

ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... *Davison W H*
 2. In what Town, Township or Parish, and in what Country were you born?..... *Thornham Co Kerry Ireland*
 3. What is the name of your next-of-kin?..... *W H G Davison (mother)*
 4. What is the address of your next-of-kin?..... *5 Golf Terrace Portlaoise Ireland*
 5. What is the date of your birth?..... *June 21 1894*
 6. What is your Trade or Calling?..... *Silk*
 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) *yes*
CANADIAN OVER-SEAS EXPEDITIONARY FORCE?}
- *W H Davison* (Signature of Man).
..... *H H Soto* (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *W H Davison*, 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.

..... *W H Davison* (Signature of Recruit)
Date..... *Sep 22* 1914. *H H Soto* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *W H Davison*, 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.

..... *W H Davison* (Signature of Recruit)
Date..... *Sep 22* 1914. *H H Soto* (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..... *Valentia*..... this..... *22*..... day of..... *Sep*..... 1914.

..... *McCurry* (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

..... *Frank Smith* (Approving Officer)

48 P.C.A.
15 Bm.

Description of Davison M. N. on Enlistment.

Apparent Age 20 years 3 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 8 1/2 ins.

Chest measurement { Girth when fully expanded 36 ins.
Range of expansion 3 ins.

Complexion Fair

Eyes blue

Hair blonde

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

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 over left eye.
Whole back upr.

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 7-9 1914.

Place Cal. Carter

[Signature]
[Signature]
Medical Officer.

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

M. Davison 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] (Signature of Officer)

Date Sept 18 1914.

DISCHARGE DOCUMENTS

R. O. No.

H. Q. No.

Proceedings of Court of Inquiry or on men
reported Missing on Active Service.....

Attestation Papers.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms.....

Proceedings on discharge.....

Corps History Sheet.....

Date and No. of Deposit Receipt for
Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

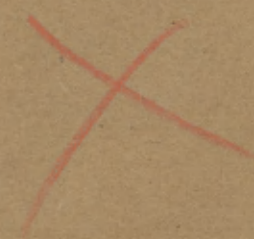
Last Pay Certificate.....

Name *Davison W^m N.*

Regt. No. *24880* Rank *Pte*

Corps *15th Bn. 48th Highlanders Can* **06511**

Killed in action 4.11.16



*5-11
17-11
26 11*

2

Name Davison William Rank Pte. 1284 Reg. No. 27880.

Unit 15th. Batt.

Next of Kin Mrs. M. E. Davison. (Mother.) c/o. Mrs. D. H. Christie
Mount Pleasant. Coleraine. Co. Derry. Ireland.

[illegible]

[illegible]

005
Number... 27880 Rank... Pte

Surname... DAVISON... G-1688-Disp-
SER 28 102

Christian Names... William N.

Unit... 15th Gen Inf Bn Theatre of War... France

Dates of Service.....

Remarks.....

Latest Address... Mrs. M. E. Davison
Mother

97 St. George's Rd.

Roll No. 13 London, S.W. England

Page 5-8 up

3 56504 Darts

JUL 20 1921

Mad

649-D-4671

✓ ✓ ✓ ✓
Davison W.N. Pte.,., #27880

✓
15th Btn.

Meds. & Decs.

Mother

Mrs M.E. Davison

97 St. George's Rd.,

London S.W.

England.

MAR 1 - 1921

Scroll Desp. 22-7-22 Reqn. No 2-24337

Plaque Desp. 22-7-22

Reqn No

43309
Father

Mr. H.C. Davison

Address as above.

Mem. Cross

Mother

Same as above.

Elig. 14/15 star Pls. 15th Bn.

V.M.

W.W.M

Desp. 23.11.20 (M) @ 32282

32859

B.

M

808

SURNAME.

Davison (649-D-4671)

CARD NO.

D

CHRISTIAN NAMES

William H.

FOLL.

REGL. NO. 27880

RANK Pte.

UNIT 15th

Bn.

FORMER CORPS nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Davison, Mrs. M. E.

