

ATTESTATION PAPER

No. *A 18790*
Folio. *105*

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE PUT BEFORE ATTESTATION. (ANSWERS)

1. What is your name? *William Alexander Morrison*
2. In what Town, Township, or Parish, and in what Country were you born? *Courtright Ont.*
3. What is the name of your next-of-kin? *Father Alex Morrison*
4. What is the address of your next-of-kin? *Courtright Ontario*
5. What is the date of your birth? *Dec. 25th 1889*
6. What is your trade or calling? *Framer*
7. Are you married? *no.*
8. Are you willing to be vaccinated or re-vaccinated? *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 CANADIAN OVER-SEAS EXPEDITIONARY FORCE? *YES*

W A Morrison (Signature of Man.)

John McCool (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *William Alexander Morrison*, do solemnly declare that the above answers made by me to the above questions 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 *May 8th* 191*5* *W A Morrison* (Signature of Recruit.)
John McCool (Signature of Witness.)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, _____, 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 *May 8th* 191*5* *W A Morrison* (Signature of Recruit.)
John McCool (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 **MONTREAL** this *8th* day of *May* 191*5*

Donatien Lafleur (Signature of Justice.)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

Pro. Stewart (Approving Officer.)

11
15
20

DESCRIPTION OF William Alexander Morrison ON ENLISTMENT.

Apparent Age 25 years 5 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.

Height 5-9 1/2 ins.

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

Complexion fair

Eyes Blue

Hair Light Brown

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

(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.)

1 vac mark

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 May 8 1915

Place MONTREAL

A. A. Mackay
 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

William Alexander 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.

Pro. [Signature] (Signature of Officer.)

Date 1915

REGIMENTAL DOCUMENTS

am 22 6 19

NAME Morrison, William, Alex REGT. NO. 418790 UNIT 2dnd Reg H. Q. FILE NO.

S

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505 REFERENCE

NON EFFECTIVE BY

DEATH

Category

DISCHARGE

Category

Demob

DESERTION

34743

H

- 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. 3225)
- COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

5 Misc
1 AFB 181
1 AFS 1237
1 paycard

51-24
27-24
7 24
1



*M.P.
Dom*

~~B~~
~~V~~

Number *418790* Rank *Pte*

Surname *MORRISON*

Christian Name *William Alexander*

Units *42nd Bn Com Inf* Theatre of War *France*

Date of Service *9-10-18*

Remarks

Latest Address *P.O. Courtricht
Bel.*

Roll No. *B. Page 6177*

No.

RANK

NAME

T. O. S.

UNIT

M. D.

SEP 24 1919

PAID FROM

PAID TO

SIG. OR REC'T

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.
PARTICULARS

AUTHORITY

GA 41844-2

No. 18790 RANK

Pte

NAME *Marrison W. A.*

T. O. S.

UNIT *42nd Battalion*

M. D. *4*

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG OR REC'T	PARTICULARS	AUTHORITY
<i>1915</i> <i>May 8</i>	<i>1915</i> <i>May 31</i> <i>June</i>	<i>L</i> <i>L</i>		

**UNIT SAILED
JUN 10 1915**



SURNAME.

Morrison.

CARD NO. *-704*

CHRISTIAN NAMES

William Alexander

*55 25-4-19 25-4-19
D0128 FOLL. 8-5-19
#412*

REGL. No.

418 790.

RANK

Pte

UNIT

42nd

BWS

FORMER CORPS

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Morrison Alex.

RELATIONSHIP TO SOLDIER

Father.

ADDRESS

Coutright, Ont.

COUNTRY OF BIRTH

Canada.

DATE

PLACE OF ATTESTATION

Montreal, P.Q.

DATE

May 5th 1915.

Old 10/6/15 ¹⁰²/₁₁

R/C 93-4-19 ³⁰¹¹/₉₃ Pte.

From Montreal Que

S. S. Kuperian '10-6-15.

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE

Present Address-

Verified
10/1/1919

W.S. Blaine

Casualty Form—Active Service.

