ATTESTATION PAPER.

No. 489222

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your name? — Harry Edward Gray
2. In what Town, Township or Parish, and in what Country were you born? — Princes Lodge Halifax Co N.S.
3. What is the name of your next-of kin? — (Father) albert Gray
4. What is the address of your next-of-kin? — Princes Lodge Hx Co N.S.
5. What is the date of your birth? — 13 Jan. 1st 1896
6. What is your Trade or Calling? — Farmer
7. Are you married? — No.
8. Are you willing to be vaccinated or re-vaccinated? ~~unvaccinated~~ — Yes
9. Do you now belong to the Active Militia? — Yes
10. Have you ever served in any Military Force? If so, state particulars of former Service. — 66th Regt P.E.I. 5 mos
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

H. E. Gray (Signature of Man.)

A. Stewart Lieut (Signature of Witness.)
66th Regt P.E.I.

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Harry Edward Gray, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the **Canadian Over-Seas Expeditionary Force**, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

H. E. Gray (Signature of Recruit)

Date 1-11-15 191 . A. Stewart Lieut (Signature of Witness)
66th Regt P.E.I.

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Harry Edward Gray, 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.

H. E. Gray (Signature of Recruit)

Date 1-11-15 191 . A. Stewart Lieut (Signature of Witness)
66th Regt P.E.I.

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 Yarmouth this 10th day of November 191 5.

A. Stewart Lieut (Signature of Justice)
66th Regt P.E.I. J.P. in and for the County of Yarmouth N.S.

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

(Approving Officer)

M. F. W. 23.
200 M.—7-15.
H. Q. 1772-39-841.

Description of Harry Edward Gray on Enlistment.

Apparent Age 19 years 10 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft 6½ ins.

Chest measurement: Girth when fully expanded 33½ ins.; Range of expansion 2 ins.

Complexion Fair

Eyes Blue

Hair Light.

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

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

Small scar at base of index finger of left hand.
Not yet vaccinated.

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date Nov 8 1915. Henry Edward Capt.

Place Sportsmen's Redoubt Pte. A.M.C. Troops Militia
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.

Harry Edward Gray having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

[signature] Lt. Col (Signature of Officer)
Com'dg 66th Reg. D.C.O.

Date 13-11-15 191 .

14 | 14
E.W.

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name GRAY, HARRY, EDWARD,

Regt. No. 489222 Rank Pte.

Corps C.A.V.C. C.E.F.

24495

Demobilization.

D.C.R.
14/7/21

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

Attestation Papers..... 2

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet .....

Compulsory Stoppages.....

Casualty Forms..... 1

Proceedings on discharge..... 2

Corps History Sheet.....

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

Discharge Parchment Certificate..... 1

Medical Report for Invalids.....

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate..... 1

A.F.B. 122-1
cascard
B (122)

M. F. W. 62.
50M.—9-16.
H. Q. 1772—39—935.

7-1
22-2
26 2

REGT'L No 489222

NAME Gray Harry Edw

H. Q. FILE No. 649-

RANK AND CORPS Pvt. 2nd Mnrs. 66 Inf. 6 D

FOLLOWS No.

FOLLOWS

CABLE No.	CABLE Date	NATURE OF CASUALTY
01335	23-9-16	Adm. 10 Cas. Cl. Stat Sept 12 Ft. G.S.W. in head

L. L. Job 90581—M. & D. 6314.

M. F. W. 42—50M—1-16.
H. Q. 1772-39-893.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
a150	No 10. Cas Cl. Stat	12-8-16	S.W. Head
a150	Rep from Base Rejoined Unit	29-8-16	" " 18-10-16
a371	No 18 Gen Dannes Camiers	30-1-17	Debility
a8	Disc. to base details	3-9-17	Debility.

149.

Name GRAY Harry Edward. *Rank* PIONEER. *Reg. No.* 489222.

Unit SECOND PIONEER BATTALION.

Next of Kin CANADA.

Date 1916.	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
Aug. 12.	NO. 10. C. C. S.		S.W. Head.	A. 150.		O. 1335.
" 29.	REJOINED UNIT.		do	A, 150.		
June 30.	No. 18. Gen Hsp. D. Boulogne.		Debility	A. 341.		1
3 - 9	Discharged to Base Details		Do	A8		HA 13692
				R III 21-4-17		
				C 24, 11 17		

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

Number 489222 Rank PTE

Surname GRAY

Christian Name Harry Edward

Units 2nd Can Pnr Bn Theatre of War France

Date of Service 9/3/16

Remarks

Latest Address Princess Lodge
N.S.

Roll No. B Cage 13526

200m.-2-21.M.

DESP. MAY 19 1922
REGN. NO. W 34350

No. 173 Rank Pte. Name Gray Harry E

489222 Jan. Paylist.

T.O.S. 15-6-15 Unit 66th Regt. (Princess Louise Fusiliers)

D.O. 132, 19-6-15

M.D. 6

Paid From	Paid To	Sig. or Rec't	Promotions, Transfers, Discharges, etc.	
			Particulars	Authority
1915 June 15	1915 June 30	✓		
July		✓		
Aug		✓		
Sept		✓		
Oct.		✓	Transfd to Reinforcement	D.O. 2, 5-11-15.
			o/s Draft	1-11-15
Nov.		✓		
Dec		✓		
1916	1916			
Jan.		✓		

(file no 649-9-312)

NAME Gray, Harry Edward

S.O. & D. is 9-12-18 6 Demob
Do 349: 16-12-18 Lab.

RANK & No. Pte. 489222

CORPS 66th Regt. O. L. F. (1st R. D.)

ENLISTMENT, PLACE Mark Redoubt DATE Nov. 10th 1915. "S."

FORMER CORPS 66th Regt.

COUNTRY OF BIRTH Canada Princess Lodge, Halifax Co., N.S.

