

528508.

DUPLICATE.

No. 05192

Folio.

ATTESTATION PAPER.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Card 4 f.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... Dickie
- 1a. What are your Christian names?..... James Arnold
- 1b. What is your present address?..... 27 Carlton St., Winnipeg Man., Canada
2. In what Town, Township or Parish, and in what Country were you born?..... Carberry, Manitoba
3. What is the name of your next-of kin?..... William Dickie
4. What is the address of your next-of-kin?..... Grandview, Manitoba, Canada
- 4a. What is the relationship of your next-of-kin?..... Father
5. What is the date of your birth?..... Feb 10, 1893
6. What is your Trade or Calling?..... Druggist, (Graduate)
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 } Yes
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, James Arnold Dickie, 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.

James Arnold Dickie (Signature of Recruit)

Date January 27th 1916. W.E. Webb (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, James Arnold Dickie, 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 Arnold Dickie (Signature of Recruit)

Date January 27th 1916. W.E. Webb (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 London, Ont., this 27th day of January 1916.

James Arnold Dickie (Signature of Justice)

Major A. M. G.
Cem'dg 'C' Section No. 2 F. A. Depot C. E. F.

*Transmitted
1/8/16
28.*

Description of James Arnold Dickie on Enlistment.

Apparent Age.....22.....years.....11.....months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height.....5.....ft.....11.....ins.

Chest measurement { Girth when fully expanded.....36½.....ins.
Range of expansion.....32.....ins.

Complexion.....Dark

Eyes.....Brown

Hair.....Dark Brown

Religious denominations. { Church of England.....
Presbyterian.....
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).

Appendix Incision.
2 scars on right abdomen,
one on centre between Umbilicus
and Pubes

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.....January 27th.....1916.

Place.....London, Ont.,

*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:—

G. J. Ramsay
Capt. Miller
Medical Officer.

CERTIFICATE OF OFFICER COMMANDING UNIT.

.....James Arnold Dickie,.....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.

James Arnold Dickie.....(Signature of Officer)
.....Major A. M. G.
Com'dg "C" Section No. 2 F. A. Depot C. E. F.

Date.....January 27th.....1916

REGIMENTAL DOCUMENTS

mark
8-7-19

NAME

DICKIE, James ARNOLD

REGT. NO.

Lieut

UNIT

16th Regt Bn

FILE NO.

4

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)

1 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

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)

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)

1 DENTAL HISTORY SHEET (M.F.B. 405)

MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

1 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)

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)

M. F. W. 2591

Supp Cert.

Off Route Letter

M. F. W. 67

Miss

149

Payable

Ref. S. S. Caronia 25.6.19

Pers.

9-7-19

Pers 81328

DEATH

Category

d. 9 Sep 20

15888

DISCHARGE

Category

Demob

DESERTION



Born by Air Min. Act. 857-8-4-77

LIEUT

Number

Rank

Surname

DICKIE.

Christian Name

JAMES ARNOLD

Units

Theatre of War

~~FRANCE~~ ENGLAND

Date of Service

Transfer to the 1st. to R.F.C. 8/9/17 2330632 d 10/4/18
" " " 4/3/19 2931252 d 25/2/19

Remarks

Air Force Roll #2 page 27

A.M. 252361/20/57 of 10.7.20

Latest Address

Grand View
Man

Roll No.

200m.-2-21.M.