Regiment or Corps *A 2nd Bn. C.E.F.*

Regimental No. *418790* Rank *Plt. Major* Name *Morrison, Wm Alex.*

Enlisted (a) *8 May 1915* Terms of Service (a) *d. of war + 6 mos.* Service reckons from (a) _____

Date of promotion to present rank _____ Date of appointment to lance rank *16/12/15.* Numerical position on 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				
<i>6 Oct 15</i>	<i>Gen 42nd</i>	<i>N.R.</i>	<i>Arrived Ireland, 19/6/15.</i>	<i>19-17/15</i>	
<i>see 14/15</i>	<i>Gen 42nd</i>	<i>Special Police duty.</i>	<i>H.Q. C.E.F. Camp.</i>	<i>4-12-15</i>	<i>1823 - Canteen - Cdn. Corps A. 106-A</i>
<i>10/16</i>	<i>Gen 42nd</i>	<i>Mounted Lee/Inf.</i>	<i>In the field</i>	<i>16-1-15</i>	<i>1823. Det II Order 11011 d 25/12/15</i>
<i>27/16</i>	<i>Gen 42nd</i>	<i>Det II duty. cancelled see entry 16-27/16.</i>	<i>Unit.</i>	<i>6-2-16</i>	<i>1823-94.</i>
<i>27/16</i>	<i>Gen 22 Div</i>	<i>Det II with Lee/Inf. Police</i>		<i>4/16/16</i>	
<i>12/18</i>	<i>Gen 42nd</i>	<i>Cancelled. See entry above</i>		<i>12/6/18</i>	<i>w. 3339/4/5/6/4.</i>
<i>23/18</i>	<i>Gen 42nd</i>	<i>by 2 A by 2 Mercie Board, still attached to 2nd Bn., Cdn Corps</i>		<i>23/12/18</i>	<i>18-17-82, 10/18.</i>
<i>6/19</i>	<i>Gen 42nd</i>	<i>O.C. Cdn. S.O.S. for demobilisation to 25.6. Cond. Cmp. Le Havre</i>	<i>2 R Depot Repton</i>	<i>6/19</i>	<i>18/19</i>
<i>OR G.</i>	<i>52 to head file</i>	<i>Above entry cancelled</i>		<i>7/1/19</i>	<i>18/19</i>
	<i>T.O.S. Cdn. Record Dept</i>			<i>8-2-19</i>	<i>18/19</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, Shoemaking, 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				
7-3-19	Can. Enb. Camp de Harve	Proceeded to England		7-3-19	NR Draft 4-35 Pt II 20/19
22/3/19	20th Res	20th S. from Q.R.W.	Ripon	20/3/19	<i>A. Hewlett</i> Lieut. for Lt. Col., AAG., Canadian Section
7/4/19	20th Can. Res. Bn. R. H. C.	Struck off Strength on transfer to M.D. No..... Kinmel Park, Rhyl.	Ripon	5/4/19	D.O. Part 11, No..... <i>Conroy</i>LT. & ASST. ADJUTANT. 20th CANADIAN RESERVE BN

