ORIGINAL 2512 931360

ATTESTATION PAPER.

No. 2 ~~CONSTRUCTION~~, B'n. C.E.F.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

No.

Folio.

A

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? — Smithers
1a. What are your Christian names? — William
1b. What is your present address? — New Glasgow N S
2. In what Town, Township or Parish, and in what Country were you born? — New Glasgow N. S.
3. What is the name of your next-of kin? — Mrs Melvin Smithers
4. What is the address of your next-of-kin? — Water St New Glasgow N. S Nr Post Office
4a. What is the relationship of your next-of-kin? — Mother
5. What is the date of your birth? — May 24th 1896
6. What is your Trade or Calling? — Labour
7. Are you married? — Single
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? If so, state particulars of former Service. — No
11. Do you understand the nature and terms of your engagement? — yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? — yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, William Smithers, 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.

William Smithers (Signature of Recruit)

Date Dec. 7th 1916. C. Pt Matthew H Edwards (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, William Smithers, 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.

William Smithers (Signature of Recruit)

Date Dec 7th 1916. C. W. Reis Capt (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 Truro N. S this 12th day of December 1916.

C. W. Reis Capt (Signature of Justice)

M. F. W. 23.
600M.—2-16.
H. Q. 1772-38) 841.

A

2512

Description of William Smithers on Enlistment.

Apparent Age 20 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

Chest measurement: Girth when fully expanded ..... 86 ins.
Range of expansion ..... 3 ins.

Complexion Dark

Eyes Brown

Hair Black

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

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

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

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 Dec 12th 1916.

Place Truro St. 8

H. V. Kent Major A.M.C.
Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

.....

.....

.....

.....

CERTIFICATE OF OFFICER COMMANDING UNIT.

William Smithers 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.

D. H. Sutherland (Signature of Officer)
L'T. COL.
O. Comd'g No. 2 Construction Battalion, C. E. F.

Date DEC 14 1916 191 .

4-3-29

REGIMENTAL DOCUMENTS

NAME SMITHERS. WILLIAM. REGT. NO. 931360 UNIT #2 CONST. BK. 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
3	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					DEMOB.
1	MEDICAL EXAMINATION (M.F.W. 129)					
1	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
1	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					4-29
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)			32070		4-29
1	A.F.W. 3997					6 2 9
1	M.F.W. 192					
1	D.M.S. 1375					2
1	C.A.D.G. 5809A.					
	Cus Card					
1	P.O.W. 6					
1	R 1202					
1	Pay book					
				W82853		
	Cancd. 4.11.63					

6 CARD NO. 4

S.O.S. Dis. 15-2-19.
Ds 44 FOLL. 9-3-19
Demob. 9-3-19

SURNAME. Smithers

CHRISTIAN NAMES William

REGL. No. 931360 RANK Pte.

UNIT No. 2 Construction Bn. C.E.F.

FORMER CORPS Nil

NEXT OF KIN.

NAMES IN FULL Smithers Mrs. Melvin,

RELATIONSHIP TO SOLDIER Mother,

ADDRESS New Glasgow, Pictou, N.S.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada New Glasgow, Pictou N.S. DATE May 24th 1896.

PLACE OF ATTESTATION Truro, N.S. DATE Dec. 12th 1916.

R/C. 25-1-19 25-8/120.

L. L. 6945. M. & D. 6994.

M. F. W. 22. 100M.—8-16. H. Q. 1772-39-339.

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

MARRIED SINGLE yes WIDOWER

TRADE OR CALLING Labourer RELIGION Baptist.

DESCRIPTION.

APPARENT AGE 20 YEARS MONTHS

HEIGHT 5 FEET 9 INCHES

CHEST MEASUREMENT 36 INCHES EXPANSION 3 INCHES

COMPLEXION Dark EYES Brown HAIR Black

DISTINGUISHING MARKS Not Stated.

MEDICAL EXAMINATION. PLACE Truro, N. S. DATE Dec. 12th 1916.

Present Address - New Glasgow, Pictou Co., N. S.

Form R. 149.

Name SMITHERS William Rank Pte. Reg. No. 931360

Unit 2 Cons. B.d

Next of Kin CANADA

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918 1-6	C.A.Gen.Hsp. La ~~Forest~~	Jura Jura Func.	Wd. Foot Rt.	A 235	Q.288	7951-4
5-6	Discharged		"	A 234		1873-14
8-10	C.A.C.H. La Forest		V.D.G.	A 345		4774-9
22-10-18	Discharged		do.	A 357	Ha	5151-9
26-11-18	L.F.B. to Jura		20	A 386		5986-14
4-12-18	Discharged		"	A 394		6173-6

Date		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List

NAME Smithers William

REGT'L. No. 931360

H. Q. FILE No 649

RANK AND CORPS Pte. 2nd Can Const. Co Can For. Corps

FOLLOWS No.

