

ATTESTATION PAPER.

No.

Folio.

No. 2 CONSTRUCTION B'n C 57
CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? *Richards*
- 1a. What are your Christian names? *Percy James*
- 1b. What is your present address? *# 272 Britain St. St. John N.B.*
2. In what Town, Township or Parish, and in what Country were you born? *St. John N.B.*
3. What is the name of your next-of-kin? *Mary Richards*
4. What is the address of your next-of-kin? *272 Britain St. St. John N.B.*
- 4a. What is the relationship of your next-of-kin? *Grand-mother*
5. What is the date of your birth? *May 30 1895*
6. What is your Trade or Calling? *Teacher*
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? *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, *Percy J Richards*, 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.

Date *Aug 10th* 1916 *Percy J Richards* (Signature of Recruit)
R.R.R. O'Keefe (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Percy J Richards*, do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Date *Aug 10th* 1916 *Percy J Richards* (Signature of Recruit)
R.R.R. O'Keefe (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 *St. John N.B.* this *10th* day of *August* 1916

Ronald Harrington (Signature of Justice)

Description of Percy James Richards on Enlistment.

Apparent Age 21 years 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. 3 ins.

Chest measurement { Girth when fully expanded..... 32 1/2 ins.
 Range of expansion..... 2 1/2 ins.

Complexion dark

Eyes black

Hair black

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

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye ; his heart and lungs are healthy ; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him* fit for the Canadian Over-Seas Expeditionary Force.

Date Aug 2 191 6

Place Pictou NS D. W. Murray
S. L. - name
 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.

Percy James Richards 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.

C. H. Reis Capt (Signature of Officer)

OCT 14 1916

Date.....191 .

REGIMENTAL DOCUMENTS

NAME RICHARDS PERCY JAMES

Pte. REGT. NO. 931114

UNIT sd. #7

H. Q. FILE NO.

H

5

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

9.5.17.3.19

M

DEATH

Category

DISCHARGE

Category

Demob

10240

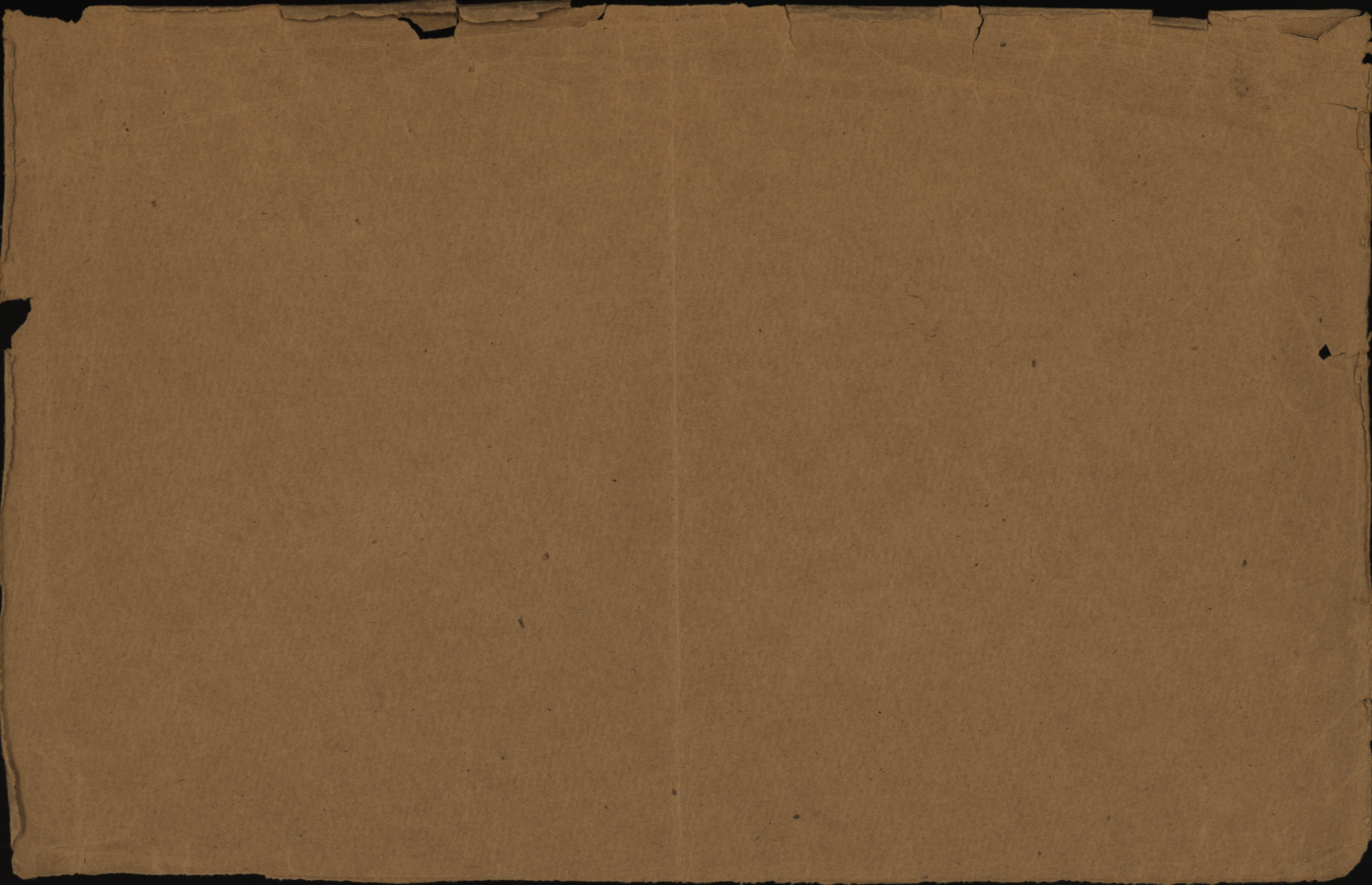
DESERTION

Box No. 8236

H

487957

2
16 - 36
16 - 36
3 - 36



931114

SIN/NAS

RICHARDS

Surname/Nom

PERCY JAMES

Given names/Prénoms

CANADIAN FORCES
FORCES CANADIENNES

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

"CONTENTS CONFIDENTIAL"
"CONTENU CONFIDENTIEL"

Box
8236

COMPONENT
ÉLÉMENT

CEF



No. 931114

RANK

Pte.

NAME

Richards, Percy J.