RELATIONSHIP TO SOLDIER

mother

ADDRESS

97, M. George's Rd. London. S. W. England.

auth. I. 649-D. 4671-30-1-16 424.

Also Notify Mrs D. A. Christie, Mount Pleasant-

Coleraine, Co Derry. Auth S-4-21-38-1. 3-7-16

COUNTRY OF BIRTH

Ireland Moneymore Co. Derry.

DATE

June 2nd 1894

PLACE OF ATTESTATION

Valcartier, P. Q.

DATE

Sept. 2nd 1914

From Quebec per

S. S. "Meganiti" 4/10/14

MARRIED

SINGLE

yes.

WIDOWER

TRADE OR CALLING

Silk.

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

20

YEARS

3

MONTHS

HEIGHT

5-

FEET

8 $\frac{1}{2}$

INCHES

CHEST MEASUREMENT

36

INCHES

EXPANSION

3

INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

Brown

DISTINGUISHING MARKS

Scar over left eye. Mole left back.

MEDICAL EXAMINATION.

PLACE

Valcartier, P. Q.

DATE

Sept. 7th 1914

Present Address! - Not Stated.

No. 27880

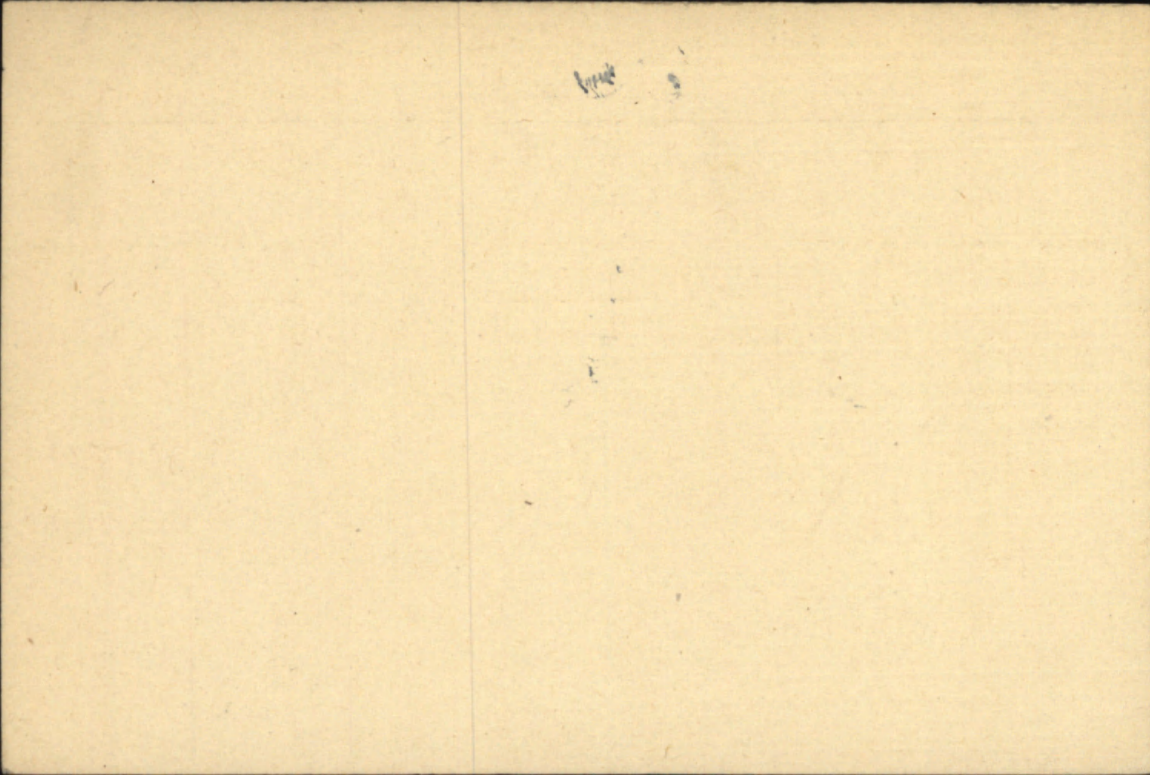
RANK *Pte.*NAME *Davison W.*

T. O. S.

UNIT *48th Regt. (Highlanders)*M. D. *2*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1914</i> <i>Aug. 12th</i> <i>31</i> <i>Sept. 22</i>	<i>1914</i> <i>Aug. 30th</i> <i>Sept. 21</i> <i>Oct. 31</i>	<i>✓</i> <i>✓</i>	<i>on 15th Bn. paylist.</i>	<i>Oct. paylist</i>

UNIT SAILED
OCT 3 1914



REGT'L No 27880

H. Q. FILE No. 649-

NAME

Davison, William W.

