

ATTESTATION PAPER.

No. 1258825

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?..... William Haywood
- 1b. What is your present address?..... 466 Robie St. Halifax, N.S.  
Summerside, P.E.I. Canada
- 2. In what Town, Township or Parish, and in what Country were you born?..... Summerside, P.E.I. Canada
- 3. What is the name of your next-of-kin?..... Joe. A. Morrison
- 4. What is the address of your next-of-kin?..... Box 80 Summerside, P.E.I.
- 4a. What is the relationship of your next-of-kin?..... Father
- 5. What is the date of your birth?..... May 17th 1896
- 6. What is your Trade or Calling?..... Bank Clerk
- 7. Are you married?..... No
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... Yes
- 9. Do you now belong to the Active Militia?..... No
- 10. Have you ever served in any Military Force?..... 1Yr. 82nd Regt. 3Yrs. Cadets  
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? }

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, William Haywood 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.

W. Morrison (Signature of Recruit)  
W. Dave (Signature of Witness)  
Date 28/10/16 191

Lieut. 10 Siege Battery

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, William Haywood 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.

W. Morrison (Signature of Recruit)  
W. Dave (Signature of Witness)  
Date 30/10/16 191

Lieut. 10 Siege Battery

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 Halifax N.S. this 30th day of October 191 6

J. M. [Signature] (Signature of Justice)

# Description of William H Morrison on Enlistment.

Apparent Age... 20 years ... 4 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. 8  $\frac{3}{4}$  ins.

Chest measurement. { Girth when fully expanded..... 40 ins.  
 Range of expansion..... 7 ins.

Complexion..... Medium

Eyes..... Brown

Hair..... Brown

*Nil*

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

*Wt. 175 lbs.*

## 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..... Oct. 28 1916

*H. S. White*

Place..... Halifax N.S.

*Capt. AMC.*

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 Heywood 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.

*W. D. Shaw Lewis*

(Signature of Officer)

Date..... 30/10/16 191

*W. Major C. G. A., - C. E. F.*  
 O. C. 10 Siege Battery, C.E.F.

REGIMENTAL DOCUMENTS

10th Halifax Siege Bty. H. Q. FILE NO.

NAME

MORRISON, William Haywood REGT. NO. 1258025 UNIT

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505 REFERENCE

NON-EFFECTIVE BY

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

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

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

1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)

1 REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)

1 COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)

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

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

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

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

1 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)

