

ATTESTATION PAPER.

No.

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?..... Granville
- 1b. What is your present address?..... 667 Tremont St., Boston, Mass.
- 2. In what Town, Township or Parish, and in what Country were you born?..... Lock Lomond, N.S.
- 3. What is the name of your next-of kin?..... Roderick D Morrison (Father)
- 4. What is the address of your next-of-kin?..... Roderick D. Morrison
- 4a. What is the relationship of your next-of-kin?..... Lock Lomond, Richmond County, N.S.
- 5. What is the date of your birth?..... Father Dec 1888
- 6. What is your Trade or Calling?..... Carpenter
- 7. Are you married?..... No.
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... Yes
- 9. Do you now belong to the Active Militia?..... No.
- 10. Have you ever served in any Military Force?..... No.
- 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. * G. M.
- 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. * G. M.
- 16. If so, what was the reason?.....

SUFFICIENT ADDRESS
y H W

14
13

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Granville 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.

Granville Morrison (Signature of Recruit)

Date..... August 7,..... 1918 A. Ashton Sgt..... (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Granville 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.

Granville Morrison (Signature of Recruit)

Date..... August 8,..... 1918 A. Ashton Sgt..... (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 Boston, Mass this 7 day of August 1918.

[Signature] (Signature of Justice)

Description of Morrison, Granville on Enlistment.

Apparent Age 29 years 8 months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 11 1/2 ins.

Chest measurement { Girth when fully expanded 37 1/2 ins.
 Range of expansion 2 ins.

Complexion Fair

Eyes Blue

Hair Brown

Religious denominations.
 Church of England
 Presbyterian.....
 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.)

Varicocele lt.

Scar inner of leg

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 20 1918 191 .

Place BOSTON, MASS.

J. R. McNamee, 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.

Granville Morrison having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

Date AUG 12 1918

[Signature] (Signature of Officer)

Date..... 191 .

O. C. Engineer Training Depot

REGIMENTAL DOCUMENTS

NAME *MORRISON Granville*

REGT. NO. *2014256* UNIT *C.E.R.D.*

H. Q. FILE NO.



CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

1 *9* ATTESTATION PAPER (M.F.W. 23, 133, or 51)

CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

TRAINING HISTORY SHEET (M.F.W. 113)

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)

1 DENTAL HISTORY SHEET (M.F.B. 465)

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1 MEDICAL EXAMINATION (M.F.W. 129)

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LAST PAY CERTIFICATE (M.F.W. 44)

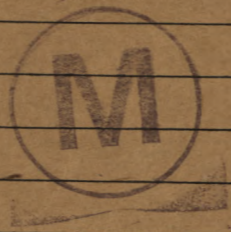
1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)

PARTICULARS OF CHARACTER (A.F.W. 3226)

