEARS

MONTHS

HEIGHT

5 FEET

7 1/2 INCHES

CHEST MEASUREMENT

34 INCHES

EXPANSION

5 INCHES

COMPLEXION

Dark

EYES

Grey

HAIR

Black

DISTINGUISHING MARKS

nil

MEDICAL EXAMINATION.

PLACE

Vancouver

DATE

Nov. 9, 1914

Number

75161

Rank

Plt B

Surname

DAVIE

Christian Name

James Alexander

Units

29th Bn Can Inf Theatre of War France

Date of Service

17-9-15

Remarks

King Exp. dec. British Ex Service Rec. Des.

Latest Address

673 Greenwood Ave. Toronto Ont.

Roll No.

B. Page 190 25

200m.-6-21.M.

DATE AND PLACE OF ORIGIN

*DUE TO SERVICE
*NOT DUE TO SERVICE

HOSPITAL AS AN ADMISSION

WHERE FROM)

UNIT

IN CATEGORY

INVALID

WHERE TO

CONDITIONS DIAGNOSED

ADDRESS

HOSPITAL

STATION

* CROSS OUT CONDITION NOT APPLICABLE.

DESP. OCT 2 37
REGN. NO. 326

(OVER)

No.

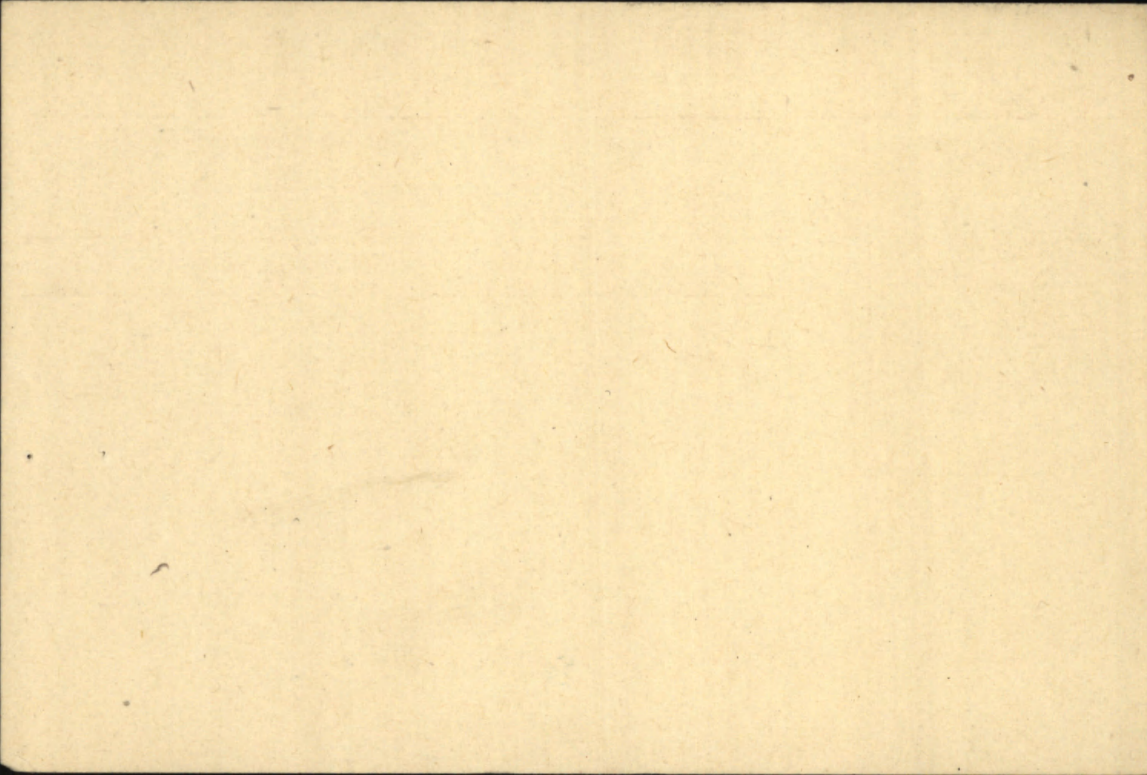
RANK *Plt*

NAME

*Davie Jas A.*T. O. S. *28-60-14*
D. O. *31 of 31-10-14*UNIT *72nd Regt. Seaforth Highlanders*

M. D.//

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1914</i> <i>Oct 28</i> <i>Nov: No</i>	<i>1914</i> <i>Oct 31</i> <i>account</i>	<i>v</i>	<i>Transfd to 29th Batta. 6-11-14</i>	<i>D. O. 37 of 7-11-14</i>



NAME

Savie, ^{James} Alexander

REG'TL No.

75-167

RANK AND CORPS

pte. 29th Batt

CABLE

NATURE OF CASUALTY

NO.

DATE

NO.

241

X FOLL.

NO.	DATE	NATURE OF CASUALTY
02896.	14-10-16.	Adm to no. 7. Gen Hosp Let report, Oct 3rd 1916 G. S. W. foot ✓
03563.	24-10-16	Rept. wounded Sept 26/16.

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

10161	6th Canfld Amb	5-12-15	Bronchitis
1072	trans to Div Post Sta	6-12-15	" " "
1221	Al. 29th Batt reports	9-12-15	" " " " " " " " " " " "
354	Rep. from Paper	26-9-16	" " " " " " " " " " " "
346	17 Can. Div. Le Report	3-10-16	G. S. W. left foot
2317	" " " " " "	11-10-16	" " " " " " " " " " " "
a 371	No. 3. Com. Depot Le. Troop	3-11-16	" " " " " " " " " " " "
A 383	Disch. to Base Details	16-11-16	G. S. W. left foot

No.