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

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

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

Comp to B.P.C

27/10/19

B.P.C. Spec 1027 215

DEATH

Category

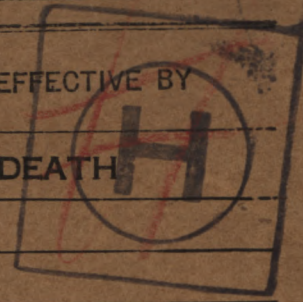
DISCHARGE

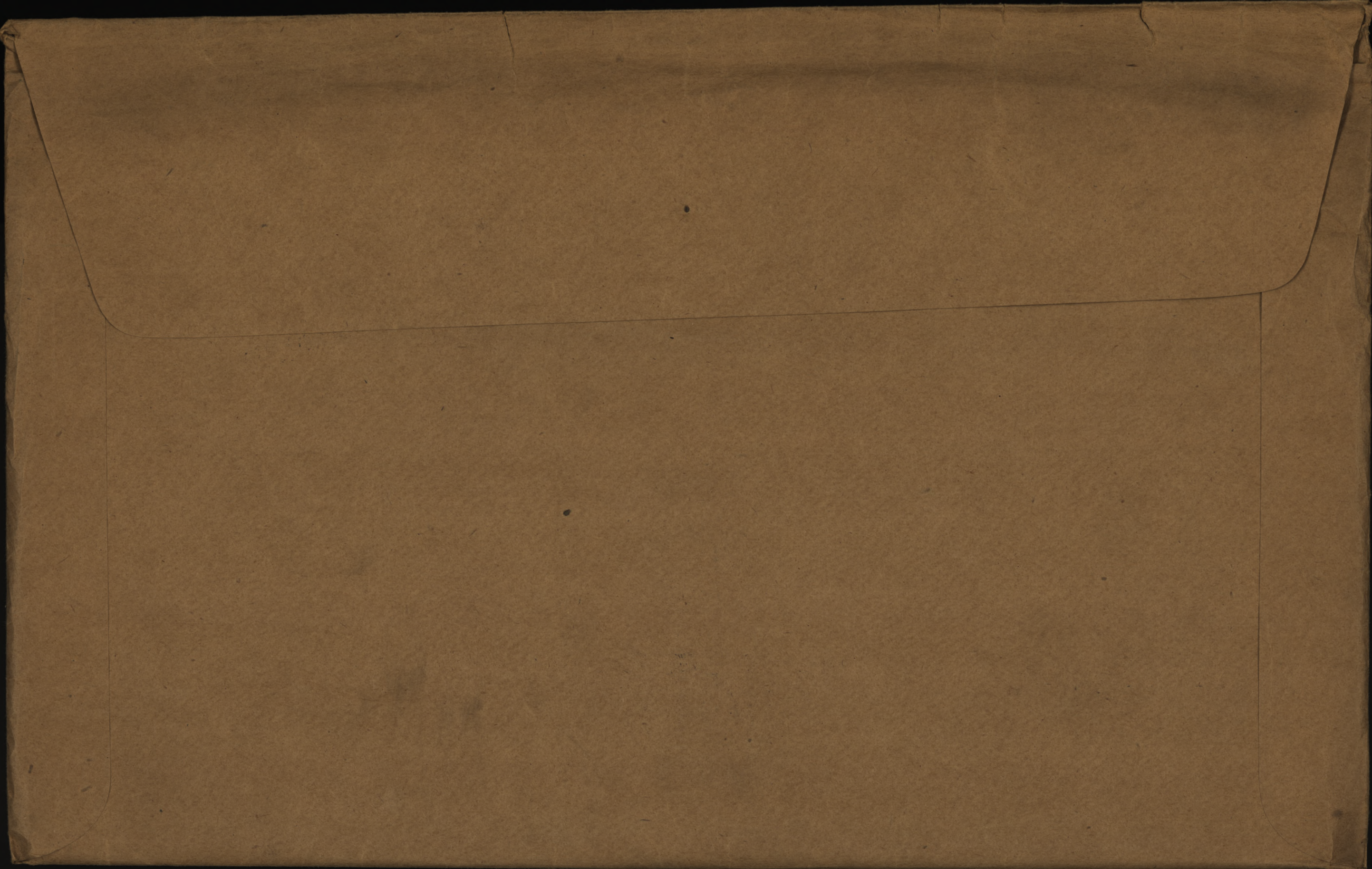
Category

Demob

34770

DESERTION





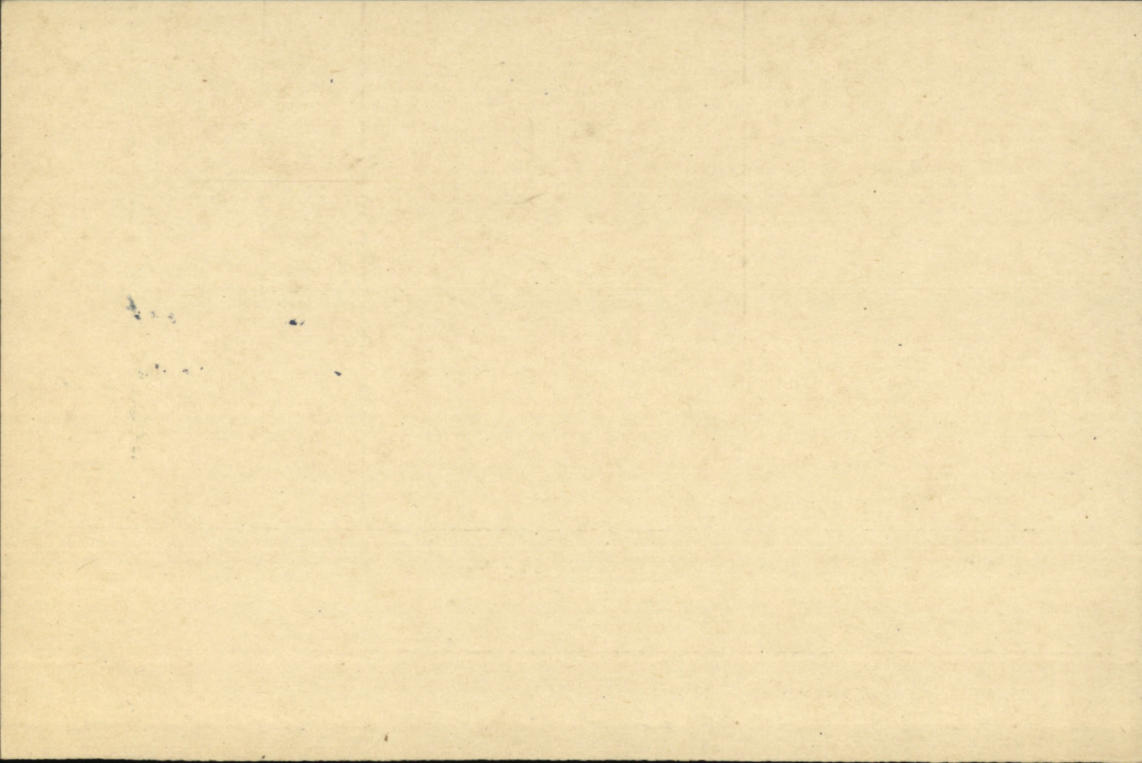
No. 1258025 RANK *Plt.*

NAME *Morrison Wm H.*

T. O. S. *28-10-16* UNIT *10<sup>th</sup> Halifax Siege Battery*  
*B.O. 1 28-10-16*

M. D. *6*

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
<i>1916</i>	<i>1916</i>			
<i>oct 28</i>	<i>oct 31</i>	<i>n</i>		
<i>nov</i>		<i>n</i>		
<i>1917</i>	<i>1917</i>	<i>n</i>		
<i>jan</i>		<i>n</i>		
<i>feb</i>		<i>n.</i>		
<i>mar</i>		<i>v</i>		





HOSPITALS

DATE

DIAGNOSIS

M. F. W. 2553.

50M-6-19.

1772-39-1332.



*Imp. P. 1*  
*Done*

Number... *125 8020* Rank... *d/sgt.*

Surname... *MORRISON*

Christian Name... *William Haywood*

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

Date of Service... *21-6-17*

Remarks.....

Latest Address... ~~*Summerside P.E.I.*~~

*The Royal Bank of Can  
St. James St.*

Roll No.

*B. Page 6164*  
*Montreal*  
*2w*

*A.*  
*X*

No.