T. O. S. 10-8-16

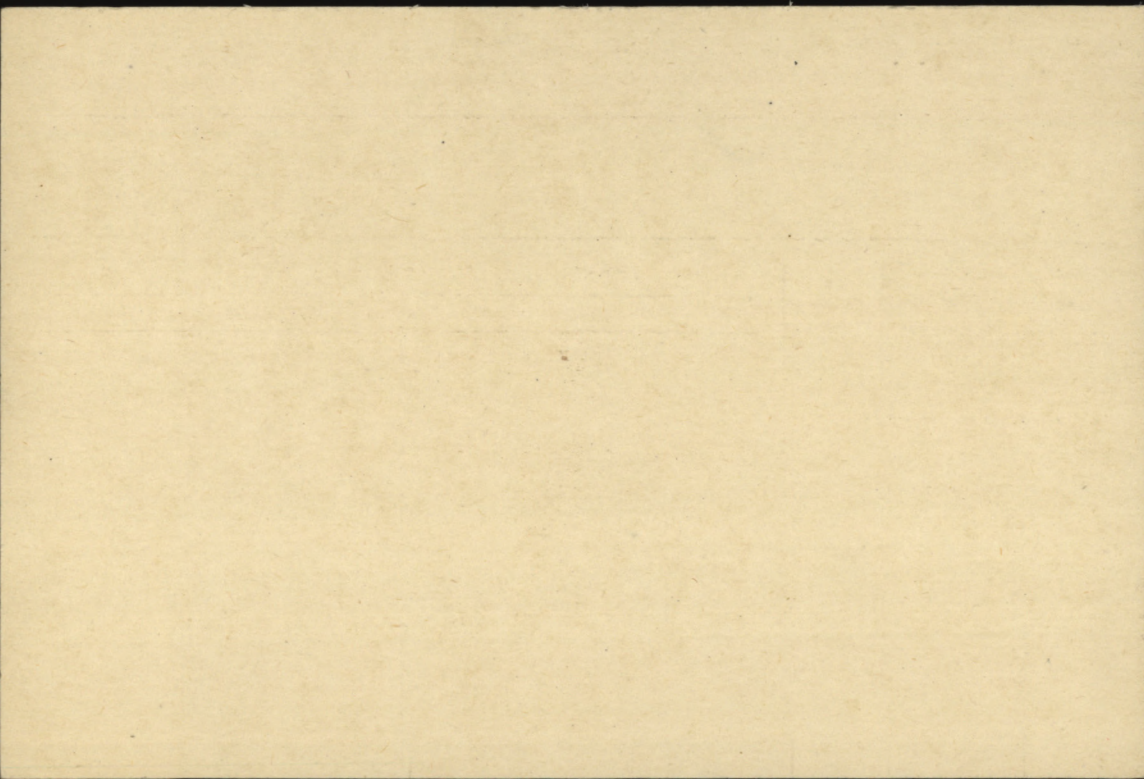
UNIT

No 2 Construction Battalion

D.O. 11-14-8-16

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Aug. 10	1916 Aug 31	n.		
Sept.		n.		
Oct.		n.		
Nov.		✓		
Dec.		✓		
1917 Jan 1917		✓		
Feb.		✓		
Mar.		n.		



Name

RICHARDS, Percy James.

Rank

Reg. No.

931114.

Unit

2 brst Coy.

Next of Kin

Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918 27-3	676 H.	La Juncz Gva.	WOS	A	178	
15-4	67 C Hosp Discharged	524/11 La Juncz 1845/13	"	A	194	MSB

SURNAME.

Richards

CARD NO.

7

CHRISTIAN NAMES

Percy James

S.O.S. dis. 1921/19.
auth. docs.
FOLD

REGL. No.

931114

RANK

Pte.

Demob.

UNIT

No. 2, Construction

Bn.

FORMER CORPS

nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Richards, Mrs. Mary

RELATIONSHIP TO SOLDIER

Grand-mother

ADDRESS

272 Britain St., St. John, N.B.

COUNTRY OF BIRTH

Canada St. John, N.B. DATE May 30th 1895

PLACE OF ATTESTATION

St. John, N.B. DATE Aug. 10th 1916

O/S 28-3-17.

P/6 17-1-19 $\frac{254}{137}$ P/6.

From Halifax per S.S. "Southland" 28/3/17.

MARRIED

SINGLE

Yes.

WIDOWER

TRADE OR CALLING

Teamster

RELIGION

Baptist

DESCRIPTION.

APPARENT AGE

21

YEARS

—

MONTHS

HEIGHT

5

FEET

3

INCHES

CHEST MEASUREMENT

32 1/2

INCHES

EXPANSION

2 1/2

INCHES

COMPLEXION

Dark

EYES

Black

HAIR

Black.

DISTINGUISHING MARKS

Not stated.

MEDICAL EXAMINATION.

PLACE

Pictou, N.S.

DATE

Aug. 15th 1916

Present Address:- 272 Britain St., St. John, N.B.

Reg. No. 931114 Name Richard S. Percy, Jr.
Rank Pvt. Corps #2 Construction Age 21 Service
Ledger No. Serial No.

HOSPITALS	DATE	DIAGNOSIS
<u>Gen. Hosp. Euro. A.S.</u>	<u>19-9-16</u>	<u>Fever unknown origin. C.</u>
<u>Dis. to duty.</u>	<u>22-9-16</u>	

HOSPITALS**DATE****DIAGNOSIS**

M. F. W. 2553.

50M-6-19.

1772-39-1332.

Number

931114

Rank

pte spr. **B**

Surname

RICHARDS

Christian Name

Percy James

Units

C.O.B.C.C.

theatre of War

France **X**

Date of Service

17-5-17

Remarks

Local Address

~~272 Brittain St~~
136 Mecklenburg, St. Johns

Roll No.

W.B.

"B" Page 8363

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.....

*—Name will be given in full; surname first.

DESP. NOV 30 1921
REGN. NOV 74 13

NAME

Richards, P.

RANK AND CORPS

Pte 2 Con. J.

REGT'L. No.

93114

H. Q. FILE NO 649

FOLLOWS

NO.

FOLLOWS

CABLE

NO.

DATE

NATURE OF CASUALTY

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

A 178	Can. For. Corps Lajoy	27-3-18	V. W. S.
A 194	" " " " "	15-4-18	" " " disch.

Dental Examination on Discharge

File No.