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

3 *Misc*
1 *OB3*
1 *127*

103



**PUBLIC ARCHIVES
RECORDS CLERK**

34144

DEATH

Category

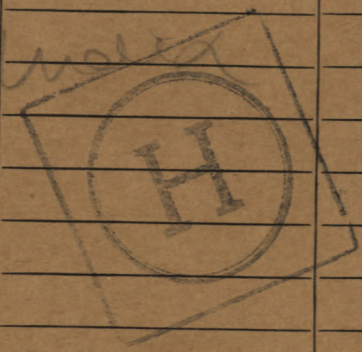
DISCHARGE

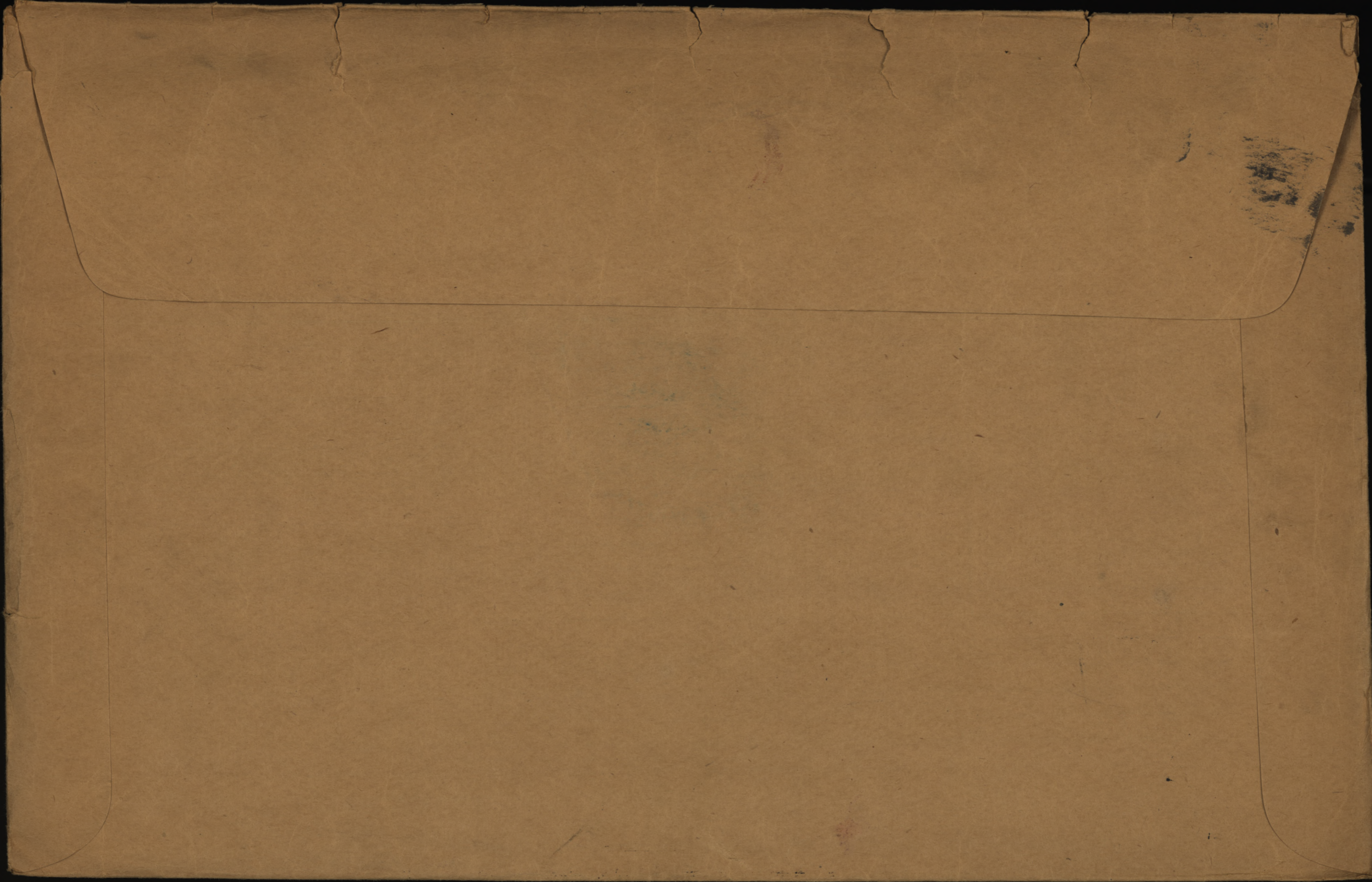
Category

Demol

DESERTION

480135





Surname Morrison
 Christian names Granville
 Regtl. No. 2014256 Rank Spr.
 Unit Can. Eng. Tr. Sps.
 H. Q. B6
 M. D. No. 4
 T. O. S. Aug 7th 1918
 D. O. Pt. II. 224 of 12-8-18
 S. O. S. Dec 13-7-1919
 Reason Demob
 Auth. Co 190 of 9-7-19
46 1918

