

ATTESTATION PAPER.
Canadian Engineers
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? **71 Greenfield Ave, Ardmore Pa. USA**
- 2. In what Town, Township or Parish, and in what Country were you born? **Pollekshaws Scotland**
- 3. What is the name of your next-of-kin? **Alexander Morrison**
- 4. What is the address of your next-of-kin? **35 Cowglen Rd Pollekshaws Scotland**
- 4a. What is the relationship of your next-of-kin? **Father**
- 5. What is the date of your birth? **January 29th 1893**
- 6. What is your Trade or Calling? **Carpenter**
- 7. Are you married? **Single**
- 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? **Yes**
If so, state particulars of former Service. **naval or P.M.**
- 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? }
- 13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? **No**
- 14. If so, what was the nature of the disability? ..
- 15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected? **No**
- 16. If so, what was the reason? ..

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.

Date **April 22nd 1918** 191

Donald Morrison (Signature of Recruit)
R. H. Evans (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.

Date **April 22nd 1918** 191

Donald Morrison (Signature of Recruit)
R. H. Evans (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 **Toronto Ont Can** this **22nd** day of **April 1918** 191

[Signature] (Signature of Justice)

Description of Donald Morrison on Enlistment.

Apparent Age.....25 years.....3 months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height.....5 ft. 7 1/2 ins.

Chest measure -
 Girth when fully expanded.....38 1/2 ins.
 Range of expansion.....2 1/2 ins.

Complexion.....Med

Eyes.....Brown

Hair.....Brown

Religious denominations.
 Church of England.....Yes
 Presbyterian.....Presbyterian
 Methodist.....Yes
 Baptist or Congregationalist.....Yes
 Roman Catholic.....No
 Jewish.....No
 Other denominations.....No
 (Denomination to be stated.)

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).

Scar Back L hand

Both eyes D 20 Hear OK

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.....April 22nd 1918.....191

Place.....Toronto Ont Canada

*Insert here "fit" or "unfit." / Passed By R Sheard M.O. Phila Pa Medical Officer. **PRESIDENT**

**DECLARED FIT BY MEDICAL BOARD
 TORONTO MOBILIZATION CENTRE**

R Sheard **M.O.**

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.

Donald 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.

.....*R Sheard*.....**Captain**.....(Signature of Officer)

Date.....April 22nd.....191

MORRISON DONALD

2008649

5 C.E.

33964

DEMOB.



C.E.F. REGIMENTAL DOCUMENTS
WAR SERVICE RECORDS D.V.A.

STATIONER & PRINTER
100 N. 3rd St. St. Paul, Minn.

H. Q. Reference

No. 2008649.

Rank

SPR.

Unit

5th BAT. C.E.

Surname

MORRISON

Christian names

DONALD

Kindly forward Medals, to which I am entitled by reason of my
service in.....

FRANCE AND BELGIUM

(Theatre of War)

with.....

CANADIAN ENGINEERS.

(Unit with which served in Theatre of War)

No.

24.

Street

CRICKET AVE.

Town

ARMORE.

County

PENNA.

NOV 17 1918

Donald Morrison

(Signature)

(WRITE IN BLOCK LETTERS AND IN INK)

B. 7318

O. H. M. S.



POSTAGE
FREE



SECRETARY, MILITIA COUNCIL,

DIRECTOR OF RECORDS,

OTTAWA, ONT.

Surname.....

Morrison,

Christian names.....

Donald

Regtl. No.

2008649

Rank.....

Spr.

Unit.....

Eng. In. Dpt

H. Q.....

M. D. No.

2 Area's

T. O. S.....

19.....

D. O. Pt. II.....

of.....

S. O. S.....

Dis. 19-5-1919

Reason.....

Demob.

Auth.

*Do. 146-26-5-19
#200*

Next of kin.....

Relationship.....

Address.....

Also notify:.....

BORN—Place.....

