

671

ORIGINAL

ATTESTATION PAPER.

No. 904568

1914 C.B.A. 6.7.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname? *Morrison*
- 1a. What are your Christian names? *Donald*
- 1b. What is your present address? *Rockester Alta*
- 2. In what Town, Township or Parish, and in what Country were you born? *Stornoway Lewis Scotland*
- 3. What is the name of your next-of kin? *Malcolm Morrison Abb.*
- 4. What is the address of your next-of-kin? *45 South Bragter DRAGAR.*
- 4a. What is the relationship of your next-of-kin? *Father*
- 5. What is the date of your birth? *11 Oct 1892*
- 6. What is your Trade or Calling? *Farmer*
- 7. Are you married? *no*
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated? *yes*
- 9. Do you now belong to the Active Militia? *no*
- 10. Have you ever served in any Military Force? *no*  
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement? *yes*
- 12. Are you willing to be attested to serve in the } *yes*  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Donald Morrison*, 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.

9 MAR 1916

Date.....191 . *Donald Morrison* (Signature of Recruit)  
*H. Kidney* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Donald Morrison*, 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.

9 MAR 1916

Date.....191 . *Donald Morrison* (Signature of Recruit)  
*H. Kidney* (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 *Edmonton* this *9* day of *March* 191 .  
*H. Kidney* (Signature of Justice)

1916

Description of P. Morrison on Enlistment.

Apparent Age... 23 years ..... months.

(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

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

Chest measurement. { Girth when fully expanded..... 36 1/2 ins.  
 Range of expansion..... 2 ins.

Complexion..... med

Eyes..... hazel

Hair..... brown

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date..... March 9 1916.

Place..... Edmonton

[Signature]  
 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.

P. Morrison.....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.

Date..... 9 March 1916

[Signature]  
 (Signature of Officer)

REGIMENTAL DOCUMENTS

904568

NAME

*Morrison Donald*  
*Morrison Anna Estella*

REGT. NO.

*718*

UNIT

*ca-m-c*

M. F. W. 2505  
REFERENCE

33966

H., Q. FILE NO.



CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

NON-EFFECTIVE BY

DEATH

Category

DISCHARGE

Category

DESERTION

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.B.W. 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)

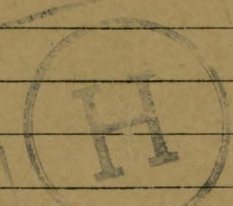
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

