Inf

QUADRUPLICATE

ATTESTATION PAPER.

Canadian

No. 550901

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? ..... Frank
1b. What is your present address? ..... 909 Bathurst St. Toronto Canada
2. In what Town, Township or Parish, and in what Country were you born? ..... Toronto, Canada
3. What is the name of your next-of kin? ..... John Morrison
4. What is the address of your next-of-kin? ..... 909 Bathurst St., Toronto Canada
4a. What is the relationship of your next-of-kin? ..... Father
5. What is the date of your birth? ..... November 28th, 1896
6. What is your Trade or Calling? ..... Clerk
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? (Naval or M.) ..... Yes. R.C.D. 1 year
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
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, Frank 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.

JUL 24 1918

Date ..... 191 . ..... (Signature of Witness)

..... (Signature of Recruit)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Frank 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.

JUL 24 1918

Date ..... 191 . ..... (Signature of Witness)

..... (Signature of Recruit)

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 Canada this JUL 24 1918 day of ..... 191 .

..... (Signature of Justice)

M. F. W. 23.
750 M.—1-17.
H. Q. 1772-39-841.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT.

Description of Frank Morrison on Enlistment.

Apparent Age 21 years 8 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 6½ ins.

Chest measurement.
Girth when fully expanded 34 ins.
Range of expansion 3½ ins.

Complexion Dark

Eyes Grey

Hair Very D. Brown

Religious denominations.
Church of England
Presbyterian Pres.
Methodist
Baptist or Congregationalist
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).

Birth mark lt. knee

Hearing O.K. Nose & Throat O.K.

R. 80 L. 60

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 JUL 25 1918 191 . W. J. McLean Major

Place Toronto Canada

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.

Frank 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.

(Signature of Officer)
Lieut. R.C.D.
for O.C. Depot Squadron, R.C.D.

Date JUL 25 1918 191 .

85
2/9/19

REGIMENTAL DOCUMENTS

NAME Morrison. Frank. PTE. REGT. NO. 550901 UNIT R.E.D. H. Q. FILE NO.

S

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
3	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					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)					
1	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category
1	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
	MEDICAL EXAMINATION (M.F.W. 129)				34062	Demob.
	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)					
5	Misc					
1	C.A.D.C. 5009A					
1	18.4.19					
	Can Cap					

H

480134

8.
C.
~~44~~ 23
~~22~~ 23
~~4~~ 23
4

W. 2505
100M-11-18
17/2-39-1377

Number 550901 Rank Pte

Surname MORRISON

Christian Name Frank

Units Can. Cav. Bde. Theatre of War England

Date of Service 15-8-18

Remarks

Latest Address 909 Bathurst St.
Toronto Ont

Roll No. A Page 1011

No. Rank Name

T. O. S. Unit

M. D.

Paid From	Paid To	Sig. or Rec't	Promotions, Transfers, Discharges, Etc.	
			Particulars	Authority

NAME Morrison S. REGT. No. 550901

RANK AND UNIT Pte R.C.D.

NEXT OF KIN

CABLE		NATURE OF CASUALTY
NO.	DATE	

M. F. W. 42—100 M.—8-18.
H.Q. 1772 39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
9432	3 Can Gen, Boulogne	23-1-19	~~20~~ 736 as per 9477
9442	8 Stat Wimereux	3-2-19	736 42. as per 9477
B509	Mil Conv. Wordcole	R from 13-5-19	42.
B527	R/to B509 report changed to Warts		
B536	to Can Spec. Withey	1-7-19	Warts 42 as per B545
B549	Risch	21-7-19	42.

Form R. 149.

FRANK.

Name MORRISON Rank Pte Reg. No. 550901

Unit R.C.D.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
19.19.						
23.1	3 C.G.H. B'logne.		"20"	M432		6979-6
3.2	S.S.H. Wimy		"736"	A442		4145-3
25.2	3 C.G.H. B'logne					7399-6
	Note Ref A432 27/30.1.19 chg to		"736"			"
	" A442 27/11.2.19 " "		"42"	A477		"
13.5.19	Mil. Con. Hosp Epsom		Do	B509		10631
Note	Ref B.509 of 21.5.19	Dispatched	Wants	B624		9283
1.7.19.	Lan. Fpo 18. Kitley			B536		11485
Ref	Cl. B536 27.5.7.19	Report "Wants" changed to				
		"42"		B545		9467.
21.7.19.	Discharged		do	B549		4743

42 - 11485

MORRISON, Frank. (Pte). R.C.D. 550901.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List

Surname	Christian Name or Names	Reg. No.
MORRISON.	F.	550901.
Rank	Unit	
Pte.	Cav.RCD.	

