

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your surname? *Morrison*
- 1a. What are your Christian names? *Duncan Robert*
- 1b. What is your present address? *86~~77~~ Kennedy St., St. John N.B.*
2. In what Town, Township or Parish, and in what Country were you born? *Queens Co. N.B.*
3. What is the name of your next-of-kin? *Mrs. Myrtle Morrison*
4. What is the address of your next-of-kin? *86~~77~~ Kennedy St., St. John N.B.*
- 4a. What is the relationship of your next-of-kin? *Wife*
5. What is the date of your birth? *24 May 1887*
6. What is your Trade or Calling? *Lumber Surveyor*
7. Are you married? *Yes*
8. Are you willing to be vaccinated or re-vaccinated and inoculated? *Yes*
9. Do you now belong to the Active Militia? *Yes*
10. Have you ever served in any Military Force? *7 mos. in Detaching Force; 3 weeks Signalling Class*
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, *Duncan Robert 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 *Dec 31* 191*5* *Duncan Morrison* (Signature of Recruit)
Alto Feltche (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Duncan Robert 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 *Jan 11th* 191*6* *Duncan R. Morrison* (Signature of Recruit)
Alto Feltche (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 *St. John N.B.* this *11* day of *January* 191*6*
Alto Feltche (Signature of Justice)
Capt. J.A.

Description of Morrison, Duncan Robert on Enlistment.

Apparent Age 28 years months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

Waist 33

Height 5 ft. 4 ins.

Chest measurement { Girth when fully expanded 37 1/4 ins.
 Range of expansion 3 ins.

Complexion Dark

Eyes Blue

Hair Dark Brown

Religious denominations { Church of England
 Presbyterian
 Methodist
 Baptist or Congregationalist Yes
 Roman Catholic
 Jewish
 Other Denominations
 (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.)

None

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 declares that he is not subject to fits of any description.

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

Date December 31 1916

Place St John, N.B.

Wm. Macmillan
 Capt.
 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.

Duncan R. 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.

W. G. Macmillan Lt. Col.
 G. C. 115TH OVERSEAS BATTALION; C.E.F. (Signature of Officer)

Date FEB 7 1916 1916

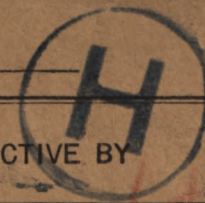
REGIMENTAL DOCUMENTS

NAME *Bdr. MORRISON DUNCAN ROBT.*

REGT. NO. *142455*

UNIT *115 Bn.*

H. Q. FILE NO.



S	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)					DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)		M			Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	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)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category <i>Demob</i>
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
2	MEDICAL EXAMINATION (M.F.W. 129)				34007	
	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)				DESERTION	
	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)		H			
3	<i>msc</i>					2
4	<i>pass card</i>					48 — 23
1	<i>app</i>					31 — 21
1	<i>CRB</i>					1 — 24
1	<i>IP149</i>					

742455

Morrison

Runcan Robert

I.D. number
No. d'identification

Surname
Nom de famille

Given names
Prénoms

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU
PERSONNEL

Location
Lieu 6403



742455- Rank *af Cpl*

Surname *MORRISON*

Christian Name *Duncan Robert*

Units *C. F. A.* Theatre of War *France*

Date of Service *21-8-17*

Remarks

Latest Address *Kennedy St*

St John
N. B.

Roll No. *"B" Page 7319.*

B
X

No.

RANK

NAME

OCT 11 1921

T. O. S.

UNIT

M. D.

PAID
FROM

PAID
TO

SIG.
OR
REC'T


460342 - fresh

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS

AUTHORITY

A. & D. CARD



A. & D No. 15424 PL. OF ACTION
 RANK Wdy REG. NO. 742455 UNIT 60A SICK OR WOUNDED
 NAME Morrison D AGE 32 RELIGION Bapt
 PLACE IN HOSPITAL
 DIAGNOSIS Debility
 ADMITTED 17 FEB 1919 FROM Spcl to H. Edmonton
 DISCHARGED 10-3-19 TO
 TRANSFERRED M. C. H. Epsom
 SERVICE AT HOME 36 IN FIELD 16
 RESULTS

22 days

(See Document Card for M.H. Sheet and other Documents.)

No.

RANK

pte

NAME

Marrison Duncan

T. O. S. 10-5-15-

UNIT

62nd Regt (St John Fusiliers)

D.O.# 44-10-5-15-

M. D. *6*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915</i> <i>May 10</i>	<i>1915</i> <i>May 31</i>	<i>✓</i>	<i>detention duty</i>	
	<i>June</i>	<i>✓</i>	<i>" "</i>	
	<i>July</i>	<i>✓</i>		
	<i>Aug.</i>	<i>✓</i>		
	<i>Sept.</i>	<i>✓</i>		
	<i>Oct.</i>	<i>✓</i>		
	<i>Nov.</i>	<i>✓</i>	<i>shown as L./lopl.</i>	
	<i>Dec.</i>	<i>✓</i>		
<i>1916</i> <i>Jan. 1</i>	<i>1916</i> <i>Jan. 14</i>	<i>✓</i>	<i>Transfd to 115th Bn. 14-1-16</i>	<i>D.O.# 1-31-1-16</i>



No. 742455 RANK *Rtl. Cpl.*

NAME *Morrison, Duncan P.*
Duncan.