FOLLOWS

CABLE NO.	DATE	NATURE OF CASUALTY
Nof K		Mrs. Melvin Smithers (mother) New Glasgow, Pictou N. S.
2.288 2-7.	11-6-18	Adm. Hosp Lajoux, June 1st 1918. (Wdd. R. foot.)
101 W.S.M.	26-6-18.	Rejoined regt June 5th, 1918.

L. L. 31493. M. & D. 8476.

M. F. W. 42—100M.—28-11-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 235-1	Can For Corps La Joux	1-6-18	Punct wd. r. foot
A 238	Discharged	5-6-18	" " " "
A 345-2	Can. For. Corps La Joux Jura	8-10-18	V D G
A 357-2	Disch. " "	22-10-18	"
A 386 (1)	Can. For. Corps. Lajoux Jura	26-11-18 (20)	
A 394 (2)	" Dinte.	4-12-18 (20)	

m

gw.

Number 931360 Rank Spr.

Surname SMITHERS

Christian Name William

Units C.O.R.C.C Theatre of War France

Date of Service 17.5.17

Remarks

Latest Address New Glasgow N.S.

Roll No. B Page 12280.

200m.-2-21.M.

No. 931360 RANK Pte NAME Smithers. William

T. O. S. 7-12-16 UNIT No 2. Construction Battalion

D.O. 102. 14-12-16

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Dec 7.	Dec 31	✓		
1917 Jan	1917	✓		
Feb.		—	120 hrs. det. 1.00 fine	Feb. paylist
Mar.		—	A.W.L. 4 days C.B. 3 days pay forf.	D.O. 68 26-3-17

2512

D.M.S. 1300-50M-21-11-17.

Surname	Christian Name or Names	Reg. No.
SMITHERS.	W.	931360.

Rank	Unit	Co.	Troop	Batty
Pte.	N.S. 2Con.			

Hospital	Date of Admission
C.F.C. La. Joux Jura.	1-6-18.
1. C.F.C. La Joux Jura	Hosp. 8-10-18
2. C.F.C. La .. D°	Hosp. 26.11.18.
3.	Hosp.
4.	Hosp.

Diagnosis Punct. Wd. Rt. Foot. NO

1. V.D.G.

2. V.D.G.

3.

E

Disposition

C.L. 10-6-18, A235.
13.6.18 A238.
16-10-18 A345-2
30.10.18 A357 ①
3.12.18 A386'
12.12.18 A394-2

Date

Dis - 5.6.18.

Remarks

Dise. 22.10.18
Dis 4.12.18

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT

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

*Name Smithers A. Rank Pte Regtl. No. 931360

Fyle Depot 74-8-841

Original unit 2 Con Bn Present unit 4th D.D. M. or S. Age 1896 Religion Bapt Enlist. H.Q.

Port, ship and date of arrival Halifax, Mrs. Gelonie Smithers.

Next of kin New Glasgow N.S.

Address on leave

Address on discharge

Transportation issued Yes No Date Character on discharge

Previous occupation Labourer Date and place of enlistment Truro N.S. 12/12/16.

Diagnosis Date of Medical Boards

Date.	Remarks.	Pt. 2 Order No.
31.1.19	T.D.S. from 18/1/19 Posted Con Co	81.
15.2.19	DISCHARGED at Halifax, N.S	44

*—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

2512

H

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 of progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.B.B.227.

No. 931360 Rank G.T. Surname Smithers
(Given name in full) William

Unit or Corps L.D. & C. Birthplace New Glasgow N.S.

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

1. General Description.

Physique good Weight 160 lbs. Height 5 ft. 10 in Colour of eyes Brown

Nutrition good

Pulse 76

Condition of Arteries good

Vision Rt. 20/20 Left 20/20

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

Identification marks, scars, or deformities. (Give cause and date of origin)
Scar on arms results of vaccination

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

Osseoues and Joint System no Any other general condition no

$$$$$

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

New Glasgow N.S.

(If space is insufficient, continue on back of form)

2512

H

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 ~~Officer~~ Board.)

THIS SECTION FOR USE IN CANADA-

Examined at Halifax N.S. (Canada)

Date Feb 11/19 Signed [illegible] 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. William Smithers

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

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

M.F.W. 129. (Over)

(9) Is your Father alive? Jr. William Smithers

If so, state name and address water st Crew Glascow Cp 8

(10) Is your Mother alive? Mrs Ida Smithers

If so, state name and address water Street

Crew Glascow Cp. 8

(11) If your Mother is a widow no

Are you her sole support, or not? no

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

$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.

X

(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.

X

(15) Are you insured? yes

If so, in what Company? Metropolitan

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.

D H Sutherland LT. COL.
O. Comd'g No. 2 Construction Battalion, C. E. F.
Officer Commanding.

Date 16/12/16

DUPLICATE

To be made out in duplicate. I.Q. 54-21-20-53

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.