in am Page 222B



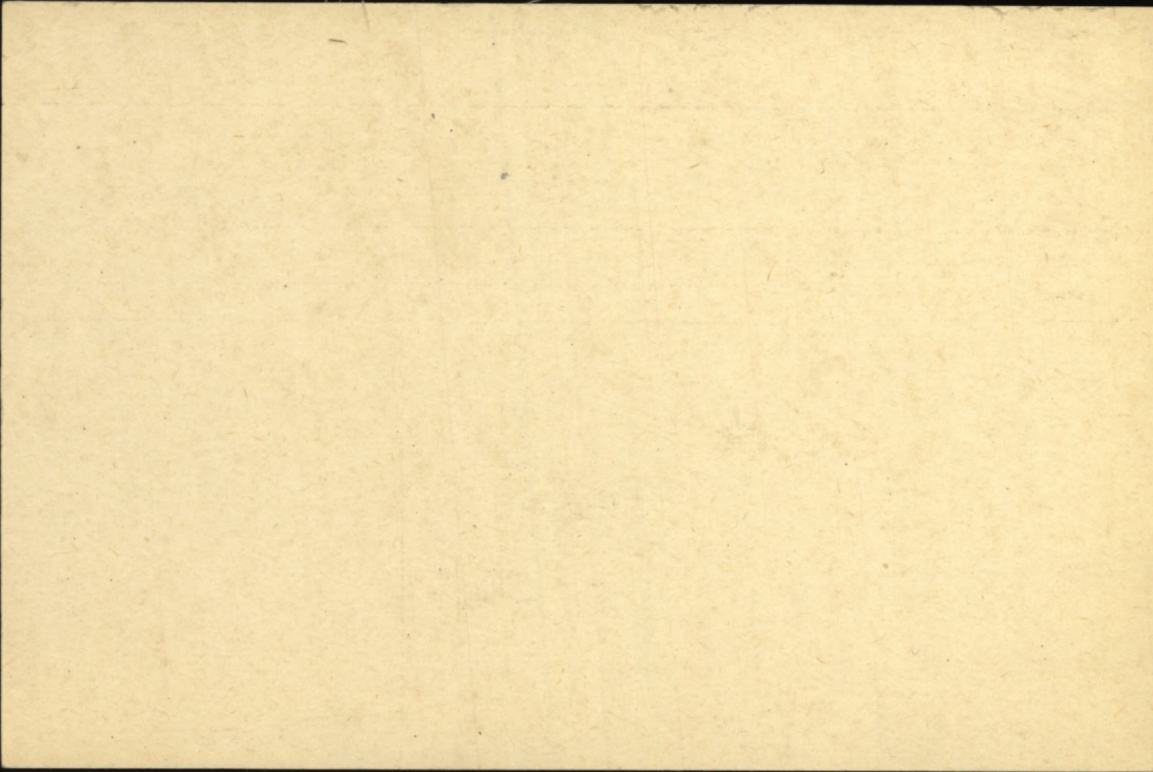
No. 528508 RANK *Sergeant*NAME *Dickie. J.* *a*T. O. S. *27-5-16*
(002 of 16-5-16)

UNIT

10 Stationary Hospital. C. C. F.

*Trans. from A. M. C. T. D. #1.**15-5-16. (002 of 16-5-16)*M. D. *1*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916</i> <i>May 21</i> <i>June 1</i>	<i>1916</i> <i>May 31</i> <i>June 21</i>	<i>L</i> <i>H</i>	<i>Discharged 21-⁵6-16</i>	<i>100 26 of 21-6-16.</i>
<i>a/c closed by payment - $\frac{1}{2}$"</i>				



No.

RANK

Lieut.

NAME

*Dickie. J**a*

T.O.S. 22-5-16

UNIT

*10th Stationary Hospital C.C.F.**(0032 of 5-7-16)*

M.D.

/

PAID	PAID	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
<i>1916</i>	<i>1916</i>			
<i>May 22</i>	<i>June 30</i>	<i>H</i>	<i>app. Lieut. see L. P. C.</i>	<i>D.O. 26 of June paylist.</i>
<i>July</i>	<i>July</i>	<i>H</i>		



[illegible]

SURNAME.

Dickie,

CHRISTIAN NAMES

James Arnold

REGL. No.

RANK

Lieut

UNIT

No. 10. Stat. Hosp.

FORMER CORPS

Can. mil.

NEXT OF KIN.

NAMES IN FULL

Dickie, William

RELATIONSHIP TO SOLDIER

Father

ADDRESS

Grandview, Man.

COUNTRY OF BIRTH

Canada

Grandview, Man.

DATE

Feb. 10th 1893.

PLACE OF ATTESTATION

DATE

0 / 22-8-16, 5²⁰ / 1.

R/c 2-7-19, 26⁰ / 9.

CARD No.

S.O.S. 21-5-16

*to take Comm
FOLL.*

*1.
S.O.S. Remb. 8-7-19.
S.O. 186 / 5-7-19.
Wb. 1-2-19.*

*S.O.S. Remb. 8-7-19
ing 2073 8/11/19
CHANGE OF ADDRESS*

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

Druggist

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION.

PLACE

London, Ont.

DATE

May 17th 1916.

Present address. Grandview, man.

No. 05192 RANK Pte
528008 (2nd. Dist) Sergt.

NAME Hickie J. A.

T. O. S.

UNIT #2 Field ambulance depot

M. D. /

PAID FROM	PAID TO	SIG OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Jan 27	1916 Jan 31	Dis.	Pro. Sergh.	D.O. 19 of Jan. 1916
May 1.	May 20.	✓	Trans. to #10, Stationary Hosp. 20-5-16.	(20 100 of 20-5-16),



REMARKS

M. F. W. 2579.
405-D.P.-10M-5-19.
1772-39-1366 (10159)

Date of Birth.

