C 282854

ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? Muise
1a. What are your Christian names? Cyril William
1b. What is your present address? Digby N.S.
2. In what Town, Township or Parish, and in what Country were you born? Yarmouth N.S.
3. What is the name of your next-of kin? Mrs. Sarah Muise
4. What is the address of your next-of-kin? Digby. N.S.
4a. What is the relationship of your next-of-kin? Wife
5. What is the date of your birth? 15 September 1872
6. What is your Trade or Calling? Tailor
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? yes
10. Have you ever served in any Military Force? If so, state particulars of former Service. yes 2 yrs in R.S.
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, Cyril W. Muise, 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.

Cyril W. Muise (Signature of Recruit)

Date Mar 15 1916. W. Cornell (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Cyril W. Muise, 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.

Cyril W. Muise (Signature of Recruit)

Date March 15 1916. W. Cornell (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 Digby this 15th day of March 1916.

W. Cornell J.P. (Signature of Justice)

In and for Digby County

M. F. W. 22.
600M.—2-16.
H. Q. 1772-39-541.

Muise, Cyril William

Description of ~~Cyril William Muise~~ on Enlistment.

Apparent Age 19 years 6 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 5 ins.

Chest measurement: Girth when fully expanded 38 ins.; Range of expansion 2 ins.

Complexion Dark

Eyes Brown

Hair Black

Religious denominations:
- Church of England
- Presbyterian
- Methodist
- Baptist or Congregationalist
- Roman Catholic X
- 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).

Birth mark on right thigh about 1 in long.

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 14th March 1916.

Place Digby N.S.

W. B. Reid M.D.
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.

Cyril W. Muise 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. A. Lindsay Lt. Colonel
Lt. Colonel, Overseas Highland Bn, C.E.F.
(Signature of Officer)

Date Mar. 15th 1916

REGIMENTAL DOCUMENTS

Pte NAME MUISE, Cyril William REGT. NO. 282854 UNIT 219th Bn H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
3	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					Deceased
1	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)					
2 1	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
2	DENTAL HISTORY SHEET (M.F.B. 465)					Category
3	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)				37469	
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
1	LAST PAY CERTIFICATE (M.F.W. 44)					
	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
2	Muise					
1	MFW 67					

P.R.E. 6/21.

Number 282854 Rank A/Sgt.

Surname MUISE

Christian Name Cyril William

Units N.S.R. Theatre of War England

Date of Service 18-10-16 D

Remarks Cow

Latest Address Mr. Geo. A. Muise
Digby N.S.

Roll No. a Page 1512

No Rank Name

T. O. S. Unit

M. D.

Paid From	Paid To	Sig. or Rec't	Promotions, Transfers, Discharges, Etc.	
			Particulars	Authority

H.Q. 649-M- 41129.

MUISE, Pte. C. W. #282854, ~~219th Bn.~~ 17th Res Bn.

Med & D (Son) Mr. Geo. A. Muise,
Digby, N. S.

P & S (Son) Address as above.
(Ser. # 806207.)

Mem Cross (Son) Address as above.

Not elig. for star
Not " " V.M
M.J. elig - B.W.M.

MAY 3 - 1921

Scroll Desp. _____ Reqn. No. 2 40744

JAN 28 1920

Plaque Desp. _____ Reqn. No. 15 PA6085

(649-M-41129)

6 CARD NO. ✓

SOS Dec. 6-12-18
DO. 239-12-12-18
#6. DD.

SURNAME. Muise

CHRISTIAN NAMES Cyril. William

REGL. No. 282854 RANK ~~Pte~~ Sgt.

UNIT ~~219th.~~ ~~#~~ 6. Dist Dpo. ~~Bn.~~

FORMER CORPS U.S. army (2 yrs)

NEXT OF KIN.

NAMES IN FULL Muise. Mrs. Sarah.

RELATIONSHIP TO SOLDIER Wife.

ADDRESS Digby. Digby Co. N.S.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada. Yarmouth. N.S. DATE Sept. 15th. 1874

PLACE OF ATTESTATION Digby. N.S. DATE Mar. 15th. 1916.

Sailed from Halifax per S.S. "Olympic" 12-10-16.

R/C. 28/11/18

MARRIED yes. SINGLE WIDOWER

TRADE OR CALLING Tailor. RELIGION Roman Catholic

DESCRIPTION.

APPARENT AGE 43 YEARS 6 MONTHS

HEIGHT 5 FEET 5 INCHES

CHEST MEASUREMENT 38 INCHES EXPANSION 2 INCHES

COMPLEXION Dark EYES Brown HAIR Black.

DISTINGUISHING MARKS Birth mark on right thigh about 1 in. long.

MEDICAL EXAMINATION. PLACE Digby. N.S. DATE Mar. 14th. 1916

Present address: Digby. Digby Co. N.S.

No. 282854 RANK Ste. Sgt NAME Muise? Cyril W.
muise (apl paylist)

T. O. S. 15-3-16 D.O. 22 of 1-27-3-16. UNIT 219th Battalion, C. E. F.

M. D. 6.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Mar. 15	Mar. 31	✓		
Apl		✓		
May		✓		
June		✓	From Sgt Tailor	DO 83 of 14-6-16
July		✓		
Aug		✓		
Sept		✓		
Oct		✓		

Reg. No.	Rank.	Surname	Category.	Dentally Unfit.
282854	Pte	Christian Names (1) Percy (2) William (3)	B 2 Date	

Place of Enlistment:	Date of	Taken on from	Religion	Inoculations	Company
Digby	15.3.16		R.C.	18/12/14, 19/2/15, 5/16, 25/5/16, 1/6/16	HQ
Province: NS.	Age on 45	Date		Vaccination 8.6.16	

On Command	Hospital	Permanent Cadre Date taken on	Employed as
			Tailor
Date Proceeding	Date Admitted		

Record of Overseas Service:	Profession or Trade (Civil)
	Tailor
Reason for Return:	Transferred or Posted to ..... Date.....

