

ATTESTATION PAPER.

No. 2250505  
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? **Harry**
- 1b. What is your present address? **Whitefish, Ont.**
- 2. In what Town, Township or Parish, and in what Country were you born? **Lakefield, Ont.**
- 3. What is the name of your next-of-kin? **Mamie Morrison**
- 4. What is the address of your next-of-kin? **Whitefish, Ont.**
- 4a. What is the relationship of your next-of-kin? **Daughter**
- 5. What is the date of your birth? **June 3rd, 1912. 1879**
- 6. What is your Trade or Calling? **Bushman**
- 7. Are you married? **Widower**
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated? **Yes**
- 9. Do you now belong to the Active Militia? **No**
- 10. Have you ever served in any Military Force? **No**  
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement? **Yes**
- 12. Are you willing to be attested to serve in the } **Yes**  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }
- 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? **No**
- 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? **No**

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, **Harry 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.

*Harry Morrison* (Signature of Recruit)

Date **March 14th, 1917** *A. A. Beeth* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, **Harry 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.

*Harry Morrison* (Signature of Recruit)

Date **March 14th, 1917** *A. A. Beeth* (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 **Sudbury, Ont.** this **14th** day of **March** 191 **7**.

*A. A. Beeth* (Signature of Justice)

TRIPPLICATE

Description of Harry Morrison on Enlistment.

Apparent Age 37 years 9 months.  
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height 5 ft. 5 1/2 ins.

Chest measurement { Girth when fully expanded 36 1/2 ins.  
 Range of expansion 3 ins.

*Scar on right calf.*

Complexion Dark

Eyes Blue

Hair Black

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date March 14th, 1917. 191

Place Sudbury, Ont.

\*Insert here "fit" or "unfit."

Medical Officer.

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:—

DECLARED FIT BY MEDICAL BOARD  
 SUDBURY MOBILIZATION CENTRE

*G. B. [Signature]* M.O.  
 PRESIDENT  
*[Signature]*

CERTIFICATE OF OFFICER COMMANDING UNIT.

Harry 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]* (Signature of Officer)

Date March 14th, 1917. 191

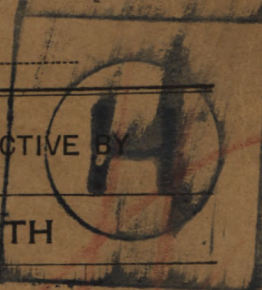
*O-L Store by Depot*

REGIMENTAL DOCUMENTS

14-3-19  
 PTE  
 NAME MORRISON

HARRY REGT. NO. 2250505 UNIT 67C

H. Q. FILE NO.



CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505 REFERENCE

NON-EFFECTIVE BY

57  
 2

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

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

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TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)

PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)

DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)

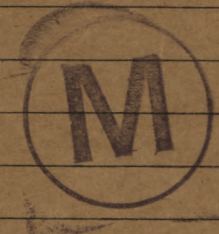
LAST PAY CERTIFICATE (M.F.W. 44)

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

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

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

1 MFW 192  
 1 MFC Form 132  
 1 AFB 179  
 1 MFC 179



34154

DEATH

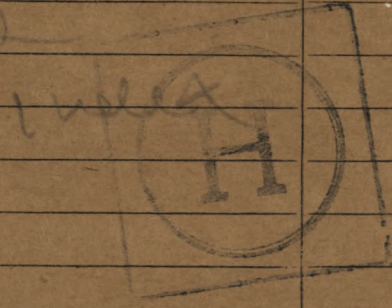
Category

DISCHARGE

Category

*Demobilization*

DESERTION



64106

**DUPLICATE**

To be made out in duplicate.

H.Q. 54-21-23-53

**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..... *Freestey*

(2) Regimental Number..... *2250 505*

(3) Full Name of Soldier..... *Harry Houston*

(4) Place of Birth..... *Lakefield Ont*

(5) Are you married, or not?..... *No*

(6) If married, state,  
 (a) Full name of your wife.....  
 (b) Present Postal Address.....

(7) Are you a widower?..... *Yes*

(8) Have you any children?.....  
 If so, give number of boys and girls..... *girl.*  
 Also their names and ages..... *Maemie age 12*

37000000

(9) Is your Father alive?.....

Yes  
James Morrison  
Co.

If so, state name and address.....

(10) Is your Mother alive?.....

If so, state name and address.....

(11) If your Mother is a widow.....

Are you her sole support, or not?.....

(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.

(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.

(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.

(15) Are you insured?.....

Yes

If so, in what Company?.....

Have you made arrangements for payment of your Insurance premium.....

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

G. H. Francis

MAJOR

O. C. FORESTRY DEPOT M. D. No. 2

Officer Commanding.

Date June 11<sup>th</sup> 1917.

*msf*  
*Call*

*P*

*B*

*V*

Number. . . . . 2250505 . . . . . Rank. : . . . . A/Sgt.

Surname. . . . . MORRISON . . . . .

Christian Name. . . . . Harry

Units . . . . . G. A. Co. . . . . Theatre of war. France

Date of Service. . . . . 29. 9. 17 . . . . .

Remarks. c/o Jas. Windle, Eng., Turbine, Out: 23/20

Latest Address. ~~W. A. Fish, Out~~

Roll No. "B" Page 755-8.

No.

RANK

NAME

T. O. S.

UNIT

M. D.

PAID  
FROM

PAID

TO

1925

SIG.  
OR  
REC'T

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS

AUTHORITY

DESP. OCT 27 1925

REGN. NO. 17488



SURNAME.

Marrison

CARD NO.

SOS Dem 26 3/19 2V

CHRISTIAN NAMES

Harry

Auth DO #2 DOF3

FOLL. 24-3-19

REGL. NO.

22505-05

RANK

Pte.

UNIT

Forestry Draft (M.D.2)

FORMER CORPS

nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Marrison, Mamie

RELATIONSHIP TO SOLDIER

Daughter

ADDRESS

Whitefish, Ont.

COUNTRY OF BIRTH

Canada Lakefield, Ont.

DATE

June 3<sup>rd</sup> 1849

PLACE OF ATTESTATION

Sudbury, Ont.

DATE

Mon. 14<sup>th</sup> 1914

L. L. 10437. M. & D. 7253.

O/S 25/10/17.

P/C. 1-3-19 276 / 42 Pte.

M. F. W. 22. 100M. -11-16. H. Q. 17 2-39-339.

FROM HALIFAX PER S S 'JUSTICIA' 25-8-17

MARRIED

SINGLE

WIDOWER

Yes

TRADE OR CALLING

Bush-man

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

37

YEARS

9

MONTHS

HEIGHT

5-

FEET

5- $\frac{1}{2}$

INCHES

CHEST MEASUREMENT

36  $\frac{1}{2}$

INCHES

EXPANSION

3

INCHES

COMPLEXION

Dark

EYES

Blue

HAIR

Black

DISTINGUISHING MARKS

Scar on R. calf.

MEDICAL EXAMINATION.

PLACE

Sudbury, Ont.

DATE

Mar. 14<sup>th</sup> 1914

Present address White Fish, Ont.

