#10 M. D. 1st Depot Battalion Manitoba Regiment

Regtl. No. 2379876

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class ONE)

ORIGINAL

1. Surname: SUTHERLAND
2. Christian name: Alexander
3. Present address: ~~44~~ Bank of Hamilton, Winnipeg Canada
4. Military Service Act letter and number: 550248 JC 389
5. Date of birth: 31 July 1883
6. Place of birth (town, township or county and country): peterhead, Scotland
7. Married, widower or single: Single
8. Religion: Presbyterian
9. Trade or calling: teller, Bank.
10. Name of next-of-kin: Hugh Sutherland
11. Relationship of next-of-kin: Father
12. Address of next-of-kin: 34 St Mary Street, peterhead, SCOTLAND
13. Whether at present a member of the Active Militia: No
14. Particulars of previous military or naval service, if any: 5 years Royal Garrison Artillery Volunteers, Scotland.
15. Medical Examination under Military Service Act:—

(a) Place: St Boniface ~~Manitoba Canada~~ (b) Date: 27 September 1917 Category: A2

DECLARATION OF RECRUIT

I, Alexander Sutherland, do solemnly declare that the above particulars refer to me, and are true.

Alexander Sutherland (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age	34 yrs.	5 mths.	
Height	5 ft.	6 ins.	
Chest measurement	fully expanded	36 ins.	
	range of expansion	2 ins.	
Complexion	Fair		
Eyes	Grey-Blue		
Hair	Black		

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

Nil

D. E. Brillin Major for
Commanding, 1st Depot Battalion Manitoba Regiment

O. C. 1st Depot Btln. Manitoba Regt.

Place: Winnipeg Canada Date: JAN 11 1918

M. F. W. 133.
500 M.—8-17.
1772—39—1158.

Sutherland Alexander 1st D. Bn. Man. Regt.

O. H. M. S.

M

No 23 1876

Demobilization

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- RIVER CONDUCT SHEET (M.F.B. 263 OR A.F.B. 121)
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- TRANSFER CLOTHING STATEMENT (M. F. W. [illegible])
- PROCEEDINGS, COURT OF INQUIRY (M. F. B. [illegible])
- DECLARATION, COURT OF INQUIRY (M. F. B. 259 OR A. F. B. [illegible])
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- PROCEEDINGS ON DISCHARGE (M. F. W. 218 OR A. F. B. 268)
- PARTICULARS OF CHARACTER (A. F. W. 3226)
- COPY OF PARCHMENT DISCHARGE CERTIFICATE (M. F. W. 39A)
- DENTAL CERTIFICATE ON DISCHARGE (C. A. D. C. 5009)
- UNIT INDEX CARD (M. F. W. 71 OR 192)

Nil
Original

49548

H

27/3/19
[illegible]

M. F. B. 270.
850M-5-18
H. Q. 1772-39-67

Number 2379876 Rank Pte

Surname SUTHERLAND

Christian Name Alexander

Units M.R. Theatre of War England

Date of Service 28-6-18

Remarks

Latest Address 147 Markland ave.
Hamilton

Roll No. A Page 2235

200m.-2-21.M.

*Name L SUTHERLAND, Alexander Rank Pte. Regtl. No. 2379876

Original unit Present unit M.R.D. M. or S. Age 35 Religion Pres. Fyle Depot Ref. H.Q.

Port, ship, and date of arrival Scotian St. John 15-1-19

Next of kin Father, Hugh Sutherland, 34 St. Mary St. Peterhead, Scotland.,

Address on leave 147 Markland St. Hamilton, Ont

Address on discharge same

Transportation issued Yes No Date 4-2-19 Character on discharge

Hamilton, Ont.

Previous occupation Bank Teller Date and place of enlistment Winnipeg 11-1-1 .,

Diagnosis Demobilization D Date of Medical Boards 31-1-19

Date.	Remarks	Pt. 2 Order No.
T.O.S. 3-1-19	Posted to Cas Co (Ex Camp) 15-1-19	
	~~Leave & Subs from 16-1-19 to 30-1-19~~	20
4-2-19	DOS. Disch."DEMOBILIZATION"(91 days PDP. & C.A.	32

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

(over)

Date.	Remarks.	Pt. 2 Order No.

M.F.W. 192
150M—6-18.
1772-39-1243.

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

M. F. W. 54. (A. F. B. 103.)
350M.—5-16
H. Q. 1772-39-920.

ORIGINAL

Casualty Form—Active Service.

Unit, Regiment or Corps 1st. DEPOT BATTALION, MANITOBA REGIMENT.