Married or Single M

Address of Next of Kin.

Mrs Sarah Muise
Digby N.S.

Country

LEAVE.

No. of Pass Issued.	From.	To.	Free Transportation.
	3.5.18	9.5.18	yes

A.G. 10434.

Part 2 Order Entries.

No.	Date	Ref.	No.	Date	Ref.

TRAINING.

Weeks of Training.

1	2	3	4	5	6	7	8	9	10	11	12	13	14	Over.

Nature of Training	Date passed test
Drill	
Musketry	
Bombing	
Rifle Bombing	
Bayonet Training	
Anti-Gas	24.4.18
Lewis Gun	
Rapid Wiring	

Special Training Courses, etc.

*Name MUISE C.W. Rank Pte. Regtl. No. 282854 D.D.6.

Fyle Depot

Original unit 219th Present unit M. or S Age Religion Ref H.Q.

Port, ship and date of arrival

Next of kin

Address on leave

Address on discharge

Transportation issued Yes No Date Character on discharge

Previous occupation Date and place of enlistment

Diagnosis Date of Medical Boards

Date	Remarks	Pt. 2 Order No
T.O.S. 23-11-18	Posted Cas.Co. 29-11-18 Leave to 13-12-18.	231.
6-12-18	DIED Influenza	239.

*—Name will be given in full ; surname first

(over)

Date.	Remarks	Pt. 2 Order No.

M. F. W. 192
150m.—5-18
1772-39-1243

R—122
8,401—50,000—21-10-16.

G.C. Rank A/Sgt Tailor Name MUISE Cyril William. Reg'l No. 282854.

Unit 219th. Batt. If in perm. Corps, What Unit? Married or Single Married.

Place and Date of Enlistment Digby. 15th. March 1916. Place of Birth Yarmouth N.S.

Name and Address, Next-of-Kin Mrs. Sarah Muise.

Digby N.S. Canada. Relationship Wife.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship Pte.

N/E. R.B. No. 5283
File R.L.
Category O.R. CAN

Discharge, Date and Place Reason Character

MX
21/6/19

Report. Date.	Report. 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.
		Arrived in England S.S. Olympic 18/10/16			
25-10-16	O.C. 219 Bn.	Appt'd. A/Sgt. Tailor, on arrival	Witley Camp	18-10-16	Part II D.O. # 193
23-1-17	219th Bn.	S.O.S to 17th Res Bn	Bramshott	23-1-17	PT II D.O.23
23-1-17	17th Bn.	T.O.S from 219th Bn	Bramshott	23-1-17	PT II D.O. 18
16-2-17.	O.C. "Res"	S.O.S. to C.C.A.C. att'd. to 17th Res Bn.	"	12-2-17.	" " " " 40.
23-3-17	NRD	TOS from and posted to 17th Res Bn & to Comm. 17th Res Bn	"	12-2-17	Pt II 14 (C3) & Pt II 102 d/1-5-17 17th Res Bn
17-7-17	17th Res	Reverted to Pte. Sailing to comply with an order.	Bisbott	17-7-17	Gen. do. 168 & NRD Pt II 133 d/20-7-17
19-11-17	"	To be A/Sgt. with pay (Employed as Sgt Orderly)	"	19-11-17	Pt II D.O. 276

282854 Bruise C.W.

Report. Date.	Report. 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.
9-4-18	17th Res	Reverted to the ranks. a/Sgt.	B'Shott	5-2-18	Ptte O 84.
19-11-18	NSRD	cease to a/c to 17th Res.	Pte Bshott	15-11-18	17th Res — 281 & 2113 d/18-1-18
26 NOV. 1918	NSRD	S.O.S. on Tr. to C.E.F. in Canada	Pte. B'shott	22.11.18	Ptte D. D 287

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 219th O.S. H. Bn., C.E.F.

Regimental No. 282854 Rank Private Name Morse, Cyril William.

Enlisted (a) 15/3/16. Terms of Service (a) Duration of war. Service reckons from (a) 15/3/16.

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

Extended ..... Re-engaged ..... Qualification (b) Sailor. E.D.

Report: Date	Report: From whom received	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
		Embarked Canada.	Halifax	12/10/16.	
		Disembarked England	Liverpool	19/10/16.	
20/10/16.	219th Bn.	Appointed A/Sgt.	Witley.	14/6/16.	Part II. orders # 188.
23-1-17	219th Bn	Transferred to 17th Can. Res. Bn	Bramshott	23-1-17	Part II orders # 23 Geo Cooper Lieut. Adjt. 219th. "Overseas" Highland Bn. C.E.F.
	23-1-17	O.C. 17th. Taken on Strength.	Bramshott	Part	11 Order 18.1.
16/2/17	O.C. 17th	Tfd. to B.B.A.C. attached to 17th Bn	Bramshott	12/2/17.	Part II 6. 40
30-3-17	O.C.17th	Attachment struck off	Bramshott	30-3-17	Part 11 Order 75. F. Greenstead. Lieut., Asst. Adjt. 17th Canadian Res. Batt.
12-2-17	A.D.M.S. 1348	Taken on strength D.S.R.D. & attached to 17th Res	Bramshott	23-3-17. 23-3-17.	Pt. II D.O. 14. Capt. & Adjt. for O.C. Reg. Depot

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.