Name.....L. MORRISON Harry..... Rank Pte. Regtl. No. 2250505 ES.  
 Fyle Depot 24-Mo-468  
 Original unit..... Present unit C.F.C...... M. or S. Age 39 Religion Presb. Ref. H.Q.....  
 Port, ship and date of arrival..... Halifax Belgic 2-3-19  
 Next of kin..... Daughter Mamie Morrison Whitefish Ont.  
 Address on leave..... Same  
 Address on discharge..... Same  
 Transportation issued  Yes  No Date..... 26-3-19 Character on discharge..... Whitefish Sushery  
 Previous occupation..... Bushman Date and place of enlistment..... Sudbury Ont., March 14/17  
 Diagnosis..... Demobilization Date of Medical Boards..... 22-3-19

Date.	Remarks.	Pt. 2 Order No.
<u>T.O.S.</u> <u>23-2-19</u>	<u>Posted to Can. Co. (Ex. Camp) 2-3-19.</u>	
<u>26-3-19</u>	<u>Leave &amp; Subs. from 6-3-19 to 20-3-19.</u> <u>SOS DISCHARGED "DEMOB '19" ENTITLED TO W.S.G.</u>	<u>67</u> <u>83</u>

Date.

Remarks

Pt. 2 Order No.

M. F. W. 192

150m.—5-18

1772-39-1243

2250505

# ORIGINAL ORIGINAL MEDICAL HISTORY SHEET

B2

Surname Morrison Christian Name Harry

Examined { on 14th day of March 1917  
at Sudbury, Ont.

Approved by \_\_\_\_\_

Birthplace { City or Town Lakefield  
County Ont.

Rank \_\_\_\_\_ M.O.

Apparent age 37

Trade or occupation Bushman

Height 5- feet 5-1/2 inches

Weight 145- lbs

Chest measurement { Minimum 33 1/2 inches  
Maximum expansion 3 inches

Physical development Good

Small-pox Marks nil

Vaccination Marks { Arm Right Left  
Number 1 0

When Vaccinated last childhood 14/6/17

(a) Marks indicating congenital peculiarities or previous disease nil.

(b) Slight defects but not sufficient to cause rejection  
left shoulder stiff 12/5/17  
result of old 19/5/17  
fracture 26/5/17

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

DECLARED FIT BY MEDICAL BOARD  
SUDBURY MOBILIZATION CENTRE  
T. B. Richardson M.O.  
PRESIDENT  
SUDBURY, ONT.  
MAR 14 1917

Date	Result	VACCINATIONS
<u>14/6/17</u>		<u>J. B. Blayney</u> M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>12/5/17</u>		<u>J. B. Blayney</u> M.O.
<u>19/5/17</u>		M.O.
<u>26/5/17</u>		M.O.

Enlisted on 14th day of March 1917 at Sudbury, Ont.

	CORPS	REG'T NUMBER	HABITS	DATE
Joined on enlistment		<u>2250505</u>		
Transferred to	<u>C. Co. C.</u>			

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD

J. Mo

STATION	DATE	DISEASE	RESULT
<u>Summerville</u>	<u>3 Feb '19</u>	<u>Ankylosis Joint</u>	<u>B. A. H. Gardner Capt</u>
<u>Toronto</u>	<u>22/3/14</u>	<u>Left shoulder joint</u> <u>subluxation</u>	<u>B. A. H. Gardner</u>

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) MORRISON H.

REGIMENT 676 RANK Pte. No. 2250505

Date of Examination in England 3-2-19 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 none

2. EXTRACTIONS none

3. CROWNS none

4. DENTURES (a) Full Upper (b) Part Upper (c) Full Lower (d) Part Lower } none

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 yes

Signature of Dental Officer J. Reid Capt.





# CANADIAN EXPEDITIONARY FORCE

## Discharge Certificate

This is to Certify that No. **2250505.** (Rank) **Pte.**

Name (in full) **MORRISON, HARRY.** enlisted in  
the **C.P.C.**

CANADIAN EXPEDITIONARY FORCE at **Sudbury, Ont.** on the **14th**  
day of **Mar.** 19**17.**

HE served in **England and France.**

and is now discharged from the service by reason of

**"DEMOBILIZATION."**

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

Age **40.**

Height **5'5 1/2**

Complexion **Dark.**

Eyes **Blue.**

Hair **Black.**

*Harry Morrison*  
Signature of Soldier

Marks or Scars

**Vaccs. Scars on left arm.**

*Johnston*  
Issued by Officer

**O.C. No. 2 District Depot,**  
Rank

Date of Discharge **Mar. 26th, 1919.**

Appointment

Signed at **Toronto, Ont.** this **26th** day of **Mar.** 19**19.**

in Military District No. **72**

File Reference No. **TORONTO**

**EVC.**

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.

CANADIAN EXPEDITIONARY FORCE  
Discharge Certificate

No. (Rank) Name

Unit

Address on Discharge

Character and Conduct

Former Occupation

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks

Signed at this day of 19

Name of Officer

Rank

Appointment

Uniform is not to be worn after expiration of one month from date of discharge, except by special permission of G. O. C. district.

On demobilization the particulars called for on the back of this certificate will not be completed.

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

B. 11

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. 7250505 Rank Pte Surname Morrison  
(Give name in full)

Unit or Corps and 22 Birthplace Harry; Lapefield Ont.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 136 lbs. Height 5 5 1/2 ft. Color of Eyes Blue  
 Nutrition Normal  
 Pulse 78  
 Condition of arteries normal  
 Vision Rt. D 20 Left D 20  
 Hearing (conversational voice) Rt. 20 ft. Left 20 ft.

Identification marks, scars, or deformities.  
 (Give cause and date of origin.)  
1 scar on left arm

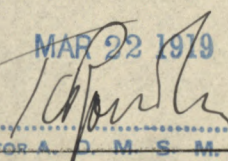
Opinion as to general health and physical condition Br.

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.

urine alb. neg. Sug neg.  
no hernia Haemorrhoids varicose veins varicocoele  
no gaiter. Partial ankylosis left arm  
Fractured in childhood, no aggravation.

APPROVED  
 MAR 22 1979  
  
 CAPT.  
 FOR A. D. M. S. M. D. R.

(If space is insufficient, continue on back of form.)

[OVER]

# EXAMINATIONS.

## THIS SECTION FOR USE OVERSEAS—

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.

Signautre .....

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

## THIS SECTION FOR USE IN CANADA—

Examined at...*Toronto*.....(Canada)

Date .....*22/3/1941*..... Signed .....*Alr Farrell*.....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 *H. Morrison*.....

(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.)

# DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 2

NAME OF SOLDIER

Marston Harry

REGIMENT

RANK  
Pte

No. 2260505

G. B. 465.  
FORM 6-18.  
1775-39-950.



## 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.

Condition on first Examination	Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhoxa	Synthetic Porcelain	Extracting	DENTURES			Gold Clasp	Gold Filling	CROWNS		Bridge Work	OPERATOR	Military District	REMARKS
												U	L	P			Gold	Porcelain				
<p><i>Discharge Exam.</i> At Exhibition Camp Date. <b>MAR 22 1919</b> } Certificate issued for</p> <p style="text-align: right; font-size: 2em; font-family: cursive;">Fit</p> <p style="text-align: right; font-size: 2em; font-family: cursive;">W. Sample Major</p>																						



**CR** Rank **MORRISON. Harry.** Name Reg'l No. **2250505.**  
 Camp Borden Forestry Dft. to <sup>If in perm. Corps, }  
 Unit <sup>What Unit?</sup> Married or Single **Widower.**  
 Place and Date of Enlistment **Sudbury, Ont. Mar. 14th, 1917.** Place of Birth **Lakefield, Ont.**  
 Name and Address, Next-of-Kin **Mamie Morrison.**  
**Whitefish, Ont., Canada.** Relationship **Daughter.**</sup>

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

N/E. R.B. No. **9945**  
 File R.L. ....  
 Category **ORGAN**

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.				
					A.F. 103 CHECKED 7 AUG 1917
		ARRIVED IN ENGLAND 5-7-17 S/S JUSTICIA			
7.7.11.	C.F.C. I L T O S	SUN DALE	47, 17 Pt II, O CI		
27-7-17	"	S.C. to #58 Coy Frame	Sundale	27-7-17	P.M.I. #78. #58 Coy C.F.C. P.M.I. #1, 20-8-17.
28-9-17	58 Coy C.F.C.	Appointed A/Sgt with pay	Pt Field	28-7-17	" 7.
25-10-17	"	Deprived of appointment of A/Sgt for drunkenness.	Pt " "	15-10-17	" 12.
15-1-19	"	ceases to draw working pay as Sawyer	Pt " "	30-12-18	" 2
30 I 19	58 COY	S, O S TO CFCBD S, DALE	25 I-19, D O 4		
13.2.19	B.D.C.C.	S.O. to 2 M.V.C.C. Rhyl	" Idale	13.2.19	P. II. 0.44
21.2.19	2 M.V.C.V.	T.O.S. from B.D.C.C.	" Rhyl	13.2.19	" 44.