MEDICAL CASE SHEET.*

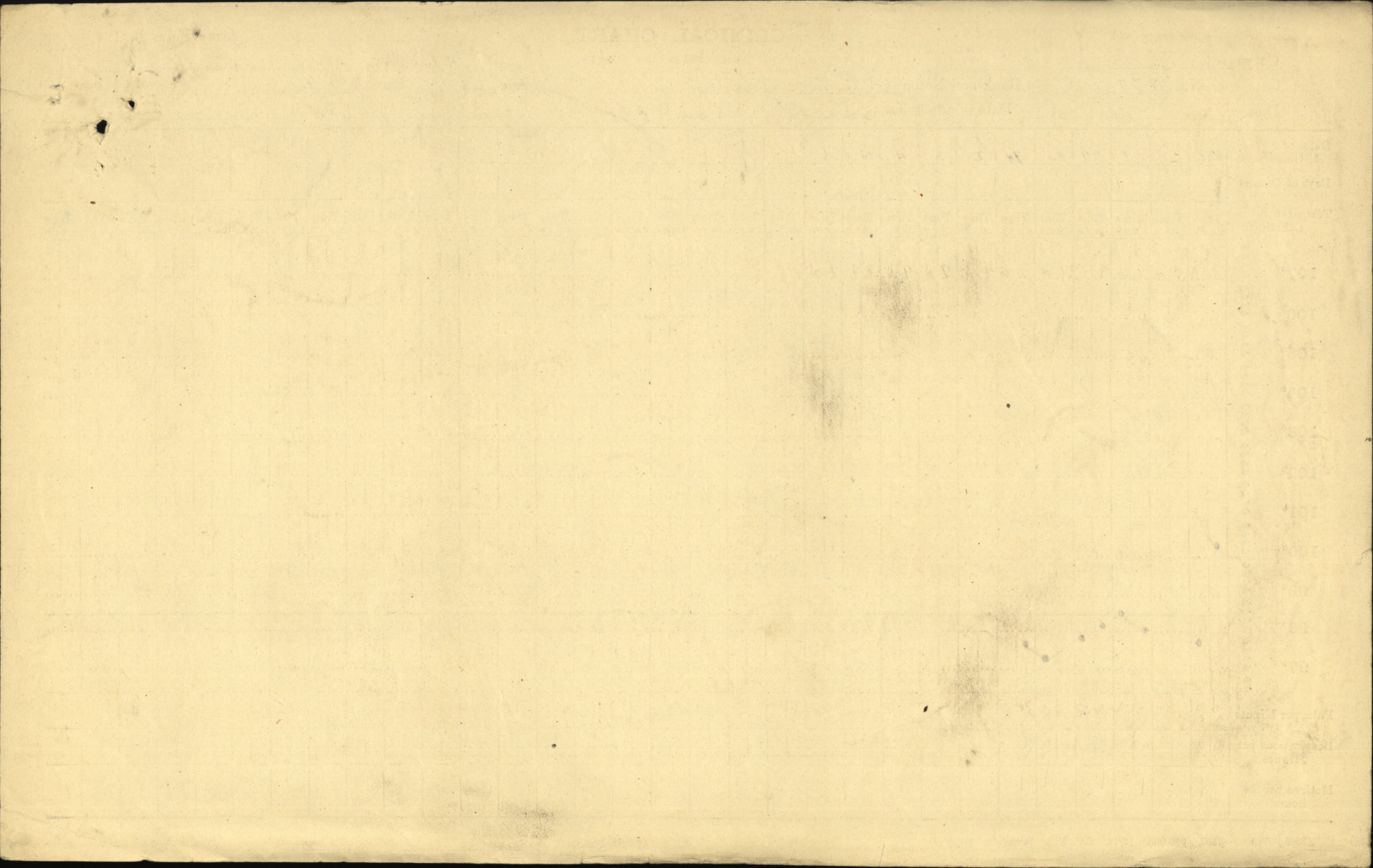
No. in Admission and Discharge Book. 1669 Year 1915	Regimental No. 18790	Rank. Pfc	Surname. Morris	Christian Name. Wm
	Unit. 42 nd Bat.		Age. 20	Service. 1 1/2 / 12

Station and Date.
M.S. Can Hoop
Shorecliffe
27/4/15
Moon Barracks

Disease Lumbago
Complaint. 1) Chill 2 days.
2) Stiffness of muscles 2 days.
3) Tail of small bone off foot gone

Right before last pt had a chill he had been in swimming and had just returned. Had been pretty warm before bath. Yesterday pt's muscles began to stiffen up and in the morning he failed. Pressure causes no pain in muscles but hampers a little in walking.

Discharged
James Robert Cops
C.M.C.



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. 418790 Rank Rt. Surname MORRISON
(Given name in full)
Wm. A.
 Unit or Corps 50th Res. Birthplace Glasgow - Scot

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

I. GENERAL DESCRIPTION :

Physique Good Weight 150 (est) lbs. Height 5 ft. 10 1/2 in. Colour of Eyes Grey
 Nutrition Good
 Pulse 68 per min
 Condition of arteries Good
 Vision Rt. 20 Left 20
 Hearing (conversational voice) Rt. 20 ft.
 Left 20 ft.

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

N. A.

Opinion as to general health and physical condition Good

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

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

P. U. O. in 1915. No M. H. available
This is patient's statement

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Repton, Yorke (Overseas)
Date 25 March 1919 Signed H. J. C. Patten Capt 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. J. C. Patten

(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.)

SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103-1,
Part I.

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

Nothing to be written in this margin.