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				
1-5-17	O.C.17th	Attachment taken on	Bramshott	12-2-17	Part 11 Order 102.
17-7-17	O.C.17th	Reverted to ranks.	Bramshott	17-7-17	Part 11 Order 168.
19-11-17	O.C.17th	To be A/Sgt without pay.	Bramshott	19-11-17	Part 11 Order 276
9-4-18.	O.C.17th.	Reverted to ranks, Auth. H.Q.C.R.O.486 d/12-2-17.	Bramshott.	5-2-18.	Pt.11.Order.84.
18/11/18	do	Ceases to be att. from MRD	do	15/11/18	Pt 11 273
					Lieut., Asst. Adjt., 17th Canadian Res. Batt.
		S.O.S. To for to embarkation for Canada	BRAMSHOTT		PART II D.O.
22/11/18	Embarked England				Geo. Duckett LIEUT. OFFICER i/c RECORDS, NOVA SCOTIA REGTL. DEPOT.
29/11/18	Disembarked Canada				

C 282854

ORIGINAL

MEDICAL HISTORY SHEET.

Surname: Louise Christian Name: Cyril William

Examined: on 14th day of March 1916 at Digby N.S.

Approved by: W F Read MD

Rank: Digby M.O.

Birthplace: City or Town: Gunnen; County: Yarmouth

Apparent age: 43

Trade or occupation: Tailor

Height: 5 Feet 5 Inches.

Weight: 147 Lbs.

Chest measurement: Minimum 36 inches; Maximum expansion 2 inches.

Physical development: good

Small-Pox Marks: Nil

Vaccination Marks: Arm Right. ~~Left.~~; Number One

When Vaccinated last: 1895

(a) Marks indicating congenital peculiarities or previous disease: Nil

(b) Slight defects but not sufficient to cause rejection: Nil

Date.	Fit or Unfit.	Examined for Re-engagement.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
8-6-16	Good	Lp Churchill M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
8-5-16	Good	Lp Churchill M.O.
20-5-16	Good	Lp M.O.
16/12/16	J.O.B.	Lp M.O.

Enlisted on 15th day of March 1916 at Digby N.S.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	219th Batt N.S.R.F.B.	282854	good.	15th March 16
Transferred to	17th Can Res Bn	282854		23-1-17
	N.S.Regtl.Depot	282854		30-3-17.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Bramshott Bramshott Camp, Hants. 12 FEB. 1917 APPROVED.	12-2-17 Geo A Russell Capt. C.A.M.C. for Colonel, A.D.M.S. Canadian Troops, Bramshott Camp.	Tachycardia	C III C Hope Ch Capt PRESIDENT. MEDICAL BOARD, BRAMSHOTT.
Bramshott. Bramshott.	16-11-17 18 NOV 1918	Passed to B II Tachycardia	F.X. Boucher Capt B II C P Jackson PRESIDENT. MEDICAL BOARD, BRAMSHOTT.

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.

M. F. B. 313.

400M.—1-16.
H. Q. 1772-39-439.

Surname Murce Christian Name April 6th

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital.			Dates of Discharge from Hospital			DISEASE.	Number of days in Hospital	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Day	Month	Year	Day	Month	Year				

Register No. D M 1007

A.P. File No. 13262. C4.

WAR SERVICE GRATUITY
TO
DEPENDENTS OF DECEASED SOLDIERS

Regt'l No. 282854 Name Cyril Wm Muise
(Christian Name) (Surname)

Unit 219 Bn Rank Pte Date of enlistment

Date of casualty 6-12-18 B.P.C. File No. 102573.

Was service performed overseas? Yes

DEPENDENT

Name Mr. George Arthur Muise Relationship Brother & Guardian

Address Digby, N.S.

Amount of Special Pension Bonus $ Nil Abstracted by M. Ross.

M.F.W. 2652
25M—6-20.
H.Q. 1772—30-1473

Eligible for Gratuity $ 180

Less amount of Special Pension Bonus paid $ –

Less Debit Balance of S. A. or A.P. $

Total deductions $ –

Balance due $ 180.

Cheque No. G 1799281 Date issued AUG – 5 1920

Clerk A H Muise

REMARKS: Mr. Geo. Arthur Muise (guardian) for Marion Gladys Muise. Soldier died at Halifax on or about 6-12-18 approximately one wk. after his return to Canada. Wife died three days after her husband.

Audited by J. Heath

Date 5/8/20 $180.00

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname Christian Name

Regimental Number Rank

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Address (in full)

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		

Remarks:

M. F. W. 127
300M-1-19
1772-39-1140

L.-L. Job 5470—M. & D. 6888

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H. Q. 1772-39-316

To Whom Mrs S. Muise Wife

Address Digby N.S.

Rate 20c

OCT 1 1916

By Whom Assigned Muise C. H.

Regtl. No. 283854

Rank Sgt.

Corps 219 Bn. Staff.

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				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—6-16.
1772—39—819.

Sheet No. 2. Mrs. S. Muise Wife

Name of Soldier Sgt. Muise C. H.
282854 219 Bn. Staff.

L. L. Job 4503.—Req. 6332.

20.00

OCT 1 1916

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		X26859	20	
Nov.		A31133	20	
Dec.		P34914	20	
Jan.	1917	X38502	20	
Feb.		~~X45188~~	~~20~~	20-L- X45188 Cancelled 16/2/17 BHR
March		O51964	20	20. E.
April		K3766	20	20. B.
May		K10294	20	20 Rec'
June		J17589	20	Ba
July		R23977	20	b
Aug.		X30192	20	
Sept.		Y38206	20	03
Oct.		T43822	20	
Nov.		M50796	20	
Dec.		N60239	20	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

300

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.					

15-/3/16

146

L- L. Job 310—M. & D. 6574.

MILITIA AND DEFENCE

M. F. W. 11.
50m.—4-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Sarah Muise

Address Digby N. S

Relation to Soldier wife, child or mother } wife

Name of Soldier Muise Cyril W

Regtl. No. 282874 Rel Feb 17/17, 50 pm 21/8/17 (File 39) Gm 06/9/17

Rank ~~Sgt~~ ~~Pte~~ ~~26/6/16~~ ~~pmd 15/9/16~~

Corps 219 Hbtn

To what Corps belonging when called out } ✓ ✓

PAYMENTS

Month	Year	Cheque No.	Amt.		REMARKS
Aug.	1914				
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1915				
Feb.					
March					
Apl.					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1916				
Feb.					
March					

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MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

M. F. W. 11a.
50m.—4-16.
1772—39—818.

Sheet No. 2.