NEXT OF KIN Gray, Albert (Father)

ADDRESS OF NEXT OF KIN Prince's Lodge, Halifax Co., N.S.

DISCHARGE, PLACE DATE

O/S 22-1-16 3/1/2.

R/C. 13-2-18

M. F. W. 22. 100 m.—9-15.

D. L. 85779—M. & D.—6011.

H Q. 1772-39-839.

REMARKS:

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
Gray.	H. E.	489272

Rank	Unit	Co.	Troop	Batty.
Pnr.	2nd Pioneers W.O. Reg.			

Hospital — Date of Admission

Transferred to Cas Clg Station Hosp. 12.8.16

18 Gen Hosp Camiers Hosp. 20.6.17

Hosp.

Hosp.

Diagnosis (1) S. wd Head

Later Diagnosis (if changed) Debility Sl. RW.

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION — Date

Rejoined Unit 29.8.16

Dis to B. Details 3-9-17

REMARKS

CL 25.9.16 A150

11.7.17 A871

12-9-17 A861

A.M.D. 2 DEPT.

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

RW

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

1

Name Gray, Harry Edw.
Surname Christian Name

Regimental Number 489222 Rank Pte

Address (in full) Prince's Lodge, Halifax, N.S

Unit 66th Draft

Original Unit

District where paid M.D. 6

Date of Discharge 9-12-18

P. D. P. Filing Number

Rates:—Regimental pay $ per diem: Field Allowance $ per diem. Separation Allowance $ per month.

L. L. 46038—M. & D. 9245.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

M. F. W. 127.
25M.—8-18.
1772-39-1140.

Remarks: Account opened 6-1-19

File No.....

WAR SERVICE GRATUITY.

Register No.....

Reg. No. .....

Name.....

Address.....

.....

.....

Pay Soldier $.....

Clerk .....

Dependent.....

Address.....

.....

.....

.....

Pay Dependent $.....

Dec'n No..... W. S. G. File No.....

Award .....days at $ ..... per day $

S. A.....months at $ ..... per mo. $.....$

Less P, D. P. Credited $.....

$

Less further debit balance $.....

Net due paid as below

Days..... Rate..... Due.....

	TO SOLDIER			TO DEPENDENT		
0	Ag. No	Ch No	Amount	Ag No	Ch No	Amount
1						
2						
3						
4						
5						
6						

Less P.D.P. credited.....

Less further Dr. Bal. or overpayment.

Net.....

Date	Ck. Order	Ck. No.	Amount		Remarks.	Date	Ck. Order	Ck. No.	Amount.	
		Total			Total					
1						1				
2						2				
3						3				
4						4				
5						5				
6						6				

495-D.P.-100M-6-19 (10248).

GEN'L AUDITOR
Posting checked by
.....
Date.....

Certified true copy of Attested Duplicate 66th Reg't C.E.F. Battalion

ORIGINAL.

MEDICAL HISTORY SHEET.

Surname Gray Christian Name Harry

Examined on 17th day of June 1916 at Halifax

Birthplace City or Town Princes Lodge County Halifax N.S.

Apparent age 19

Trade or occupation Labourer

Height 5' Feet 5' 1/2 Inches.

Weight 120 Lbs.

Chest measurement Minimum 32 1/2 inches. Maximum expansion 35" inches.

Physical development Fair

Small-Pox Marks None

Vaccination Marks Arm Right. Left. Number None

When Vaccinated last Never was.

(a) Marks indicating congenital peculiarities or previous disease None

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

Approved by [signature]

Rank Lt-Col M.O.

Date	Fit or Unfit	Examined for Re-engagement,	
8-11-15	Fit	Capt J. McDonald	M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.

Pte 13 DEC 1917

Date	Result	Vaccinations.	
15.2.16		A. J. H.	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
26-12-15		[signature]	M.O.
13-4-16		[signature]	M.O.
			M.O.

CANADIAN

Enlisted on 15 day of 6 Month. 1915 at Halifax

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	66th P.L.I.			
Transferred to..	66th Reinf.	489222		8-11-15
	2nd Pioneer Bn			
	Can. C.E.F.			30-4-18

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Bramshott.	11-1-18	Debility.	Boat temporarily unfit PRESIDENT. MEDICAL BOARD, BRAMSHOTT.

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.

M. F. B. 313.

100M.—5-15.
H. Q. 1772-39-439

Surname..... Christian Name.....

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	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.
10 Cav Clg.	Skn	12	8	16	24	8	16	Sc Head	17	Rejd Unit.	A153.
18 Gen Hos.	Plymouth	30	6	16	3	9	16	Debility		Dis base details	A371. 98 pc.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
60m.—12-15.
1772—39—819.

Sheet No. 2. Mrs. Albert Gray

L. L. Job 89002.—Req. 6213.

Name of Soldier Gray, N. E.
489222 — 66 Rgt. Resf.

Month.	Year.	Cheque No.	Amt.	$17—	Remarks.
April	1916	J1262	17		
May		U 43442	17		
June		V 50556	17		
July		K11146	17		
Aug.		[illegible] 13537	17		
Sept.		[illegible] 17251	17		
Oct.		S 22365	17		
Nov.		[illegible] 27876	17		
Dec.		[illegible] 34817	17		
Jan.	1917	Z 39570	17		
Feb.		J 44906	17		
March		Y 50351	17	17	
April		S 2016	17	17	
May		[illegible] 8155	17		
June		V 15394	17	17	
July		Z 24465	17		
Aug.		Z 31041	17		
Sept.		K 35986	17		
Oct.		T 43295	17		
Nov.		S 49490	17		
Dec.		056912	17	391	
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

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.				

L. L. Job 88773—M. & D. 6195.

M. F. W. 12.
20m.—11-15.
H. Q. 1772-39-819.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

2nd. Contingent

To Whom Mrs Albert. Gray.

