ORIGINAL 931170

ATTESTATION PAPER.

No.

No. 2 CONSTRUCTION Dy. C.E.F.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ..... Farmer
1a. What are your Christian names? ..... Arthur
1b. What is your present address? ..... Shelburne, N.S.
2. In what Town, Township or Parish, and in what Country were you born? ..... Shelburne, N.S.
3. What is the name of your next-of kin? ..... Lovice Farmer
4. What is the address of your next-of-kin? ..... Shelburne, N.S.
4a. What is the relationship of your next-of-kin? ..... Mother (widow)
5. What is the date of your birth? ..... February 12th 1896
6. What is your Trade or Calling? ..... Labourer
7. Are you married? ..... No
8. Are you willing to be vaccinated or re-vaccinated and inoculated? ..... Yes
9. Do you now belong to the Active Militia? ..... No
10. Have you ever served in any Military Force? ..... No
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? ..... Yes
12. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force? ..... Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Arthur Farmer, 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.

Arthur Farmer (Signature of Recruit)

Date August 12th 1916. Capt. Fr. Brickenwright (Signature of Witness)
S.R.D.

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Arthur Farmer, 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.

Arthur Farmer (Signature of Recruit)

Date AUG 12 1916 191 . John Lambert (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 Halifax this 17 day of Aug 1916

W.C. Smith (Signature of Justice)

A Justice of the peace in and for the City & County of Halifax, N.S.

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

Description of Farmer, Arthur on Enlistment.

Apparent Age 20 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. 10½ ins.

Chest measurement.
- Girth when fully expanded ..... 34 ins.
- Range of expansion ..... 2 ins.

Complexion Dark

Eyes Dark

Hair Dark

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

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

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

Date August 11 1916. .....

Place Shelburne, N.S. ..... S W Burns
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.

Arthur Farmer 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.

D. H. Sutherland (Signature of Officer)

SEP 13 1916

Date ..... 191 .

MB 13/3/19

REGIMENTAL DOCUMENTS

NAME FARMER ARTHUR Pte. REGT. NO. 931170 UNIT 1st Bn. C.E.F. H. Q. FILE NO.

	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)					DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)				01395	Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)				M	
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
1	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob
1	MEDICAL EXAMINATION (M.F.W. 129)					
1	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
1	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	A.F.W. 3997.					
1.	M.F.W. 192					
1	D.M.S. 1375					
1	C.A.D.C. 5009. a.					
1	[illegible]					
1	[illegible]					

H

1 1 3 1

4 4 4

W. 2589
100M-11-18
1772-39-1377

Form R 122.
2353—100M—9-1-16

JM

Rank

Name FARMER, Arthur.

Reg'l No. 931170

Unit No. 2 Const. Bn.

If in perm. Corps, What Unit?

Married or Single Single.

Place and Date of Enlistment Halifax N.S. 12th Aug 1916.

Place of Birth Shelburne, N.S.

Name and Address, Next-of-Kin Lovie Farmer.

Shelburne, N.S.

Relationship Mother.

Assigned Pay Monthly $

Payable to

Relationship

R.B. No. 6637
File R.L.
Category OR CAN

Separation Allowance $

Payable to

Relationship

Discharge, Date and Place

Reason

Character

H. W. & V., Ld.—9546-16.

Report. Date.	From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
		Arrived in England. S.S. Southland		7.4.17.	A.F.B. 103 CHECKED 29 MAY 1917 Awd 170.
14:6:17	2 Con Bn	Arrived in France	Field	17:6:17	Pte DD 115.
16-12-18	NSRD	T.O.S. from 2nd CC Coy	GHQ	Bdft 14-12-18	+305+71 d/ 19-12-18 2nd CC Coy
27-12-18	NSRD	O/C to C.D.D Rhyl	—	— 27-12-18	—313
25. 1. 19	NSRD	ceases O/C T.O.S. to C.C. & Canada	Rhyl	Ripon 12. 1. 19	-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.				

DUPLICATE

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. 2 CONSTRUCTION B'n. C.E.F.

(2) Regimental Number 931170

(3) Full Name of Soldier Arthur Parmer

(4) Place of Birth Shelburne, Nova Scotia

(5) Are you married, or not ? Single

(6) If married, state,
(a) Full name of your wife X

(b) Present Postal Address X

(7) Are you a widower ? No

(8) Have you any children ? X

If so, give number of boys and girls X

Also their names and ages X

M. F. W. 67.

200M.—3-16.
1772 39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? No

If so, state name and address ×

(10) Is your Mother alive? Yes

If so, state name and address Mrs Lovey Farmer
Shelburne, N. S.

(11) If your Mother is a widow Yes

Are you her sole support, or not? Yes

(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.

$20 per month.
Only Son

(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.

Yes

(15) Are you insured? No

If so, in what Company? ×

Have you made arrangements for payment of your Insurance premium ×

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

J. Lavie Cart
Jr.
Lieut-Col.
No. 2 Construction Batt'n. C. E. F.
Officer Commanding.

Date MAR 6 - 1917

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

A.W.O.L.

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

Casualty Form—Active Service.

Unit, ~~Regiment or Corps~~ No 2. Construction Batt. C.E.F.