Rank *P/E* Name *Richards P.J.* Regt. No. *931114*

Date of enlistment *10/9/16* Service, where *France*

If any dental treatment in army, where *Canada*

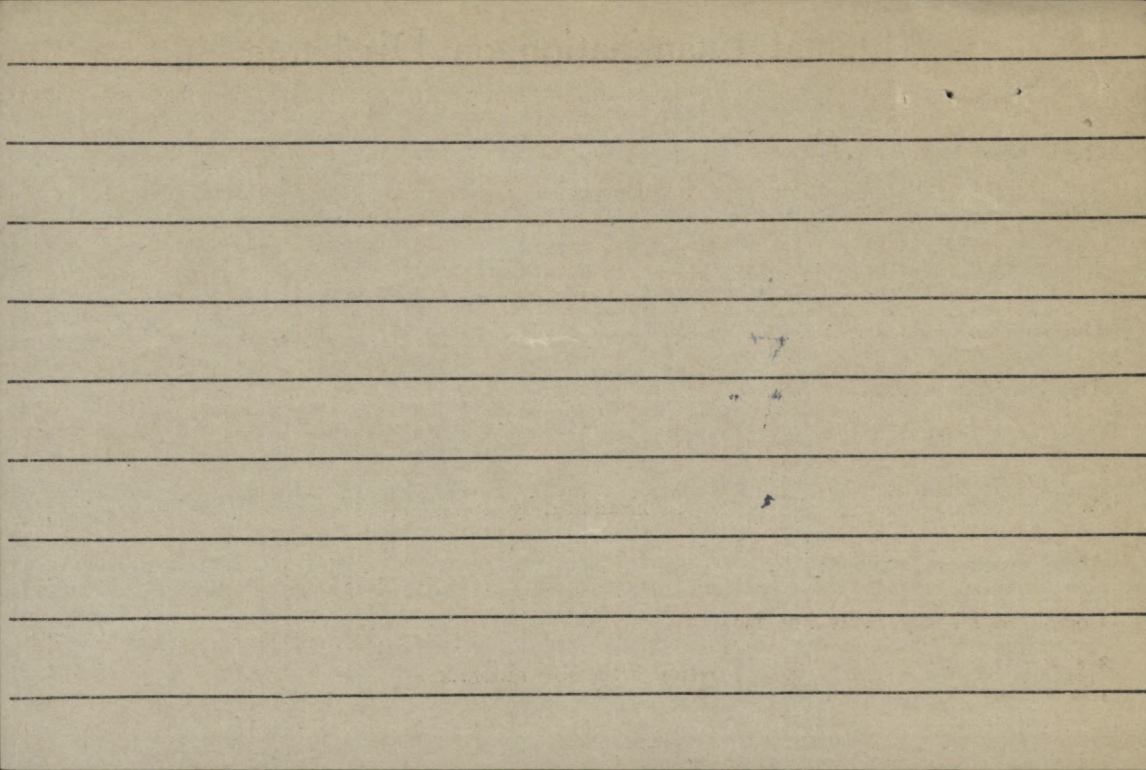
Discharge examination at *Fredricktown* Date *10/2/19*

Treatment to be received *7.30*

At Examined by *L.R. Davidson*

Above treatment completed by Date

Completed History Sheet File No.



LOCAL

Name **RICHARDS Percy James** Rank **Pte.** Regtl. No. **931114**

Fyle Depot.....

Original unit **#2 Cons. Co.** Present unit **#2 Cons. Coy. #** M. or S. Age **24** Religion **Bapt.** Ref. H.Q.....Port, ship and date of arrival **Halifax, Olympic 17-1-19**Next of kin **Grandmother Mary Richards, 272 Britain St., St. John, N.B.**Address on leave **As Above**

Address on discharge.....

Transportation issued Yes No Date..... Character on discharge.....Previous occupation **Teamster** Date and place of enlistment **10-8-16 St. John, N.B.**Diagnosis **V. D. S.** Date of Medical Boards.....

Date.	Remarks.	Pt. 2 Order No.
T. O. S.		
10-1-19	Casualty Coy. 17-1-19 Leave 17-1-19 to 3-2-19	#21 C.O. 21
18-2-19	To Discharge Section	6049
18-2-19	Dis. H. M. S. F. Stou, N.B. D. S. O. #41	(18-2-19)

*—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

SURNAME

CHRISTIAN NAME OR NAMES

REG. NO.

RICHARDS,

P.J.

931114

RANK

UNIT

Co.

TROOP

BATTY

Pte

NS. 2 Con.

HOSPITAL

DATE OF ADMISSION

C.F.C. LaJoux, Jura

27-3-18

1.

HOSP.

2.

HOSP.

3.

HOSP.

4.

HOSP.

DIAGNOSIS

V.D.S.⁴⁰

1.

2.

3.

DISPOSITION

DATE

CL. 4-4-18 A178.2.

REMARKS

23. 4 18. 2 1918

dis 15. 4. 18

A.M.D. 2 DEPT.

Beh. of D.G.M.S. O.M.F.C. London.

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.	
2.	
3.	
4.	
5.	
6.	
7.	

Medical Examination upon leaving the Service of an Officer fit for general service or a Soldier fit for duty.

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank: Pte. Name: RICHARDS Surname: P. J.
 Unit or Corps: 2nd Const. (If a soldier) Regtl. No. 931114
 Born at: St. John, N.B. on date: May 30, 1896
 Signature (for identification): P. J. Richards

The examination is to be made jointly by two Medical Officers.

1. PHYSIQUE---Any deformity, maiming or lameness? If so, describe.

Weight 135 lbs.
 Height 5 1/2 ft. 4 in.

no

2. NUTRITION AND DIATHESIS?

Good

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. NERVOUS SYSTEM?

no

4. RESPIRATORY SYSTEM?

no

5. HEART?

Abnormal Sounds? no
 Abnormal Size? no
 Pulse Rate? 70

Intermittence or Irregularity? no

6. ARTERIES---Any hardening?

no

7. DIGESTIVE SYSTEM?

no

8. GENITO-URINARY SYSTEM?

Urinalysis---s.g.? 1018 Reaction? ac Albumen? 0 Sugar? 0

9. SKIN, MIDDLE EAR, EYE, or any other part?

no

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so describe.