T. O. S.

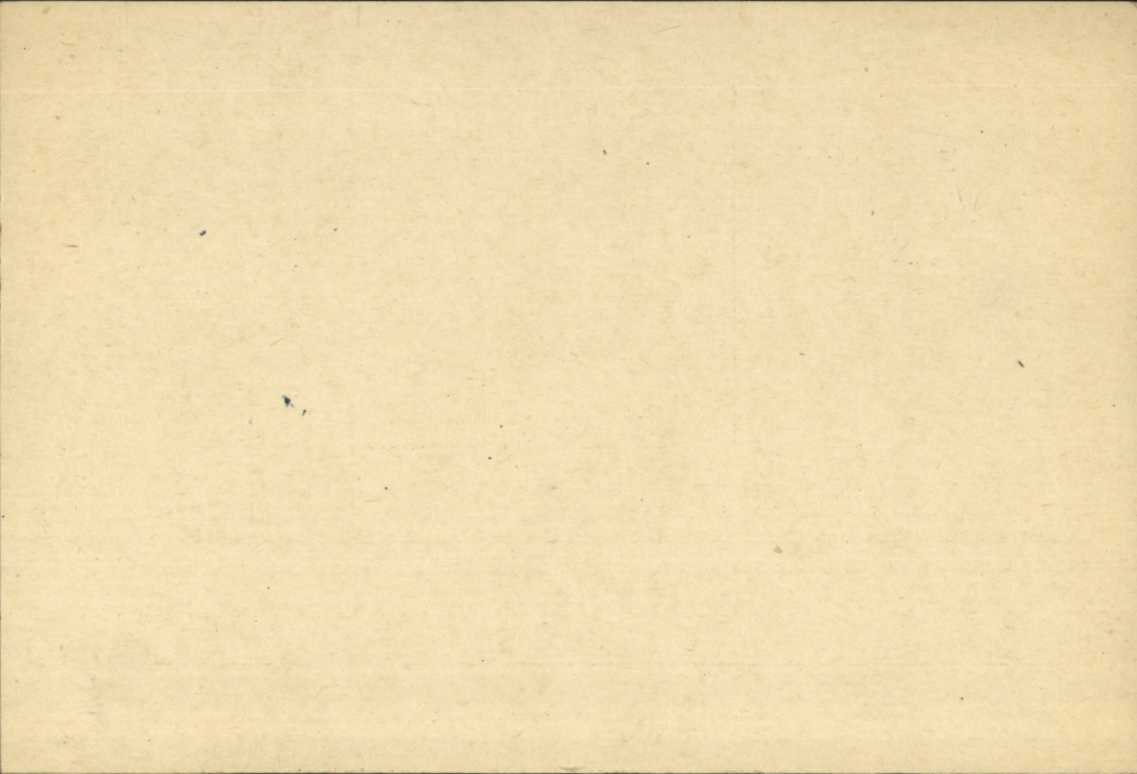
UNIT *115th Battalion C. E. H.*

Home pay list.

*transfd from 62nd Det Home 15-1-16
RD 2 of Jan. 1916.*

M. D. 6

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
<i>1916</i>	<i>1916</i>			
<i>Jan. 15</i>	<i>Jan 31</i>	<i>✓</i>		
<i>Feb.</i>		<i>✓</i>		
<i>Mar.</i>		<i>✓</i>		
<i>Apr.</i>		<i>✓</i>		
<i>May</i>		<i>✓</i>		
<i>June</i>		<i>✓</i>		
<i>July</i>		<i>✓</i>		
<i>Aug</i>		<i>✓</i>		
		<i>2</i>	<i>Promtd. Cpl. 30-5-16.</i>	<i>RD 131 of 2-8-16.</i>
				UNIT SAILED JUL 23 1916



SURNAME.

Morrison.

CHRISTIAN NAMES

Duncan Robert

REGL. NO.

742455-

RANK

Cpl.

UNIT

115th.

FORMER CORPS

nil.

CARD NO.

67

SOS Dis: 26-5-19

Demob. #700.

Do. 14/9 FOLL. 29-5-19

Catt

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Morrison, Mrs Myrtle.

RELATIONSHIP TO SOLDIER

(wife)

ADDRESS

86 Kennedy St., St. John, N.B.

COUNTRY OF BIRTH

Canada, Shipman, N.B.

DATE

May 24/1887-

PLACE OF ATTESTATION

St. John, N.B.

DATE

Jan. 11/1916

1/5.23-7-16

490

25



1/6. 25-5-19 332 Pdr.

Sailed from Halifax P. S. S. Olympic 23-7-16.

MARRIED

yes.

SINGLE

WIDOWER

TRADE OR CALLING

Lumber surveyor.

RELIGION

Baptist.

DESCRIPTION.

APPARENT AGE

28

YEARS

MONTHS

HEIGHT

5-

FEET

4

INCHES

CHEST MEASUREMENT

37 1/4

INCHES

EXPANSION

3

INCHES

COMPLEXION

dark.

EYES

blue

HAIR

dk. brown.

DISTINGUISHING MARKS

Nil.

MEDICAL EXAMINATION.

PLACE

St. John, N.B.

DATE

Dec. 31/1915.

RECEIVED
DEC 31 1915
U.S. DEPT. OF COMMERCE
BUREAU OF MARITIME SERVICE

NAME

Morrison Duncan Robert

REGT. NO.

742455.

RANK AND UNIT

Bdr 14th Bde 3rd form 115th Bn

NEXT OF KIN

Mrs Myrtle Morrison (wife) 86 Kennedy St.
St. John N.B.

CABLE

NATURE OF CASUALTY

No.

DATE

No.	DATE	NATURE OF CASUALTY
(0826	19-12-18	Dangill 32 Stat St. Wimeroux
5-3		
HLA #25-1	18-12-18	Dec. 18th 1918 Broncho pneumonia
0861	5-1-19	Still dangill 32 Stat Hosp
1-5		Skimereux Dec. 29th 1918.
51606	8-1-19	Rem from dangill list
1-1		32 Stat St. Wimeroux Jan 5th 1919
wsm. 26412	1-19	Progress very satis. rep. for
3-3		by C.R.C.

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

a440-1	32. Stat. Wimeroux	Still languish		
			29-12-18	Broncho-Pneumonia
9.442-1.	32. Stat. Wimeroux	no longer languish		
			5-1-19.	Broncho-pneumonia
B447-1.	Spec. mil. (Surgical)	Edmonton	6-1-19.	" " " "
			"	"
B482.	Can pt-spec. Buxton		18-2-19	" " " " & Debility
B501.	Mil cow. Woodcote	Essex	11-3-19	" " " " Pneum "
B512	Hirsch		26-3-19	" " " " " "

Duncan Robert

Name MORRISON Rank Bdr

Reg. No. 742455

Unit 14th Bde C.F.A.

Next of Kin Canada

Jor

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918						
18	12 32 Pty. Wimerang					
			lung-ill broncho pneumonia	A428	Q826	P163019
22	11	do	do			HA 6081/8
29	12 do	do	do	A440	Q861	HA 6504/2
5.1.	19 no longer sent	do	ill	A442		P16476.1
6.1.	19 Spec Mill Surg	Edmonton	do	B447	#606	#563
			& Debeney (Surg)			
18.2.	19 Can Spec	Buxton	do	B482		7249
11.3.	19 mil (Con)	Epsom	do	B501		8478
26.3.	19 Disch'd	do	do	B512		2794
Rd 26	3/19 will proceed	5 th 1/2 Can Res Art	Hitley			Eps M-3674

Surname

Christian Name or Names

Reg. No.

MORRISON.

D.R.

742455.

Rank
Bdr.

Unit
C.A. 14B.

Cas. List.

18-12-18.

32. Staty. Wimereux. "Dang. Ill"

18-12-18. A428.

Broncho-Pneumonia. 2.

4-1-19. A440

still Dang ill 29-12-18

7-1-19. C442

no longer Dang ill - 5-1-19.

13-1-19. B447.1

Spec. Mil. Edmonton 6-1-19.

22-2-19. B482

2 C.R.C. Spec. Buxton 18-2-19

9 Debility, and

17-3-19. B501

Woodcote Pk. Epsom 11-3-19

29-3-19. B512²

Dis 26-3-19.

A.M.D. 2 DEPT.

G.M.F.O. London

Cas. List.

