

ATTESTATION PAPER.

No. 651921

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?.....Wesley
- 1b. What is your present address?.....Dyer's Bay, Ont.
2. In what Town, Township or Parish, and in what Country were you born?.....Albhamble, Ontario
3. What is the name of your next-of-kin?.....David W. Morrison
4. What is the address of your next-of-kin?.....Dyer's Bay, Ont.
- 4a. What is the relationship of your next-of-kin?.....Father
5. What is the date of your birth?.....Aug. 14. 1894.
6. What is your Trade or Calling?.....Farmer.
7. Are you married?.....No.
8. Are you willing to be vaccinated or re-vaccinated and inoculated?.....Yes: Wesley Morrison
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 }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }.....Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Wesley 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.

Wesley Morrison (Signature of Recruit)
Date: Mar 6 1916 Ernest Pettigrew Lieut (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Wesley 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.

Wesley Morrison (Signature of Recruit)
Date: Mar 6 1916 Ernest Pettigrew Lieut (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 Lion's Head, Ont. this 6 day of March 1916
S. B. Cooper (Signature of Justice)

Description of Wesley Morrison on Enlistment.

Apparent Age.....21 years 7 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 man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer.)

Height.....5 ft. 7 1/8 ins.

Chest measurement. { Girth when fully expanded.....38 ins.
Range of expansion.....5 ins.

Complexion.....Dark

Eyes.....Brown

Hair.....Black

Religious denominations. { Church of England.....Yes
Presbyterian.....
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 6th.....1916.

Place.....Lion's Head, Ont.

Ray S. [Signature]

Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

.....Wesley 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 6.....1916.

Lt. Col.

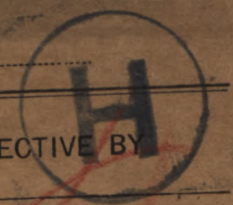
REGIMENTAL DOCUMENTS

2 5-19
gw

Dur

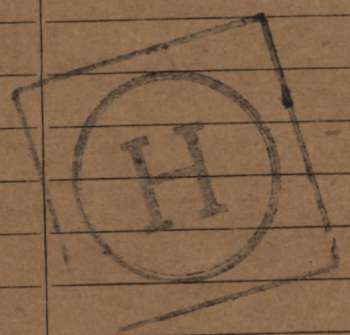
NAME MORRISON WESLEY

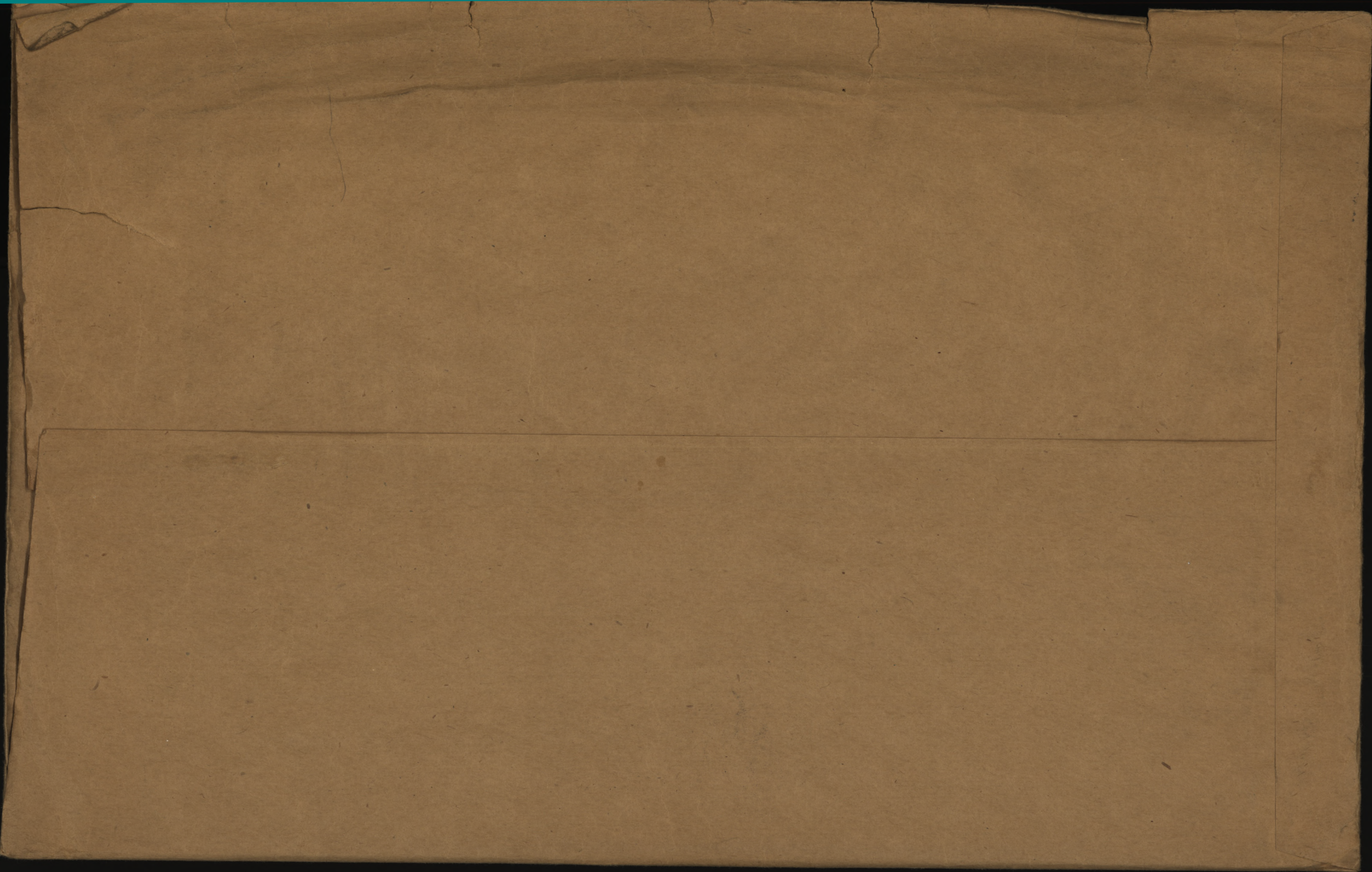
REGT. NO. 651 921 UNIT 3 CD 90 H. Q. FILE NO.