Cas. List.	3. C.G.H. B'logne. 23-1-19.
30-1-19. A432.	~~V.D.G.~~ V.D.S.C.*
11.2.19 A442	8 Stat Cimeiers 3.2.19 ~~V.D.S.C.~~ V.D.S.
24.3.19 A477	Note Ref A432 report V.D.G. changed to V.D.S.C.*
do do	Note Ref A442 report V.D.S.C changed to V.D.S.**
21.5.19 B509	M.C.H. Epsom 13.5.19
17.6.19 B527.	Note Ref B509 Diag: changed to Wart.
5.7.19. B536.	Can. Spec. P. Witley 1-7-19.
17.7.19 B545	Ref B536 report "Wart." changed to "V.D.S." R
21.7.19 B549	Dis 21.7.19

A.M.D. 2 DEPT.

Bch. of D.G.M.S. O.M.E.C. London.

D.M.S.1300. 50M-30-8-18.

Cas. List.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge
Class "A" No. 389116

THIS IS TO CERTIFY that No. 550901 (Rank) Pte

Name (in full) Monson - Frank enlisted in

the R.C.D

CANADIAN EXPEDITIONARY FORCE at Toronto, Ont on the 24th

day of July 1918

HE served in France with R.C.D

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 23 yrs

Height 5' ft 6 3/4 ins

Complexion Dark

Eyes Grey

Hair Dk Brown

Marks or Scars Birth mark U.K.

F Monson
Signature of Soldier.

H Sargent Cpl
For Issuing Officer.
O.C. No. 2 District Depot.

Rank

Date of Discharge

No. 2 DISTRICT DEPOT
AUG 26 1919
TORONTO

Date AUG 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.

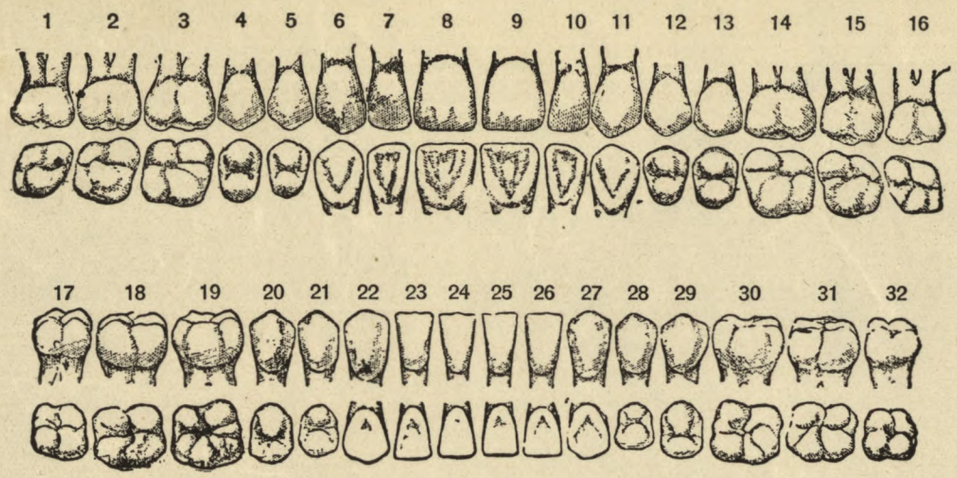
DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

M.F. 165.
50M.—2-18.
1772-39 950.

NAME OF SOLDIER Morrison J. DISTRICT 1

REGIMENT RAF RANK RTE No. 550921



INSTRUCTIONS

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

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

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

	Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	Dentures U	Dentures L	Dentures P	Gold Clasp	Gold Filling	Crowns Gold	Crowns Porcelain	Bridge Work	OPERATOR	Military Dist.	REMARKS
Condition on first Examination																						
									refuse treatment													

