

ATTESTATION PAPER.

Queens Own Rifles C.E.F.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... **M O R R I S O N,**
- 1a. What are your Christian names?..... **James Stuart**
- 1b. What is your present address?..... **5118 Chancellor Street, Philadelphia, Edinburgh, Scotland Pa., U.S.A.**
- 2. In what Town, Township or Parish, and in what Country were you born?.....
- 3. What is the name of your next-of kin?..... **Jennie MacKay, 6223 Walnut St**
- 4. What is the address of your next-of-kin?..... **5118 Chancellor Street, Philadelphia, Mother Pa., U.S.A.**
- 4a. What is the relationship of your next-of-kin?.....
- 5. What is the date of your birth?..... **July 4th., 1884**
- 6. What is your Trade or Calling?..... **Clark**
- 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?..... **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? ..
- 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, **James Stuart Morrison**, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the Canadian Over-Seas Expeditionary Force, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Date **July 13th, 1917** 191

*J. S. Morrison* (Signature of Recruit)  
*H. Worsick* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, **James Stuart Morrison**, do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Date **July 13th, 1917** 191

*J. S. Morrison* (Signature of Recruit)  
*H. Worsick* (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath

before me, at **Toronto** this **13th** day of **July 1917** 191

*W. W. [Signature]* (Signature of Justice)

**Description of James Stuart Morrison on Enlistment.**

Apparent Age.....**33**.....years .....months.

(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height..... **5** ft. **2½** ins.

Chest measurement. { Girth when fully expanded..... **35½** ins.  
 Range of expansion..... **4½** ins.

Complexion..... **dark**

Eyes..... **brown**

Hair..... **dark**

Religious denominations. { Church of England.....  
 Presbyterian..... **Presb.**  
 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).

**Scar left breast,**

**Both eyes D. 20, Hearing good,  
 Nose & throat O.K.**

**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..... **July 13th, 1917**..... 191 ..

Place..... **Toronto Canada**.....

*Cal. G. A. Hatfield* *Philo, Pa.*  
*(per Capt. Howard)* **M.O.**

Medical Officer.

**Toronto Mobilization Centre.**

\*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.**

**James Stuart 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.

*AKB*..... (Signature of Officer)

Date..... **AUG - 8 1917**..... 191 ..

NAME

*MORRISON, James Stuart*

REG. NO.

*562379*

UNIT

*C.W.G.D.*

H. Q. FILE NO.



**CONTENTS**

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505  
REFERENCE

NON-EFFECTIVE BY

DEATH

Category

DISCHARGE

Category

DESERTION



*Bot 6409*

**34254**



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)

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)

MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

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

MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

MEDICAL EXAMINATION (M.F.W. 129)

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)

*3 Misc*  
*1 CP 3*  
*1 1722*  
*1 pay*



256 2389

MORRISON

JAMES STUART

**I.D. number**  
**No. d'identification**

**Surname**  
**Nom de famille**

**Given names**  
**Prénoms**

OPBN ATIA

DIBD-6 JAN 51

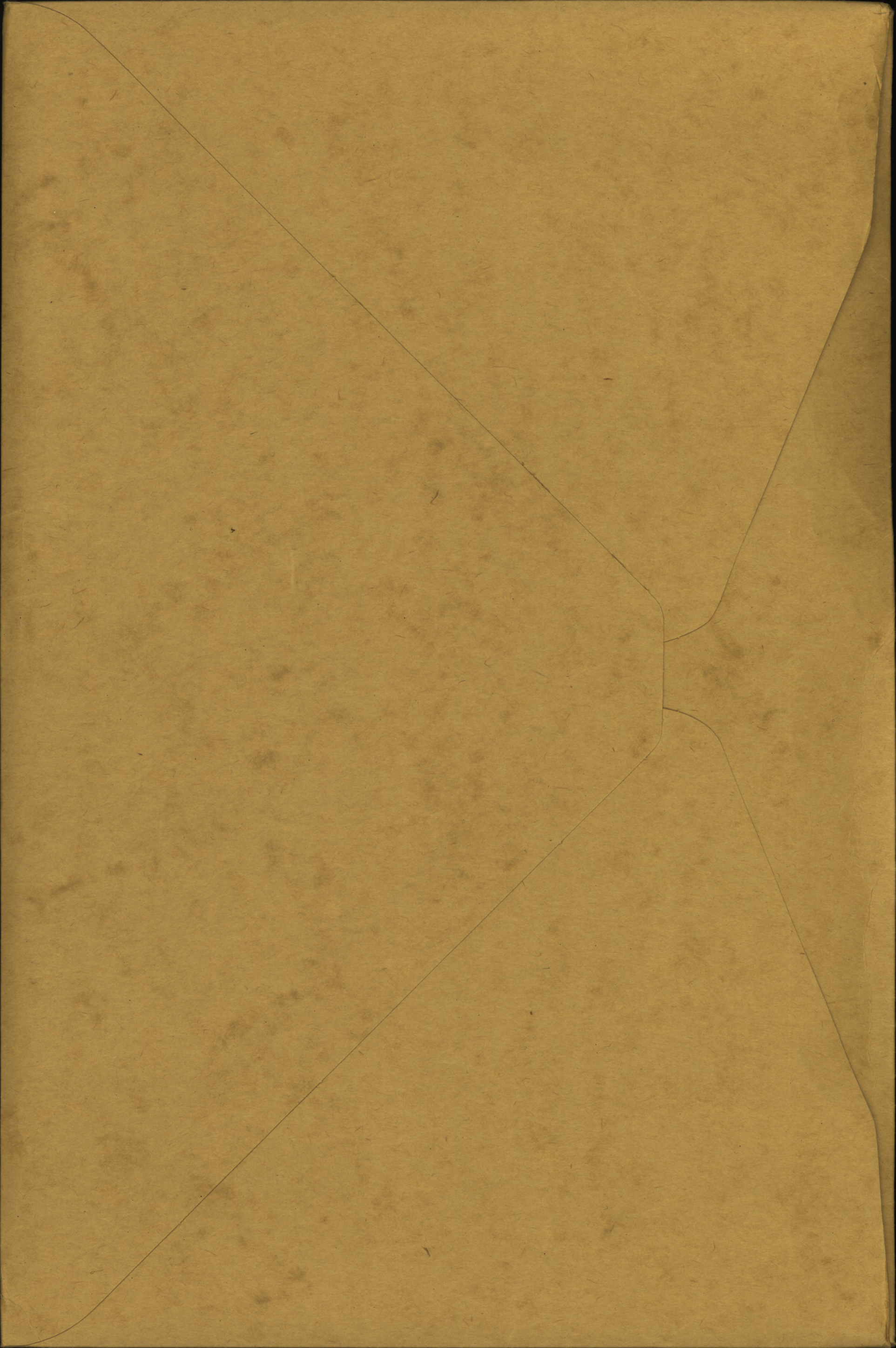
**NATIONAL PERSONNEL RECORDS CENTRE**  
**CENTRE NATIONAL DES DOCUMENTS**  
**DU PERSONNEL**