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2 misc.					
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1 Form 122					
1 Form 123					





✓ SURNAME.

Morrison

CARD NO.

*305 illis. 30-3-19
Demob #204
No. 101 FOLL. 11-4-19*

CHRISTIAN NAMES

Wesley

REGL. NO. *651921*

RANK

Pte. G.N.

UNIT ~~*160th.*~~

64th Battery. C.F.A. ("3rd R.D.")

~~*Bn.*~~

FORMER CORPS

Nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Morrison, David W.

RELATIONSHIP TO SOLDIER

Father

ADDRESS

Lions Head, Ont.

Leap 5-3-19.

6/18

COUNTRY OF BIRTH

Canada, Albemarle, Ont.

DATE

Aug. 14th 1894

PLACE OF ATTESTATION

Lion's Head, Ont.

DATE

Mar. 6th 1919

Trans from 160th Bn. to 64th Battery. Auth 64th Bty.

3.L. 25-5-17. R/O. 27-3-19 $\frac{292}{95}$

L. L. 94504. M. & D. 6512.

0/5-2-6-17 $\frac{857}{6}$

M. F. W. 22. 250M.-2-16. H. Q. 1772-39-339.

Dr.

Sailed from Malajapur S. S. Olympic 2/6/17

MARRIED

SINGLE *yes*

WIDOWER

TRADE OR CALLING

Farmer

RELIGION

Church of England

DESCRIPTION.

APPARENT AGE

21 YEARS

7 MONTHS

HEIGHT

5 FEET

7 1/2 INCHES

CHEST MEASUREMENT

38 INCHES

EXPANSION

8 INCHES

COMPLEXION

Dark

EYES

Brown

HAIR

Black

DISTINGUISHING MARKS

Nil.

MEDICAL EXAMINATION.

PLACE

Lion's Head

DATE

Mar. 6th 1916.

No. 651921

RANK

Capt.

NAME

Morrison, W

Draws

from T.O.S. Casualties MDI

UNIT

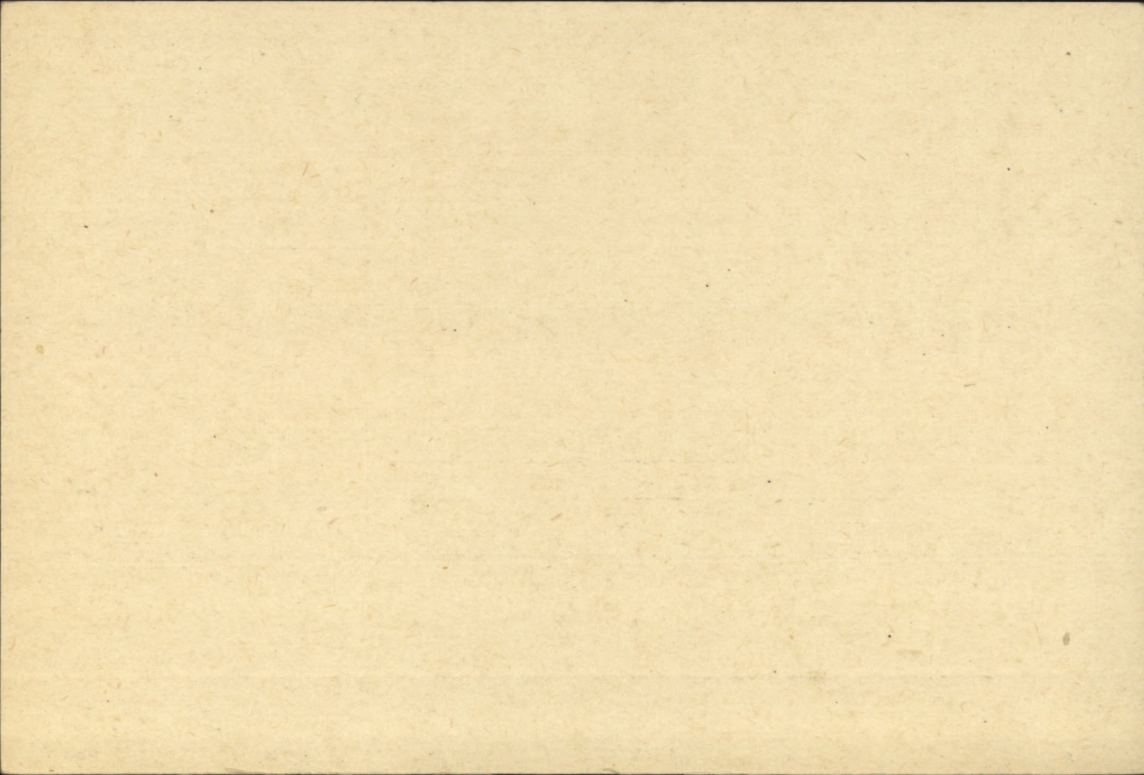
64th Depot Battery C. 7d.