Regimental No. 931170 Rank pte. Name Arthur Farmer

Enlisted (a) 12-8-16 Terms of Service (a) ~~period of war~~ ~~and Six months after~~ 4 months C.E.F. Service reckons from (a) 12-8-16

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: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
	O.C. No 2 Const Batt'n	Embarked, Canada	Halifax N.S.	25/3/17	
		Disembarked, England	Liverpool	7/4/17	
7/5/17		Proceeded Overseas	Seaford	7/5/17	Pte. A. Farmer. A.W.O.L. from 31-5-17 to 6-6-17 inclusive. Forfeits 5 days pay for Making way with Iron Rations. Pt I. A.O. No 2
31.5.17	OC.				Landed in France 17-5-17 N.R. 4 Coy. 31.5.17 Bmbdy A.120. 26/7/17

F. H. Barnhill Lieut. for Captain. Adjutant, No. 2 Construction Batt'n, C.E.F.

CANADIAN CORPS 6 JUN. 1917 CAN. RECORDS, LONDON.

(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				
27-12-17	O C.	10 days FP No 2, for frotting heavy draught horses.		20.12.17.	B295 No 2 dy 9-1-18 B2069.
5/1/18	ocmir	att to 1 Dist CTC.		30/12/17	B213.
14.3.18	38 Co T.C.	Continued to 28 days FP No 1 8.3.18. for WOAS in that. replusing to obey an order given by an N.C.O. No 2 Insolence to an N.C.O	Field	4.3.18	B2069 Ltr 16/- 26.3.18.
2.3.18	38 Co T.C.	Ceases to be attd to 38 Co. on leave to F.P. Compound. Attd. to 38 Co. C.T.C.	Fld.	8.3.18	B. 213.
11.4.18	38 Co T.C.	4 Days F.P. No. 2 for WOAS. 1. Not complying with a lawful order. 2. Insolence to a Superior officer.		9.4.18	B. 2069. O/26. D/3.5.18.
25.7.18	O/C 38 Coy.	14 days FP No 1. 24.7.18 for creating a Disturbance	Field.	31.7.18	B 2069 WO 24 Sept 1918
3.8.1918	O/C 38 Co.	Evacuated to Base Hospital	Field	25.7.18	B213.
1.8.1918	51 General Hosp.	T.D.S. adm.	51 Gen. Hosp.	1.8.1918	W8680/96747
24.9.18	51 Genl.	V.D.S. To. Duty.	Field.	24.9.18	W5536
24.9.18	51 Gen	Forfeit S.A ex plus under stoppage of pay whilst in Hospital from 1.8.18 to 24.9.18 (55 days)			A50 1643/6810 PT 56 30 Oct 918
25-9-18	O/C B.B.D.	Arrived from 51 Gen Hosp	Calais	24-9-18	RO 1452
30.9.18	O/C B.B.D.	Left for No 38 Company C.T.C.		30.9.18	RR D.S. no number

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 931170 (Rank) Private

Name (in full) Arthur Farmer enlisted in

the #2 Cons. Batt'n

CANADIAN EXPEDITIONARY FORCE at Halifax NS on the 12th

day of August 1916

HE served in France

and is now discharged from the service by reason of Demobilization

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

Age 23 years.

Height 5 Feet 11 inches

Complexion Dark

Eyes Dark

Hair Dark

Marks or Scars Nil

Arthur Farmer
Signature of Soldier

J. M. Hughes LIEUT
for O. C. DISCHARGE SECTION No. 6 DISTRICT DEPOT
Issuing Officer

Rank

Appointment

Date of Discharge February 19 1919

Signed at Halifax NS this 17th day of February 19 19

in Military District No. 6

File Reference No.

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.

M. F. W. 39a
200m.—2-18.
H.Q. 1772-39-882

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. ..... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

.....

Medals and Decorations .....

.....

Remarks .....

.....

Signed at ..... this ..... day of 19

.....
Name of Officer

.....
Rank

.....
Appointment

On demobilization the particulars called for on the back of this certificate will not be completed.

Uniform not to be worn after Date of Discharge, unless authority has first been obtained from G.O.C. District.

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. 931170 Rank Pte. Surname Farmer
(Give name in full) Arthur

Unit or Corps D.D.6 Birthplace Shelborne N.S.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 170 lbs. Height 5 ft 11 in. Colour of Eyes Brown.

Nutrition Good

Pulse 80

Condition of arteries Normal

Vision Rt. 6/6 Left 6/6

Hearing (conversational voice) Rt. 5 ft.

Left 5 ft.

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

Nil.

Opinion as to general health and physical condition Good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)

Nervous System No Genito Urinary System No Cardio-Vascular System No

Special Senses No Integumentary System No Respiratory System No

Disturbance of mentality No Muscular System No Digestive System No

Osseous and Joint System No Any other general condition No

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

V.D.S. 1918. Wassermann negative

Shelborne.
N.S.

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

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at.....(Overseas)

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 Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at...Halifax...(Canada)

Date ...Dec. 14/17... Signed ...J. W. McKay...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 ...C. Fraser...

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

[OVER]

M.F.W. 139.
1033 (D.P.) 500M-11-18.
1772-39-1142.

D.M.S. 1375.

Medical Examination upon leaving the Service

of an Officer fit for general service or a Soldier fit for duty.

☛ *Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.*

Rank Pte Name Arthur Surname Farmer

Unit or Corps 17th Reserve (If a soldier) Regtl. No. 931170

Born at Shelburne, N.S. on, date February 12, 1897

Signature (for identification) Arthur Farmer

The examination is to be made jointly by two Medical Officers.

1. **PHYSIQUE**—Any deformity, maiming or lameness? If so, describe.

