

6240 B

ATTESTATION PAPER.

No. 724239

CANADIAN OVERSEAS EXPEDITIONARY FORCE.

Folio. 6386/16334

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... *Morrison*
- 1a. What are your Christian names?..... *William James*
- 1b. What is your present address?..... *Lindsay Ont.*
- 2. In what Town, Township or Parish, and in what Country were you born?..... *County of Victoria Ont.*
- 3. What is the name of your next-of-kin?..... *Helen Morrison*
- 4. What is the address of your next-of-kin?..... *King St. Lindsay Ont.*
- 4a. What is the relationship of your next-of-kin?..... *Wife*
- 5. What is the date of your birth?..... *December 13th 1876*
- 6. What is your Trade or Calling?..... *Moulder*
- 7. Are you married?..... *Yes*
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... *Yes*
- 9. Do you now belong to the Active Militia?..... *No*
- 10. Have you ever served in any Military Force?..... *No*
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement?..... *Yes*
- 12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }..... *Yes*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I *William James 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. J. Morrison (Signature of Recruit)

Date *APR 14 1916* 191 . *J. J. [Signature]* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I *William James 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. J. Morrison (Signature of Recruit)

Date *APR 14 1916* 191 . *J. J. [Signature]* (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 *Lindsay* this *APR 14 1916* day of 191 .

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

Description of William James Morrison on Enlistment.

Apparent Age..... 39 years 3 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height..... 5 ft. 9 ins.

Chest measurement { Girth when fully expanded..... 35 ins.
 Range of expansion..... 3 ins.

Complexion..... Fair

Eyes..... Hazel

Hair..... Dark Brown

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

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

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

scar on back of neck right side

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..... APR 14 1916 191 .

Place..... Lindsay

[Signature] **Capt.**
 Medical Officer
 109th Overseas Battalion, 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 James 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]*..... **Lt. Col.**..... (Signature of Officer)
 O. C. 109th Overseas Battalion, C. E. F.

Date..... APR 14 1916 191 .