15-10-16

DO 151 of 10-10-16

M. D. /

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Oct 15	1916 Nov 30	L		
Dec.		L		
1917 Jan.	1917	L	Prom appl	DO 15 of 15-1-17
Feb.		L	Keep.	DO 57 of 26-2-17
Mar.		L		#
Apr.		L		D. 0145 of 25-5-17.
May		L		
		L	Draws of 25-5-17.	



REG. NO. 657921 NAME Morrison 26.
(SURNAME FIRST)

RANK Plt. CORPS 160 Batt 64 Bn

AGE 22 SERVICE 8/12 11 1/2/12

NAME OF HOSPITAL Military PLACE London

DATE OF ADMISSION 13-10-16 16-2-17

DISEASE Gonorrhoea VDG

DISCHARGE 9-11-16 12-3-17

OPERATION

DISCHARGED TO DUTY Yes

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD

No. 651921. RANK *Pfc.*

NAME *Morrison. Wesley.*

T. O. S. 6-3-16
10060-10-3-16

UNIT *160th Battalion*

M. D. *1*

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
<i>Mar. 6. 1916.</i>	<i>Mar 31. 1916.</i>	<i>✓</i>		
<i>Apr.</i>		<i>✓</i>		
<i>May</i>		<i>✓</i>		
<i>June</i>		<i>✓</i>		
<i>July</i>		<i>n.</i>		
<i>Aug.</i>		<i>✓</i>		
<i>Sept.</i>		<i>n.</i>		
<i>Oct. 1</i>	<i>Oct. 14</i>	<i>n.</i>	<i>Transf to 153rd. O/S. B'n. 14/10/16</i>	<i>(O.S. 246) of 14/10/16</i>



com.
we

Number. 651.921.....Rank *Over*.....

Surname. M. P. B. B. J. S. O. N.

Christian Name. *Wesley*.....

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

Date of Service. *16:10:17*.....

Remarks..... *Lions Head*.....

Latest Address..... ~~*Dyers Bay Ont*~~.....
Ont.

Roll No.

B. Page 7369.

B
X

OCT 12 1921

9V 60649 djesp

M. D.

NAME

RANK

UNIT

T. O. S.

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

AUTHORITY

PARTICULARS

SIG.
OR
REC'T

PAID
TO

PAID
FROM

Casualty Form—Active Service.

Regiment or Corps

160th of Battalion C.E.F.

Regimental No. 65197

Rank

Private

Name

Morrison, Wesley

Enlisted (a) 6-3-16

Terms of Service (a) War 6 mos.

Service reckons from (a) 6-3-16

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)

Driver Farmer

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	Canada	28.5.19	✓
		Disembarked	England	9 th 6.19	
12.6.19 ✓	Res Bde C.F.A.	I.O.S. from Canada	Sclippe	10.6.19	Port II 163 ✓
25.6.19	1 st Bde C.F.A.	I.O.S. & absorbed from Res Bde C.F.A.	Sclippe	23.6.19	Port II 4
15 OCT 1917	O.O. 1st BDE. Can. Res. Arty.	PROCEEDED O/SEAS TO C.F.A.	WITLEY CAMP.	14 OCT 1917	1st BDE. Pt. II. ORDER No. 116 Chas. H. W. for CAPT. & AD For O.C. 1st BDE. CAN. RES. AR P.T.O. 175 Alfred Lewis Lt for Lt Col's Records Co.
24/6/19	Res Bde	S.O.S. to 1st Res Arty.	Shorncliffe	23/6/19	

(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, Shoecing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.]