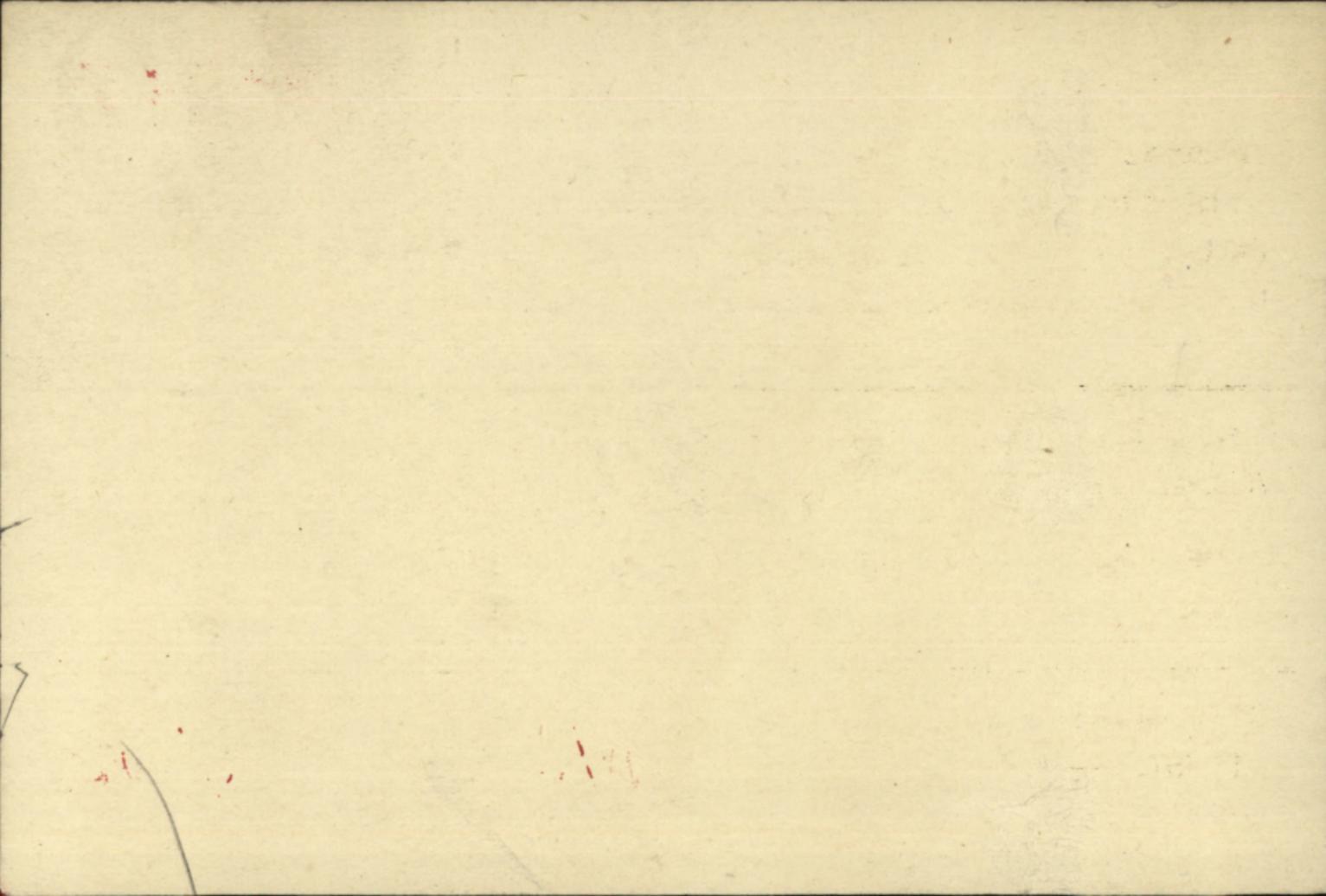
Date.....

ATTESTED—Place.....

Date.....

O/S.....

*R/C R/C 16-5-19 324
174
Spr*



mlb

~~B~~

Number.....*2008649*.....Rank.....*Spr*.....

Surname.....*MERRISON*.....

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

Units.....*62*.....Theatre of War.....*France*.....

Date of Service.....*17-9-18*.....

Remarks.....

