

TRIPPLICATE

931098

ATTESTATION PAPER.
No. 2 CONSTRUCTION, B'n. C.E.F.
CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

No.

Folio.

QUESTIONS TO BE PUT BEFORE ATTESTATION.
(ANSWERS.)

- 1. What is your surname?..... *Hamilton*
- 1a. What are your Christian names?..... *Charles*
- 1b. What is your present address?..... *Beechville*
- 2. In what Town, Township or Parish, and in what Country were you born?..... *Halifax County*
- 3. What is the name of your next-of kin?..... *Mr. Hamilton (Alice)*
- 4. What is the address of your next-of-kin?..... *Beechville, Halifax Co. N.S.*
- 4a. What is the relationship of your next-of-kin?..... *Mother*
- 5. What is the date of your birth?..... *June 20-1897.*
- 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, *Charles Hamilton*, 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.

Charles Hamilton (Signature of Recruit)

Date *August 5th* 1916. *Robert R. Baulk Serjt* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Charles Hamilton*, 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.

Charles Hamilton (Signature of Recruit)

Date *August 5th* 1916. *Robert R. Baulk Serjt* (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 N.S.* this *5th* day of *Aug.* 1916

W. H. M. J. (Signature of Justice)

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

Description of Charles Hamilton on Enlistment

Apparent Age 19 years 7 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. 3 ins.

Chest measurement { Girth when fully expanded 35 ins.
 Range of expansion 3 ins.

Complexion Dark
 Eyes Black
 Hair Black

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

Weight 126 lb.

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 15th 1916

B. J. Johnson
Capt. R.M.C.
 Medical Officer.

Place Halifax N.S.

*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.

Charles Hamilton 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.

AUG 10 1916 Lt. Col. D. H. Sutherland (Signature of Officer)
 L.T. COL.

Date Aug 9th 1916.

C. Comd'g No. 2 Construction Battalion, C. E. F.

REGIMENTAL DOCUMENTS

NAME HAMILTON, CHARLIE Pte REGT. NO. 9310 98 UNIT 2 Coms. Bn Q. FILE NO.

*200
10/3/19*

(I)

(S)

1.

2.

1.

2.

1.

1

2

1

1

1

1

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

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

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

TRAINING HISTORY SHEET (M.F.W. 113)

FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)

REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)

COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)

MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

DENTAL HISTORY SHEET (M.F.B. 465)

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

MEDICAL EXAMINATION (M.F.W. 129)

TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)

PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)

DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)

LAST PAY CERTIFICATE (M.F.W. 44)

PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)

PARTICULARS OF CHARACTER (A.F.W. 3226)

COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

Misc

Expense

by 1/1/19

R22

payc

(H)

04377

(M)

DEATH

Category

DISCHARGE

Category *Demob.*

DESERTION

3
13-24
20-24
28-24
3



SURNAME

CHRISTIAN NAME OR NAMES

REG. NO.

HAMILTON

B.

931098.

RANK

UNIT

Co.

TROOP

BATTY.

Pte.

NS. 2 Con.

HOSPITAL

DATE OF ADMISSION

Juran Champagne Jura.

17-1-18.

1. C.F.C. La Joux

HOSP. 9-6-18

2. C.F.C. "P. La Joux" Jura

HOSP. 23-9-18
1-11-18

3.

HOSP.

4.

HOSP.

DIAGNOSIS

Incised Wd. foot. L

1

V.D.G.¹⁴⁰

2

V.D.G.

3

P.H.O.

DISPOSITION

DATE

CL. 25-1-18 A121-2.

REMARKS

7.2.18 @ 132.

Dis 28-1-18.

19.6.18 @ 243

" 20-6-18

27-6-18 @ 250

" 1.10.18.

30-9-18 @ 331.

Dis. 3-11-18.

10.10.18 @ 340-3.

9.11.18 @ 360.

15.11.18 @ 371 (1)

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.

*Name Hamilton, Charlie Rank Plt. Regtl. No. 931098
 Fyle Depot 74 2-646

Original unit 2000 Present unit no. 6 D.D. M. or S. Age 21 Religion Baptist Ref. H.Q.

Port, ship, and date of arrival Halifax N.S. Express of Britain 22.19

Next of kin Alice Hamilton, mother

Address on leave 154 Crichton St. Halifax N.S.

Address on discharge 9 Cornwallis St.

Transportation issued Yes No Date _____ Character on discharge _____

Previous occupation Labourer Date and place of enlistment 5 Aug. 1916 Halifax, N.S.

Diagnosis _____ Date of Medical Boards _____

Date.	Remarks	Pt. 2 Order No.
12.1.19	D.D. no. 6 District Depot	29
22.1.19	Rostered to Casualty Company	29
14/2/19	S/O/S Discharged W.M. 2	44

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

Date.

Remarks.

Pt. 2 Order No.

649-H-18004

~~Wm H.~~
Number

931098

Rank

~~Private~~ Ser.

B

Surname

HAMILTON

Christian Name

Charles

V

Units

C.O.R.C.C.

Theatre of War

France

Date of Service

17-5-17

Remarks

Mrs Bertha E. Hamilton

Widow

Latest Address

9 Cornwallis St.
177 Brighton St.
Halifax
N.S.

Roll No.