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks	
Date	From whom received				taken from Army Form B. 213, Army Form A. 36, or other official documents.	
16-10-17	C.G.B.D.	Arr'd.Reinf. T.on S. Can.Arty.Pool.	16-10-17	N.R.	90	22-10-17
27-10-17	do	Sentenced to forfeit 3 days pay, 21-10-17 for W.on A.S. "Absent without Leave from 9.30 p.m. to 11.50 p.m. (About 2½ hours) 12-10-17".	Field.	21-10-17	B.2069	102 7-11-17.
16-10-17	C.G.B.D.	Arr'd.Reinf. T.on S. Can.Arty.Pool.	16-10-17	N.R.	90	22-10-17.
11-11-17	do	Left Base for G.C.R.C.	Field.	11-11-17	N.R. (711)	
do	X.C.R.C.	Arrived at Can.Arty.Pool.	do	11-11-17	N.R. (59)	
21/11/17	aalg.	Posted to 3rd Coac.	fed	1/12/17	ccrc. H.R. 5/12/17 (83)	
"	"	T.O.S. of 3rd Coac.	fed	1/12/17	K.R. 567. Pk. 2.0.125.	
					Pk. 2.0. 164.	
5/10/18	3rd Coac.	Awd. 1 Good Conduct Badge		6/3/18	B.213 Pk. 2.0. 90	5/19/18.
26/10/18	do	Granted 14 days leave to U.K.		23/10/18	B.213 Pk. 2.0. 960	5/10/18
16/11/18.	do	Rejoined from leave	Field.	10/11/18	B.213	
18/2/19	Emb. Co. Kabi	Proceeded to England		18/2/19	Pk. 2.0. 19/19.	

19/3/19 3rd Coac. O.S. on proceeding Canada. 19/3/19 T.T.O. 46 19/3/19
Adm. transfer Lt. for Lt Col. aalg.

1919 O. S. T. O. S. No. 2 DISTRICT DEPOT, TORONTO. 1919 PART II D. O. 101

MAR 30 1919 S. O. S. (DISCHARGED FROM H. M. S.) No. 2 DIS. DEPOT, PART II D. O. 101

W. J. Smith
 Lieut.
 For O. C. No. 2 District Depot.

J.P Rank

Name MORRISON, Wesley

Reg'l No. 651921

Dft 64th Bty to Res. Arty.
Unit

If in perm. Corps, }
What Unit? }

Married or Single Single

Place and Date of Enlistment Lion's Head Ont. 6th March. 1916 Place of Birth Albermarle. Ont.

Name and Address, Next-of-Kin ~~David W. Morrison~~ *D. W. Morrison*
Dyer's Bay. Ont. Relationship *Father. Sparta. Ont.*

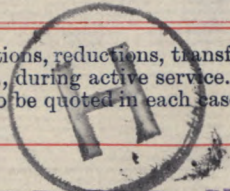
Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

Discharge, Date and Place Reason Character

H. W. V., Ld.-9546-16.

NJE, R. B. No. *17174*
File No. *17174*
Category

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
 ARRIVED IN ENGLAND 9 6 17 S/S OLYMPIC.					
12.6.17	Rank 6th	S.O.S. from Canada	Schiff	10.6.17	PT 0 163
24.6.17	" "	S.O.S. to 1st Res Arty	"	23.6.17	" " 175
25.6.17	1st Res Arty	S.O.S. from Res Bde	"	"	" " "
15-10-17	do	S.O.S. on proc of seas	Witley	14-10-17	PT 116
22-10-17	Art. Pool	T. O.S. as reinforcements	Field	16-10-17	PT 90
13-12-17	3rd DAC	Loss on posting from Art. Pool	"	1-12-17	PT 116 of party Pool PT 125 of 11-12-17
17-10-18	as as	Awarded one Good Conduct Badge	as as	6-3-18	PT 90.
		Proceeded to Canada.		19-3-19	29-I.
19.3.19	Sgt	S.O.S. on proc. to Canada	Beholt	19.3.19	PT A. 46

A.F.B. 19 CLEARED
 26 OCT 1917
 W.S.P.

MEDICAL HISTORY SHEET.

Surname Morrison Christian Name Wesley

Examined { on 6th day of March 1916
at Lion's Head, Ont.

Approved by [Signature]
Rank [Signature] M.O.

Birthplace { City or Town Purple Valley
County Bruce, Ontario

Apparent age 22 &

Trade or occupation Farmer

Height 5 Feet 7 1/2 Inches.

Weight 170 Lbs.

Chest measurement { Minimum 33 inches.
Maximum expansion 38 inches.

Physical development Excellent

Small-Pox Marks None

Vaccination Marks { Arm Right one on left arm
Number one

When Vaccinated last Sept 1906

(a) Marks indicating congenital peculiarities or previous disease none

(b) Slight defects but not sufficient to cause rejection none

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

Date.	Result.	VACCINATIONS.
<u>7/7/16</u>	<u>Pos.</u>	<u>[Signature] M.O.</u>
		M.O.
		M.O.