Latest Address.....*71 Greenfield Ave.*.....

.....*Ashtown Pa.*.....

Roll No. *"B" Page 7318.* *Y.S.A.*

P

NO.

RANK

NAME

T. O. S.

UNIT

M. D.

PAID FROM

PAID TO

SIG. OR RECD

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.
PARTICULARS
AUTHORITY

NOV 30 1921
 DESP
 REGN. NO. 74914

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge
Class "A" No.

THIS IS TO CERTIFY that No. 2008649 (Rank) Sapper.
Name (in full) Donald Morrison enlisted in
the Canadian Engineers
CANADIAN EXPEDITIONARY FORCE at Toronto on the 22nd
day of April 1918.
HE served in 5th Batta. Can. Engrs France.
Demobilization.
and is now discharged from the service by reason of Medical Unfitness

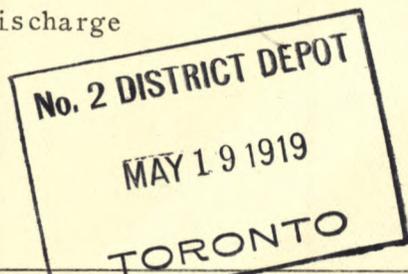
THE DESCRIPTION OF THIS SOLDIER on the Date below is as follows:

Age 26
Height 5ft. 7 1/4 ins.
Complexion Medium
Eyes Brown
Hair Brown

Marks or Scars Scar back of left wrist

DM Morrison
Signature of Soldier.

Date of Discharge



W. A. Park
Issuing Officer.

For
O.C. No. 2 District Depot
Rank

Date MAY 19 1919 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.

[Faint, illegible handwriting]

[Faint, illegible handwriting]

[Faint, illegible handwriting]

MAY 1915

1012 DISTRICT DETAIL
MAY 1915
TORONTO

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

War Service Badge
Class "A" No. _____

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. 2008644 Rank Spr. Surname MORRISON
(Given name in full)

Unit or Corps 5th Bn. Can Engrs Birthplace Donald
Pollockshaws, Glasgow Scot

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

I. GENERAL DESCRIPTION:

Physique good Weight 15'8 lbs. Height 5 ft. 1 in. Colour of Eyes Br.
Nutrition good
Pulse 72 up
Condition of arteries left
Vision Rt. 6/12+ Left 6/12+
Hearing (conversational voice) Rt. 21 ft.
Left 21 ft.

Identification marks, scars, or deformities.
(Give cause and date of origin).
scar back of lt wrist pre-war

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.

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Witley.....(Overseas)

Date 17.4.19..... Signed W. Rogers Left.....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 D Morrison.....

(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.)

264

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

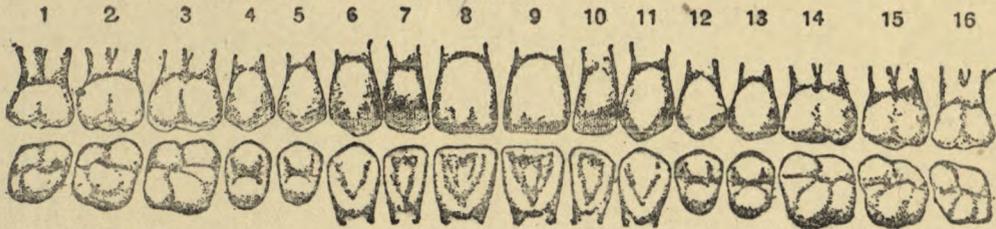
Canadian Printing and Stationery Services, London

G 19

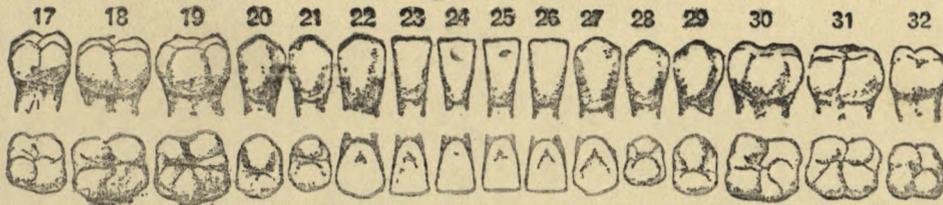
DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block Letters) MORRISON Donald
 REGIMENT 5th Bn. Can. Eng. RANK Spr. No. 2008649
 Date of Examination in England 16/7/19 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



War Service Badge
 Class "A" No.