Weight 135 lbs.
Height 5 ft. 11 ins.

no

2. **NUTRITION AND DIATHESIS?** Good

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. **NERVOUS SYSTEM?** no

4. **RESPIRATORY SYSTEM.** no

5. **HEART?**

Abnormal Sounds? no
Abnormal Size? no
Pulse Rate? 80 Intermittence or irregularity? no

6. **ARTERIES.**—Any hardening? no

7. **DIGESTIVE SYSTEM?** no

8. **GENITO-URINARY SYSTEM?**

Urinalysis—s.g.? 1026 Reaction? ac Albumen? 0 Sugar? 0

9. **SKIN, MIDDLE EAR, EYE** or any other part? no

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe. no

11. Opinion as to the health and physical condition of the one examined? Good

Examined at Kinmount Park. Signed H.R. Loucks Capt. M.O.

Date 2/1/19 Signed for Lieut-Colonel Carter M.O.

☛ *If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.*

Army Form B. 103. Regimental Number 931170

Casualty Form - Active Service.

Regiment or Corps No 2 Ldn. Sanitary Co.

Rank Pte. Surname Farmer Christian Name Arthur

Religion ..... Age on Enlistment ..... years ..... months

Enlisted (a) ..... Terms of Service (a) ..... Service reckons from (a) .....

Date of promotion to present rank ..... Date of appointment to lance rank .....

Extended { ..... / ..... } Re-engaged { ..... / ..... } Qualification (b) .....

or Corps Trade and rate .....

Occupation ..... Signature of Officer

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported in 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			
5-10-18	43 Co HQ	attached on repairing for Base	Depot	1-10-18	B213
28-11-18.	O.C.	28 days. 7 P.1. 1 day R.W. I when on active service. Absent from working Parade. 1300 25-11-18. II Negl. to comply with an order.	Field.	25-11-18.	B2069. P68.
30.11.18	43 Co HQ	To 2 P Compound	Sailed.	26.11.18	B213
11/12/18.	A.A.G.	Trans to England & posted. to No. 5 Ley Depot Branston		14/12/18.	K.R. 392

Lieut. for Lt.-Col., A. A. G.
Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

(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) Signaller, Shoeing-Smith, &c.

W. 1625 M2733 2000m 9/17 (35611) C. F. & S., Ltd., Form B./103 E/1807. P.T.O.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
17.12.18	N.S.R.D.	T.O.S. and attd 2nd C.C.D. for Quarters & Rations.	Bramshott	14.12.18	D.O.305
					N.S.R.D. 313 27/12/18
	N.S.R.D.	ON COMMAND TO C.D.D. Kinmel Pk Rhyl	BRAMSHOTT		PART II D.O.
					C. A. Knight LIEUT. OFFICER i/c RECORDS, NOVA SCOTIA REGTL. DEPOT.
		I.O.S. O.M.F.6 on transfer to C.C.F. Discharge Canada Sailing No 4	Kinmel Park		Roy. M. Hammond Lieut
12.1.19	O'seas T/O/S.	No. 6 D.D. Halifax Casy Co.	22.1.19		D.29. A. Ferguson Lieut ASST. ADJT. No. 6 DISTRICT DEPOT
19.2.19	DISCHARGED at Halifax, N.S.				D.O.48 J. R. Hughes LIEUT O.C. DISCHARGE SECTION NO. 6 DISTRICT DEPOT

ORIGINAL 931170

MEDICAL HISTORY SHEET

Surname Palmer Christian Name Arthur

Examined { on 27 day of aug 1916
at Victoria NS

Birthplace { City or Town Shelburne
County Shelburne

Apparent age 20

Trade or occupation Laborer

Height 5 feet 10 1/2 Inches

Weight 151 lbs.

Chest measurement { Minimum 34 inches
Maximum expansion 3 inches

Physical development Good

Small-pox Marks None

Vaccination Marks { Arm Right Never Left
Number None

When Vaccinated last None

(a) Marks indicating congential peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection

None

Approved by D Murray

Rank Lt & Adjt M.O.

Date	Fit or Unfit	Examined for Re-Engagement	
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.

Date	Result	Vaccinations	
18/3/17	L&FR	Dan Murray	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
18/10/16	L. & F.R.	D Murray Lt	M.O.
31/10/16	L. & F.R.	D Murray Lt	M.O.
12/11/16	L. & F.R.	G A Dunn	M.O.

Enlisted on 11th day of August 1916 at Shelburne N.S.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment				
No. 2 CONSTRUCTION, B.n. C.E.F.		931170		11/8/16
Transferred to				

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 Servcie, on the man becoming non-effective; the date and cause being stated on next page.

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

Surname Farmer Christian Name Arthur

STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer
		Day	Month	Year	Day	Month	Year				
Sum.		5	2	17	9	2	17	Tonsilitis	5		

C.A.D.C. 5009 A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

MD 6

DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.

NAME OF SOLDIER (Block Letters) FARMER A

REGIMENT No 2 Construct Bttn RANK Pte No. 931170

Date of Examination in England 31/12/18 Date of Examination in France

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 3 28, 31,
2. EXTRACTIONS 4
3. CROWNS
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (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 - yes
- (c) In France

KINMEL PARK, NORTH WALES.

Signature of Dental Officer J. S. Somerville Capt.

L-L.Job 5470—M. & D. 6888

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

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

To Whom Miss Lovie Farmer

Address Shelbourne N.S.

Rate 15-00

APR 1917

By Whom Assigned Farmer Arthur

Regtl. No. 931170

Rank Pte

Corps No 2 const. Bn.

PAYMENTS

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

CONSOLIDATED ACCOUNT 6

CANADIAN
ASSIGNED PAY AUDITED
J.M. Rose
AUDIT CLERK
DATE 28/5/19

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—7-16
1772—39—819.