REGIMENTAL DOCUMENTS

NAME *Morrison Wm J*

REGT. NO. *7242-9*

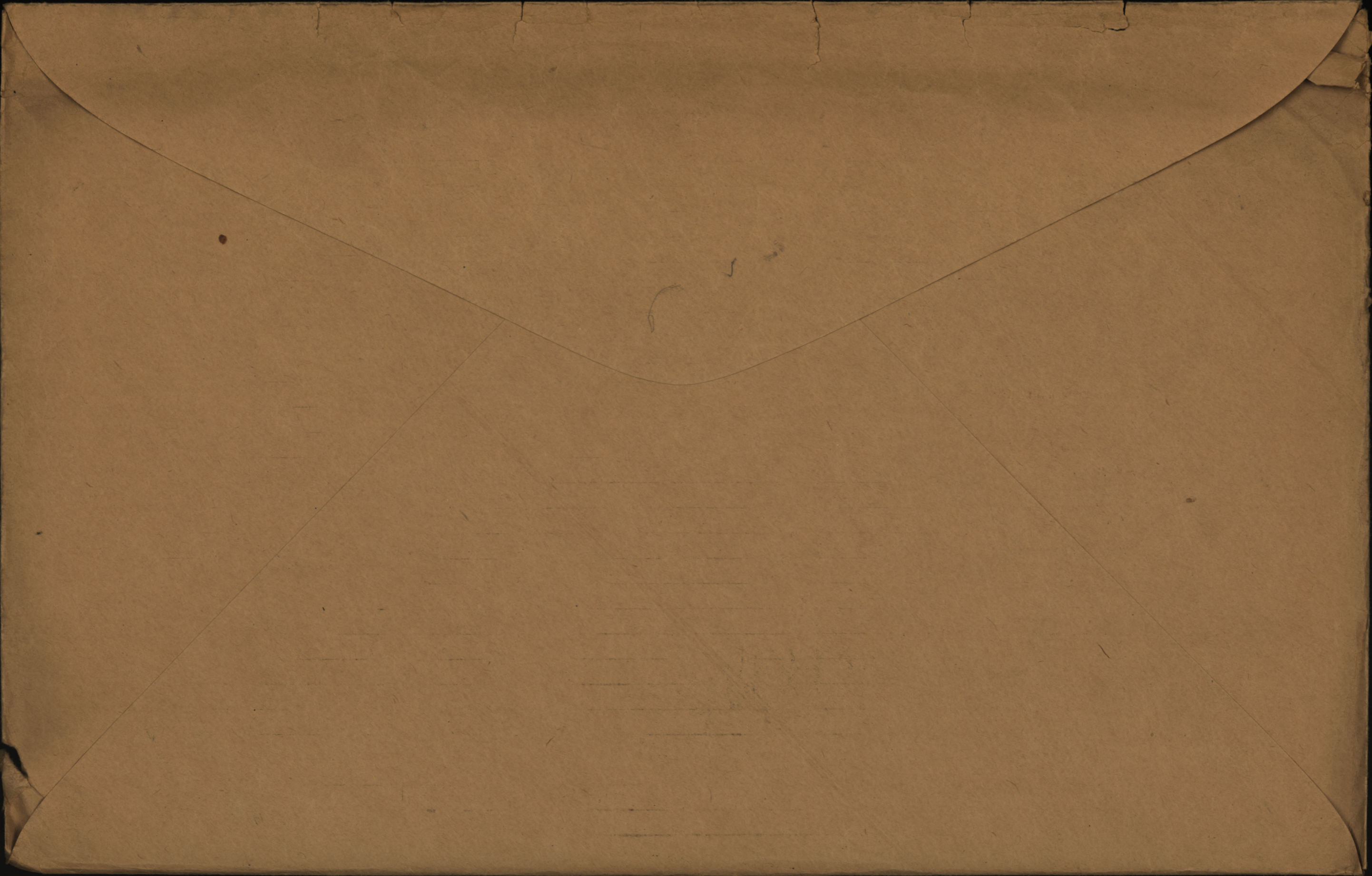
UNIT *109th*

H. Q. FILE NO.

4

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)		<i>M</i>			DEATH
1 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
1 TRAINING HISTORY SHEET (M.F.W. 113)		<i>Ref 17-5-20</i>			
1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)		<i>BPC</i>	<i>29/5/20</i>	<i>Spec-6240</i>	<i>Will of Wounds</i>
REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
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)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					Category
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)				34774	
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)					DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)		<i>H</i>			
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
<i>1 Casualty</i>					
<i>1 Form. R. 149.</i>					
<i>1 min</i>					
<i>1 Copy of Will</i>					
<i>1 G. F. V. 237</i>					
<i>1 R. 12</i>					
<i>1 pay card</i>					
					+
					34-27
					27-27
					7-27
					/

M. J. Morrison
24/7/21



Wm. James
Rank Pte.

Name MORRISON

Unit 20th Bn.

Next of Kin Canada.

Reg. No. 724239

RF. 25 M-5000

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917						
14-5	O.C. 13 G.H. Boulogne Reports. DIED OF WOUNDS.		GSW Chest & Arm.	A514	M4796	19-5
Burial Rep Made out 5/7/17						

REGT'L. No. 724239

NAME

Morrison William James

H. Q. FILE No. 649

RANK AND CORPS

Pvt.20th. Bn. Term 109th Bn.FOLLOWS
No.

CABLE

NO.

DATE

NATURE OF CASUALTY

FOLLOWS

NO.	DATE	NATURE OF CASUALTY
<u>M 4796.</u>	<u>19-5-17.</u>	<u> Died of wounds 13 Gen. Hosp., Boulogne May 14th /17 GSW chest arm.</u>
<u>a 2 B</u>	<u>2090a</u>	<u> Died of was at #13 Gen. Hospital</u>
<u>Rouen</u>	<u>24-5-17</u>	<u> May 14th 1917</u>

Recd 17-8-17

LIST NO.