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>22/6/16</u>		<u>[Signature] M.O.</u>
<u>30/8/16</u>		<u>[Signature] M.O.</u>
<u>7/9/16</u>		<u>[Signature] M.O.</u>
<u>3/7/17</u>	<u>T.A.B. rec. no. 100</u>	<u>[Signature]</u>

Enlisted on 6th day of March 1916 at Lion's Head, Ont.

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>160th O. S. Battalion, C. E. F.</u>			
Transferred to	<u>1st. Ba. C. Ra.</u>	<u>651921</u>		<u>10-6-17</u>
	<u>R.O.S. To. C. F. A.</u>			<u>14 OCT 1917</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>London Ont</u>	<u>4/10/16</u>	<u>med Bd</u>	<u>Fit, J. J. McNeilly</u>
<u>Quebec Ont</u>	<u>Feb 21st 1917</u>	<u>on exam for d.s.</u>	<u>James fit</u>
	<u>F. Walsh</u>	<u>Jan move</u>	<u>E. B. Barnes. Capt. R.A.S.</u>
	<u>Capt. dunc</u>	<u>Capt. Camm.</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.

[Handwritten mark]

Surname *Morrison* Christian Name *Wesley*

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
<i>London</i>		<i>26</i>	<i>2</i>	<i>17</i>	<i>12</i>	<i>3</i>	<i>17</i>	<i>Gonorrhoea</i>	<i>15</i>	<i>Recovered</i>	<i>Lt Ballantyne Capt Amc</i>

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. 651921 Rank Driver Surname Morrison
(Given name in full)
Wesley
 Unit or Corps 3rd C. I. A. C. Birthplace Purple Valley Ont

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

1. GENERAL DESCRIPTION: *list*

Physique Good Weight 160 lbs. Height 5 ft. 8 in. Colour of Eyes Grey
 Nutrition Good
 Pulse 76 Regular
 Condition of arteries Soft
 Vision Rt. 12 Left 12
 Hearing (conversational voice) Rt. 20 ft. Left 20 ft.

Identification marks, scars, or deformities.
(Give cause and date of origin).

Loss of tip of Ring finger Rt 1912
Scar Lt Shin (Accident 1915)

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 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.

(1) VD 9. MHS. Apparently cured

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Wulford Camp (Overseas)

Date 24:2:19 Signed J. M. Clark M.O.
Capt

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 A. Morrison

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

THIS SECTION FOR USE IN CANADA—

Examined at (Canada)

Date Signed M.O.

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

Signature

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

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

Hum

651921

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..... **160th Bruce Battalion**

(2) Regimental Number..... **651921**

(3) Full Name of Soldier..... ~~Morrison, Wesley~~ **MORRISON, Wesley.**

(4) Place of Birth..... **Purple Valley, 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?..... **No**

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

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

 Also their names and ages.....

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

If so, state name and address..... **David William Morrison, Dyers Bay, Ont.**.....

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

If so, state name and address..... **Harriett Morrison, Dyers Bay, Ont.**.....

(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?..... **No**.....

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.

Morrison Lt.Col.
Officer Commanding.

Date..... **June 6th 1916.**.....

160th Os. B'n.C.E.F.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge

Class "A" No.

THIS IS TO CERTIFY that No. 651921 (Rank) Driver

Name (in full) Wesley Morrison enlisted in
the 160 Bn.

CANADIAN EXPEDITIONARY FORCE at Lions Head on the 6th
day of March 19 16

HE served in 160 Bn., 64th Bty. C.F.A., C.P.A. Roncliff, 2nd C.D.A.C.

and is now discharged from the service by reason of Demobilization.
Medical Unfitness.

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

Age 24 years 7 months

Height 5' 7 1/2"

Complexion Dark

Eyes Brown

Hair Black

Marks or Scars Loss of tip of
ring finger Rt. Hand
left shin.

W Morrison
Signature of Soldier

R.S. Woyat
Issuing Officer

Date of Discharge

No. 2 DISTRICT DEPOT
MAR 30 1919
TORONTO

For
O.C. No. 2 District Depot.
Rank

Date MAR 30 1919 1919

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

THIS IS TO CERTIFY that No. _____ (Rank) _____

Name (in full) _____ enlisted in _____

the _____

CANADIAN EXPEDITIONARY FORCE at _____ on the _____

day of _____ 19 _____

HE served in _____

and is now discharged from the service by reason of _____

Demobilization _____

Medical Unfitness _____

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

Age _____	Marks or Scars _____
Height _____	
Complexion _____	
Eyes _____	
Hair _____	

Signature of Soldier _____

Reading Officer _____

Date of Discharge _____

No. 2 DISTRICT OF _____

MAR 30 1919

TORONTO

Date _____ 19 _____

D.O. Ho. 2 District Depot _____

Rank _____

N.B.—As no duplicate of this Certificate will be issued, any person having same is requested to forward it in an unopened envelope to the Secretary, Military Council, Ottawa, Canada.