L. L. Job 5470—Req. 6888.

Sheet No. 2. Miss Lovie Farmer (Assignee)

Name of Soldier Harper Arthur No 931170 Pte No 2 Const. Bn

15.00

APR 1917

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		Z 4807	15.	
May		L 7912	15.	15-15.
June		J 14785	15.	15-15
July		R 21221	15.	15.
Aug.		X 27654	15.	15
Sept.		W 32068	15.	15
Oct.		M 42968	15.	
Nov.		W 46931	15.	135 WDE
Dec.		R 56943	15.	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

CANADIAN
ASSIGNED PAY AUDITED
AUDIT CLERK
DATE 28/5/19

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

11-8-16

L. L. Job 4503.—M. & D. 6832.

MILITIA AND DEFENCE

M. F. W. 11.
50m.—6-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Lovie Farmer.

Address Shelbourne, c/o Atlantic House N. S

Relation to Soldier wife, child or mother } Dependant Mother

Name of Soldier Farmer. Arthur

Regtl. No. 931170

Rank Pte

Corps No 2 Construction Batt

To what Corps belonging when called out }

PAYMENTS

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

CONSOLIDATED 5 ACCOUNT

11-8-16

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
50m.-6-16.
1772—39—818.

Sheet No. 2. Lovie Farmer Mother P½

Name of Soldier Farmer, Arthur

L. L. Job 4503.—Req. 6832.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917	N30889	113	113 R
Feb.		K31273	20	20
March		K34493	20 193	20
April		h. 9rr	20	20
May		L4020	20	20
June		P7713	20	20
July		010316	20	20
Aug.		T13803	20	20
Sept.		S17204	20	Bo
Oct.		Y19939	20	B
Nov.		A13412	20	B
Dec.		126116	20	Bo 233 WDC.
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

*Name Farmer, A. Rank Pte Regtl. No. 931170.

Original unit C.E.F. Present unit C.E.F. M. or S. Age 22 Religion Methodist Fyle Depot Ref. H.Q.

Port, ship, and date of arrival Halifax "Empress of Britain" 22/1/19.

Next of kin Louis Farmer (Father)

Address on leave Shelbourne N.S.

Address on discharge Shelbourne N.S.

Transportation issued Yes No Date Character on discharge

Previous occupation Labourer Date and place of enlistment August 12/16 Halifax.

Diagnosis Date of Medical Boards

Date.	Remarks	Pt. 2 Order No.
12/1/19	D.D.S. No 6 District Depot.	Do 29
22/1/19	Posted to Casualty Co.	Do 29.
19/2/19	Discharged at Halifax	Do 48

*—Name will be given in full; surname first.

(over)

Date.	Remarks.	Pt. 2 Order No.

M.F.W. 192
150M—6-18.
1772-39-1243.

D.M S. 1300-50M-21-11-17.

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
FARMER	A.	931170.

RANK	UNIT	CO.	TROOP	BATTY
Pte	NS.2Con.			

HOSPITAL	DATE OF ADMISSION
51 Gen.Etaples.	1-8-18.

1. ..... HOSP. .....

2. ..... HOSP. .....

3. ..... HOSP. .....

4. ..... HOSP. .....

DIAGNOSIS V.D.S.

1.

2.

3.

DISPOSITION DATE

CL. 10-8-18. A287.
2- 10.18.a 335

REMARKS Dis 24-9-18

A.M.D. 2 DEPT.
Bch. of D.G.M.S. O.M.F.C. London.

EPITOME OF HOSPITAL TREATMENT

	HOSPITAL	ADM.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

SURNAME. Farmer

CHRISTIAN NAMES Arthur

REGL. No. 931170 RANK Pte.

UNIT No. 2 Construction

FORMER CORPS Nil.

CARD No. ~~16~~

90s. demob. 19/3/19

FOLL.

P.O. 48 q.v. doc. 2-19 6 D D

Bn.

NEXT OF KIN.

NAMES IN FULL Farmer, Mrs. Lovie

RELATIONSHIP TO SOLDIER Mother

ADDRESS Shelburne, N.S.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada Shelburne, N.S. DATE Feb. 12th 1896

PLACE OF ATTESTATION Halifax, N.S. DATE Aug. 17th 1916

RIC 25-1-19 256/67

L. L. 6945. M. & D. 6904.

M. F. W. 23. 100M.—8-18. H. Q. 177-39-39.

From Halifax per S.S. [redacted] "Southland" 28/3/17.

MARRIED SINGLE WIDOWER Yes.

TRADE OR CALLING Laborer RELIGION Methodist

DESCRIPTION.

APPARENT AGE 20 YEARS ____ MONTHS

HEIGHT 5 FEET 10 1/2 INCHES

CHEST MEASUREMENT 34 INCHES EXPANSION 2 INCHES

COMPLEXION Dark EYES Dark HAIR Dark.

DISTINGUISHING MARKS Not stated.

MEDICAL EXAMINATION. PLACE Shelburne, N.S. DATE Aug. 11th 1916

Present Address:- Shelburne, N.S.

No. 931170 RANK Pte NAME Farmer Arthur.

T. O. S. 11-8-16 UNIT No 2. Construction Battalion
D.O. 15. 23.8.16

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Aug 11.	Aug 31	✓		
Sept.		✓		
Oct.		✓		
Nov.		✓	G.W.L. Forf. 1 days pay.	D.O. 76 13-11-16
Dec.		✓		
1917 Jan	1917	✓		
Feb.		✓		
Mar.		✓		

Form R. 149.