Next of kin Morrison, Roderick D Relationship Father
 Address Lock Leonard
Richmond, Co. N.S.
 Also notify:

BORN—Place Canada, Lock Leonard, N.S. Date Dec 1888
 ATTESTED—Place Boston, Mass. Date Aug 7th 1918
 O/S: 30/8/18 1413
 R/C. 3/7/19 364
28 Spr



immor
Call

Number 2014256 Rank  Sp 1 

Surname MARRISON

Christian Name Grenville

Units Co C Theatre of War Eng

Date of Service 16.9.18

Remarks

Latest Address Loch Lomond Richmond Co
N.S.

Roll No. *A Page 1017*

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

Casualty Form—Active Service.

Canadian Engineers.

Unit, Regiment or Corps
 Regimental No. 2014251 Rank Sapper Name Morrison Granville
 Enlisted (a) 7/8/18 Terms of Service (a) C.E.F. Service reckons from (a) 7/8/18
 Date of promotion to present rank Date of appointment to lance rank Numerical position on roll of N. C. Os.
 Extended Re-engaged Qualification (b) Carpenter

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 Montreal		30.8.18	Stuy.
		Arrived Liverpool		16.9.18	Saturna
28-9-18	3rd. CERB TOS	3rd. CERB from Canada	Seaford	17-9-18	Pt. II. D.O. #47.
28-9-18	3rd. CERB	On Command Frencham	Seaford	17-9-18	Pt. II. D.O. #47.
13-11-18	3rd. CERB	Off Command Frencham	Seaford	12-11-18	Pt. II. D.O. #86.
12-12-18	3rd. CERB	On Command Buxell	Seaford	12-12-18	Pt. II. D.O. #100
4-2-19	3rd. CERB	Off Command Buxell	Seaford	2/1/19	Pt. II. D.O. #129
24 FEB 19	3rd. C.E.F.	On Command to CCC Bramshott	SEAFORD	24 FEB 19	Pt. II. D.O. #46
8-6-19	"G" W. S.O.S.	to "A" Wing, Can. Corps Camp.	Bramshott	8-6-19	Pt. II. D.O. no. 38
		S.O.S.O.M.F. of C. ON			Auth by 2 D.O. no. 38

28/6/19 PROCEEDING TO CANADA FOR

(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				

28/6/19
 13/7/19

T. O. S. No. 6 D. D. from *CP* and posted *Diatta B. H. No. 190*
PCS on his charge

190

Albuquerque
 Officer in Charge Records No. 6 D. D.

24-7-19 O/c Rec. S.O.S. of om. to
 EDA Personnel to Canada

London 28.6.19 a.o.i.

Supervisor
Dr. DofA

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge Issued,
Class.....No.....

THIS IS TO CERTIFY that No. 2014256 (Rank) Sapper

Name (in full) Morrison Granville enlisted in
the Can. Engineers

CANADIAN EXPEDITIONARY FORCE at Boston Mass. on the 7th
day of August 1918

HE served in 3rd C.E.R.B. England

Demobilization.

and is now discharged from the service by reason of

~~Medical Unfitness.~~

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

Age 30 yrs.

Height 5' 11 ³/₄ "

Complexion Fair

Eyes Blue

Hair Brown

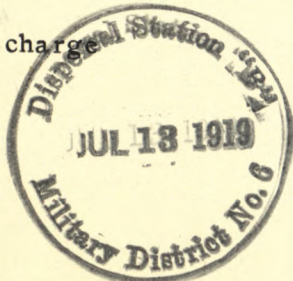
Granville Morrison

Signature of Soldier.

Marks or Scars.....

Mole over left eye

Date of Discharge



H. S. Billman
Capt
O. C. Dispersal Station "B"
Issuing Officer.

HALIFAX, N. S. Rank 4 JUL 4 1919

Date..... 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.