**PERSONNEL RECORDS ENVELOPE**  
**ENVELOPPE DES DOSSIERS DU PERSONNEL**

**Location**  
**Lieu**

6408

**«CONTENTS CONFIDENTIAL»**  
**«CONTENU CONFIDENTIEL»**



SURNAME.

*Morrison* (649-7M-47496)

CARD NO.

*D. & Disc - 1-2*  
*19/8/19*  
FOLL.  
*00234/22/8/19*

CHRISTIAN NAMES

*James Stuart*

REGL. No.

*2562389*

RANK

*Pte.*

UNIT

*2nd Regt. 1st Depot (2nd R.D.)*

*Demit #2*

FORMER CORPS

*Nil.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

*MacKay Mrs. Jennie*

RELATIONSHIP TO SOLDIER

*Mother*

ADDRESS

*#14 Maitland St;  
Toronto, Ont.*

*S.A.A.P 20/1911*

COUNTRY OF BIRTH

*Scotland Edinburgh.*

DATE

*July 4<sup>th</sup> 1884*

PLACE OF ATTESTATION

*Toronto Ont.*

DATE

*July 13<sup>th</sup> 1914*

L. L. 6945. M. & D. 6994.

M. F. W. 22. 100M. -8-16. H. Q. 172-39-339.

*transposed Regt. 1st Depot 9/17/1914 2562389 2nd 22/8/19 R/C. 17-8-19 389 G.M.S.*

SCOTIAN 26/11/17

MARRIED

SINGLE

Yes

WIDOWER

TRADE OR CALLING

Clerk.

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

33

YEARS

MONTHS

HEIGHT

5

FEET

2 1/2

INCHES

CHEST MEASUREMENT

35 1/2

INCHES

EXPANSION

4 1/2

INCHES

COMPLEXION

Dark

EYES

Brown

HAIR

Dark.

DISTINGUISHING MARKS

Scar left breast.

MEDICAL EXAMINATION.

PLACE

Toronto Ont.

DATE

July 13<sup>th</sup> 1917

Present Address

5118 Chancellor St.  
Philadelphia, Pa U.S.A.



*Unit of*  
*Roll*

Number . . . 2562389 . . . Rank . . . P/E . . .

Surname . . . MORRISON . . .

Christian Name . . . James Stuart . . .

*P* Units . . . 5th Bn Can Exp Theatre of War France . . .

Date of Service . . . 9.4.18 . . .

Remarks . . .

Latest Address . . . 16 Armstrong Ave.  
~~H. Maitland St.~~  
Toronto . . .

Roll No. "B" Page 755-3.

*B*  
*V*

No.

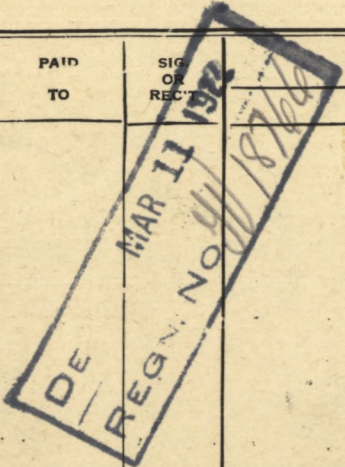
RANK

NAME

T. O. S.

UNIT

M. D.

PAID FROM	PAID TO	SIG OR REC'D	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
 <p>DE MAR 11 1922 REGN. NO. 111876</p>				

No. 2562389 RANK

Sgt

NAME

Morrison J. S.

T. O. S. 14-7-17

UNIT

2nd Regt. C. S. I

SD 66 14-7-17.

M. D.

2.

## PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS

AUTHORITY

PAID  
FROMPAID  
TOSIG.  
OR  
REC'T

1917

1917

July 14

July 31

✓

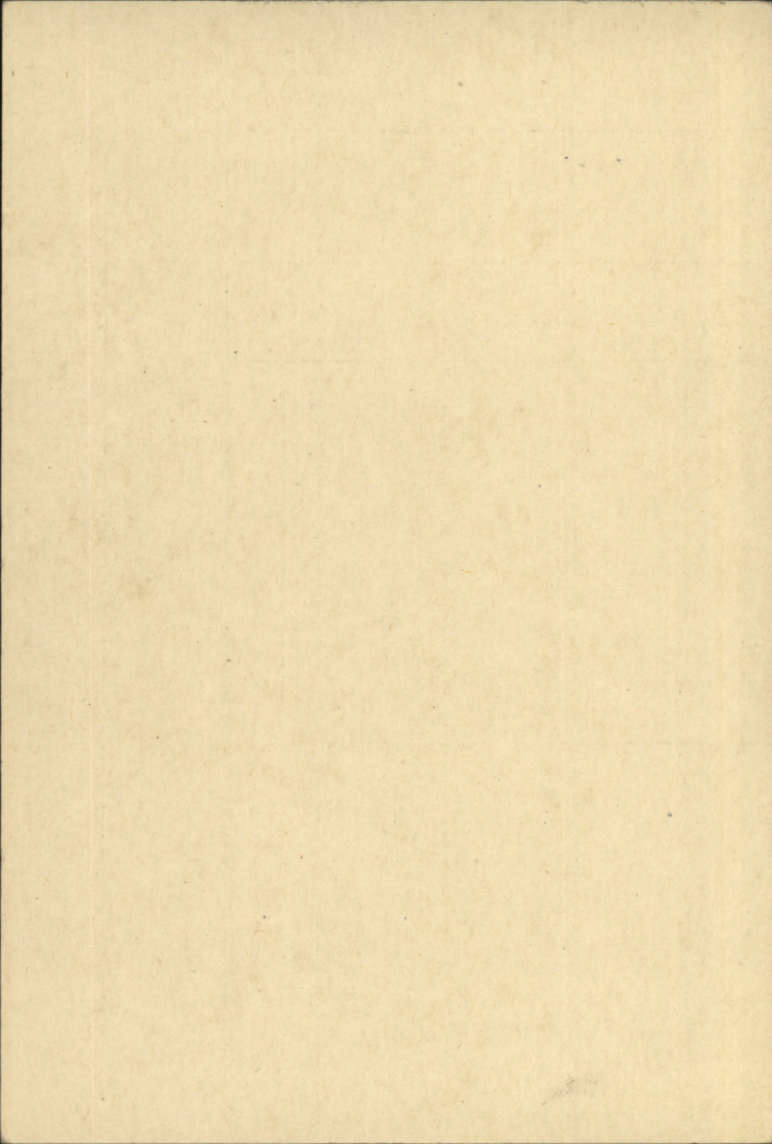
Aug. 1

Aug. 15

✓

Trans. to 1st  
Depot. B. B. O. R.

(see 90 of 13-8-17)



CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

WAR SERVICE BADGE  
389728  
CLASS "A" No. ....

THIS IS TO CERTIFY that No. 2562389 (Rank) Private

Name (in full) James Stuart Morrison enlisted in  
the 1st Depot Batten 1st Cent Ont Regt

CANADIAN EXPEDITIONARY FORCE at Toronto on the 13<sup>th</sup>  
day of July 1917

HE served in France with C. C. R. C

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 35 years

Height 5' 3"

Complexion Dark

Eyes Brown

Hair Dark

J. S. Morrison  
Signature of Soldier.

Marks or Scars Circular scar

mid joint left thumb 1917

Date of Discharge  
**No. 2 DISTRICT DEPOT**  
**AUG 19 1919**  
**TORONTO**

H. Targeant  
Issuing Officer.

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

Rank

Date AUG 19 1919 1919

NB.- 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.

WIND SERVICE BARGE  
577131

206380  
James L. ...  
The ...  
1914

James L. ...

Canadian ...  
with ...

206380  
James L. ...  
The ...

0.C. No. 2 District ...

No. 2 District ...  
AUG 10 1914

IF NO FEE NO DURETTE OF THIS CERTIFICATE WILL BE ISSUED AND PERSON FINDING NAME IS REGISTERED TO  
BE BROUGHT IN IN INSTALLED ENVELOPE TO THE SECRETARY MILITARY COUNCIL OF CANADA

SECRETARY

# Casualty Form—Active Service.

Unit, Regiment or Corps ..... **2nd REGT. C. D. F. BN. of Toronto.**

Regimental No. **2562389** Rank **Private** Name **James Stuart Morrison**

C. E. F.

Enlisted (a) **July 13<sup>th</sup> 1917** Terms of Service (a) **Can Expt Force** Service reckons from (a) **July 13<sup>th</sup> 1917**

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

Extended ..... **W. S. B. CLASS. A.** 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 Arrived	Canada. England.	20 NOV 1917 DEC 3 1917 ✓
13.12.17	2nd, Res.	T.O.S. from Canada	W. Sandling	8.12.17	Pt. 11 D.O. #329 <i>17-11-17 Res 002-172-11 18</i>
14-2-18	2nd, Res.	Posted to 8th. Res. B'n.	E. Sandling	15-2-18	Part 2 D.O. #44 <i>well</i>
15-2-18	8th, Res.	T.O.S from 2nd. Res. B'n.	E. Sandling	15-2-18	Part 2 D.O. #46 <i>S.O.S. posted to 54<sup>th</sup> Bn Sandling 7.4.18. NO. 497</i>
7.4.18					<i>LIUT.</i>
7 AVR 18	C.B.D.	TAKEN on STRENGHT		7 AVR 18	ASST ADJ. 2 <sup>ND</sup> CANADIAN RES: Un.
9 AVR 18	C.B.D.	Left for <i>CCRE</i>	Field	9 AVR 18	N. R.
9 AVR 18	<i>CCRE</i>	Joined	Field	9 AVR 18	N. R.
		Left for Unit	FIELD		N. R.
	Unit	Joined Unit	FIELD		B. 213.