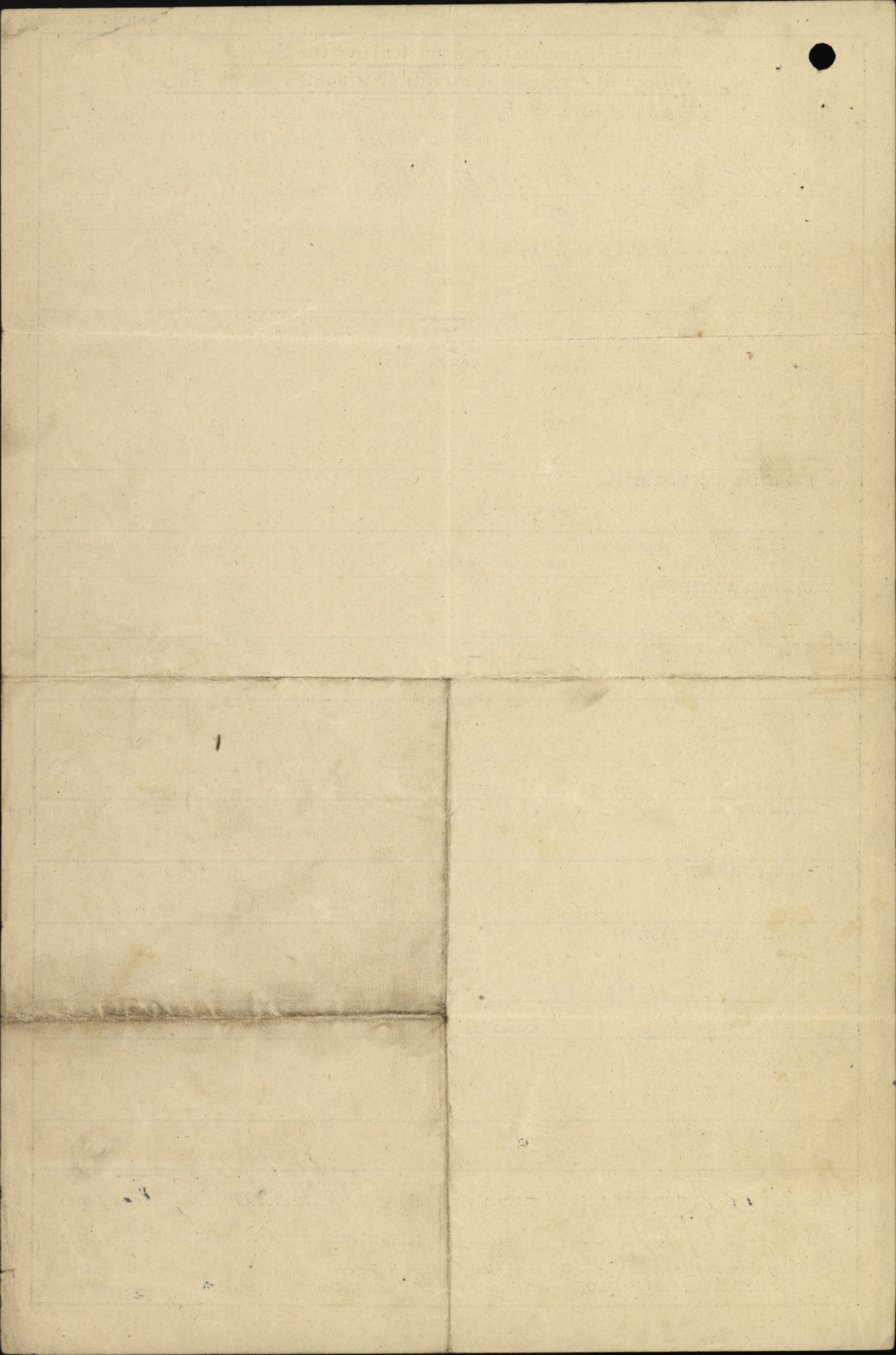
no

11. Opinion as to the health and physical condition of the one examined?

Good

Examined at: Kennel Park Signed: P. J. Richards M.O.
 Date: 2/1/19 Signed: W. G. ... M.O.

If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.



DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT *7*

NAME OF SOLDIER *Richardson R. J.*

REGIMENT *2nd Const.* RANK *Private* No. *921114*



INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report, record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge from the Service.

Date	Amalgam Temporary Filling (a) C. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhoia	Synthetic Porcelain	Extracting	DENTURES			Gold Clasp	Gold Filling	CROWNS		Bridge Work	Prophylaxis	OPERATOR	Military District	REMARKS
										U	L	P			Gold	Porcelain					
<i>10/2/19</i>																					
Condition on first Examination									<i>4</i>												Cavities <i>30</i>
																					Extractions
<i>Examined for Discharge</i>										<i>L. R. Davison</i>											
<i>R. J. Richardson</i>																					

DEPARTMENT OF THE INTERIOR

UNITED STATES GEOLOGICAL SURVEY

WATER

RESOURCES

DEPARTMENT OF THE INTERIOR
UNITED STATES GEOLOGICAL SURVEY

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. 931114 Rank Pfc Surname Richard, Percy J.
(Given name in full)

Unit or Corps Co 2 Construction Co. Birthplace St John N.B.

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

1. GENERAL DESCRIPTION:

Physique good Weight 135 lbs. Height 5-3 1/2 ft. Colour of Eyes blue

Nutrition good

Pulse good

Condition of arteries normal

Vision Rt. 20 Left 20

Hearing (conversational voice) Rt. 20 ft. Left 20 ft.

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

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.

U.D. S on service
 O.K. Re Civ. Let #25
 7th month of C.A.M.C.
 O/y U.D.

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at (Overseas)

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 SECTION FOR USE IN CANADA—

Examined at *Fredericton, N.B.* (Canada)

Date *Feb - 10th '19* Signed *B.T. Dunville Capt.* M.O.

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

Signature *Percy J. Richards*

(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.)

attention Veneal Officer

[OVER]

CANADIAN ARMY DENTAL CORPS, O.M.F.C. DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block Letters) RICHARDS, P.J. MD 7

REGIMENT 2nd Cdn. RANK plb No. 93114

Date of Examination in England 3/1/49 Date of Examination in France _____

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 20.
2. EXTRACTIONS _____
3. CROWNS _____
4. DENTURES
 - (a) Full Upper
 - (b) Part Upper
 - (c) Full Lower
 - (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? _____

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)

- (a) In Canada
- (b) In England No.
- (c) In France

KINMEL PARK,
NORTH WALES.

Signature of Dental Officer *H. Goodband*
Carroll

MD 7

RICHARD D. PIT

1911

1911

1911

1911

1911

1911

- (1) Full Term
- (2) Full Term
- (3) Full Term
- (4) Full Term

- (1) Full Term
- (2) Full Term
- (3) Full Term

Richard D. Pit

SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103-1,
Part I.

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

Nothing to be written in this margin.

W1889 - P2 1150 IM 5/18 G.W.P. Co (34/10)

(1)*Substantive rank <i>Pte.</i> *Acting rank [To be entered in pencil to facilitate alteration.] (4) Surname <i>Richards.</i> (5) Christian Names <i>Percy James.</i> (6) Army Form, number of, Attestation Form or Record of Service paper) (7) Whether of British or of Alien origin [vide A.C.I. 578 of 1918] (8) Date of birth as stated on enlistment (9) (a)	(2) Regiment or Corps <div style="text-align: center; font-size: 1.2em;"><i>no 2 Construction Batt'n</i></div> (3) Regtl. No. <div style="text-align: right; font-size: 1.2em;"><i>931114</i></div>
----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

(10) Enlistment (b) <i>10-8-16.</i>	(11) Engagement (c)
(12) Service reckons from (date) <i>10-8-16.</i>	(13) Special conditions (if any) of enlistment (d)
(14) Any subsequent variations (if any) of conditions of service	Initials and Rank of an Officer.

(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) (Record of Occupation in Civil life (vide Army Order 93 of 1917)
				Industrial Group No. Trade or Calling Married or Single Particulars of Trade Test Occupation Cards despatched on (date) Second Occupation Card despatched on (date)

(17) Next of Kin	(Signature of Posting Officer)
(18) Demobilizer (f)	(Place)
(19) Pivotal-man (f)	(Date)
(20) Qualifications (g)	or (21) Corps trade and rate
(22) Extended {	(23) Re-engaged {
(24) Miscellaneous entries:—	

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [vide A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only" or "not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoing-smith, &c.

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received.	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer
28-12-18	17 th Res.	No 5th	L.O.S. M.D.Y.	Kimmel Park		
9-1-19	M.D. 7	No 9	9-1-19 A.O.P. on proceeding to Canada	Kimmel Park		
				Plimaway		Lieut
				Officer		He Records.
						M.D. 7 - Kimmel Park.
10.1.19	England		TAKEN ON STRENGTH 200 #7			
			PART II. ORDER No. 20			
						Capt, & Adj, For O. C. District Depot No. 7.
			"DISCHARGED" FROM HIS MAJESTY'S SERVICE			
			Auth R 1420(c)			
18-2-19			A.S.O #41 (18-2-19)			
						Lieut.
						O. C. Discharge Section For O. C. District Depot No. 7.

Nothing to be written in this margin.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 931114 (Rank) Private

Name (in full) PIERCY JAMES RICHARDS enlisted in
the No. 2 Construction Battalion

CANADIAN EXPEDITIONARY FORCE at St. John, N. B. on the 10th
day of August 19 16.