13⁶⁰
33

Page 14590

200m.-2-21.M.

DESP. AUG 25 1933

REGN. NO. 740

DESP. OCT 13 1933

REGN. NO. 925

HAMILTON, Charles

931098

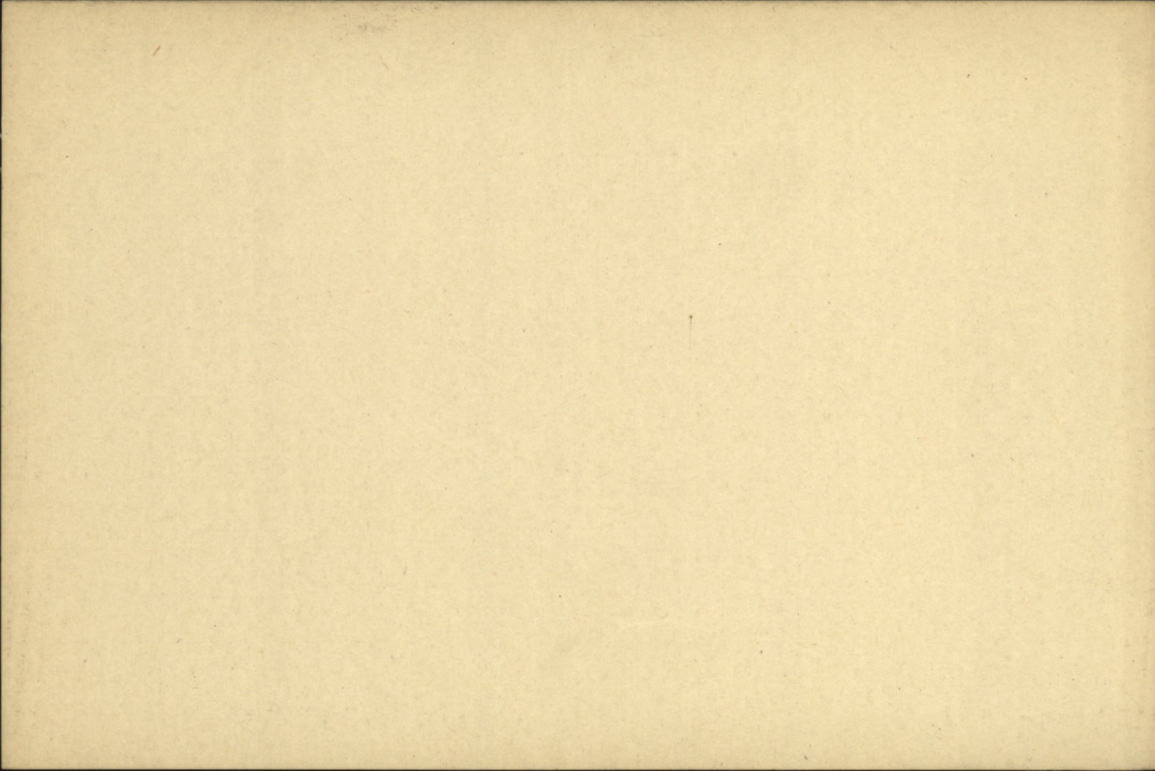
Spr. C.O.R.C.C.

649-H-18004

medals

widow:- Mrs Bertha Hamilton
76 Market Street
Halifax, N.S.