Regimental No. 2379876 Rank Private Name SUTHERLAND, Hugh Alexander

Enlisted (a) JAN 11 1918 Terms of Service (a) C. E. F. CEF Service reckons from (a) JAN 11 1918

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) CIVIL. Bank teller MILITARY

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		EMBARKED	Halifax	16.6.18	
		DISEMBARKED	Liverpool	28.6.18.	
4.7.18	O.C. 18th Res. Battn	Having arrived from CANADA are Taken on Strength	SEAFORD	28.6.18	Part 11. D.O. 185.
1.11.18	O/C 18th Res Battn	S.o.S. to M.R.D (B.1) aus. from M.R.D	SEAFORD	1.11.18	Part 11 D.O. 205
28.11.18	18th Res: Bn	Ceases to be AWS.	Seaford	28.11.18	~~Capt. & Adjt 18th Can. Res. Battn~~ Part II D.O. 332 E. J. Thomas Capt. Adjutant, 18th Res. Bn.
30/11/18 3-12-18	MRD —	Cease Com 18th Res Bn Det Depot Co ~~Command Part of Embarkation~~	Seaford —	28/11/18 ~~30-11-18~~	Part II 334 ~~332~~ Lieut. Manitoba Regimental Dep

(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				
10/12/18	[illegible]	On leave 1st C.D.D. Buxton	Seaford	7/12/18	Pt II 344 [illegible] Lieut. Manitoba Regimental Depot.
9.12.18		Attached C.D.D. Buxton for return to Canada, Part II Order No. 291 Ceases to be attached C.D.D. Buxton on embarking for Canada. [illegible] Capt. for Lt. Col. Commanding Canadian Discharge Depot.			
8 JAN 1919	Sailing: 104	"SCOTIAN"		14 JAN 1919	
JAN 3 1919	O.S.	T. O. S. No. 2 DISTRICT DEPOT, TORONTO		1919	PART II D. O. 20 [illegible] Lieut. For O. C. No. 2 District Dep.
4-2-19	O.S.	(Discharged) No. 2 District Depot Part II, D.O. No. 32 [illegible] Capt. O. C. Discharge Sections, No. 2 District Depot			

Form R 122.
10287—65M—28-7-17.

CR. Rank Name SUTHERLAND, Alexander. Reg'l No. 2379876.

Unit 3rd Dft 1st En MAN If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Winnipeg, Jan.11th. 1918. Place of Birth Peterhead, Scotland.

Name and Address, Next-of-Kin Hugh Sutherland,

34 St.Mary St., Peterhesd, Scotland. Relationship Father.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

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		28-6-18	S/S PANNONIA
4.7.18	18th Res	T.O.S. from Canada to Fwd Pte		28.6.18	P.1.0.185
1-11-18	"	S.O.S. to MRD with 18 Res.	"	1-11-18	D.O.305 & MRD 5th 309 d 5/11/18
5.12.18	M.R.D.	Leaves on com 18th Res		28.11.18	---339 18th Res 1st D.O.332 d/28.11.18
10.12.18	---	On com 1st CDD Buxton		7.12.18	---344
22.1.19	---	S.O.S. to CEF Canada & 1 CDD.	✓	3.1.19	---22.

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.					

To be made out in duplicate. H.Q. 54-21-23-53

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

---

(1) Name of Overseas Unit which Soldier joins 1st. DEPOT BATTALION, MANITOBA REGIMENT.

(2) Regimental Number 2379876

(3) Full Name of Soldier Alexander Sutherland

(4) Place of Birt peterhead SCOTLAND

(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? No

(8) Have you any children? --

If so, give number of boys and girls --

Also their names and ages --

M. F. W. 67.

500M.—9 16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? yes HUGH SUTHERLAND

If so, state name and address 34 St Mary street, Peterhead Scotland

(10) Is your Mother alive? Yes

If so, state name and address Isabella sutherland

do.

(11) If your Mother is a widow No

Are you her sole support, or not? --

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

--

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

As above

(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.

--

(15) Are you insured? Yes

If so, in what Company? Mutual Life of new York

Have you made arrangements for payment of your Insurance premium No

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

D. G. Boulton Major for
Commanding, 1st Depot Battalion Manitoba Regiment

Officer Commanding.

Date JAN 11 1918

404

FORM OF WILL.

I, Alexander Sutherland (Name in full)

Regimental Number 879876 serving in 1st Depot Battalion Man. Regt.

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

I bequeath all my real estate unto

Mrs Isabella Sutherland
#34 St. Mary Street
Peterhead. Scotland.

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

absolutely, and my personal estate I bequeath to

as above.

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

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

this tenth day of February A. D. 1918

Alexander Sutherland Signature of Soldier.