Address Princes Lodge.
Halifax Co.
N.S.

Rate 17.00

By Whom Assigned Gray. A. E.

Regtl. No. 489222

Rank Pte.

Corps 66th ~~Batt.~~ Regt
Re Inforcements

FEB 1 1916

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
Marc/				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.		015196	17	
March		T15793	17	

CONSOLIDATED A ACCOUNT

M.D. No. 6 No. 18

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

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

Regimental No. 489222. Rank Private. Name Gray, Harry, Edward.

Corps C.A.D.C.C.C.E.F. who was* Discharged.

On December 7th., 1918., to .....

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from December 1st., 1918, to December 9th., 1918, the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Bal. Cr. from prev. month	10	00
Advances by Cheques No.			Regt'l Pay 9 days at $ 1 c.	9	00
Advances by Cheques No.			Field Allow. 9 days at $ c. 10		90
~~Assigned Pay and Sep'n Allce. No.~~			Separation Allowances* (Monthly)		
Other charges			~~Other~~ Allowances* Clothing Allowance	35	00
Payment on transfer or discharge No.	54	90	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	54	90	Total	54	90

*Give particulars.

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

{Pay for the month of .....191....
and Sep'n Allce. for month of Nil 191....} (to) Assignee Nil

(Address) .....

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

On Transfer of an Officer

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

REMARKS:—

State (1) date of enlistment June 15th., 1915.

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

(3) cause of discharge ---------- authority R.O. 1328.

(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 unit.

Date December 9th., 1918.

Place Halifax, N.S.

Major.
A.D.S.M.D. No. 6
Paymaster.

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

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate 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.

300M.—2-18.
H. Q. 1772-39-903.

RG

P—56

Rank **Pte.** Name **GRAY. Harry Edward** Reg'l No. **489222**

If in perm. Corps, What Unit?

Unit **Dft 66th Bn to 17th Bn** Married or Single **Single**

Place and Date of Enlistment **York Redoubt, Nov 1st 1915** Place of Birth **Princes Lodge, Halifax, N.S. Canada.**

Name and Address, Next-of-Kin **Albert Gray,**

Princes Lodge, Halifax Co., N.S. Canada. Relationship **Father**

30 SEP 1918

Assigned Pay Monthly $ 17.00 1/2/16. Payable to Mrs Albert Gray (address next of kin).

Relationship

Separation Allowance Payable to

Relationship

Discharge, Date and Place Reason Character

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
1916 Feb 1	29	29	1.00	29.	29	.10	2 90	- -	31 90	936	-	14 60	17 -		31 60	- 30	
															22 24	12 16	HW
1-3	31-3	31		31	31		3 10		34 10			5-24	17		~~17~~	~~17~~ ~~40~~	Trf. to 2nd Res. Bn. [illegible]
				60.			6 -		66 -			19 84 34 -			53 84		

BALANCE TRANSFERRED TO NEW LEDGER.

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						

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

#157

OTTAWA, CANADA.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

If the applicant will enquire at the local Branch of the Canadian Patriotic Fund he will be informed if there is an official who will take this Declaration free of charge.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

1. Christian names Harry Edward 2. Surname Gray

3. Rank Pte 4. Original Unit 2nd Pioneers 5. Reg. No. 48.9.222

6. Address, in full, to which future payments of gratuity are to be forwarded Pioneers Lodge Halifax Co N.S.

7. Date of enlistment in the C.E.F. Nov 1 - 1916

8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge not applicable

9. Relationship of such dependent not applicable

10. Address, in full, of such dependent not applicable

11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? not applicable

12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—

17th Res Feb 1 - 1916

Mar 5 - 1916

13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? not applicable

14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service Not applicable

15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served 1-6-15 Canada

9-12-18 66th P.L.F. 17th Reserve

2nd Pioneers

16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department NA

17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? NA

M.F.W. 2595.
1772—39—1389.
1160—D.P.—250M-12-18.

1 Pay

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units ..... R A

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid ..... $ ~~Nothing~~ 33 00 R A 6

20. Have you been issued with a War Service Badge? If so, what class ? ..... Yes A

21. Have you, during the present war, served in the Imperial Forces ? ..... not applicable

22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled ..... not applicable

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England ? ..... not applicable

(b) If so, was such reversion in consequence of misconduct or inefficiency ? .....

24. Are you now serving in the C.E.F.? ~~not applicable~~ If not, give:—(a) Date of discharge ..... Dec. 9 - 1918 ..... (b) Reason for discharge ..... Med Unfit

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit ..... not applicable

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit ..... Served with 2nd Pioneers from March 1916 until Dec. 1917

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? Not applicable

(b) If so, are you in receipt of full pay and allowances from that Department ? Not applicable

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: Harry E. Gray.

Place of Residence: Halifax N.S.

Declared before me at: Halifax N.S. W3 Made Q Notary Public Nova Scotia

This 31st day of January 1919.

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths.

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
6/19	33 00		183 days	38 70

Certified Correct.

District Paymaster.

8

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps 17 Reserve Bn

Regimental No 489222 Rank Pte Name Gray H. C.

C. E. F.

Enlisted (a) 4/11/15 Terms of Service (a) ~~Duration of War~~ Service reckons from (a)

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.
13,2,18	O/S	Taken on strength No. 6 Casualty Unit			LIEUT. O. i/c Casualty Unit, M. D. 6
		Transferred to Inv. 6 S.S. Coy Halifax N.S.		4,3,18	LIEUT. O. i/c Casualty Unit, M. D. 6
		Transferred to 6th Bn. C. G. R. APR 30 1918			MAJOR. O. C. No 6 S. S. COY. C. E. F.
		Taken on strength 6th. Batt. C.G.R. C.E.F.	HALIFAX, N. S.	1-5-18	Lieut Officer i/c Records 6th Batt. C.G.R. C.E.F.
DA G.O. 1393 PR II 204-2		Struck off strength 6th. Batt. C.G.R. C.E.F. on transfer to C-A D.C.	HALIFAX, N. S.	21-11-18	Officer i/c Records 6th Batt. C.G.R.