not due to service



No. 931098

RANK

Pte

NAME

Hamilton Charles

T. O. S.

5-8-16

UNIT

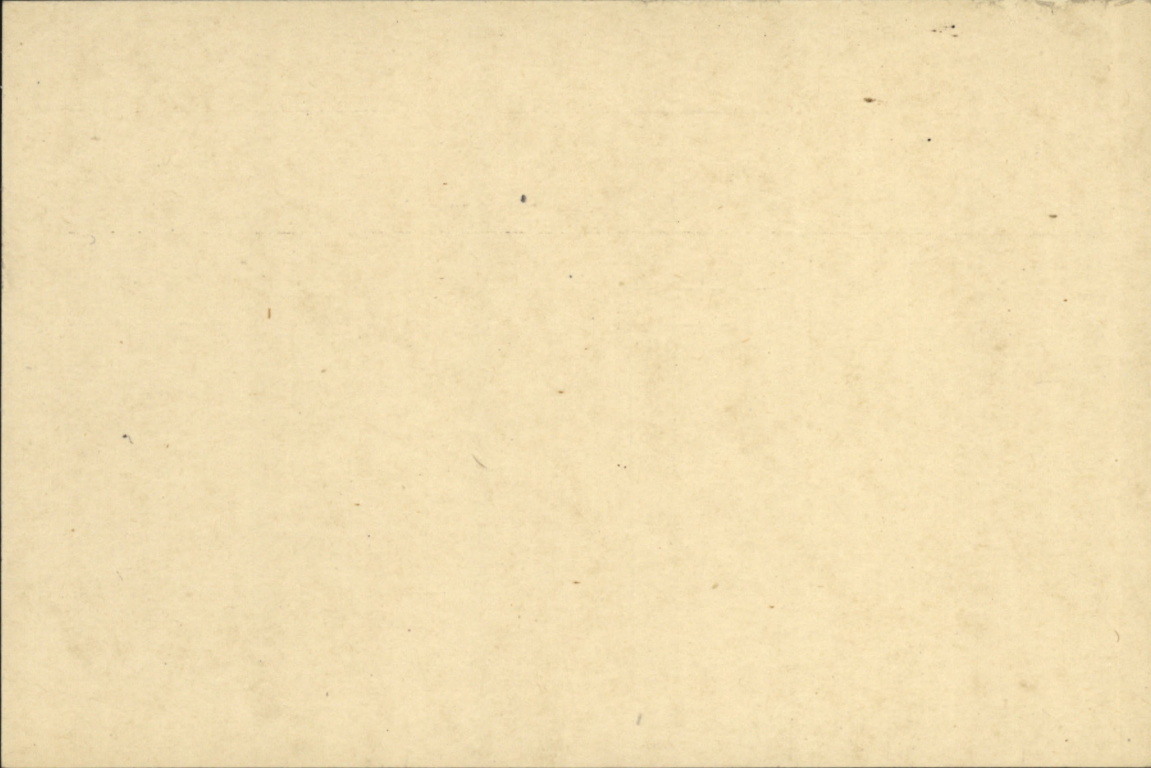
No 2. Construction Battalion

D. O. 6-7-16

M. D.

6

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
1916 Aug 5	1916 Aug 31	n.		
	Sept.	n.		
	Oct.	n.		
	Nov.	✓		
	Dec.	✓		
1917 Jan 1917		✓		
	Feb.	n.		
	Mar.	n.		



SURNAME.

Hamilton

CHRISTIAN NAMES

Charles.

REGL. NO.

931098.

RANK

Pte. (Pte.)

UNIT

No. 2. Construction (coloured)

Bn.

FORMER CORPS

Nil

6. CARD NO. ✓

S.O.S. also. Demob. 14-2-19

0-0-448 FOLL. 13-2-196

6. 10. 10

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Hamilton, Mrs.

RELATIONSHIP TO SOLDIER

Mother.

ADDRESS

Breach Hill, N.S.

COUNTRY OF BIRTH

Canada, Halifax, N.S.

DATE

June 29th 1897.

PLACE OF ATTESTATION

Halifax, N.S.

DATE

Aug 5th 1916.

R/C 25-1-19, 25th 68.

From Halifax N.S. "Southland" 18/3/17.

MARRIED

SINGLE

yes

WIDOWER

TRADE OR CALLING

Labourer

RELIGION

Baptist

DESCRIPTION.

APPARENT AGE

19 YEARS

1 MONTHS

HEIGHT

5 FEET

3 INCHES

CHEST MEASUREMENT

35 INCHES

EXPANSION

3 INCHES

COMPLEXION

Dark

EYES

Black

HAIR

Black

DISTINGUISHING MARKS

Not Stated.

MEDICAL EXAMINATION.

PLACE

Halifax, N.S.

DATE

Aug

1916.

Present Address.

Beachville, N.S.

NAME *Hamilton C.*
RANK AND CORPS *Pte* *M. S. Regt*

REG'T'L. No. 931098
H. Q. FILE NO 649

FOLLOWS NO. _____ FOLLOWS

CABLE		NATURE OF CASUALTY
NO.	DATE	

LIST NO.

HOSPITAL

DATE OF
ADMISSION

REMARKS

a 243 ⁽¹⁾	Can. For. Cor. La Joux	9-6-18	V. D. G.
a 331 ⁽²⁾	Can. Am. Corps H. La Joux	Jura 23-9-18	V. D. G. "N.S. Regt."
a 340 ⁽³⁾	"discharged."	1-10-18	V. H. G.
a 366 ¹	Can Forestry Corps La Joux	Jura 1-11-18	P. U. O.
a 371-a	Disch.	3-11-18	" " "

Name HAMILTON, Rank

Charles
Pte

Reg. No. 931098.

Unit 2nd Const Co.

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
17-1-18	Jura N. champagne de Jura					
	18714.		Injured wd Foot slt.	A 1131		
28-1	Discharged		do	A 132		19180
9-6	C. C. Hsp La Tour	V. D. G.		A 243		1936-13
20-6	Discharged	"		A 259		2189-5
23-9	C. J. C. H. La Tour	V. D. G.		A 339		4372/12
1-10	Discharged	"		A 340		4593/10
3-11-18	C. J. C. Hsp La Tour	Pte		A 366		5202/12
	Discharged	"		A 371		5525-4

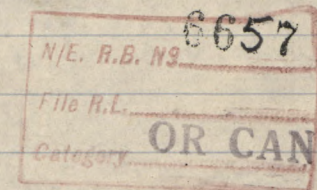
J.P. Rank _____ Name **HAMILTON, Charles.** Reg'l No. **931098.**
 Unit No2. Const. Bn. _____ If in perm. Corps }
 What Unit? } Married or Single **Single.**
 Place and Date of Enlistment **Halifax. N.S. 5th Aug. 1916.** Place of Birth **Halifax. N.S.**
 Name and Address, Next-of-Kin **Mrs. Alice Hamilton.**
Beechville. Halifax. N.S. Relationship **Mother.**