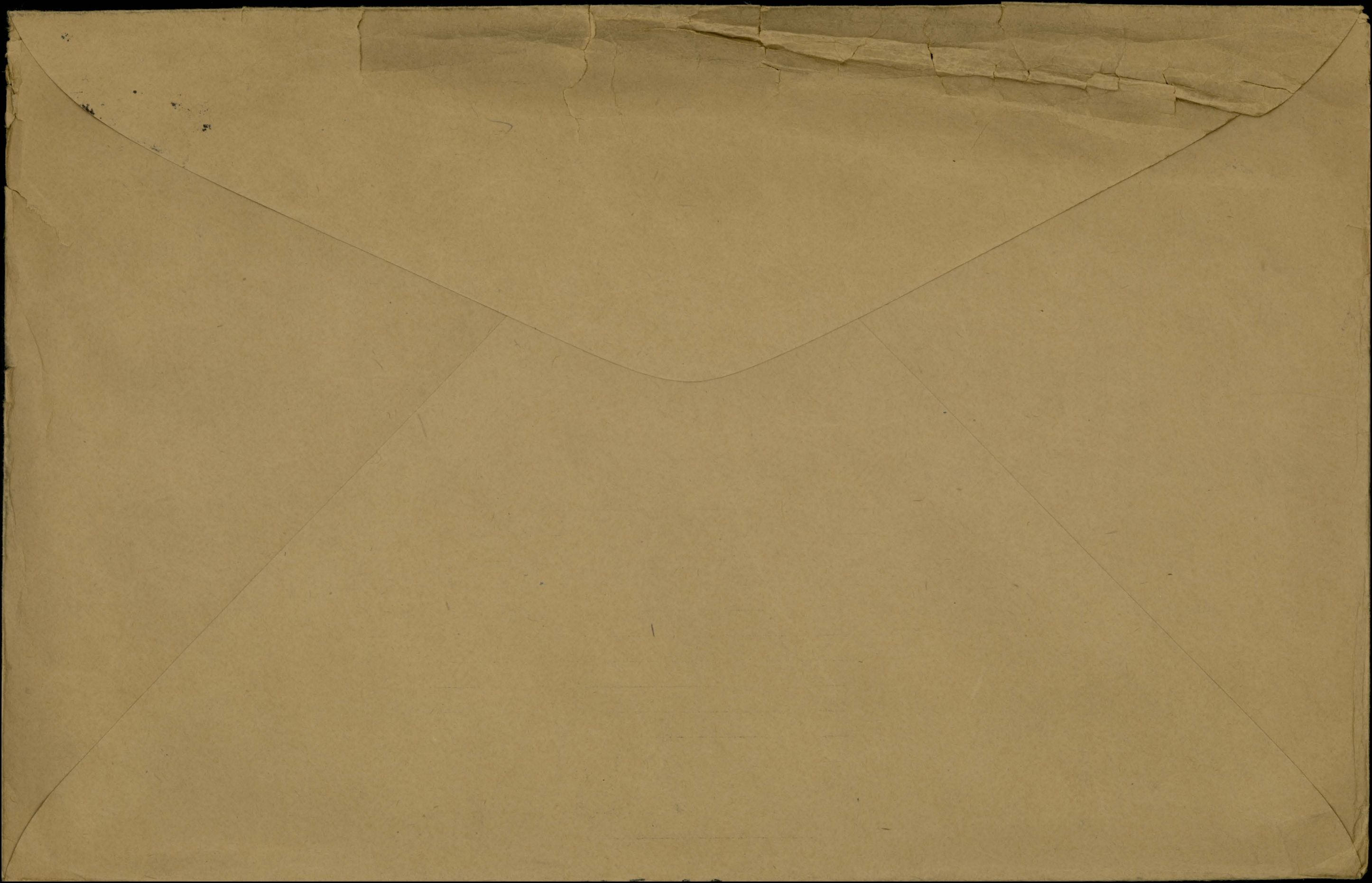
*79*

*II of W*

*60 23*  
*15 - 23*  
*14 - 23*

*1 card*  
*12 year*  
*1 year*  
*1 year*  
*1 year*





*mlb*

*P*  
*X*

Number.....*904568*.....Rank.....*Pte*.....

Surname.....*MORRISON*.....

Christian Name.....*Donald*.....

Units.....*49th Bn Coy*.....Theatre of War.....*France*.....

Date of Service.....*28.12.16*.....

Remarks.....*Father*.....

Latest Address.....*Mr. Malcolm Morrison*  
*45. South Bragar*.....

Roll No.....*B. Page 7358. Lewis Scotland*.....

NO

RANK

NAME

T. O. S.

UNIT

M. D.

PAID  
FROM

PAID  
TO

SIG.  
OR  
REC'T

DESP. OCT 20 1921

REGN. No. 9043211

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS

AUTHORITY

REGT'L. No. 904568

NAME Morrison, Donald

H. Q. FILE No. 649

RANK AND CORPS Otc

49th Bn (form 194th Bn)

FOLLOWS  
No. 194th Bn  
FOLLOWS

CABLE

NATURE OF CASUALTY

NO.

DATE

S.

NO.	DATE	NATURE OF CASUALTY
<u>M4307</u>	<u>13-5-17</u>	<u>Died of wounds April 30, 1917</u>
<u>a 2-B</u>	<u>2090a</u>	<u>Died of wounds 30-4-17</u>
<u>Rouen</u>	<u>8-8-17</u>	<u>8th gld Amb. (Car) Recd 10-8-17</u>

LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

A-410 Killed in action 30-4-19 Not- Stated.  
Place of death has now been reptd. as, No. 8.  
Can. Feld. Amb, as per G.L. a-433.



SURNAME.

Morrison, (649-M-14385)

CARD NO.

D<sup>v</sup>

CHRISTIAN NAMES

Donald.

FOLL.

REGL. No.

904568

RANK

Pte.

UNIT

194<sup>th</sup>

Bn.

FORMER CORPS

Nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Morrison, Malcolm.

RELATIONSHIP TO SOLDIER

father.

ADDRESS

45 South Bragar, Stornoway, Scot.

COUNTRY OF BIRTH

Scotland, Stornoway

DATE

Oct. 11<sup>th</sup> 1892

PLACE OF ATTESTATION

Edmonton, Alta.

DATE

Mar. 9<sup>th</sup> 1916.

From Halifax per F. F. "Olympic" 14/11/16

MARRIED

SINGLE

Yes.

WIDOWER

TRADE OR CALLING

Farmer.

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

23

YEARS

MONTHS

HEIGHT

5

FEET

5

INCHES

CHEST MEASUREMENT

36½

INCHES

EXPANSION

2

INCHES

COMPLEXION

Medium

EYES

Hazel

HAIR

Brown.