Name FARMER ARTHUR Rank Pte Reg. No. 931170

Unit 2CCC

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918.						
1-8	51 G.H. Etaples		V.D.S.	P 2	87	29/5/18
24-9	Dischgd to duty			P 3	33	4/3/19

Date		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List

NAME Farmer A.

REGT'L. No. 931170

RANK AND CORPS Pte. Nova Scotia R.

H. Q. FILE No 649

FOLLOWS

No.

FOLLOWS

CABLE

No.	Date

NATURE OF CASUALTY

L. L. 31493. M. & D. 8476.

M. F. W. 42—100M.—28-11-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
a287	51 Gen. Etaples	1-8-18	V.D.S.
a333	Disc. " "	24-9-18	" " "

M & H.

Number 931170 Rank Pte.

Surname FARMER.

Christian Name Arthur

Units 68 66 Theatre of War France.

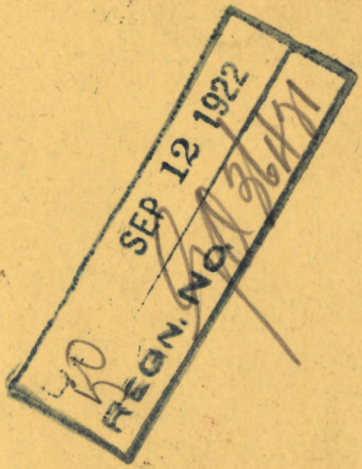
Date of Service 17-5-17

Remarks

Latest Address P.O. Shelburne N.S.

Roll No. B Page 16654

200m.-2-21.M.


SEP 12 1922
REGN. NO

P.S. 559

MARRIED OR SINGLE S

PLACE OF BIRTH Shelburne N.S.

NAME AND ADDRESS OF NEXT OF KIN Louie Harmer
Shelburne N.S.

RELATIONSHIP OF NEXT OF KIN mother

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

DATE	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 DATE	2 No.	2 DATE	3 No.	3 DATE	4 No.	4 DATE
														5 80	5 80								
Apr	1/30	30	1/10	33	00										33 00								
MAY	1/31	31	~	34	10										34 10	29	1/15						
June	1/30	30	~	33	00										33 00	11	19/4						
July	1-31	31	~	34	10										34 10								
Aug.	~~	~	~	34	10										34 10								
Sep	1/30	30	~	33	—										33 —								
				201	30									5 80	207 10								

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1.	DR. 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
Sep	Bal	~~83~~ 82 72							82 72		
Oct	PP	34 10		A.R. 571, 25/7. 2 Bun. att. C.F.C.	3 56			15			
				~ 460 13/17 " " " ~	3 57				94 69		
		34 10			7 13			15			

59 30/5.
127 14/6
194 28/1
292 14/7

MOTIONS, &c.

EFFECTIVE DATE	AUTHORITY

Reg'l No. 931170 Rank Name Farmer Arthur

If in Permt. Corps } What Unit } Unit 2 Can Bw

Permanent Force Allowances

Place of Attestation Halifax N.S.

Date of Attestation 12th Aug 16

Transferred to	Date	Authority

Assigned Pay Monthly $ 15.00 Date Effective 1-4-17

Payable to Mrs. Lovie Farmer, Shelbourne N.S. Relationship Mother

Assigned Pay Monthly $ Date Effective

Payable to Relationship

HOSPITAL, &c.

Name of Hospital

Stop-Payment Form (Assigned Pay) Rendered (date) Effective Reason

Discharge Date and Place Reason and Authority

Account Transferred to Non-Effective Branch (date)

Account Transferred to Officers' Pay Branch (date)

ACQUITTANCE ROLLS 2 No.	2 DATE	3 No.	3 DATE	4 No.	4 DATE	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
										a 5							
											5 5			5 80			Bal from Canada
										15 -		15 -		23 80		23 80	
						9 73				15		29 60		28 30		28 30	
						4 87											
						- -				15		15 -		46 30		46 30	
										15 -	5 50	20 50		59 90		59 90	Forfeits 5 days pay 21.5.17 D.O. 120. 26.7.17
		59	20/5.					3 57		15 -		18 57		75 43		75 43	
		127	14/9					3 57									
		194	28/6					3 57									
		292	14/7					3 57		15 -		25 71		82 72			
						14 60				90 -	5 50	124 38		82 72			

BALANCE	Deferred Pay	Sep. Allce. Eng.
82 72		
94 69		

CANADIAN
ASSIGNED PAY AUDITED
O.K.
Sophonsen
AUDIT CLERK
DATE 28/6/18

H 931170 Farmer. A. 1500

DATE	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 DATE	2 No.	2 DATE	3 No.	3 DATE	4 No.	4 DATE	CASH PAYMENTS 1	2	3
MONTH	PARTICULARS				CR. 1			CR. 2	PARTICULARS					DR. 1	DR. 2	CR 3	CR 4	BALANCE	DEFER RED. PAY	SER. ALLCE. ENG.						
	Oct Bal																	94 69								
Nov -	P.P -				33 -													15.								
									AR. 821. 28. 9/17. C.T.C.					3 57													
									" 844 12 10/17 "					3 57												
									" 966. 25 10/17 "					3 57												
									" 1085. 10 11/17 "					3 57												
DEC	"	"			34 10				D.N. AR. 620 11 9/17 " Jma.					3 57				15.	113 94							
					67 10									17 85				30								
JAN	1918	P.P.			34 10													15								
									AR. 1254. 23 11/17. 2 Consolid Bn					12 49													
									Sta 10 Bn F.P. 2. 20. 12. 17. Do. 2 9/18						11 -												
									AR. 1428. 21 1/17. 2 Con. by CTC					7 14					102 41								
					34 10	-	-							19 63	11 -	-		15.								
FEB		"			30 80				Assigned Pay									15.								
									AR 2184. 24 1/18. 2 Consol. attCTC.					3 57													
									2356. 5/2/18. #1 "					3 57					111 07								
					30 80									7 14				15								
MAR	1918	"			34 10				Asslay									15								
									aR 2614 20/2/18. #1 C.T.C.					3 57													
									28 dup #1. 8/3/18. Insolence. Do. 16 2/3/18						30 80				95 80								
					34 10									3 57	30 80			15								