2014222
 Morrison
 Gen. Engineers
 Boston Mass.
 1st
 3rd C. E. R. B.
 Bradford

Make over left eye

80 No.
 2 11 7
 Fair
 13
 13

- 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.

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

"G" WING,
CANADIAN CORPS CAMP.

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. 2014356 Rank Spr Surname Morrison
(Given name in full)
Unit or Corps 3rd CERB Birthplace Granville Loch, Comond, U.S.A.
(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer.) Can

I. GENERAL DESCRIPTION:

Physique good Weight 189 lbs. Height 5 11 3/4 ft. Colour of Eyes Blue
Nutrition good
Pulse 90 regular
Condition of arteries soft
Vision Rt. 6/20 Left 6/20
Hearing (conversational voice) Rt. 20 ft. Left 20 ft.

Identification marks, scars, or deformities,
(Give cause and date of origin).
Mole over left eye

Opinion as to general health and physical condition Good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No") (Subjective evidence may be sufficient in certain cases.)

Nervous System No Genito Urinary System No Cardio-Vascular System No
Special Senses No Integumentary System No Respiratory System No
Disturbance of Mentality No Muscular System No Digestive System No
Osseous and Joint System No Any other general condition No

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

Received left prior enlistment
No disability

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Bramhall (Overseas)

Date 3-6-19

Signed [Signature] M.O.

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

Signature [Signature]

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

THIS SECTION FOR USE IN CANADA—

Examined at(Canada)

Date

Signed M.O.

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

Signature

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

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

[Handwritten mark]

Rank Name **MORRISON, Granville** Reg'l No. **2014256**
 Unit **135th Dfl Engineers** If in perm. Corps, }
 What Unit? } Married or Single **Single**
 Place and Date of Enlistment **Boston Mass. Aug 7, 1918** Place of Birth **Lock, Somond, n.s.**
 Name and Address, Next-of-Kin **Roderick, W. Morrison**
Lock, Somond, Richmond Co. n. s. Canada Relationship **Father**

Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship

NJE. R.B. NO **23036**
 File R.L.
 Catalogue **CAN. OR**

Discharge, Date and Place Reason Character

H. W. & V., Ltd.—9546-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
					Arrived in England. 16, 9, 18 SATURNIA
28. 9. 18	36LRP.	T. O. S from Canada.	Seaforth.	16. 9. 18	PEO. 47.
11. 4. 19	"	S.O.S. to D Wing C.P. Beau	"	11. 4. 19	.86
28-5-19	Wing 666.	S.O.S. of P.O. cadre.	Bransford.	28-5-19	NO 27.
8-6-19	--	S.O.S. of P.B. to Quinig	--	8-6-19	0038
23.7.19	O/c R	S.O.S. of OMFC having sailed to Canada	London	28.6.19	after order 1 Eng. Ru

Engine

min

94-B-21 28.6.19 *to Wing 39-10⁷/₁₉*

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) MORRISON, A.
 REGIMENT 26 RB RANK Spr. No. 2014256
 Date of Examination in England 23/5/19 Date of Examination in France _____

DIRECTIONS TO DENTAL OFFICERS

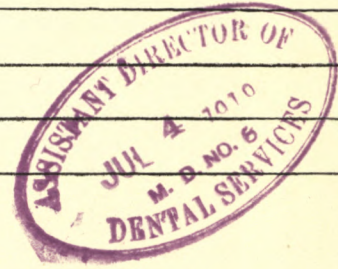
1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated

A



PRESENT DENTAL REQUIREMENTS

1. FILLINGS
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 *E. Berry Capt.*

A



RECEIVED

RECEIVED

RECEIVED

RECEIVED

RECEIVED

RECEIVED

RENSHAM

AUTHORITY
A.P. NOM. ROLL

ASSIGNED PAY.	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.	NAME: MORRISON Granville
EFFECTIVE DATE:- 1.9.18.		EFFECTIVE DATE:-		NUMBER:- 2014256.
AMOUNT:- 15 ⁰⁰		AMOUNT:-		PARTICULARS OF RANK OR APPOINTMENT
NAME, ADDRESS, RELATIONSHIP & AUTHORITY				AUTHORITY
Mr Rodrick D Morrison Lock Lomond (Father) Richmond Co. N.S.				L.P.C. from Canada
Stop 1.7.19				DATE EFFECTIVE
				1.9.18
				RANK OR APPOINTMENT
				Sapper
UNIT AND TRANSFERS				
ORIGINAL UNIT Draft No. 125. Cambing				
DATE ACCOUNT FIRST OPENED:- 1.9.18				
AUTHORITY				
DATE EFFECTIVE				
DATE LEDGER SHEET T'S'D				
UNIT TRANSFERRED TO				
B.E.J.C				

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
2/5	5151		9.75				
13/6	10776		38.93				
			18.66				

L.P.C. Ledger Bal 25.46
10 7/12

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS CE ALL'CE
L.P.C. from Canada	1	-	10	

PARTICULARS OF RENDERING NON-EFFECTIVE:-

trans to Canada 7/14 K10784 Willey 14/6/19 Willey A. Wing 17/6/19 MD 6.

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
1918											
31. 8	Bal. from Canada								12.50		
Sep	Spro Pay	33		C.A.P.				15			
				AR 6477 Trenoham 20.9.18	4.87			15	2.563		
Oct	Pay.	34.10		C.A.P.				15			
				7366. Trensham. 4/10/18	4.87						
				7671. " 14/10/18	19.47			15	20.39		
Nov	Pra.	33		C.A.P. Nov.				15			
				9019. Trensham. 8/11/18	4.87						
Dec	Pra.	34.10		1267. 3rd CERB. 23/11/18	9.73						
				5707. P.P.C.R. Hosp Bechill 12/18	14.60						
Jan	Pra.	34.10		C.A.P. Dec				15			
				C.A.P. Jan.				15	47.39		
Feb	Pra	10.20						15			
		30.80		81052. C.O.S.P. Bechill. 8/1/19	9.73						
				51311. T.P.C.R. 27/11/19	4.87						
				2396. 3rd CERB. 4/2/19	4.87						
				2761. " " 26/2/19	9.73						
				2118. G. Wing C.C.C. 13/3/19	4.87						
				2532. " " 25/3/19	9.73						
Mar	Pra.	34.10		C.A.P. Feb				15			
				C.A.P. Mar.				15	38.49		
		64.90						30			
Apr				AR. 520. 9 th 19. G. Wing ccc	4.87						
				" 2962 28 th 19 " "	9.73						
				" 4208 14 th 19 " "	4.87						
				barred for	19.47						

COMPILED BY

CHECKED BY

A.W. Hatcher
A. W. Hatcher

10817701

NUMBER	RANK	NAME	MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
							Brok Ford	19 47				38 49		
Apr				Pda	33 -		C. A.P. Apr & May				30 -	105 69		
May				"	34 10							56 12		
					67 10			19 47			30 -			
June					33 =		C. A.P.				15 =			
							AR 5151 27 ⁵ / ₁₉ 4.6665 975							
							10796 13 ⁶ / ₁₉ "A" "	38 93				25 46		
					33 -			48 66			15 -			
							Lot Canada 28 ⁶ / ₁₉							
							Lt. 94							

~~War Service Badge~~
Class "A" No.

Cancelled *JSS*

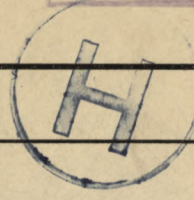
SHORT FORM.

PROCEEDINGS ON DISCHARGE.

D. A. *B*
O. G. *2*

War Service Badge Issued,
Class.....No.....

(Demobilization.)