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.				
22-2-19	2 MDCW S.VI CPC	St. Lawrence	St. Philips	22-2-19	S.110.56



# SERVICE AND CASUALTY FORM (Part I).

Army Form B. 103-I.  
Part I.

(1)*Substantive rank *Acting rank * [To be entered in pencil to facilitate alteration.] (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)	(2) Regiment or Corps	(3) Regtl. No.
---	-----------------------	----------------

(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 }	(Authority) (date)

Initials and Rank of  
an Officer,

(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) - (Signature of Posting Officer)

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

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

(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] If 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, Shoemg-smith, &c.

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

Nothing to be written in this margin.

W1889-PP 1150 IM 5/18 G.W.P.Co (3,4/50)

(A) Report		(B) Authority of Part II. of Orders	(C) 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.	(D) Place of casualty	(E) Date of promotion, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
Date.	From whom received					

13 FEB 1919

Attached C.O.C. Kinmel Park for  
return to Canada 10 days.  
No. \_\_\_\_\_ Ceases to be attached  
C.O.C. Kinmel Park on em-  
ing for Canada, Part II. Order  
No: 26 7-3-19 J.E. Brown  
Commanding 2 Wing,  
Kinmel Park Camp.

ALL VI FEB 23/19  
H. H. X MAR 2 19  
H. M. T \* BELGIC

FEB 23 1919 O.S. T. O. S. No. 2 DISTRICT DEPOT, TORONTO 1919 PART II D. O. 67

*L. White*  
Lieut.  
for O. C. No. 2 District Depot.

26/3/19 S.O.S. (Discharged) No. 2 District Depot  
Part II, D.O. No. 83  
For  
O.C. No. 2 District Depot.

*A. Sargeant*

Nothing to be written in this margin.

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

M. F. W. 54. (A. F. B. 10s.)

500M.—9-16

H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit/Regiment or Corps *Forestry Depot*

Regimental No. *2250505* Rank *Cte* Name *Morrison Harry*

Enlisted (a) *14.3.17* Terms of Service (a) *C.E.F.* Service reckons from (a) *14.3.17*

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) *Bushman*

CERTIFIED CORRECT.  
 7-7-17  
 9- AUG 1917  
 RECORDS LONDON.

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 Disembarked	Halifax Liverpool	22.6.17 4.7.17	
7.7.17	BD., CFC	T.O.S., Base Depdt, CFC	Sunningdale	4.7.17	D.O.Pt.II., No. 61. <i>Rhelliott</i> Lt. & A/Adjt., Base Depot, CFC.
27.7.17	<i>BD.C.P. S.O.S.</i>	<i>BASE DEPOT C.F.C.</i>	SUNNINGDALE	27.7.17	PT. II. DO. NO. 70 <i>Rhelliott</i> LT. & A/ADJ. C.F.C.
		<i>Disembarked</i>	<i>Hause</i>	<i>28.7.17</i>	
15.9.17	<i>ov 58 Coy</i>	<i>apptd A/Sgt with pay</i>	<i>Field.</i>	<i>28.7.17</i>	<i>B 213 p 110 #7</i>
18.10.17	<i>ov 58 Coy.</i>	<i>Deposed of appointment of a/Sgt for Drunkenness</i>	<i>Field.</i>	<i>13.10.17</i>	<i>B 2569 p 110 #12.</i>
17.11.17	<i>do</i>	<i>apptd Sawyer at the rate of £3.00 per diem</i>	<i>Field.</i>	<i>1.11.17</i>	<i>B 213 p 110 #16</i>

(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				
2-3-18	W/S	Required 14 days leave	U.K.	1-3-18	B213 p. 50 No 11 d. Mar 1918
23-3-18	Dr	Rejoined from leave	Field	19-3-18	B213.
17-10-18	Dr	10 days S.P. No 2 8-10-18 for (1) Absent from Tallos Roll Call until 23rd on 7-10-1918. (2) Drunkenness.			B213 WED. 46 of Oct 1918
24/1/19	Dr	leaves to draw pay as lawyer		30/7/18	B213. Pto 2/1919.
25/1/19		O.C. Cdn. S.O.S. for demobilisation to C.F.C. Cone. Cmp. Le Havre		25/1/19 Depot Sunningdale	N/R. Pt. 2.0/S. 4/19
30-1-19		O.C. G.F.S. T.O.S. Base Depot, C.F.C. Sunningdale from C.F. & France.		26-1-19	Pt. 11 D.O. 30.
13-2-19		S.O.S. BASE DEPOT C.F.C. transfers on posting to M.J. 2 Can. camp. Rhyl.	SUNNINGDALE	13-2-19	Pt. II D.O. 44 Lt. for O.C. B.D.C.F.G.

C.A. Hewitt

Lieut. for Lt. Col A.A. G.  
Cdn. Sect. G.H.Q.

# CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44.  
1188 (D.P.) 250M.-12-18.  
1772-89-908.

## LAST PAY CERTIFICATE

Regimental No. 2250505 Rank Pte Name Morrison J.  
(Surname first)  
 Unit No. 2 DISTRICT DEPOT who was\* DISCHARGED  
 On ..... 191....., to.....  
 \*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1 - to MAR 26 1919 191...  
 the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month .....		75 98 9
Regimental Pay..... <u>26</u> days at \$ <u>3</u> c <u>00</u> .....		78 00
Field Allowance..... days at \$..... c.....		
Separation Allowance .....		
Clothing Allowance .....		25 00
Post Discharge Pay .....		100 00
*Other Credits .....		12 00
Advances .....	1325 30	
Separation Allowance and Assigned Pay Cheque No. ....	700 00	
*Other Charges .....	25 20	
Balance on transfer or on discharge, cheque No. ....	480	
<b>Total</b> .....	<b>254 89</b>	<b>984 89 98 4 89</b>

\*Give particulars.



MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

M. F. W. 12.  
 25m-4-17.  
 H. Q. 1772-39-819.

To Whom *Miss Mamie Morrison*  
 Address *Whitefish  
 Ont*

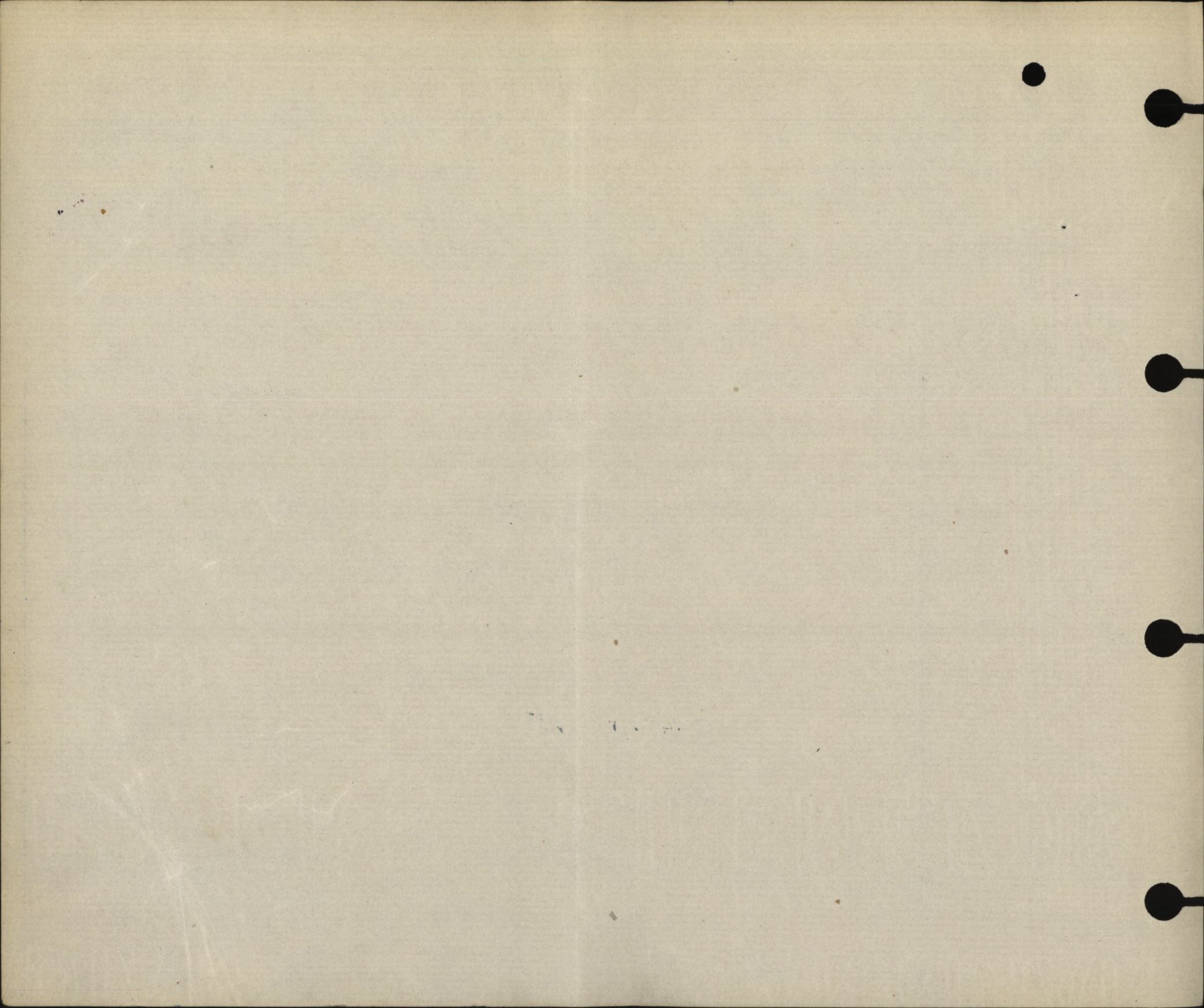
By Whom Assigned *Harry Morrison*  
 Regtl. No. # *2250505*  
 Rank *pte*  
 Corps *Depot Forestry units*

Rate *\$15<sup>00</sup>* JUL 1 1917

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				







O.R. BQR. 14. 3. 17.

## MILITIA AND DEFENCE

M. F. W. 11.

50m.—6-16.

H. Q. 177-39-513.

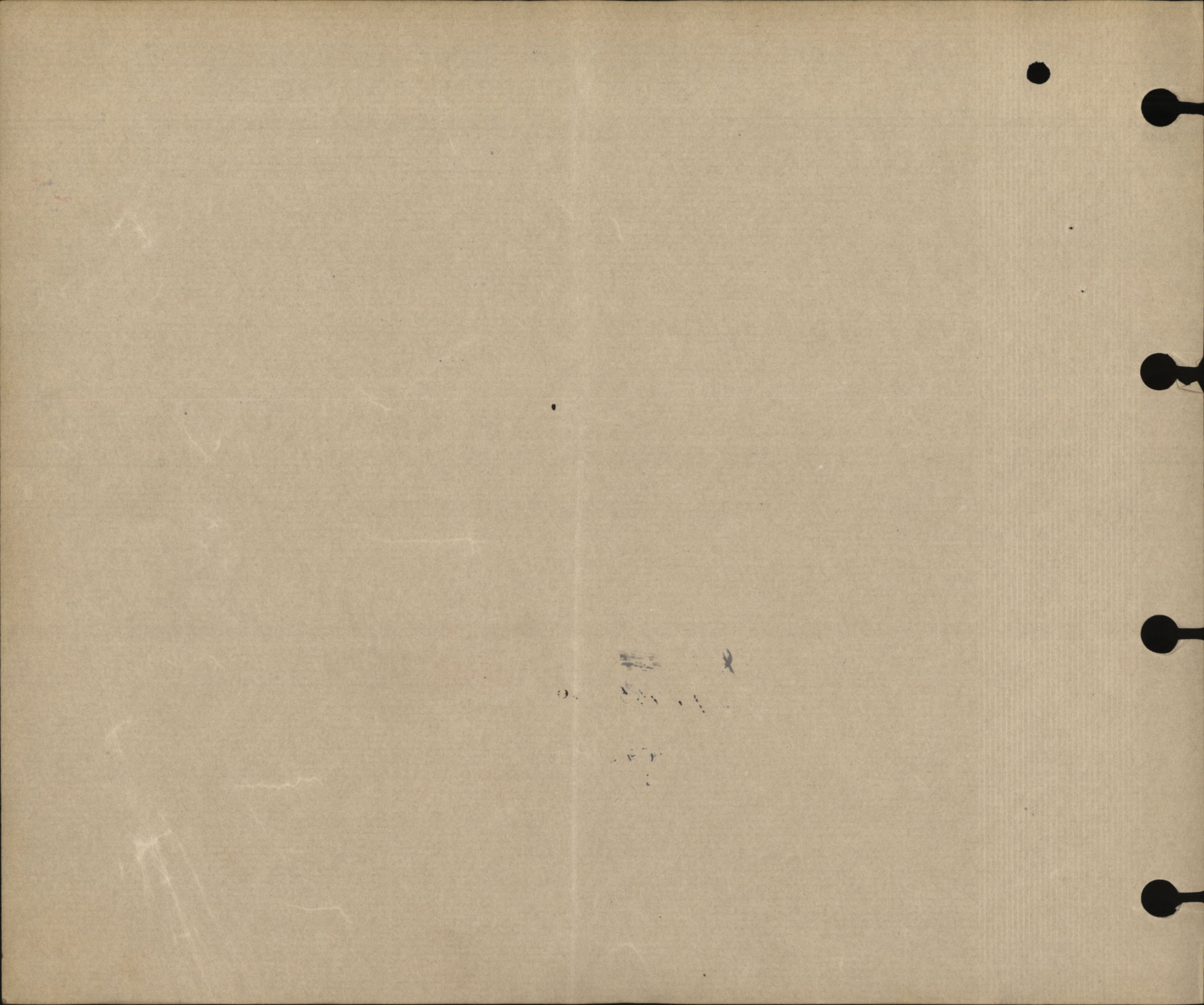
## SEPARATION ALLOWANCE

Name William Craig Name of Soldier Morrison Harry  
 Address Whitefish Regtl. No. 22515-05  
Ont. Rank Plt.  
 Corps # 5 Forestry Dpt.  
 Relation to Soldier }  
 wife, child or mother } Guardian  
 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				