HOSPITAL

DATE OF
ADMISSION

REMARKS

A 514

06.13 Gen. Boulvigne

Sept 14-5-17.

died of wounds ^{and arm} to chest

No. 724239. RANK *Pte.*

NAME *Marrison, W. J.*

T. O. S. 14-4-16 UNIT 109th Battalion.
(S.O. 1280 of 18-4-16)

M. D. *3.*

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

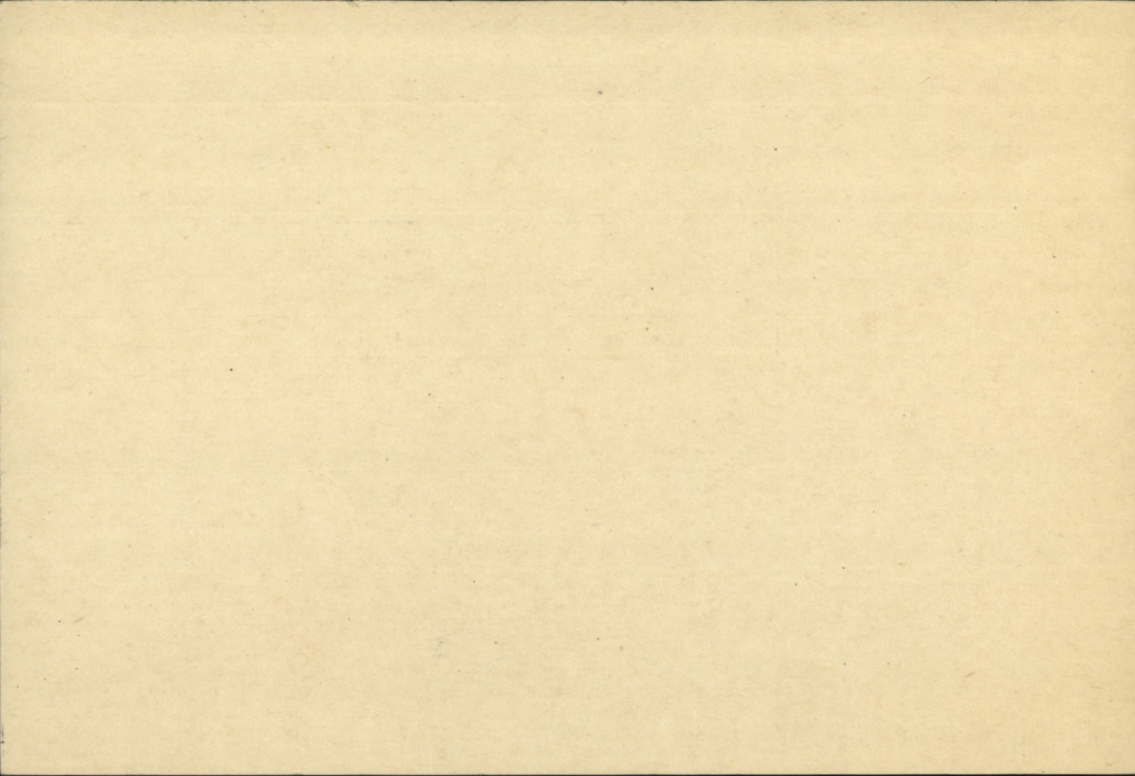
PARTICULARS

AUTHORITY

PAID FROM PAID TO SIG. OR REC'T

<i>1916.</i> <i>April 14.</i>	<i>1916.</i> <i>April 30.</i>	<i>v.</i>
<i>May.</i>		<i>v.</i>
<i>June.</i>		<i>v.</i>
<i>July.</i>		<i>v.</i>

UNIT SAILED
 JUL 23 1916



*Imp
Hamm*

A

Number. *724239* Rank *Pte*

Surname. *MORRISON*

Christian Name. *William James*

Units. *20th Bn Can Inf* Theatre of War. *France*

Date of Service. *29-11-16*

Remarks. *Widow*

Latest Address. *Mrs. H. Morrison*

Lindsay, Ont.

Roll No. *B. Page 6164.*

No.

RANK

NAME

T. O. S.

UNIT

M. D.

PAID FROM

PAID TO

SIG. OR REC'T

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS

AUTHORITY

OCT. 4 1927

Gr 44764
Leach

[Handwritten mark]

H. Q. 649-M-18042.

MORRISON, Pte. William J. #724239, *form. 109th Bn.*

Med & D (Widow)

Mrs. H. Morrison,
Lindsay, Ont.

20 Bn.

P & S (Widow)

Address as above.