161 RANK

Co-

NAME

Davie Jas. A.

T. O. S.

1-11-14 (1914 Nov. 14)

UNIT

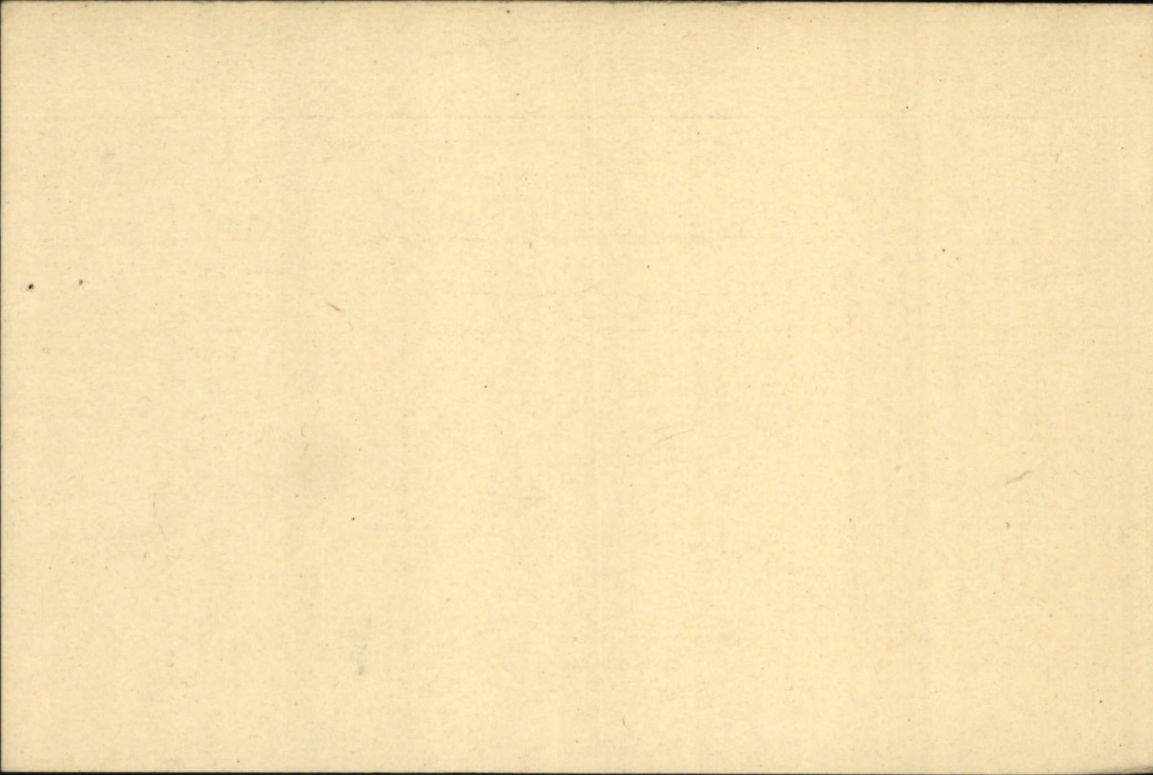
29th Battalion

M. D.

11

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914				
Nov. 1	Nov. 30	✓		
Dec.		✓		
1915		✓		
Jan		✓		
Feb		✓		
Mar		✓		

UNIT SAILED
MAY 20 1915



Name **Davie James Alexander** Rank **Private** Reg. No. **75161**

Unit **29th Battalion**

88 High St.

Next of Kin **Lillias Davie ~~Hunter~~ St Auchterarder Perthshire
Scotland**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
5-12-15	6. Can Field Ambulance	Bronchitis	101			
6-12-16.	Do. Div Rest Stat	Do.	107			
9-12-16.	O.C.R. reports Rejoined Unit	Do.	112.			
26-9-16.	Reported From Base Wounded	A354	0.3563	24-10	25-10	
3-10-16.	7. Can Gen Hosp Le Treport	GSW Lt Foot.	A346	02896		
11-10-16.	Do. 2. Can Gen Hosp Le Treport	Do.	A352			
3-11-	No. 3 Conv. Depot Le Treport	do.	A371			
16-11-	Discharged to base details	do.	A383			

Surname **Davie.** Christian Name or Names **J. A.** Reg. No. **75161.**
 Rank **Pte.** Unit **29th. Battn.** Co. Troop Batty.

Hospital **No. 6 Can. Fld. Amb. to Div. Rest Sta.** Date of Admission **5.12.15**
6-12-15.

Transferred Hosp. **# 7. Can. Gen. Hosp. Le. Troop Hosp. 3. 10. 16**
2nd Can. Gen. Le. Troop. Hosp. 11-10-16.
3. Comd Dep " " Hosp. 3. 11. 16

Diagnosis **Bronchitis.**
 (1) **G. S. Wd & East. S.**
 Later Diagnosis (if changed)
 (2)
 (3)

Additional Diagnoses: If more than one state present

DISPOSITION

Date

Ch. 20. 12. 15 #101 **Reprsd unit. 9. 12. 15**
C.L. 28-12-15. 107. **Apr Rtd Repatb**
Ch. 4. 1. 16 #112 **REMARKS**
" 16-10-16 A 346 **Rep'd from Base Wounded in**
" 23-10-16. A 352. **Action. 26-9-16**
C.S. 25-10-16 Q 3540 **Des. B. Details 16. 11. 16**
14. 11. 16 #1371
28. 11. 16 Q 383

A.M.D. 2 DEPT.