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

Personal estate includes everything except real estate.

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

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness C A Ryan
Address of Witness Winnipeg Sta Bks Wpeg
Occupation of Witness Soldier
Signature of Second Witness Geo Munton
Address of Witness Winnipeg Sta Bks Wpeg Canada
Occupation of Witness Soldier

C. F. W. 82
60M-5-16.
1772-39-983.

M.F.B. 465
200M-1-17
1772-39 950

DENTAL HISTORY SHEET

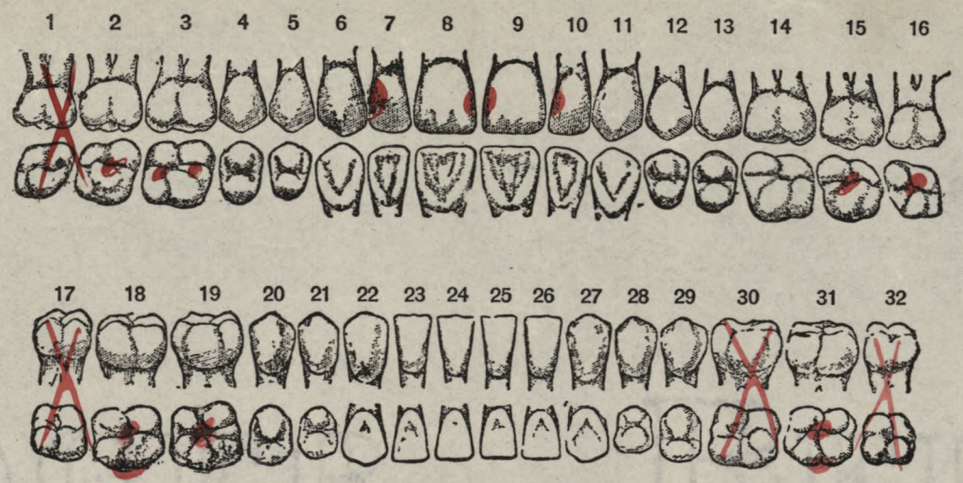
CANADIAN ARMY DENTAL CORPS

DISTRICT #10

D Coy

NAME OF SOLDIER Sutherland A.

REGIMENT 1st. DEPOT BATTALION, MANITOBA REGIMENT. RANK Private No. 237987 6



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.

	Date	Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	Dentures U	Dentures L	Dentures P	Gold Clasp	Gold Filling	Crowns Gold	Crowns Porcelain	Bridge Work	OPERATOR	Military Dist.	REMARKS
Condition on first Examination	1918.	10 2.3.15.16. 18.19.31.									4 1.14 30.32.					4 7.8.9.10.						
Jan	15.																			B. S. Bailey	10.	

Ste 503 Broadalbane Bldg Regina

ORIGINAL. (77)

MEDICAL HISTORY SHEET

Surname Sutherland (Bradland) Christian Name Alexander

Examined on 27 day of Sept 1917 at St Boniface

Birthplace City or Town ..... County Scotland

Apparent age 34 yrs. 2 Months

Trade or occupation Bank Clerk

Height 5 feet 6 Inches

Weight 138 lbs.

Chest measurement Minimum 34 inches; Maximum expansion 36 inches

Physical development

Small-pox Marks

Vaccination Marks Arm Right Left 3; Number

When Vaccinated last Child

(a) Marks indicating congential peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Approved by 550248

Rank 389 M.O.

Date	Fit or Unfit	Examined for Re-Engagement	
			M.O.
	R. 20/30	L. 20/30	M.O.
			M.O.
			M.O.
	Hearing Normal		M.O.
			M.O.

Date	Result	Vaccinations	
2-2-18			M.O.
1-3/18		Motorpox copy	M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
19-1-18			M.O.
26-1-18			M.O.
28-2-18		20/9/15 2. Strasbourg Gas.	M.O.

Enlisted on 11th day of January 1918 191 at Winnipeg Canada

	Corps	Regt'l Number	Habits	Date
Joined on enlistment		2379876		11 Jan 1918
Transferred to 1st. DEPOT BATTALION, MANITOBA REGIMENT.				
Transferred to 18th Can Reserve Battalion,				JUN 28 1918

Signature of Medical Board

President

Members

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
The copy of this document which is delivered to the man examined will be attached by him to the report for service or claim for exemption made by him or on his behalf after the proclamation under the Military Service Act calling out Class 1 has been issued.			Category of man examined. A. 2.
Seaford	28-10-18	Flat feet	
do	21-11-18	do.	

Ckd. to Schedule by

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.

Signature of man examined (Both copies to be signed).

