

Triplicate

12 M. D. 1st Depot Battalion 8 ask. Regiment

Regtl. No. 257270

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class One)

1. Surname Lipsett

2. Christian name Thomas Edward

3. Present address Regina, Sask.

4. Military Service Act letter and number LC 499208

5. Date of birth Oct 27th, 1892

6. Place of birth Manor Hamilton, Ireland
(town, township or county and country)

7. Married, widower or single Single

8. Religion Church of England

9. Trade or calling Clerk

10. Name of next-of-kin Mrs M. Lipsett

11. Relationship of next-of-kin Mother

12. Address of next-of-kin Manor Hamilton, Ireland

13. Whether at present a member of the Active Militia No

14. Particulars of previous military or naval service, if any No

15. Medical Examination under Military Service Act:—
 (a) Place Regina, Sask. (b) Date Oct 16/17 (c) Category A2

DECLARATION OF RECRUIT

I, Thomas Edward Lipsett, do solemnly declare that the above particulars refer to me, and are true.

Thomas Edward Lipsett (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 25 yrs. -- mths.

Height 5 ft. 0 1/2 ins.

Chest measurement } fully expanded 36 1/2 ins.
 } range of expansion 3 1/2 ins.

Complexion Fair

Eyes Blue

Hair Light Brown

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

W. J. D. ... Lt Col
O. C. 1st Depot Btl. 8 ask. Regt.

Place Regina, Sask. Date Jan 15th, 1918.

PARTICULARS OF RECRUIT DRAFTED UNDER MILITARY SERVICE ACT, 1917

Class

REGIMENT

BATTALION

COMPANY

PLATOON

SECTION

POST

1. Name of recruit
2. Christian name
3. Present address
4. Military service Act section number
5. Date of birth
6. Place of birth
7. Married, widowed or single
8. Religion
9. Trade or calling
10. Name of next of kin
11. Relationship of next of kin
12. Address of next of kin
13. Whether or not a member of the Active Militia
14. Particulars of previous military or naval service, if any
15. Medical Examination under Military Service Act

(a) Place

(b) Date

DECLARATION OF RECRUIT

I do solemnly declare that the

above particulars are true and correct

(Signature of Recruit)

DESCRIPTION OF CALLING UP

Age	ins	Height	ins	Weight	ins	Build	ins	Complexion	ins	Eyes	ins	Hair	ins	Arms and hands	ins	Distinctive marks and marks indicating congenital peculiarities or previous diseases
-----	-----	--------	-----	--------	-----	-------	-----	------------	-----	------	-----	------	-----	----------------	-----	--

Depot Battalion

Post

Date

Block
M.T.S.
1917-24-112

REGIMENTAL DOCUMENTS

Sash Regt.

NAME **LIPSETT THOMAS EDWARD** REGT. NO. **257270** UNIT **1st 20 B** H. Q. FILE NO.

16117
P to
S

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

D

1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)
2 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)
TRAINING HISTORY SHEET (M.F.W. 113)
1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)
1 REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)
1 COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)
2 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)
2 DENTAL HISTORY SHEET (M.F.B. 465)
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)
1 MEDICAL EXAMINATION (M.F.W. 129)
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)
LAST PAY CERTIFICATE (M.F.W. 44)
1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 258)
PARTICULARS OF CHARACTER (A.F.W. 3225)
1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)
3 Misc
1 cys card
1 form & D3
1 card
1 Photo of wife
R127 1 J. card