LTR

Rank *---* Name **MORRISON, Duncan Robert** Reg'l No. **742455**
 Unit **115th, Bn.** *If in perm. Corps, What Unit?* Married or Single **Married.**

Place and Date of Enlistment **St John N.B. 31st, Dec, 1915,** Place of Birth **Queens Co, N.S.**

Name and Address, Next-of-Kin **Mrs Myrtle Morrison.**
86 Kennedy St, St John, N.B. Canada, Relationship **Wife.**

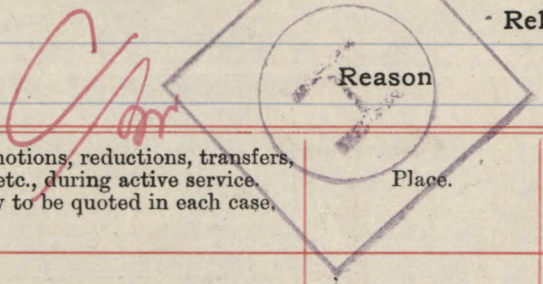
Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

Discharge, Date and Place Reason Character

H. W. & V., Ld.—7165-16.

W.E. B. N. 16694
File #
Category



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.				
		Arr. in ENGLAND	S.S. OLYMPIC	31-7-16.	
1-8-16	115 th Bn.	Embarked, holding acting rank of Corp.	Oxney Camp	23.7.16	Pt. II D.O #191
2.12.16	" "	S.O.S. on trans to 112 th Bn.	Bramshott	1.12.16	Pt. II D.O #314
5.12.16	" "	Reverts to rank of the entrant.	"	1.12.16	303
5.12.16	" "	S.O.S. on trans from 115	"	1.12.16	303
5.12.16	" "	S.O.S. on trans to 66 th Bty.	"	1.12.16	Pt 2. D.O. 303.
1.12.16	OC 14 th Bn.	S.O.S. on trans from 112.	Witley	1.12.16	Pt 2. D.O. 142.
31.1.17	14 th Bde:	S, C, S. transfer, New 14 th Bde:	Witley,	22. I-17	Pt. D031
20-2-17	14th Bde	CFA Proceeds O'seas.		21-8-17	Pt. II O 232
15.3.18	14 th Bde.	From Bomber. to Comp. Estab.	Gun Field	1.3.18	Pt 2.0.18

W.E. B. N. 103 CHECKED
 1 AUG 1917

W2P

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.				
					Pl. II DD 200/201-19
20-1-19	14 Bde C. Fa	Inval's Sick + Posted to C. of D. Borden	3rd Field.	6-1-19	CHD. 7 + C.A.R.D.
28-4-19	1 MDCW.	T.O.S. from C.A.R.D.	" Rhyl.	28-4-19	- 118 of C.A.R.D. 120 2304-19
14-5-19	do.	S.O.S. to Canada	"	14-5-19	- 134
		" "	75-C-8	14-5-19	

Army Form B. 103.

Regimental Number.....

Casualty Form—Active Service.

742455

Regiment or Corps.....

Rank Bdr Surname MORRISON, Christian Name Duncan Robert

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				
6.1.19	32 Staty.	Deby. Bro. pneumonia	England	6.1.19	W.6872 N 3991
20.1.19	14 Bde CFA	Invalided Sick & posted to GARD, Borden	England	6.1.19	PT # 7 of 20.1.19
			<i>George F. Skelton</i> for Lt.-Col., A. A. G. Section, G. H. Q. 3rd Echelon, B. E. F.		
20.1.19	GARD.	Top from 14th Bde C.F.A.	Borden.	7.1.19	Pt. 2.0.20 Ret.
			<i>J. S. Thomas</i> FOR LT COL I/C RECORDS G.G.M.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, & (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				
28/4/19	CARD	SOS to b.b.b Rhyl MD7	Ripon	26/4/19	D0118
28/4/19	CARD	Attached C.C.C. Kimmel Park for return to Canada. Part II Order No. 118. Ceases to be attached C.C.C. Kimmel Park on embarking for Canada, Part II Order No. 134	ASW Mackay		LEUT. OFFICER i/c RECORDS,
		Commanding MD7 Wing, Kimmel Park Camp.	Lieut		
		MAY 14 1919	EMBARKED FOR CANADA		
14/5/19	Eng	TAKEN ON STRENGTH District Depot No. 7.			
		PART II. ORDER No. 149			Lieut. & Asst. Adj. For O. C. District Depot No. 7.
		ST. JOHN, N. B.			
26/5/19	Div. H.M.S.	STRUCK OFF STRENGTH District Depot No. 7.			
		PART II. ORDER No. 149.			Lieut. & Asst. Adj. For O. C. District Depot No. 7.

W2/P

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

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

250M.—1-16,
H. Q. 1772-39-920.

Casualty Form—Active Service

Unit/Regiment or Corps 115th O.S. Battalion, C.E.F.
 Regimental No. 742455 Rank Private Name Morrison, Duncan Robert
 Enlisted (a) 31/12/15 Terms of Service (a) Duration of War Service reckons from (a) 31/12/15
 Date of promotion to present rank. 23/7/16 Date of appointment to lance rank } Numerical position on roll of N. C. Os. }
 Extended ----- Re-engaged ----- Qualification (b) Lumber Surveyor

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.
<u>8/16</u>	<u>115th</u>	<u>Rebarked Canada</u> <u>Disembarked England</u> <u>Embarked holding rank of</u> <u>Appointed Act. Cpl.</u>	<u>Oxney Camp</u>	<u>23/7/16</u> <u>23/7/16</u>	<u>Pt. II Order #191</u> <u>Sgd. <u>B.D. Swain</u></u> <u>O.C. or Adj. 115th</u>
<u>2.12.16</u>	<u>112th</u>	<u>Transferred to 112th Battalion 21/10/16.</u> <u>D.O. part 2.273.</u>		<u>1/12/16</u>	
<u>5-12-16</u>	<u>112 th</u>	<u>Reverts to ranks.</u> <u>Taken on strength</u>	<u>Bramshott</u>	<u>1-12-16</u>	<u>MAJOR</u> <u>O.C. 112 th., Batt'n C.I.</u>
<u>5-12-16</u>	<u>112 th Batt'n</u>	<u>Transferred to 66 th., Battery E.F.A.</u>	<u>Witley</u>	<u>1-12-16</u>	<u>MAJOR.</u> <u>O.C., 112 th., Batt'n C.I.</u>

W.O.B. CLASS A NO.