(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.

Fill in only—Unit, Number, Rank and Name.  
Casualty Form—Active Service.

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				
27.5.18	C.C.R.A.	Forfeit 1/3d. for losing by neglect 1 clasp knife.	Field	27.5.18	B2069. D054/18
19.8.18	do	Forfeit 1/3 to cover 1 clasp knife lost		10.8.18	B2069. D0.93/18
29-9-18. 14.12.18 24.11.18	C.C.H.Q. do G.H.Q. 1st Ech. A.A.G.	Attached Can. Corps H.Q. do att. for Rations only.	Field. do	25-9-18. 19.11.18 18.11.18	B.213. B213.
		Transferred to Cdn. Record Lst.		28 APR 19	Pl. 3.0. No. 35 d/19
17. 5. 19	C.R.L.	Taken on Strength	Field	28.4.19	71556 Forfeited FOR L.C. 1/0 Records, C.E.F.

*S. G. Carson*  
Lieut. for Lt Col. A. A. G.  
Canadian Section, G. H. Q. - 3rd, Ech.

S.O.S. O.M.F.C. TO C.E.F.  
PT. II ORDER No. 78 DATED 7.8.19

*J. M. Richardson*  
OFFICER i/o RECORDS,  
4th WING G.C.C. WITLEY.

FMT CATONIA SAILING  
SAILED LIVERPOOL 9 0 1



2  
2ND CEN. ONT. REGT.

TLH Rank Name MORRISON, James Stuart, Reg'l No. 2562389  
DFT Cent Ont to 2nd Res Unit If in perm. Corps } Married or Single Single  
What Unit? }

Place and Date of Enlistment Toronto, July 13th. 1917 Place of Birth Edinburgh, Scotland.

Name and Address, Next-of-Kin Jennie MacKay, 6223, Walnut St., Philadelphia, Pa. U.S.A. Relationship Mother.

Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

N/E. R.B. No. 15060  
File R.L.  
Category O.R.C.

Discharge, Date and Place Reason Character

H. W. V., Ld.—11319-17.

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		7-12-17	S/S Scotian
13 12 17	2 Res 1	O S from Canada	W, SandLing	17-11-17	2 Res D.O 22d/2-1-18 D.O 329
14. 2. 18	2 Res	S.O.S. to 8th Res	" "	15/2/18	17-11-17 2 Res D.O 22d/2-1-18 D.O. 44. 8 Res D.O. 46 d. 15/2/18
7-4-18	8th Res	Sold to 54 Bm	E'sling	Pt 7-4-18	D.O 97 + 574 On Pt 25/13/18 BRL
5-5-19	54 Bm	J G S to 6 RL	Field	" 28-4-19	DB. 35 + 50 d. 17-5-19 obs. for Dis 11.7.19.
16.6.19	Can. War Graves Det.	T.O.S. on trans from C.R.L.	"	18.5.19	- 5 (chit).
14-7-19	Gen. Dep.	T.O.S. from CWGD.	Witley	" 11-7-19	DO 153
8-7-19	C.R.L.	LD of C.R.L. on trans to Can. War Graves Detachment	Have	- 17.5.19	- 60

Sik  
Gen Dep

B.P.

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.				
16-7-19	l'ain Dy.	SOS to P Wing 666	Witley	14-7-19	DO 155. P. D. 66 15 <sup>7</sup> 19
16-6-19	CWGD.	TOS from Record List.	Field	18-5-19	DO 5.
23-7-19	" "	Proceeded to England.	"	10-7-19	DO 9
P.W. 666.	8/8/19	Severely reprimanded 2.8.19 - forfeits 6 days pay by Paid 12. Regs. for A.W.L. from 23.59. 24.7.19 till 12.00 hrs 30.7.19	6.0.M.S. Witley	2 8/19	D.O. 78
9.8.19	P Wing.	Lost to Canada.	Witley	9.8.19	D.O. 79
		101-D-65		9.8.19	

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

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

500-9-16

H. Q. 2-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps .....  
 Regimental No. 2562389 Rank plc Name Morrison J.S.  
C. E. F.  
 Enlisted (a) ..... Terms of Service (a) ..... Service reckons from (a) .....  
 Date of promotion to } ..... Date of appointment } ..... Numerical position on }  
 present rank } ..... to lance rank } ..... roll of N. C. Os. }  
 Extended ..... Re-engaged ..... Qualification (b) .....

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				
AUG 9 1919	O. S.	T. O. S. No. 2 DISTRICT DEPOT,	TORONTO	1919	PART II D. 234
AUG 19 1919	S. O. S.	(DISCHARGED FROM H. M. S.)	No. 2 DIS. DEPOT,		PART II D. 234

*W. C. Roberts*  
 Lieut.  
 For O. C. No. 2 District Depot.

(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]





(SERVICE AND CASUALTY FORM Part II)

(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, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
Date.	From whom received					


Nothing to be written in this margin.