10 / 2 / 93

Date	From whom received	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.
-9-17	T.O.S. Man. Regt. from C.A.M.C. and remain Seconded to R.A.F. (Lo. G.) (C.R.O. 3970-3-5-18) (M.R.D. DO. 132-12-5-18)				<i>[Signature]</i> Commanding. Manitoba Regimental Depot.
-19	18th Res. Bn T.O.S. on posting from M.R.D. S.O.S. of O.M.F.C. on transfer to C.E.F. in Canada.		SEAFORD. SEAFORD.	7-3-19.	Part 11 D.O. No. 66 Part 11 D.O. No. <i>[Signature]</i> ADJUTANT, IN CANADIAN RESERVE BATTALION.
-19	"O" WING S.O.S. O.M.F.C. ON PROCEEDING TO CANADA		WITLEY	18.6-19	D.O. PT. 2 No. 5-8 <i>[Signature]</i> Lieut., OFFICER I/c RECORDS, "O" Wing C.G.C.
7-19	M.H.Q. Ottawa T.O.S. C.E.F. In Canada on General Demobilization		M.D. No. 1	25-6-19	C.E.F. R.O. No. 2071-19
-7-19	M.H.Q. Ottawa S.O.S. C.E.F. in Canada on General Demobilization		M.D. No. 1	8-7-19	C.E.F. R.O. No. 2073-19 <i>[Signature]</i> Can for Director Personal Services 20 9.7.19

2091

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

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

560M—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps No. 10 Stationary Hospital, C.E.F.

Regimental No. _____ Rank Lieutenant Name James Arnold Dickie

C. E. F.

Enlisted (a) 22-5-16 Terms of Service (a) C.E.F. Service reckons from (a) 22-5-16

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) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked Halifax Canada		24/8/16	
		Disembarked Liverpool Eng		30/8/16	N.M.P. 2810
10/9/17	CO. 1183	Struck off Strength #10 Can. Stat. Hospital on posting to CAMC Depot.	Eastbourne.	31/8/17	Part II O. #252, d/12/9/17. <i>James</i> MAJOR, C.A.M.C. FOR LT. COL. I/O HOSPITAL.
13.9.17	C.A.M.C.D. S.O. from C.M.H. Eastbourne		W Langer	31.8.17	P. II D.O. 255
15.9.17	~~do~~ On command to R.H.B. Reading		~~do~~	~~8.9.17~~	~~P. II D.O. 257~~
	P. II D.O. 257 of 14-9-17 is cancelled		S'cliffs		P. II 124 (C.O. 530)
4-5-18	Embarked S.O. on transfer to the Manitoba Regiment		do	8.9.17	P. II 124 (C.O. 530)
					<i>James</i> CAPT. ASST. ADJUTANT. FOR OFFICER COMMANDING, C.A.M.C. DEPOT.

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

[P.T.O.]

Mar 10.01

2091

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

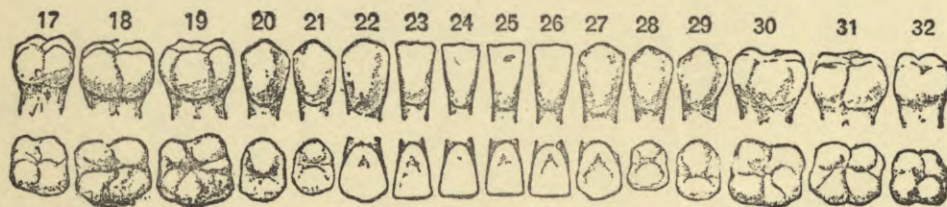
Canadian Printing and Stationery Services, London

DIRECTIONS TO
DENTAL OFFICERSNAME OF SOLDIER (Block Letters) DICKIE J. A.REGIMENT 18th. RES. BATTN. RANK LIEUT. No. Date of Examination in England 2/4/19 Date of Examination in France

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

2. EXTRACTIONS

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 YES(b) In England YES(c) In France

Signature of Dental Officer

Douglas Brown Capt

STATEMENT OF WORK

1. Project Name: [Faint text]

2. Project Objectives: [Faint text]

3. Project Scope

- 1. Project Name
- 2. Project Objectives
- 3. Project Scope
- 4. Project Budget
- 5. Project Timeline
- 6. Project Risks
- 7. Project Deliverables
- 8. Project Stakeholders
- 9. Project Communication
- 10. Project Reporting

Project Manager: [Faint signature]

2091

CANADIAN EXPEDITIONARY FORCE

J.W. 1-35.

W.H.

Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

This is to Certify that (Rank).....**Lieutenant**.....

(Name in full).....**JAMES ARNOLD DICKIE**.....

Enlisted in.....**No. 10 Stationary Hospital.**.....

CANADIAN EXPEDITIONARY FORCE, on the.....~~XXXXXXXXXXXXXXXXXXXX~~.....

day of.....**191**..... AND WAS APPOINTED to COMMISSIONED RANK

in.....**The Canadian Army Medical Corps.**.....

CANADIAN EXPEDITIONARY FORCE on the.....**Twenty-second**..... day

of.....**May**..... 191**6**.....

He SERVED in CANADA, ~~a~~ **ENGLAND**, with the **10th. Stationary Hosp.,**

Canadian Army Medical Corps Depot; Manitoba Regimental Depot and
18th. Reserve Battalion. and was STRUCK OFF THE STRENGTH on the.....**Eighth**..... day

of.....**July**..... 191**9**..... by reason of.....**General Demobilisation**.....