RECEIVED BY D.M.S. 10. FIVE. Co. London

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

MDL

NAME OF SOLDIER (Block Letters) DAVIE J.A.
REGIMENT CCRRP. RANK Pte No. 75461

Date of Examination in England 21-9-19 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 12.

2. EXTRACTIONS

3. CROWNS

4. DENTURES

(a) Full Upper

(b) Part Upper 8, 4, 12, 13, 14.

(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

(c) In France Yes

KINMEL PARK, NORTH WALES

Signature of Dental Officer W Kennedy Capt.

DEPARTMENT OF DEFENSE
CERTIFICATE FOR DEMOBILIZATION

Name: DAVID J. A. COOK
Service Number: 13A71
Branch: Infantry
Grade: Private

Branch: Infantry
Grade: Private

Branch: Infantry
Grade: Private

- 1. Name
- 2. Service Number
- 3. Branch
- 4. Grade
- (a) In line
- (b) In line
- (c) In line
- (d) In line
- 5. Branch
- (a) In line
- (b) In line
- (c) In line

Handwritten signature

Handwritten signature

Casualty Form—Active Service.

Regiment or Corps **29th BATTALION, C.E.F.**

Regimental No. 75161 Rank Pte. Name Davie, J. A.
 Enlisted (a) Nov 9th 1914 Terms of Service (a) War Service reckons from (a) Nov 9th 1914
 Date of promotion to } Date of appointment } Numerical position on }
 present rank } to lance rank } 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				
18. 9. 15	O C	Disembarked	Boulogne	18. 9. 15	Non Recd
11. 12. 15	6 Can F.A.	Bronchitis. Adm	6 Can F.A.	5. 12. 15	A 36
10. 12. 15	OC 29 Bn	Sick. To Hospital	Not stated	5. 12. 15	B 213
18. 12. 15	6 Can F.A.	Bronchitis. Transf to	D. R. S	6. 12. 15	A 36 CR 57
24. 12. 15	OC 29 Bn	Rejoined Unit	In the Field	9. 12. 15	B 213 CR 61
6. 10. 16	"	Wounded	Field	26. 9. 16	" 2128
3. 10. 16	to 4 C. Gen	G.S.W. Foot.	Adm to 4 C. Gen	3. 10. 16	W 3034-56
11. 10. 16	to 2 C. Gen	"	" to 2 C. Gen	10. 10. 16	" 69.
"	to 4 C. Gen	"	"	11. 10. 16	"
4. 10. 16	5 C F.A.	"	to 4 C F.A.	4. 10. 16	A 36 CR 216
30. 9. 16	3. B. F.A.	"	Adm to 3 B. F.A.	27. 9. 16	A 36 BR 217 B.
3. 10. 16	5 C F.A.	"	Adm to 5 C F.A.	"	"
3. 11. 16	2 Gen Hosp	" & Debility	Adm to 2 Gen Hosp	3. 11. 16	A 36 CR 218 W 3034-87
"	3 Gen Dep	"	to 3 Gen Dep	"	"
7. 10. 16	5 B F.A.	W. Foot. (B)	Adm to 5 B F.A.	3. 10. 16	A 36 BR 228

(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					
14-10-16	H.B.F.A	SW. Foot. Lt.	Adm	H.B.F.A	4-10-16	CA36 BR 221
			To	Ault	8-10-16	" "
18-11-16	3bon Dep	Y.S.W. Foot	Adm	3bon Dep	3-11-16	W303K-98
			To	Base Details	-	" "
20-11-16	CPS	Taken on strength		CPS	20-11-16	HR
17-12-16	GOC	Classified P/B + att		Field	10-12-16	B.213 DO ho 78 d/ 31.12.16.
	Can Corps	Can Corps Com. Coy				
7-1-17		Reclassified P/B. (S.I.)			27-12-16	HR CR.240 aay file 8757
27-12-16					28-1-17	B213. LPO No 13 d/ 13.2.17
3-2-17	W 29th	Awarded Good Conduct Badge			27-2-17	HR
27-2-17	CCHB	Reclassified P/B.			16-5-17	"
30-5-17	"	"			19-6-17	H.J. 14060
30-6-17	"	"			10-8-17	H.S. 16/18578
20-8-17	"	"				
25-8-17	"	SOS 29th Bn on transfer to 7th Can. Area Emp Coy & ceases to be att C.C. Coy			22-8-17	DO ho 76 d/ 5-9-17
25-8-17	O.C. 7th Emp. Coy.	Taken on Strength 7th Canadian (Area) Employment Co.	Field		23-8-17	B213 Pt.11 O.No.1 d/10-9-18.
27-10-17	do	Attached 5 CDN. (AREA) EMPLOYMENT COY.	Ad.		20-10-17	B213
19-1-18	8area	Granted 14 days leave	England		12-1-18	B213 P 05 d/ 30-1-18.
2-2-18	8.C.A.K.Co.	Rejoined from leave	Field		28-1-18	B213.
26-5-18	a.S.O	classified Bihemosthenia	Ad		25-6-18	W3339/583 P/B. att d/ 11-7-18
23-7-18	hab. Condt	S.O.S. 7th Can. Area Emp Co.			25-7-18	P.H.2 a/ 23-7-18 KR 25502/5
	Coast.	on transfer to Can. Sub. Pool			24-7-18	P II 047 d/ 7-8-18
25-7-18	CHRP	awarded from 7 Cal Coy				KR 307/93

Casualty Form—Active Service.