MILITIA AND DEFENCE

M. F. W. 12a.  
18m.-4-17.  
1772-38-819.

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 1  
(Assignee)

*Mrs Mamie Morrison*

Name of Soldier

*Morrison Harry*

PAYMENTS #

*2250505 pte depot forestry units*

L. L. Job 19227—M. & D. 7814.

Month.	Year.	Cheque No.	Amt.	Remarks.
			<i>\$15.00</i>	<i>JUL 1 1917</i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July		<i>F29217</i>	<i>15</i>	
Aug.		<i>U30468</i>	<i>15</i>	<i>6</i>
Sept.		<i>U37237</i>	<i>15</i>	<i>03</i>
Oct.		<i>L44528</i>	<i>15</i>	
Nov.		<i>J51108</i>	<i>15</i>	
Dec.		<i>J61334</i>	<i>15</i>	<i>90. H</i>
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

**PAYMENTS.**

Name of Soldier \_\_\_\_\_

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.	1919			
Jan.				
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.	1920			
Jan.				
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

O.K. BQR. 14. 3. 17.  
MILITIA AND DEFENCE

M. F. W. 11a.  
50m.-4-16.  
1772-39-818.

# SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

William Craig Guardian  
PAYMENTS.

Name of Soldier

Morrison Harry

L. L. Job 310.—Req. 6574.

Plt. 2250303 #5-70257 Dft.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July		A 7309	91	91 R Mailed 28/7/17
Aug.	14972	<del>E 14977</del>	20	20 H \$14977 can c
Sept.		P 17455	20	T
Oct.		X 19728	20	H
Nov.		F 25096	20	B
Dec.		J 27775	20	S
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

1917

MILITIA AND DEFENCE  
**SEPARATION ALLOWANCE**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier \_\_\_\_\_

**PAYMENTS.**

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.	1919			
Jan.				
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.	1920			
Jan.				
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

MARRIED OR SINGLE *Widower*  
 PLACE OF BIRTH *Lakefield, Ont.*  
 NAME OF NEXT OF KIN *Mavis Morrison.* RELATIONSHIP *Daughter*  
 ADDRESS *Whitefish, Ont.*

NAME OF NEXT OF KIN \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_  
 ADDRESS \_\_\_\_\_

APPOINTMENTS.  
PROMOTIONS AND REVERSIONS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
<i>officer of Sgt w/ pay</i>	<i>28.7.17</i>	<i>28/9/17 CFC Form</i>
<i>Deferred appt as a/Sgt</i>	<i>15/10/17</i>	<i>2012 25/10/17</i>
<i>Apptd Sergeant w/ pay</i>	<i>1/11/17</i>	<i>58 Coy CFC</i>
	<i>10. 12/14 58 Coy CFC</i>	

REG'L No *2250505* RANK *A* NAME *Morrison, Harry*  
 PLACE OF ATTESTATION *Sudbury, Ont.* DATE OF ATTESTATION *14-3-17* ORIGINAL UNIT *Sudbury Prov Coy*

**ASSIGNED PAY**

(1) PER MONTH \$ *15.00* DATE EFFECTIVE *1/1/18* AUTH. *A/Sgt* STOPPED EFFECTIVE \_\_\_\_\_  
 PAYABLE TO *Harry Morrison* CAUSE *Other*  
 RELATIONSHIP *Daughter*

(2) PER MONTH \$ \_\_\_\_\_ DATE EFFECTIVE \_\_\_\_\_ AUTH. \_\_\_\_\_ STOPPED EFFECTIVE \_\_\_\_\_  
 PAYABLE TO \_\_\_\_\_ CAUSE \_\_\_\_\_  
 RELATIONSHIP \_\_\_\_\_

(3) PER MONTH \$ \_\_\_\_\_ DATE EFFECTIVE \_\_\_\_\_ AUTH. \_\_\_\_\_ STOPPED EFFECTIVE \_\_\_\_\_  
 PAYABLE TO \_\_\_\_\_ CAUSE \_\_\_\_\_  
 RELATIONSHIP \_\_\_\_\_

(4) PER MONTH \$ \_\_\_\_\_ DATE EFFECTIVE \_\_\_\_\_ AUTH. \_\_\_\_\_ STOPPED EFFECTIVE \_\_\_\_\_  
 PAYABLE TO \_\_\_\_\_ CAUSE \_\_\_\_\_  
 RELATIONSHIP \_\_\_\_\_

DISCHARGE DATE AND PLACE \_\_\_\_\_ ACCOUNT TRANSFERRED TO N.E. BRANCH (DATE) \_\_\_\_\_  
 REASON AND AUTHORITY \_\_\_\_\_ ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE) \_\_\_\_\_

SEPARATION ALLOWANCE

SEPARATION ALLOWANCE MONTHLY \$	EFFECTIVE (DATE)	STOPPED EFFECTIVE (DATE)
PAYABLE TO	RELATIONSHIP	REASON
AUTHORITY FOR ISSUE	REMARKS	
SEPARATION ALLOWANCE MONTHLY \$	EFFECTIVE (DATE)	STOPPED EFFECTIVE (DATE)
PAYABLE TO	RELATIONSHIP	REASON
AUTHORITY FOR ISSUE	REMARKS	
NEW PAYBOOK ISSUED		NEW PAYBOOK ISSUED

PERIOD	PAY AND FIELD ALLOWANCE		WORKING PAY		SEPARATION ALLOWANCE	ASSIGNED PAY CREDITS	ANY OTHER CREDITS	TOTAL CREDITS	SEPARATION ALLOWANCE	CASH PAYMENTS DURING THE MONTH				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CARRIED FORWARD		NUMBER OF ACQUITTANCE ROLLS	NUMBER OF S.A. AND A.P. CHEQUE	REMARKS. ALL CASUALTIES, PROMOTIONS, ETC. TO BE NOTED. ALSO PARTICULARS OF "OTHER CREDITS" OR "OTHER CHARGES"
	FROM	TO	NO. OF DAYS	RATE \$ C.						NO. OF DAYS	RATE \$ C.	\$ C.	\$ C.				1	2			
<i>July 1</i>								<i>22 40</i>								<i>22 40</i>					<i>CIC</i>
<i>"</i>			<i>21</i>	<i>10</i>				<i>34 10</i>					<i>15</i>	<i>15</i>	<i>41 50</i>						
<i>Aug</i>			<i>31</i>	<i>10</i>				<i>34 10</i>					<i>15</i>	<i>15</i>	<i>60 60</i>						
<i>Sept</i>			<i>30</i>	<i>33</i>				<i>33</i>	<i>4 87</i>				<i>15</i>	<i>19 87</i>	<i>93 93</i>			<i>29202917</i>			

2250505 of <sup>Pt</sup> Sgt Morrison H. A.P. 15<sup>00</sup> loan

PERIOD		PAY AND FIELD ALLOWANCE				WORKING PAY		SEPARATION ALLOWANCE	ASSIGNED PAY CREDITS	ANY OTHER CREDITS	TOTAL CREDITS	SEPARATION ALLOWANCE	CASH PAYMENTS DURING THE MONTH				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CARRIED FORWARD		NUMBER OF ACQUITTAANCE ROLLS	NUMBER OF S.A. AND A.P. CHEQUE	REMARKS			
FROM	TO	No. OF DAYS	RATE	\$	c.	No. OF DAYS	RATE	\$	c.	\$	c.	\$	c.	1	2	3	4	\$	c.	\$	c.	CREDIT	DEBIT	1	2		
MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS		DR.1	DR.2		DR.3 DR.4 BALANCE				DEFER. MED. ALLCE. PAY. ENG.		BALANCE CARRIED FORWARD		NUMBER OF ACQUITTAANCE ROLLS		NUMBER OF S.A. AND A.P. CHEQUE		REMARKS						
Sep	30 Bal.		43 43																								
Oct	app 18 of Oct 28-7-17 28/7-20/9 = 65 days @ 40 <sup>c.</sup>		26																								
"	31 1 <sup>35</sup>		46 50																								
Nov	Sgt Pay		72 50 45																								
Dec	1918																										
Jan	1919																										
Jan	1920																										
	Dat's pay 46 50 Diff. between 11/17/17 to 31/12/17 61 days @ 1 90		71 50																								
	Pay as lawyer 93 00																										
Feb	1919																										
	Lawyer Pay 203 90 84 00																										
Mar	1919																										
	Lawyer Pay 84 00 93 00																										

93.00

268.64

159.89-163<sup>15</sup>



\* Strike out whichever inapplicable.