Dated at Ottawa, this.....**Sixteenth**..... day

of.....**December**..... 191**9**.....

Seconded to Royal Air Force 8-9-17.

Ceases to be Seconded 7-3-19.

A. E. Baymole

For

Director of Personal Services.

CANADIAN EXPEDITIONARY FORCE

Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

This is to certify that

(Name in full)

joined in

CANADIAN EXPEDITIONARY FORCE on the

day of

(Place)

in

CANADIAN EXPEDITIONARY FORCE

(Rank)

(No.)

OF THE CANADIAN

(Service)

has been shown to be correct in the

by reason of

and it is hereby

that

(Signature of Officer)

(Signature of Officer)

(Signature of Officer)

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

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

Sheet No. 2.

Bank of Montreal

PAYMENTS.

Name of Soldier

Dickie, J. A.

L. L. Job 4503. - Req. 6832.

#

Lieut. #10. Staty. Hosp.

\$2500 Nov 1st 1917

SEP 1 1918

Month.	Year.	Cheque No.	Amt.
April	1916		
May			
June			
July			
Aug.			
Sept.			
Oct.		116345	50
Nov.		20694	50
Dec.		422272	50
Jan.	1917	34225	50
Feb.		38038	50
March		45978	50
April		445398	50
May		1456	50
June		7401	50
July		14555	50
Aug.		2090	50
Sept.		30248	50
Oct.		237215	50
Nov.		40936	50
Dec.		37940	50
Jan.	1918	53174	50
Feb.			
March			
April			
May			
June			
July			

50 X
 50 S
 50 W.

50 Cu

W.

b

00

800

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.				

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12.
 50m.—6-16.
 H. Q. 1772-39-819.

Bank Account.

Credit

To Whom

Address

*Bank of Montreal
 London,
 Ont*

By Whom Assigned

Regtl. No.

Rank

Corps

Dickie, J. A.

Lieut

#10, Staty. Hoapl.

Rate

\$500

\$25⁰⁰

Nov 1st 1917

SEP 1 1916

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			① 2m 4 ¹² / ₁₇ 8m 7 ¹² / ₁₇
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

1951
1952

1953

1954

1955

1956

Date		PAY		Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount		No	Date						

RETURNED TO CANADA
L.P.C. TO 31.5.19
TRANSFER TO N.E. LEDGER

Bank of Montreal
London Out
25
Mrs J. J. Martin
g. J. Martin
man

Dickie, Louis J. 10 Star 1916

Assignment as at
SEPT 1 1916

7.60

15
202.5.19

202.5.19

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. Rank Lieut. Surname DICKIE
(Given name in full)

JAMES ARNOLD

Unit or Corps 18th Res. Bn. Birthplace Grandview, Man. Can.

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

I. GENERAL DESCRIPTION:

Physique Good Weight 160 lbs. Height 5 ft. 10³/₄ in. Colour of Eyes Brown
Nutrition Good
Pulse 72
Condition of arteries normal
Vision Rt. 6 Left 6
Hearing (conversational voice) Rt. 20 ft.
Left 20 ft.

Identification marks, scars, or deformities.
(Give cause and date of origin).

Appendectomy, 1907

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 yes
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.

Appendectomy performed 1907.

2091

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Seymour (Overseas)
Date 2-4-19 Signed J. W. McNeil M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.
Signature J. W. McNeil
(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.)

10 Stationary
Unit Hospital, C.E.F. Rank Lt. Name James Arnold Dickie

OFFICERS' DECLARATION PAPER.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE ANSWERED BY OFFICER.

(ANSWERS.)

1. (a) What is your Surname? Dickie
- (b) What are your Christian Names? James Arnold
2. (a) Where were you born? (State place and country) Grandview, Manitoba, Canada
- (b) What is your present address? Carberry, Manitoba, Canada
3. What is the date of your birth? February 10th, 1893
4. What is (a) the name of your next-of-kin? Father William Dickie
- (b) the address of your next-of-kin? Grandview, Manitoba, Canada
- (c) the relationship of your next-of-kin? Father
5. What is your profession or occupation? Druggist
6. What is your religion? Presbyterian
7. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes
8. To what Unit of the Active Militia do you belong? as A.M.C. Canadian Militia (Generally)
9. State particulars of any former Military Service. —
10. Are you willing to serve in the
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? Yes

The undersigned hereby declares that the above answers made by him to the above questions are true.

James Arnold Dickie (Signature of Officer.)

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider him* Fit for the CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Date May 17th, 1916

Place London, Ont.

*Insert here "fit" or "unfit."

J. Cannon Wilson
Medical Officer.

M. F. W. 51.

20m.—10-15.
H. Q. 1772-39 917.