L. L. Job 310.—Req. 6574.

Sarah Muise ~~wife~~

PAYMENTS.

Name of Soldier Muise Cyril W

#282854 Sgt Pte

Month.	Year.	Cheque No.	Amt.	Red. pte	Remarks.
April	1916	P 7325	30	30	
May		V 2486	20	20	
June		~~H 3811~~	~~20~~	20	Y 3811 Cancelled. Rewrite
July		6 8429 / 6 6900	20 / 20	20	
Aug.		J 12804	20	20	
Sept.		I 15365	20	20	
Oct.		L 20149	40	40 adj. ranks	
Nov.		S 23576	25	25	
Dec.		S 26552	25	25	
Jan.	1917	B 30162	25	25	
Feb.		B 32968	25	25	
March		B 36058	25	25	
April		E 3172 ~~B 2035~~	~~25~~ 370	25	RE-WRITE B 2035 Cancel H.
May		6 5558	25	25	
June		6 9262	25	25	
July		C 12343	25	25	
Aug.		K 15157	25	25	
Sept.		R 18562	25	B	pay at Sgt's rate cabling overseas to see
Oct.		X 19892	25	25	if he has rev to proceed to France
Nov.		A 16187 ~~H 24578~~	~~25~~ 15	15	RE-WRITE Cancel H 24578 29/10/17 Ind 6/9/17
Dec.		M 27622	15	15	reduced for purpose of establishing
Jan.	1918			15	truck to proceed to France.
Feb.			500	17	File 13262. 6. 4 WB 29/10/17
March				20	Reduce overpayt by deduct. $5 per month
April					
May					
June					
July					

-3

-18

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.					

Ophthalmic Department
Bramshott Camp.

Date 24-3-17.

To, M.O. 17 Res. Bn.

Rank & Name Sergt. C. W. Bruce Number 282854.

Unit ,Bn.

Visual Acuity R.E. 6/12 L.E. 6/6

" " with Glasses R.E. L.E.

~~Unfit~~ Fit

Glasses ~~not~~ ordered for near.

Remarks

Signed W. E. Conley
Captain C.A.M.C.

Form D.M.S. 1348 (Revised).
2075—30m—2/12/16.

EXAMINATION
BY
STANDING MEDICAL BOARD, BRAMSHOTT.

Feb 12 1917

No. 282854 Rank Pte Name Muise C. W.

Local Unit 17 Reserve 219 Bn ~~Overseas~~ Unit Age 46

Examination held in Bramshott area.

DISABILITY. Tachycardia

~~Overseas~~—Local.
(scratch one out)

PRESENT CONDITION.

This man states that he gets short of breath on exertion, that he suffers some from pain in his limbs and back. His apex is in normal position but heart is rapid, sounds are normal. He is not fit for training but is fit for sedentary work such as tailoring

Board recommends: C III

1. Fit for Duty.
2. Fit for duty after ..... weeks physical training.
3. Fit for Base duty ..... weeks.
4. Fit for Permanent Base Duty.
5. Discharge.

Signatures:

C. R. Cooper Col Pres.

Members: J. R. Irwin Capt
M. Macfarlane Capt

Approved.

Bramshott 12. 2. 1917

for A. Russell Capt. CAMC.
for A.D.M.S. and G.O.C.,
Canadian Troops, Bramshott.

A.D.M.S. 1348 (Revised)
[illegible]

EXAMINATION
BY
STANDING MEDICAL BOARD, BRAMSHOTT.

101

No. _____ Rank _____ Name _____

Local Unit _____ Overseas Unit _____ Age _____

Examination held in Bramshott area.

DISABILITY.

Overseas—Local
(scratch one out)

PRESENT CONDITION.

Board recommends:

1. Fit for Duty.
2. Fit for duty after _____ weeks physical training.
3. Fit for Base duty _____ weeks.
4. Fit for Permanent Base Duty.
5. Discharge.

Signature:

_____ Pres.

Members

_____

Approved

Bramshott _____ 101

_____ for A.D.M.S. and G.O.C.
Canadian Troops, Bramshott.

C.A.D.C.5009. 50M-3-5 18.

CANADIAN ARMY DENTAL CORPS.

DENTAL CERTIFICATE.

NOTE:- This form will be attached to the Medical History sheet of each Other Rank being returned to Canada for disposal.

REGTL. No.	* NAME	RANK	UNIT
282854	MUISE. C. W.	Pte.	17th Res.

Date of Examination	18 NOV 1918
Present Dental Condition	Fair.
In case of loss, or decay of teeth, is the loss due to wounds, injury, or disease, directly attributable to Active Service?	No.
Has he ever declined Dental Treatment?	No.
Recommendation	No services required

Date.....

A.D.D.S.-BRAMSHOTT HEADQUARTERS 18 NOV. 1918

Station.....

Signature of Examining Officer ..... W. H. Wright ..... Capt. C.A.D.C.

* Name should be entered in block letters.

FORM OF WILL.

I, Sgt. Cyrill William Munie (Name in full)

Regimental Number 282854 serving in 219th Battn.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I bequeath all my real estate unto

Mrs. Cyrill W. Munie
Digby.
N.S.

Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

Mrs. Cyrill W. Munie
Digby.
N.S.

Name and Address of person or persons to receive personal estate* *(See note).*

IMPORTANT NOTE
This must be Signed and Dated by THE SOLDIER HIMSELF.

this 6th day of Oct A. D. 1916

C W Munie Signature of Soldier.

*N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness P.W. Manning,
Address of Witness Chester, N.S.
Occupation of Witness Soldier in 219th Bn
Signature of Second Witness Cpl. Eug. H. Munie
Address of Witness Digby N.S.
Occupation of Witness Soldier in 219th Bn

M. F. W. 82
300M-5-16.
1772-39-983.

Sailor.