DEPARTMENT OF VETERANS AFFAIRS
MINISTÈRE DES AFFAIRES DES ANCIENS COMBATTANTS

DEATH NOTIFICATION
AVIS DE DÉCÈS

TO:
À:

DATE . JANUARY 8, 1975 .

NAME Service No. CPC No.
NOM MORRISON WESLEY Matricule No. 651921 ARMY WW 1 CCP No.

WVA No.
AAC No.

Information Received from:

Information reçue de: SUPT VETS INS

Date of Death
Date du Décès OCT 6, 1974

Place
Endroit N/S

Distribution: WSR-DASG
VI- ASS
DO - BD
HO - BC

Pour le chef,
Beverly Ann Barclay
for Chief, Central Registry Division.
Dépôt central des dossiers.



Mother
MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

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

To Whom *Mrs. Harriet Morrison* By Whom Assigned *Morrison. W.*
Address *Dyers. Bay.* Regtl. No. *651921.*
Ont. Rank *Gnr.*
Corps *64th Depot. Bty.*
Rate *\$15.00*

JUN 1 1917

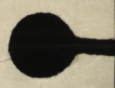
PAYMENTS

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				



11/11

11/11



Mother
MILITIA AND DEFENCE

M. F. W. 12a.
50m.-4-16.
1772-39-819.

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.

Harriet
Mrs. H. Morrison.

Name of Soldier

Morrison W.

L. L. Job 310.—Req. 6574.

PAYMENTS.

651921-

Gnr-64th Dep. Bly-

\$15⁰⁰

Remarks.

JUN 1 1917

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June		<i>M 22291</i>	<i>15</i>	
July		<i>I 23614</i>	<i>15</i>	<i>Gu</i>
Aug.		<i>V 30546</i>	<i>15</i>	
Sept.		<i>37188</i>	<i>15</i>	<i>2</i>
Oct.		<i>N 44086</i>	<i>15</i>	
Nov.		<i>K 51015</i>	<i>15</i>	
Dec.		<i>L 60773</i>	<i>15</i>	
Jan.	1918			
Feb.			<i>105</i>	
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.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

MARRIED OR SINGLE

Single

PLACE OF BIRTH Albermarle, Ont. Can.

NAME AND ADDRESS OF NEXT OF KIN David W. Morrison

Syer's Bay, Ontario.

RELATIONSHIP OF NEXT OF KIN Father.

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c

Table with columns: PARTICULARS, EFFECTIVE DATE, AUTHORITY

ADMISSIONS TO HOSPITAL, &c

Table with columns: DATE ADMITTED, DATE DISCHARGED, V. OR A., NAME OF HOSPITAL

REG'L No. 651921. RANK

Gunner NAME Morrison, Wesley.

IF IN PERM. CORPS WHAT UNIT

UNIT 64th Bty TRANSFERRED TO 3 Dec DATE 26/1/17 AUTHORITY 167

PERMANENT FORCE ALLOWANCES

TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION Lion's Head, Ont.

TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION March 6th 1916.

TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY \$ 15.00 DATE EFFECTIVE 1st June 1917.

PAYABLE TO Harriet Morrison, Syer's Bay, Ont.

RELATIONSHIP Mother.

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE

PAYABLE TO

RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE)

EFFECTIVE REASON

DISCHARGE DATE AND PLACE

REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

Main financial ledger table with columns: DATE, PAY, FIELD ALLOWANCE, WORKING OF SPECIAL PAY, ASSIGNED PAY CREDITS, OTHER CREDITS, TOTAL CREDITS, ACQUITTANCE ROLLS, CASH PAYMENTS, BALANCE, PAY WITHHELD OR DEFERRED, PAY AVAILABLE FOR ISSUE, REMARKS

ASSIGNED PAY: ENGLAND or CANADA. SEPARATION ALLOWANCE: ENGLAND or CANADA. NAME: MORRISON Wesley. NUMBER: 651921.

EFFECTIVE DATE: 6-19-19. AMOUNT: 500. EFFECTIVE DATE: 13/19. AMOUNT: -

NAME, ADDRESS, RELATIONSHIP & AUTHORITY: Harriett Morrison (Mother), 4400 Bay, Ontario. D.W. Morrison (Father), Sparta, Ont.

UNIT AND TRANSFERS: ORIGINAL UNIT: Dft. 64 Bty. DATE ACCOUNT FIRST OPENED: Jun 1917. AUTHORITY: 164. DATE EFFECTIVE: 26-11-17. UNIT TRANSFERRED TO: 3 D.a.e.

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
25/2	425	ACCT	4980				

DAILY RATES OF PAY AND ALLOWANCES: AUTHORITY: 164. PAY: 1.00. F.A.: 10. P.F.A.: - . SUBS'CE ALL'CE: - .