Comp to BOC
Ret 3-11-19

14/10/19

B.F.C. Spec 989777

DEATH

Category

M

DISCHARGE

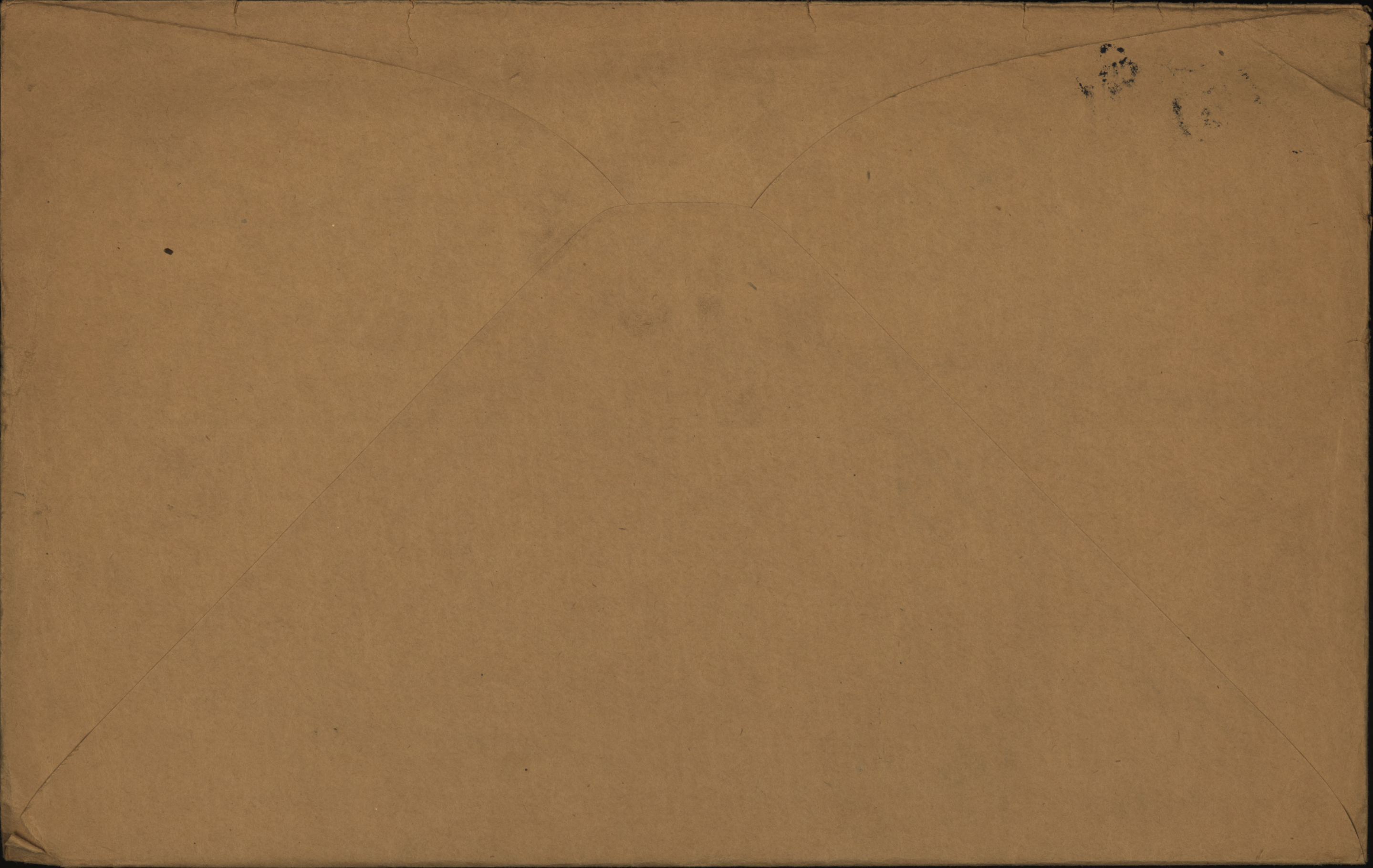
Category

Reserve

DESERTION

27431

H



Surname

Christian Name or Names

Reg. No.

LIPSETT

T.E.

257270

Rank

Unit

Pte.

Sask. 5

Cas. List.

9-10-18 B339-2 Norfolk & Norwich, Norwich 5-1-18 GSW R. Leg. *S.*

21.12.18 B340 1/2 Woodcote Pk 19.12.18

7-2-19 B440 1 Disch 3-2-19

A.M.D. 2 Dept.

D.M.S. 1300. 50M-30-8-18. oh of D.G.M.S.O.M.F.E. London

Cas. List.

REGT'L. No. 257270

NAME

Lipsett Thomas Edward

H. Q. FILE NO. 649

RANK AND CORPS

Pte. 5th Br. from 1st Regt.

FOLLOWS

NO.

CABLE

NO.

62-6

DATE

NATURE OF CASUALTY

Inv.1st Regt. 1st

FOLLOWS

✓ 382 11-10-18. Adm. Royal War. H. Hosp.✓ 339 9-10-18. Howick Oct 5/18. Gsw. P. leg.

LIST No. 2

HOSPITAL

DATE OF
ADMISSION

REMARKS

LIST No. 2	HOSPITAL	DATE OF ADMISSION	REMARKS
B.402.	St. Joseph's War 10 Mil. Conv. Widely R. Eppson.	1912-18	Blaine Howard. Gsw. R. leg.
B.440.	Desi	3-2-19	" " "

Name *Lipsett* Rank *Private* Thomas Edward
 Unit *5 Regt.* Reg. No. *257270*
 Next of Kin *Wife Mrs. M. Lipsett, Manor Hamilton*
Co. Leitrim, Ireland

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
5-10-18	Norfolk & Norwich	W. H. Sharpe	Returned	1337	H 382	28239
19-12-18	Mch. Spain	G.W. Regt		1342		3327
3-2-19	Dischd.			1440		1523
15-2-19	Mch. Spain	G.W. Regt				

Records

SURNAME.

Lipsett,

CHRISTIAN NAMES

Thomas Edward,

REGL. NO.

257270.

RANK

Pte.

UNIT

Sask. Regt. 1st Sps. Bn

FORMER CORPS

nil

12

CARD NO.

*S.O.S. Dis. 17-5-19
D.O. 137 FOLL 17-5-19
Demob. 13.5.19*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Lipsett, Mrs. M

RELATIONSHIP TO SOLDIER

Mother

ADDRESS

*Manorhamilton Co., Leitrim,
Ire.*

COUNTRY OF BIRTH

Ireland. Manorhamilton,

DATE

Oct. 27th 1892.

PLACE OF ATTESTATION

Regina, Sask.

DATE

Jan 15th 1918.

O/S. 25-3-18 $\frac{1123}{8}$

P/c 13-5-19 316

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE

Number. 257270 Rank Pte
Surname. LIPSETT
Christian Name. Thomas Edward
Unit. 5th Bn. Can. Inf. Theatre of War. France
Date of Service. 19-8-18
Remarks. 1419. Retallick St.
Latest Address ~~1717. Scarth St.~~
Regina, Sask.
Roll No. B Page 4878.

gic 2466 Desb

JUL 9 1927

A.R. 8
Reg. No.

Rank.

Surname *Lipsett*

Category.

Dentally Unfit.