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 5.

2. EXTRACTIONS

3. CROWNS

4. DENTURES

- (a) Full Upper
- (b) Part Upper
- (c) Full Lower
- (d) Part Lower

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
- (b) In England
- (c) In France

Signature of Dental Officer W. S. Shepherd Capt.



Faint, illegible text in the upper left corner, possibly bleed-through from the reverse side of the page.

Text in the bottom left corner, possibly a signature or date, written in cursive.

INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.

On first line of report record of same to be made in red ink.

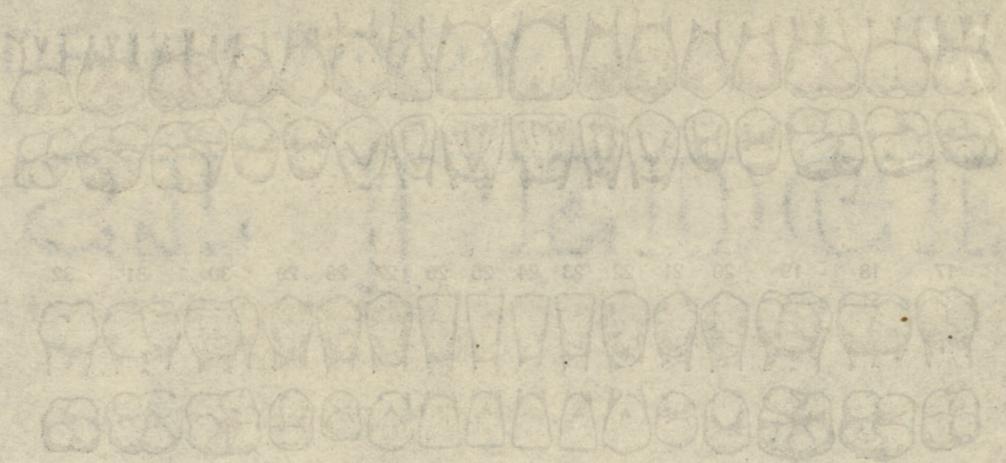
On subsequent reports all on the right as will show.

2. Condition on examination in red.

3. Condition on teeth in red.

4. Condition on dentures.

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16



17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32

64

100

1000

10000

САНДИВА УМІА ДЕНТАЛ КОЛЕДЖ ДЕНТАЛ

САНДИВА УМІА ДЕНТАЛ КОЛЕДЖ



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

M. F. W. 54.
150M. 10-15.
H.Q. 1772-30-920.

Casualty Form—Active Service.

Unit, Regiment or Corps ENGINEERS DEPOT BROOKVILLE, ONT.

Regimental No. 2008649 Rank Pte Name Marrison Donald

Enlisted (a) 22-4-18 Terms of Service (a) 5 & 7 years Service reckons from (a) 22-4-18

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) Military & Civil Engineering

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.
-------------	--------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------	------	------------------------------------------------------------------------------------

Transferred to
ENGINEER DEPOT BROOKVILLE, ONT.
May 1/18
referred Overseas 27-6-18, D.O. 62
27-6-18 EMBARKED MONTREAL
Adjutant: H. M. T. VALACIA.
Disembarked England 15/7/18
for Lieut-Colonel
Commanding 2nd Canadian Engineers Res. Bn.
from Canada Seaford 15/7/18 Part II Order 48
18-9-18 2nd CERB
3.D.S of 2nd C.E.R.B. to C.E. Pool. France.
Seaford 17-9-18 Part II Order No. 102.
A. Love
Lieut. C.E.
for Lieut-Colonel, C.E.
Commanding, 2nd Canadian Engineers Res. Bn.