RANK AND CORPS

Pte. 15th Bn.

FOLLOWS

No.

FOLLOWS

CABLE

No.

DATE

NATURE OF CASUALTY

I.

05173	21-11-16	Killed in Action Nov. 4 th 1916 ✓
A. J. B.	20900	" " " " "
Rouen	18-11-16	(Recd 14-2-17)

LIST No

HOSPITAL

DATE OF
ADMISSION

REMARKS

1500" Rep. from Base

4-11-16 Killed in action

27780 belongs to Ed C. Lavell
O.M.S. 1300
13th Bn

Surname

Christian Name or Names

Reg. No.

Davidson

Davidson
Wm N

Wm N

27780

Rank

Unit

Co.

Troop

Batty.

Pfc

15th Bn

Hospital

1 Gen

Date of Admission

12-1-15

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

Syphilis

(1)

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnoses: if more than one state present

DISPOSITION

Date

REMARKS

Duty

3-4-15

as per #1 Gen 7

A.M.D. 2 Dept.

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

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

Surname Christian Name or Names Reg. No.
Davison W.N. 27880

Rank Unit Co. Troop Batty.
Pte. 15th Bn.

Hospital Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

Killed in Action 4.11.16

DISPOSITION

Date

C.L. 22.11.16 A500

REMARKS

Reported from Base**A.M.D. 2 DEPT.****Beh. of D.G.M.S. O.M.F.C. London.**

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

NAME DAVISON, W. N. *Ph*

Regimental No.

27880

Name and address of next-of-kin

Unit 15th Battalion

Mrs. M. E. Davison (mother)

Date of enlistment Sept. 22nd 1914

5, Golf Terrace,

Place of birth Ireland

Portrush, Ireland.

Married (yes or no) No

Date and place discharged

Amount of pay assigned monthly \$ 15.00

Reason for discharge

To whom payable

Character on discharge

Mrs H. C. Davison

no character Place
Edinburgh

60 Princess Square
Bayswater

Entered on N.E. Card Index.....
Checked by *J. H. Lillots on*

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.	
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						
1914																	
Sept 22	Oct 31	40	1.00	40.00	40	1.00	40.00		44.00			44.00			44.00.		
Nov 1	Nov 30	30	1-	30	30	10	3		33			33			33.		
Dec 1	31	31	1	31	31	10	3 10		34 10.			34 10			34 10.		
Jan 1	31	31	1	31	31	10	3 10		34 10.			34 10			34 10.		
Feb 1	Feb 28	28	"	28	28	"	5 90	13 10.	78.			2 50			4 65	17 15. Ven. 26 1/2 26 1/2 15.	
Apr 1	Apr 30	30	"	30	30	"	3	70 85	103 85.			7 75.			1 95	19 70. 13 days Van Jan 13-25. Transit 13 Batt. 26-4. 15	
1/5	31/5	31	"	31	31	"	3 10	94 15	78 25								
1/6	30/6	30	"	30	30	"	3	128 25	161 25			15			15		
1/7	31/7	31	"	31	31	"	3 10	146 25	180 35			11 15			26		
Adjustment of Exchange								154 35									
								370									
1/8	31/8	31	1	31	31	10	3 10	158 05	192 15			132 19 15			147 19	13 1/2 Aug 11. Mail Room	
Sept	1-30	30	1-	30	30	10	3 00	44 96	77 96			8 10 15			23 10	L.P.C. 15 Batt.	
Oct	1-31	31	1	31	31	10	3 10	54 86	88 96			2 68 15			14 68		
Nov.	1-30	30	1	30	30	10	3	71 28	104 28			23 64 15			38 64		
Dec	1-31	31	1-	31	31	10	3 10	65 64	99 74			22 07 18			37 07		
Jan	1-31	31	1-	31	31	10	3 10	62 67	96 77			5 24 15			20 24		
								76 53									
								497									
								49 70	3 70	550 40			336 27 120		17 60	473 87	