C.A.D.C. 5009A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

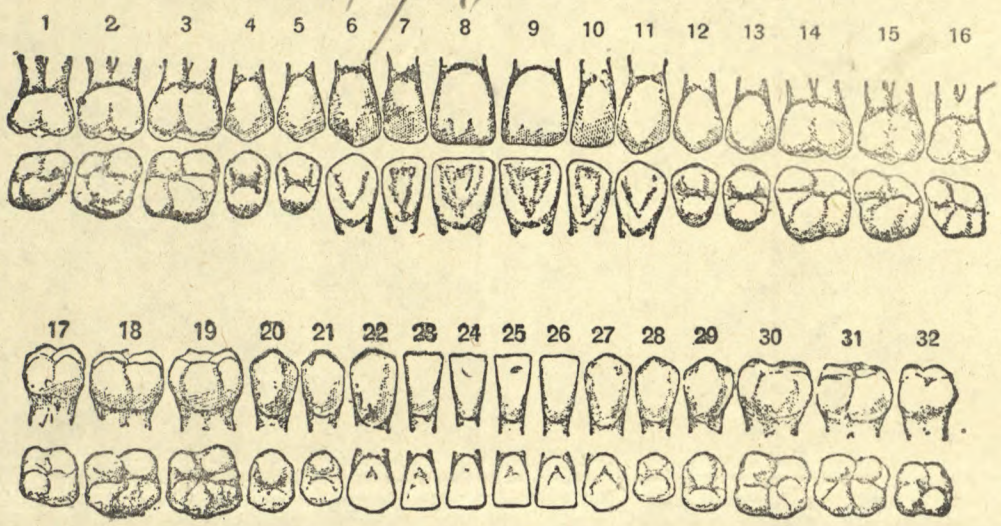
DIRECTIONS TO DENTAL OFFICERS

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

NAME OF SOLDIER (Block Letters) MORRISON F.

REGIMENT Bloy R Wing RCD RANK Pte No. 550901

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



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 3, 4, 9.
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? —

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

- (*a*) In Canada ✓
- (*b*) In England ✓
- (*c*) ~~In France~~

Signature of Dental Officer F. H. Farrow Capt

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

M. F. W. 54. (A. F. B. 103)
350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps ~~Royal Canadian Dragoons~~ Overseas Draft 99 R. C. D.

Regimental No. 550901 Rank Private Name Morrison Frank

Enlisted (a) JUL 24 1918 Terms of Service (a) ~~Dom~~ C. E. F. Service reckons from (a) JUL 24 1918

Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }

W. S. B. CLASS. A

Extended Re-engaged Qualification (b) Clerk

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				
		Embarked H.M.T.S. Nellore	Montreal Can	28-7-18	
		Disembarked	Liverpool	15/8/18	
16/8/18	C.R.C.R.	T.O.S. on reporting from Canada	Y. Cliffe	16/8/18	Pt II D.O. 228
13-11-18	C.R.C.R.	Proceeded O/S to C.E.D. France	S'Cliffe	11-11-18	Pay & Orders No 317 Pt II
12/11/18	C.E.B.D	Art + Dond RCD	Fld	12/11/18	NR pt II 12 a/18 11-18
14-11-18	Do	Left for Unit	Do	14-11-18	Nom Roll
23/11/18	RCD	Joined Unit	Fld.	20/11/18.	B213
25-1-19	"	Sick. To Hospital		18-1-19	"
25-1-19	7.C.C.F.A.	N.Y.D. "V.S." Adm + to 55 C.C.S		20-1-19	A36 A 5894
23-1-19	55 C.C.S	" " Adm + to A.T. 14		21-1-19	" A 5702

MAJOR & ADJUTANT,
FOR OFFICER COMMANDING,
CANADIAN RESERVE CAVALRY REGIMENT.

18 NOV 1918 CORRECT. 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., etc., also special qualifications in technical Corps duties.

[P.T.O.

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				
23-1-19	3 Can. Gen.	VDS.	Adm	23-1-19	W-3034 W-8055
3-2-19	do.	VDSC	to 8 Statty.	3-2-19	W 3034/ Nn 034
3-2-19	8 Statty	VDS	Can 8 Statty	3-2-19	do/ W8652
3-2-19.	3 Can Gen	Hospital Stoppages. 23-1-19 to 3-2-19 (12 days)			1643 D.O. 12 a/1919
25-2-19	8 Statty.	V.D.S.	To 3 Can Gen.	25-2-19	W-3034 W-9598
25-2-19.	3 Can Genl	V.D.S.	Adm.	25-2-19	W-3034 W-9623
1-3-19	8 Statty.	Hosp. Stoppages 4-2-19 to 25-2-19, - 22 Days			01643/13021. Pt II 0 2141-
		Up to Rec List		16/4/19	D.O. 30
12-6-19	CC(R1)	TOS from RCD.	Whitley	13.5.19	DO 157

G. F. Skelton
Lieut.
for Lt. Col., A.A.G.,
Canadian Section

F. O. Pope
LIEUT.
FOR LT. COL. I/C RECORDS, C.O.M.S.

Form R 122.
2353—100M—9-12-16. 99th Dft R.C.D TO C.R.C.R

BT.

Rank | Name MORRISON, Frank. | Reg'l No. 550901

Unit | If in perm. Corps, What Unit? | Married or Single Single.

Place and Date of Enlistment Tornnto, 24th July 1918 | Place of Birth Toronto, Ont.