CERTIFIED CORRECT.
 25 SEP 1918
 CAN. RECORDS, LONDON

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) e.g. Signaller, Shoeing Smith, etc., also special qualifications in technical Corps duties.

BT. Rank **MOFFISON, Donald** Name **MOFFISON, Donald** Reg'l No. **2008649**
 Unit **75th Dft Engineers** What Unit? **75th Dft Engineers** Married or Single **Single**
 Place and Date of Enlistment **Toronto 22nd April 1918** Place of Birth **Pollekshaws Scot**
 Name and Address, Next-of-Kin **Alexander Morrison** Relationship **Father**
35, Cowglen Rd, Pollekshaws, Scotland.
 Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship
 Discharge, Date and Place Reason Character

15705
N/E. R.B. No.
File No.
Cat. **CAN. 04**

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.				
		Arrived in England		15-7-18	S/S VALACIA
17-7-18	2nd CERB T.O.S.	on Arrival from Canada	Seaford	15, 7 18	DC-48
18.9.18	—	S.O.S to C. E. R. Pool	Seaford. Spr.	17.9.18	Pool No. 102. / by 11.10.18.
17.10.18	5th Bn C.C. H wing	T.O.S from C.E.R.P.	Field	29.9.18	Pool No. 26. / by 12.10.18
22-4-19	C.C.	" " 5th C.C. P. to Am.	Witley	13.4.19	Pool No. 30
11-5-19	H-wing C.C.	A.W.L. from 4-5-19 to 5-5-19. forfeits 1 days pay P.A. Reg.	Witley	6-5-19	D.O. 41.
11.5.19	✓	S.O.S to Canada	✓	10.5.19	Pool No. 41

F. 103 CHECKED
24 SEP 1918

ASSIGNED PAY.

PAID IN CANADA.

To whom *Mrs Margaret Morrison,*
 Address *35 Cowglen Road,*
Pollokshaw, Glasgow, Scot.

By whom assigned *Morrison, D.*Regtl. No. *2008649*Rank *Snr.*Corps, &c. *Engr. Dep. M. D. 3*ASSIGNED SEPARATION
PAY ALLOWANCERate *\$ 15*Date to Commence *1 June 1918*

Month.	Cheque No.	ASSIGNED SEPARATION		REMARKS.
		PAY Amt.	ALLOWANCE Amt. Debited.	
1917 Oct.				
Nov.				
Dec.				
1918 Jan.				
Feb.				
March				
April				
May				
June				
July				
Aug. <i>Supn</i>	<i>672364</i>	<i>45</i>		<i>In England</i> <i>Debit note to Group K 2 13/9/18. For July range only.</i>
Sept.				
Oct.				
Nov.				
Dec.				
1919 Jan.				
Feb.				
March				

ASSIGNED PAY.

Month	Cheque No.	Amt.	Amt. Debited.	REMARKS.
1916.				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
1917.				
Jan.				
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
1918.				
Jan.				
Feb.				
March				
April				
May				
June				

* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.	NAME: MORRISON, Donald
EFFECTIVE DATE: JUL 1 '18		EFFECTIVE DATE: -		NUMBER: 2008649
AMOUNT: 15⁰⁰		AMOUNT: -		PARTICULARS OF RANK OR APPOINTMENT
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.		AUTHORITY
Mr Margaret Morrison (mother) 35 Gonsley Road, Collockshaws, Scotland. Stopped 1/6/19.		Do not issue. Check Sept and Oct Cheque to adjust. 17546. B. 11/23/19		2nd Lt R.B.I. 48
				DATE EFFECTIVE
				10/7/18
				SP
UNIT AND TRANSFERS				
ORIGINAL UNIT: 2nd Lt R.B.I. 48				
DATE ACCOUNT FIRST OPENED: JUL 1 '18				
				AUTHORITY
				DATE EFFECTIVE
				DATE LEDGER SHEET T'S P O
				UNIT TRANSFERRED TO
				21-6-19
				Can Sect

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
Jan 19		Issue on Repayment.	10 ⁰⁰	Jan 19	10	H. 666.	10 ⁰⁰
21.3.19	1303	Fields	5.65	25-5-19.		H. 666.	
7.4.19	164	"	3.65				
18.4.19	1084	H.C.C.	73.00				