Regiment or Corps.....

Rank Pte Surname Dawie Christian Name J. A.

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).....

Occupation..... or Corps Trade and Rate..... Signature of Officer.....

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked...			
<u>25.7.18.</u>	<u>ADG</u>	<u>You S Eau Lab. Pool from 7th C. A. E. Coy</u>		<u>26.7.18</u>	<u>Reg 118 8/8/18</u>
<u>13th 78.</u>	<u>C. S. B. D.</u>	<u>Classed B reported to Gen Sec Dps</u>	<u>Walter</u>	<u>13th 78</u>	<u>14/6 2.</u>
<u>18/1/19</u>	<u>TOS G. C. C. Kimmel Park</u>	<u>H. M. T. 'CELTIC' (Canada) LVR L. M. A. H. 10. 1918</u>			
<u>10/3 / 19</u>	<u>JOS G. C. C. Kimmel Park</u>	<u>Approved</u>	<u>W. Hewitt</u>		<u>Officer in Charge of Concentration Camp</u>
<u>16-1-19</u>	<u>Gen Sec</u>	<u>Approved to G.C.C. Dept.</u>	<u>Canadian Section, G. H. Q. 3rd Echelon, B. E. F.</u>	<u>15-1-19</u>	<u>DO NOT DESTROY</u>

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

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 75161 (Rank) Pte
 Name (in full) DAVIE James Alex enlisted in
 the 72nd S. H. Y. Co.
 CANADIAN EXPEDITIONARY FORCE at Vancouver Bn on the 27th
 day of October 1914
 HE served in 29th Battalion
 and is now discharged from the service by reason of Demobilization.
Medical Unfitness.

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

Age 37 years
 Height 5 ft 7 1/2 ins.
 Complexion Dark.
 Eyes Grey
 Hair Black

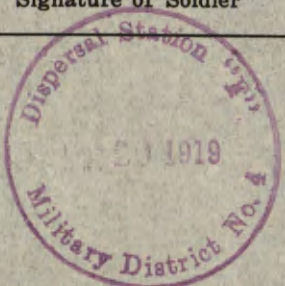
Marks or Scars None

James A. Davie
 Signature of Soldier

[Signature]
 Issuing Officer

Date of Discharge

Lieutenant
 Officer i/c Discharge Section, Dispersal Station



Rank

Date March 20 1919

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

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 70151 (Rank) Private

Name (in full) W. A. V. [unclear] enlisted in the [unclear]

the [unclear] CANADIAN EXPEDITIONARY FORCE at [unclear] on the [unclear] day of [unclear] 19[unclear]

He served in [unclear]

and is now discharged from the service by reason of [unclear] Demobilization [unclear] Medical Certificate [unclear]

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

Age <u>[unclear]</u>	Marks or Scars <u>[unclear]</u>
Height <u>[unclear]</u>	
Complexion <u>[unclear]</u>	
Eyes <u>[unclear]</u>	
Hair <u>[unclear]</u>	

Signature of Soldier [unclear]

Date of Discharge [unclear]

Issuing Officer [unclear]

Rank [unclear]

Date [unclear] 19[unclear]

N.B. - A duplicate of this Certificate will be issued, any person having same is requested to forward it in an enclosed envelope to the Secretary, Military Council, Ottawa, Canada.

Rank *2nd Lt* Name **DAVIE, James Alexander.** Reg'l No. **75161.**
 Unit **29th Bn.** If in perm. Corps, }
 What Unit? } Married or Single **Single.**
 Place and Date of Enlistment **Vancouver. B.C. 9th Nov. 1914.** Place of Birth **Large Ayrshire. Scot.**
 Name and Address, Next-of-Kin **Lillias Davie. ~~Hunter St. Auchterarder, Perthshire. Scotland~~**