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..... 2nd C.O.R. C.E.F. Bn. C.E.F. Coy  
transferred to 1st Depot Bn 1st C.O.R. "D" Coy

(2) Regimental Number ..... 2562389

(3) Full Name of Soldier..... Morrison James Stuart

(4) Place of Birth..... Edinburg Scotland, N.B.

(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? ..... No.

(8) Have you any children? ..... No.

If so, give number of boys and girls.....

Also their names and ages.....

(9) Is your Father alive?.....No.....

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

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

If so, state name and address.....Mrs Jennie F. Mackay 6223 Walnut St Philadelphia.....

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

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

(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.

.....\$75 per month Only one brother who is disabled.....

(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.

.....S.A. applied for.....

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

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

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

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

Date.....October 22nd 1917.....

[Signature]  
Officer Commanding.

[Signature]  
Adjutant, 1st Depot Bn., 1st C.O.R. Captain



# ORIGINAL, ORIGINAL MEDICAL HISTORY SHEET

A2  
2562389

Surname **Morrison** Christian Name **James Stuart**

Examined { on <b>13</b> day of <b>July 17</b> 191... at <b>Toronto</b> Birthplace { City or Town <b>Edinburgh</b> County <b>Scotland</b> Apparent age <b>33</b> Trade or occupation <b>clerk</b> Height <b>5</b> feet <b>2½</b> Inches Weight <b>140½</b> lbs. Chest measurement { Minimum <b>31</b> inches Maximum expansion <b>35½</b> inches Physical development <b>fair</b> Small-pox Marks <b>---</b> Vaccination Marks { Arm Right Left <b>1</b> Number <b>1</b> When Vaccinated last <b>childhood</b> (a) Marks indicating congenital peculiarities or previous disease <b>---</b> (b) Slight defects but not sufficient to cause rejection <b>Both eyes D. 20, Hearing good, Nose &amp; throat O.K.</b>	DECLARED FIT BY MEDICAL BOARD Approved by <b>TORONTO MOBILIZATION CENTRE</b> Col. <i>Chas. H. Hatfield</i> <b>M.O.</b> Rank <b>M.O.</b> <b>Toronto Mobilization Centre.</b> <table border="1" style="width: 100%; border-collapse: collapse; font-size: small;"> <thead> <tr> <th style="width: 20%;">Date</th> <th style="width: 20%;">Fit or Unfit</th> <th style="width: 60%;">EXAMINED FOR RE-ENGAGEMENT</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table> <table border="1" style="width: 100%; border-collapse: collapse; font-size: small;"> <thead> <tr> <th style="width: 20%;">Date</th> <th style="width: 20%;">Result</th> <th style="width: 60%;">VACCINATIONS</th> </tr> </thead> <tbody> <tr> <td>17/7/17</td> <td></td> <td><i>S. M. Williams</i> <b>M.O.</b></td> </tr> <tr> <td> </td><td> </td><td> </td></tr> <tr> <td> </td><td> </td><td> </td></tr> <tr> <td> </td><td> </td><td> </td></tr> <tr> <td> </td><td> </td><td> </td></tr> <tr> <td> </td><td> </td><td> </td></tr> </tbody> </table> <table border="1" style="width: 100%; border-collapse: collapse; font-size: small;"> <thead> <tr> <th style="width: 20%;">Date</th> <th style="width: 20%;">Result</th> <th style="width: 60%;">ANTI-TYPHOID INOCULATIONS, ETC.</th> </tr> </thead> <tbody> <tr> <td>17/7/17</td> <td></td> <td><i>T.M.C. 2-9-17</i> <b>M.O.</b></td> </tr> <tr> <td>24/7/17</td> <td></td> <td><i>Williams</i> <b>M.O.</b></td> </tr> <tr> <td>1/8/17</td> <td></td> <td><i>Williams</i> <b>M.O.</b></td> </tr> </tbody> </table>	Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT																			Date	Result	VACCINATIONS	17/7/17		<i>S. M. Williams</i> <b>M.O.</b>																Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.	17/7/17		<i>T.M.C. 2-9-17</i> <b>M.O.</b>	24/7/17		<i>Williams</i> <b>M.O.</b>	1/8/17		<i>Williams</i> <b>M.O.</b>
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1/8/17		<i>Williams</i> <b>M.O.</b>																																																					

Enlisted on **13** day of **July 1917** 191... at **Toronto**

CORPS	REG'TL NUMBER	HABITS	DATE
2nd C.E.F. 2nd CANADIAN RESERVE BATTALION.	2562389		
8th CAN. RES. BN. 54 Bn.			15-2-18. APR 7 1918

**EXAMINED OR DISCHARGED BY A MEDICAL BOARD**

STATION	DATE	DISEASE	RESULT
	JUL 17 1917		

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.



*Pwning 2 group*

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

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. *2362389* Rank *Capt* Surname *MORRISON*  
(Given name in full) *JAMES STUART*  
Unit or Corps *C.W.G.D.* Birthplace *Edinburgh Scotland*

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

I. GENERAL DESCRIPTION :

Physique *Good* Weight *135* lbs. Height *5-8* in. Colour of Eyes *Brown*  
Nutrition *Good*  
Pulse *Regular 76*  
Condition of arteries *S.P.P.*  
Vision Rt. *6/12* Left *6/12*  
Hearing (conversational voice) Rt. *20* ft.  
Left *20* ft.