DISTINGUISHING MARKS

Nil.

MEDICAL EXAMINATION.

PLACE

Edmonton, Alta.

DATE

Mar. 9<sup>th</sup> 1916.

Present address. Rochester, Alta.

649-M-14385,

Morrison, D. Pte. # 904568-49th. Bn.

Medals & Dec.

(Father)

Mr. Malcolm Morrison,  
45 South Bragar,  
Lewis, Scotland. 49

*Not elig for 14-15 star*

P. & S.

(Father)

See above,

*Dec # 804174*  
Mem. Cross.

(Mother)

Mrs. Annie Morrison,  
45 South Bragar,  
Lewis, Scotland.

APR 26 1921

Scroll Desp.

Reqn. No. 2-39150

JUN 7 1922

Plaque Desp.

Reqn. No. 239483

*H.H.*

*Desp.* AUG 14 1920 (M) C 18 4 96

*A*

*M*

~~MURPHY, John, Pte. #1740 PDOLI~~

539

~~Sheet 3495.~~

No 904568

RANK *Otc*NAME *Morrison Ronald*T.O.S. 9-3-16  
(W.O. 28 of 9-3-16)UNIT *194th Battalion*M. D. *13*

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
<i>1916</i> Mar 9	<i>1916</i> Mar 31	✓		
	<i>Apr.</i>	c		
	<i>May</i>	c		
	<i>June</i>	c		
	<i>July</i>	c		
	<i>Aug</i>	c		
	<i>Sept.</i>	c		
	<i>Nov.</i>	c		









Surname

Christian Name or Names

Reg. No.

Rank **Morrison**

Unit

**B. (2.)**

Co.

Troop **904568**  
Batty.

**Pte**  
Hospital

$\frac{77}{88}$

**49th Bn**

Date of Admission

*No. 8. Can. Fld. Amb.*

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1)  
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

**Died of Wds. 30-4-17** D

DISPOSITION

Date

**C.L.14-5-17 A410**

REMARKS

*14.6.17. A433*

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

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

MEDICAL HISTORY SHEET.

Surname Norrison Christian Name Donald

Examined { on 9th day of Mar 1916. Approved by W. W. Donald  
 at Edmonton

Birthplace { City or Town Norway Lewis Rank Captain M.O.  
 County Scotland

Apparent age 23

Trade or occupation Farmer M.O.

Height 5 Feet 5 Inches. M.O.

Weight 133 Lbs. M.O.

Chest measurement { Minimum 34 1/2 inches. M.O.

{ Maximum expansion 2 inches. M.O.

Physical development medium M.O.

Small-Pox Marks \_\_\_\_\_ M.O.

Vaccination Marks { A r m Right Left  
 Number two

When Vaccinated last 1898 M.O.

(a) Marks indicating congenital peculiarities or \_\_\_\_\_ M.O.

previous disease \_\_\_\_\_ M.O.

(b) Slight defects but not sufficient to cause rejection \_\_\_\_\_ M.O.

Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
Date.	Result.	VACCINATIONS.
<u>May 23/16</u>	<u>Reaction</u>	<u>W. W. Donald</u> M.O.
		M.O.
		M.O.
Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>Mar 25/16</u>	<u>Reaction</u>	<u>W. W. Donald</u> M.O. <small>Para 54/4 2.10.16</small>
<u>Apr 5/16</u>	<u>Reaction</u>	<u>W. W. Donald</u> M.O. <small>9.10.16</small>
<u>May 1/16</u>	<u>Reaction</u>	<u>W. W. Donald</u> M.O. <small>16.10.16</small>

Enlisted on 9th day of March 1916 at Edmonton.

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>194th Batt</u>	<u>904568</u>		<u>9th March 1916</u>
Transferred to	<u>Hq. O.B. C. Co.</u>	<u>904568</u>		<u>28.12.16</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

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



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

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

# Casualty Form—Active Service.

250M.—1-16.

H. Q. 1772-39-920.

Unit, Regiment or Corps 194 Overseas Highland Bn C.I. S.

Regimental No. 904568 Rank Pte Name Morrison Donald

Enlisted (a) 4.3.16 Terms of Service (a) C.E.F. Service reckons from (a) 9/3/16

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) Farmer

CERTIFIED CORRECT.