88 High St. Auchterarder. Perthshire Relationship **Mother**
cont. D 307 d. 26.5.17
 Assigned Pay Monthly \$ Payable to

Relationship **R 139**
 Separation Allowance \$ Payable to
 Relationship

N/E. R.D. No *6946*
 File R.L.
 Category *OR. E.A.*

Discharge, Date and Place Reason Character

Date	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
	From whom received					
			<i>Arrived in England.</i>			
			<i>Embark for Englth R.M.S. "Minambee"</i>		<i>20.5.15.</i>	
			<i>Embarked for France.</i>			
			<i>Admitted <u>Beauchite</u></i>		<i>17.9.15</i>	<i>Norm. Roll. 1.9.15.</i>
<i>20.12.15</i>	<i>W.D.</i>		<i>6th Can. Field Ambulance</i>	<i>In the field</i>	<i>5.12.15</i>	<i>Can. Report. No. 101.</i>
<i>28.12.15</i>	<i>"</i>		<i>Transferred to</i>	<i>"</i>	<i>6.12.15</i>	<i>" " " 107.</i>
<i>4.1.16</i>	<i>"</i>		<i>Divisional Post-Station.</i>	<i>"</i>	<i>9.12.15</i>	<i>" " " 112.</i>
			<i>O.C. 29th Batt: reports</i>			
			<i>Rejoined Unit.</i>			
<i>16.10.16</i>	<i>29/10/16</i>		<i>Adm No 7 Can Gen Hosp.</i>	<i>Le Treport.</i>	<i>3.10.16</i>	<i>CHA 346. GSW Lt Foot</i>
<i>23.10.16</i>	<i>do</i>		<i>Adm No 2 Can Gen Hosp</i>	<i>do</i>	<i>11.10.16</i>	<i>CHA 352 do.</i>
<i>25.10.16</i>	<i>do</i>		<i>Reported from Base. Wounded in action</i>	<i>Field</i>	<i>26.9.16</i>	<i>CHA 354. ON. NK 0 3563</i>
<i>14.11.16</i>	<i>do</i>		<i>Adm No 3 Convalescent Depot.</i>	<i>Le Treport.</i>	<i>3.11.16</i>	<i>CHA 371. GSW Lt Foot</i>
<i>28.11.16</i>	<i>do</i>		<i>Discharged to Base Details</i>	<i>do</i>	<i>16.11.16</i>	<i>CHA 383. - do -</i>

*Pool
G 33
B 9*

87.

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				
31. 12. 16	29 th Bn	Classified P/B and attached to Can Corps. Composite Coy	Field	10.12.16	PT II O. 78.
2. 1. 17.	C.A.C.H.Q.	Class. P.B. Yatt. C.C. comp. Co	"	10.12.16	PT II 1.
13.2.17	29 Bn.	Awarded Good Conduct Badge	"	28.1.17	" 13.
5-9-17	✓	Sold to 7 th Can Area Emp Coy	Field		
		& leaves to be attached C.C. H.Q.	-	Pl. 22-8-17	B.D.O. 76
10.9.14.	4 th A.C. Co	T.O.S. from 29 th Bn	✓	✓ 23.54.	" I
7.8.18	7 th Can Area Emp Coy	S.O.S. to Can. Labour Pool	✓	✓ 25.7.18	Pl. 47. ^{Can Labour Pool} Pl. 118/8.8.18
19.12.18	Lab. Pool	S.O.S. to Gen Defot, Withey	Field	Pl. 13.12.18	Pl. 10.200
16-12-18	Gen Defot	T.O.S. from 7th C.A.C. Coy ^{Lab. Pool amended by DO 12.0/15-1-19} Withey	Withey	14.12.18	- 298
16-1-19	Gen Def.	On Com to Minnet Park	do	Pl. 15-1-19	- 13. ^{MD 495} DO 170/20-1-19
		26-F-25	Sailing	10/3/19	
17.3.19	H.M. R. b. Wing.	S.O.S. to Canada.	R. Park.	Pl. 10.3.19	B.D.O. 66. ^{+ Gen Wep. S.O.S.} O.D. 154 4/15-7-19

* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.
EFFECTIVE DATE:- 1-7-15		EFFECTIVE DATE:-	
AMOUNT:- \$20.00		AMOUNT:-	

NAME:- **DAVIE** James Alexander

NUMBER:- 7561.

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 LILLIAS DAVIE,
HUNTER ST,
AUCHTERARDER,
PERTHSHIRE, SCOTLAND.

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private

UNIT AND TRANSFERS

ORIGINAL UNIT:- 29th Bn.

DATE ACCOUNT FIRST OPENED:-

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
118	26.7.18	20918	7 th Area Emp Co Lab. Pool

Stopp 1.4.19
Note March 1919 with Mr Kennel

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
1.2.19	1175	Kennel PK	14.00				

DAILY RATES OF PAY AND ALLOWANCES

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

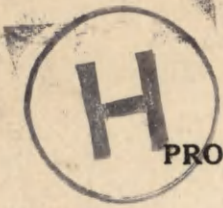
28.4.19 Sp.6 Compiled to 28/19 399 On Bal

PARTICULARS OF RENDERING NON-EFFECTIVE:- *1.3.19 Distoban 2R 3719 2/19 Kennel PK to Kennel PK MDH-5*

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
March 31	Balance Forward								1694		
Apr	P.P.	33		A47093			20				
				A.R. 185 C.C.S.C. 6-4-18	4	46					
				" 320 do 18-4-18	3	57			21	91	
					8	03	20				
May	P.P.	34	10	A91691			20				
				A.R. 655. C.C.S.C. 3-5-18	4	46					
				D.N. 303. 5 th Div Amn. Col 15 th 18	3	57			27	98	
					8	03	20				
June	P.P.	33		B22308			20				
				A.R. 1327. C.C.S.C. 1-6-18	3	57					
				" 636. 5 th Bn. 18-6-18	4	46			32	95	
					8	03	20				
July	P.P.	34	10	C9308			20				
				A.R. 760. 5 th Bn. 1-7-18	4	46					
				" 224 3 rd Inf Bde. 21-7-18	3	57			39	02	
					8	03	20				
Aug.	P.P.	34	10	C 68383			20				
				A.R. 3893. Sec Coy. 7-8-18	3	57			49	55	
				" D.N. 1184. - do - 29-8-18	3	57			45	98	
					7	14	20				
Sept PP		33		D11904 Lt. 2.2			20		58	91	
				D.V. 4422 " 1/9/18	3	57			55	41	
				AR 1095 3 rd Div. 20/9	3	57			51	84	
					7	14	20				
Oct	"	31	10	A.P. 63755 Lt. 2.2			20		65	91	
				D.V. 2373 7.10.18 CCH2 Det	3	73					
				A.P. 2212 16.10.18 HQ CCMTG	3	73			51	48	
					7	46	20				

9

S. 9. 19
0-4. 3.



~~28 FEB 1919~~

18/1/19

7-5-37

~~F~~

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)

WAR SERVICE BADGE
Class " " No. ISSUED

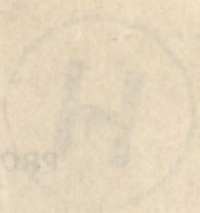
Cat B.