(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.

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				

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 489222. (Rank) Private.

Name (in full) Gray, Harry, Edward. enlisted in

the 66th., P.L.F.

CANADIAN EXPEDITIONARY FORCE at Halifax, N.S. on the 15th.,

day of June, 1915.

HE served in Canada, England, France.

and is now discharged from the service by reason of Being a Returned man who can be spared (~~D.F.O.~~ 1328.) R.O.

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

Age 20. 11 Months.

Height 5'6".

Complexion Fair.

Eyes Blue.

Hair L. Brown.

Marks or Scars

Left Leg.

Left ~~Arm~~ Hand.

H. E. Gray.
Signature of Soldier

Issuing Officer Major. A. D. D. S., M. D. No. 6.

Rank Major

Appointment Asst.

Date of Discharge 9th., December, 1918.

Signed at Halifax, N.S. this 9th., day of December, 1918.

in Military District No. 6.

File Reference No. ----

ASSISTANT DIRECTOR OF DEC. 9 1918 M. D. NO. 6 DENTAL SERVICES

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. 489222. (Rank) Private. Name Gray, Harry, Edward.

Unit C.A.D.C. C.E.F.

Address on Discharge Princess Lodge, N.S.

Character and Conduct Good.

Former Occupation Railway Employ.

Special Qualifications of Value in Civil Life Railway Employ. + Farmer

Medals and Decorations N I L

Remarks N I L

Signed at Halifax, N.S. this 9th., day of December, 1918.

[signature] Major.

A. D. D. S., M. D. No. 6

Name of Officer

Rank

Appointment

C.A.D.C.5009-10M.
3494-30-8-17.

489222.
Pte. Gray. H. E.
W.O.R.D.

4

DENTAL CERTIFICATE.

The following Certificates will be attached to the Medical History Sheets of all Other Ranks being returned to Canada for disposal.

Date of Examination.	Present Dental Condition.	In case of loss or decay of teeth. Is the loss due to wounds, injury or disease directly attributed to Active Service?	Has he ever declined Dental Treatment.	Recommendation.
23-1-18	Requires 2 Fillings Partuppa			at Public expense F. H. Green Capt. C.A.D.C.

(641)—Wt. W1751-1403. - 500,000.—5-15.—C. & G. Forms B. 103/1.

4718

Army Form B. 103.

CERTIFIED CORRECT.
Canadian Record Office,
Westminster House,
7, Millbank, S.W.

Casualty Form—Active Service.

Regiment or Corps 14th Res Bn.

Regimental No. 489222 Rank Pte. Name Gray H. E.

Enlisted (a) 15/6/15 1/11/15 Terms of Service (a) War Duration Service reckons from (a)

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.
9/3/16	14th Bn	Trans. to 2nd Pioneers Bn.	OVERSEAS.	9/3/16	R.C. Smith Lieut. Asst. Adjt. 17th Res. Bn.
		EMBARKED FOR FRANCE.		9/3/16	Troops/13564 dy 2-3-16
19/3/16	4th B.T.A.	Thrup to Head qrs	4th B.T.A.	12/3/16	
do	do	do	Base	12/3/16	A36 b/81
1/9/16	162nd B.B.	Reams unit	Field	39/3/16	B213 b/81
4/9/17	26 I.B.D.	Taken on strength "JB"	2 C.I.B.D.	4/9/17	K.R.
39/17	18 Genl	Debility	to Base Details	39/17	M3034/5586.
26/9/17	26.1.B.D.	Struck off strength	Essex	26/9/17	K1-16-27191-2
30/9/17	do	Granted 14 days leave	do	14/9/17	B213-A10-96-1 11/17
31/9/17	do	S.O.S to Can Labour Pool B3	do	31/9/17	K.R A10-99-10 11/17
do	C.C.B.D.	T.O.S do B3	do	do	K.R
30/9/17	26.1.B.D.	Struck off strength B3	do	30/9/17	M3339
		T.O.S. CANADIAN LABOUR POOL, from 2nd Pion Batt.		1-11-17	K.R. 16276 P.T.O. 1. 11/11/17

(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 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.
1.11.17	CyRD	Classified B3 (V.D.H).		1.11.17	W3339 (202)
30.11.17	06506 C.Y.R.	Appd to 506 C.Y.R.	Lafosse	8.11.17	B213
3-11-17	4 C.R.D. Depot	Rejoined from leave	—	27-10-17	B213
3/12/17.	C.C. B.D. A.A.G.	To England (class B3 and posted to West Ontario. Regt. Depot Bramshott.		3/12/17.	N/R 166. K.R. 21421 P.II.O. 19. 8/12/17
10.12.17	W.O.R.D.	I.O.S from Genl Depot Sciliffe + unfit for Further Service in France	Bshott	9.12.17	Pt II 737
23.1.18	W.O.R.D.	Struck on Command C.D.D. Buxton pending Return to Canada	Bshott	22.1.18	Dett 19

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

H. L. Smoodie Lieut.
FOR LT. COL. I/C RECORDS, C.O.M.F.

D. Douglas Lt. W.O.R.D.

23 JAN 1918 TAKEN ON STRENGTH C.D.D, BUXTON Pt. 11 ORDER No. 19

T. W. Lock Lt. for Lieut.-Col.
Commanding Canadian Discharge Depôt.

31 JAN 1918 EMBARKED FOR CANADA FROM LIVERPOOL

T. W. Lock Lt. for Lieut.-Col.
Commanding Canadian Discharge Depôt.

RG

Rank Pte. Name GRAY. Harry Edward Reg'l No. 489222

E3

Unit Dft 66th Bn to 17th Bn If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment York Redoubt, Nov 1st 1915 Place of Birth Princes Lodge, Halifax N.S. Canada.