Statement of
JUN 19 1917
Account rendered

Carried forward to
Large Ledger sheet

Setled

Date		PAY		Field Allowance			Other Credits		Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					
Feb.	1-29	29	1 ⁰⁰	29	29	10	2 90	3 70	550 40			336 27 120		1760	473 87	
												30 89	15	~~20 84~~	45 88	
Mar	1-31	31	1 ⁰⁰	31	31	10	3 10	62 55	96 65			11 34	15	1 22	27 56	Charge sheet 31/3/16
									69 09							

557

55 70 3 70 616 40

378 49 150

18 82 547 31

Checked.....

69 09

BALANCE TRANSFERRED TO NEW LEDGER.

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Javison Christian Name W. R.

Examined	{ on <u>7</u> day of <u>Sep</u> 191 <u>4</u> at <u>Valcartier</u>	Approved by <u>C. E. Preston</u>
Birthplace	{ City or Town <u>Monmuran</u> County <u>Co. Derry, Ireland</u>	Rank <u>Capt.</u> M.O.
Apparent age	<u>20</u>	
Trade or occupation	<u>Silk</u>	
Height	<u>5</u> Feet <u>8 1/2</u> Inches.	
Weight	<u>137</u> Lbs.	
Chest measurement	{ Minimum <u> </u> inches. Maximum expansion <u>36</u> inches.	
Physical development	<u>Medium</u>	
Small-Pox Marks	<u>-</u>	
Vaccination Marks	{ Arm Right. Left. Number <u>2</u>	
When Vaccinated last	<u>1895</u>	
(a) Marks indicating congenital peculiarities or previous disease	<u>-</u>	
(b) Slight defects but not sufficient to cause rejection	<u>-</u>	

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

Date	Result	VACCINATIONS.
<u>1914</u>	<u>OK</u>	<u>A. J. Mackenzie</u> M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>1914</u>	<u>OK</u>	<u>A. J. Mackenzie</u> M.O.
		M.O.
		M.O.

Enlisted on 18 day of Sept 1914 at Valcartier

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>15th Batt.</u>	<u>27880</u>		
Transferred to.. ..	<u>17th Batt.</u> <u>13th Battalion</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.

Christian Name..

[illegible]

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year 1915	21850 27580	Pt Unit. 15 Bu	Darison	Age. 20 Service. 6/12
Station and Date.	Disease			
13/1/15	Chancroid			
	Address:- Towns Can.			
	Complaint:- Sore on penis			
	History:- Exposed in Nov 14. noticed sore three days ago			
	Examination:- Soft chancres on prepuce			
	Treatment:- Cantharisation.			
	14 Wash			
	15 ✓ —			
	16 ✓			
	17/1 ✓			
	18/1 ✓			
	19/1/15 ✓			
	20/1/15 ✓			
	21			
	22/1/15			
	23/1/15			
	24/1/15			
	25/1/15			
	26/1/15			
	27/1/15			
	28/1/15			
	29/1/15			
	30/1/15			
	31			
	1/2/15			
	2/2/15			
	3/2/15			

* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

Station
and Date.

4/28/15

5/2/15

6/2/15

7/2/15

8/2/15

10/2/15

11/2/15

12/2/15

13/2/15

14/2/15

15/2/15

17/2/15

18/2/15

19/2/15

20/2/15

21/2/15

22/2/15

24/2/15

2/3/15

Had three Salvosian + one grey oil

Second Grey Oil March 8th 15

Third " " " 13th 15

Fourth " " " 20th

Had three Salvosian &

Five Grey Oil.

to be discharged

G M Davis

Capt Camble

WILL

In event of my death
I give the whole of my
property & effects to
my mother/ Mary E.
Davison

Signed,

William Norman Davison

Private no. 27880.