Identification marks, scars, or deformities.  
(Give cause and date of origin.)  
*Circular Scar mid joint left thumb - 1917*

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

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.  
*Mumps, bronchitis in childhood  
V.O.C. 1912. apparently cured*

# EXAMINATIONS

## THIS SECTION FOR USE OVERSEAS—

Examined at Wintley.....(Overseas)

Date 1-8-19.....

Signed J. S. Morrison..... 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 J. S. Morrison.....

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

## THIS SECTION FOR USE IN CANADA—

Examined at .....(Canada)

Date .....

Signed ..... M.O.

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

Signature .....

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

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

[OVER]

*Pwng Group*

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

DIRECTIONS TO DENTAL OFFICERS

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) MORRISON J.S.  
 REGIMENT C.W.G.D. RANK Capt No. 2562389  
 Date of Examination in England 1/5/19 Date of Examination in France \_\_\_\_\_

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



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 7. 21. 28 29
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 *R. B. Grosby Capt*



# SEPARATION ALLOWANCE

Sheet No. 2. Mrs. Jennie MacKay W. Mother Name of Soldier Morrison Jas. S.  
 OVERSEAS CONTINGENTS PAYMENTS. Pte. 2562389 1st. Depot Bn

L. L. Job 4503. - Req. 6832.

*Handwritten scribble*

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.		U. 19934	72	Finald 12-10-17
Dec.		<del>25379</del>	<del>20</del>	BT 25379 came J.D.
Jan.	1918	P28700	20	
Feb.			112	Future paymts made on
March				consolidated sheet.
April				
May				
June				EAC 18/12/17.
July				

T 25674

RE-WRITE

*Handwritten signature*

MILITIA AND DEFENCE  
**SEPARATION ALLOWANCE**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

**PAYMENTS.**

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

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







ASSIGNED PAY.	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.	NAME: MORRISON, James, Stuart,
EFFECTIVE DATE: 1-12-17 118719		EFFECTIVE DATE: -		NUMBER: 2562389.
AMOUNT: 18 <sup>00</sup> Stopped		AMOUNT: -		PARTICULARS OF RANK OR APPOINTMENT

NAME, ADDRESS, RELATIONSHIP & AUTHORITY	WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.	AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
Mrs. Jenny Mackay, N.R. 6223 Walnut St., Philadelphia, Pa. Mother U.S.A.				Pte.

UNIT AND TRANSFERS			
ORIGINAL UNIT: 1st Co, R. Draft.			
DATE ACCOUNT FIRST OPENED: 1-12-17			
AUTHORITY	DATE EFFECTIVE	DATE LEGER SHEET T'FD	UNIT TRANSFERRED TO
			2nd Co, R.D.
RD. 29. 13/4/18	1/5/18	21/5/18	54th Bn

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
11/7/19	10022		38 93				

31/7/19 A.P. & Bal. \$25.10 Compiled 19/7/19 *all A.S.P.B. unavailable*

PARTICULARS OF RENDERING NON-EFFECTIVE: Trans to Com 1/8/19 NR 11846 Bkshw to Wkey "P" Wng 17/7/19 Md. 2.

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
1918											
March 31	Bal. Fwd								17 83		
	A.P.	33		A.P.				15			
				AR. 43. 4/4/18 8th Res.	9 73						
				" 145 16/4/18 66RB.	4 46				21 64		
May	" "	33		4/1320. 4/5/18. 4W.C.C.R.C.	3 57			15			
		34 10		F.P.				15			
				4/1429. 19/5. 4W.C.C.R.C.	4 46						
		34 10			8 03			15	32 71		
June	" "	33		A.P.				15			
				4/1523. 4/6. 4W.C.C.R.C.	3 57						
				" 642. 7/6. " " "	3 57						
		33			7 14			15	43 57		
July	" "	34 10		A.P.				15			
				4/1759. 17/7. 4W.C.C.R.C.	4 46						
				" 897. 17/7. " " "	3 57						
		34 10			8 03			15	54 64		
Aug	" "	34 10		4/11051. 4/8. 4W.C.C.R.C.	3 57						
				4/12184. 15/8. C.C.Sch.	3 57						
				A.P.				15			
		34 10			7 14			15	66 60		
Sept.	" "	33		A.P.				15			
				4/1403. 2/9. C.C.Sch.	3 57						
				4/1278. 1/9. " " "	5 35						
		33			8 92			15	75 68		
Oct.	Pte. Pay	34 10		A.P.				15			
				A.R. 1566. 17/10/18. 66 S.B.	3 73						
		34 10			3 73			15	91 05		
				Carried forward							

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Nov	Balford P.P.	33		al				15	91 05		
				AR 1162 1/11/18 54 Bn	373						
				✓ 7797 15/11/18 CCHQ	1306						
Dec		34 10		al				15			
				AR 5909 5/12/18 69 B.D.	653						
				✓ 8146 19/12	746						
Jan		34 10		al				15	116 47		
		101 20			30 78			45	64 90		
Feb		30 80		al				15	181 37		
				AR 9883 3/12 54 Bn	746				177 58		
				" 2686 15/1 C.G.B.D.	933				379		
				+ 740 30/1/19 C.G.B.D.	653						
				✓ 6715 12/2	746						
Mar		34 10		al	30 78			15			
				E.S. 5716 7/13/13 3/3	116 80						
		64 90			147 58			30	379		
Apr May	RP	17 10		al RP				30	40 89		
				AR 192 10/5/19 C.D.M.T.	698				3391		
		70 89			698			30			
June	RP	53		RP				15	51 91		
July	"	34 10		"				15	70 01		
				DMAR 714 27-5-19	698				23 03		
		101 01			698			30	64 03		
				AR 100rv. Paving ce	3893				2510		
					3893						
Sep.				AR 173 Paving - 6/8/19 (End)	24 33						
				for 6 days pay by Prsk 2/5/19							
				and from 25.59 24/7/19 to 12.00 2/7/19							
				reprimanded - No. 78 - 8/8/19 Paving ce	6 60				5 83		
					24 33	6 60					

S.O.S. Can 9.8.19.  
St. 101 - m.D. 2

WAR SERVICE BADGE.