Serial no. 788365.

Mem Cross (Widow)

Address as above.

Mem Cross (Mother)

Mrs. Eliza Morrison,
23 Queen Street,
Lindsay, Ont.

*not elig. for star
" " V.M.
" " B.M.
W.D.*

MAR 8 - 1921

49507

Scroll Desp. _____ Reqn. No. 2-2607
JAN 21 1922
Plague Desp. _____ Reqn. No. P 26/50

M
W

46662

46663

FEB 28 1921

FEB 28 1921

783

(649-77-18042)

CARD NO. ✓

SURNAME. *Morrison*

CHRISTIAN NAMES *William James*

FOLL.

REGL. No. *724 039* RANK *pte*

UNIT *109th* *Bn.*

FORMER CORPS *Nil.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL *Morrison Mrs. Helena*

RELATIONSHIP TO SOLDIER *Wife*

ADDRESS *King. St. Lindsay
Ont.*

COUNTRY OF BIRTH *Canada, Co. Victoria, Ont.* DATE *Dec. 13th 1876*

PLACE OF ATTESTATION *Lindsay, Ont.* DATE *April 4th 1916*

o/s. 28/7/16 488/25.

MARRIED

Yes

SINGLE

WIDOWER

TRADE OR CALLING

Moulder

RELIGION

C. of C.

DESCRIPTION.

APPARENT AGE

39

YEARS

3

MONTHS

HEIGHT

5

FEET

9

INCHES

CHEST MEASUREMENT

35

INCHES

EXPANSION

3

INCHES

COMPLEXION

Fair

EYES

Hazel

HAIR

Ab. Brown

DISTINGUISHING MARKS

*Scar on back of neck
right side.*

MEDICAL EXAMINATION.

PLACE

Lindsay Ont.

DATE

April 14th 1916

Present address Lindsay, Ont.

Surname
Morrison.

Christian Name or Names
W. J.

Reg. No.
724239.

Rank Unit
Pte. 20th. Bn.

Co. Troop Batty.

Hospital
13. Gen. Boulogne.

Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis
GSW Chest. & a rm.

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Date

DIED OF WOUNDS: -. 14-5-17. *Rw*

REMARKS

C.L. 19-5-17. A.514.

A.M.D. 2 DEPT.
Sch. of D.G.M.S. O.M.F.C. London.

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

COPY.

-- 20 --

Perforated sheet for Will from Pay Book of Regt.

No. 724239.

Name W. J. Morrison.

Unit 109th Battn.

MILITARY WILL.

In the event of my
death I give the
whole of my property
and effects to my
Wife Mrs. W.J. Morrison

Fenelon Falls Ont
Canada

Signature W.J. Morrison
Rank and Regt. 109th Pte.
Date Oct 11/10/16

H J Mellenwood (Cpt) ?
witness

*original to
a Fulton
Barvster
holiday*

14 10/17

COPY

CANADA

LEWIS & CLARK

BRITISH EAST

INDIA

MADE IN CANADA

Handwritten scribbles

D/27

MEDICAL CASE SHEET.*

la

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
4815 Year 1917	724239	Pte	Morrison	WJ
	20	Unit.	Canadians	Age. 40
				Service. 1 1/2
Station and Date.	IX-1. R. Thigh set. X. R. Brachial art + Vein. Disease GSW XII R Arm, Median & Ulna nerves			
13 General Hospital	Admitted 13.5.17 - with slight wound in Rt Thigh, through & through just below pt. Trochanter. Wound in Rt Axilla - Brachial Art & Vein lacerated - Ulnar Nerve completely divided & sutured - Median N - partially divided & sutured - 7 Brachial vessels removed.			
14.5.17	Generalised gas infection of Rt Arm extending from Axilla to fingers. Amputation through shoulder joint by Major Met. Man shocked by operation - very toxic - comatose - air hunger - running weak pulse - Infused by with 57. Bicarbonate of Soda in Saline without visible effect & patient gradually sank and died 10.15 p.m.			
	M. Richards Lt Rame.			
M.R.				

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

Station
and Date.

MEDICAL CASE SHEET

Lined writing area for medical notes.