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(1) Name of Overseas Unit which Soldier joins No. 2 CONSTRUCTION, B'n. C.E.F.

(2) Regimental Number 931360

(3) Full Name of Soldier William Smithers

(4) Place of Birth New Glasgow

(5) Are you married, or not? Single

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

(b) Present Postal Address

(7) Are you a widower?

(8) Have you any children?

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

300M.—5-16.
1772-39-954.

(SEE OTHER SIDE.)

2512 D.M.S. 131 '15.

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

F

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: Smithers Surname: Willard

Unit or Corps: 17th Reserve (If a soldier) Regtl. No. 931360

Born at: New Glasgow, N.S. on, date: May 24th 1896

Signature (for identification): Willard Smithers

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

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

Weight 160 lbs. no

Height 5 ft. 9 ins.

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? 74 Intermittence or irregularity? no

6. **ARTERIES.**—Any hardening? no

7. **DIGESTIVE SYSTEM?** no

8. **GENITO-URINARY SYSTEM?**

Urinalysis—S.G.? 1020 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: Kinmel Park Signed: H P C Smith Capt. M.O.

Date: 2/1/19 Signed: [illegible] 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.

2512

awwv

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps #2 Const Battn C.E.F.

Regimental No. 931360 Rank private Name William Smithers

Enlisted (a) 7/12/16 Terms of Service (a) Duration of war + 6 months C. E. F. Service reckons from (a) 7/12/16

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)

C

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	25/3/17	
		Disembarked England	Liverpool	7/4/17	
		Proceeded Overseas	Seaford		Pt 2 D.O. #
					A. B. MacLaw Lt Adjutant, No. 2 Construction Battn.
31.5.17.	OC.	Forfeits 5 days pay for Making away with Iron Rations	Landed in France 17-5-17 N.R.		
			Tld. 31.5.17		

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

D.C. Mor Const Bttn

MAY 17 1917

(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.

C

2512

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				
6/6/17	OC.	Forfeits 20 days pay for (1) Drunk on Camp (2) Creating a disturbance about 10 30 pm	Flu.	5/6/17	B2069 P/ 123. 14/7/17
2.8.17	O.C.	20 Days F.P. #2 for. Found in a place out of bounds insolence to an N.C.O.	Yld	1-8-17	B 2069 P 131 13/10/17
6/12/17.	OC.	10 Days F.P. No 2. for Drunk when Coming into Camp.		4/12/17.	B2069 P297 No 1 dj. 7/1/18
27-12-17.	O C	30 days F P No 2. for. Whilst on Salvus Duty Picquet. absenting himself without leave from 4 pm. until apprehended by the M.P. at about 7-30 pm 23-12-17.		24/12/17	B2069 P297 2 dj. 9-1-18
28/2/18.	OC Unit	10 days F P No 2 for when on act for (1) Leaving his Working Party without permission at about 12.30 pm (2) Absent from 12.30 pm until 3-15 pm (2hrs & 45 min)			B2069. P297 No 13 dj. 8-3-18
1-6-18	Jura Hosp	Punctured Wd. Fort R	Fred	1.6.18	W 3193
1-6-1918	O/ unit	admitted to Hospital	Sld	1-6-18	B213
5-6-1918	Jura Hosp	Punct Wd. Fort Rt Discharged	Yld	5-6-18	W 3590 F 5918
8-6-18	O/ unit	Returned from hospital	"	5.6.18	B213
25.9.18	O/ unit	Granted 10 days leave	Ult.	15-9-18	B213 Ho 55 of Sept 1918
12-10-18	do	Report to be done	Fred.	7-10-18	B213

Form R 122.
2353—100M—9-1-16

2512

LTR

Rank | Name SMITHERS, William | Reg'l No. 931360

Unit No. 2. Const. Bn. | If in perm. Corps, What Unit? | Married or Single Single.

Place and Date of Enlistment Truro, N.S. Dec. 7th, 1916. | Place of Birth New Glasgow, N.S.

Name and Address, Next-of-Kin Mrs Melvin Smithers.
New Glasgow, N.S. | Relationship Mother.

Assigned Pay Monthly $ | Payable to | Relationship

Separation Allowance $ | Payable to | Relationship

Discharge, Date and Place | Reason | Character

H. W. & V., Ld.—9546-16.

N/E. R.B. No. 6836
File R.L.
Category OR CAN
Category

D

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 ss "Southland"		7-4-17	A.F.B. 103 CHECKED 30 MAY 1917 A.W.W.W.
14.6.17	No 2 Const. Bn.	Arrived in France	Field	17.5.17	Pt II 115
10.6.18	N.S.R	Wounded		1.6.18	C.L.A. 235
16.12.18	N.S.R.D.	TOS from 2nd CCC	Bishott	14.12.18	20305 & 71 D/ 19.12.18 2nd CCC.
27.12.18	N.S.R.D	O/C to C.D.D Rhyl	—	27.12.18	— 313
3.2.19	N.S.R.D.	Ceases on Cmd Rhyl & S.O.S. to C.E.F. Canada	Ripon	18.1.19	— 25

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.					