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.
		Embarked Disembarked	Canada England	14.11.16 20.11.16	
28.12.16	P.O. Morrison	Trans. to 49th Cdn. C.E.F.	Shouham	28.12.16	1st. 49th Cdn. C.E.F.
		<b>O.C.C.B.D.</b> Landed in France. Taken on strength 49th Cdn. Bn. 29-12-16			Nom. Roll d/ 29-12-16
		— do. — Left for 3rd Canadian Bn. 25-1-17			D.O. 3d/8-1-17
18.2.17	3rd. Can. Bn.	Arrived	do	29-1-17	" "d/ 29-1-17
24-2-17	Ob. 49th	Joint unit	do	18-2-17	B213
30-4-17	O.C. 8th. C.F.A.	DIED OF WOUNDS RECEIVED IN ACTION (GSW.(mult) Chest, abdomen and both legs)		30-4-17	KI.16/4821. Pt.11.Ord.No. 53 d/8-5-17.

*Donald Morrison*

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

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.  
(b) 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				

A.G.R. Rank Name MORRISON, Donald Reg'l No. 904568  
 Unit 194th Bn. If in perm. Corps, What Unit? Married or Single Single.  
 Place and Date of Enlistment Edmonton, 9th March, 1916. Place of Birth Stornoway, Lewis, Scotland.  
 Name and Address, Next-of-Kin Malcolm Morrison, 45 South Bragar, Stornoway, Lewis, Scotland Relationship Father.

Assigned Pay Monthly \$ Payable to

Separation Allowance \$ Payable to

Relationship

Relationship

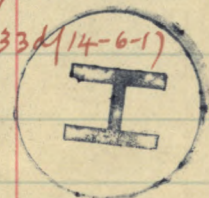
N/E. R.B. No. 2796  
 File R.L. 257m 4826  
 Category D.W.

2/6/17

Discharge, Date and Place Reason Character



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.				
	<i>C</i>				A.F.B. 122 CHECKED 2 JAN. 1917 <i>H.</i>
	Arrived in	England S, S, OLYMPIC		21-11-16	
28-12-16	194th Bn	SOS to 49th Bn	Shoreham	28.12.16	DO297 279
8-1-17	49th Bn	Taken on strength.	Lield	29-12-16	PLT O 3.
8-5-17	"	Died of Wounds	"	30-1-17	PLT O # 53, T.G.L.A. 410.
		Place of Death: No. 9 ban. fld Amb.			C.L.A. 433 (14-6-17)







PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN

45 South Bregat - Stornaway - Scotland -

RELATIONSHIP OF NEXT OF KIN

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

Table with columns: PARTICULARS, EFFECTIVE DATE, AUTHORITY. Entry: Died of Wounds, 30/4/17, G.L.B.410 14/5/17

ADMISSIONS TO HOSPITAL, &c.

Table with columns: DATE ADMITTED, DATE DISCHARGED, V. OR A., NAME OF HOSPITAL. Entry: 62, H.W.M. W.A.D.

REG'L. No. 904568

RANK Ptz.

NAME Morrison - Donald

IF IN PERM. CORPS WHAT UNIT

UNIT 194th O. Bn

TRANSFERRED TO

49th Bn

DATE 16/1/17

AUTHORITY G.L.B. 210 14/5/17

PERMANENT FORCE ALLOWANCES

6 JUL 1917

TRANSFERRED TO

Trans. F.F.

DATE 1/5/17

AUTHORITY G.L.B. 110 14/5/17

PLACE OF ATTESTATION

Edmonton - Alberta

TRANSFERRED TO

non-effective

DATE 1/5/17

AUTHORITY do.

DATE OF ATTESTATION

9 March 1916

TRANSFERRED TO

DATE

AUTHORITY

ASSIGNED PAY MONTHLY \$

DATE EFFECTIVE

PAYABLE TO

RELATIONSHIP

ASSIGNED PAY MONTHLY \$

DATE EFFECTIVE

PAYABLE TO

RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE)

EFFECTIVE

REASON

DISCHARGE DATE AND PLACE

REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

Entered on N.E. Card Index checked by [Signature]



COMPILED BY... CHECKED BY...

Main ledger table with columns: DATE, PAY, FIELD ALLOWANCE, WORKING OR SPECIAL PAY, ASSIGNED PAY CREDITS, OTHER CREDITS, TOTAL CREDITS, ACQUITTANCE ROLLS, CASH PAYMENTS, BALANCE, PAY WITHHELD OR DEFERRED, PAY AVAILABLE FOR ISSUE, REMARKS.

Statement of AUG 28 1917 Account rendered

No A.P. HQ 593-1-12 D 29/5/17

ledgw sheet shows no A.P. [Signature] AUDIT CLERK DATE 30/5/19



m.x  
6-5-w  
Ab.

W. P. M.  
G. H. M.