ORIGINAL ORIGINAL

MEDICAL HISTORY SHEET.

724239

Surname Morrison Christian Name William James

Examined { on <u>14</u> day of <u>April</u> 1916. at <u>Lindsay.</u>	Approved by <u>J. McCulloch</u> Capt.		
	Rank <u>Medical Officer</u> <u>109th Overseas Battalion, C. E. F.</u>		
Birthplace { City or Town <u>St. Cyprian</u> County <u>Victoria Ontario</u>	Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.
Apparent age <u>39 years</u>			M.O.
Trade or occupation <u>Woolcomber</u>			M.O.
Height <u>5</u> Feet <u>9</u> Inches.			M.O.
Weight <u>132</u> Lbs.			M.O.
Chest measurement { Minimum <u>32</u> inches. Maximum expansion <u>35</u> inches.			M.O.
Physical development <u>Good</u>			M.O.
Small-Pox Marks <u>None</u>			M.O.
Vaccination Marks { A r m Right <u>None</u> Left <u>Three</u>	Date.	Result.	VACCINATIONS.
(Number <u>Three</u>)			
When Vaccinated last <u>April 17th 1916</u>	<u>17.4.16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
(a) Marks indicating congenital peculiarities or previous disease			M.O.
<u>None.</u>			M.O.

(b) Slight defects but not sufficient to cause rejection	Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
	<u>25/9/16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
	<u>2/5/16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
	<u>10/5/16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.

Enlisted on 14 day of April 1916 at Lindsay.

CORPUS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment <u>109th Bn C.E.F.</u> <u>20th..B</u>	<u>724239.</u>		<u>14.4.16.</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.P

Rank *He* Name **MORRISON, William James.** ✓ Reg'l No. **724239.** ✓
 Unit **109th Bn.** If in perm. Corps, } Married or Single **Married.** ✓
 What Unit? }
 Place and Date of Enlistment **Lindsay 14th Apr. 1916.** ✓ Place of Birth **Co. Victoria.**
Ont. ✓
 Name and Address, Next-of-Kin **Helena Morrison.** ✓
King Street. Lindsay. Ont. Can. ✓ Relationship **Wife.** ✓

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

N/E R.B. No. *4940*
 File R.L. *23-M-500*
 Category *AWM*

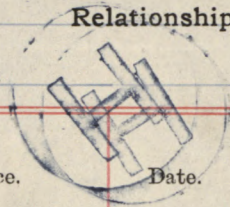
Discharge, Date and Place Reason Character

H. W. & V., Ltd. 7165-16.

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>Q</i>		Arrived in England per H. M. T. 2810			31-7-16	A.F.B. 103 CHECKED <i>11 Dec 1916</i> <i>WJP</i>
28.11.16	O.C. 109 th	S.O.S. on Trans to 20 th Bn	Witley	28.11.16	Pt II D.V. 333	
11.12.16	20 th Bn	Taken on strength.	Field	29.11.16	.. 75	
19.5.17	"	Died of Wounds.	"	14.5.17	C.L. A/514 <i>9.5.17 Chest + Arm.</i> <i>9.5.17 6.38 D/24/5/17.</i>	



MX
21/2/21m8



14-4-16

MILITIA AND DEFENCE

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

SEPARATION ALLOWANCE

Mr. Maria Austin
Helena Morrison
Wife
Guardian

OVERSEAS CONTINGENTS

PAYMENTS.

Name of Soldier *Morrison W. J.*
724239.

Sheet No. 2.

L. L. Job 310.—Req. 6574.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May		L8451	31	31
June		Y3489	20	20
July		X 26.6581	20	20
Aug.		Q13456	20	20
Sept.		Q17164	20	20
Oct.		I 18883	20	20
Nov.		Q 22578	20	20
Dec.		Q 26134	20	20
Jan.	1917	Z 29708	20	20 <i>329708 cancelled.</i>
Feb.		Q 29568	12	12 <i>missed 16-1-17</i>
March		H 34017	36	36 <i>no note</i>
April		Z 1939	20	20
May		Z 4824	20	20
June		Z 8135	20	20 <i>Z. 8135 cancelled</i>
July		Z 8136	20	20
Aug.		I 15051	20	20
Sept.		X	X	X
Oct.		U 20103	40	40 <i>R Morrison</i>
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

Pension Granted *1-11-17* ✓
B.P.C. to Recover \$.....
Clerk *J. P. L.* Date *11-10-17*

PENSION
A. CLOSED.....
OVER-PAYT.....
RECOVERED BY *Morrison*
B.P.C. *12-10-17*
GRANTED

FINALLY ADJUSTED
DATE *13-10-17*
FOR

ACCOUNT CLOSED
DATE..... PER.....