ORIGINAL 2512 931360 B

MEDICAL HISTORY SHEET

Surname Smithers Christian Name William

Examined on 12th day of Dec 1916 at Truro NS.

Birthplace City or Town New Glasgow County Pictou NS.

Apparent age 20

Trade or occupation Labourer

Height 5 feet 9 Inches

Weight 135 lbs.

Chest measurement Minimum 33 inches Maximum expansion 36 inches

Physical development Good

Small-pox Marks

Vaccination Marks Arm Right Left Number

When Vaccinated last none

(a) Marks indicating congential peculiarities or previous disease none

(b) Slight defects but not sufficient to cause rejection

Inside a large scar on back of leg from a burn

Approved by H. V. Kent

Rank Major A.M.C. M.O.

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	
19/3/17		Dan Mcovray	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
12/1/17	L and G.R.	H V Kent Major	M.O.
19/1/17	L and G.R.	H V Kent Major	M.O.
12/2/17	L and G.R.	H. V. Kent Major	M.O.

Enlisted on 7th day of December 1916 at New Glasgow N S

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	No 2 const. Bn. C.E.F.	931360		7/12/16
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result

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

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

B

2512

Surname Smithers Christian Name William

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				

2512

I

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 931360 (Rank) Private

Name (in full) William Smithers enlisted in

the No. 2 Construction Battalion

CANADIAN EXPEDITIONARY FORCE at Truro N.S. on the 7th

day of December 1916

HE served in France

and is now discharged from the service by reason of Demobilization

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

Age 22 years 9 months

Height 5 feet 9 inches

Complexion Dark

Eyes Brown

Hair Black

Marks or Scars Scar on inner side of Rt. leg above ankle

William Smithers
Signature of Soldier

Geo. T. Shaw CAPT. & ADJ'T.
FOR LIEUT. COL. No. 6 DISTRICT DEPOT.
Issuing Officer

Rank

Appointment

Date of Discharge February 18th 1919

Signed at Halifax N.S. this 18th day of February 1919

in Military District No. Six

File Reference No.

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.

M. F. W. 39a
200m.—2-18.
H.Q. 1772-39-882

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 certificate will not be completed.

Uniform not to be worn after Date of Discharge, unless authority has first been obtained from G.O.C. District.

2512

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

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-9-20.

Casualty Form—Active Service.

Unit, Regiment or Corps .....

Regimental No. 931360 Rank Pte. C. E. F. Name Smithers 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				
18.1.19	Treas. T/O/S.	No. 6 D.D. Hfx.	Camp Co.	25.1.19	DO 31
					Lieut ASST. ADJT. No. 6 DISTRICT DEPOT
15.2.19.	DISCHARGED at Halifax, N. S	DO. 44.	for		Lieut O C. DISCHARGE SECTION No. 6 DISTRICT 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				

C.A.D.C. 5009 A

2512

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

M.D.6

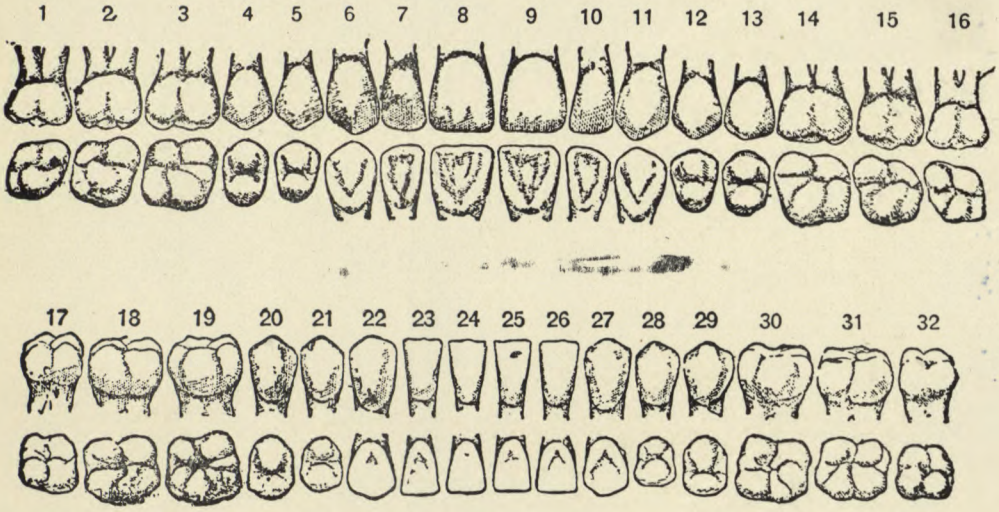
DIRECTIONS TO DENTAL OFFICERS

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.