(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				
1.12.16	O.C. 14 th Bde G.S.A.	Taken on strength 14 th Bde G.S.A.	Midford	1.12.16	D.O. II # 143
31.1.17	O.C. 14 th Bde	Transferred to new 66 Bde 14 Bde upon reorganization	Midford	22.1.17	D.O. II # 31
23.1.17	O.C. 14th Bde, C.F.A.	Taken on strength of 14th Brigade, C.F.A.	Witley	23.1.17	Pt. 2, #22, 22.1.17
23.1.17	O.C. 14th Bde, C.F.A.	Proceeded overseas on service.	Witley Camp.	21.8.17	Part 2 order No. 232
28.8.17	L R	LANDED IN FRANCE	HAVRE	22.8.17	8854
9.3.18	14 Bde CFA	Promoted Bombardier	Field	13.18	B 213: Part II 18 d/15.3.18
16.3.18	"	granted 14 days leave to	Paris	15.3.18	B 213: Part II # 19 d/23.3.18
30.3.18	"	Rejoined from leave	Field	29.3.18	B 213
19.7.18	"	On Command to XVII cps Sig	Sch "	13.7.18	B 213
30.8.18	"	Rejoined from " "	"	25.8.18	B 213
10.12.18	3 CFAmb	Bronchitis	3 CFAmb	10.12.18	a 36 N 865
10.12.18	64 CCS	"	64 CCS	10.12.18	" N 1533
15.12.18	14 Bde CFA	To Hosp. SK.	N.S.	9.12.18	B 213
18.12.18	64 CCS	Bronchitis	31 AT.	14.12.18	A 36 N 2192
22.12.18	32 Staty	{ Bronchopneumonia } { Dangerously Ill. }	32 Staty	22.12.18	W.3034 N 2436
29.12.18	"	" " "	"	29.12.18	W 6423 N 2089

CERTIFIED CORRECT.
 3 AUG 1917
 COA RECORDS LONDON.
 20 AUG 1917

C. F. Greene & Adjutant,
 for O.C. 14th F.A. Brigade. C.E.F.
 Pt. 2, #22, 22.1.17
E. Greene Major,
 Adj. 14th Bde, C.F.A.

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..... *115 T.H. Battalion*

(2) Regimental Number..... *742455*

(3) Full Name of Soldier..... *Morrison, Duncan Robert*

(4) Place of Birth..... *Chipman New Brunswick Canada*

(5) Are you married, or not?..... *Yes*

(6) If married, state,
 (a) Full name of your wife..... *Myrtle Gertrude Morrison*

(b) Present Postal Address..... *86 Kennedy St.*

St John - New Brunswick

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

(8) Have you any children?..... *Yes*

If so, give number of boys and girls..... *1 Boy - 1 Girl*

Also their names and ages..... *Emerson Gordon Morrison.*

4 10/12 years.

Emma Isabel Morrison. 3 1/2 years.

(9) Is your Father alive? Yes
If so, state name and address George Morrison. 74 Marcup. St. John

(10) Is your Mother alive? No
If so, state name and address

(11) If your Mother is a widow Answered above
Are you her sole support, or not? Answered above

(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.
Answered above

(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.
Answered above

(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? Prudential Ins 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.

W. W. T. M. Lt. Col.
O. C. 115TH OVERSEAS ~~REGIMENT~~ Commanding.

Date 22nd May 1916

MEDICAL HISTORY SHEET.

Surname: Monison Christian Name: Robert Duncan

Examined { on 31 day of Dec. 1915
 at St. John N.B.
 Birthplace { City or Town Chipman Rank Capt. M.O.
 County Queens N.B.

Approved by Mr. Namick P.
 Rank Capt. M.O.

Apparent age 28
 Trade or occupation Under Engineer
 Height 5 Feet 4 Inches M.O.
 Weight 154 Lbs. M.O.
 Chest measurement { Minimum 34 1/4 inches M.O.
 Maximum expansion 37 1/4 inches M.O.
 Physical development good M.O.
 Small-Pox Marks none M.O.

Vaccination Marks { Arm Right Left
 Number _____
 When Vaccinated last never M.O.
 (a) Marks indicating congenital peculiarities or previous disease none M.O.

(b) Slight defects but not sufficient to cause rejection
Teeth - Poor need attention 19/5/16 T Mr. Namick P. M.O.
Union Pt. D 20 W. D 20 8/7/16 T.A.B. Mr. Namick P. M.O.
 14/7/16 T.A.B. N.W. M.O.
 14/8/16 T.A.B. M.O.

Enlisted on 31st day of December 1915 at St. John N.B.

CORPS.	REG'TL NUMBER.	HABITS.	DATE.
115th Overseas Battalion, C. E. F.	742485		31/12/15
Joined on enlistment	11/12/16		
Transferred to	112th Bn. 2/10/16	Pt 2 DO. 314	
	14th Bde. C. E. F.		
	66th Bty.		

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.

CANADIAN

J. Mc

Surname *Worison* Christian Name *Duncan R.*

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 general 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 inoculation.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
<i>St John's Valentia Cramshott</i>	<i>31/12/15 JUN 20 1916 17/8/16</i>	<i>4</i>	<i>6</i>	<i>16</i>	<i>8</i>	<i>6</i>	<i>16</i>	<i>Influenza</i>	<i>4</i>	<i>Wild</i>	
<div style="border: 1px solid black; padding: 5px;"> <p>SPECIAL MILITARY SURGICAL HOSPITAL EDMONTON. LONDON. N. 18. No. Date</p> </div>		<i>6</i>	<i>1</i>	<i>19</i>	<i>17</i>	<i>2</i>	<i>19</i>	<i>Pneumonia</i>	<i>43</i>	<i>Pr. very debilitated after pneumonia - Recovering -</i>	<i>To Ban Granville Hpl, Buxton</i>
<i>R. C. J. H. Buxton</i>		<i>17</i>	<i>2</i>	<i>19</i>	<i>10</i>	<i>3</i>	<i>19</i>	<i>do</i>	<i>22</i>	<i>Complains of nothing - Chest clear - Trachea. Epsom</i>	<i>W. H. G. G. G.</i>
<i>M. C. H. Epsom</i>		<i>10</i>	<i>3</i>	<i>19</i>	<i>26</i>	<i>MAR</i>	<i>1919</i>	<i>Debility (Cont)</i>	<i>17</i>	<i>On admission - general condition good. P.S. 2. 4. 7. 11. 20. 3. 19. Had. P.S. - Discharge to Reserve - 2nd. Category A.</i>	<i>W. S. C. G. G.</i> <i>M. C. A. M. C.</i>

W. P. Taylor
 M. C. A. M. C.
 FOR M. O. MC CASE.

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. 742455 Rank BDR Surname MORRISON
(Given name in full)
DUNCAN ROBERT
 Unit or Corps Birthplace CHIPMAN N.B. CAN

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

1. GENERAL DESCRIPTION:

Physique Good Weight 150 lbs. Height 5 ft. 5 in. Colour of Eyes BLUE
 Nutrition Good
 Pulse 74
 Condition of arteries Normal
 Vision Rt. $\frac{20}{20}$ Left $\frac{20}{20}$
 Hearing (conversational voice) Rt. 10 ft.
 Left 10 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 Yes
 Disturbance of mentality No Muscular System No Digestive System No
 Osseous and Joint System No Any other general condition Yes

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.