Name and Address, Next-of-Kin Albert Gray, Princes Lodge, Halifax Co., N.S. Canada. Relationship Father

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

N/E. R.B. No 3607
Fil'd R.L.
Category Can. O.R.

Discharge, Date and Place Reason Character

Report Date	Report 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
31-1-16	OC 17th	to 17th Battn Arrived in England.	E. Sandling	30-1-16	Pt II D.O. #37
28. 2. 16	"	4 dys C.B. for having Dirty rifle	"	28.2.16	" " " " 65
9. 3. 16	"	Embarked for France. to 2nd Pioneer Batt		9.3.16	" " " " 77
31-3-16	O.C 2nd Pnrs	Taken on strength	In the Field	2-3.16	Part II-O.3
25-9-16	" "	Adm No 10 C.C. Station	" "	12.8.16	S.W Head C.2 A 160
" " "	" "	Rejoined Genl	" "	29.8.16	" " " "
11. 7. 17	" "	Adm No 18 Gen Hosp Dannes Camiers		5.6.17	Cl. A371 Debility 28
11. 9. 17	"WOR	Dis. to Base Details	" "	3.9.17	— 8 " "
10.11.17	2nd Pnrs	S.O.S to Can. Labor Pool	Field Pte	31.10.17	Pt II 99
1. 11. 14	C.L. Pool	S.O.S. from 2nd Pnrs	" "	1.11.14	" I.
8. 12. 14	"	S.O.S to W.C.R.D	" "	3.12.14	" 19

Wheat H1.

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				
10.12.17	W.O.R.D.	T.A.S. from Gen'l Depot Sidcup	Bishott Rte	9.12.17	Rtn 237
23.1.18.	"	In Comm. C.D.D. Buxton pending despatch to Canada	" Rte	22.1.18.	Rtn 19.
		cease to be shown on Comm. of C.D.D. Buxton			
11.2.18	W.O.R.D	Sailed for Canada	Bramshott. Rte	31-1-18	S.W.O. 35-
	Dis Depot	For Further Duty	M.D.6 Halifax	13.2.18	NR 430
	Dis Depot	For Duty	M.D.6 Halifax	9/2/18	NR 442.

MARRIED OR SINGLE S.

PLACE OF BIRTH Princes Lodge Halifax NS

NAME AND ADDRESS OF NEXT OF KIN Albert Gray
Princes Lodge Halifax Co NS

RELATIONSHIP OF NEXT OF KIN Father

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. NO. 439222 RANK Pte. NAME Gray Henry Edward

IF IN PERMT. CORPS WHAT UNIT | UNIT 17th Bttn. | TRANSFERRED TO 2nd Gps. | DATE 1/4/16. | AUTHORITY Bo 75.

PERMANENT FORCE ALLOWANCES | TRANSFERRED TO | DATE | AUTHORITY

PLACE OF ATTESTATION York Redoubt. | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION Nov 1st 1915. | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY MONTHLY $ 17.00 DATE EFFECTIVE 1 Feb. 1915.

PAYABLE TO Mrs Albert Gray, Princes Lodge, Halifax. Co. N.S. RELATIONSHIP Mother

30 SEP 1918

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) Stopped EFFECTIVE 1.7.18 REASON Dis. to Canada

DISCHARGE DATE AND PLACE Canada 23.1.18 REASON AND AUTHORITY A.G. 5.1.17 Disposal

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

C.J.

DATE 1916	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	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
March 31st	60				6										66												19 84	34		53 84	12 16					
April 30	1st 30				30	10	3								33	394	10/4	448	26/4					262	262			17		22 24	22 92				
May 31	31				31		3	10							34	10	550	545 12/5	569 26/5					255	255			17		30 61	26 41				
June 30	30				30		3								33													14		14	42 41				
July 31	31				31		3	10							34	10	578	14/6	701	10/7				256	261			17		22 17	54 34				
Augt 31	31				31		3	10							34	10	786	25/7	959	7/8				262				17		22 24	66 20				
Sept 30	30				30		3								33		878	29/8	921	14/9				523	261			17		24 84	74 36				
Oct 31	31				31		3	10							34	10	970	30.9	1009	15.10				261	262			17		22 23	86 23				
Nov 30	30				30		3								30	3	1046	28/10						262				17	28	19 90	99 33				S/R 508 17 Bn April 1916
Dec 31	31				31		3	10							34	10	1085	13/11	1258	28/12				1134	261			17		30 95	102 48				
Total F.M. 31/12/16.	33		50																					261	261										
Jan 31	1.10	34	10												34	10	1175	16/2	1371	28/2				262				17		22 22	114 36		Nil		
Feby 28		30	80												30	80	1311	23/3	1498	M/H	1602	2/3		261	261			17	28	22 52	122 64				S/R 1915 129-9 31/12/16
March 31		34	10												34	10	1459	C/S	1680	16/3				261	261			17		27 42	129 29				
		467	50												467	10								5307	2674		1984	338	56	338 71					
															467	10								53 07	26 74		19 84	338	56	338 71					

26 74
19 84
56
138 54

Small Ledger Sheets.