360

371

291

15/10/17

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
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.				

14-4-16.
MILITIA AND DEFENCEM. F. W. 11.
50m.—4-16.
H. Q. 1772-39-818.Mrs Maria ~~Crestin~~ SEPARATION ALLOWANCE 175Name ~~Helena Morrison~~
Address ~~Fenelon Falls.~~
Ont.Name of Soldier Morrison W. J.

Regtl. No. 724239.

Rank

Corps 109th Bn

Relation to Soldier

wife, child or mother

} Wife Guardian

To what Corps belonging

when called out

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<p>Wife deceased 27¹²/₁₆ per letter Cw. Bourque 9¹⁷/₁₇ & guardian Mrs Maria Crestin appointed — 1 boy — aged 7 yrs. pay 1/2 p to her aut S/m O'Brien 12¹⁷/₁₇ to 12¹⁷/₁₇</p> <p>CONSOLIDATED ACCOUNT</p> <p>Pensions Notified Date 6/6/17 Killed in Action Died of Wounds } Date 14/5/17 Missing } C. L. B. 13/20/17 Clerk J. George Date Noted 6/6/17 191</p> <p>ACCOUNT CLOSED</p> <p>DATE PER</p>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

02 1920

IA

MILITIA AND DEFENCE
ASSIGNED PAY

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

OVERSEAS CONTINGENTS

Sheet No. 2.

Mrs. Helena Morrison, wife
Maria Austin - Sauridian

PAYMENTS.

Name of Soldier

Morrison, W. J.

124239

Plt.

109th Batt.

L. L. Job 310.-Req. 6574.

Month.	Year.	Cheque No.	Amt.	Remarks.
			<i>15⁰⁰</i>	<i>AUG 1 1916</i>
April	1916			
May				
June				
July				
Aug.		<i>V 15994</i>	<i>15</i>	
Sept.		<i>V 19116</i>	<i>15</i>	
Oct.		<i>V 24185</i>	<i>15</i>	
Nov.		<i>V 28576</i>	<i>15</i>	
Dec.		<i>V 30667</i>	<i>15</i>	
Jan.	1917	<i>V 39871</i>	<i>15</i>	
Feb.		<i>V 41768</i>	<i>15</i>	
March		<i>V 57116</i>	<i>15</i>	<i>15-15</i>
April		<i>V 3737</i>	<i>15</i>	<i>15-13</i>
May		<i>I 10367</i>	<i>15</i>	<i>15-17</i>
June	<i>15-L</i>	<i>V 18077</i>	<i>15</i>	<i>Assignee dependent</i>
July		<i>V 13634</i>	<i>15</i>	<i>Acct. to remain open until</i>
Aug.		<i>V 30566</i>	<i>15</i>	<i>pension granted. H. D. Ström 6/6/17</i>
Sept.		<i>V 37208</i>	<i>15</i>	
Oct.	<i>15-L</i>	<i>V 41813</i>	<i>15</i>	<i>mailed 12-10-17</i>
Nov.				
Dec.				
Jan.	1918			
Feb.			<i>225</i>	
March				
April				
May				
June				
July				

\$150⁰⁰ 1531-5-17. C.F.X. 6-6-17. H. D. Ström

*Assignee dependent
 Acct. to remain open until
 pension granted. H. D. Ström 6/6/17*

Pension Granted... *1-11-17*
 B.P.C. to Recover \$.....
 Clerk... *W. J. Morrison* ... Date... *11/10/17*

*upc Suspended pending with questions
 from D. J. 10/10/17
 E.F.X. 225*

PAY AUDIT
 AUDIT CLERK
 DATE

H.

J.P.