257270
5 Bn. *1st*

Christian Names (1) *Thomas*
(2) *Edward* (3)

Date *A3*

Place of Enlistment:

Date of

Taken on from

Religion

Inoculations

Company

Regina

15-1-18

2nd CD

C/E

29-1-18

D

Province:

Age on

Date

Vaccination

Sask

25

14-3-19

On Command.....

Hospital.....

31
3
0

Permanent Cadre
Date taken on

Employed as

Date Proceeding

Date Admitted

Record of Overseas Service:

Aug 18 — Oct

Profession or Trade (Civil)

Clerk

Reason for Return:

wounds U.S. Army Ketchikan

Transferred or Posted to
Date *15*

Married or Single

Single

LEAVE.

Address of Next of Kin

Mother.

No. of Pass Issued.

FROM.

To.

Free Transportation.

Mrs M. Lipsett.

2541

3-2-19

15-2-19

C/S

Country

*Glenboy Manor Harcourt
Ireland*

09 B 08 31 Da 0

U.S.G. 10134

Part 2 Order Entries.

No.	Date	Ref.	No.	Date	Ref.
30	7-2-19	AT			
74	153-19	SI			

TRAINING.

Weeks of Training.

1	2	3	4	5	6	7	8	9	10	11	12	13	14	Over.
---	---	---	---	---	---	---	---	---	----	----	----	----	----	-------

Nature of Training	Date passed test
Drill	
Musketry	
Bombing	
Rifle Bombing	
Bayonet Training	
Anti-Gas	
Lewis Gun	
Rapid Wiring	

Special Training Courses, etc.

ORIGINAL

MEDICAL HISTORY SHEET.

30 NOV 1918

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar

1. Surname Hissett Christian name Thomas E.
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule L.C. 499208.
3. Consecutive number on schedule of men reporting for service (if he appears on it) 562.
4. Address (including street and number, if any) 1717 Leath St Regina.

OCT 1918

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 16 day of October 1917, by the undersigned medical board sitting at Regina, Sask.

5. Age as stated 25 Years 0 Months. 6. Apparent age 25 Years 0 Months.
7. Height 5 Feet 8 1/2 Inches. 8. Weight 140 Pounds.
9. Chest measurement { Minimum 36 1/2 Ins. Maximum 33 Ins.
10. Complexion Fair { Eyes Blue Hair Dark Brown
11. Physical development Good { Good Fair Poor 12. Smallpox marks nil

13. Number of vaccination marks { Right arm — Left arm 1
14. When vaccinated last Childhood

15. Distinctive marks and marks indicating congenital peculiarities or previous disease 14/3/19 A2 BB DMH

16. Slight defects but not sufficient to cause rejection. The man denies having had { Rheumatism Tuberculosis Syphilis We find no evidence of past { Rheumatism Tuberculosis Syphilis (Strike out disease admitted or suspected.)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category A2

Certified a true copy

Denis Swamy Hugh Maclean J J Bellis
President. Member. Member.

Table with columns: Date, Result, VACCINATIONS, Date, Result, ANTI-TYPHOID INOCULATIONS, ETC.
Rows: 24/1/18, 24/1/18 + Denis Swamy, 30/1/18 + Denis Swamy, 8/2/18 + Denis Swamy

Joined 15th day of Jan 1918 at Regina

Table with columns: CORPS, REG'TL NUMBER, HABITS, DATE
Rows: W. Depot Batt., 15th Canadian Res. Batta, 257270, 15/1/18, 4 APR 1918

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Table with columns: STATION, DATE, DISEASE, RESULT

Signature of Man J. E. Hissett

CANADIAN

N. B.—This sheet is to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

Surname *Lipsett* Christian Name *Thomas*

STATION.	Date of Arrival at the Station.	DATES OF						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.
		Admission into Hospital			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
		4	10	18	21	11	18	S-W. Rt. leg.		Slight. Healed rapidly. Small piece of metal removed under a local anaesthetic.	<i>C. H. Murphy M.D.</i>
	<i>NCH Causton</i>	21	11	18	18	12	18	" "	27	Trans. to Red Cross Hosp. Causton Trans to Cam MCH Epsom	
	<i>MCH Epsom</i>	18	12	18	3	FEB	1919	do	46	No disability had sharp clear Discharge etc	<i>Sperry</i> July 2 1919

SUFFOLK & NORWICH HOSPITAL, NORWICH

S. A. M. C. 1st Division.

TLH Rank Name LIPSETT Thomas Edward Reg'l No. 257270
 Sid Dft. 1st Ln EASK If in perm. Corps, }
 Unit What Unit? } Married or Single Single
 Place and Date of Enlistment Regina, Jan. 15th. 1918 Place of Birth Manor Hamilton,
 Name and Address, Next-of-Kin Mrs. M. Lipsett, Ireland.
 Manor Hamilton, Co. Leitrim, Ireland. Relationship Mother

Assigned Pay Monthly \$ Payable to

Relationship

Separation Allowance \$ Payable to

Relationship

Discharge, Date and Place

Reason

Character

N/E. R.B. No. 12040
 File R.L.
 O.R. Can.