Tonsillitis 4/6/16 - mild attack - Good recovery.
Pneumonia 16/12/18 - severe illness and following debility - Slow but good recovery.
Present case status Good.

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at C. prom. (Overseas)

Date 20.3.19.

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 DR 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 Medical Board.)

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

[OVER]

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. 742455 Rank Pldr. Surname MORRISON
 (Given name in full) Duncan Robert
 Unit or Corps Birthplace Chipman, Queens Co.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 163 lbs. Height 5 ft. 4 in. Colour of Eyes Grey
 Nutrition Good
 Pulse 84 Full regular
 Condition of arteries Elastic
 Vision Rt. 6/6 Left 6/6
 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 In fairly good health.

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 Yes
 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.

Respiratory System - Pneumonia from 6.1.19 to 26.3.19 in 32nd Plat. Edmonton Military. Granville Special and M. C. H. Eppson. No disability.

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Ripon (Overseas)

Date 26.4.19

Signed W. C. O'Connell M.O.

Capt O'Connell

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 W. R. 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 Medical Board.)

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

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

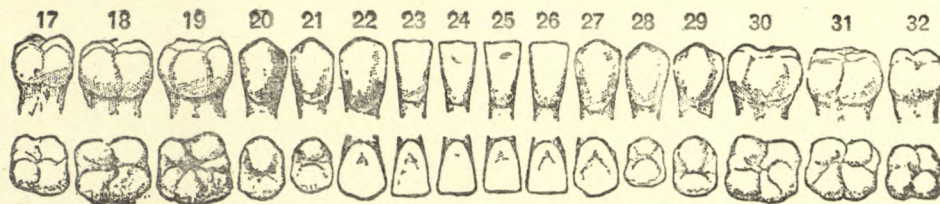
NAME OF SOLDIER (Block Letters) MORRISON, D.R.

REGIMENT CARD RANK BPR. No. 742 455

Date of Examination in England 24-4-19 Date of Examination in France

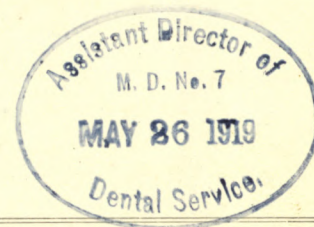
DIRECTIONS TO DENTAL OFFICERS

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 4.5.
2. EXTRACTIONS 3.13.
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

[Handwritten signature]

CARD
MORRISON
D.R.
MAY 1922

2
1922

1922

1922

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 742455 (Rank) Boat.
 Name (in full) Duncan Robert Morrison enlisted in
 the 115th Battalion
 CANADIAN EXPEDITIONARY FORCE at St. John, N. B. on the 31st.
 day of December 1915
 HE served in Great Britain, France, Belgium and Germany
 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:

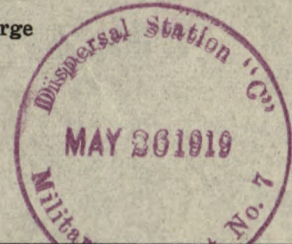
Age 32 yrs
 Height 5'4"
 Complexion Dark
 Eyes Blue
 Hair Dark Brown

Marks or Scars Nil.

Duncan R Morrison
 Signature of Soldier

Ramsey CAPT. O. C.
 DISPERSAL STATION ST. JOHN, N. B. FOR
 O. C. DISTRICT DEPOT #7
 Issuing Officer

Date of Discharge



Rank _____
 Date MAY 26 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.

M.F.B. 39A.
 1049-D.P.-300M-11-18.
 H.Q. 1772-39-882.

- 1.—That discharge certificate must be carried when wearing uniform.
- 2.—That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing, and
- 3.—That wearing of uniform renders him liable to usual military discipline, as if on the strength of a unit.

THIS IS TO CERTIFY THAT NO.

Name (in full) _____

the _____

CANADIAN EXPEDITIONARY FORCE NO. _____

day of _____ 19__

He served in _____

and is now discharged from the service by reason of _____

Medical Certificate _____

THE DESCRIPTION OF THIS SOLDIER ON THE DATE above is as follows:

Age _____

Height _____

Complexion _____

Eyes _____

Hair _____

Signature of Soldier _____

Date of Discharge _____

CLASS **A**
 WAR SERVICE BADGE
 NO. **267537** Issued

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom Mrs Myrtle G. Morrison
 Address 76 1/2 Kennedy St.,
St John
N B
 Rate 20⁰⁰

By Whom Assigned Morrison D R
 Regtl. No. 742.455-
 Rank Lt Col
 Corps 113th Batt. "A"

AUG 1 1916

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				



11/19/54
11/19/54

2 2

11/19/54
11/19/54

11/19/54
11/19/54

11/19/54

ASSIGNED PAY

Sheet No. 2.

Mrs Myrtle G. Morrison

OVERSEAS CONTINGENTS

PAYMENTS.

Name of Soldier

Morrison D.R.
442455 L/C 115th Batt

L. L. Job 310.—Req. 6574.

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>2000</i>
				AUG 1 1916
April	1916			
May				
June				
July				
Aug.		<i>21,5985</i>	<i>20</i>	
Sept.		<i>V 8964</i>	<i>20</i>	
Oct.		<i>V 24020</i>	<i>20</i>	
Nov.		<i>V 28424</i>	<i>20</i>	
Dec.		<i>U 30520</i>	<i>20</i>	
Jan.	1917	<i>T 40468</i>	<i>20</i>	
Feb.		<i>T 46422</i>	<i>20</i>	
March		<i>I 52267</i>	<i>20</i>	<i>20 Ch</i>
April		<i>H 3792</i>	<i>20</i>	<i>20 Ch</i>
May		<i>H 10527</i>	<i>20</i>	<i>20 B</i>
June		<i>917400</i>	<i>20</i>	<i>B.</i>
July		<i>N 24113</i>	<i>20</i>	<i>B.</i>
Aug.		<i>U 30414</i>	<i>20</i>	
Sept.		<i>U 37183</i>	<i>20</i>	<i>B.</i>
Oct.		<i>L 44476</i>	<i>20</i>	
Nov.		<i>J 51056</i>	<i>20</i>	
Dec.		<i>J 61285</i>	<i>20</i>	
Jan.	1918			<i>3400</i>
Feb.				
March				
April				
May				
June				
July				

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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.				

1-3-16

MILITIA AND DEFENCE

M. F. W. 11.
20m.—11-15.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Myrtle G. Morrison
 Address 86 Kennedy St
St John
N.B.