CASH PAYMENTS			ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
2	3	4				CR DIT	DEBIT			

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable

ASSIGNED PAY. * ~~ENGLAND OR~~ CANADA.	SEPARATION ALLOWANCE. *
EFFECTIVE DATE:- 1st April 1917	EFFECTIVE DATE:-
AMOUNT:- 15.00	AMOUNT:-

NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS P WORD "SAME" ONLY TO BE WRITTEN

Mrs Lovie Farmer mother
Shelbourne N.S.

Stopped Effect 1/1/19

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES BY INSERTION OF DATE CHARGED IN RED

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT		DATE OF PAYMENT	NUMBER OF A R	UNIT PAID B
~~31~~/11/18.		28dys 90 #1.	30	80			

PARTICULARS OF RENDERING NON-EFFECTIVE:- Dis to Canada 1/1/19

1918 MONTH	PARTICULARS	CR. 1		CR. 2.		PAR
MAR	Bal fwd					
Apl	P. Pay	33	-			Ass Pay
						AR 300 20/
May		33	.			ass Pay
	P. Pay	34	10			AR 495 7/5
						4 days 7/2 - 9/
						with landlord
						Sup office 30
						AR 723. 22
		34	10			
Jne	P.P.	33	=			ass Pay
						AR 910
						" 1106
		33				
July	P Pay	34	10			Can A
						AR 1396
						AR 1505
		34	10			
Aug	PP	34	10			Can
						14 days F.P. 1
						Creating a D
		34	10			
Sep	RP	33				Can
						AR 10737 3
		33				
Oct.	PP	34	10			Can a
						V 1/8 to 24/9. 55
						= 49 days. 60
						AR 2691
		34	10			

~~AND OR~~ DA.

SEPARATION ALLOWANCE.

* ENGLAND OR CANADA.

EFFECTIVE DATE:-

AMOUNT:-

AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

Mother

NAME:- FARMER Arthur

NUMBER:- 931170

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:- 2 Construction Bn

DATE ACCOUNT FIRST OPENED:- 1st April 1917

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
Canada Section			

PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

AMOUNT	DATE OF PAYMENT	NUMBER OF A R	UNIT PAID BY	AMOUNT
30 80				

DAILY RATES OF PAY AND ALLOWANCES

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

-EFFECTIVE:- Dis to Canada 1/1/19 Auth: NSRD Nom Roll 161-17/12/18 Ltd Bal 160 40 L.T.C. Bal 139.60

	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR. 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
								95 80		
	33 -		Ass Pay				15 -			
			AR 300 20/4 C 7 C 1	3 57				110 23		
	33		Ass Pay	3 57			15 -			
							15 -			
	34 10		AR 495 7/5 C 7 C 1	2 68						
			4 days FP 2 - 9/4/18 - for (1) absent Comp. with Lance Sgt 34/2) Insolence to Sup officer 20 26 3/5/18 2 Cons Bn		4 40					
			AR 723. 12/5 C 7 C 1	4 46				117 19		
	34 10			7 14	4 40		15 -			
	33		Ass Pay				15 -			
			AR 910 7/6 C F C 1	3 57						
			" 1106 22/6 "	3 57				128 65		
	33			7 14			15 -			
	34 10		Can AP				15 -			
			AR 1246 6/7 C F C 1	3 57						
			AR 1505 22/7 "	3 57				140 61		
	34 10			7 14			15			
	34 10		Can AP				15			
			14 days F.P. 1 24/7/18 Creating a disturbance BO 45 7/8/18 2 Can Coy		15 40			144 31		
	34 10				15 40		15			
	33		Can AP				15			
			AR 1073 30/9 C 4 BD.	4 46				157 85		
	33			4 46			15			
	34 10		Can AP.				15			
			1/8 to 24/9. 55d. Current 8 days. Previous BO 45. = 49 days. 60 d. BO 36 2 Cons 15/10/18		29 40					
			AR 2681 7/10 C F C 1	3 73						
	34 10			3 73	29 40		15			

NUMBER 931170 RANK NAME FARMER A

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2
		34 10		B/f forward.	3 73	29 40
				AR 2933 23/10 CFC1	3 73	
		34 10			7 46	29 40
Nov	Pay	33		AR 3100 - CFC 10 - 8/11/18.	3 73	
Dec	"	34 10		AR 3307 - " - 25/11/18	13 06	
				Cat Nov + Dec		
		67 10		~~AR~~ Sentenced to 28 days F.P. No 1 2068 7/12	16 79	30 80
						30 80
				AR 65 Kim. PK 9/1/19 (L.P.C.E)	9.73	
				S.O.S. Canada Bo 18 25/1/19	£ ∫	19

CANADIAN
ASSIGNED PAY AUDITED
O.K.
AUDIT CLERK
DATE 28/3/19

FARMER A

PARTICULARS	Dr. 1	Dr. 2	Dr. 3.	Dr. 4.	BALANCE	Deferred	Separation
B/forward	3 73	29 40		15	157 85		
33 23/10 CFCl	3 73				140 09		
	7 46	29 40		15			
CFCl - 8/11/18	3 73						
" - 25/11/18	13 06						
Nov + Dec				30			
Fwd to 28 days Pr. No' 2068	16 79	30 80			129 60		
		30 80		30			
m. PK 9/1/19 (2. A6. E)	9.73				119 87		
Canada Bo 18 25/1/19	Eff. 15/1/19						

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

1918-19 No. 6 DISTRICT DEPOT

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 931170 Rank Pte Name Harmer A

Corps M.A.R.D. who was* Discharged

On 19-2-19 191..., to .....