31/1/19 Pamphlet arches

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

Surname Sutherland Christian Name Alexander

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				

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

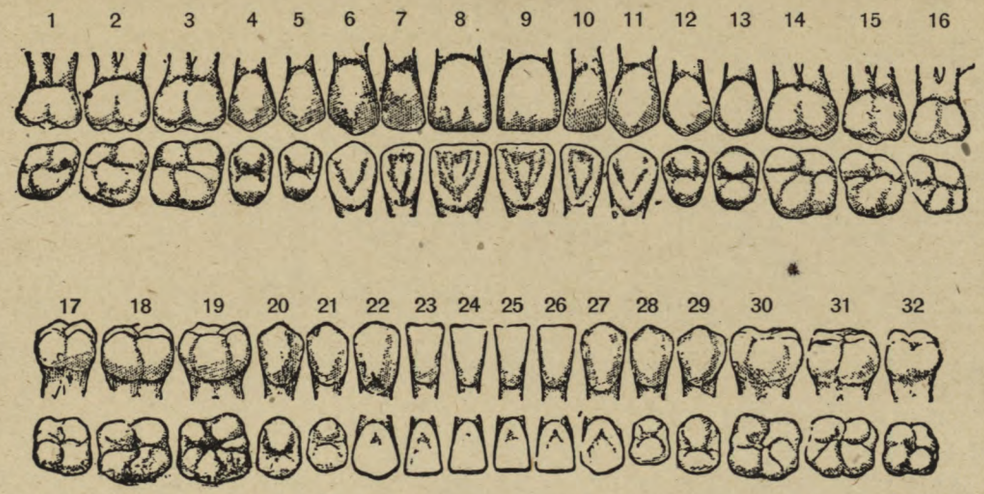
District 21

Name of Soldier Gillespie, Alexander

Rank Pte.

Regiment

No. 23 799 76



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.

	Date		Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination																							
DISCHARGE EXAM. CASUALTY Co. #2 D.D. JAN 31 1919																							
										Filling											DM Canning Capt.		

M.F.P. 465.
200M 18.
1772-[illegible]0.

M. D. 2

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

No. 56

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

Regimental No. 2379876 Rank Pte. Name Rutherford. Alex.

No. 2 District Depot. DISCHARGED

Corps _____ who was* _____

On 4-2-19 191____, to _____

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-2-19 191____ to 4-2-19 191____, the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month	19	54	Balance Cr. from prev. month		
Advances by Cheques No.			Regt'l Pay 4 days at $ 1.00	4	
Advances by Cheques No.			Field Allow. 4 days at $ .10		40
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges			Other Allowances* clothing	35	00
Payment on transfer or discharge No. 89461	89	86	Other Credits* W.S.S.	70	
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	109	40	Total	109	40

*Give particulars.

A monthly stoppage of $ 15.00 (†) has _____ (‡) been paid on account of Assigned Pay for the month of Jan 1919 and Sep'n Allce. for month of _____ 191____ (to) Assignee Bank of Hamilton a/c Winnipeg

(Address) _____ man.

(†) 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 D.O. 32

(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 3-2-19

Place TORONTO.

Paymaster.

CAPT. PAYMASTER, No. 2 DISTRICT DEPOT

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

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

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

M. F. W. 44.
H.Q. 1772-39-903.
20M-11-18. D.P. 874.

D.M.S. 1364-20M.
3958-19-10-17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Seaford Oct. 28th 1918.

No 2379876 Rank Pte. Name SUTHERLAND, ALEXANDER

Local Unit 18th Can Res. Batt. ~~Overseas~~ original Unit 1st Depot Batt. Mun. Reg. Age 35

Examination held at S.M.B. Seaford

DISABILITY.
~~Overseas~~-Local

FLAT FEET

- SCRATCH ONE OUT. -

PRESENT CONDITION.

Not been to France
Complains - Pain - feet aggravated by walking.
Exam - Feet moderately flat - some tenderness upon pressure - movements all good - able to stand on toes.
Other Systems normal.

BOARD RECOMMENDS:-

1. Fit for Duty B1
2. Fit for Duty after ..... weeks' physical training.
3. Fit for Temporary Base Duty ..... weeks.
4. Fit for Permanent Base Duty .....
5. Discharge .....

Signatures:-

President: J.W. Macneil Capt

Members: J. McMichael, Capt.

APPROVED. 28 OCT 1918
Seaford, Sussex.

Dated ..... 191 . APPROVED! [signature] For A.D.M.S.
Captain, C.A.M.C.
for A.D.M.S., Canadians.

Confirmed. 14.11.18 RCH

C,

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. 2379876 Rank Pte. Surname SUTHERLAND
(Given name in full) Alexander

Unit or Corps H. L. D. Birthplace Petrolea Ont.