12th October 19015

Extracted from Pay Book Page 14.

Holograph.

27880. Pte W.H. Davison.

15th Batt.

K.G.J.

RELATIONSHIP OF DEPENDANT

5 Golf Terrace, Port Rush
Ireland

EFFECTIVE (DATE)

[illegible]

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE DEC 8 1961 AUTHORITY 100-368611

RELATIONSHIP

RELATIONSHIP

REASON Killed in Cooten 4-11-16

B.O. 81 18-11-16

Entered on N.E. Card Index

Checked by H. Villalbona

11202

112 02

Ar. 112.02 Lu full #12152, 16/8/17. V150.

Statement of
JUN 19 1917
Account rendered

no Canadian A/P. In agreement with Ottawa slip
H. Q. 593-1-12 of 20-12-16.

Small
Ledger Sheet

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 DAVISON Christian Name W.N

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Moneymore County Derry

Examined ... { on 20th day of Aug. 1914.
 at Toronto

Declared Age ... 20 years 60 days.

Trade or Occupation ... Book-keeper

Height ... 5 feet, 9 inches.

Weight ... 150 lbs.

Chest { Girth when fully Expanded. 40 inches.

Measurement { Range of Expansion 2½ inches.

Physical Development ... Good

Vaccination Marks { Arm ... Right Left
 Number 2

When Vaccinated ... Infancy

Vision ... { R.E.—V=
 L.E.—V=

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

(b) Slight defects but not sufficient to cause rejection ... { (b)

Approved by (Signature) S.M.Morrell

(Rank) A.M.C.

Medical Officer.

Enlisted ... { at Toronto
 on 22nd day of September 1914

Corps.	Regtl. No.
<u>15th Batt.48th Highlanders</u>	<u>27880</u>
<u>16th</u>	

Became non-effective by

on _____ day of _____ 191

(Signature) _____

(Rank) _____

or to the Sick List in the case of Warrant Officers treated in quarters.

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

Table III.—Boards; Courts of Inquiry, 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.

[illegible]

Table IV.—Service Table.

[illegible]

6749

MILITIA AND DEFENCE

ASSIGNED PAY.

To whom

Mrs. H. C. Davison.

Address

~~Go D. W. Church Mann,~~
~~The Bank House,~~
~~Radcliffe Lane.~~

Rate

\$15 ⁰⁰/₁₀₀

Date to Commence

June 1st 1915

By whom assigned

Davison. Wm N.

Regtl. No.

27880

Rank

Pte 1st Lt.

Corps, &c.

7th Batin.

PAYMENTS.

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			~~New Address~~
Sept.				~~Central House~~
Oct.				~~Portstewart~~
Nov.				~~to Derry~~
Dec.				~~Ireland~~
Jan.	1915			
Feb.				
March				
Apl.				
May				
June		7557	15	~~to Gloucester Place~~
July		15585	15	~~Edinburgh~~ (W. & G.)
Aug.		26098	15	~~New Address 19/1/16 7R.~~
Sept.		37617	15	~~60 Princes Square~~
Oct.		51135	15	~~Baywater W.~~
Nov.		66655	15	
Dec.		83.67	15	~~New Address 19/1/16 File 5764 (P. Permanent)~~
Jan.	1916			~~90 D. H. Christie~~
Feb.			105	~~Mount Pleasant, Coleraine Co.~~
March				~~Berry.~~

ASSIGNED PAY.

By whom assigned *Darison*

Wm J

Regtl. No. *27880*

Pte

15th Batt

Month	Year	Cheque No.	Amt.	Pay Sheet	REMARKS.
Jan.	1916	<i>102400</i>	<i>15</i>	<i>105</i>	
Feb.		<i>125728</i>	<i>15</i>		
March		<i>151155</i>	<i>15</i>		
Apl.		<i>4741</i>	<i>15</i>		
May.		<i>30749</i>	<i>15</i>		
June		<i>58281</i>	<i>15</i>		
July		<i>93299</i>	<i>15</i>		
Aug.		<i>126764</i>	<i>15</i>		
Sept.		<i>151345</i>	<i>15</i>		
Oct.		<i>195427</i>	<i>15</i>		
Nov.		<i>231890</i>	<i>15</i>		
Dec.					
Jan.	1917				
Feb.					
March					
Apl.					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					

270

Payment Stopped
A. 3 M Form,

23.11.16.
Killed in action

Rank and Name

DAVISON, W.H.