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.				
6		Arrived in England		8-4-18	S/S MASSANABIE
9, 4, 18 15		Res T.C.S FROM Canada		1-4-18	Pt II O 99
20 8 18	15 th Res	S.O.S to 5 th Bn	Pte	19-8-18	DO 232 & DO 1024/25 818 5 th Bn
		Wounded	-	21018	HA4635-10
10 10 18	5 th Bn	Inval wounded posted to Sack Rd	Pte	41018	DO 125 SRDC II 262/12 10/18
6.2.19	S.R.D.	On Com. 2 nd CCA	"	Ripon 3.2.19	" 78.
15/3/19	2 nd CCA	Leaves on Com		14/3/19	" 61
17/3/19	S.R.D.	S.O.S. to 15 th Res		15/3/19	" 61 15 th Res 100. 24 d/15/3/19.
4.4.19	12 th Bn	S.O.S pending ret to Can	-	Rhyl 3.4.19	8080. DO 434/3/4/19.
2/5/19	"	S.O.S. to Canada	-	1/5/19	- 104103

A.F.B. 103 CHECKED
28 AUG. 1918

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..... 1st Depot Battrn Sask Regt.

(2) Regimental Number..... 257270

(3) Full Name of Soldier..... Lipsett Thomas Edward.

(4) Place of Birth..... Manor Hamilton Ireland.

(5) Are you married, or not?..... No

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

(b) Present Postal Address..... ----

(7) Are you a widower?..... 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?.....No.....

If so, state name and address

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

If so, state name and address.....Mrs. M. Lipsett......

.....Manor Hamilton Ireland......

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

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

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

.....\$30 per month......

.....Other brother in Army......

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

.....

.....

.....

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

.....Yes......

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

If so, in what Company?.....Sun Life Insurance Co......

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

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

H. J. Binnie
.....
Officer Commanding.

Date.....January 15th 1918.....

1st Depot Batta Sask Regt.

FORM OF WILL

I, Thomas Edward Lipsett (Name in full)

Regimental Number 257270 serving in 1st Depot Battalion Sask Regt.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I devise all my real estate unto

Mrs M. Lipsett
Glenboy P.O.
Manor Hamilton Co Leitrim
absolutely, and my personal estate I bequeath to Ireland

Name and Address
of person or
persons to whom
it is to go.

Mrs M. Lipsett
Glenboy P.O. Manor Hamilton
Co Leitrim Ireland.

Name and Address
of person or
persons to receive
personal estate*
(See note).

NOTE

This space for the
appointment of
Executor if
necessary.

IMPORTANT
NOTE

This must be signed
and Dated by
THE SOLDIER
HIMSELF.

this 23 day of January A.D. 1918

T. E. Lipsett Signature of Soldier.

*N.B. Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

Signature of First Witness A. Gindlay

Address of Witness 1st Depot Battalion Sask Regt.

THE TWO
WITNESSES

Occupation of Witness Soldier

MUST
SIGN HERE

Signature of Second Witness A. B. Green

Address of Witness 1st Depot Battalion Sask Regt.

Occupation of Witness Soldier

ESTATES BRANCH

OCT 18 1918

MILITIA DEPT.

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) LIPSETT, T. E.

REGIMENT 15th RES. B.N. RANK PTE. No. 257270

Date of Examination in England 25-3-19 Date of Examination in France _____



DIRECTIONS TO DENTAL OFFICERS

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



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 3
2. EXTRACTIONS _____
3. CROWNS _____
4. DENTURES _____
 - (a) Full Upper _____
 - (b) Part Upper _____
 - (c) Full Lower _____
 - (d) Part Lower _____

E. W. Mounts Capt
 A.D.D.S., C.A.D.C., M.D. 12

HAS HE EVER REFUSED DENTAL TREATMENT? No

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)

- (a) In Canada Yes
- (b) In England —
- (c) In France —

Signature of Dental Officer R. Roy

NOTATION ON THE NOTATION

THE NOTATION IS THE SAME AS THE NOTATION IN THE PREVIOUS PAPER

THE NOTATION IS THE SAME AS THE NOTATION IN THE PREVIOUS PAPER

THE NOTATION IS THE SAME AS THE NOTATION IN THE PREVIOUS PAPER

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 12

NAME OF SOLDIER

Kingston

RANK

1st Lt

REGIMENT

1st B. T. A. R.

No. *25727*



INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show :

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

Condition on first Examination	Date	Amalgam	Temporary Filling (a), G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhoea	Synthetic Porcelain	Extracting	Dentures			Gold Clasp	Gold Filling	Crowns		Bridge Work	OPERATOR	Military Dist.	REMARKS
												U	L	P			Gold	Porcelain				
	<i>1918</i>																					
	<i>Jan 28</i>	<i>4</i>									<i>7</i>									<i>Capt. Robertson 12</i>		<i>Leav. 7-29</i>
	<i>Treated from Feb. 19</i>	<i>23, 14, 15</i>									<i>14-16, 18, 19, 20, 30, 31</i>									<i>Capt. Robertson 12</i>		<i>Patient discharged Feb. 21 1918 Work complete</i>
	<i>to " 21 1/29</i>									<i>1/7</i>										<i>Capt. Robertson 12</i>		

* Strike out whichever inapplicable.