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-1-19 191....

to 19-2-19 191..., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Balance Cr. from prev. month Jan	11	15
Advances by Cheques No. AR 7113	25	=	Regt'l. Pay 50 days at $ 1 - c.	50	=
No. 16120	70	=	Field Allow. 50 days at $ 10 c.	5	00
Assigned Pay and Sep'n Allce. No. 16119	30	=	Separation Allowances* (Monthly) Feb	30	=
Other charges Rey Fund		05	Other Allowances* Clothing allow	35	=
Payment on transfer or discharge No. 16118	141	10	Other Credits* LPC	65	=
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)	70	=
Total	266	15	Total	266	15

*Give particulars.

A monthly stoppage of $ 1.50 (†) has (‡) been paid on account of Assigned

Pay for the month of January 191 9

and Sep'n Allce. for month of February 191 9

(to) Assignee Mrs Louie Harmer Shellbourne N.S.

(Address) Stopped by Ottawa

Sailed by D.D.6

(†) Insert amount to be assigned, whether it has been paid or not.
(‡) Insert "not" if amount has not been paid for period of account. Daily G.A.G.

On Transfer of an Officer.

Out Allowance of $ ..... has been paid by Paymaster, Military District No. .....

REMARKS:—

State (1) date of enlistment .....

(2) if married and if a Separation Allowance Card has been submitted .....

(3) cause of discharge Demob. authority D.O. 48

(4) authority for transfer .....

NOTE.—Separation Allowance and Assigned Pay Card and Index Card (M.F.W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay List of the Un

Date 21-2-19

Place Halifax N.S. .....

W.W. Dingwall CAPT.

Paymaster No. 6 District Depot *Paymaster.*

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new duplicate to District Paymaster; triplicate to accompany the pay list at the end of the month, and quadruplicate for rete as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplic to accompany pay list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.

H.Q. 1772-39-903.
100M-9-18. D.P. 874.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This Form to be used for all ranks (Vide Articles 122, 129 and 171, Financial Instructions, 1st Jan. C.E.F. 1918)

Regimental No. ..... Rank ..... Name .....

Corps ..... who was .....

on the ..... 191 .... Officer "discharged" or "transferred"

The following is a statement of the account of the above named from ..... 191 .... to ..... 191 .... the inclusive Date of Transfer or discharge.

Dr.	£	s.	d.	Cr.	£	s.	c.
Bal. due from prev. month				Balance Cr. from prev. month			
Arrears of Pay				Regtl. Pay			
Pay for Month				Field Allow.			
Assigned Pay and Dep'n Allce. No.				Separation Allowance* (Monthly)			
Other charges				Other Allowances*			
Payment on discharge (Vide Art. 129)				Other Credits*			
Balance Cr. (To be paid by the new unit)				Bal. Dr. (To be deducted by new unit)			
Total				Total			

*Give particulars

Pay for the month of ..... 191 ....

and Dep'n Allce. for month of ..... 191 ....

Subtract:

(1) Pay Assigned .....

(2) Dep'n Allce. .....

(3) Pay Assigned .....

(4) Dep'n Allce. .....

(5) Issue .....

(6) Issue .....

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(994) Issue .....

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(997) Issue .....

(998) Issue .....

(999) Issue .....

(1000) Issue .....

War Service Badge
Class "A" # 76292
Issued.

This space to be for numbers.

Proceedings on Discharge.

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page.)

No. 931190

Rank Private

Surname Farmer

Christian name Arthur

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) #2 Cons. Bat.

Date of discharge February 19

Place of discharge Halifax NS.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 23 years — months.

Height 5 feet 11 inches.

Complexion Dark

Eyes Dark

Hair Dark

Trade Labourer

Intended place of residence (To be given as fully as practicable.) Shelburne NS

Descriptive marks

Mel

2. The above-named man is discharged in consequence of

Demobilization

Authority for discharge.....

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

3. Conduct and character while in the service have been, according to the records, etc.

N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

M. F. B. 218.

200M.—5-18.
H. Q. 1772-39-113.

(OVER)

11-319

5. He is in possession of the following number of G. C. Badges

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company, *(Squadron or Battery,* and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place).....

(Date).....

.....

Commanding.....

8. **Certificate to be signed by the Soldier on Discharge**

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page, and that I have received my permanent discharge certificate.

(Place) Halifax Arthur Foerner *(Signature of Soldier.)*

(Date) February 17/19 Geo Oxley *(Signature of Witness.)*

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. **Additional Certificate in the case of a Soldier who takes his discharge on his own request.**

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

.....*(Signature of Soldier.)*

10. **Statement of Service.**

Service toward Engagement to..... (the date to which the Record of Service is completed).....years.....days.

Total.....years.....days.

11. **Confirmation of Discharge.**

The discharge of the above-named man is hereby confirmed.