Name of Soldier Morrison Duncan R
 Regtl. No. 742455
 Rank Pt Lt. cpl
 Corps 115 Batt

Relation to Soldier }
 wife, child or mother } wife

To what Corps belonging }
 when called out }

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March		<u>F33683</u>	<u>20</u>	<u>20</u>



100
100

100

100

100

100

100

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

L. L. Job 89002.-Req. 6213.

G. Morrison
*Myrtle Morrison*wife
PAYMENTS.

Name of Soldier

Morrison, Duncan R

Month.	Year.	Cheque No.	Amt.	Remarks.
			20	
April	1916	H 2988	20	20
May		W 874	20	20
June		3340	20	20
July		F 10981	20	20
Aug.		13263	20	20
Sept.		17666	20	20
Oct.		I 18786	20	20
Nov.		Q 22485	20	20
Dec.		Q 26042	20	20
Jan.	1917	Z 29616	20	20
Feb.		Z 32534	20	20
March		335491	20	20
April		Z 18000	20	20
May		Z 4734	20	20
June		Z 8038	20	20
July		Z 11727	20	20
Aug.		14961	20	20
Sept.		P 18435	20	T
Oct.		X 19708	20	20
Nov.		F 95076	20	20
Dec.		J 27755	20	20
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

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↑

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MILITIA AND DEFENCE
SEPARATION ALLOWANCE
OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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.				

MARRIED OR SINGLE *Married.*

PLACE OF BIRTH *Queens Co. N. Y.*

NAME AND ADDRESS OF NEXT OF KIN *Mrs. Myrtle Morrison.
86 Kennedy St. St. John. N. Y.*

RELATIONSHIP OF NEXT OF KIN *Wife.*

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
<i>Reverts to Private</i>	<i>1-12-16</i>	<i>N. 6303. 5 3/4</i>
<i>From Bdr to complete Estab.</i>	<i>1-3-18</i>	<i>60 18. 15. 3-18</i>

REG'L. No. *442455* RANK *Private Bdr.* NAME *Morrison, Duncan Robert*

IF IN PERM. CORPS WHAT UNIT UNIT *115 Battalion* TRANSFERRED TO *112 Bn.* DATE *16/12/16* AUTHORITY *A. 6314 2/12/16*

PERMANENT FORCE ALLOWANCES TRANSFERRED TO *66th Battery C. Co.* DATE *16/12/16* AUTHORITY *20303 7/12/16*

PLACE OF ATTESTATION *St. John. N. Y.* TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION *31 Dec. 1915.* TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY \$ *20.00* DATE EFFECTIVE *1 Aug. 1916.*

PAYABLE TO *Mrs Myrtle Morrison* 78 Kennedy St. St. John. N. Y. RELATIONSHIP *Wife*

ADMISSIONS TO HOSPITAL, &c.

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

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)

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS							
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1	2	3	4	1	2	3	4				CREDIT	DEBIT										
			\$	C.			\$	C.			\$	C.																										
1916																																						
July 31																																					<i>Bdr. from Canada.</i>	
Aug. 31	31	1.10	34	10	31	10	3	10																														
Sept. 30	30	1.10	33		31	10	3																															
Oct. 31	31		34	10	31		3	10																														
Nov. 30	30		33		30		3																															
Dec. 1-15	15		16	50	15		15	50																														
16-31	16	1.00	16		16		16																															
1917																																						
Jan	31		31		31		3	10																														
Feb	28		30	80																																		
Mar.	31	1.00	34	10																																		
Apr.	30		33																																			
May	31		34	10																																		
June	30		33																																			
			381	10																																		
			10	20																																		
			10	20																																		

Checked *pleuelles*

*Transf 112th B. Co. 21/1/16
Transf 66th B. Co. 14/1/16
Accounting Dec 1916 overpayment
of 1st class 10 & paid as cap. interest
of 1st class 11/2/16 N. 6303 3/1/16*

742455. Gen Morrison D.R.

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS							
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE				AMOUNT		1	2	3	4	1	2				3	4				CREDIT	DEBIT					
			\$	C.						\$	C.	NO.	DATE	NO.	DATE	NO.	DATE				NO.	DATE						NO.	DATE			
			381	10					10.20	391.20					72.99	38.93	19.47		220	1.50	352.89	28.41										
July 31	1 st		34	10						34.10									20		20	42.51										
Aug 31			34	10						34.10	267 1/2 240 255 28/6				7 30 4 86				20		37.03	39.58										
Sept 30			33							33	330 23/7 358 7/8 427 21/4 459 11/6				4 86 7 20	4 86 2 69			20		39.40	42.88										
			482	20					10.20	492.60					102.18	46.44	19.47		280	1.60	449.62											
MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER. - SRR	RED. ALLOC.	PAY ENG.	MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER. - SRR	RED. ALLOC.	PAY ENG.	REMARKS						
Oct	Bal fwd.								42.88																							
	Pay	34	10	AP					20.56.98																							
		34	10						20																							
Nov		33		AR 584 - 14 10/20	2/10/17	4.46																										
				" 510 - "	24/9	2.67																										
				AR 584 - "	11/10	3.57																										
Dec		34	10	AR 665 - "	4/11	4.46																										
		67	10			15.16																										
1918		34	10	AR 727 - "	30/11	12.49																										
Jan				" 976 - "	6/12	4.46																										
				" 1108 - "	18/12	3.57																										
		34	10			20.52																										
Feb		30	80	AR 934 - "	6/1/18	4.46																										
				" 1015 - "	2/11	3.57																										
				" 1215 - "	7/2	4.46																										
		30	80			12.49																										
May		34	10	a.p.																												
	From Bd. 1.3.18.			AR 1300 24/2/18	"	3.57																										
	diff in pay 31 days at 5¢		1.55	" 1407 5.3.18	"	4.46																										
			35.65	" 23764 16.3.18 CD-Lario	"	17.84																										
				" 25596 21.3.18	"	17.84																										
				" 1398 20.3.18 14 Bk	"	8.92																										
			35.65			52.63																										

Bal adjusted from Bal May 31. (Sub) Income 105

* Strike out whichever inapplicable

ASSIGNED PAY.	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.
EFFECTIVE DATE:- 20 ⁰⁰		EFFECTIVE DATE:-	
AMOUNT:- 1.8.16		AMOUNT:-	

NAME:- MORRISON Duncan R.
NUMBER:- 742455

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 Myrtle Morrison, Wife,
78 Kennedy St,
St John N.B.
Stopped 1/5/19

PARTICULARS OF RANK OR APPOINTMENT		
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
5018-15	3.18	1.3.18 Bdr

UNIT AND TRANSFERS
ORIGINAL UNIT:- 115 Bn.
DATE ACCOUNT FIRST OPENED:- 1.8.16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S F'D	UNIT TRANSFERRED TO
50303	5.12.16	16.12.16	146 Fa.