Wm. Cannon

Original

James Arnold Dickie, C.I.B., Royal C.I.B. Stationery

OFFICERS' DECLARATION PAPER

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE ANSWERED BY OFFICER

- (a) What is your name? James Arnold Dickie
- (b) Where were you born? (Give place and country) Grandview, Manitoba, Canada
- (c) What is your present address? Grandview, Manitoba, Canada
- (d) What is the date of your birth? February 10th, 1893
- (e) What is (or) the name of your next of kin? Janet William Dickie
- (f) the address of your next of kin? Grandview, Manitoba, Canada
- (g) the relationship of your next of kin? Sister
- (h) What is your profession or occupation? Teacher
- (i) What is your religion? Presbyterian
- (j) Are you willing to be vaccinated or re-vaccinated and inoculated? Yes
- (k) To what Unit of the Active Militia do you belong? 1st Battalion, 1st Regiment
- (l) State particulars of any former Military Service
- (m) Are you willing to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? Yes

The undersigned hereby declares that the above answers were given by him to the best of his knowledge and belief.

CERTIFICATE OF MEDICAL EXAMINATION

I have examined the above named Officer in accordance with the Regulations and find him to be fit for service in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Place, London, Ont.
Date, May 1st, 1916
Signature, J. W. Smith
Rank, Major

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Article 71, Financial Instructions C.E.F., 1914).

Regimental No. 528508 Rank Sergt. Name Dickie, J.A.
Corps No. 10 Stationary Hospital who was * discharged
On ##### May 21 1916 1915, to take out a commission.

* Insert "discharged" or "transferred."

The following is a statement of the account of the above-named to date of transfer or discharge inclusive:—

DR.		\$	c.	CR.		\$	c.
From June 1 To June 21	Bal. Dr. from previous month.....			From June 1 To June 21	Regimental pay 21 days at \$ 1 c 35	28.35	
	Total payments during period				Field allowance 21 " \$ c 15	3.15	
	from June 1 to June 21	18.00			Other allowances Subsistence	12.60	
	Assigned Pay.....				21 days at 60¢		
	Other Charges (give particulars).....	65.10			Other Credits (give particulars)	10.00	
	Pay & all ces. May 22 To June 21				Bal. Brot. fwd.		
	Bal. Cr. on discharge or transfer.....				Bal. Dr. on discharge or transfer	29.00	
	TOTAL.....	83.10			TOTAL.....	83.10	

The amount shewn as Balance Cr. due on discharge or transfer has † not been received paid.

Monthly stoppage on account of assignment of pay is nil, and has been charged in Pay-list for month of.....

† Insert "been" or "not been" as case may be.

REMARKS:—

State (1) date of enlistment 27-1-16.

(2) if married and if a Separation Allowance Card has been submitted NO

(3) cause of discharge and authority Mob. Order 156. Sub order 1083 d/21/6/16
dating discharge with effect from 21/5/16.

If discharged from the Contingent, state if Stop Payment advice for Assigned Pay has been forwarded, and date Nil

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date June 21 1916

Place London, Ont.

J. Cannon
Paymaster.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

PAY CERTIFICATE

Whereas the following named persons have been appointed to the following positions in the Canadian Contingent Expeditionary Force:

Name of person appointed: _____

Position appointed to: _____

Rank or grade: _____

The following is a statement of the amount of pay and allowances payable to the person named above for the month of _____ 1914:

Particulars	Amount
Pay	_____
Allowances	_____
Total	_____

Witness my hand and seal this _____ day of _____ 1914.

By _____

The amount shown above is payable to the person named above on account of his services as _____

and is subject to the provisions of the Military Service Act, 1914.

To be made out in duplicate.

H.Q. 54-21-23-53

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins. No. 10 Stationary Hospital C. E. F.(2) Regimental Number Lieut.(3) Full Name of Soldier Dickie, James Arnold(4) Place of Birth Carberry, Manitoba(5) Are you married, or not? No(6) If married, state,
(a) Full name of your wife.....

(b) Present Postal Address.....

(7) Are you a widower?

(8) Have you any children?

If so, give number of boys and girls.....

Also their names and ages.....

(9) Is your Father alive?.....**Yes**

If so, state name and address **William Dickie, Grandview, Manitoba**

(10) Is your Mother alive?.....**Yes**

If so, state name and address **M. Dickie, Grandview, Manitoba**

(11) If your Mother is a widow.....

Are you her sole support, or not?.....

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

(15) Are you insured?.....**Yes**

If so, in what Company?.....**Great West Life Ins. Co.**

Have you made arrangements for payment of your Insurance premium.....**Yes**

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

JUN 21 1916

Date.....

Edmund Seaburn
Comd'g No. 10 Stationary Hospital, C. E. F.
Lt. Colonel,
Officer Commanding

MEDICAL HISTORY SHEET.