NAME OF SOLDIER (Block Letters) SMITHERS. W

REGIMENT 2 Cons. Coy RANK PTE No. 931360

Date of Examination in England 31-12-18 | Date of Examination in France



G

PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS 27, 30
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~~

(*c*) ~~In France~~

KINMEL PARK, NORTH WALES.

Signature of Dental Officer W. Kennedy Lieut

L-L.Job 5470—M. & D. 6888

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

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

Mrs

To Whom Ida Smithers
Address Water Street
New Glasgow. N S.

Rate 15.

APR 1917

By Whom Assigned Smithers Wm
Regtl. No. 931360
Rank Pte
Corps 2. Con Battn

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

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2. Mrs Ida Smithers
(Assignee)

L. L. Job 5470—Req. 6888.

PAYMENTS.

Name of Soldier Smithers Wm
931360. Pte. 2. Con Battn

15. APR 1917

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		Z 5094	15	
May		O 114356	15	
June		N 19169	15	15-B20
July		Q 25484	15	D
Aug.		G 32465	15	
Sept.		O 40063	15	
Oct.		L 46075	15	D 135-00 X+
Nov.		X 51021	15	
Dec.		V 59534	15	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

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

P. 559

MARRIED OR SINGLE: S.

PLACE OF BIRTH: New Glascow N.S.

NAME AND ADDRESS OF NEXT OF KIN: Mrs. Melvin Smithers New Glascow. N.S.

RELATIONSHIP OF NEXT OF KIN: Mother

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

ADMISSIONS TO HOSPITAL, &C.

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

REG'L NO. 931360 RANK NAME Smithers William. X E

IF IN PERMT. CORPS WHAT UNIT UNIT 2nd Con. Bn. TRANSFERRED TO DATE AUTHORITY

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION New Glascow N.S. TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION Dec. 7th 1916 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 15.00 DATE EFFECTIVE 1.4.17.

PAYABLE TO Mrs Ida Smithers, Water St. New Glasgow. N.S. 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 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
								Separation						9 63	9 63																9 63					Bal from Canadian
Sep 1/30	30	1.10	33 00												33 00													15 —		15 —	27 63			27 63	
MAY 1.31	31	1.10	34 10												34 10	42 1/5 15 1914								9 74 4 86							29 60	32 13			32 13	
June 1.30	30	—	33 00												33 00	70 1415.								4 80				15			19 86	45 27			45 27	
July 1.31	31	—	34 10												34 10													15 —	5 50	20 50	58 87			58 87	Forfeits 5 do pay 21-5-17 D.O. 120. 26.7.17.
Aug —	—	—	34 10												34 10											3 57		15 —	22 00	40 57	52 40			52 40	Forfeits 20 do pay 5-6-17, D.O. 123, 14-8-17.
Sep 1.30	20	—	33 —												33 —											3 57 3 57 3 57		15 —		25 71	59 69			59 69	
			201 30											9 63	210 93									19 46		14 28		90 —	27 50	151 24	59 69				

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLCE. SIG.
Sep	Bal	~~59 69~~							59 69		
Oct	T.P.	34 10		Sl. 20 d. W.2. 8/7. D.O. 131. 13-10-17		22 —	—	15			
				AR 580. 27/7. 26 bounties Ath. C&C	3 57						
				" 629 11/7 " " " "	3 57						
		34 10			7 14			15	71 65		

Pte 931360 Smithers W 1500

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
MONTH	PARTICULARS				CR. 1	CR. 2	PARTICULARS							DR. 1	DR. 2	DR. 3	DR. 4	BALANCE		DEFERRED PAY	SEP. ALLTS.														
	Old Bal																	71 65																	
Nov	P.P.				33 -												15																		
							AR829. 28 9/17 C.F.C.							3 57																					
							" 853. 12 10/17 "							3 57																					
							" 975. 25 10/17 "							3 57																					
DEC	- -				34 10		" 1043. 10 11/17 "							3 57			15.	94 47																	
					67 10									14 20			30																		
JAN	1918 P.P.				34 10												15.																		
							Sta 10 do. FP2 4 12/17. Do. 1. 2 1/18								11 -																				
							AR. 1262. 23 12/17. 2 Bonds Ren							12 49																					
							Sta 20. do. FP 2 24 12/17. Do 2. 9 1/18								22 -																				
							AR 1436. 21 12/17 2 Bon C.F.C.							3 57				64 51																	
					34 10	-								16 06	33 -	-	15																		
FEB	-				20 80		Assigned Pay									-	15																		
							- 1856. 24 1/18. C.F.C							3 57				76 74																	
					30 80									3 57			15																		
MAR 1918	"				34 10		Assign										15.																		
							~~10 Do 7 12. 25 2/18 80 13/8/18~~								11 00.																				
							AR 2015 14 2/18 C.F.C. Jura							7 14																					
							" 2323 18 3/18 "							3 57																					
					34 10									10 71	11 -		15	74 13																	

P 820
12474—375M—13-2-18.