W1889 - P2 1150 - 1M 5/18 G.W.P.C.3 (3490)

(1)*Substantive rank <i>Otc.</i> *Acting rank <i>NIL.</i> *[To be entered in pencil to facilitate alteration.] (4) Surname <i>Morrison</i> (5) Christian Names <i>William Alexander.</i> (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 <i>42nd Batt</i>	(3) Regtl. No. <i>418790</i>
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(10) Enlistment (b) <i>Montreal P.Q. 8th May 1915</i>	(11) Engagement (c) <i>Duration of War.</i>
(12) Service reckons from (date)	(13) Special conditions (if any) of enlistment (d)
(14) Any subsequent variations (if any) } of conditions of service }	Initials and Rank of an Officer.

(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	(Signature of
(18) Demobilizer (f)	(Posting Officer
(19) Pivotal-man (f)	
(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, Shoeing-smith, &c.

(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					

29.6.15	OC 42 th	Pt II	Arrived in England 19.6.15 admitted to hosp.	Siliffé	26.6.15	
5.7.15	"	Pt II	Disch. from hosp	"	2.7.15	
16.2.19	42 Bn.	D.O. 15	Embarked for France St. Est to Can Record List	Folkestone Fld.	9.10.15 7-2.19	C.R.L. D.O. 19483-19

Geo. Merrick
for his records on file

7/4/19 J.S.

G.C.C. Kimmel Park for return to Canada
Part II Order No.

16/4/19 J.S.

Embarking for Canada
G.C.C. Kimmel Park on
Part II Order No.

J. Head

..... 1st Lt.
Officer i/o Records
No. 4 M.D. Canteen

Embarked Liverpool SS BELGIC

April 16th 1919 ➤☆☆☆➤

Disembarked Halifax Apl 23/19 *
W.O. Standing. Capt & Adj. *

Nothing to be written in this margin.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 418790 (Rank) Private

Name (in full) Morrison, William Alexander enlisted in

the 42nd Battalion, Royal Highlanders of Canada

CANADIAN EXPEDITIONARY FORCE at Montreal on the 8th

day of May 1915

HE served in France

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 29 years, 4 months

Marks or Scars _____

Height 5 feet, 9 1/2 inches

Nil

Complexion Fair

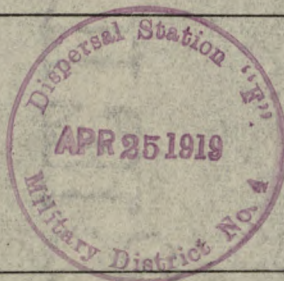
Eyes Blue

Hair Light Brown

W Morrison

Signature of Soldier

Date of Discharge



Issuing Officer

C. J. Anderson Lieutenant
Officer in Charge, Dispersal Station

Rank

Date April 25 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 _____

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	_____
Height	_____
Complexion	_____
Eyes	_____
Hair	_____
Signature of Soldier	_____
Date of Discharge	_____
Rank	_____
Leading Officer	_____
Date	_____ 19____
Mark or Scar	_____

A duplicate of this certificate will be issued, any person finding same is requested to forward it in an unopened envelope to the Secretary, Military Council, Ottawa, Canada.

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

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

350M.—5-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 20th, Res.Regimental No. 418790 Rank Pte. Name MORRISON, W.A.
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				
8-5-19	O/S	T.O.S. DD#4	Montreal	16-4-19	D.O.PT.II#128
8-5-19		S.O.S. DD#4 Demob	Montreal	25-4-19	D.O.PT.II#128 R.O.1420.
<i>G.H.S. Fletcher</i> Lieutenant, a/ Assistant Adjutant, District Depot No. 4.					

(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.]

ORIGINAL MEDICAL HISTORY SHEET.

Surname Morrison Christian Name William Alexander

Examined { on 8th day of May 1915
 at Montreal
 Birthplace { City or Town Cowbight Cut,
 County Canada

Approved by A. A. Mackay
 Rank Capt M.O.