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
9/11/19	526	Rifon £ 3	4.60	07	243	74	7.30
			7.30				

DAILY RATES OF PAY AND ALLOWANCES				
AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1.05	1.50		

LS Bal 68.21
LRB 60.91

PARTICULARS OF RENDERING NON-EFFECTIVE: *Discharged to Canada 30/11/19 M.R. 6671 Rifon 14/4/19 Rifon M.D. 6*

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
31.3.18	Blee Forw ap. Bdr P.	34.50		CAP				20	23.83		
				AR 32. 7.4.18 14 Bde	4.46				28.33		
				" 132 22.4.18 "	3.57						
				" 27016. 25.3.18. CD Paro	8.92				13.38		
		34.50			16.95			20			
May	Bdr P.	35.65		CAP				20	34.03		
				AR 191. 6.5.18 "	4.46						
				AR 266. 15.5.18 "	3.57				29.00		
		35.65			8.03			20			
June	Bdr P.	34.50		CAP				20	43.50		
				AR 365. 6.6.18 "	4.46						
				" 485. 18.6.18 "	3.57				35.47		
		34.50			8.03			20			
July	Bdr P.	35.65		CAP				20	51.12		
				AR 540. 6.7.18 "	4.46				46.66		
		35.65			4.46			20			
Aug	Bdr P.	35.65		CAP				20	62.31		
				AR 11357. 27.7.18 O.S.B.	5.35						
				" 12528 10/8/18 "	5.35				51.61		
		35.65			10.70			20			
Sept	"	34.50		CAP				20	66.11		
				AR 882 10/9/18 "	5.35						
				" 924 26.9.18 "	3.57				54.19		
		34.50			8.92			20			
Oct	"	35.65		AR				20	72.84		
				998 15/10	7.46				65.38		
		35.65			7.46			20			

COMPILED BY *W. Matthey*
CHECKED BY *GAZ*

NUMBER 742455 RANK

Bdr

NAME Morrison D.R.

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
Nov	Invd								65 38		
		34 50		at				20			
Dec		35 65		at				20			
Jan		35 65		at				20	111.18		
		105 80						60			
Feb				AR-68643 16/1	9 73						
				1172 18/11/18 14Bd	7 46						
				MR 73535 Edmontn Ludo M.	9 73						
Mar		67 85		at				40			
				2155 11/3 Expan	9 73						
				5115 28/3	48 67				53 71		
		67 85			85 32			40	14 50		
Apr		34 50		at				30	68 21		
	S.F. 21-3-19 to 5-4-19 5097, 7-4-19 cars	730		AR-526 Pulpow 9/4	14 60						
				AR-1667 30/4 Minth	9 73						
				2394 12/5 ~ End	24 32				41 45		
		41 80			34 06			20			

Sos Canada 14/5/19 \$h. 75 cars m 197

W. S. B. CLASS A. No.

11-4-39

SHORT FORM

PROCEEDINGS ON DISCHARGE.

(Demobilization.)



26-4-19

27-12-44

1. No.	742455	MAY 14 1919	EMBARKED FOR CANADA	A1.
2. Rank.	B. Cor.	DISEMBARKED, HALIFAX, 24-5-19		
3. Name.	MORRISON,	Duncan Robt.		
4. Unit.	115th Bu -	66th Bty.	D. D. NO. 2422.	
5. Date of Discharge	MAY 26 1919	Place	ST. JOHN N. B.	
6. Reason for Discharge.	DEMobilIZATION			
Service in France	17/12.			
Next of Kin.	Wife.			
7. Authority.	R. O. 1420			
8. Proposed Residence after Discharge	St. John's, St. James St.			
Religion.	Bapt. N.B.			
Occupation.	Lumber Surveyor.			
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.?	30 & Class A W.S. No. 26			
				Duncan R Morrison Signature of Soldier.
10.	CONFIRMATION.			
The discharge of the above named man is hereby confirmed.				
Place			
Date			
		Deceased 13-9-44 649 M-41030		
Signature				
	DISPERSAL STATION, ST. JOHN, N. B. FOR O. C. (SPECIAL Discharging Unit.)			

SHORT FORM
PROCEEDINGS ON DISCHARGE
(Continuation)

1. Name	
2. Rank	
3. Branch	
4. Service No.	
5. Date of Discharge	
6. Reason for Discharge	
7. Remarks	
8. Signature of Soldier	
9. Signature of Officer	
10. Signature of Chaplain	
11. Signature of Adjutant	
12. Signature of Quartermaster	
13. Signature of Commissary	
14. Signature of Medical Officer	
15. Signature of Paymaster	
16. Signature of Provost Marshal	
17. Signature of Prisoner of War	
18. Signature of Agent	
19. Signature of Interpreter	
20. Signature of Interpreter	
21. Signature of Interpreter	
22. Signature of Interpreter	
23. Signature of Interpreter	
24. Signature of Interpreter	
25. Signature of Interpreter	
26. Signature of Interpreter	
27. Signature of Interpreter	
28. Signature of Interpreter	
29. Signature of Interpreter	
30. Signature of Interpreter	



U.S. GOVERNMENT PRINTING OFFICE: 1917

LIST OF DISCHARGE DOCUMENTS

Attestation Paper, Trigonate Military Form W-27

or Particulars of Record Military Form W-100

Field Conduct Sheet Military Form W-110 or W-110-224

Causality Form Military Form W-24 or W-24-100

Last Pay Certificate Military Form W-44

Certificates that missing documents are unobtainable

Medical History Sheet Military Form 8-317 or 8-317-100

Proceedings of Medical Board M. B. REPORT, A. R. 100-100-100-100-100

Dental History Sheet Medical Form 100-100-100-100-100

Medical Report M. B. REPORT, A. R. 100-100-100-100-100

Regimental Conduct Sheet M. B. REPORT, A. R. 100-100-100-100-100

Company Conduct Sheet M. B. REPORT, A. R. 100-100-100-100-100

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. 32a).
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.