* 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:– SMITHERS William F

NUMBER:– 931360

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 Ida Smithers Mother
Water St. New Glasgow N.S.
Stopped 1-1-19

MR 1/1 2 6660 7/2

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:– 2 Construction Bn

DATE ACCOUNT FIRST OPENED:– 1 APR 1917

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
L.P. 6		28/2/19	Canada Section.

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
~~9/12/18~~	~~6449~~	~~Fwd 25~~	~~4 66~~				
~~18/12/18~~	~~3589~~	~~L2/1.~~	~~9 73~~				
			14 39				
				8/2/10	New Book issued in France 13/9		

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE:– Dis to Canada Ark 87 P161. 17/12/18 2 666: Lea Bal 8/9 22 LP6 Bal 15 81

1918

MONTH	PARTICULARS	CR 1	CR 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
MAR	Bal Ford								74 13		
Apl	P. Pay	33 –		6 a P.				15 –			
				aR 8 8/4 CFC Jma	3 57						
				v 271 22/4 –"–	3 57				84 99		
May	P. P.	33 –		6. a. P.	7 14			15 –			
		34 10						15 =			
				all 413 9/5 CFC Jma	3 57						
				1 427 28/5 – "–	3 57				96 95		
		34 10			7 14			15			
June	P. P.	33 –		ass Pay				15 –			
				aR 714 7/6 CFC 5.	3 57						
				v. 876 27/6 Jma	3 57				107 81		
		33			7 14			15			
July	PP	34 10		Can aP				15			
				aR 954 10/7 CFC 5	3 57						
				aR 1098 25/7 v	3 57				119 77		
		34 10			7 14			15			
Aug	PP	34 10		Can aP				15			
				aR 1261 10/8 CFC 5	3 57						
				aR 1476 25/8. v	3 57				131 73		
		34 10			7 14			15			
Sep	PP.	33		Can aP				15			
				aR. 1677 5/9 CF 65	3 57						
				aR 1850 17/9 CFC 5	3 57						
				CP 36814 23/9 L/N	3 40						
				aR 4570 18/9 CFC 5	9 33				11 19	C/a	
		33			138 54			15			

COMPILED BY ...
CHECKED BY ...

NUMBER 931360. RANK Cte NAME SMITHERS William

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Oct	Balance Forward								11 19		
	P.P.	34 10		C.A.P				15	30 29		
		34 10						15			
Nov.	P.P.	33 -		CAP.				15 -			
				2697. 11.11. 67C.5.	3 73						
				~~15 days F.P. No.1. 7.10.18. AWL. 6.30AM 29.9.18 till 6.30 AM. 2.10.18. 19 days Pay D.O.61. 2.11.18. Hosp. Stoppage. V.D. 8.10.18 till 22.10.18. 15 days D.O.63. 8.11.18.~~		~~30 90~~ S ~~9~~ S.					
				2915. 26.11. C.F.C.5.	13 06	~~13 16~~ S.					
				15 days F.P.1 7.10.18. AWL 6.30AM 29.9.197 till 6.30AM 2.10.18. 18 days Pay D.O.61 2/11/18.		19 80					
				Hosp. Stoppage. V 8.10.18 - 22.10.18 D.O.63. 8.11.18. 14 days,							
				concurrent with D.O.61. 2.11.18.		60					
Dec	PP	34 10		C A P				15	~~30 29~~ 30 29		
				6749. 10.12 CBD.	4 66						
				3589. 18.12 BRDG	9 73				15 81		
		67 10			31 18	20 40		30 -			
				155. 10.1. L.P.C. End. Rhyl.	4 87				10 94		
					4 87						

P.878. Extract D.O. No. 7 Unit:- 2 CC Date:-

Reg. No.	Rank	Name	Struck off Strength of O.M.F. of C. on transfer to C.E.F. Canada. MD6	
931360	PTE	SMITHERS. N. Canada Group	18 1 19	Acted on Ledger Ck.

Dated

From

of

Sender's Reference

R.L. No.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

S 211

Date of Assignment

apr/1st/17

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15-			

PARTICULARS OF SEPARATION ALLOWANCE

No. 931360

Rank Pte Promoted Reverted Discharge

Soldier's Name Tom Smithers

Battalion 2 Can Battn

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs Ida Smithers

Address Water Street

New Glasgow N.S.