Disch Canada 3/4/19. Auth H 7546 25/4/19 Bram to Bram MD2 Ledger Bal 83.46
L.P.C. C. Bal 3.06

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
JUN 30 '18	Balance from Canada								22 75		
July	S.P.	68 20		July & Aug. P. 661391.			30				
Aug				O.R. 1138 2nd CERB. 3-8-18	14 60						
				- 1608 26-8-18	14 57				41 48		
		68 20		Supp. Cheque July Aug. 6.72364.	19 47		30				
					19 47		30				
Sept	Pay.	33 -		1723. 2.C.E.R.B. 3/9/18.	34 07						
				10403. 6.G.B.A. 22/9/18.	14 46				59 ⁵		
		33 -			38 53		30 -				
Oct	Pay.	34 10		24289 cancelled.							
				307. 5 th C.E. 27/10/1918.	7 46				32 59		
		34 10			7 46						
Nov	Pra.	33 -		6.22 487. £3-1-8.			15 -				
				6.71886. £3-1-8			15 -				
Dec	Pra.	34 10		517. 5 th C.E. 25/11/18	7 46						
				654 " " 9/12/18.	9 33						
Jan	Pra.	34 10		O.R. 21279. £3-1-8.			15 -		72 00		
		101 20			16 79		45 -				
Feb	Pra.	30 80		711. 5 th C.E. 19/12/18	7 79						
				805. " " 6/1/19.	3 77						
				O.R. 60359. Feb £3-1-8			15 -				
				881. 5 th C.E. 21/1/19.	3 77						
				1540 4 th C.E. 12/2/19.	3 73						
				1118. 5 th C.E. 25/2/19.	3 73						
				G. 37273. March £3-1-8			15 -				
Mar	Pra.	34 10		1212. 5 th C.E. 11/3/19	3 65				80 46		
		64 90			26 44		30 -				
				over. 242894. Apr 23-1-8.			15 -				

COMPILED BY: *H. J. ...*
 CHECKED BY: *H. J. ...*

Occupational Group No. 19



SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)

War Service Badge
Class "A" No. 198615

1. No. 2008649	
2. Rank. Sapper	
3. Name. Donald Morrison	
4. Unit. 5th Batta. Can. Engrs.	
5. Date of Discharge	Place
MAY 19 1919	TORONTO, ONT.
6. Reason for Discharge..... Demobilization.	
7. Authority. No. 2, D.D., Part II, D.O. No. 146	
8. Proposed Residence after Discharge..... 71 Greenfield Ave., Ardenmore Pk. N. S. C.	
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.? x Donald Morrison Signature of Soldier.	
10. CONFIRMATION. The discharge of the above named man is hereby confirmed. Place..... Date..... No. 2 DISTRICT DEPOT MAY 19 1919 TORONTO Signature..... O.C. No. 2 District Depot. (O. C. Discharging Unit.)	



PROCEEDINGS ON DISCHARGE
(Part of Discharge)

1. No. *100000*

2. Rank *Sergeant*

3. Name *James M. ...*

4. Unit *1st ...*

5. Date of Discharge *MAY 1919* Place *TORONTO, ONT.*

6. Reason for Discharge *Discharged*

7. Proposed Residence after Discharge *71 ...*

CERTIFICATE TO BE SIGNED BY SOLDIER

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

M. F. W. I.

James M. ...