HE served in CANADA, ENGLAND AND FRANCE.

and is now discharged from the service by reason of Denobilization.

Authority - R.O. 1420 (c)

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

Age 23 years 9 months
Height 5 feet 3½ inches
Complexion Dark
Eyes Black
Hair Black

Marks or Scars
NONE

P. J. Richards
Signature of Soldier

W. J. [Signature]
Issuing Officer
MAJOR.

Date of Discharge FEBRUARY 18, 1919.

Rank
O.C. DISTRICT DEPOT NO. 7.
Appointment

Signed at FREDERICTON, N. B. this 18th day of February 19 19

in Military District No. 7

File Reference No. D.D.7 86-R-136.

DISTRICT DEPOT NO. 7
 FEB 19 1919
 FREDERICTON, N.B.

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

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. (Rank) Name

Unit

Address on Discharge

Character and Conduct

Former Occupation

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks

Signed at this day of 19

.....
Name of Officer

.....
Rank

.....
Appointment

On demobilization the
particulars called for on
the back of this cer-
tificate will not be com-
pleted.

931114
MEDICAL HISTORY SHEET

Surname Richardson Christian Name Percy J

Examined { on 12 day of Aug 1916
at Pictou

Approved by J Murray

Birthplace { City or Town St Johns
County N.B.

Rank Lt-AMC M.O.

Apparent age 31

Trade or occupation labourer

Height 5 feet 3 Inches

Weight 132 4 1/2 lbs.

Chest measurement { Minimum 30 inches

{ Maximum expansion 2 1/2 inches

Physical development good

Small-pox Marks none

Vaccination Marks { Arm right Left left

{ Number one

When Vaccinated last 5 years

(a) Marks indicating congenital peculiarities or previous disease none

(b) Slight defects but not sufficient to cause rejection

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

Date	Result	VACCINATIONS
<u>18/3/17</u>		<u>Dau Murray</u>
		M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>25/10/16</u>	<u>L.S.R.</u>	<u>H.V. Keit Neapn Am B</u>
<u>31/10/16</u>	<u>L.S.R.</u>	<u>H.V. Keit Neapn Am B</u>
<u>7/11/16</u>	<u>L.S.R.</u>	<u>H.V. Keit Neapn Am B</u>
		M.O.
		M.O.
		M.O.

Enlisted on 12th day of August 1916 at Pictou, N.S.

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment				
Transferred to		<u>931114</u>		<u>8/12/16</u>

No. 2 CONSTRUCTION, D.A. C.E.F.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT
<u>Fredericton</u>	<u>Feb 10th '19</u>	<u>nil</u>	<u>cat A¹¹ E. J. Smith, Capt</u>

N.B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

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

Aut. W. W.

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

Casualty Form—Active Service.

Unit, Regiment or Corps *Rod Construction Batt C.P.F.*
 Regimental No. *931114* Rank *pte.* Name *Berry James Richards*
 C. E. F. *and six months after*
 Enlisted (a) *10-8-16* Terms of Service (a) *period of war* Service reckons from (a) *10-8-16*
 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) _____

CERTIFIED CORRECT.
 MAY 6 JUN. 1917
 CAN. RECORDS, LONDON.

Report	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date From whom received <i>O.C. No 2 Constable Bahni</i>	Embarked, <i>Grade</i> Disembarked, <i>by land</i> Proceeded <i>Overseas</i>	<i>Haber Hill</i> <i>Liverpool</i> <i>Seaford</i>	<i>25/3/17</i> <i>17/4/17</i> <i>MAY 17 1917</i>	<i>PT 2 D.O.H.</i> <i>Drayton Capt</i> <i>for Capt + Adj.</i>
				<i>Landed in France 17-5-17 N.R.</i>
<i>23/2/18</i>	<i>O.C.</i>	<i>Franked 14 days leave to sick</i>	<i>17.2.18</i>	<i>B215 P295 N 2.13 4/878³</i>
<i>9/3/18.</i>	<i>do</i>	<i>Rejoined from Leave</i>	<i>17/3/18</i>	<i>B213.</i>
<i>27.3.18</i>	<i>Just Hqs.</i>	<i>V. D. S. adun.</i>	<i>27.3.18</i>	<i>E.588. W. 6163.</i>
<i>30.3.18</i>	<i>O.C.</i>	<i>Adun. to Hqpt. VO9, Fld.</i>	<i>27.3.18</i>	<i>B. 713.</i>
<i>15.4.18</i>	<i>Just Hqs.</i>	<i>V. D. S. disch'd.</i>	<i>15.4.18</i>	<i>E.5175. W. 8271.</i>

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) e.g. Signaller, 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				
20.4.18	OC unit	Forfeits Hld. allowance and is placed under stop. of pay at the rate of 50% per day whilst in hospital from 27.3.18 to 15.4.18. 20.4.18		15.4.18	B. 213. Of 25. D/30.4.18.
11.4.18	OC unit	Reg. from Hq. B. Co.		15.4.18	B. 213.
29.7.18	OC unit	on command to HQ Subject to 76.		17.7.18	B. 213
29.10.18	OC unit	Awarded per H. Badge	Field.	10/8/18	B. 213/150 59 after 19/18
11.12.18	MAJ	Trans to Reg. ordered to NS Reg depot Bramshott		14.12.18	KP344 b. a. Hewitt Lient. for Lt. Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.
17.12.18	NSRD.	T.O.S and att'd 2nd. L. B. D. for Quarters & Rations	Bramshott	14.12.18	D.O. 305
	NSRD	ON COMMAND TO CDD Kimmel Rhyl	Pk BRAMSHOTT		PART II D.O. NSRD 313 27/12/18 b. a. Knight LIEUT. OFFICER IN RECORDS, NOVA SCOTIA REGTL. DEPOT.

CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44.
1135 (D.F.) 250M.-12-18.
1772-39-903.

LAST PAY CERTIFICATE

Regimental No. 931114 Rank Pte Name Richards Guy J.
(Surname first)
Unit who was* Discharged
On 18/2/19 191....., to.....
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1/2/19 to 18/2/19 191...
the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month		82.76
Regimental Pay..... <u>18</u> days at \$ <u>1.10</u> .c		19.80
Field Allowance..... days at \$.....c		48.00
Separation Allowance		35.00
Clothing Allowance		100.00
Post Discharge Pay		
*Other Credits		
Advances	25.00	
Separation Allowance and Assigned Pay Cheque No. <u>8671</u>	48.00	
*Other Charges	2.22	
Balance on transfer or on discharge, cheque No. <u>8671</u>	180.54	
Total	255.76	255.76

*Give particulars.

A monthly stoppage of \$ 15.00 (†) has been paid (§) been paid on account of
Assigned Pay for the month of Jan 191..... }
and Separation Allee. for month of Feb 191..... } Assignee Mrs Mary Richards
(Address) 191 Broadview Ave St. John N.B.
(†) Insert amount to be assigned, whether it has been paid or not. (§) Insert "not" if amount has not been paid for period of account.

ON TRANSFER OF AN OFFICER.