CLASS "A" No. 389728 SHORT FORM.  
PROCEEDINGS ON DISCHARGE.  
(Demobilization.)

12-11-39

D. A. J

O. G. 21



1. No. 2562389

2. Rank Private

3. Name Morrison James Stuart

4. Unit C.W.G.D.

5. Date of Discharge AUG 19 1919 Place TORONTO, ONT.

6. Reason for Discharge Demobilization

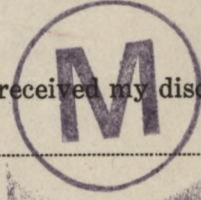
DEMOBILIZATION

7. Authority No. 2 District Depot, Part II, D.O. No. 334

8. Proposed Residence after Discharge 14 Marlton 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. ?



J. S. Morrison  
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place No. 2 DISTRICT DEPOT  
Date AUG 19 1919  
TORONTO

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

D.A. 2  
O.G. 21

WARRANTY BADGE  
CLASSIFICATION  
PROCEEDINGS ON DISCHARGE  
(Termination)

1. No. *1000*

2. Rank *Sergeant*

3. Name *John J. Smith*

4. Unit *1st Battalion*

5. Date of Discharge *10/10/45* Place *Toronto, Ont.*

6. Reason for Discharge *Medical*

DEMobilIZATION

7. Authority *No. 2 District Depot, Part 2, D.O. No. 21*

8. Proposed Residence after Discharge *100 Main St.*

9. CERTIFICATE TO BE SIGNED BY SOLDIER

I hereby acknowledge that at the undersigned place and date I received my discharge Certificate M. E. W. 2



Signature of Soldier *John J. Smith*

10. CONFIRMATION

The discharge of the above named man is hereby confirmed.

Place *No. 2 District Depot*

Date *10/10/45*

Signature *John J. Smith*

for (O.C. Discharge Unit)

LIST OF DISCHARGE DOCUMENTS

Attestation Paper, Triplicate

Military Form W-43

or Particulars of Record

Military Form W-153

Final Conduct Sheet

Military Form W-317 or A.F. B. 123

Casualty Form

Military Form W-317 or A.F. B. 123

Last Pay Certificate

Military Form W-41

Certificates that missing documents are unobtainable

Medical History Sheet

Military Form H-114 or A.F. B. 173

Proceedings of Medical Board

Military Form H-114 or A.F. B. 173

Dental History Sheet

Military Form H-402

Medical Report

Military Form H-114 or A.F. B. 173

Reformatory Conduct Sheet

Military Form H-202

Company Conduct Sheet

Military Form H-222A

1. Discharge Certificate (M.D. Form 100)
2. Certificate of Release or Discharge (M.D. Form 100)
3. Medical History Sheet (M.D. Form H-114)
4. Final Conduct Sheet (M.D. Form W-317)
5. Last Pay Certificate (M.D. Form W-41)
6. Proceedings of Medical Board (M.D. Form H-114)
7. Dental History Sheet (M.D. Form H-402)
8. Medical Report (M.D. Form H-114)
9. Reformatory Conduct Sheet (M.D. Form H-202)
10. Company Conduct Sheet (M.D. Form H-222A)

GROUP  
CHECKED

**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. 351). *Went*
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595),
15. Sundry Documents.

Group..... *B* .....

Checked by No. .... *14* .....

Date..... *5/17/11* .....



"CARONIA" 17.8.19

M9001

DISPERSAL "I"