Surname Dickie Christian Name James Arnold

Examined	on <u>26</u> day of <u>Jan</u> 191 <u>6</u>	Approved by <u>P. P. P. P. P.</u>
	at <u>London Ont</u>	Rank <u>Capt</u> M.O.
Birthplace	City or Town <u>Barbery</u>	
	County <u>Manitoba</u>	
Apparent age	<u>22/11</u>	
Trade or occupation	<u>Druggist</u>	
Height	<u>5</u> Feet <u>11</u> Inches.	
Weight	<u>150</u> Lbs.	
Chest measurement	Minimum <u>32</u> inches.	
	Maximum expansion <u>36 1/2</u> inches.	
Physical development	<u>Good</u>	
Small-Pox Marks		
Vaccination Marks	Arm Right Left <u>1</u>	
	Number <u>One</u>	
When Vaccinated last	<u>1905</u>	
(a) Marks indicating congenital peculiarities or previous disease	<u>appendix Inflammation</u>	
(b) Slight defects but not sufficient to cause rejection		

Enlisted on 27th day of January 1916 at London Ont

CORPS.	REG'TL NUMBER.	HABITS.	DATE.
<u>1st</u>	<u>528508</u>		<u>January 27 116</u>
<u>2nd</u>			<u>May 20 116</u>
<u>3rd</u>			
<u>4th</u>			
<u>5th</u>			
<u>6th</u>			
<u>7th</u>			
<u>8th</u>			
<u>9th</u>			
<u>10th</u>			
<u>11th</u>			
<u>12th</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.

Surname.

Christian Name,

James Crooked

[illegible]

ASSIGNED PAY.

UNIT.

RANK.

NAME.

Beneficiary

Address

Amount. \$ 50⁰⁰

Separation Allowance issued. Yes or No.....

NAME OF

RATE \$

AUTHORITY

DATE

AUTHORITY

Name

Initials

Bank

10th Lt.
R 16.

Pay #2
Ha
mess
Pay #6

#2 pd.
60
" "
" "
" "
Pay #6 pd.

Lieut
Flying Officer

30th 17

from 6
H. 11. 5th 11.

Wickie

J. A.

Bank of Montreal

Add. Outfit. Allee 1/8.

DATE

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

SPECIAL AUTHORITIES
To be initialled by P.M. in every case.

INITIALS

1918

Apr 15 A.P. Canada

50

17 Adj to Flying Officers rate. 26th 18-31st 18

521

64 60

Do

cash

584

64 60

6 April Pay R.

180

23

Bank

1145

130

May 14 A.P. Can.

50

15 Pay May R.

186

27

Bank 2645

136

June Pay June R.

180

11

A.P. Can.

50

25

Bank 4144

130

July 5 A.P. Can.

50

17 Pay July R.

186

25

5607

136

Aug 16 A.P. Can.

50

20 Pay Aug R.

186

24

Bank 7235

136

Sept Pay Sept R.

180

16

A.P. Can.

50

26

Bank 9162

130

Oct. Pay Oct. R.

186

A.P. Can

50

22

Bank 10393

136

Nov. Add. Outfit allee 1/8.

v.

100

Pay Nov. R.

180

A.P. Can

50 - 230 -

Forward.

ASSIGNED PAY.

UNIT.

RANK.

NAME.

Beneficiary

Address

Amount. \$ 50⁰⁰

Separation Allowance issued. Yes or No.....

NAME OF

DATE

AUTHORITY

DATE

AUTHORITY

Name

Initials

Bank

R. F. C.

Rate \$ 2.50
Fall .60
Mess 1.00

Lieut

Mess
30 9/16 Fr Canada
DD 4635
C.T.D. 4 1/2 9/16

Dickie

J.A.

Bank of Montreal

Canada

DATE

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

SPECIAL AUTHORITIES
To be Initialled by P.M. in every case.

INITIALS

Nov 15	A.P. Can.				50				
16	Pay Nov (R)		123						
22	Bank	30733		73					
Dec 7	A.P. Canada Dec				50				
10	Pay (R) Dec		127 10						
18	Bank	35096		77 10					
Jan 11	Trans Exps.	11513						£1. 7. 4.	76 ⁶⁵
15	A.P. Canada Jan				50				
21	Pay Jan		127 10						
4	Bank	39459		77 10					
Feb 15	A.P. Canada				50				
Feb	Pay R		114 80						
20	Bank	40995		64 80					
Mar 2	Travance 8-13 24	14855						4.2.0	#19 95
12	A.P. Canada				50				
19	March Pay R		127 10						
15	Travance 17-24 24	15404						4.15.8	#23 38
23	Bank	42616		77 10					
Apr 9	Billeting 29/18-16 24/18	15231						1.18.0	#9 25

ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF

DATE

AUTHORITY

DATE

AUTHORITY

Beneficiary

Address

#10 Stat. Hosp.

Lieut.

30-8-16 From Canada
D.O.#4635 C.I.D.
d/2-9-16.

Name Dickie.

Initials

Bank of Montreal.

Amount. \$ 50⁰⁰ for 1-9-16

Separation Allowance issued. Yes or No.....

DATE

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

SPECIAL AUTHORITIES
To be initialed by P.M. in every case.