RANK

NAME

T. O. S.

UNIT

M. D.

PAID  
FROM

PAID  
TO

SIG.  
OR  
REC'T

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.  
PARTICULARS

AUTHORITY

*9046455 - Dept*

SURNAME. *Morrison*

CHRISTIAN NAMES *William Haywood*

REGL. No. *1258025* RANK *Bomb.*

UNIT *No. 10 Siege Bty. (2nd. P. D.)*

FORMER CORPS *82<sup>nd</sup> Regt. (1 yr.)*

CARD No. *B. 6*  
*S.S. Dis 13-7-19*  
*Send # 6. 1919*  
*FOLL. 9-7-19*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL *Morrison, James A.*

RELATIONSHIP TO SOLDIER *Father*

ADDRESS *Box 86 Summerside, P. E. I.*

COUNTRY OF BIRTH *Canada* Summerside, P. E. I. DATE *May 14<sup>th</sup> 1896*

PLACE OF ATTESTATION *Halifax, N. S.* DATE *Oct. 30<sup>th</sup> 1916*

*R/Q 3/7/19 364/14 S/sgt.*

MARRIED

SINGLE

yes

WIDOWER

TRADE OR CALLING

Bank Clerk

RELIGION

Christian

DESCRIPTION.

APPARENT AGE

20

YEARS

4

MONTHS

HEIGHT

5

FEET

8 <sup>3</sup>/<sub>4</sub>

INCHES

CHEST MEASUREMENT

40

INCHES

EXPANSION

7

INCHES

COMPLEXION

Medium

EYES

Brown

HAIR

Brown

DISTINGUISHING MARKS

Nil

MEDICAL EXAMINATION.

PLACE

Halifax, N. S.

DATE

Oct. 28<sup>th</sup> 1916

Present address 466 Robie St., Halifax, N. S.

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 No. 10 HALIFAX SIEGE BATTERY

(2) Regimental Number 1258025

(3) Full Name of Soldier Morrison, William Haywood

(4) Place of Birth Summerside, P. E. Island.

(5) Are you married, or not? No

(6) If married, state,  
 (a) Full name of your wife Not app.

(b) Present Postal Address Summerside, P. E. Island.

(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?..... **Yes**  
If so, state name and address ..... **Mrs James A. Morrison,  
Summerside, Prince Edward Island.**

(10) Is your Mother alive?..... **Yes**  
If so, state name and address..... **Mrs James A. Morrison,  
Summerside, P. E. Island**

(11) If your Mother is a widow..... **No**  
Are you her sole support, or not?..... **No**

(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.  
..... **Not app**

(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.  
..... **Not app**

(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.  
..... **Not app**

15) Are you insured?..... **Yes**  
If so, in what Company?..... **Mutual Life of Canada.**  
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.

*W. L. Isaac*  
.....  
Officer Commanding.  
for Major C. G. A., - C. E. F.  
O. C. 10 Siege Battery, C.E.F.

Date..... **December 30th/16**

F. WING

# 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. 1258025 Rank 1st Lt Surname Morrison  
(Give name in full)  
William Kaywood  
Unit or Corps 137 Fielding L.B.C. Birthplace Summerside PE1

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

1. GENERAL DESCRIPTION:

Physique Good Weight 183 <sup>Est</sup> lbs. Height 5.9 <sup>Est</sup> ft. in. Colour of Eyes Grey  
Nutrition Good  
Pulse 84 Regular  
Condition of arteries Soft  
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.)  
None

Opinion as to general health and physical condition Good

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

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

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

None

# EXAMINATIONS.

## THIS SECTION FOR USE OVERSEAS—

Examined at Braunschweig (Overseas)

Date 5-6-19

Signed [Signature] M.O.

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

Signature [Signature]

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

## THIS SECTION FOR USE IN CANADA—

Examined at..... (Canada)

Date .....

Signed ..... M.O.

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

Signature .....

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

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

[Handwritten Signature]

[OVER]



ORIGINAL 'F' WING ORIGINAL  
 NO. 10 HALIFAX SIEGE BATTERY  
**MEDICAL HISTORY SHEET.**

Surname Morrison Christian Name William Haywood

Examined { on 28 day of Oct. 1916  
 at Halifax N.S.  
 Birthplace { City or Town Summers Pt. N.S.  
 County Prince

Approved by A. S. White  
 Rank Capt. M.C. M.O.

Apparent age 20  
 Trade or occupation Bank Clerk  
 Height 5 Feet 8 3/4 Inches.  
 Weight 175 Lbs.  
 Chest measurement { Minimum 33 inches.  
 Maximum expansion 7 inches.  
 Physical development Good  
 Small-Pox Marks None

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

Vaccination Marks { Arm Right Left  
 Number one  
 When Vaccinated last checked  
 (a) Marks indicating congenital peculiarities or previous disease 0

Date.	Result.	VACCINATIONS.
<u>27/1/17</u>		<u>Dist. Tubercin</u> M.O.
		M.O.
		M.O.

(b) Slight defects but not sufficient to cause rejection 0

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>4-1-17</u>	<u>1st</u>	<u>Dist. Mordax</u> M.O.
<u>11-1-17</u>	<u>2nd</u>	<u>Dist. Mordax</u> M.O.
<u>18-1-17</u>	<u>3rd</u>	<u>Dist. Mordax</u> M.O.

Enlisted on 30 day of October 1916 at Halifax N.S.

	CORPS.	REGT'L NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>No 10 Siege Bty</u>	<u>1258025</u>		<u>30/10/16</u>
Transferred to				

**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.

J 40



# CASE HISTORY SHEET.

1530  
12/15

Camp Hill Military Hospital.

Halifax, N.S. Station.

No. 1258025 Rank Ex.S/Sgt. Name Morrison, W.H. Age 26

Unit *S.P.* Completed years of service *6 1/2* } Where and how long *3 1/2*  
*12 1/2*

Date of admission 24-9-1919 Date of discharge 3-10-19.