Signature of Soldier

CONFIRMATION

The discharge of the above named man is hereby confirmed

Place

Date



W. C. ...
O.O. No. 2 District Dept.

Signature

(O. C. Discharge Unit)

LIST OF DISCHARGE DOCUMENTS

Medical Report	Medical Form W. 100
Company Conduct Sheet	Medical Form H. 200
Regimental Conduct Sheet	Medical Form H. 200
Medical Report	M. R. W. 100 or D. W. 100
Personal History Sheet	Medical Form B. 400
Proceedings of Medical Board	M. R. B. 200, A. E. B. 100 or A. A. 40
Medical History Sheet	Medical Form B. 400 or A. E. B. 100
Company Conduct Sheet	Medical Form W. 100
Regimental Conduct Sheet	Medical Form W. 100
Medical Report	Medical Form W. 100 or A. E. B. 100
Personal History Sheet	Medical Form W. 100
Company Conduct Sheet	Medical Form W. 100
Regimental Conduct Sheet	Medical Form W. 100
Medical Report	Medical Form W. 100
Personal History Sheet	Medical Form W. 100
Company Conduct Sheet	Medical Form W. 100
Regimental Conduct Sheet	Medical Form W. 100

1. Triplicate Attention Paper (M. R. 100) or
 Attention Paper (M. R. 100)
 2. Company Report (M. R. 100)
 3. Attention Paper (M. R. 100) or A. E. B. 100
 4. Triplicate Attention Paper (M. R. 100) or
 Attention Paper (M. R. 100)
 5. Personal History Sheet (M. R. 100)
 6. Personal History Sheet (M. R. 100)
 7. Personal History Sheet (M. R. 100)
 8. Personal History Sheet (M. R. 100)
 9. Personal History Sheet (M. R. 100)
 10. Personal History Sheet (M. R. 100)
 11. Personal History Sheet (M. R. 100)
 12. Personal History Sheet (M. R. 100)
 13. Personal History Sheet (M. R. 100)
 14. Personal History Sheet (M. R. 100)
 15. Personal History Sheet (M. R. 100)

Group _____
 Checked by No. _____
 Date _____

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 (M.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 (30M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment Statement Q.M.G. Form (D.O.S. 2) and Clothing)
12. Last Pay Certificate (P. 851) + Dup.
13. Pay Book (P. 64).
14. War Service Community (Form M.F.W. 2595).
15. Sundry Documents.

Group.....

Checked by No.....

Date.....

[Handwritten signatures and date: 7-5-79]

"OLYMPIC" 16-3-19

DISPERSAL "I"

AUDITOR PAYMASTER

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

REGT. No. 2008649

RANK

SPR. NAME (IN FULL)

MORRISON, D. M 5815 19.

M. OR S.

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?	(BLOCK LETTERS SURNAME FIRST)
ADDRESS					P.C.	11 Greenfield Ave, Ardmore, PA U.S.A.	
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				PLACE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
nil							
TO WHOM PAID	RELATIONSHIP				DATE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
ADDRESS					22/4/18.		
					ASSIGNED PAY \$	DATE EFFECTIVE	
					15.00	31/5/19 Closed by Eng.	
					PAYABLE TO	RELATIONSHIP	ANY CHANGE IN ASSIGNEE OR ADDRESS
					Mrs Margaret Morrison Mother		
					ADDRESS		
					35 Corsglen Rd Palsokelaws Eng.		
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE	
					DISCHARGED	PLACE	DATE
					Toronto	✓	19-3-19 ✓
					REASON		
					Demob		
					AUTHORITY		
					Do 146		
					IF ENTITLED TO POST DISCHARGE PAY		es

MONTH	PAY AND F.A.		OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS	
	NO. OF DAYS	RATE			AMOUNT	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2					COL. NO. 3	DEBIT		CREDIT
30/4/19				3 06												3 06	Balance Engh P.C.	
25/5/19	25	1.10	27 50	25 00 70 00													P.C. 16/19 to 25/5/19. Clothing Allowance 1st payment W.S.G.	
								4 87 125 69	5 00								Boat & Travel Money O.K.	
				132 50												135 56		
																	AMOUNT DUE SOLDIER DEPENDENT	
																	W.S.G. as paid above P.C. over for 6 days	
122/15				280				May 19 th									1st W.S.G. paid by #2 D.O.	
								June 19 th	700	755	AR 65	63	40				76 60	
								July 12	713	818	AR 86	70					140 00	
								Aug 13	1018	400	AR 111	70					210	
																	280	
				280 00													280 00	

W.S.G. PAID IN FULL FOR PAYMASTER WAR-SERVICE GRATUITY CAPTAIN

1872

1872