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 219th O/S H. Bn. C.E.F.

(2) Regimental Number 282854

(3) Full Name of Soldier Muise, Cyril William

(4) Place of Birth Weymouth, Yarmouth County, N.S.

(5) Are you married, or not? yes

(6) If married, state,
(a) Full name of your wife Mrs Sarah Muise

(b) Present Postal Address Digby, Digby Co., Nova Scotia.

(7) Are you a widower? No.

(8) Have you any children? yes.

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

Also their names and ages Lizzie — 25 yrs.
George — 23 "
Jean — 21 "
Fred — 18 "
Minnie — 16 "
Gladys — 12 "

M. F. W. 67.

300M.—5-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? No!

If so, state name and address

(10) Is your Mother alive? No!

If so, state name and address

(11) If your Mother is a widow

Are you her sole support, or not?

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

Yes.

(15) Are you insured? No.

If so, in what Company?

Have you made arrangements for payment of your Insurance premium

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

J. McL. Robertson Lt-Colonel for
Lieut. Colonel.
Comd'g. 219th. "Overseas" Highland B'n. C.E.F.
Officer Commanding.

Date

P. 559

Married or Single: W.

Place of Birth: Yarmouth Nova Scotia

Name and Address of Next of Kin: Mrs Sarah Muise Digby Nova Scotia

Relationship of Next of Kin: Wife

Name and Address of Next of Kin:

Relationship of Next of Kin:

Separation Allowance Monthly $: Effective (Date):

Payable to:

Relationship of Dependant:

Casualties, Promotions, &c.

Particulars	Effective Date	Authority
Reverts to Pte. Grade 1.	17/7/17.	Do 168. 17/7
~~To be A/Sgt with Ld. Pay~~ ~~Bn 276. 19/11/17. 17th Res~~	~~24/10/17~~	
To be A/Sgt. with Pay	19-11-17	DO 275 24/11/17 17 Res
Reverts to Ranks	5-2-18	DO 84 9/4/18 17 Res

Admissions to Hospital, &c.

Date Admitted	Date Discharged	V. or A.	Name of Hospital

Reg'l No. 282854 Rank ~~Sergeant~~ Pte. ~~A/Sgt~~ ~~Pte.~~ Name Muise Cyril W.

If in Permt. Corps What Unit: Unit 219th. Transferred to 17th Res Bn Date 1-2-17 Authority R069 22-1-17

Permanent Force Allowances: Transferred to: Date: Authority:

Place of Attestation: Digby Nova Scotia Transferred to: Date: Authority:

Date of Attestation: 15 3/16 Transferred to: Date: Authority:

Assigned Pay Monthly $ 20 Date Effective Oct 1st 1916

Payable to Sarah Muise Digby Nova Scotia Relationship Wife

Assigned Pay Monthly $: Date Effective:

Payable to: Relationship:

Stop-Payment Form (Assigned Pay) Rendered (Date): Effective: Reason:

Discharge Date and Place: Reason and Authority:

Account Transferred to Non-Effective Branch (Date):

Account Transferred to Officers' Pay Branch (Date):

Date	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
1916 31/10/16														21 50	21 50																21 50				Brought forward from Canada
Nov	30	1.25	40	50	30	15	4	50							45 00	48	26/10/16	40	15/11/16	82				973 1460	1460			20		58 93	7 57				
Dec 1917	31	1.25	41	85	31	15	4	65							46 50	79	15/12/16	164	24/1/17					943	1460			20		37 03	17 04				Inst 174 Bn. 4H 1-2-17. Rebg 22-1-17.
Jan 31	31	1.35 -.15	46	50											46 50													20		20	43 54		75		
															159 50	2189	31/1							973						115 96					
Feb	28		42	-											42	207	16/1							12 17				20		41 90	43 64				
Mar	31		46	50											46 50	2319	26/2	2358	15/3					972 973	1217 1217			20		63 79	26 35				
Apr	30		45	-											45													20		20	51 35				
																26	14/4							12 17											
May	31		46	50											46 50	82	30/4							12 17				20		44 34	53 51				
June	30		45	.											45 .	220	30/5							12 16				20		32 16	66 35		2		
	15	1.12	16	50																															
July	16	1.50	24	-											40 50	255	16/6.	297	30/6					7 30	1460			20 -		41 90	64 95		2 00		Reverts to Pte. 17-7-17. Do 168. 7/7
																															79 05				
Aug.	31		34	10											34 10													20		20 .	~~57 35~~				
Sept	30		33												33	307	12/7							1460	973			20		44 33	64 42				
			490	60										21 50	492 10			435	31/8					126 52	77 96			220		424 38					

No 282854 Pte. Muise C.W. 20.00 Ass. Pay

Date 1917	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
MONTH	PARTICULARS			CR. 1	CR. 2	PARTICULARS								DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.	MONTH	PARTICULARS			CR. 1	CR. 2	PARTICULARS			DR. 1	DR. 2	DR. 3	DR. 4	BALANCE
Oct	Blce.			~~67 72~~														67 72																	
	Pte Pay			34 10		AR											20																		
						AR 2166 14/12 17 Res								1947				62 35																	
														1947			20																		
Nov	Pte.			34 10		can AR											20																		
	~~Cpls~~ Pay			~~36 00~~																															
				22 00																															
	Underpaid 5 days Cpls Pay Oct.			~~50~~		can AR Dec.											20	89 45																	
Dec.	Pte			34 10																															
	~~Cpls~~ Pay			~~37 20~~																															
				~~73 40~~													40																		
				67 10		can A.P. Jany											20																		
Jan 1918																																			
	Ptes Pay			34 10		BMAR 744 17/12 17 Res								3897																					
						✓ 753 29/11/17 ✓								2433				40 29																	
														6326			20																		
Feby	Ptes Pay			30 80		can AP Feby											20																		
						AR 952 15/1/18 17 Res								1703																					
						AR 1277 15/2/18 ✓								1947				14 59																	
				30 80										3650			20																		
Mar	Ptes Pay			34 10		can AP.											20																		
						AR 1392 28/2/18 ✓								-1217																					
						AR 1647 18/3/18 ✓								-973				6 79																	
				34 10										2190			20																		

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY	* ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:- 1st October 1916		EFFECTIVE DATE:-	
AMOUNT:- 20.00		AMOUNT:-	

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.