Diagnosis *Ch. tonsillitis* Place of origin *unknown*

CONDITION ON ADMISSION AND PROGRESS OF CASE 24-9-19 Complaint--- *Recruit*

*sarcoidosis.*

Duration---  
History---

Exam.----- *Chemically diseased tonsils*

*Original papers lost  
parent came - situated  
& discharged with one was away  
at home. *W. H. Morrison**

FAMILY HISTORY  
(Tuberculosis, mental or nervous diseases.)

TREATMENT *Tonsils dug under local anesthetic 29/9/19*  
(Especially any specific or special form.)

CONDITION ON DISCHARGE *Recovered;  
Discharged & S.P.*  
(and disposal made of case.)

Date *2-10-19* Medical Officer i/c case. *W. H. Morrison*

COAL HISTORY SHEET



NAME OF PROPERTY \_\_\_\_\_  
LOCALITY \_\_\_\_\_  
COUNTY \_\_\_\_\_

DATE OF DISCOVERY \_\_\_\_\_  
BY \_\_\_\_\_

DESCRIPTION OF PROPERTY \_\_\_\_\_  
ACRES \_\_\_\_\_

NAME OF OPERATOR \_\_\_\_\_  
ADDRESS \_\_\_\_\_

TYPE OF COAL \_\_\_\_\_  
THICKNESS \_\_\_\_\_

MINERAL RIGHTS \_\_\_\_\_  
SURFACE RIGHTS \_\_\_\_\_

REMARKS \_\_\_\_\_  
\_\_\_\_\_

DATE OF ENTRY \_\_\_\_\_  
BY \_\_\_\_\_

NAME OF AGENT \_\_\_\_\_  
ADDRESS \_\_\_\_\_

REMARKS \_\_\_\_\_  
\_\_\_\_\_

LTR  
b.b. R.B.  
From 309A

Rank **No.10 Halifax Siege Bty** Name **MORRISON, William Haywood** Reg'l No. **1258025**  
 Unit **if in perm. Corps, What Unit?** Married or Single **Single**  
 Place and Date of Enlistment **Halifax, N.S. 28th Oct. 1916.** Place of Birth **Summerside, P.E.I. Canada.**  
 Name and Address, Next-of-Kin **Jas. A. Morrison.**  
**Box 86 Summerside, P.E.I.** Relationship **Father.**  
 Assigned Pay Monthly \$ Payable to Relationship  
 Separation Allowance \$ Payable to Relationship

N/E. R.B. No.  
File R.L.  
Category *OK*

Discharge, Date and Place Reason Character  
 H. W. & V., Ltd.-9546-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
	<i>a/bdr</i>	ARRIVED IN ENGLAND	7 4 17	S. S. MISSANABIE	
9. 4. 17	CSA Depot	T.O.S. from Canada	Stirlingloft	7. 4. 17	PT II 0 84
"	" "	Reverts to Gunner	"	"	" " " "
25. 5. 17	" "	S O S to Res Bde	"	23. 5. 17	" " " 124
25. 5. 17	Res Bde	T.O.S. from bD S/B	Lieliffe	24. 5. 17	PT II 0 145
21. 6. 17	" "	S O S proceed - O Sea	"	20. 6. 17	" " " 172
27. 6. 17	6 <sup>th</sup> Reiq Bty	T O S from Eng	Field	21. 6. 17	" " " 44
17- 12. 17	do	appointed as Bombardier	do	18-10-17	PT 20 88
25. 3. 18	—	Now known as 2nd Bde C.S.A. (Mixed)	do	20. 3. 18	— 15
10-12-18	2 <sup>nd</sup> C.S.A	S O S. Lt Coln Cps Rein Camp.	"	10-9-18	2 BATSAS 11/19/18 1-11-18 "109. 5/14-12-18

*a. 3. 103 check  
6/7/17  
J.P.*

*1<sup>st</sup> and 2<sup>nd</sup> Bde (Mid)  
29. 01. 29 19. 11. 18  
E.E.R. 6/25  
11/14/18*

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.				
7.2.19	CCC F. Wing	T.O.S. of P.C. from CCRC	Gen. B'shott	14.1.19	A.O. 1.
20.3.19	— 1 —	(with pay) App'd. as Sgt. whilst employed as Sgt. in charge Record Office	at Sgt. B'shott.	19.3.19	A.O. 7
8.2.19	CCRC	Trans. to Eng. with F. Wing CCC posted to Gen. Depot	at Bdr. Field	28.1.19	A.O. 7
30.4.19	F. Wing CCC	To be supt. clerk racting staff Sergt. with pay within stab:	at Sgt. B'shott.	3.4.19	A.O. 17
19.6.19	F. Wing CCC	SOS of PG to a King for RTC	at Sgt. " "	13.6.19	DO 25. A Wing DO. 36
24.7.19	OYCR.	SOS of OMFC SAILED TO CANADA	at Sgt. " "	28.6.19	London 28.6.19 after AI Miss Pasorel

2 Bde Cgd F<sup>th</sup> Wing

All in Only.—Unit, Number, Rank and Name.