Regimental No.

27880

Unit

15th Battalion

Date of enlistment

Sept 22 nd., 1914.

Place of birth

Ireland

Married (Yes or No)

No.

If in Permanent Force

Promotions or appointments

Name and Address of Next-of-kin

Mrs M.E. Davison, (mother)

~~5, Golf Terrace,~~~~Portrush, Ireland.~~

Date and place of discharge

Reason for discharge

Character on discharge

Envelope 11262

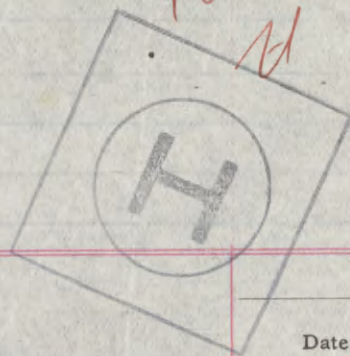
Coleraine, Co, Derry

Ireland

(R.L. 1. 15)
20.6.16

File RL25-D-1284

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				
19/2/15	O.C. 14 th	Trans to 17 th Bn	Lidworth	1/2/15	Part II Orders 19/2/15
6/4/15	O.C. 17 th	Taken on 17 th Bn.	Shorncliffe	3/4/15	Part II O. 6/4/15
26.4.15	"	Embarked to 13 th Bn.	France	26.4.15	do do 26.4.15
16.5.15	O.C. 15 th	Taken on strength. 15 th	3rd Echelon.	3.5.15	Part II O. #10
17.1.15	do	10 days F.P. A.W.H.	Larkhill.	17.1.15	do #536
	O.C. Hosp.	Adm. No, Gen Hosp.	Bulford.	12.1.15	} Syphilis. med. Hist. sheet.
	do	Disce. do	do	3.4.15	
		On strength 15 th	France.	31/15	
11.12.15	O.C. 15 th	Granted 7 Days leave	"	20/15	Part II O. #40
21.4.16	do	7 days F.P. #1.	Proven	8.4.16	Part II O. 17. Drunkenness
18.11.16	do	Killed in Action	Field	4.11.16	Part II O. 81
					Gas Rept A500 d/22.11.16



berh. Cornick
K. I 101/Inf/15/9

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps *15th Canadian Batt. 48th Highlanders of Canada*Regimental No. *29880* Rank *Pte* Name *Davison W. W.*Enlisted (a) *22/9/14* Terms of Service (a) _____ Service reckons from (a) _____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				
<i>16/5/15</i>	<i>Pt 2 order</i>	<i>Taken on strength of 15th Bn</i>		<i>3/5/15</i>	<i>Pt 2 order No 10.</i> <i>Sub order No 24,</i>
<i>26/11/15</i>	<i>Ob. 15/2m</i>	<i>Granted 7 days leave from</i>		<i>26/11/15</i>	<i>B213-26/11</i>
<i>14-4-16</i>	<i>Ob. W.</i>	<i>Sentenced to 7 days F.P. No. 1 for when on active service: "Drunkenness" 8.4-16.</i>	<i>Field</i>	<i>11-4-16</i>	<i>Bro 69 Part 2 order 17 d 20/4/16</i>
<i>13/10/16</i>		<i>To leave corps Bombing Sch from</i>		<i>4/10/16</i>	<i>B213</i>
<i>10/11/16</i>		<i>Killed in Action</i>		<i>11/10/16</i>	
		<i>Assassinated.</i>		<i>4/11/16</i>	<i>DCS 350 15.11.16</i> <i>Part II O No. 81. 11/16</i>
			<i>LIEUT.</i> <i>FOR LT COL.</i> <i>A.A.G.</i>		

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				