Apparent age 28 years 5 mos.
 Trade or occupation Farmer
 Height 5 Feet 9 1/2 Inches
 Weight 144 Lbs.
 Chest measurement { Ramp 2 ~~3 1/2~~ inches
 Minimum 2 inches
 Maximum expansion 36 1/2 inches
 Physical development good
 Small-Pox Marks no

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,

Vaccination Marks { Arm Right Left
 Number 1
 When Vaccinated last 1908
 (a) Marks indicating congenital peculiarities or previous disease no

Date	Result	VACCINATIONS.
<u>27/5/15</u>		<u>A. A. Mackay Capt.</u>

(b) Slight defects but not sufficient to cause rejection no

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>14/5/15</u>		<u>500 million A. Mackay</u>
<u>25/5/15</u>		<u>1000 do A. Mackay</u>
<u>26/5/15</u>		<u>1000 do A. Mackay</u>

Enlisted on 8th day of May 1915 at Montreal

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>42nd Batt.</u>	<u>A18790</u>		<u>8/5/15</u>
Transferred to.. ..	<u>C. S. F.</u>	<u>418790</u>		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

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

DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block Letters) MORRISON. W.
 REGIMENT 20th RES. BN. RANK PTE No. 418⁷⁹⁰
 Date of Examination in England 24-3-19 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 7-8-18
- 2. EXTRACTIONS 14
- 3. CROWNS _____
- 4. DENTURES
 - (a) Full Upper _____
 - (b) Part Upper _____
 - (c) Full Lower _____
 - (d) Part Lower _____

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

R. Simpson Capt

A. D. D. S. M. D. No. _____

Signature of Dental Officer J. E. Thompson Capt.

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
WASHINGTON, D. C.

TO: _____
FROM: _____
SUBJECT: _____

FOR THE DIRECTOR, BUREAU OF LAND MANAGEMENT
FROM THE _____

DATE: _____
BY: _____

APPROVED: _____

100

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100

Rank *Pvt* Name MORRISON, William Alexander,

Reg'l No. *4*.18790

Unit 42nd Bn. If in perm. Corps, What Unit?

Married or Single *Single*

Place and Date of Enlistment Montreal P.Q. 8th May. 1915

Place of Birth Courtright, Ontario.

Name and Address, Next-of-Kin Alec Morrison,
Courtright, Ontario.

Relationship *Father.*

Assigned Pay Monthly \$ Payable to

Relationship

Separation Allowance \$ Payable to

Relationship

Discharge, Date and Place Reason

Character

N/E. R.B. No. *25239*
File R.L.
O R CANADA

Misc

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	England	19-6-15	
<i>29-6-15</i>	<i>O.C. 42th</i>	<i>Admitted to hospital</i>	<i>Shorncliffe</i>	<i>26-6-15</i>	<i>Pt 4</i>
<i>5-7-15</i>	<i>O.C. 42 Bn.</i>	<i>Discharged from hospital</i>	<i>Shorncliffe</i>	<i>2-7-15</i>	<i>Pt 11</i>
		<i>Embarked for France.</i>	<i>Wickham</i>	<i>9-10-15</i>	
<i>16-2-19</i>	<i>42nd Bn</i>	<i>So. S. to Can Record List</i>	<i>Sea</i>	<i>7-2-19</i>	<i>to 15/6 R.L. Do 19. 8-3-19)</i>
<i>22-2-19.</i>	<i>20th Res.</i>	<i>S.O.S. from O.R.D.</i>	<i>Pte Ripon.</i>	<i>21-3-19.</i>	<i>DO. 81. Obs for SOS 3-6-19</i>
<i>7-4-19.</i>	<i>" "</i>	<i>S.O.S. to Md. H. Rhyll.</i>	<i>" "</i>	<i>5-4-19</i>	<i>DO. 94. DO. 84. d/y 1/2/19</i>
		<i>44-7-118 Canada</i>		<i>16-4-19.</i>	
<i>11-3-19</i>	<i>RL</i>	<i>Proceeded to England</i>	<i>Sea</i>	<i>7-3-19</i>	<i>DO 20 Obs for SOS 3-6-19</i>
<i>22-4-19.</i>	<i>MDL</i>	<i>So. S. to Canada Md. H.</i>	<i>Pte. Ripon</i>	<i>16-4-19.</i>	<i>DO 95</i>

Lube.

Misc

Report
 Date From whom received Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case. Place Date REMARKS Taken from Official Documents

11-5-19 GRD. JTS on posting from C.R. 2. 8-3-19 D0134
 11-5-19 ~- SDS to 20th Res 21-3-19 D0134

Rank *Private* Name **MORRISON, William Alexander,** Reg'l No. **A.18790**
 Unit **42nd Bn.** If in perm. Corps, What Unit? Married or Single **Single**
 Place and Date of Enlistment **Montreal P.Q. 8th May. 1915** Place of Birth **Courtright, Ontario.**
 Name and Address, Next-of-Kin **Alec Morrison,** Relationship **Father.**
Courtright, Ontario.