Assigned Pay Monthly \$ _____ Payable to _____

Relationship _____

Separation Allowance \$ _____ Payable to _____

Relationship _____



Discharge, Date and Place _____ Reason _____ Character _____

H. W. V., Ld.—9:46-16.

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.				
C		<i>Arrived in England "ss Southland"</i>		<i>14-17</i>	<i>AWWW</i>
<i>14-6-14</i>	<i>2nd Gen Bn</i>	<i>Arrived in France</i>	<i>Field</i>	<i>14-5-14</i>	<i>Pt 250 115.</i>
<i>16-12-18</i>	<i>N.S.R.D</i>	<i>To 5th from Cecoy Pk</i>	<i>102nd</i>	<i>14-12-18</i>	<i>305-71 d/ 19-12-18 2nd Cecoy</i>
<i>27-12-18</i>	<i>N.S.R.D</i>	<i>O/c to C.D.D Rhyll</i>	<i>-</i>	<i>27-12-18</i>	<i>-313</i>
<i>25. 1. 19</i>	<i>N.S.R.D</i>	<i>Cases o/p to Rhyll. & S.O.S. to C.E. & Canada</i>	<i>Report</i>	<i>12.1.19</i>	<i>-18.</i>

A.F.B. 103 CHECKED
29 MAY 1957

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. 931092 Rank Pte Surname Hamilton
(Given name in full)
Charlie Hamilton
 Unit or Corps D.D.6 Birthplace Halifax N.S.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 125 lbs. Height 5 ft. 4 in. Colour of Eyes Brown
 Nutrition Good
 Pulse normal
 Condition of arteries normal
 Vision Rt. no Left no
 Hearing (conversational voice) Rt. 15 ft. Left 15 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.

nil

R. Cornwallis St.
Halifax
D.D.6

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at(Overseas)

Date SignedM.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 *7/12/19* Signed *W. R. Russell*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 *Charles Hamilton*

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

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

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 Hamilton Surname Charles
 Unit or Corps 17th Reserve (If a soldier) Regtl. No. 971098
 Born at Shalifax Nova Scotia on date.....
 Signature (for identification) Miss Mark P. Leard witness

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

1. **PHYSIQUE**—Any deformity, maiming or lameness? If so, describe. no

Weight 140 lbs.

Height 5 ft. 5 ins.

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? 64

Intermittence or irregularity? no

6. **ARTERIES.**—Any hardening?

no

7. **DIGESTIVE SYSTEM** ?

no

8. **GENITO-URINARY SYSTEM** ?

no

Urinalysis—s.g.? 1020

Reaction? ac

Albumen? no

Sugar? no

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 Kimmel Park

Signed W. Stephens Capt. M.O.

Date 2 1 19

Signed W. Stephens Capt. 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.

Medical Examination upon leaving the Service
of an Officer in the General Service of a Soldier in the

Name: _____
Rank: _____
Service: _____

11/10/1914
1914

1. Name of the Officer

2. Name of the Soldier

3. Name of the Regiment

4. Name of the Battalion

5. Name of the Company

6. Name of the Platoon

7. Name of the Section

8. Name of the Post

9. Name of the Garrison

10. Name of the District

11. Name of the Division

James C. ...

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

M.D. 6

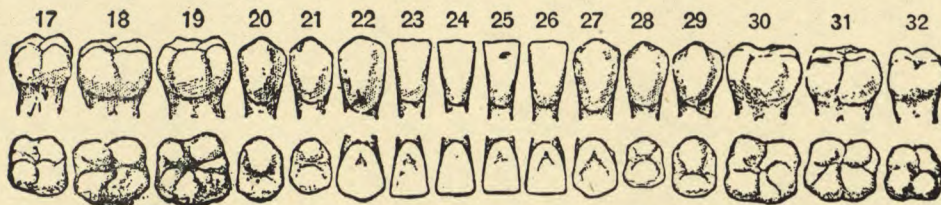
DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block Letters) HAMILTON, C

REGIMENT No 2 Con Bn RANK Plt No. 93 1098

Date of Examination in England 31.12.18 Date of Examination in France _____

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



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 14

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

(c) In France yes

KINMEL PARK,
NORTH WALES.

Signature of Dental Officer

W. Kennedy
Riwt

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

WARRANT
No. 10000
1900

TO HAVE AND TO HOLD unto the said
BUREAU OF LAND MANAGEMENT

of the said County of ... State of ...
the sum of ... Dollars

10
7

Witness my hand and seal this ... day of ... 1900

Casualty Form—Active Service.

Regiment or Corps *No 2 Canadian Cavalry Coy*
 Rank *Private* Surname *Hamilton* Christian Name *Charles*
 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 on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked...			
<i>2-11-18</i>	<i>OC/unit</i>	<i>Admitted to Hospital</i>	<i>Fred</i>	<i>1-11-18</i>	<i>B213</i>
<i>9-11-18</i>	<i>do</i>	<i>Replies from Hospital</i>	<i>"</i>	<i>3-11-18</i>	<i>B213</i>
<i>11¹²/18</i>	<i>aag.</i>	<i>Trans to England & posted to 71. S. Regt. Depot</i>	<i>Frankhett</i>	<i>14¹²/18</i>	<i>KH 3441.</i>
			<i>ba Hewett</i>		
			Lieut. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, S. E. F.		