ASSIGNED PAY	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.
EFFECTIVE DATE:-	1/7/17	EFFECTIVE DATE:-	
AMOUNT:-	\$15. <sup>00</sup>	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.	
W. Craig Morrison. (Question) Whitefish. Ont. Can.			
Stopped off 1.3.19			
PARTICULARS OF RANK OR APPOINTMENT			
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT	
		Private.	
UNIT AND TRANSFERS			
ORIGINAL UNIT: Sudbury Forestry Dept.			
DATE ACCOUNT FIRST OPENED: 1/7/17			
AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'F'D	UNIT TRANSFERRED TO
			C. J. France

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
9/19/18	3227	4/20	373				
2/19/19	3675	4/1	487				
6/29/19	3783	4/5	543				
			3293				

DAILY RATES OF PAY AND ALLOWANCES				
AUTHORITY	PAY	F.A.	P.F.A.	SUBSCE ALL'CE
Approved 1/17/17 58 Coy. C. Co. Ceases to trans. Tech Pay as Sawyer 30-17-18 to 2/15/19 58 Coy. C. Co.	3.00	-	-	
	1.00	-	10	

PARTICULARS OF RENDERING NON-EFFECTIVE: 28/9/19 Dr to Can. C. J. C. Stale N.R. 2750. 4/29 M.H. 2

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
March 31	Forward								159.89	163.15	
April	Sawyers Pay	90		Can AP al 102- 8-4-18. Jura Group.	3.57						
				al 197 24-4-18	3.57				227.95	193.15	
May	Sawyers Pay	93		Can AP al 272. 4-5-18	3.57						
				al 101. 20-5-18	15.00						
				al 484. 25-5-18	3.57				283.61	208.15	
June	Sawyers Pay	90		Can AP al 679. 9-6-18	3.57						
				" 804. 25-6-18 #5 Dist.	3.57				351.47	238.15	
July	Sawyers Pay	93		Can AP " 1011. 15-7-18	3.57						
				" 1186. 25-7-18	3.57				422.33	268.15	
Aug	Sawyers Pay	93		Can AP " 1219. 10-8-18	3.57						
				al 780. 10-8-18	50.00						
				al 1579. 25-8-18	3.57				443.19	268.15	
Sept	Sawyers Pay	90		Can AP " 1779. 11-9-18	3.57						
				" 1934. 25-9-18	3.57				511.05	298.15	
Oct	Sawyers Pay	93		Can AP " 2152. 12-10-18	3.73						
				al 2598 11-11-18	3.73						
				2819 25-11-18	13.06						
Nov	Sawyers Pay	90		Can AP " 2152. 12-10-18	3.73						
				al 2598 11-11-18	3.73						
				2819 25-11-18	13.06						
Dec		93		Can AP					15		
		103			16.79				30		

F 10. (10)

230

NUMBER **2250505** RANK

NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Dec/18	Brought Forward	183			16 79			30	555 32	328 15	
				all 3030 18-12-18 5 <sup>th</sup> Dist	7 46						
Jan/19	Sawyer's Pay	93		ban al.				15	762 07		
		276			24 25			45			
Feb	Sawyer's Pay	84		Cap.				15		420	
	Int on Def Pay to 31-2-19	1662		al 3727- 13/1/19	3 73				847 69		
				136957 28-1-19 BA	4 87						
				Cases to Div as Technical Pay as Sawyer 30/12/18 over credited 6 days							
				@ #190 from 30-12-18 to 28/1/19							
				Ac. 2. 15/1/19. 58 boy 65 C		115 90					
				127583. 6-1-19 BA	24 33				698 86		
		100.62			37 93	15 90		15			

M.D. 2.

A 3 M. FORM REN'S **Stops** EFFEC 1/3/19  
 DISCHARGED TO **Can.** DATE 28/1/19  
 PAY BOOK VERIFIED 10-2-19  
 Cr. BAL. 814 16 L.P.C. REN'R 10/1/19  
 AUTH. **CACNR 2750** 4/1/19

S.O.S. to Canada 27/1/19  
 S.L.#. 23 to 80

L. Darg.

AP/et

Supp hll issued 2/1/19. Correct Blee #198 86.  
 (over bldais @ 190 30/1/18 to 28/1/19. #115.90)

This space to be for numbers.

# Proceedings on Discharge.

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page.)

EVC.

EB

No <u>2250505.</u>	<b>H</b>
Rank <u>Pte.</u>	
Surname <u>MORRISON, HARRY.</u>	
Christian name	
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company) <u>C.F.C.</u>	(#2 D.D.)
Date of discharge <u>MAR 26 1918</u>	
Place of discharge <u>TORONTO, ONT.</u>	

## 1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age <u>40.</u> years ..... months. Height <u>5</u> feet <u>5½</u> inches. Complexion <u>Dark.</u> Eyes <u>Blue.</u> Hair <u>Black.</u> Trade <u>Bushman.</u> Intended place of residence <u>Whitefish, Ontario.</u> <small>(To be given as fully as practicable.)</small>	Descriptive marks <u>Vaccs. Scars on left arm.</u>
--	---

## 2. The above-named man is discharged in consequence of

Authority for discharge 2. D.D. D.C.F.C. 11. 785.

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

## 3. Conduct and character while in the service have been, according to the records, etc.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.

## 4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

M. F. B. 218.

200M.—5-18.  
H. Q. 1772-39-113.

(OVER)

5. He is in possession of the following number of G. C. Badges:

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company, (*Squadron or Battery*), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place).....

(Date).....

Commanding.....

**8. Certificate to be signed by the Soldier on Discharge**

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page, and that I have received my permanent discharge certificate.

(Place) **TORONTO, ONT.** *Harry Morrison* (Signature of Soldier.)

(Date) **MAR 26 1919** *H Sergeant Cpl* (Signature of Witness.)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

**9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.**

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

.....(Signature of Soldier.)

**10. Statement of Service.**

Service toward Engagement to.....(the date to which the Record of Service is completed).....years.....days.

Total.....years.....days.

**11. Confirmation of Discharge.**

The discharge of the above-named man is hereby confirmed.

(Place) **TORONTO, ONT.**

(Date) **MAR 26 1919**

(Signature) *H Sergeant Cpl* FOR

O.C. No. 2 District Depot.