467 50
464 50
3 00

489222 Pte. Gray Henry Edward

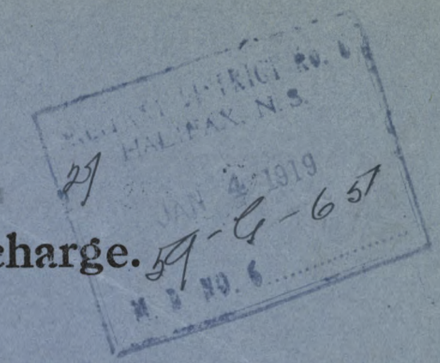
DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	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	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
			46 7 50												46 7 50																				
April	30	1.10	33												33								2 62				17		17	145 29				
May	31	1.10	34	10											34 10	516	9/6/17						2 65				17		22 30	157 09				
June	30		33	-											33 -								2 67				17		22 35	167 74		mil		
July	31		34	10											34 10								2 68				17		17	184 84				
Aug	31		34	10											34 10	516	9/6/17			1076			17 84		HH6		17		39 30	179 64				
Sept	30		33	-											33 -												17		17 -	195 64				
			668	80											668 80								8 56	86 74	4 46	19 84	340		56 473 16					

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR. 2	DR 3	DR 4	BALANCE	DEFER. PAY	SEP. ALLCE.	ENG.
1917 Oct		~~195 64~~							195 64			
	31 P.P.	34 10		A.P. Can.					17			
				A.R. 507 6/9/17 2nd C.S.B.D.	H H6							
				C.P. 316 20/10/17	92 47				115 81			
		34 10			96 95				17			
Nov	30 P.P.	33 -		A.P. Can.					17 98 51			
				A.R. 672 22/9/17 2nd C.S.B.D.	H H7				94 34			
				A.R. 1696 12/10/17	73 -				21 34			
				A.R. 768 6/10/17 2nd C.S.B.D.	7 14				14 20			
				A.R. 824 26/10/17	1 78				12 42			
					86 39							
Dec	31 P.P.	34 10		A.P. Can.					17 62 52			
		67 10			86 39				34			
Jan	-	25 30		A.P. Can.					17 70 82			
				C.P. 29233 18.12.17	24 33				46 49			
				A.R. 215 15/12/17								
	~~1917~~ - - - - - - - - - -			~~WORD.~~	4 87				41 62			
		25 30		Dn	29 20				17			
Mar				A.R. 235 10/1/18. WORD.	7 30							
				268 21/1/18 ✓	4 87				29 45			
					12 17							
June.				Spl Dn	29 45				Nil			
					29 45							

A.3 M. FORM REN'D Stpd EFFEC. 1-3-18
DISCHARGED TO Canada DATE 23-1-18
PAY BOOK VERIFIED Extract from
Ct. BAL. 29.45 L.F.C. REN'D 23-1-18
AUTHY. A.J.S. 1.7.7
Disposal

Checked

This space to be for numbers.

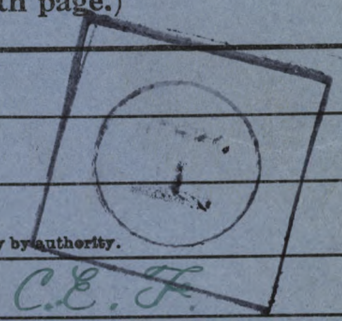


27 59-6-651

Proceedings on Discharge.

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

2-6-38



No. 489222.

Rank Private.

Name Gray, Harry, Edward.
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) CADC. C.E.F.

Date of Discharge 9-12-18.

Place of Discharge Halifax, N.S.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 20 years 11 months.
Height 5 feet 6 inches.
Complexion fair.
Eyes blue.
Hair L. Brown
Trade Railway Employ.
Intended place of residence (To be given as fully as practicable.) Princess Lodge, N.S.

Descriptive Marks
Scars.
Left leg.
Left hand.

2. The above-named man is discharged in consequence of a returned man who can be spared (R.O 1328, Para. 7. Sec. A.)

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.

Good.

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

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

Railway employ.

M. F. B. 218.

160m.—6-16.
H. Q. 1772-39-113

(OVER)

5. He is in possession of the following number of G. C. Badges: N-1-L

ASSISTANT DIRECTOR DEC 9 1918 M. D. No. 6 DENTAL SERVICES

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

6. Medals and Decorations..... N-1-L.

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)..... Halifax, N.S.

(Date)..... 9-12-18. *Commanding* ..... Major.

A. D. D. S. M. 3. No. 6

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.

(Place)..... Halifax, N.S. H. E. Gray ..... *(Signature of Soldier.)*

(Date)..... 9-12-18. Lieut. ..... *(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.

..... H. E. Gray ..... *(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, N.S.

(Date)..... 9-12-18.

(Signature) ..... Major.

A. D. D. S., M. D. No. 6.

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.)

(OVER)

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263.	Attestation Paper, Militia Form B. 235.
Squadron / Battery / Company } Conduct Sheet, " B. 263a.	Proceedings on Discharge " B. 218.
Copies of Convictions, by C. P. in MS.	In the case of recruits who are rejected on final approval, the discharge documents will consist of
Med. Hist. Sheet, Militia Form B. 313	(a) Proceedings on Discharge.
Medical Report for Invalid* " B. 227.	(b) Attestation.
Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.	(c) Medical History Sheet (in the event of such having been prepared.)
*Only if discharged "Medically unfit."	

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.

The space to be left blank for the Chelsea Number.

M.D. 6 M.W.6

Army Form B. 268.

Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 489222 Army Rank Pte.

Name Gray H. Edward.
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps W O R D

Battalion, Battery, Company, Depôt, &c. 66
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge

Place of discharge

1. *Description at the time of discharge.*

Age 19 years months

Height 5 feet 6 inches

Chest measurement { girth when fully expanded ins. / range of expansion ins.

Complexion

Eyes

Hair

Trade Farmer (b)

Intended place of residence (To be given as fully as practicable) Halifax N.S.

Descriptive marks.

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

Returned to Canada, - Authority - Combatant Board held at Bramshott Dated 20-1-1917.

Category B111

To be filled in on the soldier quitting the Colours.

4. Character awarded in accordance with King's Regulations:—

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

* Strike out if not applicable.

D. D. & L., London, E.C.
A4502 Wt. W17176 M291 500,000 2/16 Sch. 39 Forms B. 268 40

[OVER.