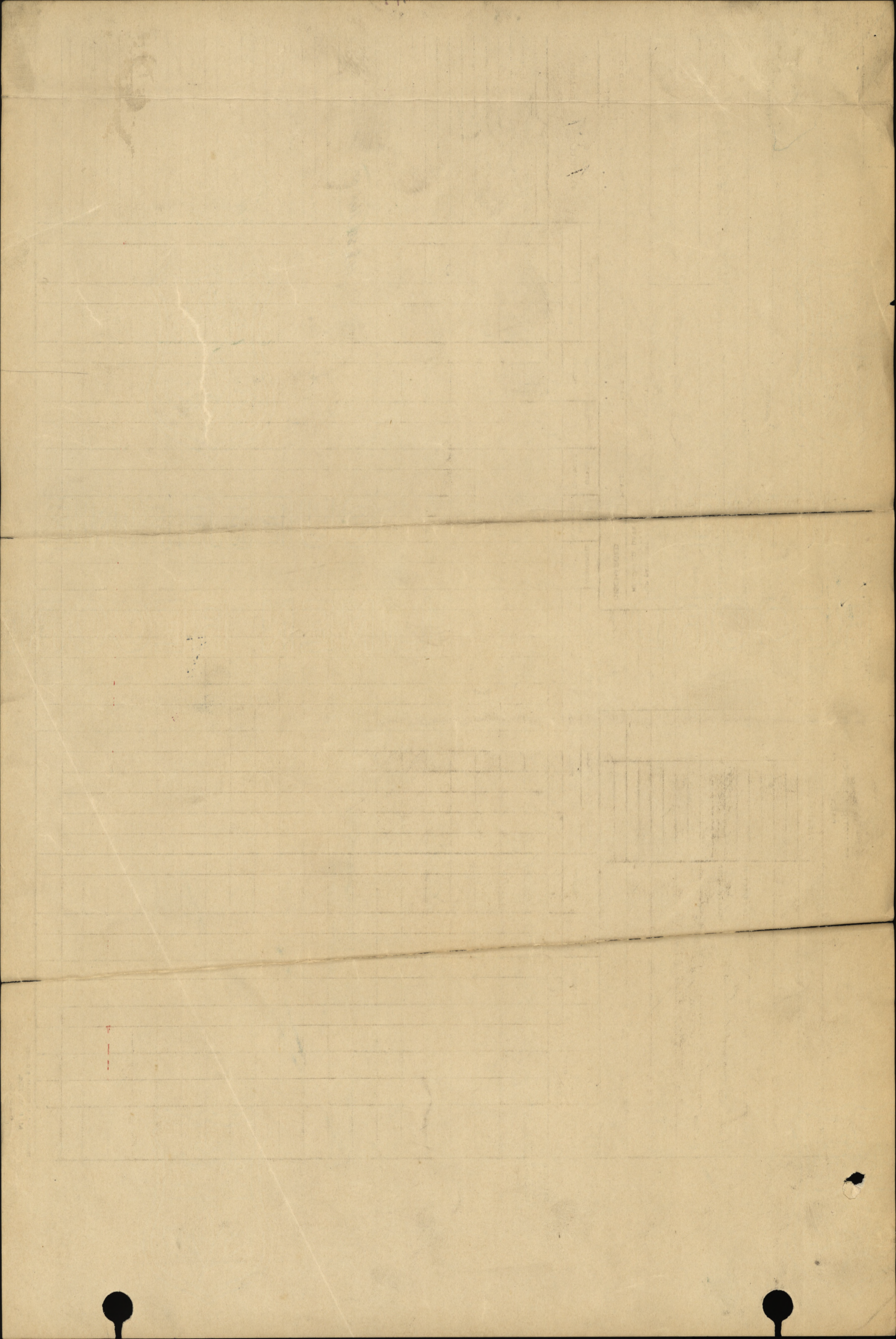
AUDITOR PAYMASTER

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

REGT. NO. 2562389 RANK Pte NAME (IN FULL) MORRISON, J.S.

Form with fields for M. OR S., NEXT OF KIN, ADDRESS, RELATIONSHIP, PARTICULARS, EFFECTIVE DATE, AUTHORITY, ORIGINAL UNIT, PLACE OF ATTESTATION, DATE OF ATTESTATION, ASSIGNED PAY \$, PAYABLE TO, ADDRESS, STOP PAYMENT FORM, DISCHARGED, PLACE, DATE, REASON, AUTHORITY, IF ENTITLED TO POST DISCHARGE PAY.

Table with columns: MONTH, PAY AND F.A., OTHER CREDITS, TOTAL CREDITS, ACQUITTANCE ROLLS, CASH PAYMENTS, ASSIGNED PAY, REGIMENTAL CHARGES, OTHER CHARGES, TOTAL DEBITS, BALANCE (DEBIT, CREDIT), PARTICULARS OR REMARKS.



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

# M 20022

Dec. 1. 17

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

20	\$ 25.00	30
----	----------	----

15			
----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No. 2562389  
 Rank Pte Promoted Reverted Discharge  
 Soldier's Name Jas. Stuart Morrison  
 Battalion 1st Depot Bn. P. C. O. R. No 1 Draft  
 Beneficiary Mrs Jennie Mackay Ret'd 24/1/18  
 Relationship Widowed Mother NRW 2554 29/1/18  
 Address 6223 Walnut St. Philadelphia, Pa. U.S.A.  
Dec 31-17 112 nil 112

Name Mrs Jennie Mackay (mother)  
 Address 6223 Walnut St, Philadelphia Pa  
 Change of Address  
 1 14 Mainland St  
 2 Ironb Oak (alt-1480119106) 8/19  
 3  
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total
Dec 1917	E 5264		15	15
Jan	J 65716	30	15	45
Feb	H 73554	25	15	40
Mar	N 92464	25	15	40
Apr	N 10479	25	15	40
May	R 17703	25	15	40
Jun	Z 13776	25	15	40
July	Z 25082	25	15	40
Aug	Z 37595	25	15	40
Sep	Z 51448	25	15	40
Oct	Z 66268	25	15	40
Nov	Z 80847	25	15	40
Dec	Z 90958	45	15	60
Jan	Z 111481	30	15	45
Feb	Z 124694	30	15	45
Mar	Z 136659	30	15	45
Apr	Z 5785	30	15	45
May	Z 13736	30	15	45
June	Z 19422	30	15	45
July	Z 23089	30	15	45
Aug	Z 13474	30	15	45
		<u>8560</u>	<u>315</u>	<u>880</u>

013136-9-67

REMARKS  
File 013136-9-94

2nd Series  
Em.C. 18/12/17

31-8-14  
 A/c Closed  
 Ret'd per... Caronia  
 Date... 18-8-14 M.F.W. 187  
 Clerk... Stotesbury

nrord 109455 Desb

M. F. W. 128  
400ac-6-17-1772-96-141  
L. L. 2230-M. & D. 7908.

AUDITED.



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
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