ASSIGNED PAY: ENGLAND ~~CANADA~~ SEPARATION ALLOWANCE: ENGLAND or CANADA

EFFECTIVE DATE: 10-4-18 EFFECTIVE DATE: -

AMOUNT: 15⁰⁰ AMOUNT: -

NAME: LIPSETT, Mr Edward

NUMBER: 257270

NAME, ADDRESS, RELATIONSHIP & AUTHORITY: Mr. M. Lipsett, (A/R)
Glenroy,
Manor Hamilton,
Co. Detsim
Ireland mother

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

PARTICULARS OF RANK OR APPOINTMENT		
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
<u>Can L.P.C.</u>		<u>Pte.</u>

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
<u>3-2-19</u>		<u>S.F. acc. 12 days</u>	<u>8 70</u>				
<u>4-2-19</u>	<u>9533</u>	<u>Refin.</u>	<u>19 47</u>				
<u>4-2-19</u>	<u>3967</u>	<u>10 hrs.</u>	<u>9 73</u>				
		<u>April English assigned pay</u>	<u>15</u>				
			<u>44.20</u>				

UNIT AND TRANSFERS

ORIGINAL UNIT: 30th 1/1 SRD.

DATE ACCOUNT FIRST OPENED: 19-3-18

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
			<u>15th Res.</u>
<u>102.</u>	<u>14/18</u>	<u>20/18</u>	<u>5 Bu.</u>

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	<u>1</u>	<u>10</u>		

Credit 4 40

PARTICULARS OF RENDERING NON-EFFECTIVE: 31-3-19 N.R. 4911 Refin 21-3-19 4 Refin 15 Dec. Cr. 48 60 L.P.C. Ref 24 25

DATE	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
<u>1918</u>											
<u>Mar. 18</u>	<u>Bal. from Canada</u>								<u>9 90</u>		
<u>Apr.</u>	<u>P.P. 19/3-30/4.</u>	<u>47 30</u>		<u>AR April £3.1.8 a 14899</u>			<u>15</u>				
				<u>AR. 222. 30/4. 15 Res.</u>	<u>4 87</u>						
				<u>AR. 369. 30/4. "</u>	<u>9 73</u>				<u>27 60</u>		
		<u>47 30</u>			<u>14 60</u>		<u>15</u>				
<u>May</u>	<u>P.P. + A.</u>	<u>34 50</u>		<u>a 73892 £3.1.8</u>			<u>15</u>				
				<u>AR. 587. 18/5. 15 Res.</u>	<u>29 69</u>						
				<u>AR. 691. 31/5. "</u>	<u>9 73</u>				<u>7 28</u>		
		<u>34 10</u>			<u>39 42</u>		<u>15</u>				
<u>June</u>	<u>P.P. + A.</u>	<u>33</u>		<u>B 27489 £3.1.8</u>			<u>15</u>				
				<u>AR. 816. 15/6. 15 Res.</u>	<u>4 87</u>						
				<u>AR. 934. 30/6. "</u>	<u>4 87</u>				<u>15 54</u>		<u>1/8 as per 30/4/18 L.</u>
		<u>33 00</u>			<u>9 74</u>		<u>15</u>				
<u>July</u>	<u>P.P. + A.</u>	<u>34 10</u>		<u>B 90416 £3.1.8</u>			<u>15</u>				
				<u>AR. 1052. 17/7. 15 Res.</u>	<u>9 73</u>						
				<u>AR. 1118. 31/7. "</u>	<u>9 73</u>				<u>15 18</u>		
		<u>34 10</u>			<u>19 46</u>		<u>15</u>				
<u>Aug</u>		<u>34 10</u>		<u>C 27283 £3.1.8</u>			<u>15</u>				
				<u>AR. 1278. 12/8. 15 Res.</u>	<u>9 73</u>						
				<u>AR. 1211. 26/8. 15 Res. COICC</u>	<u>3 57</u>				<u>20 98</u>		
		<u>34 10</u>			<u>13 30</u>		<u>15</u>		<u>10 86</u>		
<u>Sept</u>		<u>32 00</u>		<u>B 83545 £3.1.8</u>			<u>15</u>				
				<u>AR. 1245. 2.9.18. ✓</u>	<u>3 57</u>						
				<u>✓ 488. 14.9.18 205B</u>	<u>3 57</u>				<u>31 84</u>		
		<u>33 00</u>			<u>7 14</u>		<u>15 00</u>				
<u>Oct</u>		<u>34 10</u>		<u>D 32841. 3-1-8</u>			<u>15</u>		<u>50 94</u>		
		<u>34 10</u>		<u>L</u>			<u>15</u>				

COMPILED BY Hemmingham
CHECKED BY [Signature]

CF

NUMBER 257270

RANK

NAME LIPSETT, Thos, Edward

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
				B.F.					50 94		
Nov/Dec	P.P.	67 10		D 88 439 3-1-8			15				
				HR 57351 4/2	973						
				E 37067 3-1-8			15				
Jan		34 10		AR 7477 17/12 CCH Epson	973						
				E 88638 3-1-8			15		87 68		
		101 20					15				
	S7. 3-15/19 12 days @ B	8 76		AR 5385 30/12 CCH Epson	19 47						
Feb/Mar	Do. 36 7/19. 2 CDs	64 90		✓ 5763 22/1	4 87						
				Egg 833 3-1-8			15				
				AR 162 3/2	48 67						
				799 709 3-1-8			15				
				AR 9237 16/2 2 CDs	973				48 60		
				✓ 9533 15/3	19 47						
				✓ 3967 30/1 15 Res.	973				19 40		
		73 66									
				E 10181 3-1-8			15				
				AR 122 18/4 Kimmel Ak	973						
				✓ 674 26/4 (curd)	973				15 06		
				(curd) 1946	19 46		15				
				S.O.S. Car 3/15/19							
				SL 57							

929
3/4

929

DISPERSAL STATION

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization)

1-5-39 P
241352

War Service Badge
Class "A" No.