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

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				
14.12.18	N.S. R. D.	S.O.S. + attached to 26.6.19 for Ops + Relations	B'shatt	14.12.18	D.O 305
	NSRD	ON COMMAND TO <i>CDR Kimmel R</i> <i>Rhif</i>	BRAMSHOTT		<i>NSR D 313 24/12/18</i> PART II D.O.
12/1/19		SOS on Yankee Coy Disch Canada Sailing at 4 AM Hammond Kimmel			<i>ca. Wright</i> LIEUT, OFFICER IN RECORDS, NOVA SCOTIA REGTL. DEPOT.
12.1.19	O'ceas. 7/1/19	Embarked for Canada 6 D.D. Dept. Coy. C. 22.1.19.			<i>Am. Ferguson</i> Lieut ASST. ADJT. No. 6 DISTRICT DEPOT
14/2/19	S/O'S	Discharged D.O 44			<i>Geo. Shaw</i> PART 2 D.O. FOR LIEUT. COL. No. 6 DISTRICT DEPOT.

Alward

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

M. F. W. 54. (A. F. B. 163.)

250M.—1-16.

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps *No 2 Construction Batt. B. S. F.*

Regimental No. *931098* Rank *pts* Name *Charles Hamilton*

Enlisted (a) *5-8-16* Terms of Service (a) *period of War + 6 months* Service reckons from (a) *5-8-16*

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) _____

CERTIFIED CORRECT.
6 JUN 1917
CAN. RECORDS, LONDON.
17/5/17

Report Date	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.
		Embarked, Canada	Halifax N.S.	25/3/17	
	O.C. 2nd Constn Batta.	Disembarked, England	Liverpool	7/4/17	✓
		Proceeded Overseas	Seaforth	17/5/17	Pt. 2 D.O. # Adjutant, No. 2 Construction Batta. S.F.
		Landed in France		17-5-17	N.R.
6-9-17	OC	20 days F.P. No 2 for: (1) Insubordination to an N.C.O. (2) unnecessary beating of a horse. (3) Neglect of duty.		59/17	B2069 P. 133 of 18 ¹⁰ /17
17-1-18	Jura Hosp	Injured w th foot (all)	adm	17-1-18	W3034/08744
19-1-18	ocumis	adm hosp		17-1-18	B213
28/1/18	Jura Hosp	Injured w th foot Discharged		28/1/18	W3034/2410
2/2/18	OC	Ret. Unit from hosp		28/1/18	B213
9-6-18	Jura Hosp	V. D. Lt adm Jura Hosp		9-6-18	W. 3893 / F 2696.

(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.

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				
20-6-18	Genl Hqs.	1st Lt. Discharged.	Field	20-6-18	44656.
15-6-1918	oe Unit	To Hospital	Field.	9-6-18	B213
22-6-18	oe Unit	Returned from Hospital	Field	20-6-18	B213
22-6-18	do	Defect: Field Allowance and is placed under disphage of pay at rate of 50 cents per diem while in hospital from 9-6-18 to 20-6-18 (12 days)	Field		B213 1000 39 7 July 1918
31-8-18	oe Unit	Granted 14 days leave	Unit.	31-8-18	B213 105 51 1918
21-9-18	do.	Returned from leave.	Field	17-9-18	B213
23-9-18	Genl Hqs.	1st Lt. admitted		23-9-18	45264
1-10-18	oe do	1st Lt. Discharged	Field.	1-10-18	46496
28-9-18	oe do	1st Lt. To Hospital	..	23-9-18	B213
5-10-18	oe do	Returned from Hospital		1-10-18	B213.
5-10-18	oe do	Defect: Field Allowance is placed under disphage of pay at 50¢ per diem from 23-9-18 to 1-10-18 (9 days)			B213 105 56 9 Oct 1918
1-11-18	Genl Hqs.	1st Lt. admitted		1-11-18	4661
3-11-18	oe do	Discharged		3-11-18	1002.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 931098 (Rank) Private
Name (in full) Charles Hamilton enlisted in
the #2 Construction Battalion
CANADIAN EXPEDITIONARY FORCE at Halifax N.S. on the 5th
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 21 years 7 months
Height 5 feet 4 inches
Complexion Dark
Eyes Black
Hair Black

Marks or Scars

Nil

Charles Hamilton
Signature of Soldier
W. Knowles
Witness

C. W. Macaloney CAPTAIN
O. C. DISCHARGE SECTION NO. 6 DISTRICT DEPOT.

Date of Discharge February 14, 1919

Rank

Signed at Halifax, N.S. this 13th day of February 1919
in Military District No. 6 (Six)

Appointment

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.

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 remobilization 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.

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 Batt

(2) Regimental Number 931098

(3) Full Name of Soldier Charles Hamilton

(4) Place of Birth Halifax N.S.