10 clery

225

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.				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Auth. S.M. O'Brien 13/17
 To Whom *Maria Austin Wife Laurdian*
Mrs. Helena Morrison
 Address *Senelon Falls.*
Ont.
 By Whom Assigned *Morrison, W.J.*
 Regtl. No. *124239*
 Rank *Pte.*
 Corps *109th Batt. P. Coy.*
 Rate *15⁰⁰* **AUG 1 1916**

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<div data-bbox="1408 694 2009 954" style="border: 1px solid black; padding: 5px;"> Pensions Notified Date <i>6-6-17</i> Killed in Action Died of Wounds } Date <i>14-5-17</i> Missing C. L. <i>(13) 20-5-17</i> Clerk <i>J. A. D. Stron</i> Date Noted <i>6th June 1917</i> </div>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

CANADIAN
 ASSIGNED PAY ADJUTANT
Amstrong
 AUDIT CLERK
 DATE



PENSION
 AP. CLOSED *31/10/17*
 OVER-PAYT.
 RECOVERED BY
 C.P.C.
1/11/17
 GRANTER

10 10 10 10

42

10 10 10 10

10 10 10 10

Register No. *A.M. 375*

WAR SERVICE GRATUITY

A.P. File No. *013139-20-17*

TO
DEPENDENTS OF DECEASED SOLDIERS

Reg't No. *724 239* Name *William James Morrison*
 (Christian Name) (Surname)
 Unit *20th Inf 109th* Rank *Pte* Date of enlistment
 Date of casualty *14-5-17* B.P.C. File No. *16354*
 Was service performed overseas? *yes* ✓

DEPENDENT

Name *Maria Austin* Relationship *Guardian*
 Address *for Morrison child*
Fenelon Falls
Ontario

Amount of Special Pension Bonus \$ *32.00* ✓ Abstracted by *M L Dunn*

Eligible for Gratuity \$ *180.00* ✓
 Less amount of Special Pension Bonus paid \$ *32.00* ✓
 Less Debit Balance of S. A. or A.P. \$ *✓*

Total deductions \$ *32.00* ✓

Balance due \$ *148.00* ✓

Cheque No. *9 1893686* ✓ Date issued *22-7-20* *mepr*

Clerk *R. J. Bennett*

REMARKS: *Orphan child receiving pension with guardian at above address.*

Audited by
[Signature]
 Date *20/7/20 148.00*

M.F.W. 2652
 25M-6-20.
 H.Q. 1772-39-1473

10429

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name	Surname	Christian Name	
Regimental Number		Rank	Address (in full)
Unit			
Original Unit			
District where paid			
Date of Discharge			
P. D. P. Filing Number			
Rates:—Regimental pay \$ _____ per diem; Field Allowance \$ _____ per diem. Separation Allowance \$ _____ per month.			

L.L. 53961—M. & D. 9721

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

M. F. W. 127
 300M-1-19
 1772-89-1140

Remarks:

P. 559
MARRIED OR SINGLE
PLACE OF BIRTH
NAME AND ADDRESS OF NEXT OF KIN
RELATIONSHIP OF NEXT OF KIN
NAME AND ADDRESS OF NEXT OF KIN
RELATIONSHIP OF NEXT OF KIN
SEPARATION ALLOWANCE MONTHLY \$
EFFECTIVE (DATE)
PAYABLE TO
RELATIONSHIP OF DEPENDANT

Married
Co. Victoria Ont
Helena Morrison
King St. Lindsay Ont
Wife

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Died of Wounds	14.5.17	C.C.O.S.H. 1917

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL
---------------	-----------------	----------	------------------