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

REMARKS:—

State (1) date of enlistment married or single Mar.
(2) Separation Allowance, entitled or not Yes (3) Reason for discharge Home
(4) Authority for discharge or transfer PLP # 7 18/2/19

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer or soldier.

Date 17/2/19
Place St. John N.B.

C. M. Dineen
Paymaster District Depot 110.7.

N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916.
(B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.
(C) For purpose of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. As payment of the balance will have been made, the words "on transfer or" will be deleted.
(D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificates will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.

DUPLICATE

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 2 Construction*

(2) Regimental Number *93 1.114*

(3) Full Name of Soldier *Percy J. Richards*

(4) Place of Birth *St. John N.B.*

(5) Are you married, or not? *No*

(6) If married, state, (a) Full name of your wife *No*

(b) Present Postal Address *2720 Breton St. St. John N.B.*

(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, William Richards
If so, state name and address Lt. John. N. B.

(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.
\$15.00

(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.
Gran Mother
Mrs Mary Richards
272 ~~Barton~~ ^{Britton} St Lt John N. B.,

(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.
no

(15) Are you insured? yes
If so, in what Company? London Life

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.

C. W. Reis Capt
for Officer Commanding.

Date OCT 14 1916

JM

Rank _____ Name **RICHARDS, Percy James.** Reg'l No. **931114**
 Unit **No. 2 Const. Bn.** If in perm. Corps, }
What Unit? } Married or Single **Single.**
 Place and Date of Enlistment **St. John N.B. 10th Aug 1916.** Place of Birth **St. John, N.B.**
 Name and Address, Next-of-Kin **Mary Richards.**
272 Britain St., St. John, N.B. Relationship **Grand-mother.**

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

N/E. R.B. **931119**
 File R.L. _____
 Category **OR CAN**

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>Arrived in England. S. Southland</i>				<i>7.4.17</i>	<i>Awarded</i>
<i>14.6.17</i>	<i>2nd CCC</i>	<i>Arr'd in France</i>	<i>Field</i>	<i>17.5.17</i>	<i>PT 1115A</i>
<i>29.10.18</i>	<i>2nd bbb</i>	<i>awarded one good conduct</i>	<i>St Field</i>	<i>10.8.18</i>	<i>59</i>
<i>16.12.18</i>	<i>NSRD</i>	<i>TOS from 2nd CCC</i>	<i>" Bshott</i>	<i>14.12.18</i>	<i>AO 305 471 2/19.12.18 2nd CCC</i>
<i>27.12.18</i>	<i>NSRD</i>	<i>of/cb CBO Ryle</i>	<i>" "</i>	<i>27.12.18</i>	<i>20.313</i>
<i>19 JAN. 1919</i>	<i>NSRD</i>	<i>SOS to CEF in CANADA</i>	<i>✓ Bshott</i>		

A.F.B. 103 CHECKED
 30 MAY 1917

9 JAN 1919
 PT2DO 16

ASSIGNED PAY

Sheet No. 2.

Mrs Mary Richards
(Assignee)

OVERSEAS CONTINGENTS

Name of Soldier

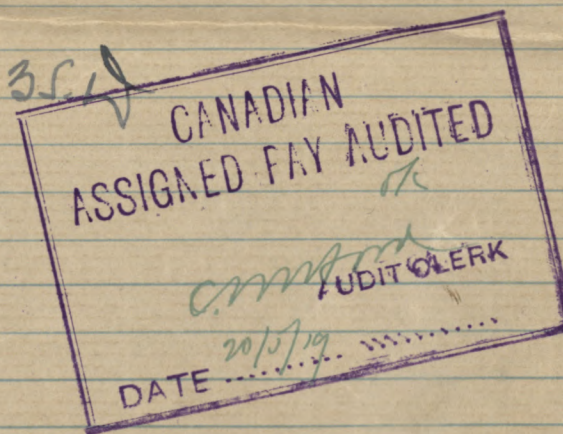
Richards P. J.

PAYMENTS.

L. L. Job 5470—Req. 6888.

93114, Pl. 2, Com Batta

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>15</i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		<i>Z 5056</i>	<i>15</i>	
May		<i>A 11050</i>	<i>15</i>	
June		<i>C 18046</i>	<i>15</i>	<i>15 B</i>
July		<i>10 2 5049</i>	<i>15</i>	<i>W</i>
Aug.		<i>S 32309</i>	<i>15</i>	
Sept.		<i>W 40779</i>	<i>15</i>	<i>D</i>
Oct.		<i>1 45180</i>	<i>15</i>	
Nov.		<i>A 34646</i>	<i>15</i>	
Dec.		<i>M 61502</i>	<i>15</i>	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				



MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

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

Mrs
 To Whom *Mary Richards*
 Address *191 Broadview Ave*
St. John, N. B.

By Whom Assigned *Richards Percy J*
 Regtl. No. *931114*
 Rank *Plt*
 Corps *2. Com Battr*

Rate *15.*

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				





Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.
EFFECTIVE DATE:-	1 APR 1917	EFFECTIVE DATE:-	
AMOUNT:-	15 ⁰⁰	AMOUNT:-	

NAME:- *Richards. Percy James*
 NUMBER:- *931114*

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 Mary Richards Mother
191 Broadview Ave
St John N.B.

Stopped Off. 1/1/19.

WR 161 17/1/18
2666

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		<i>Plt</i>

UNIT AND TRANSFERS

ORIGINAL UNIT:- *2 Construction Bn*
 DATE ACCOUNT FIRST OPENED:- *1 APR 1917*

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SFD	UNIT TRANSFERRED TO
<i>LP6</i>		<i>28/2/19</i>	<i>Can Sea</i>

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
<i>4/1/18</i>	<i>6946</i>	<i>Field</i>	<i>4 66</i>				
<i>18/2/18</i>	<i>3588</i>	<i>BRDC</i>	<i>9 43</i>				
			<i>14 39</i>				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS/CE ALL/CE
	<i>1</i>	<i>-</i>	<i>-</i>	<i>10</i>

PARTICULARS OF RENDERING NON-EFFECTIVE *Dis Can. 21/2/18. Auth. NR. 161 17/1/18 2nd CC Co. Leg Bal 106 9th Lt Col Bal. 92⁵⁰*