1. No. 75161	
2. Rank. Private	
3. Name. Davie James Alex	
4. Unit. Gen Dept. 29 th Batten.	
5. Date of Discharge	20-3-19
Place	Montreal P.Q.
6. Reason for Discharge. Demobilization	
WAR SERVICE BADGE. CLASS "A" No. 26503	
7. Authority. R.O. 1420 D.D.#4 D.O. Pt. 2-91	
8. Proposed Residence after Discharge. Vancouver B.C.	
Decleared - 1938	
649-10-20872	
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.?	39 Montreal
	March 20 - 1919
	James A. Davie
	Signature of Soldier.
10. CONFIRMATION.	
The discharge of the above named man is hereby confirmed.	
Place	Montreal
	Emb'd Lv'pl-Cert'c Mar 10/19
	Deb'kd Halifax MAR. 18.19
Date	March 20 - 1919
Signature	[Signature]
	(O. C. Discharging Unit.)
	Officer i/c Discharge Section, Dispersal Station "E"

~~H.C.D.~~ Star.
18.11.19
i.e. m.s.

WAR SERVICE BADGE
No. 101119

PROCEEDINGS ON DISCHARGE
(Demobilization)



1. No.	
2. Rank	
3. Name	
4. Unit	
5. Date of Discharge	
6. Reason for Discharge	
7. Authority	
8. Proposed Residence after Discharge	
CERTIFICATE TO BE SIGNED BY SOLDIER	
I hereby acknowledge that all the information herein and date I received my discharge Certificate	
Signature of Soldier	
CONFIRMATION	
The discharge of the above named man is hereby confirmed.	
Date	
Place	
Signature	
(U. S. Discharge Unit)	



Col. J. H. HANNAH MAR 18 19
Major J. H. HANNAH MAR 10 19

LIST OF DISCHARGE DOCUMENTS

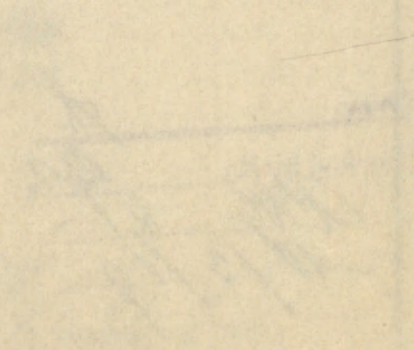
Medical Form W. 100	Attention Paper, Triplicate
Medical Form W. 100	Particulars of Record
Medical Form W. 100 or A. F. W. 100	Final Discharge Statement
Medical Form W. 100 or A. F. W. 100	Character Form
Medical Form W. 100	Form for Convalescence
	Certificates that military documents are unobtainable
Medical Form H. 100 or A. F. H. 100	Medical History Sheet
M. F. B. 200, A. F. B. 100 or A. F. A. 100	Proceedings of Medical Board
Medical Form H. 400	Treatment History Sheet
M. F. W. 100 or A. F. W. 100	Medical Report
Medical Form H. 200	Regimental Conduct Sheet
Medical Form H. 200	Company Conduct Sheet