1. No. 257270 **REGIMENT S.S. "CASSANDRA"**

2. Rank. pta **MAY 2 1919**

3. Name. Lipsell **DISSEMBARKED** Thomas E.

4. Unit. 15 Res. 1st S.O.B.

5. Date of Discharge 17. 5. 19 Place Regina

6 Reason for Discharge.....

DEMOBILIZATION

7. Authority. RO. 1420 (D.D.O. 137 Para. 833)

8. Proposed Residence after Discharge

Category..... A

Next of Kin..... Mother

Intended Town of Residence..... Regina

Occupation..... Club Group..... 3

Service in France..... 2/2

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W.?.....

T E Lipsell Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place.....

Date..... **MAY 17 1919**

[Signature] Signature..... **MAJOR**
(O. C. Discharging Unit.)

PROCEEDINGS OF THE BOARD OF DIRECTORS

Date	Description of Business

THE BOARD OF DIRECTORS

CORPORATION

LIST OF RESOURCES

1. *[Faint text]*

2. *[Faint text]*

3. *[Faint text]*

4. *[Faint text]*

5. *[Faint text]*

6. *[Faint text]*

7. *[Faint text]*

8. *[Faint text]*

9. *[Faint text]*

10. *[Faint text]*

11. *[Faint text]*

12. *[Faint text]*

13. *[Faint text]*

14. *[Faint text]*

15. *[Faint text]*

16. *[Faint text]*

17. *[Faint text]*

18. *[Faint text]*

19. *[Faint text]*

20. *[Faint text]*

21. *[Faint text]*

22. *[Faint text]*

23. *[Faint text]*

24. *[Faint text]*

25. *[Faint text]*

26. *[Faint text]*

27. *[Faint text]*

28. *[Faint text]*

29. *[Faint text]*

30. *[Faint text]*

31. *[Faint text]*

32. *[Faint text]*

33. *[Faint text]*

34. *[Faint text]*

35. *[Faint text]*

36. *[Faint text]*

37. *[Faint text]*

38. *[Faint text]*

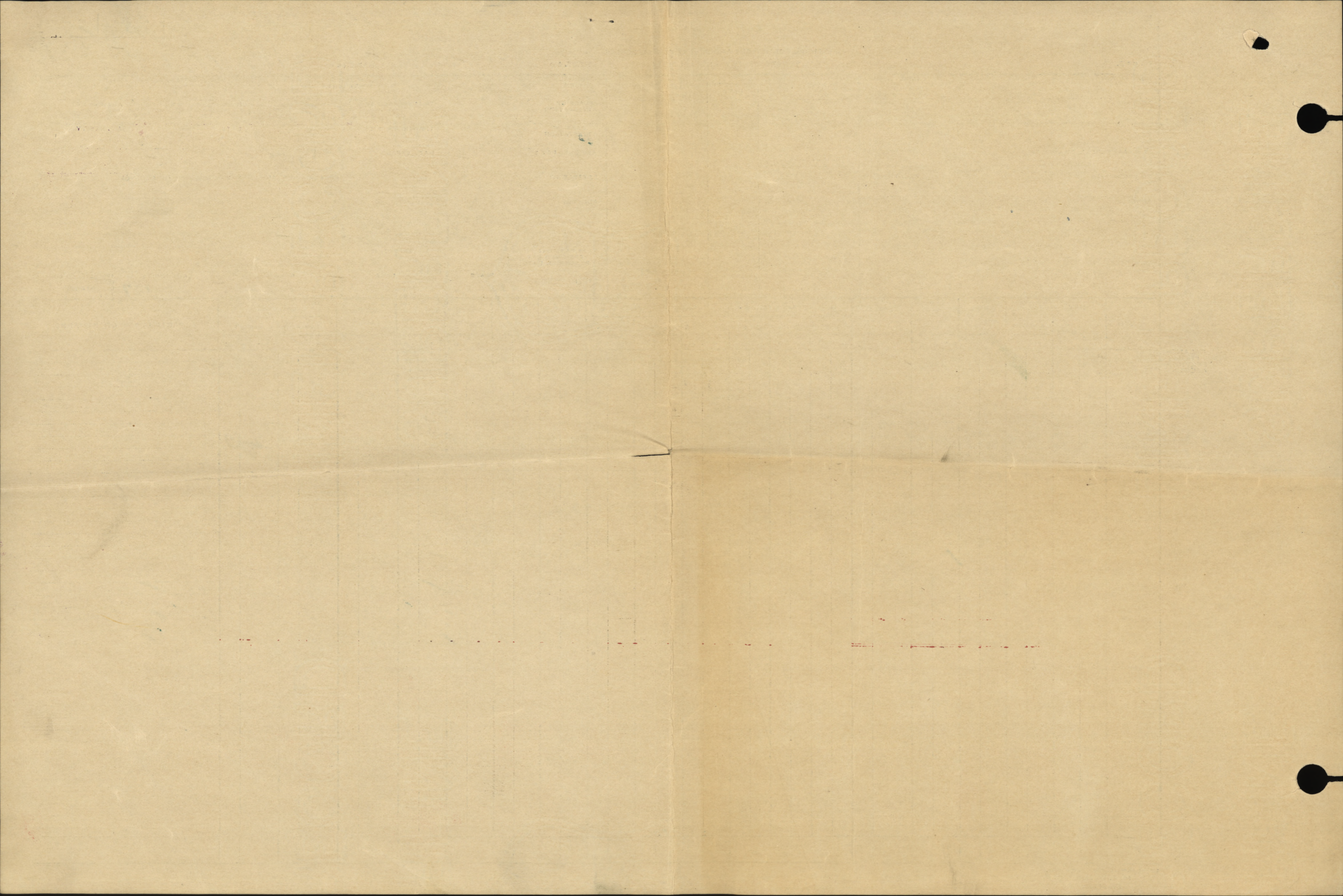
39. *[Faint text]*

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate.....	Militia Form W. 23
or Particulars of Recruit.....	Militia Form W. 133
Field Conduct Sheet.....	Militia Form W. 178 or A.F.B. 122
Casualty Form.....	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate.....	Militia Form W. 44
Certificate that missing documents are unobtainable.....	
Medical History Sheet.....	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board.....	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet.....	Militia Form B. 465
Medical Report.....	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet.....	Militia Form B. 263
Company Conduct Sheet.....	Militia Form B. 263a

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133). ✓
2. Casualty Form (A.F.B. 103). ✓
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178). ✓
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129). ✓
5. Dental Certificate (C.A.D.C. 5009a). ✓
6. Field Conduct Sheet (A.F.B. 122). ✓
7. Proceedings on Discharge (M.F.B. 218a). ✓
8. Discharge Certificate (M.F.W. 39) (Enclosed in special envelope (260M)). ✓
9. Copy of Discharge Certificate (M.F.W. 39a). ✓
10. Dispersal Certificate (C.D. 3). ✓
11. Equipment and Clothing Statement Q.M.G. Form (D.O.S. 2). ✓
12. Last Pay Certificate (P. 851). ✓
13. Pay Book (A.B. 64). ✓
14. War Service Gratuity (Form M.F.W. 2595). ✓
15. Sundry Documents. ✓