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

1. GENERAL DESCRIPTION:

Physique good Weight 136 lbs. Height 5 ft. 6 in. Colour of Eyes Grey

Nutrition good

Pulse 68

Condition of arteries good

Vision Rt 30 Left 30

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

Identification marks, scars, or deformities. (Give cause and date of origin.)
3 vacc on left.

APPROVED
JAN 31 1919
Capt. A. D. M. S. M. D. 9

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 yes 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.

no albumin no sugar
no hernia, varicose veins, varicocele or piles
very small hemorrhoid, prior to enlistment and not aggravated by service.
Feet have pained in marching due to not being able to get boots to fit. The arches are high and the foot from ankle joint to toes exceptionally long. Had to wear special boots from childhood. no aggravation due to service

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

[OVER]

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 Exhibition Toronto (Canada)

Date Jany 31/19 Signed D Sweeney 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 A Sutherland

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

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

[OVER]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-39-1142.

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

CANADIAN ARMY DENTAL CORPS.

DENTAL CERTIFICATE.

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

REGTL. No. 2379876 * NAME SUTHERLAND A. RANK PTE UNIT 18th Res

Date of Examination	22/11/18
Present Dental Condition	GOOD
In case of loss, or decay of teeth, is the loss due to wounds, injury, or disease, directly attributable to Active Service?	
Has he ever declined Dental Treatment?	NO
Recommendation	NIL

Date 22/11/18

Station Seaford

Signature of Examining Officer B B Beaton Capt. C.A.D.C.

* Name should be entered in block letters.

C.A.D.C.5000. 3M-1-18.

CANADIAN ARMY DENTAL CORPS.

DENTAL CERTIFICATE

NOTE - This form will be attached to the Medical History Sheet of each Other Rank when the case is ready for disposal.

REGTL. No. _____ * NAME _____ RANK _____ UNIT _____

Date of Examination	
Present Dental Condition	GOOD
In case of loss or decay of teeth, is the loss due to wounds in War or disease, directly attributable to Active Service?	
Has he ever declined Dental Treatment?	NO
Recommendation	NIL

Date _____

Station _____

Signature of Examining Officer _____

* Name should be printed in Block Letters.

C.A.D.C.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 2379876 (Rank) Pte.

Name (in full) SUTHERLAND ALEXANDER. enlisted in

the 1st Depot Batt. Manitoba Regt.

CANADIAN EXPEDITIONARY FORCE at St Boniface Man. on the 11th.

day of January 19 18

HE served in ----England----

and is now discharged from the service by reason of

Demobilization

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

Age	35	Marks or Scars	Vacc. Scar Left Arm.
Height	5' 6"		
Complexion	Fair		
Eyes	Grey-Blue		
Hair	Black		

A Sutherland
Signature of Soldier

Bruce Thompson Lieut
For
Issuing Officer
O.C. No. 2 District Depot.
Rank

Date of Discharge Feby 4. 1919

Appointment

Signed at Toronto. Ont 2 this 4th day of February 19 19

in Military District No. 2

FEB 4 1919
DISTRICT DEPOT

File Reference No.

E.S

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.
250m.—6-18.
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 is not to be worn after expiration of one month from date of discharge, except by special permission of G. O. C. district.

2

C.A.D.C. 5009 A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

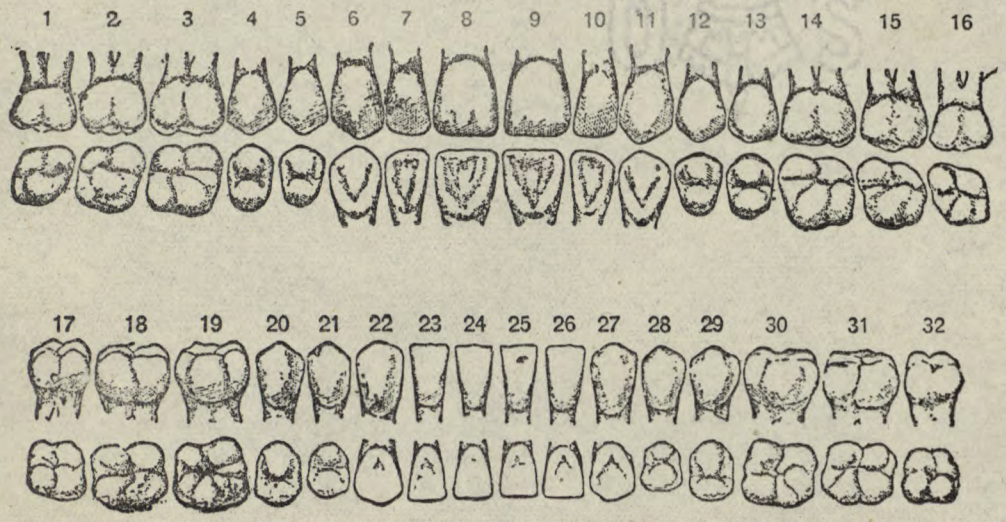
DIRECTIONS TO DENTAL OFFICERS

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) Sautherland.