Name and Address, Next-of-Kin John Morrison,
909, Bathurst St, Toronto, Canada. | Relationship Father

Assigned Pay Monthly $ | Payable to | Relationship

Separation Allowance $ | Payable to | Relationship

Discharge, Date and Place | Reason | Character

N/E. R.B. No. 6.213
File R.L.
Category CAN. OR

H. W. & V., Ld.—9546-16.

Report. Date.	Report. From whom received.	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.
C		Arrived in England	15-8-18	S/S BELLEROPH N	
16 8 18	CRCR	SOS from Canada	Pte Bde Sig	16 8 18	Pt 0228
13 11 18	"	S.O.S to R C D	" 1st Bde Sig Coy 18 11 18 "	12 11 18	Pt 0317 + 1274/18 11 18 RCD
21.4.19	RCD	SOS to Can Rec List	" Hld	16.4.19	0030 + 46a/7.5.19 CRL
12-6.19	CRCD	SOS in Hosp.	" Witley	13.5.19	D.O. 157 + D.O. 55d. 12.6.19 CRL
23.7.19	"	SOS to "R" wing	" "	23.7.19	Vtg
CAVALRY		106-1-48 SL. 13.8.19			
15.8.19	R Wing	SOS to Can S 106	" "	13.8.19	-109.

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.					

SERVICE AND CASUALTY FORM (Part I).

Army Form B. 103—I.
Part I.

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

Nothing to be written in this margin.

W1889—PP 1150 1M 5/18 G.W.P. Co (3490)

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

(10) Enlistment (*b*) (11) Engagement (*c*)

(12) Service reckons from (*date*) (13) Special conditions (if any) of enlistment (*d*)

(14) Any subsequent variations (if any) of conditions of service

Initials and Rank of an Officer.

(Authority) (*date*)

(15) Category	Date	Medical Authority	Initials and Rank of an Officer

(16) (Record of Occupation in Civil life (*vide* Army Order 93 of 1917)

Industrial Group No.

Trade or Calling

Married or Single

Particulars of Trade Test

Occupation Cards despatched on (*date*)

Second Occupation Card despatched on (*date*)

(17) Next of Kin

(18) Demobilizer (*f*) (Place)

(19) Pivotal-man (*f*) (Date)

(20) Qualifications (*g*) *or* (21) Corps trade and rate

(Signature of Posting Officer

(22) Extended

(23) Re-engaged

(24) Miscellaneous entries:—

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

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received.	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer
	27 JUL 1919		TOS. WITLEY.			
			SOS, OMFC. TO CEF CANADA AUG 13 1919			
			G. H. Ward Capt			
			OFFICER i/c RECORDS. R. WING C.C.C., WITLEY.			
AUG 13 1919 O.S.			T. O. S. No. 2 DISTRICT DEPOT, TORONTO 1919 PART II D. 241			
AUG 26 1919 S.O.S.			(DISCHARGED FROM H. M. S.) No. 2 DIS. DEPOT, PART II D. 241			
			W. C. Robertson Lieut. For O. C. No. 2 District Depot.			

Nothing to be written in this margin.

ORIGINAL.

A2 R

MEDICAL HISTORY SHEET

Surname Morrison Christian Name Frank 550901 ~~4605~~

DECLARED FIT BY MEDICAL BOARD
TORONTO MOBILIZATION CENTRE
L. A. Edwards M.O.
PRESIDENT

Examined { on 25th day of July, 1917 191
at Toronto, Canada

Birthplace { City or Town Toronto
County Canada

Apparent age 21 yrs 8 mos

Trade or occupation Clerk

Height 5 feet 6¾ Inches

Weight 117 lbs.

Chest measurement { Minimum 30½ inches
Maximum expansion 34 inches

Physical development Good

Small-pox Marks nil

Vaccination Marks { Arm Right Left 1
Number 1

When Vaccinated last childhood

(a) Marks indicating congential peculiarities or previous disease nil

(b) Slight defects but not sufficient to cause rejection
Hearing O.K. R.D 80 L.D. 60
Nose and throat O.K.

Approved by

Rank M.O.

Date	Fit or Unfit	Examined for Re-Engagement
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations
11/9/17	Pos	W. T. McLean M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
20/8/17	Gd	M.O.
27/8/17	Gd	W. T. McLean M.O.
4/9/17		M.O.