Change of Address

1

2

3

4

Date 1914	Cheque No.		Amount S/A	Amount A/P	Total		REMARKS
Dec 31	—			135	135		16929-W-16 a.c.c. Y.P. 2216. called 27-3-18
Jan/18	73528	C		15	15		
Feb	62485	E		15	15		
Mar	~~92101~~ 75566	U		~~15~~ 15	~~15~~ 15		Z 92101 cancelled. T 93181 cancelled.
Apr.	~~93181~~ 7545	U		~~15~~ 15	~~15~~ 15		Mailed 27-3-18
May	15200	Y		15	15		
June	27137	W		15	15		
July	24850	C		15	15		
Aug.	36601	W		15	15		
Sept.	50302	W		15	15		
Oct	41692	D		15	15		
Nov	47869	F		15	15		
Dec	66242	Q		15	15		
Jany	71603	L		15	15		
				330	330		

A/c Closed 31-1-19

Ret'd per Agualema

Date 25-1-19 MD#6 31-1-19

Clerk Hopper

MRO 55-903 OK 31/1/19 RW

A/c Closed

Ret'd per

Date M.F.W. 18

Closed

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

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. 22520—M. & D. 7993.

Taken on Strength JAN 18 1919 S.O. 31

AUDITOR | PAYMASTER

M. OR S. Aquitania 25/1/19

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

REGT. No. 931360 RANK Pte. NAME (IN FULL) Smithers W. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? No. | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
1/10		L.P.C.

ORIGINAL UNIT C.E.F. 2 C. Bn. | IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ 15.00 | DATE EFFECTIVE FEB 1 - 1919

PAYABLE TO Mrs Ida Smithers | RELATIONSHIP

ADDRESS Wallis St. New Glasgow N.S.

ANY CHANGE IN ASSIGNEE OR ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE | DATE 15-2-19 | REASON Demob. | AUTHORITY D044 | IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	C.	$	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					Subs 10.031
Jan.					11	20			11	20																05						05				11	15	
1/1/19 15/2/19	46	1	10	50	60	35	-	11	15	96	75										134 85 / 52 22 / 150 47 / 70					05	43	93			96	75					Dr. L.P.C.
																																70		70			
																	War Service Gratuity																				Doc No 375
	153		350						350		March 18 1919				G145752		70										70				140				210		
																	70																		140		April 11/19 G152172.
																	70																		70		May 12/19 G582952
																	70																		Nil		June 17/19 G602071
			350						350								280										70				350						

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

Date ..... CAPT.

For Senior Officer Pay Services, M. D. 6

30M-11-18.—L.L. 50877-M. & D. 9553.

MONTH	PAY AND F.A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGI-MENTAL CHARGES		OTHER CHARGES				TOTAL DEBITS		BALANCE				PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT								COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3												DEBIT		CREDIT		
			$	C.	$	C.	$	C.	$	C.	NO.	DATE	NO.	DATE	NO.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	

War Service Badge
Class "A" #76979
issued.
AW.

This space to be for numbers

Proceedings on Discharge.

4-6-31

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

No. 931360

Rank Private

Surname Smithers

Christian Name William

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) No. 2. Construction Battalion

Date of Discharge February 15th 1919

Place of Discharge Halifax. N.S.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

		Descriptive Marks
Age	22 years 9 months.	Scar on inner side of Rt. leg, above Ankle.
Height	5' feet 9 inches.	
Complexion	Dark	
Eyes	Brown	
Hair	Black	
Trade	Labourer	
Intended place of residence (To be given as fully as practicable.)	New Glasgow N.S.	

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

Demobilization

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.

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

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.

100M.—1-17.
H. Q. 1772-39-113.

(OVER)

post noted
A. H.
18-3-19

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.

(Place) Halifax N.S. William Smith (*Signature of Soldier.*)

(Date) February 13th, 1919 C W Howle (*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) Halifax N.S.

(Date) 23 2 19

(*Signature*) D A McRae LIEUT, COL.

No. 6 DISTRICT DEPOT.

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.)

Nil.

William Smithers.

(OVER)

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	Attestation Paper,	Militia Form B. 235.
Squadron / Battery / Company } Conduct Sheet,	" B. 263a.	Proceedings on Discharge	" B. 218.
Copies of Convictions, by C. P.	in MS.		
Med. Hist. Sheet,	Militia Form B. 313		
Medical Report for Invalid*	" B. 227.		
Statement of Man's Account on Transfer and Last Pay Certificate,	" D. 877.		

*Only if discharged "Medically unfit."

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet (in the event of such having been prepared.)

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.

2512

Army Form B. 103. Regimental Number 931 [illegible]

Casualty Form—Active Service.

Regiment or Corps No 2 Ledr. Coy. Cay

Rank Pte Surname Smithers Christian Name William

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

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

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

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

C

Occupation ..... Signature of Officer

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported in Army Form B.213, Army Form A. 36 or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked ...			
		Disembarked			
8.10.18	Jas Hosp.	V.D. Admitted.	Suez	8-10-18	W 9412
12.10.18	ce mr	V.D. To Hospital	Suez	8.10.18	B213
22.10.18	Jas Hosp	V.D. Discharged	"	22/10/18	W 9412
26/10/18	ce mr	Reporting from Hospital	Suez	22-10-18	B213
10.10.18	ce mr	15 days FP No 1. 7-10-18 for mr & from 6.30 am 29.9.18 until 6.30 am 2-10-18. (overstaying ah Leave) Forfeit 4 days pay & Rat			Corby 6 Oct 1918
26/10/18	ce mr	Forfeit 2nd allowance &c placed under stoppage of pay at 50 f per diem while in hospital from 8-10-18 to 22-10-18 (15 days)			B213 Form 639 November 1918

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) Signaller, Shoeing-Smith, &c.