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

Discharge, Date and Place Reason Character

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					
1915 July	July 31	31	1 ⁰⁰	31.00	31	1 ¹⁰	3.10	34.10			29.19		2.00	31.19	2.91	Admitted May
Aug.	Aug 31	31	1.	31.	31	1 ¹⁰	3.10	34.10			36.50			36.50	.57	
Sept.	Sept 30	30	1.	30.	30	1 ¹⁰	3.	33.			34.06			34.06	.55	
Oct.	Oct 31	31	1 ⁰⁰	31.00	31	1 ¹⁰	3.10	34.10			5.23			5.23	28.32	
Nov.	Nov 30	30	1.	30	30	1 ¹⁰	3	33			11.60			11.60	49.72	
Dec.	Dec 31	31	1.	31	31	1 ¹⁰	3.10	44.10							93.82	66. Refund
Jan.	31	31	1.	31	31	1 ¹⁰	3.10	34.10			13.95			13.95	113.97	
Feb.	29	29	1.	29	29	1 ¹⁰	2.90	31.90							145.87	
Mar.	31	31	1.	31	31	1 ¹⁰	3.10	34.10			25.29			25.29	154.68	

BALANCE TRANSFERRED TO NEW LEDGER.

275.00 27.60 312.60 165.82 2.00 157.82

* Strike out whichever inapplicable.

ASSIGNED PAY	ENGLAND * CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR * CANADA.	NAME: MORRISON. William Alexander.			
EFFECTIVE DATE: 1-4-18.		EFFECTIVE DATE: --		NUMBER: 418790.			
AMOUNT: \$ 15⁰⁰/₁₀₀		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	
				Mr Alex Morrison. (Father) Courtright Ont Canada.			
				UNIT AND TRANSFERS			
				ORIGINAL UNIT: H2nd Bn.			
				DATE ACCOUNT FIRST OPENED -			
				AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S/D	UNIT TRANSFERRED TO
							H2 nd Bn.
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
17/3/19	2151	G Wm C.C.C.	9 73				
22/3/19	2409	Return	42				
22/3/19	2392	Return	14 60				
			24 78				
31/3/19	L.O.C. Balance Credit - 9508 ²⁶ / ₁₀₀		26	Completed 24/3/19			

PARTICULARS OF RENDERING NON-EFFECTIVE: **Dis Canada 1.4.19 W2D 5097 23/3/19 Return to Return 2nd 1.**

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
Mar 31/18	Bal Fwd.								426 63	405 00	
Apr.				Can A.P.				15	411 63		
				7 AR 718 Can Corps HQ 88. 19/4/18	535				406 28		
	P. Pay.	3300							439 28		
		33		23 AR 1681 1 st Ech. G.H.Q. 31/3/18	357				43 571		
May				Can A.P.	892			15	420 71		
				2 AR 282 1 st G.W. Wing G.H.Q. 5/5/18	803				412 68		
				8 AR 1528 G.H.Q. 88 17/5/18	535				407 33		
	P. Pay.	3410			13 38				441 43	405 00	
		3410						15			
June				Can A.P.				15	426 43		
				1 AR 1648 G.H.Q. 88 4/6/18	625				420 18		
		33							453 18		
				5 AR 2153 " 15/6	446				448 72	405 00	
		33			10 71			15			
July				Can A.P.				15	423 72		
				1 AR 2584 " 11/7/18	357				420 15		
				9 AR 3146 " 18/7/18	446				425 69		
	P.P.	3410							459		
		3410			803			15	447 79	405	
Aug				Can A.P.				15	444 79		
				2 AR 5703 " 1/8/18	357				441 22		
				6 AR 4052 " 16/8	446				436 76		
		3410			803			15	470 86		
		3410		4 AR 1532 Details 7.9.18	357				467 29		
				12 AR 2890 CC Sig Co 15.9.18	357				463 72		
Sep		33		Can A.P.				15	481 72	405 00	
		33		Encroachment on Ref Pay Prio letter £10.00	7 14			15	486 7	48 67	
									356 33		