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... ... ... Class _____

6. Campaigns, Medals and Decorations

2/ mos. France

Certificate of education ..... _____

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me in accordance with Regulations.

(Place) _____ _____

(Date) _____ *Commanding* _____ *Battn.* _____ *Regiment.*

8. *Certificate to be signed by the soldier on discharge.*

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(*Place*) _____ _____ (*Signature of Soldier.*)

(*Date*) _____ _____ (*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 at 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 towards engagement to _____ (the date to which the record of service is completed) _____ years _____ days.

Further service „ „ _____ (the date of confirmation of discharge) ... ... _____ „ _____ „

_____

Total ... _____ „ _____ „

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for (date)

(Place) _____

Signature _____

(Date) _____

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

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.)

LIST OF DISCHARGE DOCUMENTS.

1. Proceedings on discharge. (Army Form B. 268.)
2. Proceedings on transfer to reserve (if any). (Army Form B. 2056.)
3. Duplicate attestation.
4. Army Form B. 97 (if any).
5. Declaration of change of name (if any).
6. Re-engagement paper (if any). Army Form B. 136).
7. Authority for continuance, or extension, of service (if any) Army Form B. 221.)
8. Court of Inquiry on an injury (if any) (Army Form A 2.)
9. Regimental conduct sheet. (Army Form B. 120).
10. Company conduct sheet. (Army Form B. 121.)
11. Copies of convictions by Civil Power (if any).
12. Medical history sheet. (Army Form B. 178).
13. Medical report on invalid (if any). (Army Form B. 179).
14. Copy of receipt for purchase money (if any).
15. Attestation of fraudulently enlisted man for corps in which he has not been held to serve (if any).
16. Detailed statement of former service allowed to reckon towards pension (if any).
17. Copy of 3rd page attestation (in the case of men from abroad entitled to deferred pay who go to Netley or the discharge depot for discharge).
18. Descriptive return (Army Form D. 400), where required. See section 11 on second page.
19. Active service casualty form. (Army Form B. 103).
20. Employment sheet. (Army Form B. 2066).

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

1. Duplicate attestation. (On third page the date and cause of discharge will be entered and signed by the competent military authority).
2. Medical history sheet (if any). (Army Form B. 178).

Instructions as to the preparation, dispatch, and custody, of discharge documents.

1. When a soldier is to be discharged, the documents retained with the duplicate attestation will be placed inside this form. Should any of the documents be missing, an explanation of the deficiency, signed by the commanding officer, must be substituted for the missing document. The officer in charge of records will then extract from the original attestation, any documents required to complete the list of discharge documents enumerated in the margin, which will then be placed in this form in the sequence given.

2. When men are discharged from the colours at home as medically unfit, or with claims to pension, Army Form B. 268 will be sent confirmed, together with the duplicate attestation and documents retained therein to the officer in charge of records 10 days in advance of the date for discharge in the case of invalids, and 14 days in other cases. This officer will then extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them in this form, and after carefully checking the duplicate attestation with the original forward the whole to the Secretary, Royal Hospital, Chelsea. When such men are discharged abroad, the same procedure will be adopted as above, with the exception that the discharge documents will be sent to the officer in charge of records immediately after discharge takes place (except in the case of men who are granted gratuities on discharge from local battalions or companies, Royal Artillery.

3. When soldiers are sent home from abroad for discharge, the documents retained with the duplicate attestation will be placed inside this form and sent home with the men for transmission to the officer who carries out the discharge, together with the following additional forms :—

(*a*) Discharge certificate (Army Form B. 2079 or Army Form B. 264).
(*b*) Character Certificate (Army Form B. 2067) if entitled.
(*c*) Copy company conduct sheet (Army Form B. 121) when required under King's Regulations.

The duplicate attestation and documents retained therein will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin and place them in this form.

4. The discharge documents of re-enlisted pensioners, on re-discharge, will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them inside this form, and forward the whole to the Secretary, Royal Hospital, Chelsea, irrespective of the cause of discharge.

5. The original and duplicate attestations of recruits who are rejected before, or on, final approval will be retained by the approving officer for one year, when they will be destroyed.

6. In all other cases the discharge documents will be sent, directly the discharge is carried out, to the officer in charge of records of the unit concerned.

7. Postage need not be paid, and receipts are not required, in the case of documents sent to Chelsea or to the War Office,

8. When the discharge documents of men not entitled to pension are sent to the officer who will have final charge of them, they are to be accompanied by Army Form B. 279, and that officer will, if they are found to be correct, sign and return Army Form B. 279. Should any document be missing, he must at once apply for it.

9. The officers having final charge of the discharge documents will arrange them according to regimental numbers, and enter the names in the alphabetical index, Army Book No. 129.

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Halifax DATE Nov 19/18.

1. 1 (a) Unit 6th Bat C.G.R. (b) Regimental No. 489222 (c) Rank Pte.
(d) Surname Gray (e) Christian name Harry Edward.
(f) Home address Prince Lodge Hfx. N.S.
(g) Next of Kin Mrs. Lucilla Gray (h) Relationship mother.
(i) Address of Next of Kin Prince Lodge Hfx N.S.
2. Age last birthday 20 yrs. Date of birth Jan. 13th 1898
3. Enlistment, or Appointment (if an Officer) (a) Place Halifax (b) Date June 15/15
4. Personal description:
(a) Height 5ft 5½ (b) Weight 122 lbs (stripped) (c) Complexion fair
(d) Colour of hair fair (e) Colour of eyes blue (f) Identification marks, Scars, etc. Scar over 2nd phalanx.
5. Former trade or occupation farmer.

HALIFAX, N.S. NOV 23 1918 5-9-9-65 M.D. NO. 6

Assistant Director of Medical Services NOV 23 1918 M. D. No. 6

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).