W. 8695—M2733. 2000m. 9/17. (35611). C. P. & S., Ltd., Form B./103. E/1607.

P.T.O.

C 2512

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
26-11-18	Jnea Hosp	V.D.G. admitted		26-11-18.	W 3394.
30-11-18	do	V.D.G. "	Hosp	26-11-18	B 213
4-12-18.	C.F.C. Hosp.	V.D.G. Discharged	Hosp.	4-12-18	B 2397
11-12-18	AAG	Trans to Eng & posted to N.S. Regt. Depot	Bramshott	14-12-18	KR 344
		C.A. Hewett Lieut. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.			
17-12-18.	A.S.R.D.	TOS attached to 2nd CCD for Quarters & Rations.	Bramshott	14-12-18.	D.O. 305.
	NSRD	ON COMMAND TO CDD Kimmel Pk Rhyl	BRAMSHOTT		PART II D.O. NSRD 313 27/12/18
18/1/19		SOB OM IC for transfer to Discharge Canada. Sailing No. 7	Kimmel Park.		C.A. Knight LIEUT, OFFICER i/c RECORDS, NOVA SCOTIA REGTL. DEPOT.
		W M Hammond Lieut			

H. M. T. 'AQUITANIA'
EMBKD. LVP'L. JAN. 18. 1919
DEBKD. HALIFAX. N.S.
JAN, 24. 1919

CANADIAN CONTINGENT EXPEDITIONARY FORCE

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. 931360 Rank Pte Name Smithers, W

Corps 2 Contn who was* Discharged

On 15-2-19 191...., to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-1-19 191....,

to 15-2-19 191...., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month 1346	43	93	Balance Cr. from prev. month	11	15
Advances by Cheques No. 13485	52	77	Regt'l. Pay 46 days at $ 1 c.	46	
No.			Field Allow. days at $ c.	4	60
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges 15049		05	Other Allowances* Ltd	35	
Payment on transfer or discharge No.	70		Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)	70	
Total	166	75	Total	166	75

*Give particulars.

A monthly stoppage of $ 15.00 (†) has (‡) been paid on account of Assigned

Pay for the month of Jan 191.. and Sep'n Allce. for month of 191... (to) Assignee Mrs Ida Smithers

(Address) Walker St. New Glasgow, N.S.

(†) 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.

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

REMARKS:—

State (1) date of enlistment

(2) if married and if a Separation Allowance Card has been submitted No

(3) cause of discharge ..... authority 9044

(4) authority for transfer

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 19-2-19

Place Halifax

CAPT

Paymaster No. 6 District Depot

Paymaster.

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.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

(This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 2nd Ed., C.E.F., 1916).

Regimental No. ..... Rank ..... Name .....

Corps ..... Unit ..... Who was .....

On ..... 191 ..... to .....

*Insert "discharged" or "transferred."

The following is a statement of the accounts of the above named from ..... A.D. 191 ..... to ..... 191 ..... the medical date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Pay Dr. from pay month			Balance Cr. from pay month		
Advances of Pay			Pay Cr. ..... days at $		
Stoppages			Paid Allow. ..... days at $		
Assigned Pay and Sep. Allow.			Separation Allowance* (Monthly)		
Other charges			Other Allowances*		
Transport on transfer or discharge			Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be debited by new unit)		
Total			Total		

*Give particulars.

Monthly summary of ..... (1) Was ..... (2) been paid on account of Assigned Pay for the month of ..... 191 ..... (3) Separation and Sep. Allow. for month of ..... 191 ..... (4) Assigned

(Address) .....

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

On a Transfer of an Officer.

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

REMARKS:—

State (1) date and stamp .....

(2) if married, state if Separation Allowance Card has been submitted .....

(3) Source of discharge .....

(4) authority for a transfer .....

NOTE.—Separation Allowance and Assigned Pay Card and Index Card (M.W.T.) 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 .....

Place .....

(Sd.) .....
Paymaster.

N.B.—For purposes of transmission this form will be made out in duplicate. Original copy to Paymaster of new unit; duplicate to District Paymaster, triplicate to accompany the pay book, the end of the month, and quadruplicate for reception in a record.

For purposes of discharge it is to be made out in triplicate. Original copy, to accompany discharged soldier; 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 duplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster, Post Discharge Pay, and triplicate will be discharge documents.

H. F. W. 11.

H.Q. 1172—[illegible]
[illegible] 27, 1917—2M.