THE

OF

1917

M. F. W. 100



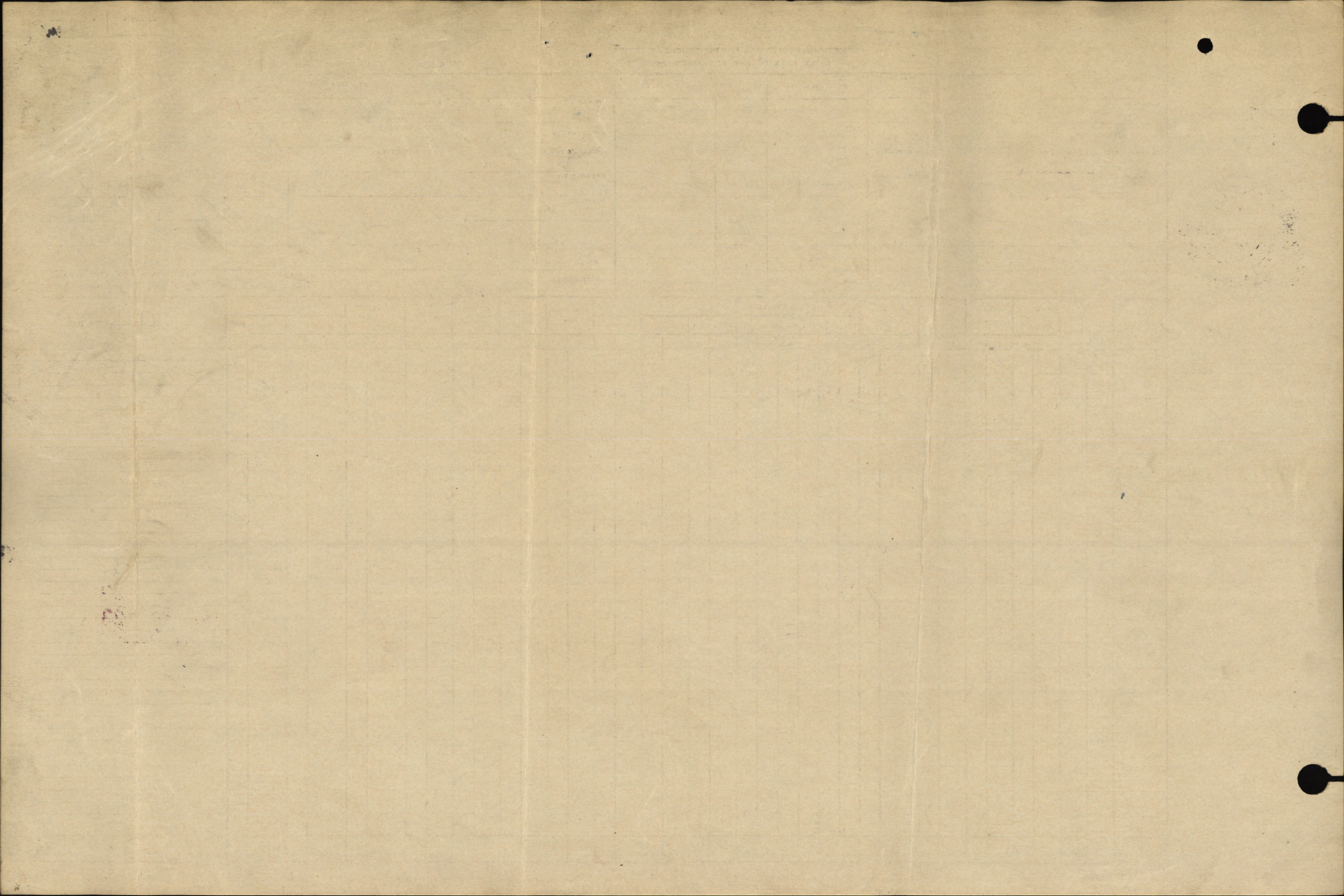
LIST OF DISCHARGE DOCUMENTS.

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

1. Triplicate Attestation Paper (M.F.W. ~~23~~), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. ~~120~~)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122.)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
(Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D.3).
11. Equipment and Clothing } Statement Q.M.G. Form (D.O.B. 2)
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B.64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Handwritten signature or initials

Group..... *A*
 Checked by No..... *42*
 Date..... *10/13/19*



6628

MILITIA AND DEFENCE

ASSIGNED PAY.

To whom

Address

Rate

Date to Commence

Mrs. Lillias Davis

Hunter Street
Auchterarder
Perthshire Scotland

20%

1st July 1915.

By whom assigned

Regtl. No.

Rank

Corps, &c.

Davie Jas Alexander

75161

Private.

29th Vancouver Battn.

PAYMENTS.

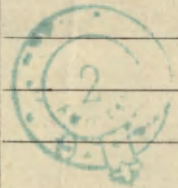
Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July		15506	20	✓
Aug.		26007	20	✓
Sept.		37507	20	✓
Oct.		51087	20	✓
Nov.		66597	20	✓
Dec.		83107	20	✓
Jan.	1916			
Feb.			\$ 170	Carried forward.
March				

ASSIGNED PAY.

By whom assigned *Davie, Jas. Alex.*

Regtl. No. *75161* *Plie. 29th Battrn.*

Month	Year	Cheque No.	Amt.	Pay Sheet	REMARKS.
Jan.	1916	<i>102623</i>	<i>20</i>	<i>130</i>	
Feb.		<i>125645</i>	<i>20</i>		
March		<i>151066</i>	<i>20</i>		
Apl.		<i>4650</i>	<i>20</i>		
May.		<i>50658</i>	<i>20</i>		
June		<i>58180</i>	<i>20</i>		
July		<i>93176</i>	<i>20</i>		
Aug.		<i>126639</i>	<i>20</i>		
Sept.		<i>151210</i>	<i>20</i>		
Oct.		<i>195284</i>	<i>20</i>		
Nov.		<i>231739</i>	<i>20</i>		
Dec.		<i>271753</i>	<i>20</i>		
Jan.	1917	<i>312313</i>	<i>20</i>		
Feb.		<i>356766</i>	<i>20</i>		
March		<i>400272</i>	<i>20</i>		
Apl.			<i>420</i>		
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					



A.P. checked & found correct at 31.3.17. W. J. Williams

copy

ORIGINAL

Army Form B. 178.

To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Davie Christian Name James Alexander

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Largo County Ayrshire Scot.

Examined ... { on 27 day of Nov 1914
at Vano BC

Declared Age ... 32 years 340 days.

Trade or Occupation ... warehouse man

Height ... 5 feet, 7 inches.

Weight ... 140 lbs.

Chest Measurement { Girth when fully Expanded. 36 inches.

{ Range of Expansion 4 inches.

Physical Development ... Good

Vaccination Marks { Arm ... Right Left
Number 3

When Vaccinated ... April 1915.

Vision ... { R.E.-V= D. 6.
L.E.-V= D. 6.

(a) Marks indicating congenital peculiarities or previous disease ... { mole on sternum.

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

Approved by (Signature) C. A. Macrae
(Rank) _____ Medical Officer.