REG'L No 724239 RANK Pte
NAME Morrison William James
UNIT 109th
IF IN PERMT. CORPS
WHAT UNIT
TRANSFERRED TO 20th Bn
DATE 1/1/17
AUTHORITY 20333
28.11.16
PERMANENT FORCE ALLOWANCES
TRANSFERRED TO Sub. W. L.
DATE 1/6/17
AUTHORITY C.C.O.S.H. 1917
PLACE OF ATTESTATION Lindsay Ont
TRANSFERRED TO
DATE
AUTHORITY
DATE OF ATTESTATION April 14 1916
TRANSFERRED TO
DATE
AUTHORITY
ASSIGNED PAY MONTHLY \$ 15.100 DATE EFFECTIVE August 1st 1916
PAYABLE TO Helen Morrison Genlon Falls Ont
RELATIONSHIP Wife
ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE
PAYABLE TO
RELATIONSHIP
STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) 23/5/17 EFFECTIVE 1/6/15 REASON Died of Wounds 14/5/17 Car. C.C.O.S.H. 1917
DISCHARGE DATE AND PLACE REASON AND AUTHORITY
ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) 1 JUN 1917
ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)
Entered on N.E. Card Index
Checked by J. Guise
1917
SEP 27 1917
CANADIAN DISTRICT

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 \$	C.	NO. OF DAYS	RATE	AMOUNT \$	C.	NO. OF DAYS	RATE	AMOUNT \$	C.				1	2	3	4	1	2	3	4				CREDIT	DEBIT										
1916	Balance from Canada																																					
July 31																9 10													9 10									
Aug 31	31	10	3 10									34 10	16	9/6/16			49	34 10	120	29	159	15 10			9 10				9 10		15	24 73	18 47					
Sept 30			30									33	49	34 16	81	15 10										15				7 30	7 30		15	29 60	21 87			
Oct 31	31	31	31									34 10	120	31 16	159	15 10									15				9 10	7 30		15	32 03	23 94				
Nov 30			30									33	187	31 10											15				9 10			15	24 73	32 21			Transferred to 20th Bn	
Dec 31	31	31		3 10								34 10	240	15 11 16										15				7 30			15	24 74	41 57			Transferred to 20th Bn		
			15 30					15 30																														
Jan 31	11	24	10									34 10	1563	1630	61									15				1 74			15	27 20	48 47					
Feb 28			80									30 80		1702	7 17									15				2 62			15	17 62	61 65					
March 31	17	34	10									34 10		1875	3								15					7 85			15	22 85	72 90					
April 30			33									33											15								15	15		90 90				
May 31	14	15	40									32 10	76	30 14									15				2 61			15	20 23	86 07						
June 30			324	70								324	10	324	50																		86 07					
			324	70								9 10		324	80									150				58 43	30 30		150	238 73	86 07			Carried forward		

Statement of
ACT 5 1917
Account rendered

CANADIAN
ASSIGNED PAY AUDITED
AUDIT CLERK
DATE

PAY BOOK CHECKED.
Date 17-9-17
By Elmer
N.E. BRANCH

724239 Pte Morrison W. J.

July
No. 17

31570

910 32480

1870 1870

58 x 3 30 30

150.
Balance transferred to N. E. Branch.

10477

150.

23873

8607

10477

10477

#182 for Prd May 15 to 31 not previously created

Checked
M. J. [unclear]

CHECKED

\$10477 To Oct. for [unclear]
USSR. 2/14 to 30-10-17.

Date of Enlistment

14-4-16

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

Date of Assignment

Aug 1/16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

20			
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RATE OF ASSIGNMENT

15			
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PARTICULARS OF SEPARATION ALLOWANCE

No. 724239
 Rank Pte . Promoted Reverted Discharge
 Soldier's Name W. J. Morrison
 Battalion 109 Battr
 Beneficiary Mrs Maria Morrison
 Relationship Guardian
 Address

PARTICULARS OF ASSIGNMENT

Name Mrs Maria Austin
 Address Fenelon Falls
 Change of Address
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917 Dec 31	/	371	225	596	

Pensions Notified Date 6/6/17
 Killed in Action }
 Died of Wounds } Date 14/5/17
 Missing }
 C. (13) 20/5/17 Clerk
 Date Noted 6/June 1917

Assignee Dependant: acct to remain open until pension granted

CANADIAN
 ASSIGNED PAY AUDIT
 AUDIT CLERK
 DATE

Pension Granted 1-11-17
 Clerk WEN Date 11/10/17

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.
 Rank Promoted Reverted Discharge
 Soldier's Name
 Battalion
 Beneficiary
 Relationship
 Address

Name
 Address
 Change of Address
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS

M. F. W. 128
 400M 6-17-177239-141
 L. L. 22920-M. & D. 1963.