**Reservations referred to at Para. 8.**

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

**List of Discharge Documents.**

<p>Attestation Paper                  Particulars of Recruit                  Proceedings on Discharge</p>	<p>Minutes form B 302                  B 304a                  W 178</p>	<p>Reg. Conduct Sheet                  Squadron                  Battery                  Company                  of                  Field Control Sheet</p>
<p>In the case of recruits who are rejected on final approval, the discharge documents will consist of:</p>	<p>in MS.                  Minutes form B 313                  W 24</p>	<p>Copies of Convictions, by C. R.                  Med. Hist. Sheet                  Casualty Form</p>
<p>(1) Proceedings on Discharge</p>	<p>B 313                  B 403</p>	<p>Medical Report for Invalids                  General History Sheet</p>
<p>(2) Attestation</p>	<p>W 44                  W 304</p>	<p>Last Pay Certificate                  Duplicate Discharge Certificate</p>
<p>(3) Medical History Sheet</p>	<p>W 80</p>	<p>Form of Will                  Copy if discharged "Medically unfit"                  Copy if man has not been overseas</p>

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable:

Officer Commanding

2.3.—In the case of a man discharged by purchase the date and number of deposit Receipt with amount of same is to be noted hereon.

## List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263</p> <p>Squadron }          Battery } Conduct Sheet, " B. 263a          Company }                    or          Field Conduct Sheet " W. 178</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia form B. 313</p> <p>Casualty Form " W. 54</p> <p>Medical Report for Invalid§ " B. 227</p> <p>Dental History Sheet " B. 465</p> <p>Last Pay Certificate " W. 44</p> <p>Duplicate Discharge Certificate " W. 39A</p> <p>‡Form of Will " W. 82</p> <p>§Only if discharged "Medically unfit."</p> <p>‡Only if man has not been overseas.</p>	<p>Attestation Paper Militia Form W. 23                            or          Particulars of Recruit " W. 133</p> <p>Proceedings on Discharge " B. 218</p> <hr/> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p style="text-align: center;">(a) Proceedings on Discharge</p> <p style="text-align: center;">(b) Attestation.</p> <p style="text-align: center;">(c) Medical History Sheet.</p>
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Documents not accompanying this form should be crossed out.

*I hereby certify that the following documents are unobtainable.*

*Officer Commanding.*

*N.B.—In the case of a man discharged by purchase,  
the date and number of Deposit Receipt with  
amount of same is to be noted hereon.*

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

REGT. No. 2250505

RANK Pte.

NAME (IN FULL) MORRISON, H.

MORRISON, H.

M. OR S. *M.*

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?	(BLOCK LETTERS, SURNAME FIRST)
ADDRESS					<i>C.F.C.</i>	<i>Same</i>	
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				PLACE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
<i>Yes.</i>	<i>1-4-19.</i>				DATE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
TO WHOM PAID	RELATIONSHIP				ASSIGNED PAY, \$	DATE EFFECTIVE	
<i>Wm. Craig.</i>	<i>Guardian</i>				<i>15.00</i>	<i>1-4-19.</i>	
ADDRESS					PAYABLE TO	RELATIONSHIP	ANY CHANGE IN ASSIGNEE OR ADDRESS
<i>Whitefish, Ont.</i>					<i>Same.</i>		<i>Whitefish Ont.</i>
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE	
					DISCHARGED	PLACE DATE	REASON AUTHORITY IF ENTITLED TO POST DISCHARGE PAY
					<i>TORONTO, ONT.</i>	<i>MAR 26 1919</i>	<i>Demol D083 Yes</i>

MONTH	PAY AND F. A.		OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS
	NO. OF DAYS	RATE			COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3				DEBIT	CREDIT	DEBIT	CREDIT	
Balance from previous account																		
28-2-19		<i>3.00</i>		814.76														
1-3-19	26	3.00	78	759.89	132530		133714	700		25		480		548.7		759.89		<i>March '19</i>
			35				133713			254.89				984.89				<i>T.O. 23/4 D.O. 67</i>
			100	984.89														<i>SUBS. 6/3/20/26/27</i>
153 dys.		<i>W.S.G.</i>		350.00														<i>20-cb 480 Paid 29 men</i>
				150.00														<i>1st Payment, War Service Gratuity</i>
				500.00														<i>1st W.S.G. Paid by #2 D.D.</i>
																		<i>March 26.</i>
																		<i>April 26.</i>
																		<i>May 26.</i>
																		<i>June 14</i>
																		<i>June 21</i>
				500														<i>Toronto AR 71 34 70 500</i>
																		<i>115.90</i>
																		<i>49.40</i>
																		<i>700.00</i>
																		<i>165.30</i>
																		<i>64.70</i>
																		<i>500.00</i>

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





Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

*1 July 1917*

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

<i>15<sup>00</sup></i>			
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## PARTICULARS OF SEPARATION ALLOWANCE

No. *2250 505*

Rank *Pte* Promoted Reverted Discharge

Soldier's Name *Harry Morrison*

Battalion *Depot Forestry Units*

Beneficiary

Relationship

Address

## PARTICULARS OF ASSIGNMENT

Name *Miss Marnie Morrison*

Address *Whitefish Cut*

Change of Address

1

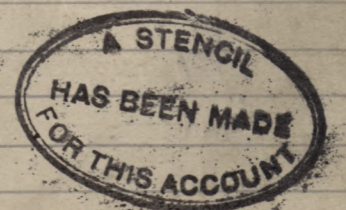
2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>1917 Dec 31</i>			<i>90</i>	<i>90</i>	
<i>1918 Jan</i>	<i>W68821</i>	<i>30</i>	<i>15</i>	<i>45</i>	<i>File 013135-H-0</i> <i>Had to <sup>current of</sup> other Sep 30<sup>e</sup> should have gone to W Craig Guardian see other ac</i> <i>Ac stopped as from 31/1/18.</i> <i>Ac transferred to W Craig Guardian, duty SA Board see above file</i>

M. F. W. 128  
40M 6.7-1-72-39-1141  
L. L. 22220-M. & D. 1903.





Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

14-3-17

July 1917  
Feb 1918

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

20	\$ 25.00	30
	1-12-17	1-9-18
	P.C. 3257	P.C. 2753
		M.O. 41286

RATE OF ASSIGNMENT

15 <sup>00</sup>		
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PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No. 2250505

William Craig (Guardian)  
Whitefish Ont

Rank *Pte* Promoted Reverted Discharge Address

Soldier's Name *Harry Morrison* Change of Address

Battalion *Depot Forestry Units* 1

Beneficiary *William Craig* 2

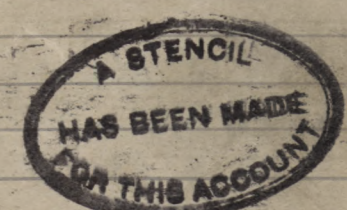
Relationship *Guardian* 3

Address *Whitefish Ont* 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917 Dec 31		191	90	90	013135-H-10 N92397 cancelled
1918 Jan W	68821	30	15	45	See stop ledgers
Feb H	73482	25	15	40	AP transferred from Miss Mamie Morrison Auty SA Board see above file
March N	92397	25	15	40	SA + A/P went to Miss Mamie Morrison (whose eye is stopped 31/1/18)
March U	82521	25	15	40	for January 1918 - no Jan cheque to go to W Craig - 40 Feb + future to W Craig
April N	10413	25	15	40	ordered cheque of stencil 18/3/18
May R	17633	25	15	40	ordered cheque N92397 cancelled (made to old assignee)
June N	21870	25	15	40	
July H	31282	25	15	40	
Aug P	40572	25	15	40	
Sept U	42849	25	15	40	
Oct H	54094	25	15	40	
Nov U	57293	25	15	40	
Dec 1919 P	68214	45	15	60	
Jan 1919 U	72598	30	15	45	
Feb W	76890	30	15	45	
March M	86132	30	15	45	
		60.6	31.5	92.1	