Mrs Sarah Muise (Wife)
Digby N S

Stopped Eff. 1.12.18.

NAME:- MUISE Cyril W

NUMBER:- 282854

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:- 219th Bn

DATE ACCOUNT FIRST OPENED:- 1-11-16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			NSRD
			Canada

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
13/11/18	3595	B' Shott cgd	9 73				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	10		

LPL Bal 27 57

PARTICULARS OF RENDERING NON-EFFECTIVE:- Dis to Canada Led ✓ 37 30 Qmk. N.R.135. 14.11.18. N.S.R.D.

MONTH 1918	PARTICULARS	CR 1	CR 2.	PARTICULARS	DR. 1	DR 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mar	Balance Fwd								6 79		
Apl	P Pay	33		Can AP				20			
				AR. 65 1/4/18 17 Res Pm ✓	7 30						
				AR 209 24/4/18 ✓	7 30				5 19		
	Diff in Plus & Lgts pay from 19-11-17 to 5-2-18	33			14 60			20			
May	BO 275 19/11/17 to BO 84 5/2/18 79 days @ 0.40	31 60	~~31 60~~	Can AP				20			
	PPay	34 10		AR 353 15/5 17 Res	7 30						
				✓ 594 25/5 ✓	7 30				3 69		
		65 70		Can AP	14 60			20 20			
June	PP	33		AR 986. 15/6. 17 Res Pm	7 30						
				✓ 1209. 27/6 —	4 87				3 12		
		33			12 17			20			
JUL 1918											
	PP	34 10		C.A.P				20			
				AR 1405. 11/7. 17 Res.	4 87						
				✓ 1554 25/7 —	4 87						
		34 10			9 74			20	4 14		
Aug	✓	34 10		C.A.P				20			
				AR 1841. 12/8. 17th Res.	9 73						
				✓ 2153 29/8 ✓	9 73				3 6 12		
		34 10			19 46			20			
Sept	✓	33		C.A.P				20			
				AR 2266. 17th Res 11/9	9 73						
				✓ 2520 ✓ 27/9	9 73				29 66		
		33			19 46			20	34 10		
				C.A.P				20	63 76		
									39 46		
Oct	✓	34 10		AR 2892 10/10 17 Res	9 73						
				✓ 3370 28/10 ✓	9 73				24 30		
		34 10			19 46			20			
Nov	✓	33									
				C.A.P				20	37 30		
				AR 3595 13/11 17 Res	9 73				~~32 93~~		
		33			9 73			20	27 57		

at a few

NUMBER RANK NAME

Month	Particulars	Cr. 1.	Cr. 2.	Particulars	Dr. 1	Dr. 2	Dr. 3.	Dr. 4.	Balance	Deferred	Separation
				10 S to Can 22.11.18 D0287 26/11/18 NSHQ							

CANADIAN
ASSIGNED PAY AUDITED
AUDIT CLERK
DATE 28-5-19

District 6

403

(2495) Wt. W. 2290—PP1182 6-18 J.F.W. (E3277)

Army Form W3997.

Regtl. No. 282854 Rank Private

Name Muise Cyril W.
(Christian Names in full) (Surname)

Unit N.S.R.D. Regt. or Corps 219 Battn. N.S.

Category B2 NEXT OF KIN: Wife

REASON FOR RETURN.

Medical board held at Bramshott Camp.

INTENDED PLACE OF RESIDENCE. Digby N.S.

COVER

M.549.

FOR

DISCHARGE DOCUMENTS.

CAMPAIGNS, MEDALS AND DECORATIONS. Local Casualty.

Embarked Aquitania 22/11/18

M. F. W. 54. (A. F. B. 103:
500M.—9-16
H. Q. 1772-39-920.

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

Casualty Form—Active Service.

Unit, Regiment or Corps .....

Regimental No. 282854 Rank Pte. C. E. F. Name Hinise, Cyril W

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

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				
22-11-18	Overseas	TAKEN ON STRENGTH NO 6 DISTRICT DEPOT	Halifax	DO231.	Geo Shaw CAPTAIN ADJUTANT NO 6 DISTRICT DEPOT
29-11-18.		Posted to Casy Co.	"	"	
6.12.18		Deceased	"	D.O.239	Geo Shaw

(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

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				

Date of Enlistment

15-3-16.

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

M

21036

Date of Assignment

Oct 1/16.

RATE OF SEPARATION ALLOWANCE

~~25~~	~~20~~	~~25~~ 1/12/17	30

17/7/17

1-9-18
P.C. 2753
M.D. 41763

RATE OF ASSIGNMENT

20			

Wife.

PARTICULARS OF SEPARATION ALLOWANCE

No. 282854.

Rank ~~Sgt~~ Pte Promoted ~~Sgt~~ Reverted Pte Discharge

Soldier's Name C. W. Muise

Battalion 219th Battn Staff

Beneficiary Mrs Sarah Muise

Relationship Wife M. F. H. 25-5-4 30-7-18

Address "Ret'd 7-9-18"

PARTICULARS OF ASSIGNMENT

Name Mrs S. Muise

Address Digby, N. S.