PARTICULARS OF RENDERING NON-EFFECTIVE: Discharged to Canada 28/2/19 with 3820 B. sheet 2/1/19 B. sheet 17. D. 1

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
Apr	J.P.	33		P.A.P.				15-	67 30		
				AR 300 15 ⁴	357						
				63 1 76/11	446				77 27		
		33			8 03			15-			
May	G.P.	34 10		B.A.P.				15-			
				AR 133 300 15 ⁵	357						
				" 138 " 30 ⁵	446				88 34 mil		
		34 10			8 05			15-			
June	G.P.	33		B.A.P.				15-			
				AR 180 300 15 ⁶	357				102 77		
		33			357			15-			
July		34 10		640.				15-			
				AR 32 300 17	357						
				" 283 " 17	357				114 73		
		34 10			7 14			15-			
Aug	Envs. Pay	34 10		B.A.P.				15-			
				332 4 ⁸	357						
				387 18 ⁸	357				126 69		
		34 10			7 14			15-			
Sept		33		B.A.P.				15-			
				AR 448 4/9	357						
				" 509 18/9	357				137 55		
		33			7 14			15			
Oct		34 10		A.P.				15	156 65		
				599 15/10	7 46						
				664 22/10	560				143 59		
				1487 23/10	97 33				46 26		
		34 10			110 39			15			

NUMBER 651921

RANK *Am*

NAME MORRISON - W.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
<i>Oct</i>	<i>Ind</i>	<i>34</i>	<i>10</i>		<i>110.39</i>			<i>15</i>	<i>46.26</i>		
				<i>CP 58131 4/11</i>	<i>48.67</i>				<i>2.41</i>		
<i>Nov</i>		<i>34</i>	<i>10</i>		<i>159.06</i>			<i>15</i>			
		<i>33</i>		<i>AT</i>				<i>15</i>			
				<i>961 4/12 3BAC</i>	<i>3.73</i>						
<i>Dec</i>		<i>34</i>	<i>10</i>	<i>AT</i>				<i>15</i>			
<i>Jan</i>		<i>34</i>	<i>10</i>	<i>AD</i>				<i>15</i>	<i>50.06</i>		
<i>Feb</i>		<i>101</i>	<i>20</i>		<i>3.73</i>			<i>45</i>			
				<i>1235 17/1</i>	<i>3.73</i>						
				<i>1075 19/12</i>	<i>7.46</i>						
				<i>1434 1/2</i>	<i>5.60</i>						
		<i>30</i>	<i>80</i>		<i>16.79</i>			<i>15</i>	<i>49.07</i>		
				<i>425 25/2</i>	<i>43.80</i>						
				<i>5794 11/3 ERRC</i>	<i>9.73</i>				<i>4.46</i>		
		<i>30</i>	<i>80</i>		<i>70.32</i>			<i>15</i>			

SOS Canada 21/3/19 SL 29 3rd Dec MD 2.

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)

Da - A.J. 10/1
Och - 1. 10/1
B.

1. No. 651921	
2. Rank. Driver	
3. Name. Morrison Wesley	
4. Unit. 36246	
5. Date of Discharge	Place
MAR 30 1919	TORONTO, ONT. Toronto Bay
6. Reason for Discharge. Demobilization	
7. Authority. No. 2, D.D., Part II, D.O. No. 101	
8. Proposed Residence after Discharge. Syers Bay Ontario	
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.?	
W. Morrison Signature of Soldier.	
10. CONFIRMATION. The discharge of the above named man is hereby confirmed.	
Place	Date
No. 2 DISTRICT DEPOT MAR 30 1919 TORONTO	
Signature. For [Signature] O.C. No. 2 District Depot (O. C. Discharging Unit.)	

LIST OF DISCHARGE DOCUMENTS

Attachment Paper, Tiphoda	Attachment Paper, Tiphoda
of Particulars of Return	of Particulars of Return
Form, Conduct Sheet	Form, Conduct Sheet
Company Form	Company Form
Form, Pay Certificate	Form, Pay Certificate
Statement last missing documents are undated	Statement last missing documents are undated
Medical History Sheet	Medical History Sheet
Proceedings of Medical Board	Proceedings of Medical Board
Dental History Sheet	Dental History Sheet
Medical Report	Medical Report
Reinstated Conduct Sheet	Reinstated Conduct Sheet
Company Conduct Sheet	Company Conduct Sheet