(5) Are you married, or not? no

(6) If married, state,
 (a) Full name of your wife _____
 (b) Present Postal Address ~~Beechville N.S.~~

(7) Are you a widower? no

(8) Have you any children? no

If so, give number of boys and girls _____

Also their names and ages _____

(9) Is your Father alive? *yes James Hamilton*
If so, state name and address *Beechville N.S.*

(10) Is your Mother alive? *yes*
If so, state name and address *Mrs James Hamilton*
Beechville N.S.

(11) If your Mother is a widow _____
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.
~~*Half*~~
father crippled

(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.
Mother
~~*Mrs James Hamilton*~~
Beechville N.S.

(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? *no*
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.

OCT 23 1919

Date.....

C. H. Reis Capt
for Officer Commanding.

931098
ORIGINAL MEDICAL HISTORY SHEET

Surname Hamilton

Christian Name Charles

Examined { on 5th day of August 1916
at Halifax, N.S.

Approved by B. D. Johnson

Birthplace { City or Town Beechville
County Halifax, N.S.

Rank Capt M.O.

Apparent age 19 years

Trade or occupation Labourer

Height 5 feet 3 Inches

Weight 126 lbs.

Chest measurement { Minimum 32 inches
Maximum expansion 35 inches

Physical development

Small-pox Marks aid

Vaccination Marks { Arm Right Left /
Number one

When Vaccinated last 1913

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

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

Date	Result	VACCINATIONS
<u>17/2/17</u>		<u>Dou Murray</u> M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>25/10/16</u>	<u>L.S.R.</u>	<u>H.V. Keut major amb</u> M.O.
<u>21/4/16</u>	<u>L.S.R.</u>	<u>H.V. Keut major amb</u> M.O.
<u>7/4/16</u>	<u>L.S.R.</u>	<u>H.V. Keut major amb</u> M.O.

Enlisted on 5th day of August 1916 at Halifax, N.S.

CORPS	REG'TL NUMBER	HABITS	DATE
	<u>431098</u>		<u>8/5/16</u>
No. 2 CONSTRUCTION, B.M. C...			
Transferred to			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT
<u>Dou Murray</u>		<u>Dou Murray</u>	<u>Capt. amb.</u>
<u>Capt. amb.</u>			

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.

ASSIGNED PAY

Sheet No. 2.
(Assignee)*Mrs Alice Hamilton*

OVERSEAS CONTINGENTS

PAYMENTS.

Name of Soldier

*Hamilton Charles**No 931098**Pte no 2 const Bu*

L. L. Job 5470—Req. 6888.

Month.	Year.	Cheque No.	Amt.	Remarks.
			<i>15.00</i>	
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		<i>Z 4850</i>	<i>15</i>	
May		<i>C 8267</i>	<i>15</i>	<i>15.00</i>
June		<i>I 15264</i>	<i>15</i>	<i>15.00</i>
July		<i>Q 22602</i>	<i>15</i>	<i>15</i>
Aug.		<i>K 29612</i>	<i>15</i>	
Sept.		<i>R 36153</i>	<i>15</i>	<i>10.00</i>
Oct.		<i>L 42541</i>	<i>15</i>	
Nov.		<i>P 48631</i>	<i>15</i>	
Dec.		<i>R 57440</i>	<i>15</i>	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

APR 1917

135.00

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.				

MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

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

To Whom *Mrs. Alice Hamilton* By Whom Assigned *Hamilton Charles*
 Address *Beechville st* Regtl. No. *931098*
Margarets Bay Rd. Rank *Pte*
Halifax Co. N.S. Corps *No 2 const Bn*
 Rate *15⁰⁰*

APR 1917

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				



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ASSIGNED PAY. ENGLAND OR CANADA. SEPARATION ALLOWANCE. ENGLAND OR CANADA.
EFFECTIVE DATE: 1 APR 1917 EFFECTIVE DATE:
AMOUNT: 15⁰⁰ AMOUNT:

NAME: HAMILTON Charles #4
NUMBER: 931098

NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.
Mrs Alice Hamilton mother
Beuchville St Margaret's Bay Rd
Halifax NS.

PARTICULARS OF RANK OR APPOINTMENT		
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pvt

Stopped Effect 1/1/19

UNIT AND TRANSFERS			
AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T 57 D	UNIT TRANSFERRED TO
			Canada

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

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
7/11	2686	C.F.C.					
5/12	6580	C.F.C.	766				
18/12	3576	13 RALLY	975				
			1437				

DAILY RATES OF PAY AND ALLOWANCES				
AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1	-	-	10

PARTICULARS OF RENDERING NON-EFFECTIVE: - *See to Can 1/1/19 Ledger that 42.69 28.30*