INITIALS.

1916

Sept 8 Bank Cr Bal 31-8-16

20 Credit Balance for Canada V#8321

20 Tr. Credits for H. Mess for 30/16, V#8320

21 A.P. loan

26 Bank

Oct 19 Pay Out R

20 A.P. loan

25 Bank

Nov. 16 A.P. Canada

20 Pay. Nov. R.

28 Bank

Dec 11 A.P. l

" " Pay Dec R

" 18 Bank

1917 Jan. 16 A.P. Canada

" 20 Pay. Jan. R

" 26 Bank

Feb. 15 Pay. Feb. R.

" 19 A.P. Canada

" 27 Bank

Mar 15 Mch. Pay R.

" " A.P. Canada

" 26 Bank

1916-17

9466

111 60

108 -

111 60

111 60

1918

100 80

21903

111 60

24836

47 60

47 60

110

50

60

61 60

50 -

58

50 -

61 60

50 -

61 60

50 -

50 80

50 -

61 60

ET

Rank and Name DICKIE, James Arnold.

Lieut.

Regimental No.

Name and Address of Next-of-Kin Father.

Unit No. 10 Stationery Hospital.

William Dickie.

Date of enlistment

Grandview, Manitoba, Canada.

Place of birth Grandview, Manitoba, Canada

Married (Yes or No)

Date and place of discharge

If in Permanent Force

Reason for discharge

Character on discharge

Promotions or appointments

Temp Lieut. 20.5.16 CM Sailed 23.8.16 H.9593-6-1.

R.1.9-D-730.

Man. R

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	REMARKS Taken from Official Documents	
Date	From whom received		Place	Date
4.9.16.	DMS.	Taken on Strength on arrival at Shorncliffe from Canada.	30.8.16	Co 1638, DO. 4635 1354 (C.T.S.)
3.11.16.	D.O.	att to ADMS. Can's Lon. Area.	2.11.16.	Co 2029.
3.11.16.	D.O.	att to DADMS. Can's Seaford.	2.11.16.	Co 2029. P. n. ord 220 adu. 8 La
3.11.16.	adu. 8 La	att to adu. 8. Lon area.	2.11.16.	P. n. ord 220.
28.11.16.	ADMS. LA.	S.O.S. on Trans. to ADMS. Can's Brighton Area.	19.11.16.	P. n. Ord. 24-145. II And 8 (ADMS Brighton)
6.1.16.	D.M.S.	Posted to 4010 St. St. Hosp.	2.11.16.	C.O. 37.
22.1.17.	10 Stat. Hsp.	proceeded with unit to Wilder Coast. 12-9-17. S.O.S. on Posting to 6010 C. Depot.	21.1.17.	P. n. ord 22.
10.9.17.	AMS.	Posted to CAMC. Depot.	31.8.17.	Co 1183. 24 243. 2401 St. Seaford.
14-4-17.	CA. M. C. D.	On command to A.H.C. Military Aeronautics Reading	8-9-17.	P. n. 257
16-4-18.	W.O.	Secd. for duty with the R.A.C.	8-9-17.	Lon. Gay. 30632.
5-4-18.	W.O.	To be. & flying Officer.	24-2-18.	Lon. Gay. 30612.
29-4-18.	A.O.	To be. temp Lieut Manitoba Regt from. came & remain. Secd. to R.A.C.	8-9-17.	Lon. Gay. 30657.

ad. letter on. R.1.9-D-730 d/29-14-18

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				
2-5-18	AMS.	S.O.S. on transfer to Manitoba Regiment		8-9-17	to 530.
12-5-18	M.R.D.	205 man Regt. from Camb. remains seconded to R.A.F.		8-9-17	PT O. 132.
25-3-19	W.O.	being to be sent for duty with R.A.F.		4-3-19	Lg. 3125
1-3-19	M.R.D.	S.O.S. posted to 18 Res Bn		6-3-19	PT O. 66
6-5-19	W.O.	Relinquished Comm ⁿ in R.A.F. on leaving to be employed		5-3-19	~~PT O.~~ Lg. 31327
21-5-19	O. Wing	S.O.S. from 18 th Bn pending return to Canada		19-5-19	PT O. 87
19-6-19	C.C.C. Witley	T.O.S. on posting from 18 Res Bn posted to occupation		19-5-19	PT O. 110
30-6-19	M.R.D.	S.O.S. on transfer to C.C.F. Canada		23-6-19	PT O. 65
	do	Sailed for Canada		25-6-19	Sailing List 84

20313

WAR SERVICE BADGE
CLASS "A" NO.....

2091

2-10

ob. 19
Da K

PROCEEDINGS OF AN OFFICER OR NURSING SISTER
STRUCK OFF STRENGTH
OF THE
CANADIAN EXPEDITIONARY FORCE

HM T. CAIRN
SAILING, No 84
Embarked 25, 6, 19.