M. F. W. 54. (A. F. B. 103.)  
250M.—1-16.  
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps

HALIFAX SIEGE BATTERY

Regimental No. 1258025 Rank Gunner Name Morrison, William Haywood

Enlisted (a) 28/10/16 Terms of Service (a) War 6 mos Service reckons from (a) Date of enlistment

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)

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 Halifax	Halifax	26/3/17	W/O Drake Capt.
		Disembarked Liverpool	Liverpool	7/4/17	
9.4.17.	Canada.	T.O.S. C.D. S.A.	Stowlangtope	7.4.17.	Pt II DO 84 ✓
25.5.17.	OC C.S.A.	Reports to Canadian Reserve Regt: Stormcliffe	"	25.5.17.	Pt II DO. 124 ✓
	OC C.S.A.	T.O.S. 2 Bty, R.C.E.F.A.	Schliffe	25-5-17	Pt II DO. 124 ✓
21 JUN 1917	do.	T.O.S. Can Siege Bty.	do	21 JUN 1917	30-PT. II 172
25-5-17	C.S.B. Dept.	D.O.S. to Res. Bde.	Stowlangtope	23-5-17	Reserve Brigade, C.F.A.
24-17	" "	Reverts to Gunr.	"	7-4-17	54

CERTIFIED CORRECT  
29/5/17  
1917  
12  
21 JUN 1917  
CAN. RECORDS, LONDON.

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

FOR LT: COL: WO RECORD [P.T.O.]

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
21-6-17	C.G.B.D.	T.O.S. 6th Can. Siege Battery having arrived from Eng. as reinforcement.	Field.	21-6-17	N.R...C.G.B.D. Pt. II. O. 44 d/27-6-17.
11/7/17	Unit	Joined Unit		26/6/17	B 213
7.12.17		apptd of Bde		18.10.17	B 213 - Part II 88/17.11.17
20-4-18	Unit	on Command. CCAA PC	Field	12-4-18	B 213 Wire 2 Bde CCA & 696.
14.11.18	2 Bde CGA	Still on command CCAALC		14.11.18	Letter. AAG. KT 17-1392.
26/11/18	Can Corps	S.O.S. 2 Bde. CJA on being posted to Can Corps Rein Camp		10/11/18	A105/2810/26/11/18 KA 33818 AG 3 D/A 47/11/182 a/2/10/18 PII 109 a/10/12/18
- do.	- do.	Iss. CERC. CGA RD.		11-9-18	- do. PII O. 52/18
23-1-19	CC	Trans. to Eng with 7 Wing CC + Posted to Can Gen Depot	Witley	28.1-19	A 39-2/554. KA. 37755 PII O. 7/19.
					li. for li. col. acc. can section
5/2/19	7 Wing	T.O.S. 7 Wing CCC from CERC.	Bramshott	14/1/19	GO # 1
31/3/19	7 Wing	Appointed as Sgt with pay with effect from 19/2/19	Bramshott	19/3/19	GO # 9
31/3/19	7 Wing	Graded for P9A as Clerk class I from 23/3/19	Bramshott	21/1/19	GO # 9



**Casualty Form—Active Service.**

Regiment or Corps..... *Can*

Rank..... *Sgt* Surname..... *Marrison* Christian Name..... *Wm Hayward*

Religion..... Age on Enlistment..... years..... months

Enlisted (a)..... Terms of Service (a)..... Service reckons from (a).....

Date of promotion to present rank..... Date of appointment to lance rank.....

Extended { ..... } Re-engaged { ..... } Qualification (b).....  
or Corps Trade and rate.....

Occupation..... Signature of Officer.....

Report		Record of promotions, reductions, transfers, casualties, &c. 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked ...			
		Disembarked ...			
<i>30/4/19</i>	<i>F Wing</i>	<i>To be Supt Clerk and of Staff Sgt with pay</i>	<i>Bramshott</i>	<i>3/4/19</i>	<i>80 #17</i>
		<i>SOS of O M FC on</i>			<i>with 66630-5/7971</i>
		<i>PROCEEDED TO CANADA</i>			<i>5 June 1919</i>
		<i>Guon Durand mapot</i>			<i>28/6/19</i>
		<i>1 O M T MAURETANIA</i>			
		<i>1 SAILING 81</i>			
		<i>1 SAILING SECTION 28/6/19</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) Signaller, Shoeing-Smith, &c.

Report

Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty

Date of Casualty

Remarks  
Taken from Army Form B.213, Army Form A.36, or other official documents.

Date

From whom received

28-6-19

I. O. S. No. 6 D, D. from..... and posted.....

*Step Sta B*

*No. 190*  
*190*

13-7-19

*L.O.S.*

*Walter Ferguson*

..... Lieut.  
Officer 1/0 Records No. 6 D.D.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge

Class "A" No. 321454

THIS IS TO CERTIFY that No. 1258075 (Rank) Staff Sgt.

Name (in full) Morrison, William Haywood enlisted in the 10th Halifax Siege Battery

CANADIAN EXPEDITIONARY FORCE at Halifax on the 28th day of October 1916

HE served in 6th Siege Battery France 2666 Eng.

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 22 yrs 1 mo

Height 5' 8 3/4

Complexion Medium

Eyes Brown

Hair Brown

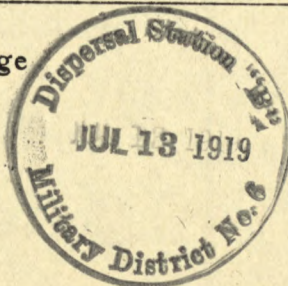
W. Morrison

Signature of Soldier.

Marks or Scars

Nil

Date of Discharge



J. C. Bellman Major D. C. Issuing Officer

Rank

HALIFAX, N.S. JUL 4 1919

Date 19

N.B.- AS NO DUPLICATE OF THIS CERTIFICATE WILL BE ISSUED. ANY PERSON FINDING SAME IS REQUESTED TO FORWARD IT IN AN UNSTAMPED ENVELOPE TO THE SECRETARY, MILITIA COUNCIL OTTAWA, CANADA

- 1.—That discharge certificate must be carried when wearing uniform.
- 2.—That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing, and
- 3.—That wearing of uniform renders him liable to usual military discipline, as if on the strength of a unit.