1918 MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
MAR	Balford								107.53		
Apr	P. Pay	33		via P				15			
				AR 4 8/4 CFC para	3.57						
				AR 266 2/4 - - -	3.57				118.39		
		33			7.14			15			
May	P. Pay	34	10	allow				15			
				AR 471 2/5 para C.F.C	7.14				130.35		
		34	10		7.14			15			
June	P.P.	33		allow				15			
				AR 709 7/6 C.F.C 5	1.78						
				✓ 871 2/6 ✓	3.57				143.00		
		33			5.35			15			
July	OP	34	10	9-6-18 12 day 60 ³⁹ B ²⁹ 6/7/18 20-6-18 20 comb.		7.20					
				Canada				15			
				AR 948 10/7 CFC 5	3.57						
				✓ 1093 25/7 ✓	3.57				147.76		
		34	10		7.14	7.20		15			
Aug	P.P.	34	10	Canada				15			
				AR 1256 10/8 CFC 5	3.57						
				AR 1482 25/8 CFC 5	3.57						
				AR 1641 28/8 ✓	7.14				152.58		
		34	10		14.28			15			
Sep	P.P.	33		Canada				15			
				CP 31299 6/9 London	48.67						
				AR 3542 28/8 CFC 5	97.33						
				CP 32043 9/9 London	48.9						
				AR 1876 21/9 CFC 5	3.57				16.14		
		33			154.44			15			

NUMBER 931098 RANK

Pte

NAME HAMILTON. CHAS.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
Oct	P.P.	3410		<i>Foid</i> 215. 23/9 to 11/10/18 9 days No. 56. No 2 Gov Co. 15/10/18 E.A.P.		540			1614		
				MR 2251 12/10 E.F.65	373			15			
				7321 26/10 ✓	373				2238		
Nov	P.P.	3410		E.A.P.	740	540		15			
		33		MR 2686 11/11 E.F.65	373			15			
Dec		3410		2904 26/11 ✓	1306						
				E.A.P. Dec				15	4269		
				MR 6580 10/12 E.G. 1310	466						
				3569 15/12 1310/12	973						
Jan/19	P.P.	3410		E.A.P.				15	2830		
		6710			3115	4118		30			
				MR 81 10/1 10/1 ²⁰⁶⁶ Kimmel	973				1857		
					973						
S.S. to Gen 12/1/19 10/1/18 25/1/19											

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. 931098 Rank Pvt Name Hamilton G
 Corps 2nd Canadian who was* Discharged
 On 14-2-19 191... to 1-1-19 191...
 *Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-1-19 191... to 14-2-19 191..., the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month <u>LPC</u>	36	30	Balance Cr. from prev. month <u>7/15</u>	11	15
Advances by Cheques } No. <u>AP 77 B</u>	10	—	Reg't'l. Pay <u>45</u> days at \$... c.	45	—
Assigned Pay and Sep'n Allee. No. <u>13933</u>	70	—	Field Allow. <u>45</u> days at \$... c.	4	50
Other charges <u>Reg found</u>	30	—	Separation Allowances* (Monthly) <u>30</u>	30	—
Payment on transfer or discharge No. <u>13932</u>	49	30	Other Allowances* <u>clothing allow</u>	35	—
Balance Cr. (to be paid by the new unit)			Other Credits*		
			Bal. Dr. (to be deducted by new unit)	70	—
Total	195	65	Total	195	65

*Give particulars.

A monthly stoppage of \$ 1.50 (†) has... (‡) been paid on account of Assigned Pay for the month of January 191... and Sep'n Allee. for month of February 191... (to) Assignee Mr G Hamilton Bay Rd Beechville St Margarets Halifax N.S.
 (Address) Applied to tanker
 (†) 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.

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

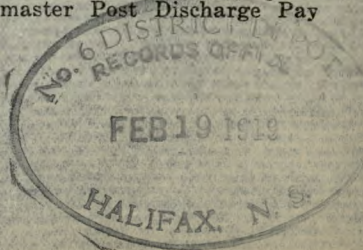
REMARKS:—

- State (1) date of enlistment
- (2) if married and if a Separation Allowance Card has been submitted
- (3) cause of discharge M.D. No. 6 authority Dorty
- (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 17-2-19
 Place Halifax CART

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.



CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all ranks (with the exception of the Royal Canadian Mounted Police) and is to be filled in by the commanding officer of the unit to which the member is attached.

Reference No. _____

Name of member _____

Rank and position held at the time of discharge _____

Number of years of service _____

Category	Amount
Basic Pay	_____
Gratuity	_____
Other Pay	_____
Total	_____

(1) For the purpose of this certificate, the member is deemed to have been discharged on the date of his last day of service.

(2) The member is entitled to the above amount of pay and gratuity on the date of his discharge.

(3) The member is not entitled to any other benefits or allowances.

(4) The member is not entitled to any other benefits or allowances.

(5) The member is not entitled to any other benefits or allowances.

(6) The member is not entitled to any other benefits or allowances.

(7) The member is not entitled to any other benefits or allowances.

(8) The member is not entitled to any other benefits or allowances.

(9) The member is not entitled to any other benefits or allowances.

(10) The member is not entitled to any other benefits or allowances.

(11) The member is not entitled to any other benefits or allowances.

(12) The member is not entitled to any other benefits or allowances.