REGIMENT M. R. D. RANK Pte. No. 237987 6

Date of Examination in England 9/12/18 Date of Examination in France



PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS nil
3. CROWNS
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower nil
   - (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 nil
- (c) In France

Signature of Dental Officer H Cowan Capt.

SPECIAL EYE REPORT.

SEAFORD 31/8/18

Number 2579876 R. 6/18 With Glasses 6/6 +.75

Rank Pte.

Name Sutherland L. 6/18 With Glasses. 6/6 +.75

Unit 18th. Res Bn.

Complaint:-

This condition was ..... present before enlistment and

has Not been caused by Service.

Glasses have ~~not~~ been ordered.

As far as Eyes are concerned fit for Category:- A

Remarks:-

Frank F. D. Co.

L. J. Sebert
Capt. CAMC.

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

641

ASSIGNED PAY. * ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE. Nil * ENGLAND OR CANADA.
EFFECTIVE DATE:– 1/5/18	EFFECTIVE DATE:–
AMOUNT:– 1500	AMOUNT:–

NAME:– SUTHERLAND, Alexander

NUMBER:– 2279876

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.

Ye Alex. Sutherland
Bank of Hamilton
Winnipeg, Man
Stopped effec. 1.12.18

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
130 185	28-6-18	Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:– 3rd Bn 1st Bn R

DATE ACCOUNT FIRST OPENED:– 1-5-18

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			18th Res

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
12.11.18	2236	Seaford 6.12.18	~~243~~				
25.11.18	2495	"	243				
26.11.18	2512	"	487				

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE Dis. to Can. 30/11/18 Ledger Balce $ 13 65 L.P.C Balce 3 72

MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
30-4-18	Bal from Canada								10 30		
July	9 Day 1/5/18–31/7/18 = 92 days	101 20		L.C.A.D. May June & July				45			
				AR 5 No 3 Off 1 Day Pmt & Reg	20						
				" 885 9/7/18 18 Res	730						
				1033 22/7/18 " "	4380				4 60		28-8-18
		101 20			71 10			45			
Aug	PP	34 10		L.C.A.D				15			
				AR 1271 13/8/18 18 Res	973						
				" 1435 24/8/18 " "	973				4 96		
					19 46			15			
		34 10			19 46			15			
Sept	PP	33		L.C.A.D				15			
				AR 1555 11/9/18 18 Res	973						
				" 1707 26/9/18 " "	730				3 99	A/c agreed	16th Res.
		33			17 03			15			
Oct		34 10						15			
				AR. 1940 18 Res 15.10.18	973						
				" 2015 " 29.10.18	973				4 35		
		34 10			19 46			15			
Nov.		33						15	13 65		
Dec	"	~~34 10~~		AR. 2236 18 Res 12.11.18	243						
				" 2495 " 25.11.18	243						
	Amt charged twice C. L.P.C. 3 Off										
	1/M.R.D. (2) Chatham C/R. July		20	" 2512 26.11.18	487						
				" 2915 11 Res 4.12.18	973						
				(Ent. on L.P.C.)							
				" 5990 E.D.D. Buxton 20.12.18	973				19 87		
				(Ent. on L.P.C.)							
				" 818 " " 13/12/18	24 33				~~15 52~~		
		33	20		53 52			15			

L.P.C. Sec adverse 20.00 Br. 1/19

CANADIAN
ASSIGNED PAY AUDITED
O.K.
W. McCloskey
AUDIT CLERK
DATE 6-6-19

NUMBER 2379876 RANK Pte. NAME Sutherland A.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1919	Balce forward								1987	NIL	
Feb.											
	S.O.S. Canada	3.1.19		SO. 22 MAD. 22.1.19							

14-3-900

This space to be for numbers.

M

Proceedings on Discharge.

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

No. 2379876

Rank Pte.

Name SUTHERLAND ALEXANDER

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

Corps (Squadron, Battery or Company) 1st Depot Batt. Manitoba Regt.

Date of Discharge Feby 4, 1919

Place of Discharge TORONTO, ONT.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 35 years months.

Height 5 feet 6 inches.