Forward

418790 Pte Morrison W A

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS				
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1	2	3	4	1	2	3	4				CREDIT	DEBIT							
			\$	c.			\$	c.			\$	c.																				NO.	DATE	NO.	DATE
1917																																			
Jan 1917			55 ⁰⁰				55 ⁰⁰																												
Jan 1-31	18 ⁰⁰		34 10				34 10																												
Feb 78			30 80				30 80																												
Mar 31	31		34 10				34 10																												
April 30	1 ⁰⁰		33 -				33 -																												
May 31			34 10				34 10																												
June 30			33				33																												
July 31			34 10				34 10																												
Aug 31			34 10				34 10																												
Sept 30			33				33																												

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER-RED. PAY	SEP. ALLOE. ENG.
Oct	P Pay	34 10		Dr. P.C. Sig. Co. 1645. 21/8/17	4 46				314 74		
				Dr. C.C.C.H. 2214. 18/9/17	8 92				335 46		
Nov	P. Pay	33		AR 2752 bbbba. 11/10/17	4 46						
Dec	"	34 10		" 2568 " 3/10/17	4 46						
				" 3198 " 3/11/17	4 46						
				Dr. b.b. Sig. Co. 2076. 1/9/17	4 46						
				AR. bbbba. 3689. 15/11/17	13 38				371 34		
Jan	P Pay	34 10		AR. 45. bbbba. 1/12/17	4 46						
				" 495 " 15/12/17	4 46						
				: 376.C.C. Sig. Co. 30/12/17	4 46				392 06		
Feb	P Pay	30 80		" 1354.1. bbbba. 21/1/18	3 57						
				" 1278.3. " 6/2/18	4 46				414 83		
Mar		30 80		AR 4091. H. Sig. Co. 16/2	4 46				410 37		
	P Pay	34 10		" AR. 2521 bbbba. 7/3/18	4 46				405 91		
				30 AR 2898. " 21/3/18	13 38				440 01		
					22 30				426 63		

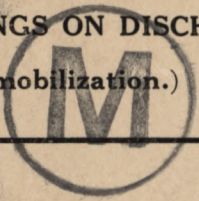
CPA 3
S.S. 20
O.G. 1

5/4/19

F

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)

18-9-31



1. No. 418790

2. Rank. P 2

3. Name. ~~Morrison~~ Morrison, William Alex

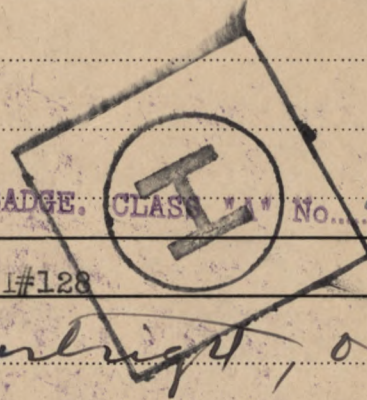
4. Unit. 20th. Res.

5. Date of Discharge 25-4-19 Place Montreal

6. Reason for Discharge Demol.

Embarqued Liverpool SS BELGIO
April 16th 1919
Disembarked Halifax April 23 1919
Capt & Adj.

WAR SERVICE BADGE. CLASS. NO. 242574



7. Authority. DD#4.R.O.1420.D.O.PT.II#128

8. Proposed Residence after Discharge. ~~Montreal, Ont.~~

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.? B39 Montreal, P. Q.
April 25, 1919
W. Morrison
Signature of Soldier.

10. CONFIRMATION.
The discharge of the above named man is hereby confirmed.
Place Montreal, P. Q.
Date April 25, 1919
Signature _____
(O. C. Discharging Unit.)
Lieutenant
Post Office Station

SHORT FORM
PROCEEDINGS ON DISCHARGE
(Demobilization)

1. Name of Soldier	
2. Service Number	
3. Branch	
4. Grade	
5. Date of Discharge	
6. Place of Discharge	
7. Name of Discharging Officer	
8. Signature of Soldier	
9. Signature of Discharging Officer	
10. Date	
11. Place	
12. Remarks	



LIST OF DISCHARGE DOCUMENTS

Attention Paper, Typhoid	1
or Particulars of Record	2
Field Contact Sheet	3
Quarantine Form	4
Last Day Certificate	5
Certificate that minimum hours are completed	6
Medical History Sheet	7
Proceedings of Medical Board	8
Dental History Sheet	9
Medical Report	10
Regimental Contact Sheet	11
Company Contact Sheet	12