1918 MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
<i>MAR</i>	<i>Bal Ford</i>								<i>18 51</i>		
<i>apl</i>	<i>P. Pay</i>	<i>33</i>		<i>b. a. P.</i>				<i>15 -</i>			
				<i>AR 8-8/4 CFC fra</i>	<i>3 57</i>						
				<i>✓ 270 22/4 - " -</i>	<i>3 57</i>						
				<i>From stop 27/3 to 17/4/18 - 20 days 60⁰⁰</i>							
				<i>do 30/4/18 - 2 Com Bn fra</i>	<i>12 00</i>				<i>17 37</i>		
<i>May</i>	<i>P. P.</i>	<i>33</i>		<i>b. a. P.</i>	<i>7 14</i>	<i>12 -</i>		<i>15 -</i>			
		<i>34 10</i>		<i>AR 11/5 - CFC junior</i>	<i>3 57</i>			<i>15 =</i>			
				<i>✓ 426 23/5 - " -</i>	<i>3 57</i>				<i>29 33</i>		
<i>June</i>	<i>P. P.</i>	<i>33</i>		<i>all pay</i>	<i>7 14</i>			<i>15 -</i>			
				<i>AR 713 7/6 CFC 5</i>	<i>3 57</i>						
				<i>✓ 895 27/6 June</i>	<i>3 57</i>				<i>40 19</i>		
		<i>33</i>			<i>7 14</i>			<i>15</i>			
<i>July</i>	<i>PP.</i>	<i>34 10</i>		<i>Can ap</i>				<i>15</i>			
				<i>AR 953 10/7 CFC 5</i>	<i>3 57</i>						
				<i>AR 1516 22/7 676</i>	<i>3 57</i>			<i>15</i>	<i>52 15</i>		
		<i>34 10</i>			<i>7 14</i>						
<i>Aug</i>	<i>PP</i>	<i>34 10</i>		<i>Can ap</i>				<i>15</i>			
				<i>AR 1711 6/8 CFC 1</i>	<i>3 57</i>						
				<i>AR 1958 27/8 ✓</i>	<i>3 57</i>				<i>64 11</i>		
		<i>34 10</i>			<i>7 14</i>			<i>15</i>			
<i>Sep</i>	<i>PP</i>	<i>33</i>		<i>Can ap</i>				<i>15</i>			
				<i>AR 2212 6/9 CFC 1</i>	<i>3 57</i>						
				<i>AR 2452 23/9 ✓</i>	<i>3 57</i>				<i>74 97</i>		
		<i>33</i>			<i>7 14</i>			<i>15</i>			
									<i>74 97</i>		<i>afa</i>
									<i>74 97</i>		<i>ford</i>

COMPILED BY *W. G. Gurnea*
 CHECKED BY *W. G. Gurnea*

CANADIAN
 ASSIGNED PAY CERTIFICATE
OK. Howland
 DATE *22/1/19*

NUMBER 931114

RANK *plc*

NAME RICHARDS P.J.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
OCT 1918	<i>plc pay</i>	<i>3410</i>		<i>Forward</i>					<i>74 97</i>		
				<i>c.a.p.</i>				<i>15</i>	<i>109 07</i>		
				<i>2693 7/10 c.f.b.</i>	<i>373</i>				<i>94 07</i>		
				<i>2944 23/10</i>	<i>373</i>				<i>86 61</i>		
		<i>3410</i>			<i>746</i>			<i>15</i>	<i>62 10</i>		
Nov.		<i>33</i>		<i>c.a.p.</i>				<i>15</i>	<i>153 91</i>		
				<i>3111 8/11 c.f.b.</i>	<i>373</i>				<i>61 15</i>		
				<i>3318 25/11</i>	<i>13 00</i>						
				<i>6746 10/12 c.f.b.</i>	<i>4 66</i>						
				<i>3588 10/12 CRDg.</i>	<i>9 73</i>						
Dec		<i>3410</i>		<i>c.a.p.</i>	<i>31 18</i>			<i>15</i>	<i>92 53</i>	<i>L.P.</i>	
Jan		<i>6710</i>			<i>31 18</i>			<i>30</i>			

D.L. saw 7/19 B.D. 16 10/19 1780

P. 589
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

S.
St. John. N.B.
Mary Richards
277 Britain St. St. John. N.B.
Grand Mother.

CASUALTIES, PROMOTIONS, &c.

PARTICULARS

EFFECTIVE DATE

AUTHORITY

REG'L No. *931114*

RANK

NAME

Richards Percy James.

IF IN PERM. CORPS
WHAT UNIT

UNIT

TRANSFERRED TO

DATE

AUTHORITY

PERMANENT FORCE ALLOWANCES

TRANSFERRED TO

DATE

AUTHORITY

PLACE OF ATTESTATION

TRANSFERRED TO

DATE

AUTHORITY

DATE OF ATTESTATION

TRANSFERRED TO

DATE

AUTHORITY

ASSIGNED PAY MONTHLY \$ *15.00*

DATE EFFECTIVE # *1.4.17.*

PAYABLE TO

Mrs Mary Richards. 191 Broadview Ave. St John N.B.

RELATIONSHIP

Mother

ASSIGNED PAY MONTHLY \$

DATE EFFECTIVE

PAYABLE TO

RELATIONSHIP

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

EFFECTIVE

REASON

DISCHARGE DATE AND PLACE

REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

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 No.	1 DATE	2 No.	2 DATE	3 No.				3 DATE	4 No.				4 DATE	1	2	3	4	CREDIT	DEBIT					
<i>Apr 30</i>	<i>30</i>	<i>1.10</i>	<i>33.00</i>					<i>33.00</i>																													
<i>MAY 1</i>	<i>31</i>	<i>1.10</i>	<i>34.10</i>					<i>34.10</i>																													
<i>June 1</i>	<i>30</i>		<i>33.00</i>					<i>33.00</i>																													
<i>July 1</i>	<i>31</i>		<i>34.10</i>					<i>34.10</i>																													
<i>Aug</i>			<i>34.10</i>					<i>34.10</i>																													
<i>Sep 1</i>	<i>30</i>		<i>33.00</i>					<i>33.00</i>																													
			<i>201.30</i>					<i>201.30</i>																													
MONTH	PARTICULARS		CR. 1	CR. 2	PARTICULARS		DR. 1	DR. 2	DR. 3	DR. 4	BALANCE																										
<i>Sep</i>	<i>Bal</i>		<i>76.55</i>								<i>76.55</i>																										
<i>Oct</i>	<i>77</i>		<i>34.10</i>		<i>AR 59. 27. 2 months at 2.70</i>		<i>3.57</i>				<i>- 15</i>																										
					<i>- 628. 11. 7</i>		<i>3.57</i>																														
			<i>34.10</i>		<i>2466. 13. 7</i>		<i>3.57</i>				<i>10. 71</i>	<i>84. 94</i>																									

CANADIAN
ASSIGNED PAY AUDITED
OK *Fiskell*
AUDIT CLERK
DATE *20/5/19*

FEB 18 1919

FREDERICTON, N.B.



This space to be for numbers.

Proceedings on Discharge.

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page.)

No.	931114
Rank	Private
Surname	RICHARDS
Christian name	PERCY JAMES
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	District Depot No. 7,
Date of discharge	February 18, 1919.
Place of discharge	Fredericton, N.B.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age	23 years 9 months	Descriptive marks	
Height	5 feet 3 1/2 inches		
Complexion	Dark		None.
Eyes	Black		
Hair	Black		
Trade	Teamster		
Intended place of residence	272 Brittin St.,		136 Mecklenburg St.
(To be given as fully as practicable.)	St. John, N.B.		St. John. N. B. (14-11-21)

2. The above-named man is discharged in consequence of Demobilization.

Authority for discharge.....R.O....1420....(c).....

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

3. Conduct and character while in the service have been, according to the records, etc.

N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

M. F. B. 218.
200M.—5-18.
H. Q. 1772-39-113.

(OVER)

*Noted under
13/3/19*

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

5. He is in possession of the following number of G. C. Badges:

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company, (*Squadron or Battery*), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place).....