Complexion Fair

Eyes Grey-Blue

Hair Black

Trade Bank Teller

Intended place of residence (To be given as fully as practicable.) 147 Markland St., Hamilton Ont

Descriptive Marks

Vacc Scar Left Arm.

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

ON GENERAL DEMOBILIZATION

D. O. D·D. 2 Pt 11 No 32

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 soldier and the Officer Commanding his Squadron, Battery or Company:

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

E.S

M. F. B. 218.

160m.—6-16.
H. Q. 1772-39-113

(OVER)

Note 14-3-19

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) Toronto. Ont. Alexander McKella (*Signature of Soldier.*)

(Date) Feby 4. 1919 W H Joyce (*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) Toronto. Ont.

(Date) Feby 4. 1919

(*Signature*) Bruce Thompson Capt

FOR

O. C. No. 2 [illegible]

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.)

(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.	In the case of recruits who are rejected on final approval, the discharge documents will consist of
Med. Hist. Sheet, Militia Form B. 313	(a) Proceedings on Discharge.
Medical Report for Invalid* " B. 227.	(b) Attestation.
Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.	(c) Medical History Sheet (in the event of such having been prepared.)
*Only if discharged "Medically unfit."	

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.

Reserved for M.H.C.

Regt. No. 239876 Rank PTE. Surname SUTHERLAND Christian Name ALEXANDER

Unit or Corps—(a) Overseas from United Kingdom ..... (b) in United Kingdom M.R.D. 18TH

Born at—Town PETERHEAD County or Province ..... Country SCOTLAND

Date of Birth—Day 31ST Month JULY Year 1883 Age 35 yrs. 4 months.

Joined at WINNIPEG Date 11.1.18

Former trade or occupation BANK CLERK

Permanent Marks or any peculiarity that will serve for future identification :—
Scar centre of lower lip and outside of upper eyebrow

Height—feet 5 inches 6 Colour of eyes BLUE

Signature of Soldier (*for identification purposes*) A Sutherland

Medical Report

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

1. DISABILITY.

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

Disabilities Group (*a*) FLAT FEET.

Disabilities Group (*b*)

Disabilities Group (*c*)

2. CAUSE OF DISABILITY

		Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	UNKNOWN.	CANADA	Prior to Enlistment.
(*ii.*) As to Group (*b*) above.			
(*iii.*) As to Group (*c*) above.			

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

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

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

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

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

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

(*ii.*) As to Group (*b*) above ? —

(*iii.*) As to Group (*c*) above ? —

PART I. (continued).

5. MEDICAL HISTORY. Enlisted Winnipeg Jan 9/18.
Came to England June 28/18.
Never been in France
Certificate regular Oct 28/18
Had two weeks off previous to this on account of feet

6. PRESENT CONDITION. Complains, pain in feet aggravated by walking.
Even flat moderately
some tenderness on pressure
movements all good
able to stand on toes.

other systems normal.

7. OPERATION. (i.) Was one performed? — (ii.) If so, state what. —

(iii.) Was one advised and declined? —

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

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

(ii.) If so, describe. —

9. DO YOU RECOMMEND:—

(a) Fit for duty? (state category) yes B1

(b) Invalid to Canada? No

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

Date of Report Nov 21 191 8

Signed [illegible]
Officer in medical charge of case.

Station Lancashire

I have satisfied myself of the general accuracy of the above Report,

and concur therein *except

NOT IN HOSPITAL

(Officer i/c Hospital / S.M.O., Brigade) Strike out one of these

Dated at ..... Station, on ..... 191.....

*Delete if inapplicable.

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

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

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

12. From the medical information now adduced, was the disability caused or aggravated by:— (a) Negligence of the Soldier { Caused? no / Aggravated? no } (b) Misconduct of the Soldier { Caused? no / Aggravated? no.

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

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

15. Permanency of the Disability due to Service estimated next above in (14).
(*i.*) Is it permanent? not appl.
(*ii.*) If not permanent, what is its probable minimum duration (*in months*)?

16. If an operation was advised and declined, do you consider the refusal to have been unreasonable? not appl.

17. Can the former trade or occupation be resumed? Yes.

18. REMARKS:— Accidentally A. G. telegraphed 9083 11/11/18.

19. RECOMMENDATION:— (a) Fit for duty? (state category) Yes B1 (b) Invalid to Canada? no (c) Discharge from Service as permanently unfit? no

Date of Board 21-11-18

Signatures of the Board { [illegible], President. / [illegible] Capt }

Station Seaford

Approved [illegible] Major General, A.D.M.S.

Dated at Seaford Station 27-11 191 8

Statement of the Soldier

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

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

.....

Signature of Soldier examined.