Change of Address

1

2

3

4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total	
Rtd	—	500	300	800	
Jan. 18	V 68667	30	20	50	✓
Feb.	Y 76287	25	20	45	✓
Mar.	~~N 93408~~	~~25~~	~~20~~	~~45~~	✓ N 93408 Cancelled mailed 21-3-18
Mar.	N 82479	17	20	37	✓ to adj 8.00 overpaid
Apr.	N 11446	25	20	45	✓
May	L 18671	25	20	45	✓
June	N 22882	25	20	45	✓
July	H 32310	25	20	45	✓
Aug	P 41611	25	20	45	✓
Sept.	U 43936	25	20	45	✓
Oct.	W 55174	25	20	45	✓
Nov.	U 58370	25	20	45	✓
Dec.	P 68529	45	20	65	✓
		817	540	1357	

13262-C-4

REMARKS

~~Rate for Reversing~~ M.D. #6

S.A. at Privates rate $20.00 from 15-3-16 to 26-6-16

O.M.L. 15-9-16. ~~Rate altered to Sgt rate 25.00~~

Sgt rate 25.00 from 26-6-16 to 17-7-17. Red. Pte

17-7-17 O.M.L. 21-8-17; At rate $20.00 from 17-7-17 &

future S.A. account overpaid 8.00 at 31-12-17

Deduct 5.00 in Jan & 3.00 in Feb to absorb overpayment

Destroy Order #17771 W.R.L. 4-12-18

A/c Closed 31-12-18

Ret'd per Aquitania

Date 28-11-18 E.X. 4-12-18

Clerk W. P. Landry

CANADIAN
ASSIGNED PAY AUDITED

AUDIT CLERK

DATE 28/5/19

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

M. F. W. 128
400m.—6-17—1772-39-1141
L. L. 22320—M. & D. 1993.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

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—1772-39-1141
L. L. 22320—M. & D. 7693.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

17
21
Dec 18

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 282854 Rank Pte. Name Muise, C.

Corps 219th Batt'n. who was* TRANSFERRED.

On 6-12-18 191..., to Estate Branch, Ottawa.

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-12-18. 191...., to 31-12-18. 191...., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Eng.L.P.C.					
Bal. Dr. from prev. month	42	43	Balance Cr. from prev. month		
Advances by Cheques No.			Regt'l. Pay 31 days at $ 1 c.	31	00
No.			Field Allow. 31 days at $ 40	3	10
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges			Other Allowances*		
Payment on transfer or discharge No.			Other Credits* Subs. 29-11-18 to 13-12-18	12	00
Balance Cr. (to be paid by the new unit)	3	67	Bal. Dr. (to be deducted by new unit)		
Total	46	10	Total	46	10

*Give particulars.

A monthly stoppage of $ 20.00 (†) has paid (‡) been paid on account of Assigned Pay for the month of December 1918 and Sep'n Allce. for month of December 1918 (to) Assignee Mrs. S. Muise,

(Address) Digby, N.S.

FOLIO:
LINE:
DATE:

(†) Insert amount to be assigned, whether it has been paid or not.
(‡) Insert "not" if amount has not been paid for period of account.

Icdo by T.B.
Lest D.O. 42.
Date

On Transfer of an Officer.

Out Allowance of $ ..... has been paid by Paymaster, Military District No. .....

M.D. No 6
No. 53

REMARKS:—

State (1) date of enlistment .....

(2) if married and if a Separation Allowance Card has been submitted yes.

(3) cause of discharge ..... authority .....

(4) authority for transfer Deceased D.O. 239.

NOTE.—Separation Allowance and Assigned Pay Card and Index Card (M.F.W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay List of the Unit.

Date 18-12-18.

Place Halifax, N.S.

W. W. Ing (Capt. I.L.)
Paymaster.
PAYMASTER No. 6 DISTRICT DEPOT.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit, duplicate to District Paymaster; triplicate to accompany the pay list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.

H.Q. 1772-39-903.
100M-9-18. D.P. 874.

PART 1 A.F.B. 179 Canada (Revised 1918). 40266 10/8/18 D. 343

Reserved for M.H.C.

Regt. No. 283854 Rank PTE Surname MUISE Christian Name CYRIL WILLIAM

Unit or Corps—(a) Overseas from United Kingdom 219th BTN (b) in United Kingdom 17th CDN RES

Born at—Town QUINNEN County or Province YARMOUTH CO. NOVA SCOTIA Country CANADA

Date of Birth—Day 15 Month SEPT Year 1870 Age 48 yrs. 2 months.

Joined at DIGBY N.S. Date 15 MARCH 1916

Former trade or occupation TAILOR.

Permanent Marks or any peculiarity that will serve for future identification :—

VACCINATION MARKS LT. ARM.

BIRTH MARK. RT GROIN

Height—feet 5 inches 5½ Colour of eyes BROWN.

Signature of Soldier (*for identification purposes*) Cyril William Muise

Medical Report

☞ *Read carefully the instructions on last page of this form.*

1. DISABILITY.

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (*a*)	D. A. H.
Disabilities Group (*b*)	NA.
Disabilities Group (*c*)	NA.

2. CAUSE OF DISABILITY

		Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	SHOCK	USA	1916
(*ii.*) As to Group (*b*) above.	NA	NA	NA
(*iii.*) As to Group (*c*) above.	NA	NA	NA

3. Is the disability due to disease contracted or injuries received prior to Active Service ?

(*i.*) As to Group (*a*) above ? YES If yes, has Active Service aggravated it ? YES

(*ii.*) As to Group (*b*) above ? NA If yes, has Active Service aggravated it ? NA

(*iii.*) As to Group (*c*) above ? NA If yes, has Active Service aggravated it ? NA.

4. Is the disability due to disease contracted or injuries received while on Active Service ?

(*i.*) As to Group (*a*) above ? No

(*ii.*) As to Group (*b*) above ? NA

(*iii.*) As to Group (*c*) above ? NA.

PART I. (continued).

5. MEDICAL HISTORY.

Arrived in Eng Oct. 1916. - Feb 12. 17 was boarded at Bramshott - CW. He has been employed as tailor since. Frequently he has attacks of vertigo and sometimes discomfort around cardiac area. He dates all his troubles to a shock when he had been informed of his daughter's death at the time in New York.