Enlisted on 26th day of July, 1917 191 at Toronto, Canada

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	R. C. D.	~~4605~~		
Transferred to	R.C.D.	550901		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
Somerset Barracks	19. 8. 18	Category A	Hakingwill Captain, C.A.M.C.
Wittz	7/8/19	Hed V D &	a [illegible]

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

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

Surname Morrison Christian Name Frank

STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer
		Day	Month	Year	Day	Month	Year				
Torvito	25-7-17	22	10	17	24	10	17	Influenza	3	Mild Case. Recovery.	W.T. McLean Major Medical Officer i/c Stanley Bks.
	do	16	1	18	19	1	18	Defective Teeth	3	Mild case. Recovery.	W.T. McLean Major Medical Officer i/c Stanley Bks.
Base Hospital	France	23	1	18	7	6	1918	Gl. & Arsenic Poisoning	136	T 67 Cured.	G. Livingstone
Convalescent Hospital, No. ..... Date ..... Woodcote Park, Epsom.		12	5	19	30	6	19	Warts.	50	T 67 Admitted from France for transfer	McCaghey
CANADIAN CONVALESCENT HOSPITAL WITLEY, SURREY.		30	6	19	21	7	19	Warts	22	T 67 Removed. Recovery to Depot	J. McRae Capt. Registrar

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ~~ENGLAND or~~ CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.	NAME:- MORRISON Fra
EFFECTIVE DATE:- 1-8-18		EFFECTIVE DATE:-		NUMBER:- 550901.
AMOUNT:- $15.00		AMOUNT:-		PARTICULARS OF RANK OR A

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	DATE EFFECTIVE	R
wife Florence Keys (Aunt)		PD 228 a/16-8-18	16-8-18	
909 Bathurst St. Toronto.				
Stop eff 1-8-19				

UNIT AND TRANSFE

ORIGINAL UNIT:- LdD dra

DATE ACCOUNT FIRST OPENED:- 1

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D
LdD Canada		

Comp 26/7/19 Md 2

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

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
7/7	3354	Witley	2 43				
17/7	3840	"	4 84				
24/7	9333	RWing	38 93				
			46 23				

DAILY RATES OF PAY AND A

AUTHORITY	PAY
LdD Canada	1 00
Led Bal $112.04	
LRC " $65.81	

PARTICULARS OF RENDERING NON-EFFECTIVE:- Dis Canada 1-8-19 NR K12669 25/7/19 Bshott to Witty

MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BAL
July 31	Bal: from Canada.								
Aug.	P.P.	34 10		A.P. August				15	
				AR 2245 CRCR 30.8.18	973				
		34 10			973			15	
Sept.	"	33		AR 2536 CRCR 11.9.18	973				
				A.P.				15	
				AR 2709 " 24.9.18	1217				
					1190				
		33			1190			15	
Oct	"	34 10		A.P.				15	
				3233 CRCR 10/10/18	973				
				3361 " 24.10.18	973				
		34 10			1946			15	
Nov	"	33		A.P.				15	
Dec & Jan	P.P.	68 20		3636 Base 17/11/18	1399				
				677 RCD. 25/11/18	1306				
				897 " 7/12/18	3703				
				C.A.P. Dec & Jan				30	
		101 20			3008			45	
Feb	"	30 80		955. 23/1/18. R.C.D	373				
				1035. 7.1.19 "	373				
				bdf				15	
				Abscp: stoppages 23/1/19 - 3/2/19					
				12 days @ bog A.O 12. 14/2/19		720			
March	"	34 10		bdf				15	
				Abscp stoppages 4/2/19 to 25/2/19					
				22 days @ bog. A.O 21. 19/2/19					
				R.C.D.		1320			
		64 90			7146	2040		30	

P 820
4—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ~~ENGLAND or~~ CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.	NAME:- MORRISON Frank
EFFECTIVE DATE:- 1-8-18		EFFECTIVE DATE:-		NUMBER:- 550901.
AMOUNT:- $15.00		AMOUNT:-		

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 Florence Keys (Aunt)
909 Bathurst St. Toronto.
Stop eff 1-8-19

Comp 26/7/19

Md 2

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
GD 228 a/16-8-18	16-8-18	Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:- RCD draft 99

DATE ACCOUNT FIRST OPENED:- 1-8-18.

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
GSC Canada			CRCR.

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

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
7/7	3354	Witley	2 43				
17/7	3840	"	4 84				
24/7	9333	R Wing	38 93				
			46 23				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
GSC Canada	1 00	10		
Led Bal $112.04				
LRC " $65.81				

PARTICULARS OF RENDERING NON-EFFECTIVE:- Dis Canada 1-8-19 NR K12669 25/7/19 Bshott to Witty R Wing

MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
July 31	Bal: from Canada.								10 00		
Aug.	P.P.	34 10		A.P. August				15			
				AR 2245 CRCR 30.8.18	973				1937		
		34 10			973			15			
Sept	"	33		AR 2536 CRCR 11.9.18	973				5237 3690		
				A.P.				15			
				AR 2709 " 24.9.18	1217 1190				1547 1547		
		33			1190			15			
Oct	"	34 10		A.P.				15			
				3233 CRCR 10/10/18	973						
				3361 " 24.10.18	973				1511		
		34 10			1946			15			
Nov	"	33		A.P.				15			
Dec & Jan	P.P.	68 20		3636 Base 17/11/18	1399						
				677 RCD 25/11/18	1306						
				897 " 7/12/18	3733						
				C.A.P. Dec & Jan				30	4053		
		101 20			3078			45			
Feb	"	30 80		955. 23/1/18. R.C.D	373						
				1035. 7.1.19 "	373						
				b/f				15			
				Hosp: stoppages 23/1/19 - 3/2/19							
				12 days @ boz A.O 12. 14/2/19		720					
				b/f				15			
March	"	34 10		Hosp stoppages 4/3/19 to 25/3/19							
				22 days @ boz. A.O 21. 19/3/19							
				R.C.D.		1320			4757		
		64 90			746	2040		30			

NUMBER 55090 RANK Pte NAME MORRISON F.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mch 31	Balance forward								47 87		
ab/pl	P.P.	33		b.d.P.				15			
				~~ab~~ 54 50 21.5.19 Epsom	7 30						
Mar	"	34 10		b.d.P.				15	77 39		
		67 10			7 30			30			
Jun		33 00		b.a.P.				15			
				a.R. 2885 16.6.19. Epsom	2 43						
Aug	P. & A.	34 10		C.a.P.				15	112 04		
		67 10			2 43			30			
				145V 26/2/19 – 20/3/19 23 dys		13 80	P.R.C. 31/7/19				
				Do. 58 26/6/19 Rec Lost							
				aR 3354 7/4/19 C. SH Willy	24 43						
				9333 24/4/ R.B.C.	38 93						
				3846 17/7/ C SH Willy	4 87				52 01	V	
					46 23						
					46 23	13 80					
Sep				AR 1106 - Rwaij (End) 7.8.19	9 73				42 28		
					9 73						
				S.o.S. Can 13.8.19.							
				SL 106. B.C.D.							

112 04
46 23
65 81

55090 RANK Pte NAME MORRISON F.

PARTICULARS	Cr. 1.	Cr. 2.	PARTICULARS	Dr. 1	Dr. 2	Dr. 3.	Dr. 4.	BALANCE	DEFERRED	SEPARATION
ce forward								47 87		
P.P	33		b.d.P				15			
			~~ab~~ 54450 21.5.19 Epsom	7 30						
	34 10		b.d.P.				15	77 39		
	67 10			7 30			30			
	33 00		b.a.P.				15			
			a.R. 2885 16/6/19. Epsom	2 43						
P. + a.	34 10		C.a.P.				15	112 04		
	67 10			2 43			30			
						P.468				
			NSV 26/2/19 – 20/3/19 23 dys		13 80	31/7/19				
			Do 58 26/6/19 Rec Lect							
			aR3334 7/7/19 b. SH Willy	24 13						
			9333 24/7/ R.bbb	38 93						
			3846 17/7/ b SH Willy	4 87				52 01	✓	
				46 23						
				46 23	13 80					
			AR 1106 - Rwrd (End) 7.8.19	9 73				42 28		
				9 73						
			S.o.S. Can 13.8.19.							
			SL 106. B.C.D.							

112 04
46 23
65 81 ∠Pe

D.A. I
D.G. 3
S. 9. 33

WAR SERVICE RECORD
CLASS-A-NO. 389116

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 550901

2. Rank. Pte

3. Name. MORRISON - Frank

4. Unit. R.C.D

5. Date of Discharge AUG 26 1919 Place ~~TORONTO, ONT.~~

6. Reason for Discharge DEMOBILIZATION

7. Authority. No.2 District Depot, Part II, D.O. No. 241

8. Proposed Residence after Discharge 909 Bathurst St Toronto

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.?

Frank Morrison
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

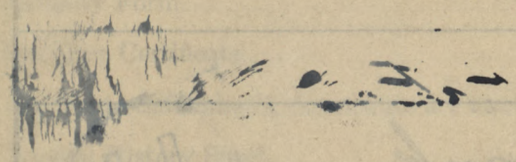
Place No. 2 DISTRICT DEPOT

Date AUG 26 1919

TORONTO

Signature H Sargent Capt
For
O.C. No. 2 District Depot.
(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.



LIST OF DISCHARGE DOCUMENTS.

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

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

Group B 10

Checked by No. Pw

Date 12. 8. 19

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Military Camp DATE 7th Aug 1919.