M. F. W. 128.  
40M, 6-7-17239-1141  
L. L. 2230-M. & D. 1902.

At Closed 31-3-19  
Ret'd per *Belgie*  
Date: 1/3/19 M.F.W. 187 8/3/19 md 2  
Clerk *Sydney L. Lee*  
MRO 68392 Destroy





Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

14-3-17

July 1/17

RATE OF SEPARATION ALLOWANCE

20	\$ 25.00		
	1-12-17		
	P.C.3257		

RATE OF ASSIGNMENT

15			
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PARTICULARS OF SEPARATION ALLOWANCE

No. 2250505

Rank *Pte* Promoted Reverted Discharge

Soldier's Name *Harry Morrison*

Eattalion *Depot Forestry Units*

Eeneficiary *Mr William Craig*

Relationship *Guardian*

Address

PARTICULARS OF ASSIGNMENT

Name *Miss Mamie Morrison*

Address *Whitefish Ont.*

Change of Address

- 1
- 2
- 3
- 4 *Verified Aug 29<sup>th</sup> /17*

Date	Cheque No.	Amount S/A	Amount A/P	Total
<i>1917</i>				
<i>Dec 21</i>		<del>191</del>	90	<del>281</del>
<i>Jan 1918</i>	<i>68821 W</i>	30	15	45

REMARKS

① File 013135-A.10.

~~two a/c W.D.C.~~

*Two a/c made*

*at tpa to W Craig*

*Auty SA Board see above file*

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

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
------	------------	------------	------------	-------	---------

R 4 3rd floor

M. F. W. 128  
 400m. - 6-17-1772-38-1141  
 L. L. 22320 - M. & D. 7883.

Reserved for M.H.C.

B1 58 Coy

Regt. No. 2250505 Rank. PT.E Surname. MORRISON Christian Name. HARRY  
 Unit or Corps—(a) Overseas from United Kingdom. C.F.C. (b) in United Kingdom. C.F.C.  
 Born at—Town. LAKEFIELD County or Province. ONTARIO Country. CANADA  
 Date of Birth—Day. 3 Month. JUNE Year. 1879 Age. 39 yrs. 8 months.  
 Joined at. SUDBURY ONT. Date. 14 MARCH 1917  
 Former trade or occupation. BUSHMAN

Permanent Marks or any peculiarity that will serve for future identification:—

VACC. MARKS - ILARM.  
BURN SCAR on R. LEG.  
DEFORMED SHOULDER

Height—feet. 5 inches. 4 Colour of eyes. BLUESignature of Soldier (for identification purposes) H. MorrisonMedical Report

\* Read carefully the instructions on last page of this form.

## 1. DISABILITY.

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (a)

Old Fracture - ~~Right~~ Arm.  
with ankylosis head of humerus with Scapula.  
Left (upper)

Disabilities Group (b)

N.A.

Disabilities Group (c)

N.A.

## 2. CAUSE OF DISABILITY

		Place of origin.	Date of origin.
(i.) As to Group (a) above.	<u>Civil Life</u>	<u>Canada</u>	<u>1883.</u>
(ii.) As to Group (b) above.	<u>N.A.</u>	<u>N.A.</u>	<u>N.A.</u>
(iii.) As to Group (c) above.	<u>N.A.</u>	<u>N.A.</u>	<u>N.A.</u>

## 3. Is the disability due to disease contracted or injuries received prior to Active Service?

(i.) As to Group (a) above? Yes If yes, has Active Service aggravated it? No  
 (ii.) As to Group (b) above? Na If yes, has Active Service aggravated it? Na  
 (iii.) As to Group (c) above? Na If yes, has Active Service aggravated it? Na

## 4. Is the disability due to disease contracted or injuries received while on Active Service?

(i.) As to Group (a) above? No  
 (ii.) As to Group (b) above? Na  
 (iii.) As to Group (c) above? Na

5. MEDICAL HISTORY. Previous Illnesses & accidents: When four years had left arm broken. Occupation - Blacksmith. Enlisted March 14, 1917 in C.F.C. Went to France July 28, 1917. Never in Hospital; never Boarded; Came back to England Jan 26, 1919.

Is in as good condition now as on enlistment.

## 6. PRESENT CONDITION.

Subjective symptoms: Weakness of right arm: <sup>Objective signs</sup> Cannot adduct further than  $90^\circ$  from side of body. Forward extension also limited to  $90^\circ$  - i.e. Cannot lift left arm above head. Obvious deformity of left shoulder. ~~Otherwise in good condition.~~  
On closer examination find that head of humerus is ankylosed with scapula. Otherwise man is fit.  
All other systems normal.

7. OPERATION. (i.) Was one performed? No (ii.) If so, state what. No  
(iii.) Was one advised and declined? No

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto, unless there is evidence to the contrary.

8. (i.) Is there loss or decay of teeth attributable to Active Service? Yes  
(ii.) If so, describe. one decayed tooth extracted.

## 9. DO YOU RECOMMEND:—

(a) Fit for duty? B II  
(state category)

(b) Invalid to Canada? No

(c) Discharge from the Service as permanently unfit? No

Date of Report Feb 3 1919  
Station Summingsdale Eng. C.F.C.

Signed W Howard Batten St  
Officer in medical charge Cauc

I have satisfied myself of the general accuracy of the above Report,  
and concur therein \*except

Not in hospital {Officer if Hospital} Strike out one  
{S.M.O. Brigade} of these

Dated at ..... Station, on ..... 191.....

\*Delete if inapplicable.



Proceedings of a Medical Board on the Soldier mentioned in Part I.

10. Is the disability fully described in Part I. (1)? *Yes*  
If not, describe it.

11. Is the cause of the disability fully described in Part I. (2)? *Yes*  
If not, describe it.

12. From the medical information now adduced, was the disability caused or aggravated by:—  
(a) Negligence of the Soldier { Caused? *na*  
Aggravated? *na* }  
(b) Misconduct of the Soldier { Caused? *na*  
Aggravated? *na* }

13. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?  
(Estimate at none, 5%, 10%, 15%, 20% etc.)

14. THE DISABILITY DUE TO SERVICE.—(See Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in this estimate.)  
What part of the entire disability estimated next above (13) is due to causes arising during Active Service?  
(Estimate at none, 1/10, 2/10, 3/10, etc., or all.)

15. Permanency of the Disability due to Service estimated next above in (14).  
(i.) Is it permanent?  
(ii.) If not permanent, what is its probable minimum duration (in months)?

16. If an operation was advised and declined, do you consider the refusal to have been unreasonable?

17. Can the former trade or occupation be resumed? *Yes*

18. REMARKS:—

*Condition as described in Part I  
This man's left shoulder joint is ankylosed to scapula causing limitation of motion as described in (6) Disability was originated in Civil life and has not been aggravated by Service*

*Authority, C.G. Tel 9083 11/11/18*

19. RECOMMENDATION:—

(a) Fit for duty? *BII*  
(state category)

(b) Invalid to Canada? *No*

(c) Discharge from Service as permanently unfit? *No*

Date of Board *3 February 1919*

Station *Surreydale*

Signatures of the Board

*A. H. Gardner* *President.*  
*J. J. Downes*  
*Major*

Approved

Dated at

*J. G. Munro* *Captain, C.A.M.C.*  
*for A.D.M.S., Canadians, London Area.* *A.D.M.S.*

Station

ASSISTANT DIRECTOR OF  
MEDICAL SERVICES,  
CANADIAN FORCES, LONDON AREA.  
FEB 4 1919  
13 BERNERS ST. LONDON, W.1