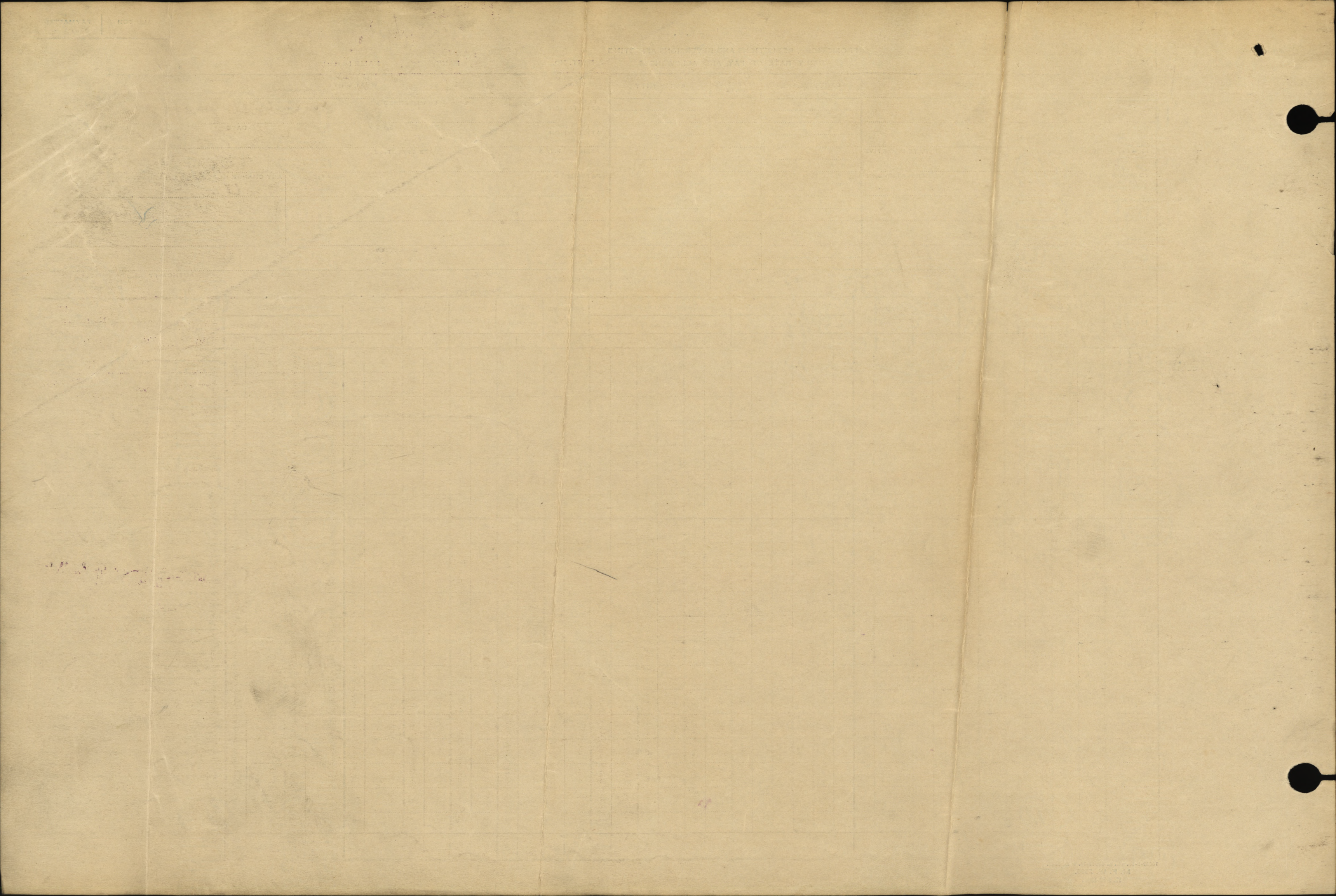
LIST OF DISCHARGE DOCUMENTS.

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

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122.)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
(Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D.3).
11. Equipment and Clothing | Statement Q.M.G. Form (D.O.S. 2),
12. Last Pay Certificate (P. 851). *dup*
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2395),
15. Sundry Documents.

Group *B3*
 Checked by No. *91*
 Date *18-3-19*





Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

M

20108
June 11/7

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

15			
----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. 651921
 Rank Mr. Promoted Reverted Discharge
 Soldier's Name W. Morrison
 Battalion 64 Depot Bty
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name Mrs Harriet Morrison Mother
 Address Dyers Bay
 Change of Address Ent
 1 RR #1 Sparta Ont 11/6/18
 2 Lions Head Ont
 3
 4

Handwritten notes:
 1/2 9m 26
 ✓

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1919					013139-W-73
Dec 31	/	/	105	105	✓ N 22020 new address
Jan 1918	X 68159		15	15	✓ JM 22 5/8 effective 1 6/18 (address) 2 2/18
Feb.	O 73123		15	15	✓ M.R.O. Ent 66740. 27-2-19
Mar.	N 92547		15	15	✓
Apr.	N 10562		15	15	✓
May	R 17287		15	15	✓
June	N 22021		15	15	✓ Des. 74032 4-4-19
July	H 31436		15	15	✓
Aug.	P 40727		15	15	✓
Sep	U 43020		15	15	✓
Oct.	X 54266		15	15	✓
Nov.	21 57463		15	15	✓
Dec.	X 67737		15	15	✓
Jan	21 72746		15	15	✓
Feb	W 77025		15	15	✓
Mar.	M 86265		15	15	✓
			330	330	

M. F. W. 128
 400M-6-17-1772-38-1441
 L. L. 22320-M. & D. 7983.

A/c Closed 31-3-19
 Ret'd per Cedric
 Date 27/3/19 M.F.W. 181 4/4/19
 M.D.#2