(Place) Halifax NS

(Date) February 19.1919

(Signature) D A Mackenzie LIEUT, COL.

No. 6 DISTRICT DEPOT

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

nil

Arthur Farmer

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form	B. 263
Squadron / Battery / Company Conduct Sheet,	"	B. 263a
or Field Conduct Sheet	"	W. 178
Copies of Convictions, by C. P.		in MS.
Med. Hist. Sheet,	Militia form	B. 313
Casualty Form	"	W. 54
Medical Report for Invalid§	"	B. 227
Dental History Sheet	"	B. 465
Last Pay Certificate	"	W. 44
Duplicate Discharge Certificate	"	W. 39A
‡Form of Will	"	W. 82

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

Attestation Paper or Particulars of Recruit	Militia Form	W. 23 / W. 133
Proceedings on Discharge	"	B. 218

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet.

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

N.B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

AUDITOR | PAYMASTER

M. OR S.

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES

REGT. No. 931170 RANK Pte. NAME (IN FULL) Farmer A. (BLOCK LETTERS, SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE

TO WHOM PAID Mrs Louis Farmer — RELATIONSHIP

ADDRESS Shelburne, N.S.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
30 S.	1. 1. 19.	Do. 29.
Bal. of Soldiers as. Gest to be paid Mother A.P. Posp. a-x P.M. 6 - 699		

ORIGINAL UNIT C.E.F. N.S.R.D. — IF IN P.F. WHAT UNIT? — (BLOCK LETTERS, SURNAME FIRST)

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY, $ 15.00 — DATE EFFECTIVE 1. 2. 19.

PAYABLE TO Same as S.A. — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS — Deceased

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE Halifax N.S. — DATE 19. 2. 19. — REASON Demob. — AUTHORITY Do. 98 — IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.			TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.			TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
E.D.T.C.																																				
Balance from previous account	12|31|18																																			Subs. Do. 29
Jan.					11 20				11 20																		05					05			11 15	
1. 1. 19. to 19. 2. 19.	50	1.10	55 00		65 00						71/B						25 00																			
					35 00																															
					3 00																															
									196 15								116|18 14|10	16|19 30 00							05						196 15				
																																				S.A. Feb|19.
153 days	350 00	150 00			500 00												70 00														70 00		80 00	150 00	#16120
																	70 00														70 00		100 00	150 00	#B57129 Mar. 10/19
																			11 00												11 00		100 00	139 00	o/pay't S.A. to 28/2/19.
																	84 00		5 00												89 00		100 00	88 00	#B57136 Mar. 10/19.
																	70 00		30 00												100 00		140 00	88 00	#150416 1/3 Apr. 17
																															89 04		89 04	131 06	88 00	PM. 6. 7. 699.
																			60 00												60 00		120 90 6	✓	#191684 17. 2. 20.
	70 00				570 00												199 06														199 06			✓	#150416 cancelled
					570 00												199 06		157 00		89 04										570 00		Nil		#191769 5-5-20

Certified that all payments due on this acct. have been paid.

CAPT.
For Senior Officer Pay Services, M.D. 6

60m.-11-18. L. L. 81777. M. & D. 9585.

MONTH	PAY AND F. A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGIMENTAL CHARGES		OTHER CHARGES				TOTAL DEBITS		BALANCE				PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT								COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3										DEBIT		CREDIT		
			$	C.	$	C.	$	C.	$	C.	NO.	DATE	NO.	DATE	NO.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	

Date of Enlistment

11-8-16

MILITIA AND DEFENCE

Separation and Assigned Pay Branch F 388

OVERSEAS CONTINGENTS

Date of Assignment

Apr 1-1917

RATE OF SEPARATION ALLOWANCE

~~20~~	25	30.	

1-12-17 1-9-19
P.C. 325-706. 2753
no. 41318

RATE OF ASSIGNMENT

15 -			

PARTICULARS OF SEPARATION ALLOWANCE

No. 93170

Rank Pte Promoted Reverted Discharge

Soldier's Name Arthur Farmer

Battalion #2 Const. Batty

Beneficiary Mrs Lovie Farmer

Relationship Dependent - Mother

Address

PARTICULARS OF ASSIGNMENT

Name Mrs Lovie Farmer

Address c/o Atlantic House Shelbourne N.S.

Change of Address

1

2

3

4

05741-A-2.

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
Dec -		333 -	135 -	468 -		6128r
Jany.	F 63312	30	15	45	L.	M.R.O. 6128r rend. 27. 1. 19
Feb	F 92241	25	15	40		
March	G. 13216	25	15	40		
apr	G. 9493	25	15	40	P.M.	
May	Q 15929	25	15	40	P.M.	
June	K 26685	25	15	40	P	
July	O 32674	25	15	40	P	
Aug.	K 41453	25	15	40	P	
Sept.	R 45492	25	15	40	P	
Oct	Q 53753	25	15	40	P	
Nov	L 58358	25	15	40	P	
Dec	N 64268	45	15	60	P	
Jan	Q 71726	30	15	45	P	
		688	~~330~~ 330			

A/c Closed 31. 1. 19

Ret'd per Empress of Britain

Date 22. 1. 19 M.F.W.187 31-1-19

Closed

CANADIAN
ASSIGNED PAY AUDITED
O.K. J.M.Rose
AUDIT CLERK
DATE 28/5/19

M. F. W. 128.
400M. 6-17—1772-39-1141
L. L. 22330—M. & D. 7993.

CONSOLIDATED ACCOUNT

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

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.
4'OM. 6-17—4772-39-1141
L. L. 22820—M. & D. 1923.