Instructions to Medical Officers

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

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

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

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

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

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

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

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

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

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

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

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

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

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

ENTRIES OF RECATEGORIZATION

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

To

M.O. 18th Reserve

Seaford 25/10/18

#2379876 Pte Sutherland A

is apparently unable to carry on duties with the rest of the Coy.

Would you recommend light duty until you are able to board him?

J. Grants Lt

O.C. 6 Coy

Flat Feet

No. 2 DISTRICT DEPOT

"SCOTIAN" 15.1.19.

EXHIBITION

S.1284.

AUDITOR | PAYMASTER

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

M. OR S. S. | REGT. No. 2379876 | RANK Pte | NAME (IN FULL) SUTHERLAND, Alex. (BLOCK LETTERS, SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS 147 Markland st Hamilton Ont

IS SEPARATION ALLOWANCE PAID? Nil | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Fred apr 2-19		
F M 12-2-19		
F M Mar 27-19		

ORIGINAL UNIT C.E.F. 18 Res. | IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION Sept 27-17 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY, $ $15.00 | DATE EFFECTIVE 1.2.19.

PAYABLE TO Bank of Hamilton (Account) A. Sutherland | RELATIONSHIP

ADDRESS Winnipeg, Man.

ANY CHANGE IN ASSIGNEE OR ADDRESS: Bank of Hamilton Hamilton Ont Apr. 2-19

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE Toronto | DATE 4/2/19. | REASON Demob | AUTHORITY DO32 | IF ENTITLED TO POST DISCHARGE PAY 4 SS.

MONTH	PAY AND F.A. NO. OF DAYS	RATE	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 30.11.18.		$1.10					3	92																													
									3	92	2915	4/18					9	73																			
											818	12/18					24	33																			
											5990	30/12/18					9	73																			
												6/1/19					4	87																			
												13/1/19					5	00					30	00													
											334	13/1/19					20	00																			
																															103	66	99	74			
1.12.18.	31	1.10	34	10	12.																						99	74									
Jan	31		34	10					80	20																					99	74	19	54			
Feby	4	1.10	4	40	35.	70			109	40	9461						89	86									19	54			109	40					
4 mos.					280	00			280	00							Feb 4										70	00									
																	Mar 4-217915						70	00							140.	00					
																	Apr 4-271590						70	00							210.	00					
																	May 3-279430						70	00							280	00					
			20	-	20	-																											20				
																	257 Mar 10 1746566						20	00							20	00					
			300	-	300	-																	230	00			70	00			300	00					

R. Dec. 1917 Jan. 1919. E.M.B. E.J.A.

T.O.S. 3/1/18 D.O. 20/

SUBS. 16/1 TO 30/1 D.O. 20.

W. S. G. PAID IN FULL

LIEUT.

FOR PAYMASTER WAR SERVICE GRATUITY

Cr. 20.00 chord wire
Dr. L.P.C. Staff 1/M.R.D.
Challan A.R. Jury.
Ayce Subs

60m.-11-18 L. L. 51777. M. & D. 9585.

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.	

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENT

13745

Date of Assignment 1-2-18

RATE OF SEPARATION ALLOWANCE

AUTHORITY FOR NEW ACC. M.R. S

RATE OF ASSIGNMENT

15.00			

PARTICULARS OF SEPARATION ALLOWANCE

No. 237-9876

Rank Pte Promoted Reverted Discharge

Soldier's Name Sutherland · Alex ·

Battalion 1st Depot · Batt · Man Regt ·

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Bank of Hamilton · a/c · Alex Sutherland

Address Winnipeg · Man

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
Feb 1918	C 78351		15	15	R	017661-9-43
Mar	M 79932		15	15	R	A/c Closed
April	V 7300		15	15	✓	Ret'd per Scotian
May	X 23556		15	15	✓	Date 15/1/19 M.F.W.187 MP2
June	Y 24189		15	15	✓	Closed 31-1-19
July	A 23364		15	15	✓	MRO LO 51813 rend 18/1/19
August	Z 54489		15	15	✓	OK 18/1/19 F.L.
Sept	F 40250		15	15	—	
Oct	D 47248		15	15		
Nov	E 55395		15	15		
Dec	U 62926		15	15		
Jan-19	L 69260		15	15		
			180			

CANADIAN ASSIGNED PAY AUDITED

J B McPeloche

AUDIT CLERK

DATE 6-6-19

J Burns 28-2-18

M. F. W. 128
400M.—6-17—1772-39-141
L. L. 22820—M. & D. 7993.

MRO rendered 21-3-18

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128.
400M.—5-17—1772 39-1141
L. 22320—M. & D. 7993.