1. 1 (a) Unit I Dispersal (b) Regimental No. 500901 (c) Rank Pte

(d) Surname MORRISON (e) Christian name Frank

(f) Home address 909 Bathurst St Toronto Ont.

(g) Next of Kin John Morrison (h) Relationship Father.

(i) Address of Next of Kin 909 Bathurst St Toronto Ont.

2. Age last birthday 22 Date of birth 28th Nov 1896.

3. Enlistment, or Appointment (if an Officer) (a) Place Toronto (b) Date 24 7 18

4. Personal description:

(a) Height 5-1 (b) Weight 1 st. 7 (stripped) (c) Complexion dark

(d) Colour of hair dark (e) Colour of eyes blue (f) Identification marks, Scars, etc. Pacer mark left arm - Chicken head.

5. Former trade or occupation Clerk

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	1	13

	Periods From	Periods To
Canada	24 7 18	28 7 18
England	15 8 18	11 11 18
France or other theatres of War	13 11 18	13 5 19

7. Original disease, or injury P.D.S.

(a) Date of origin Jan 1919 (b) Place of origin Belgium

(c) Cause Influenza

M. F. B. 227.

400M.—11-18.
1772-30-117.

*8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

(NDS) - no apparent disability.

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Has no complaints. Feels perfectly well.
Venereal warts in large number around glans.
Wasley Special Hosp. 28-7-19.
"Wassermann negative".
Sgd. McIlraith, capt.

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above? (Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System: no
Cardio-Vascular System: no (If pulse rate is abnormal, B. P. will be taken.)
Genito-Urinary System: no (Albumen and Sugar will be excluded.)
Special Senses: no
Respiratory System: no
Integumentary System: no
Disturbances of Mentality: no
Digestive System: no
Muscular System: no
Osseous and Joint Systems: no
Any other general condition: no

10. (a) History (of the condition referred to in Section 9 (a).)

Contracted NDS in Belgium 14th Jan 1919.
Treated at No 3 Lg. H.; No 8 Stat. Hosp.; ~~Lad~~
Epsom and Wasley Specials.
Received doses Ag - 9
doses Hg - 9
Received prolonged treatment venereal warts without removal.

10.—(*b*) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (*a*).)

Influenza – 25-7-17 to 24-10-17 – recovered
Defective hearing 16-1-18 to 19-1-18 recovered
V.D. 23-1-18 to 7-6-18 recovered

(*c*) (Here give a description of wounds, scars and deformities.

vaccination mark left arm (chickpox)

11.—(*a*) Did the disabling condition have its origin before enlistment? no

(*b*) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

N A

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? (a) yes (b) no

The regimental documents will be referred to.
(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 3 mos.

14. Treatment (Case reports, general or special, should be secured and attached where possible.)

~~no~~ See 10 A

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?
(If the answer is "yes" state nature of treatment required and probable duration)

Medical Board suggest he be treated on return to Canada in accordance with P.C. 1487 25-11-18

16. Can the former trade or occupation be resumed? yes
(If not, briefly state why)

17. Recommendations

E M Blair Capt.
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned Frank Morrison have heard the description of my disability and present condition read, and am satisfied (~~or not satisfied~~) with it. (If dissatisfied, statement should follow.)

I complain in addition of

F Morrison Rank.
Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticised.

Yes.

19. Is the invalid fit for

(a) General service,	(Category A)	(Yes or ~~No.~~) Yes a
(b) Service abroad, not general service,	(" B)	~~(Yes or No.)~~
(c) Home service (Canada only),	(" C)	~~(Yes or No.)~~
(d) Temporarily unfit.	(" D)	~~(Yes or No.)~~
(e) Unfit for service in Categories A, B and C	(" E)	~~(Yes or No.)~~

20. It is certified that the invalid

(a) ~~Does require treatment.~~ (Give the nature of the condition and of the treatment required and its probable duration.)

To be dealt with on arrival in Canada in accordance with PC 947 of 20/1/19

(b) ~~Does not require treatment.~~

(c) ~~Should pass under his~~ own control.

(d) ~~Should not pass under his~~ own control.

(Strike out condition not applicable.)

21. ~~It is recommended that the invalid be discharged.~~ (When not for discharge add special recommendation.)

B.T.C. auth Reg. 9083 of 11/4/18

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

J. Macdonald Capt. President.

PLACE Witley

DATE 7/8/19

Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned ..... understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness ..... Signed .....

Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

..... President

PLACE .....

DATE .....

Members

APPROVED BY

for Assistant Director of Medical Services.

DATE 7-8-19

APPROVED BY

Director-General of Medical Services.

DATE .....

Hut 71

164

LABORATORY

PARTICULARS OF CASE FOR WHICH WASSERMANN TEST IS REQUIRED.