(Date).....

Commanding.....

8. Certificate to be signed by the Soldier on Discharge

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page, and that I have received my permanent discharge certificate.

(Place)..... **Fredericton, N.B.** *P. J. Richard* (Signature of Soldier.)

(Date)..... **February 18, 1919.** *David Coe* (Signature of Witness.)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service:

..... (Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to..... (the date to which the Record of Service is completed).....years.....days.

Total.....years.....days.

11. Confirmation of Discharge.

The discharge of the above-named man is hereby confirmed.

(Place)..... **FREDERICTON, N.B.**.....

(Signature)..... *[Signature]*

MAJOR

(Date)..... **FEBRUARY 18, 1919.**.....

O.C. DISTRICT DEPOT, No. 7.

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

List of Discharge Documents.

now
Richard P.

Attestation Paper of Particulars of Receipt Proceedings on Discharge	W. 133 B. 218	Reg. Conduct Sheet Squadron Battery Company or Field Conduct Sheet	Militia form B. 203 B. 203a W. 178
(a) Proceedings on Discharge	B. 237	Medical Report for Invalids	B. 237
(b) Attestation	W. 44	Dental History Sheet	B. 405
(c) Medical History Sheet	W. 82	Last Pay Certificate	W. 44
		Duplicate Discharge Certificate	W. 304
		Form of Will	W. 82
		Form if discharged "Medically unfit"	
		Form if man has not been overseas	

I hereby certify that the following documents are unobtainable.
Number 11 207

Officer Commanding

N.B.—In the case of a man discharged by purchase, the date and number of deposit receipt with amount of same is to be noted hereon.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263</p> <p>Squadron } Battery } Conduct Sheet, " B. 263a Company }</p> <p style="text-align: center;">or</p> <p>Field Conduct Sheet " W. 178</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia form B. 313</p> <p>Casualty Form " W. 54</p> <p>Medical Report for Invalid§ " B. 227</p> <p>Dental History Sheet " B. 465</p> <p>Last Pay Certificate " W. 44</p> <p>Duplicate Discharge Certificate " W. 39A</p> <p>‡Form of Will " W. 82</p> <p>§Only if discharged "Medically unfit."</p> <p>‡Only if man has not been overseas.</p>	<p>Attestation Paper Militia Form W. 23 or Particulars of Recruit " W. 133</p> <p>Proceedings on Discharge " B. 218</p> <hr/> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p style="text-align: center;">(a) Proceedings on Discharge</p> <p style="text-align: center;">(b) Attestation.</p> <p style="text-align: center;">(c) Medical History Sheet.</p>
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

N.B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Eff 1-4-18

Separation and Assigned Pay Branch

2901

Apr. 1/17

OVERSEAS CONTINGENTS

R

RATE OF SEPARATION ALLOWANCE

75 ⁰⁰	30		
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RATE OF ASSIGNMENT

15			
----	--	--	--

90257
1-9-18
26.2753
M.O. 25732

PARTICULARS OF SEPARATION ALLOWANCE

No. **931114**

Rank **Pte** Promoted Reverted Discharge

Soldier's Name **Percy J. Richards**

Battalion **2nd Con. Bn.**

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name **Mrs. Mary Richards**

Address **191 Broadview Ave.,
St. John, N.B.**

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917					
Dec 31			135-	135-	
Jan 18	F 65580		15	15	
Feb	F 66418		15	15	✓
March	R 91840		15	15	✓
Apr	R 9526		15	15	✓
May	U 22752		15	15	✓
May	H 5014	50		50	
June	S 22932	25	15	40	✓
July	F 24004	25	15	40	✓
Aug	S 37315	25	15	40	✓
Sept	O 46594	25	15	40	✓
Oct	H 53091	25	15	40	✓
NOV	S 60381	25	15	40	✓
Dec	H 65929	45	15	60	✓
Jan	E 72666	30	15	45	✓
		275	330	605	

15316-J.603

Go L.P. 5988 to adjust Spa 1/8 to 3 5/8 hrs 11 5/8 hrs 10 5/8

CANADIAN
ASSIGNED PAY AUDITED

Christoph
AUDIT CLERK

DATE 20/07/19

A STENCIL
HAS BEEN MADE
FOR THIS ACCOUNT

M. F. W. 128
400M-6-17-1772-39-1141
L. L. 2320-M. & D. 7693.

A/c Closed 31-1-19

Ret'd per *Olympic*

Date 27-1-19 M.F.W. 187 M.D. 7

Clerk *L. Hay* 22-1-19

M.R.O. 51549 Destroy. Ok 19/18

M.R.O. 1 Brndy 10/5/18 M.D. 10/18

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date

Cheque No.

Amount S/A

Amount A/P

Total

REMARKS

M. F. W. 128
400M-6-17-1772-59-141
L. L. 2520-M. & D. 7593.

M.D. No. 7

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

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

M. OR S.

REGT. No. *931114*

RANK *Pvt.*

NAME (IN FULL)

RICHARDS, Percy J.

3

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?
ADDRESS					<i>2nd C. Br.</i>	<i>Olympic 17-19</i>
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				PLACE OF ATTESTATION	TRANSFERRED TO DATE AUTHORITY
<i>Yes</i>					<i>10/8/16</i>	
TO WHOM PAID	RELATIONSHIP				DATE OF ATTESTATION	TRANSFERRED TO DATE AUTHORITY
<i>See A.P.</i>					<i>15.00</i>	<i>NO 7 10 10 1-2-19</i>
ADDRESS					PAYABLE TO	RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS
					<i>Mrs Mary Richards</i>	
					ADDRESS	
					<i>191 Broadview Ave St John NB</i>	
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE
					DISCHARGED	PLACE DATE REASON AUTHORITY IF ENTITLED TO POST DISCHARGE PAY
					<i>Fredericton 18/19</i>	<i>Demot 30.49</i>

BALANCE FROM PREVIOUS ACCOUNT

MONTH	PAY AND F.A.		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGIMENTAL CHARGES		OTHER CHARGES		TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS			
	NO. OF DAYS	RATE	AMOUNT		\$	C.	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3		\$	C.	\$	C.	\$	C.	\$	C.				
			\$	C.																			NO.	DATE	NO.
Dec					92	53	92	53													92 53	Credit Bal. Dec. 31-16			
Jan	31	<i>10</i>	34	10	30	00	11	20	75	30	O. B	6 S.	6 S.	4	87	5	60	36	40	45	848	8296	See A.P. Paid by Ottawa 17-31-19 502		
Feb	18	<i>10</i>	19	80	35	00	18	00	72	80	110	40	17	25	00	180	54		4800	222	255	76	100 00	Chk 8472	
					244	500	500														30	70	100	400	3000 23,390.074 1/12 1/19
																					30	70	100	300	Chk 393487-393488 19/4/19
																					30	70	100	200	Chk 840057 2/19/19
																					30	70	100	100	Chk 840057 2/19/19
																					30	70	100	0	AR 73 16.848494-5 19/19
																									non effective
																									500
																									150 - 350 - 500