1. RANK Lieut
2. NAME Dickie. James. Arnold
3. UNIT 18th Canadian Reserve Battalion (RAF)
4. DATE STRUCK OFF STRENGTH PLACE
5. REASON On Cessation Of Hostilities

SOS 8-7-19 RO 2073-19

6. AUTHORITY A.G. 1a. 8-1-155. d. 4.1.19

7. PROPOSED RESIDENCE
Grandview
Grand View.
Manitoba

This folder should contain the following documents:

1. Declaration Paper, M. F. W. 51, or Attestation Paper, M. F. W. 23.
2. Casualty Form, A. F. B. 103 or M. F. W. 54.
3. Medical History Sheet, M. F. B. 313 or A. F. B. 178.
4. Proceedings of Medical Boards, A. F. A. 179 or M. F. B. 227.
5. Medical Report M. F. W. 129.
6. Dental History Sheet, M. F. B. 465.
7. Last Pay Certificate, M. F. W. 44.
8. Certificate as to Missing Documents.

PROCEEDINGS OF AN OFFICE OF NURSING SISTER
STRICT OF STRENGTH
OF THE
CANADIAN IMPERIAL FORCE

1914

1914

1914

1914

1914

1914

1914

1914

1914

1914

1914

1914

1. Triplicate Declaration Paper (M.F.W. 51), or
Triplicate Attestation Paper (M.F.W. 23).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 176).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129).
5. Dental Certificate (O.A.D.C. 2009a).
6. Proceedings on Sinking or Stranding (M.F.W. 2591).
7. Last Pay Certificate (P. 41) *dup*
8. War Service Gratuity Form (M.F.W. 2595).
9. Sundry Documents.

Disposal Act

Group

Checked by No.

Date 18 JUN 1919

13
9

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

Bank Account
For Credit.

4184

© Nov 1st 1917 Sept 1/16

RATE OF ASSIGNMENT

50	25 ⁰⁰		
----	------------------	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank

Lieut. Promoted

Reverted

Discharge

Soldier's Name

J. A. Dickie
10 Staty. Hospl.

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Bank of Montreal

Address

London, Ont.

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total
1917				
Dec 31			800	800
Jan	W 66089		25	25
Apr	B 7057		25	25
May	O 15420		25	25
June	I 26969		25	25
July	Q 31662		25	25
Aug	T 40960		25	25
Sept	N 44057		25	25
Oct	O 53084		25	25
Nov	L 61157		25	25
Dec	T 64967		25	25
Jan	Q 71319		25	25
Feb	Q 77750		25	25
Mar	Q 8422		25	25
Apr	M 2120		25	25
May	Q 7603		25	25
June	Q 11449		25	25
JUL	K 12650		25	25
			1225	1225

Another account on following ledger sheet

© 2 m 4¹² 9 m 7¹²MRO 10 26³/18

See additional assignment

Allocated

Ret'd per

Date

2-7-19 M.F.W. 187

J. A. Dickie

MRQ 3379

AUDITED

12/7/19



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name _____

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4.

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7993.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

4185

1, 11, 14

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

25			
----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Rank	<i>Serjeant</i>	Promoted	Reverted	Discharge
------	-----------------	----------	----------	-----------

Soldier's Name J. A. Dietz

Battalion 10th Sta. Hos.

Beneficiary

Relationship

Address

Name Mrs Joseph Marino

Address 10 Wm Dietie Grandview, Man

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
Dec	E 32869		50	50	to	mailed 14/12/17.
Jan	P 70543		25	25	- m	
Feb	E 95652		25	25	me	2 m. 8. 12 14
Mar	A 124754		25	25	me	
Apr	B. 7059		25	25	me	
May	O. 15471		25	25	G.	
June	I 76970		25	25	C.	
July	Q 31661		25	25	Robt	
Aug	T 40959		25	25	G.	See additional assignments
Sept	N 44058		25	25	G.	
Oct	Q 53083		25	25	R	
Nov	L 61158		25	25	D	
Dec	T 64968		25	25	O	
Jan	Q 71320		25	25	a	
Feb	S 77784		25	25	U	
Mar	J 85473		25	25	a	
Apr	M 2121		25	25	O	
May	J 7604		25	25		
Jun	D 11500		25	25		
JUL	K 12657		25	25		
			525	525		

At Closed *Baronia*

Ret'd per *11/7/19*

Date.....*2-7-19* M.F.W.187

John Hecclair W/R 1

H/R O 92378

AUDITED *[Signature]*

A STENCIL
HAS BEEN MADE
FOR THIS ACCOUNT

M. F. W. 128
406M.—6.17—1772.39—141
L. L. 223:0—M. & D. 7993.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank

Promoted

Reverted

Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

Date

Cheque
No.

Amount
S/A

Amount
A/P

Total

REMARKS

M. F. W. 128.
400M-5-17-1772 38-1141
L. L. 22220-M. & D. 7093.