Enlisted ... { at Vano BC
on 27 day of Dec 1914

Joined on Enlistment ...	Corps.	Regtl. No.
	<u>12th S.H.C.</u>	
Transferred to ...	<u>29 Vano Bn</u> <u>C.F.</u>	<u>75161</u>

Became non-effective by _____
on _____ day of _____ 1914

(Signature) _____
(Rank) _____

Reserved for M.H.C.

Regt. No. 75161 Rank Plt Surname DAVIE Christian Name Jas. A.
 Unit or Corps—(a) Overseas from United Kingdom 2nd Bn (b) in United Kingdom Gen Depot
 Born at—Town Rango County or Province Argy's Country Scotland
 Date of Birth—Day 17 Month April Year 1892 Age 26 yrs. 2 months.
 Joined at Vancouver Date 4-12-1914
 Former trade or occupation Washerwoman

Permanent Marks or any peculiarity that will serve for future identification:—

Male. Breast-bone.

Height—feet 5 inches 7 Colour of eyes Brown

Signature of Soldier (for identification purposes) Jas. A. Davie

Medical Report

Read carefully the instructions on last page of this form.

1. DISABILITY.

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (a)

Neurosthenia

Disabilities Group (b)

na

Disabilities Group (c)

na

2. CAUSE OF DISABILITY

		Place of origin.	Date of origin.
(i.) As to Group (a) above.	<u>Active Service</u>	<u>France</u>	<u>1916</u>
(ii.) As to Group (b) above.	<u>na</u>		
(iii.) As to Group (c) above.	<u>na</u>		

3. Is the disability due to disease contracted or injuries received prior to Active Service?

- (i.) As to Group (a) above? no If yes, has Active Service aggravated it? na
- (ii.) As to Group (b) above? na If yes, has Active Service aggravated it? na
- (iii.) As to Group (c) above? na If yes, has Active Service aggravated it? na

4. Is the disability due to disease contracted or injuries received while on Active Service?

- (i.) As to Group (a) above? no
- (ii.) As to Group (b) above? na
- (iii.) As to Group (c) above? na

5. MEDICAL HISTORY. *Infects 9-11-14. From 18-9-18.*
Bronchitis 5-12-15 & 9-12-15 Bronchitis (Q7B 103)
P.S.W. foot: C7.9 & Hypertension: 26-8-16 & 10-12-16 & 7-13-103.
Boards P.B.U. 27-12-16 & confirmed 27-2-17; 16-5-17; 19-6-17
10-8-17; Boards B.I. Hemorrhoids 25-6-18 - (a. 7. B. 103)

6. PRESENT CONDITION. *Poorly nourished man 36 years of*
Muscular tremors very marked; Reflexes increased
appears very nervous; Sleeps fairly well; Appetite
fair

Heart normal
Lungs normal
All other systems normal

7. OPERATION. (i.) Was one performed? *Yes* (ii.) If so, state what. *None*
(iii.) Was one advised and declined? *No*

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto, unless there is evidence to the contrary.

8. (i.) Is there loss or decay of teeth attributable to Active Service? *No*
(ii.) If so, describe.

9. DO YOU RECOMMEND:— *B 11* (b) Invalid to Canada? (c) Discharge from the Service }
(a) Fit for duty? (state category) as permanently unfit? }

Date of Report *15-12-18* 191... Station *Willy*
Signed *Chas. South* Officer in medical charge of case.

I have satisfied myself of the general accuracy of the above Report,
and concur therein *except
Not in Hospital (Officer i/c Hospital) Strike out one
(S.M.O. Brigade) of these
Dated at Station, on 191.....
*Delete if inapplicable.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

10. Is the disability fully described in Part I. (1)?
If not, describe it.

Yes

11. Is the cause of the disability fully described in Part I. (2)?
If not, describe it.

Yes

12. From the medical information now adduced, was the disability caused or aggravated by:—

(a) Negligence of the Soldier { Caused? ho Aggravated? ho

(b) Misconduct of the Soldier { Caused? ho Aggravated? ho

13. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(Estimate at none, 5%, 10%, 15%, 20%, etc.)

ten per cent

14. THE DISABILITY DUE TO SERVICE.—(See Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in this estimate.)

What part of the entire disability estimated next above (13) is due to causes arising during Active Service?
(Estimate at none, 1/10, 2/10, 3/10, etc., or all.)

all

15. Permanency of the Disability due to Service estimated next above in (14).

(i.) Is it permanent?

ho

(ii.) If not permanent, what is its probable minimum duration (in months)?

three months

16. If an operation was advised and declined, do you consider the refusal to have been unreasonable?

no

17. Can the former trade or occupation be resumed?

Yes

18. REMARKS:—

Arthur A. 1/9083 11-11-18

19. RECOMMENDATION:—

(a) Fit for duty?
(state category)

B 2

(b) Invalid to Canada?

(c) Discharge from Service as permanently unfit?

Date of Board

15/12/18

Station

Witley

Signatures of the Board

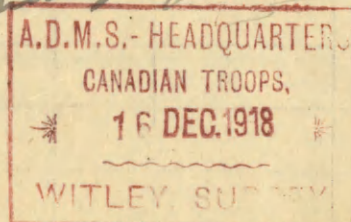
President. [Signature]

Approved

A.D.M.S.

Dated at

Station



[Signature] CAPTAIN, For A.D.M.S., CANADIAN TROOPS, WITLEY