Group.....
 Checked by No. 27
 Date 25 APR 1919



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. 157270 Rank Pte Surname LIPSETT
 (Given name in full)
 Unit or Corps 15 Res Birthplace Ireland

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

1. GENERAL DESCRIPTION :

Physique good Weight 155 lbs. Height 5 ft. 8 in. Colour of Eyes blue
 Nutrition good
 Pulse 66
 Condition of arteries normal
 Vision Rt. 6/6 Left 6/6
 Hearing (conversational voice) Rt. 21 ft.
 Left 21 ft.

Identification marks, scars, or deformities.
 (Give cause and date of origin).
scar 1/2" on inner upper part of lower left leg.
One vaccination mark on left arm.

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.

no

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Perth.....(Overseas)
Date Mar 24/19..... Signed [Signature].....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 [Signature].....

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

THIS SECTION FOR USE IN CANADA—

Examined at(Canada)
Date Signed M.O.

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

Signature

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

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

W.S.B. Class A

A.

W.S.B. Class "A"

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

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

350M.—5-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps *3rd Dbl- 1st Depot Bn Trok Reg*

Regimental No. *257270* Rank *Pte* Name *Lipsitt Thomas Edward*

Enlisted (a) *15/1/18* Terms of Service (a) *C.E.F.* Service reckons from (a) *15/1/18*

Date of promotion to present rank *✓* Date of appointment to lance rank *✓* Numerical position on roll of N. C. Os *1st Clerk*

Extended *✓* Re-engaged *✓* Qualification (b) *Military nil*

DURATION OF WAR

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
--------	---	-------	------	---

CERTIFIED CORRECT
 APR 29 1918
 AUG 20 1918

	<i>Embarked</i>	<i>Canada</i>	<i>24-3-18</i>	<i>AMT</i>
	<i>Arrived</i>	<i>England</i>	<i>3-4-18</i>	<i>"Messanabie"</i>
<i>APR 29 1918</i>	<i>Taken on the Strength of the 15th Can</i>	<i>BRAMSHOTT.</i>	<i>4 APR 1918</i>	<i>PART II. DAILY ORDERS No. 99</i>
<i>AUG 20 1918</i>	<i>O.C. 15th RES. BN. PROCEEDED OVERSEAS FOR SERVICE WITH 5th BATTALION, C.E.F.</i>	<i>BRAMSHOTT.</i>	<i>AUG 19 1918</i>	<i>PART II. DAILY ORDERS No. 232</i> <i>J. J. Willis Lt. Adjutant</i> <i>15th RESERVE BATTALION.</i>
<i>G. B. D.</i>	<i>ARRIVED G. B. D.</i>	<i>FRANCE</i>	<i>20. 8. 18</i>	<i>N. R. D.</i>
<i>G. B. D.</i>	<i>LEFT G. B. D. FOR</i>	<i>CERC</i>	<i>23 1918</i>	<i>PART II. ORDERS No. 107 D</i>
<i>ARRIVED</i>	<i>CERC</i>	<i>FIELD</i>	<i>23 1918</i>	<i>N. R. D. 1354</i>
<i>SEP 2 1918</i>	<i>CERC LEFT FOR UNIT</i>	<i>700</i>	<i>SEP 2 1918</i>	<i>NR 1314</i>
<i>18</i>	<i>5th CAN BN. JOINED UNIT</i>		<i>8 SEP 1918</i>	<i>B 213. D.C.S. d/-</i>

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. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties. (P.T.O.)