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 Statement Q.M.G. Form (D.O.S. 2) and Clothing
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Rm

Group..... *a*
 Checked by No. *27*
R. G. St
 Date..... *9/4/19*

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

8/5/12

Separation and Assigned Pay Branch

M

20115

apl 1-18

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

15.00		
-------	--	--

62 7 May 1918

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No. _____ Rank _____ Promoted _____ Reverted _____ Discharge _____

Soldier's Name _____

Eattalion *42nd Bn.*

Eeneficiary _____

Relationship _____

Address _____

Name _____ Address _____

Change of Address _____

1 ALEX MORRISON, (Father)
COURTRIGHT,
2 ONT. *a* 15 15.00
3 % 418790 PTE WILLIAM MORRISON
FIFTEEN DOLLARS
4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1918					
ape	H 3445		15	15	✓
May	R 17795		15	15	✓
June	N 22028		15	15	✓
July	H 31439		15	15	✓
Aug	P 40729		15	15	✓
Job sep	U 43022		15	15	✓
Oct.	H 54268		15	15	✓
Nov.	U 57467		15	15	✓
Dec.	X 67741		15	15	✓✓
Jan	U 72750		15	15	✓
Feb	W 77029		15	15	✓
Mar.	M 86268		15	15	✓
Apr.	P 3861		15	15	✓
		<u>195</u>		<u>195</u>	

File 013139 - W-64 - 4.R.42

md 7/5/18

Des. L.P. 76763 30/4/19

M. F. W. 128
4004-431-1772 50-114
L. L. 2320-M. & D. 7893.

A/c Closed *30-4-19*

Ret'd per... *Belgium*

Date *23/4/19* M. F. W. 187 *30/4/19*

M.D. #4

AUTHORITY *2.77 7/3/18.*
FOR
NEW ACCT. *M Ward 3/5/18*

42-1143
A.S.B.

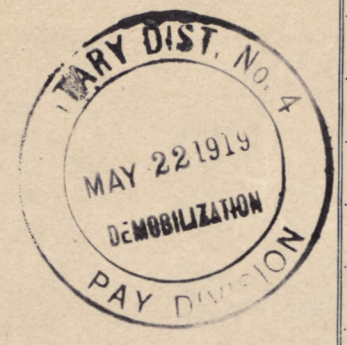
PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING
DAILY RATE OF PAY AND ALLOWANCES

REGT. No. 418790

RANK PTE

NAME (IN FULL) MORRISON, W. M.

(BLOCK LETTERS SURNAME FIRST)



M. OR S.

NEXT OF KIN: ADDRESS: IS SEPARATION ALLOWANCE PAID? TO WHOM PAID: ADDRESS:

RELATIONSHIP: DATE EFFECTIVE: RELATIONSHIP:

PARTICULARS: EFFECTIVE DATE: AUTHORITY:

ORIGINAL UNIT C.E.F.: PLACE OF ATTESTATION: DATE OF ATTESTATION: ASSIGNED PAY \$:

IF IN P.F. WHAT UNIT?: TRANSFERRED TO: DATE: AUTHORITY: TRANSFERRED TO: DATE: AUTHORITY:

PAYABLE TO: ADDRESS: RELATIONSHIP: ANY CHANGE IN ASSIGNEE OR ADDRESS:

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE: EFFECTIVE: PLACE: DATE: REASON: AUTHORITY: IF ENTITLED TO POST DISCHARGE PAY:

DISCHARGED: PLACE: DATE: REASON: AUTHORITY: IF ENTITLED TO POST DISCHARGE PAY:

MONTH	NO. OF DAYS	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	
		AMOUNT		C.		C.	C.			C.	C.		C.	C.		C.	C.	C.	C.	C.	C.	C.	DEBIT	CREDIT			
\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	NO.	DATE	NO.	DATE	NO.	DATE	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.
1-4-19					7000	49853		49853																			Belgic
1-5-19	31	103410			2500	13910		13910																			660
					1500	63763		63763																			War Service Gratuity
				15	420	420		420																			Other Charges
8-5-19				15	70	70		70																			Balance
8-6-19						435		435																			Soldier Dependant
25-7-19																											313600
																											919503
																											1030060
																											1288869
																											1539059