5664

War Service Badge
Class "A" #76996
issued

4-5-33

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.	931098	
Rank	Private	
Surname	Hamilton	
Christian Name	Charles	
<small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>		
Corps (Squadron, Battery or Company)	#2 Construction Bn. C.E. F.	
Date of Discharge	February 14, 1919	
Place of Discharge	Halifax, N.S.	
1.	DESCRIPTION AT THE TIME OF DISCHARGE.	
Age	21 years 7 months	Descriptive Marks
Height	5 feet 4 inches	
Complexion	Dark	Nil
Eyes	Black	
Hair	Black	
Trade	Labour	
Intended place of residence	9 Cornwallis St., Halifax N.S.	
<small>(To be given as fully as practicable.)</small>		
2.	The above-named man is discharged in consequence of	
Demobilization		
Discharged 13-2-33. 649-H-18004		
<small>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.</small>		
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.	
	<small>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.</small>	
	4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)	

5-3-1868

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.....

Four horizontal dashed lines for listing 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.

(Place)..... *Xalifax N.S. Charles Hamilton* (Signature of Soldier.)
Mark C. Knowles

(Date)..... *February 13th 1919* *CW Knowles* (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)..... *Xalifax N.S.*

(Date)..... *14 - 2 - 19*

(Signature)..... *D. M. G. R.*
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.)

List of Discharge Documents

Nil.
Charles Hamilton

C. Knowles
Witness

List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263.</p> <p>Squadron } Battery } Conduct Sheet, " B. 263a. Company }</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia Form B. 313</p> <p>Medical Report for Invalid* " B. 227.</p> <p>Statement of Man's Account on Transfer and Last Pay Cer- tificate, " D. 877.</p> <p>*Only if discharged "Medically unfit."</p>	<p>Attestation Paper, Militia Form B. 235.</p> <p>Proceedings on Discharge " B. 218.</p> <hr/> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p style="padding-left: 40px;">(a) Proceedings on Discharge.</p> <p style="padding-left: 40px;">(b) Attestation.</p> <p style="padding-left: 40px;">(c) Medical History Sheet (in the event of such having been prepared.)</p>
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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.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

1-10-18

Separation and Assigned Pay Branch

H 92 1070

apr 1917

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

30			
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RATE OF ASSIGNMENT

15			
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PARTICULARS OF SEPARATION ALLOWANCE

No. 931098
 Rank Pte Promoted Reverted Discharge
 Soldier's Name Charles Hamilton
 Battalion "2" Const. Battr.
 Beneficiary
 Relationship Mother
 Address

PARTICULARS OF ASSIGNMENT

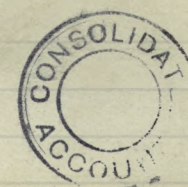
Name Mrs Alice Hamilton
 Address Beechville St. Margaret
Bay Rd Change of Address Halifax Co
N.S.
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917					7822-6-6
Dec. 31.			135	135	
Jan	Q 68939		15	15	M ^c
Feb	N 74934		15	15	A
March	H 96791		15	15	A
April	H 15967		15	15	A
May	B 11170		15	15	A
June	A 14058		15	15	A
July	H 25977		15	15	A
Aug.	D 28334		15	15	A
Sept	C 35921		15	15	A
Oct	E 42786		15	15	A
Nov.	G 50878		15	15	A
Dec.	E 63052		15	15	A ✓
11	O 2183	90		90	A
Jan.	G 70395	30	15	45	A
		\$120	\$330	\$450	

S.A. to Mother. from 1-10-18. date of application. authy.
 P.A. Puling. 17-12-18. A.C.O. No. 9517-0-3183 med. 1/18. Adj. S.A.
 from 1-10-18 to 31-12-18. M.R.O. No. 48518. AL 21-12-18

M. F. W. 128
 400M. 617-1772-39-141
 L. L. 22520-M. & D. 7198.

S.A.S. App. A/c Closed 31-1-19
 Ret'd per Emp. pers. of Britain
 Date 22-1-19 F.X. 29-1-19
 M.D. # 6 Clerk E. Eldon
 M.R.O. No. 60727 Recd 29-1-19 Eldon



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

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PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Rank

Promoted

Reverted

Discharge

Name

Address

Soldier's Name

Change of Address

Battalion

Beneficiary

Relationship

Address

1

2

3

4

Date

Cheque No.

Amount S/A

Amount A/P

Total

REMARKS

M. F. W. 128
400M.C.-6-17-1772-38-1141
L. L. 22230-M. & D. 7488.

Taken on Strength 12-1-19... B.O. 29

AUDITOR [Signature] PAYMASTER [Signature]

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

M. OR S. REGT. No. 931098 RANK Pl- NAME (IN FULL) Hamilton G. ORIGINAL UNIT C.E.F. 2nd Con Bn. DATE EFFECTIVE 1-10. ADDRESS: Mrs. A. Hamilton, Beechville, St. Margants Bay Road, Halifax, N.S. DISCHARGED 14-2-19 Demob. AUTHORITY [Signature]

Table with columns: MONTH, PAY AND F.A., OTHER CREDITS, TOTAL CREDITS, ACQUITTANCE ROLLS, CASH PAYMENTS, ASSIGNED PAY, REGIMENTAL CHARGES, OTHER CHARGES, TOTAL DEBITS, BALANCE DEBIT/CREDIT, PARTICULARS OR REMARKS. Includes handwritten entries for Jan, Feb, March, April, May, and June.

Certified that all payments due... [Signature] [Signature]

BALANCE FROM PREVIOUS ACCOUNT