	Years	Days	Periods From	Periods To
Canada			June 15/15	Jan 22nd/16.
England			Feb 1/16.	March 8th/16
France or other theatres of War			March 8/16.	Dec 9/16.

7. Original disease, or injury Debility.

(a) Date of origin Nov. 1916. (b) Place of origin France.
(c) Cause Attributed condition Date cause & consequence due to exposure of N. E. sheet. Sept. 1916

M. F. B. 227.

300M.—8-18.
1772-39-117.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

Complains of weakness, pain in chest and back, becomes easily tired out when he works.

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Feels weak, not able to do any hard work, he tires out easily, has pain in chest in region of heart & in back, says he feels nervous, complains of insomnia, appetite fair, bowels regular.

Soldier is not well muscled for his size, skin is pale and pasty, conjunctivae anemic and slightly jaundiced. Heart pulse and chest normal. Has tremor of hands (slight), patella reflex slightly increased. Is often bothered by dreams.

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above?
(Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System: as above. Cardio-Vascular System: no (If pulse rate is abnormal, B. P. will be taken.) Genito-Urinary System: no. (Albumen and Sugar will be excluded.)

Special Senses: no. Respiratory System: no. Integumentary System: no.

Disturbances of Mentality: no. Digestive System: no. Muscular System: no.

Osseous and Joint Systems: no. Any other general condition: no.

10. (a) History (of the condition referred to in Section 9 (a).)

Was buried by shell explosion Sept 1916, and buried again two weeks later, following this complained of symptoms of shellshock and debility was in hospital for 3 months (# 18 Gen. Hosp France) and was sent home to Canada with debility.

10.—(*b*) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (*a*).)

Nil.

(*c*) (Here give a description of wounds, scars and deformities.

Nil

11.—(*a*) Did the disabling condition have its origin before enlistment? no.

(*b*) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

n.a.

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? no

The regimental documents will be referred to.

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? indefinite.

14. Treatment (Case reports, general or special, should be secured and attached where possible.)

18 Gen. Hosp. France

22 C.C.S.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

(If the answer is "yes" state nature of treatment required and probable duration)

no.

16. Can the former trade or occupation be resumed? Yes

(If not, briefly state why)

17. Recommendations. That # 489222 Gray, H. E be placed in Category C III.

J. Grant Capt CAMC

Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned H. E. Gray have heard the description of my disability and present condition read, and am satisfied (~~or not satisfied~~) with it. (If dissatisfied, statement should follow.)

I complain in addition of

H. E. Gray Pte Rank.

Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticised.

Yes

19. Is the invalid fit for

(*a*) General service,	(Category A)	(Yes or No.) No
(*b*) Service abroad, not general service,	(" B)	(Yes or No.) No
(*c*) Home service (Canada only),	(" C)	(Yes or No.) Yes
(*d*) Temporarily unfit.	(" D)	(Yes or No.) No
(*e*) Unfit for service in Categories A, B and C	(" E)	(Yes or No.) No

20. It is certified that the invalid

(*a*) ~~Does require treatment~~. (Give the nature of the condition and of the treatment required and its probable duration.)

(*b*) Does not require treatment.
(*c*) ~~Should pass under his own control~~.
(*d*) Should not pass under his own control.
(Strike out condition not applicable.)

21. It is recommended that the invalid be ~~discharged~~. (When not for discharge add special recommendation.)

Placed in Category C III

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

G. J. McNally Major *President.*

PLACE Halifax N.S.

DATE 22. 11. '18

D. A. Rogers Capt. } *Members*

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned.....understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....

Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

.....*President.*

PLACE.....

DATE..... } *Members*

APPROVED BY

APPROVED

for G.O.C.

Assistant Director of Medical Services.

DATE 21-11-18

APPROVED BY

Director-General of Medical Services.

DATE.....

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

Feb 1/16

2-2-17

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

17			

PARTICULARS OF SEPARATION ALLOWANCE

No. 489222

Rank Pte · Promoted Reverted Discharge

Soldier's Name H.C. Gray

Battalion 66th Batt Reinf.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Hugo Albert Gray

Address Princes Lodge, Halifax N.S.

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
1917 Dec 31			39 1 –	39 1 –		
Jan 19	65811		17	17	5	
Feb. 16	93223		17	17		
March	H 93665		~~17~~	~~17~~	425	
April			17	17		

H. 93665 cancelled 18-3-18 M. MacD.

A.F. A/c Closed 28-2-18

Ret'd per Olympic

A.F. paid 425 Date 14-2-18 F.X. 18-3-18.

Clerk M. MacDougald.

M.R.O. 2B rem. 19-3-18.

M. F. W. 128
400m.—6-17—1772-39-1141
L. L. 22320—M. & D. 1193.

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
1	2 [illegible]		[illegible]	[illegible]	

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22230—M. & D. 1993.

AUDITOR 6828 | PAYMASTER

M. OR S.

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

REGT. No. 489222 RANK Pte. NAME (IN FULL) Gray Harry Edw.
(BLOCK LETTERS, SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 66 Bn.

IF IN P. F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY. $ — DATE EFFECTIVE

PAYABLE TO 52 A. Reserve Ave Exhibition Camp Hfx N.S. — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS ~~Princes Lodge Halifax N.S.~~

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

H.57

DISCHARGED — PLACE — DATE 9/12/18 — REASON — AUTHORITY — IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F. A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	$	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.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
Balance from previous account																																			
	183	420							420 00								War Gratuity																33			15 Pay by Leist 243
																	FEB 10 1919		a 4807		10700														
																	March 4/19		5994		70						33 00							2 10		
																	7/4/19		150178		70													1 40		
																	6/5/19		587318		70													70		
																	9/6/19		592834		70													Nil		
	420								420												387															

Completed.

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

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

60m.-11-18 L. L. 51777. 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.	