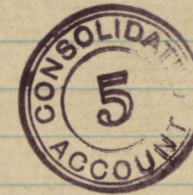
MILITIA AND DEFENCE  
 ASSIGNED PAY  
 OVERSEAS CONTINGENTS

M. F. W. 12  
 50m.—7-16  
 H. Q. 1772-39-819

To Whom *James A Morrison* By Whom Assigned *Morrison Wm H*  
 Address *Summerside, PO Box 86* Regtl. No. *125825*  
*P E I* Rank *Bomber*  
 Corps *10th Halifax Siege Batty*  
 Rate *20.* APR 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				



NO.

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

M. F. W. 12a.  
 50m.—7-16  
 1772—39—819.

Sheet No. 2  
 (Assignee)

*James A Morrison*

Name of Soldier

*Morrison Wm H*

L. L. Job 5470—Rev. 6888.

**PAYMENTS.**

*1258025-Bomber. 10. Halifax Suez Batty*

Month.	Year.	Cheque No.	Amt.	Remarks
				<i>20.</i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		<i>Z 5008</i>	<i>20</i>	
May		<i>I 10365</i>	<i>20</i>	<i>20 T,</i>
June		<i>#16528</i>	<i>20</i>	<i>Pa</i>
July		<i>193637</i>	<i>20.</i>	<i>u</i>
Aug.		<i>V 30564</i>	<i>20</i>	
Sept.		<i>W 37206</i>	<i>20</i>	<i>s</i>
Oct.		<i>N 44202</i>	<i>20</i>	
Nov.		<i>K 51030</i>	<i>20</i>	
Dec.		<i>L 60788</i>	<i>20</i>	
Jan.	1918		<i>100</i>	<i>✓</i>
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

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

**PAYMENTS.**

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.				







\* Strike out whichever inapplicable.

ASSIGNED PAY: ENGLAND or CANADA. SEPARATION ALLOWANCE: ENGLAND or CANADA.

NAME: MORRISON, Wilham Haywood

EFFECTIVE DATE: 1-4-17

EFFECTIVE DATE: -

NUMBER: 1258025

AMOUNT: 20.00

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.

Mr. A. Morrison  
18086 Summerside Rd  
Father

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
DO-88-17-12-17	18-10-17	Cyber <del>to Cyber</del>
7 20/3/19 F.W.M.C.C.C.	19-3-19	1st Sgt.
9 31/3/19	21-1-19	Graded for pay, Clerk Class I
1-26-19 C.C.C.	14-1-19	1st Sgt. D.R. Pleck with pay
17 30-4-19	23-4-19	1st Sgt. Clerk & 1st Sgt. with pay

UNIT AND TRANSFERS

ORIGINAL UNIT: - CDSA

DATE ACCOUNT FIRST OPENED: - 1-4-17

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'P'D	UNIT TRANSFERRED TO
			6th Regt

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
25/3	2472	J.C.C. B. Pholt	14.60			Headquarters	40
10/5	1944	Flour	24.33			L.P. Co - A	37.23
18/5	3118	"	24.33				
7/6	5250	"	24.33				
13/6		"	75				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBSCE ALL'CE
	105	10		
	135	15		
	150	20		
	160	20		

PARTICULARS OF RENDERING NON-EFFECTIVE: - *Wks to Jan 1/7/19 Act 10771 B. Pholt to Willey 17/6/19 m/o Accounting*

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
March	Base - fd.								63.88		
Apr.	Pay	34.50		at				20			
				AR 44-9-4-18 2660	446						
				" 122-19-4-18 "	357				70.35		
May	at	34.50		at	803			20			
		35.65		715-8-5-18 2660	446						
				841-18-5-18 "	357				77.97		
June	at	35.65		at	803			20			
		34.50		517 17/6 -	714				85.33		
July	at	34.50		at	714			20	7.62		
		35.65		412-9-7-18 2660	803			20	92.95		
Aug	at	35.65		at	803			20	108.60		
		35.65		1184-8-8-18 2660	714						
				4907-18-8-18 "	2677						
				5638-20-8-18 "	2677						
				5268-22-8-18 "	2677				21.15		
Sept	at	35.65		at	8745			20			
		34.50		1438-10-9-18 2660	1428			20	35.65		
Oct	at	34.50		at	1428			20	21.37		
		35.65		3304-10/10 C.C.P.	746						
				3792-26/10 "	560				23.96		
					1306			20			