Casualty Form - Active Service

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				
2.10.18	22 Gen	Gen. R Knee.	Adm	2.10.18	K5700
4.10.18	22 Gen	u R Kelly To England As A/S Newhaven Posted To Saskatchewan Regtl. Depot. Bramshott.	Bshott.	4.10.18	W3083 6146 Pro 125
10.10.18	SPK	105 from 5th Bn	Bshott.	4.10.18	Pt 0262 h & Landy FOR LT: COL: I/C RECORDS, C.O.M.F.
7-2-19	200D	attd 200D	Ripon	3-2-19	DJ 30
18/1/19	OC. 2nd CCD	Ceases to be attached to 2nd C. G. D. on return to Res. Bn.	RIPON.	14-3-19	Pt. 2 D. O. No. 61 C. R. Rankh for OC. 2nd CCD.
5 MAR 1919	O.C. 16th RES. BN.	TAKEN ON STRENGTH FROM from 2nd C. C. D. S. R. Depot	RIPON.	14-3-19	PART II. DAILY ORDERS No. 74
3 APR 1919	O.C. 16th RES. BN.	STRUCK OFF STRENGTH TO Wing Kessel Oak	RIPON.	3-4-19	PART II. DAILY ORDERS No. 83 A. Mitchell Adjutant 15th RESERVE BATTALION.

SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103—I.
Part I.

(1)*Substantive rank *Acting rank *[To be entered in pencil to facilitate alteration.] (4) Surname (5) Christian Names (6) Army Form, number of, Attestation } Form or Record of Service paper } (7) Whether of British or of Alien origin [vide A.C.I. 578 of 1918] (8) Date of birth as stated on enlistment (9) (a)	(2) Regiment or Corps	(3) Regtl. No.
--	-----------------------	----------------

(10) Enlistment (b)	(11) Engagement (c)
(12) Service reckons from (date)	(13) Special conditions (if any) of enlistment (d)
(14) Any subsequent variations (if any) } of conditions of service }	

(Authority)

(date)

Initials and Rank of
an Officer.

(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) (Record of Occupation in Civil life (vide Army Order 93 of 1917)
				Industrial Group No. Trade or Calling Married or Single Particulars of Trade Test Occupation Cards despatched on (date) Second Occupation Card despatched on (date)

(17) Next of Kin	(18) Demobilizer (f)	
		(Place)
(19) Pivotal-man (f)		(Date)
(20) Qualifications (g)	or (21) Corps trade and rate	

(Signature of
Posting Officer)

(22) Extended }	(23) Re-engaged }
-----------------	-------------------

(24) Miscellaneous entries:—

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [vide A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoeling-smith, &c.

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W1889—PP1150 IM 5/18 G.W.P.Co.(3490)

257270 Pte Lippett T.E.

(A) Report		(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I, 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
Date.	From whom received					

3/4/19

War Service Badge
Class "A" No.

TAKEN ON STRENGTH Part 11 Ord No: 80

EMBARKED FOR CANADA 20 APR 1919

A. D. Lippett
Lieut.

i/c Records, M.D. 12.
Kinmel Park Camp,

EMBARKED S.S. "CASSANDRA"
MAY 2 1919

DISEMBARKED

J. G. F. Allen
Capt + adjt
for O.C. 23 P.C.

REGINA DISPERSAL AREA "O"
T.O.S. R.O. 1420 (D.D.O. 137 Para. 832)
S.O.S. R.O. 1420 (D.D.O. 137 Para. 833)

MEDICALLY UNFIT,
DEMOBILIZATION.

J. S. Balfour
LIEUT.

Nothing to be written in this margin.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 257270 (Rank) Pte.
Name (in full) Lipsett Thomas Edward enlisted in
the 1st S.D. Bn.
CANADIAN EXPEDITIONARY FORCE at Regina on the 15th
day of Jan 19 18
HE served in France
and is now discharged from the service by reason of Demobilization.
Medical Unfitness.

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

Age 26 5/2 yrs.

Marks or Scars Vacc. L. 1

Height 5ft 8 1/2"

Scar. inner upper part of
Lower L. leg.

Complexion Fair

Eyes Blue

Hair Light Brown

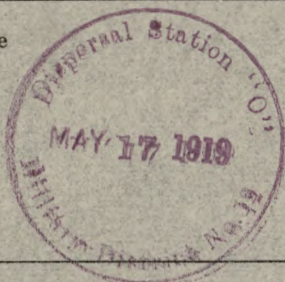
T. E. Lipsett

Signature of Soldier

[Signature]

Issuing Officer

Date of Discharge



MAJOR

Rank

Date April 9th 19 19

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.

23974 A. No.

War Service Badge, Class
issued

B. No.

CANADIAN EXPEDITIONARY FORCE

THIS IS TO CERTIFY that No. _____

Name (in full) _____

enlisted in _____

CANADIAN EXPEDITIONARY FORCE at _____

of the _____

in _____

He served in _____

and is now discharged from the service by reason of _____

Medical condition _____

THE DESCRIPTION OF THIS SERVICE ON THE DATE below is as follows:—

Rank or Rate _____

Age _____

Height _____

Complexion _____

Eyes _____

Hair _____

Signature of Soldier _____

Sending Officer _____

Date of Discharge _____

Rank _____

19 _____

In any case of this certificate will be given only on one finding and is requested to forward it in an
enclosed envelope to the Director, Military Council, Ottawa, Canada.