122

Group..... 9

Checked by No. 25

Date. 13/11/19

M.D. No. 7

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

86 Kennedy St.
St. John. N.B.

AUDITOR *[Signature]*
PAYMASTER *[Signature]*

M. OR S.

REGT. No. 742455

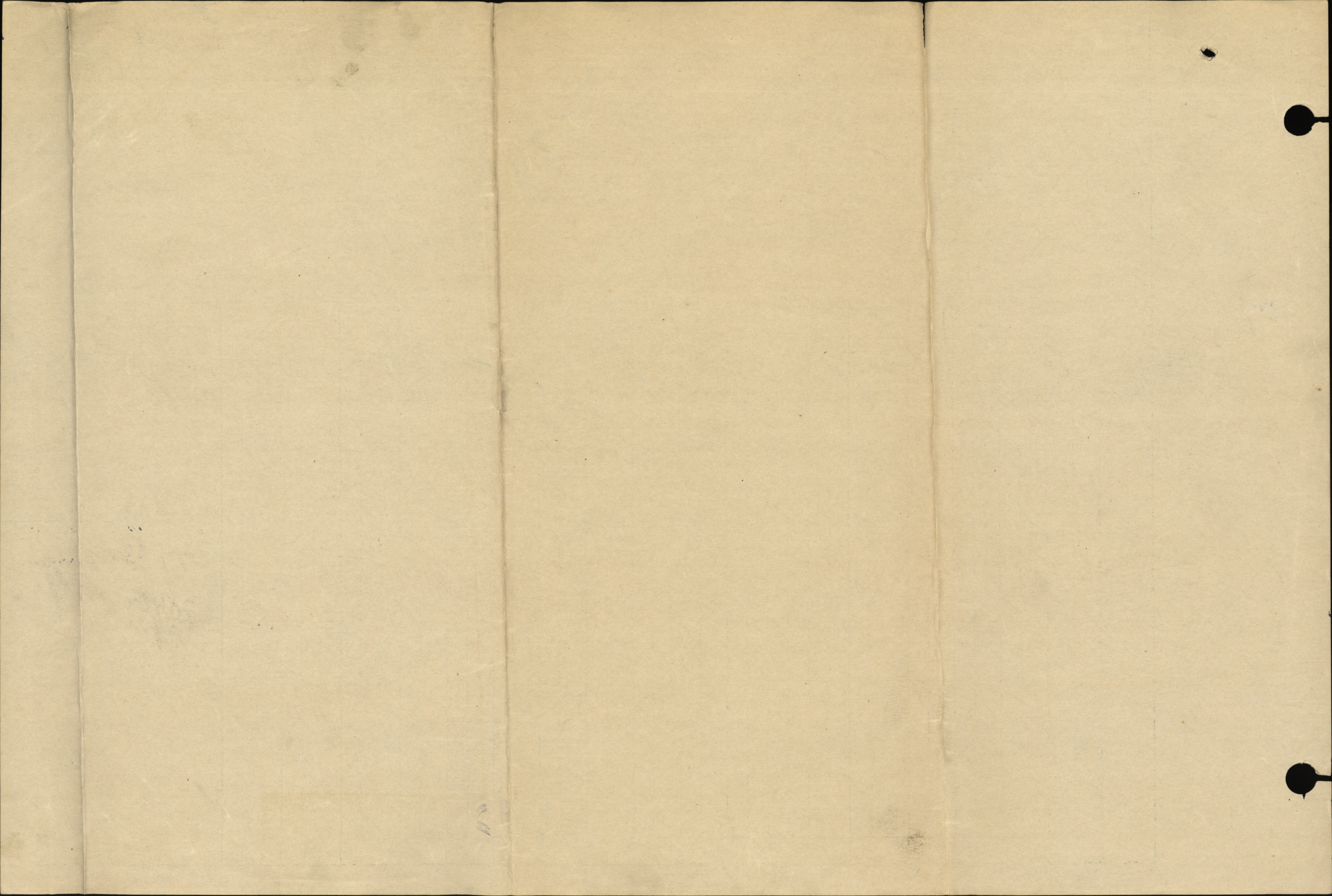
RANK Bdr.

NAME (IN FULL)

MORRISON DUNGAN R

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?	(BLOCK LETTERS SURNAME FIRST)
ADDRESS					115th Bn.		
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				DATE OF ATTESTATION 11-1-16	TRANSFERRED TO	DATE
TO WHOM PAID	RELATIONSHIP				ASSIGNED PAY \$ 20.00	DATE EFFECTIVE	AUTHORITY 2595
ADDRESS					PAYABLE TO Mrs. D. R. Morrison	RELATIONSHIP	ANY CHANGE IN ASSIGNEE OR ADDRESS
					ADDRESS 86 Kennedy St. St. John N.B.		
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE	
					DISCHARGED St. John. 26-5-19	REASON Demol.	AUTHORITY DO#1190

MONTH	PAY AND F.A.		OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGIMENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS	
	NO. OF DAYS	RATE			AMOUNT	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2					COL. NO. 3	DEBIT		CREDIT
April			41 45	41 45													Bohemian 24-5-19	
May 29	15		33 35	138 35	86	86	199288	487	5 00	149 93	20 00		179 80	179 80			Her. Bal. Exp. 196. 31-4-19	
			183 days @ Min	420 00	180 00	600 00											Voluntary Allowance	
			W.S.G. S.A.	26 00	26 00												x 1st payment W.S.G. as above	
			W.S.G. S.A.														above	
			W.S.G. S.A.														AR charged for May 1	
			Soldier Dep.														x 1st payment W.S.G. as above	
																	S.D. Pd by Ottawa	
																	Over Cr. Pt A	
																	to 6 adj Sp on disch.	
																	CR 344966 AR 65/10/19	
																	CR 1051507-58/10/19	
																	CR 1257454-55/10/19	
																	CR 1261551-52/10/19	
																	CR 1548665-66/10/19	
																	CR 1555740-41/10/19	
																	NON-EFFECTIVE	



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

1-3-16

Separation and Assigned Pay Branch

Aug 1 16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

20	\$ 25.00	30	
	1-12-17	1-9-18	
	P.C. 3257	P.C. 2753	
		M. O. 41270	

M 19904

RATE OF ASSIGNMENT

20			
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PARTICULARS OF SEPARATION ALLOWANCE

No. 742455
 Rank L. Cpl. Promoted Reverted Discharge
 Soldier's Name D. R. Morrison
 Battalion 115th Batty "A"
 Beneficiary Mrs Myrtle G. Morrison
 Relationship Wife Mr W 2554 29/7/18
 Address "Ret'd 24-11-18"

PARTICULARS OF ASSIGNMENT

Name Mrs Myrtle G. Morrison
 Address 78 Kennedy St. St John. N. B.
 Change of Address 78
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917					
Dec 31		440	340	780	
Jan 1918	W 68775	30	20	50	✓
Feb	H 73442	25	20	45	✓
Mar	N 92352	25	20	45	✓
Apr	N 10364	25	20	45	✓
May	R 17584	25	20	45	✓
June	N 21826	25	20	45	✓
July	H 31236	25	20	45	✓
Aug	P 40526	25	20	45	✓
Sep	U 42801	25	20	45	✓
Oct	X 54046	25	20	45	✓
Nov	X 57244	25	20	45	✓
Dec 1918	P 68200	45	20	65	✓
Jan	X 72555	30	20	50	✓
Feb	W 76851	30	20	50	✓
Mar	M 86094	30	20	50	✓
Apr	P 3724	30	20	50	✓
May	S 8215	30	20	50	✓
		915	680		

013133 - D. 12

Mr W 2554 to Destroy 30/9 RW

A/c Closed 31-5-19
 Ret'd per Bohemian
 Date 25/5/19 M.F.W. 187 30/5/19

M.D. # 7.



M. F. W. 128
 4009 - 5-17 - 1772-38-141
 L. L. 2520 - M. & D. 1983.

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.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
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M. F. W. 128
 400M. -6-17-1772-89-1141
 L. L. 23320 -M. & D. 7583.