COMPILED BY: *[Signature]*  
CHECKED BY: *[Signature]*

NUMBER 1258025 RANK

*App'd*  
*[Signature]*

NAME Morrison - W. H.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
Nov	<i>Invd.</i> <i>BSP</i>	34 50		<i>NP</i>				20	23 96		
				4359 8/11 <i>cash.</i>	560						
				3277 22/11 <i>CCRC.</i>	1959						
				3593 6/12	560						
Dec		3565		<i>NP</i>				20			
Jan		3565		<i>NP</i>				20	38 97		
Feb		6580			30 79			60			
				171 24/12 <i>BHQ Int.</i>	560						
				5413 14/1 <i>CCRC.</i>	373						
				17 24/12 <i>BHQ Int.</i>	373						
				9154 31/1 <i>Regne.</i>	466						
				728 10/2 <i>B'short</i>	973						
March		6785		<i>NP</i>				40			
	<i>Under Cred Pay on apt 19-3/3</i>	455		<i>Over Cred Pay as Dir 19/12 to 21/3/19</i>		26 50					
				7342 25/2 <i>B'short</i>	730						
				2176 12/3	973				- 39		
		7240			44 88	26 50		40 -			
April	<i>Under credited pay as clerk</i>			<i>cash</i>				20			
	<i>class I from 21-1-19 to 31-3-19</i>	14 00		<i>cash</i>				20			
	<i>70 days at 204 DD9, 21-3-19</i>	51 70		<i>Mr 334, 6/4 F. Wing</i>	24 33						
	<i>Clerk pay</i>	57 70		797. 17/4	24 33						
May		52 70		1755. 23/4	14 60						
	<i>Under credited pay D.R. clerk from</i>			2472 25/3	63 26						
	<i>14-1-19 to 20-1-19 DD. 1-26-4-19 C.C.C. 7 days @ 20</i>	1 40			14 60						
	<i>Under credited pay S/spt. from</i>										
	<i>23/4-19 to 21/5/19 DD 19, 30/4/19 C.C.C. 3 days @ 20</i>	3 90							6 23		
		123 70			77 86			40 00			
June	<i>Clerk pay 2/5</i>	54		<i>cash</i>				20	40		
				2944. 10/5. <i>F. Wing</i>	24 33						
				3118. 15/5 <i>F. Wing</i>	24 33						
				10806 13/6 <i>Albing</i>	73 00						
				5250 7/6	24 33				105 76		
		54			145 99			20			
1920											
Mar	<i>L/N 57 B39. 20/3/20. 3 90</i>										
	<i>PMC Cheque. 5325. Travelling</i>										
	<i>Allowance returned unclaimed</i>		16 79								
	<i>1868 uncl</i>										

*S.O.S PL 94 28/6/19*

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

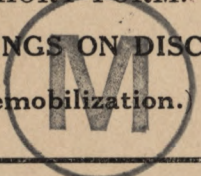
*P A B*

SHORT FORM.

Occupational Group No. *5*

PROCEEDINGS ON DISCHARGE.

(Demobilization.)



War Service Badge Issue  
Class *A* No. *381454*

1. No.	<i>1258025</i>	
2. Rank.	<i>Staff Sgt</i>	
3. Name.	<i>Morrison William Hayward</i>	
4. Unit.	<i>666</i>	
5. Date of Discharge	<i>13/7/19</i>	Place <i>Halifax B</i>
6. Reason for Discharge	<i>Demobilization</i>	
7. Authority.	<i>R. O. 1420</i>	
8. Proposed Residence after Discharge	<i>G.P.O. Summerside P.E.I.</i>	
9.	<p>CERTIFICATE TO BE SIGNED BY SOLDIER.</p> <p>I hereby acknowledge that at the undernoted place and date I received my discharge Certificate M. F. W.?</p> <p><i>W. Morrison</i></p> <p>Signature of Soldier.</p>	
10.	<p>CONFIRMATION.</p> <p>The discharge of the above named man is hereby confirmed.</p> <p>Place..... <i>HALIFAX, N.S. JUL 4 1919</i></p> <p>Date.....</p> <p>Signature..... <i>R.S. Bellman Capt</i></p> <p>O. C. Dispersal Station "B" (O. C. Discharging Unit.)</p>	

1000

PROCEEDINGS OF THE BOARD OF EXAMINERS

Department of Education

Name	[Faint handwriting]
Address	[Faint handwriting]
City	[Faint handwriting]
State	[Faint handwriting]
Date	[Faint handwriting]
Subject	[Faint handwriting]
Grade	[Faint handwriting]
Examiner	[Faint handwriting]
Result	[Faint handwriting]
Remarks	[Faint handwriting]
Signature	[Faint handwriting]
Date	[Faint handwriting]
Initials	[Faint handwriting]
Comments	[Faint handwriting]
Signature	[Faint handwriting]
Date	[Faint handwriting]
Initials	[Faint handwriting]
Comments	[Faint handwriting]
Signature	[Faint handwriting]
Date	[Faint handwriting]
Initials	[Faint handwriting]
Comments	[Faint handwriting]
Signature	[Faint handwriting]
Date	[Faint handwriting]
Initials	[Faint handwriting]
Comments	[Faint handwriting]
Signature	[Faint handwriting]



G. C. Department of Education

LIST OF DISCHARGE BENEFITS

The following is a list of the discharge benefits payable to the members of the organization who have been discharged from the service of the organization. The benefits are payable to the members who have been discharged from the service of the organization on or after the date of the organization's formation.

The benefits are payable to the members who have been discharged from the service of the organization on or after the date of the organization's formation. The benefits are payable to the members who have been discharged from the service of the organization on or after the date of the organization's formation.

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

Group..... *B*

Checked by No..... *15*

Date..... **JUN 25 1919**



AUDITOR *[Signature]* PAYMASTER *[Signature]*

*Mauretania 4.7.19*  
PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING  
DAILY RATE OF PAY AND ALLOWANCES

REGT. No. *1288025* RANK *S/Sgt* NAME (IN FULL) *Horrison, Wm. H.*  
C.E.F. *C.E.S.B*