1. No. *2014256*

2 Rank. *Sapper*

3. Name. *Morrison* *Granville*

4. Unit. *C. C. R. D.*

5 Date of Discharge *13/7/19* Place *Halifax*

6 Reason for Discharge.....
.....
.....
.....
.....

DEMOBILISATION.

7. Authority. *R. O. 1420*

8. Proposed Residence after Discharge *Loch Lomond, Richmond County N.S.*

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. ?

Granville Morrison

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place..... *HALIFAX, N.S. JUL 4 1919*

Date.....

Signature..... *J. R. Skillman* *caps*
O. C. Dispersal Station "B"
(O. C. Discharging Unit.)

SD
29.3.61

PROCEEDINGS ON DISCHARGE

(Demobilization)

1. No.	
2. Rank	
3. Name	
4. Unit	
5. Date of Discharge	
6. Reason for Discharge	
7. Proposed Residence after Discharge	
CERTIFICATE TO BE SIGNED BY SOLDIER	
I hereby acknowledge that at the undated place and date I received my discharge Certificate	
M. R. W.	
Signature of Soldier	
CONFIRMATION	
The discharge of the above named man is hereby confirmed	
Place	
Date	
Signature	
(O. G. Discharge Unit)	

LIST OF DISCHARGE DOCUMENTS

Medical Form W. 22	Attestation Paper, Applicant
Medical Form W. 138	or Physicians of Record
Medical Form W. 118 or A.F. B. 122	Field Conduct Sheet
Medical Form W. 54 or A.F. B. 103	Casualty Form
Medical Form W. 44	Last Day Certificate
	Certificate that missing documents are unobtainable
Medical Form B. 813 or A.F. B. 115	Medical History Sheet
M.F.B. 237, A.F. B. 118 or A.F. A. 45	Proceedings of Medical Board
Medical Form B. 465	Dental History Sheet
M.F.W. 120 or D. M. S. 1875	Medical Report
Medical Form B. 263	Regimental Conduct Sheet
Medical Form B. 224	Company Conduct Sheet

1918

1917

1916

1915

1914

1913

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 (A.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 (D.A.D.M. 5003a).
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings of Med. Board (A.F.B. 218a)
8. Discharge Certificate (M.F.W. 44)
(One of 11 special versions (260.1)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (D.D. 1)
11. Equipment Statement Q.M.G. Form (D.O.S. 2), and Clothing
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

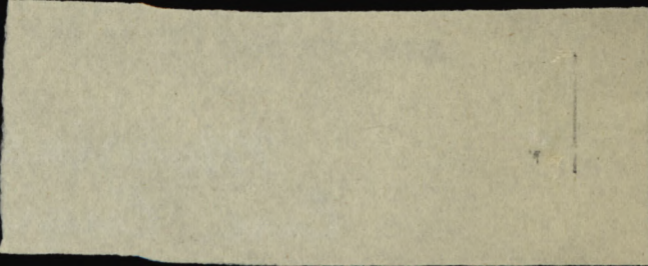
Group..... B

Checked by No:..... 12

Date..... 25 JUN 1919

ELIGIBLE FOR CLASS "C"

HALIFAX, N.S. JUL 4



Date of Enlistment 78-18

MILITIA AND DEFENCE

M. 25466

Date of Assignment

Separation and Assigned Pay Branch

1 Sept. 1918

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

15 ⁰⁰ / ₁₀₀			
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9411228

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.				
Rank	Promoted	Reverted	Discharge	
Soldier's Name				
Battalion	Ban. Engineers Dft 123			
Beneficiary				
Relationship				
Address				

Name			
Address			
Change of Address			
1	RODERICK D. MORRISON,		
	LOCH LOMOND,		
2	RICHMOND CO. N.S.	15	15.00
	% 2014256 SPR GRANVILLE MORRISON		
3	FIFTEEN DOLLARS		
4			