The particulars below are required for statistical purposes and future reference. Unless these are furnished the test will not be carried out.

NAME Morrison J. Reg.No 550901 Rank Pte

Unit R.C.D. Date of first sore 11/1/19 If T.Pallidum found ...

Secondaries, if any — Arsenical 9

Mercury 9 Previous Wassermann, date 10/7/19

Result Pos +++

Station and Date Woodcote Park Epsom 26/5/19

---oOo---

Capt., C.A.M.C.
M.O. No. 2 Division.

RESULTS OF WASSERMANN (ORIGINAL) QUARTER SYSTEM

Date ..... Serial No ..... Result .....

WASSERMANN NEGATIVE

Military Convalescent Hospital,
Woodcote Park, Epsom, Surrey.

.....1919.

24

"SAXONIA" 23.8.19

DISPERSAL "I"

AUDITOR 80 | PAYMASTER

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

M. OR S. | REGT. No. 550901 | RANK Pte | NAME (IN FULL) MORRISON, F. (BLOCK LETTERS SURNAME FIRST) | Mg 159 (26)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. Cavalry | IF IN P.F. WHAT UNIT? Dominion Bank Toronto.

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 27/7/17 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY 15-00 | DATE EFFECTIVE 31-8-19 | Closed by Ottawa

PAYABLE TO Mrs Florence Keys. | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS 909 Bathurst St. Toronto Ont.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE Toronto | DATE 26.8.19 | REASON Demob | AUTHORITY D.O. 241 | IF ENTITLED TO POST DISCHARGE PAY? Yes

T.O.S. 12/8 D.O. 241
PARTICULARS OR REMARKS
SUBS. ..... TO ..... D.O. .....

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.			TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.			TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					
31.7.19							65	81	65	81																									65	81	Cr Bal on L.P.C.
28.8.19	28	1/10	30	80	35 70				135	80	1106						9	73													9	73					W.Sy. 6th all. & all.
											6875						169	01	4	87	5	—	15	—							191	88					Boat Club Boat Train Adj. AP
									201	61																					201	61					80
					W.S.G.																						W.S.G.						AMOUNT DUE SOLDIER DEPENDENT			
																											70 —										W.Sy. as above
																											2 20										Pd over 6 days
153 days			350 —				350 —										Aug. Sept. 26/19														72 20		277 80				1st W. S. Gratuity by #2 D.D.
																	Sep 24	1414	830	AR	146		67 80								140		210				
																	Oct 2										13 80				153 80		196 70				23 days @ 60c
																	Oct 23	1423	119	AR	70		56 20								210		140				See file
																	Nov 25	1429	173	AR	198		70								280		70				
																	OR 218	Dec 18	1735	253			70								350						
							350	00															264	00			86	00			350	00					

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

200M-3-19.—L. ... 58/89-... & L. 9983.
M. F. W. 2.96.
1772-39-1390.

Date of Enlistment 26-7-17

MILITIA AND DEFENCE

Separation and Assigned Pay Branch M 25265

OVERSEAS CONTINGENTS

Date of Assign 1-8-18

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15-00			

11 f 6 m 6 E3

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion Royal Canadian Dragoons. Dft. 99

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1 MRS.FLORENCE KEYS.
909 BATHURST ST.,
2 TORONTO,ONT. 15 15.00
% 550901 PTE FRANK MORRISON
3 FIFTEEN DOLLARS
4

Date	Cheque No.	Amount S/A	Amount A/P	Total	
1918 Aug	X 41016		15	15	✓
Sep	U 42820		15	15	✓
Oct.	H 54062		15	15	✓
Nov.	U 57260		15	15	✓
Dec	X 67581		15	15 ✓	✓
1919 Jan	U 72572		15	15	✓
Feb	W 76867		15	15	✓
Mch	M 86110		15	15	✓
Apl	P 3738		15	15	✓
May	G 8224		15	15	✓
June	H 11350		15	15	✓
July	G 11573		15	15	✓
Aug	P 13469		15	15	
			195	195	

REMARKS 013134-71-32

A/c Closed 31-8-19

Ret'd per Saxonia

Date 23/8/19 M.D. 187 9/9/19

Closed A F Draper

Made Cht. 112474 to Deo 9/9/19

AUDITED

AUTHORITY FOR NEW ACC'T. M.D. 2-B-6 a. Armstrong 17-8-18

ENTER AUD AUG 19 1918 BY R.T.N VOUCHER SECTION

M. F. W. 128
400M.—6-17—172-39-1141
L. L. 22520—M. & D. 7993.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS

M. F. W. 128
400M.—6-17—1772-39-141
L. L. 22230—M. & D. 7983.