6. PRESENT CONDITION.

Well nourished man about ye stated
Pulse 116 - regular good volt ten.
Heart sounds regular. No murmurs
At aortic 2nd sound is slightly accentuated
Lungs normal
Nervous system normal
GI system normal

7. OPERATION. (i.) Was one performed? no (ii.) If so, state what. NA.

(iii.) Was one advised and declined? NA

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto, unless there is evidence to the contrary.

8. (i.) Is there loss or decay of teeth attributable to Active Service? No

(ii.) If so, describe. NA

9. DO YOU RECOMMEND:—

(a) Fit for duty? (*state category*) ~~No~~ Yes B1

(b) Invalid to Canada? no

(c) Discharge from the Service as permanently unfit? no

Date of Report Nov 16 1918

Station Bramshott

Signed [illegible] Lieut
Officer in medical charge of case.

I have satisfied myself of the general accuracy of the above Report, and concur therein *except

[illegible] Capt

Dated at Bramshott Station, on 18 NOV 1918 191

*Delete if inapplicable.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

10. Is the disability fully described in Part I. (1)? If not, describe it.

11. Is the cause of the disability fully described in Part I. (2)? If not, describe it.

12. From the medical information now adduced, was the disability caused or aggravated by:—

(a) Negligence of the Soldier { Caused? no. Aggravated? no

(b) Misconduct of the Soldier { Caused? no. Aggravated? no

13. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(Estimate at none, 5%, 10%, 15%, 20%, etc.)

14. THE DISABILITY DUE TO SERVICE. *(See Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in this estimate.)*
What part of the entire disability estimated next above (13) is due to causes arising during Active Service?
(Estimate at none, 1/10, 2/10, 3/10, etc., or all.)

15. Permanency of the Disability due to Service estimated next above in (14).
(i.) Is it permanent? no
(ii.) If not permanent, what is its probable minimum duration *(in months)*?

16. If an operation was advised and declined, do you consider the refusal to have been unreasonable?

17. Can the former trade or occupation be resumed?

18. REMARKS:— 9053
Board under authority G. Telegram dated 11/11/18

19. RECOMMENDATION:—
(a) Fit for duty? *(state category)*
(b) Invalid to Canada? no
(c) Discharge from Service as permanently unfit? no

Date of Board 18 NOV 1918 President.

Signatures of the Board: H. McKenzie capt. C.A.M.C.

Station Bramshott.

Approved ..... Major, D.A.D.M.S. for A.D.M.S., Canadian Troops, Bramshott Camp.

A.D.M.S.

Dated at Bramshott. Station 18 NOV 1918 191

Statement of the Soldier

(This is to be completed only in the case of the Soldier taking his Discharge in ~~England.~~)
(Sections 1, 2, 5, and 6 are to be read to the Soldier.)

I, the undersigned.....G. W. Muise.....have heard the description of my disability read, and am satisfied ~~(or not satisfied) with it. (If dissatisfied, statement should follow.)~~ I complain in addition of :—

.....G. W. Muise.....
Signature of Soldier examined.

Instructions to Medical Officers

Question 1.—State the disability in terms of a diagnosis, that is, a diagnosis of the existing condition as distinguished from the disease or injury which caused it. It should be noted that in medical cases the disability may be the actual disease; for example, Tubercle of Lung, Chronic Bronchitis, Myalgia, Gastric conditions and so forth. (Follow the nomenclature as laid down in the "List of Diseases" of 1915, and amended by A. C. I. No. 1587 of 1917.)

Question 2.—The cause of the disability when known should be stated and care should be taken to establish as correctly as possible the place and date of origin. This is important in view of the relationship of Questions 3 and 4 to Question 5.

Questions 3 and 4.—*NOTE*—By Active Service is meant Service with the Colours in Canada, the United Kingdom or elsewhere during the present war, (since the 4th August, 1914.)

Question 5.—MEDICAL HISTORY.—State concisely the essential points of the history of the case as supported by documentary evidence. If further evidence is considered necessary to complete the Medical History, the same not being supported by documents, this should be obtained by questioning the soldier, but should be distinctly shown as "Patient's Statement." It is considered advisable that these latter statements be grouped apart from the evidence supported by documents available to the Medical Officer.

Extracts should be made from all entries on the Medical History Sheet.

If answers to Nos. 2, 3 or 4 show that the Soldier is suffering from some condition which pre-existed enlistment, it is advisable that these answers be substantiated as far as possible by statements obtained from the Soldier showing history of previous illness or injury.

Question 6.—PRESENT CONDITION.—As this question is primarily intended for the Medical Officer's report, in answering show clearly the condition of the Soldier at the time of examination.

It is directed that the objective and subjective matter be arranged in separate groups. The objective matter is considered to be the more important, in that it consists of a statement of the Medical Officer's actual finding.

Specialists' reports bearing on the PRESENT CONDITION should be attached.

In addition to description of the disability, a report on "all systems" is required in order that the whole when completed may be a true pen portrait of the Soldier's condition.

The Medical Officer in charge of the case will fill out pages 1 and 2 of this Form. The original must be wholly in the handwriting of the Medical Officer. The copies may be typewritten but must be signed by the Medical Officer who must be responsible that these are true copies of the original.

Finally the O. C. Hospital or S. M. O. or an Officer delegated for such duty by the A. D. M. S., is required to sign a certificate at the bottom of page 2, which reads as follows :—

"I have satisfied myself of the general accuracy of this report and concur therewith, except....."

This is a most important part of the paper and one to which the attention of the Officers concerned should be frequently drawn as it is by such strict supervision that the accuracy and good results of Medical Board work can be assured.

ENTRIES OF RECATEGORIZATION

Date	Station	Category	Signature of M. O.	Date	Station	Category	Signature of M. O.