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1918					
Sep	245032		15	15	✓
Oct	6454073		15	15	✓
Nov	2157272		15	15	✓
Dec	X 67587		15	15	✓
1919					
Jan	2172582		15	15	✓
Feb	W 76876		15	15	✓
March	M 86119		15	15	✓
April	P 3747		15	15	✓
May	S 8231		15	15	✓
June	H 11355		15	15	✓
July	G 11576		15	15	✓
				165	165

013134-9.65

Alc Closed 31.7.19
 Ret'd per *Warrant*
 Date 4.7.19... M.T.W. 187
 Clerk *R. J. ...* 17.7.19
 JUD M R O P 113596-10-1919

M. F. W. 128
 4000-637-172-39-1141
 L. L. 22220-M. & D. 1433.

AUTHORITY FOR NEW ACC'T. M. D. H. B. M. M. Shipley 17/9/18

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

~~CANCELLED~~

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. _____

Rank _____ Promoted _____ Reverted _____ Discharge _____

Soldier's Name _____

Battalion _____

Beneficiary _____

Relationship _____

Address _____

Name _____

Address _____

Change of Address _____

1 _____

2 _____

3 _____

4 _____

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
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M. F. W. 128
 4004-6-17-1772-39-141
 L. L. 22220-M. & D. 1993.

AUTHORITY }
 FOR }
 NEW ACC'T. }

MEDICAL HISTORY SHEET.

~~13740~~

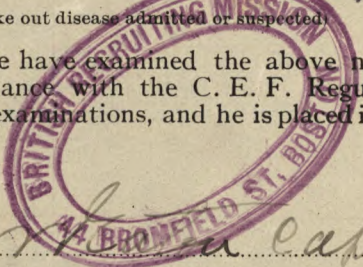
1. Surname Morrison Christian name Granville,
2. Number of report for service or claim for exemption according to Postmaster's Receipt or schedule
3. Consecutive number on schedule of men reporting for service (if he appears on it)
4. Address (including street and number if any) 667, Tremont Street, Boston, Mass.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 20th day of July 1918, by the undersigned medical board sitting at BOSTON, Mass.

5. Age as stated 29 Years 8 Months. 6. Apparent age 29 Years 8 Month
7. Height 5 Feet 11 3/4 Inches. 8. Weight 154 Pounds.
9. Chest measurement (Minimum 35 1/2 Ins. Maximum 37 1/2 Ins.) 10. Complexion Fair (Eyes Blue Hair Brown)
11. Physical development Good (Good Fair Poor) 12. Smallpox marks
13. Number of vaccination marks (Right arm Nil Left arm Nil) 14. When vaccinated last
15. Distinctive marks and marks indicating congenital peculiarities or previous disease Scar inner of leg

16. Slight defects but not sufficient to cause rejection Varicel l.
The man denies having had (Rheumatism, Tuberculosis, Nervous or Mental disorder, Epilepsy, Syphilis, Asthma, We find no evidence of past (Rheumatism, Tuberculosis, Nervous or Mental disorder, Epilepsy, Syphilis, Asthma)
(Strike out disease admitted or suspected)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category A2
17. (a) Vision. R 20/15 L 20/15
(b) Hearing. R O.K. L O.K.



Signature of Man Granville Morrison

J. P. McMan Capt President.
Joseph Williams Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
14/8/18		<u>667 U.</u>	9/8/18	<u>TAB</u>	<u>bb. drink heart</u> M. O.
			14/8/18	<u>1cc</u>	<u>After receipt</u> M. O.
			20/8/18	<u>1cc</u>	<u>TAB complete</u> M. O.

Joined 7th day of August 1918 at Boston, Mass.

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>Canadian Engineers</u>	<u>2014256</u>		<u>7 Aug 1918</u>
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT
<u>ST. JOHNS, P. Q.</u>	<u>AUG 14 1918</u>		<u>A2</u> President Medical Board <u>St. Johns, P. Q.</u>

If raised in category, record category in a square. The M. O. will initial and date.