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?	(BLOCK LETTERS SURNAME FIRST)
ADDRESS		<i>2ms</i>	<i>28.6.19</i>	<i>Leo. 190</i>	PLACE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				DATE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
TO WHOM PAID	RELATIONSHIP				ASSIGNED PAY \$	DATE EFFECTIVE	
ADDRESS					PAYABLE TO	RELATIONSHIP	ANY CHANGE IN ASSIGNEE OR ADDRESS
					<i>James W Horrison</i>	<i>us</i>	<i>Bank of Commerce</i>
					ADDRESS		<i>Summerside Rd</i>
							<i>PO Box 86 P.O. 6/8/19</i>
					STOP PAYMENT FORM RENDERED, DATE	EFFECTIVE	
<i>E.L.P.C</i>					DISCHARGED	PLACE DATE	REASON AUTHORITY IF ENTITLED TO POST DISCHARGE PAY
					<i>Mdx</i>	<i>JUL 13 1919</i>	<i>Demob Leo. 190</i>

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	
		\$	C.	\$	C.	\$	C.	COL. NO. 1	COL. NO. 2	COL. NO. 3	\$	C.	\$				C.	\$	C.	\$		C.
<i>16</i>																						
<i>30.6.19</i>																						<i>to Bal. Co. Attes</i>
<i>13.7.19</i>	<i>13</i>		<i>80</i>	<i>23.40</i>	<i>35.00</i>	<i>70.00</i>	<i>128.40</i>					<i>487</i>	<i>5.00</i>	<i>70.00</i>	<i>20.00</i>			<i>105.76</i>	<i>205.63</i>	<i>128.40</i>	<i>77.23</i>	<i>ad. US to</i>
<del>WAR SERVICE GRATUITY W.S.G.</del>																						
<i>15.8.19</i>					<i>350.00</i>	<i>350.00</i>								<i>70.00</i>			<i>77.23</i>				<i>14. Pmt W.S.G.</i>	
														<i>62.77</i>						<i>140.-</i>	<i>6/8/19 #897344</i>	
														<i>70.-</i>						<i>70.-</i>	<i>5/9/19 #1134456</i>	
														<i>70.-</i>						<i>nil</i>	<i>20/10/19 #1510391</i>	
					<i>350</i>	<i>350.00</i>								<i>272.77</i>			<i>77.23</i>			<i>350.00</i>		
<i>Completed All payments made.</i>																						
<i>16.79</i>						<i>16.79</i>														<i>16.79</i>		<i>See a p file to 013139-118</i>

**1446**

*ad. US to*  
*ad. Boat Cal 100*  
*bal dis. Col 3*  
*at July*

*14 Pmt W.S.G.*  
*6/8/19 #897344*  
*5/9/19 #1134456*  
*20/10/19 #1510391*

Certified that all payments due on this acct. have been paid.

*[Signature]*  
For Senior Officer Pay Services to 31/3/20  
Lt. Col. 57. 13/39. Please  
5225. to correct travelling  
date on 19th to an debitor  
109 2486.

*See a p file to 013139-118*

Morrison W.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

# M 29136

*Apr 1/17*

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

<i>20</i>			
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### PARTICULARS OF SEPARATION ALLOWANCE

No. *1258025*  
 Rank *Boat. Promoted* Reverted Discharge  
 Soldier's Name *Wm. H. Morrison*  
 Battalion *10 Halifax Sqr Btty*  
 Beneficiary  
 Relationship  
 Address

### PARTICULARS OF ASSIGNMENT

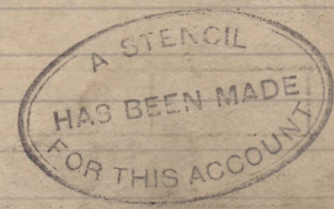
Name *James A. Morrison*  
 Address *Summerside P.O. Box 16*  
 Change of Address *P.E.I.*  
 1  
 2  
 3  
 4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Dec 31</i>			<i>180</i>	<i>180</i>	<i>✓</i>
<i>Jan 1918</i>	<i>X 68187</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Feb.</i>	<i>075150</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Mar.</i>	<i>N 92574</i>		<i>20</i>	<i>20</i>	<i>✓ N-92574 cancelled.</i>
<i>Mar.</i>	<i>Z 90281</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Apr.</i>	<i>70 10591</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>May</i>	<i>R 17817</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>June</i>	<i>N 22051</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>July</i>	<i>H 31462</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Aug</i>	<i>P 40752</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Sept</i>	<i>U 43047</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Oct.</i>	<i>N 54292</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Nov.</i>	<i>U 57491</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Dec.</i>	<i>X 67753</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Jan</i>	<i>U 72770</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Feb.</i>	<i>W 77048</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Mar.</i>	<i>M 86285</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Apr.</i>	<i>P 3877</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>May</i>	<i>S 8331</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>June</i>	<i>H 11416</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>July</i>	<i>Q 11616</i>		<i>20</i>	<i>20</i>	<i>✓</i>
			<i>560</i>	<i>560</i>	

*013139-N-118*

*Ac Closed 31-7-19*  
*Ret'd per Munnings*  
*Date 4-7-19 M.F.W. 187 M.A.-6*  
*Clerk P. Supel 17-7-19*

*M/R of P 115901-10-18-7-19 P.P.S.*



M. F. W. 128  
 400M-6-17-1772-39-1141  
 L. L. 22230-M. & D. 7493.

*9247210*

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Rate of Separation Allowance table with 4 columns and 1 row.

Rate of Assignment table with 4 columns and 1 row.

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

Table for particulars of separation allowance with columns for No., Rank, Promoted, Reverted, Discharge, Soldier's Name, Battalion, Beneficiary, Relationship, and Address.

Table for particulars of assignment with columns for Name, Address, and Change of Address, numbered 1 through 4.

Large table with columns for Date, Cheque No., Amount S/A, Amount A/P, Total, and REMARKS.

M. F. W. 128  
4000 6-17-1776-39-141  
L. L. 2220-M; & D; 1988.