

# ATTESTATION PAPER.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... Sutherland James
  2. In what Town, Township or Parish, and in what Country were you born?..... Casleton Place Ontario Canada
  3. What is the name of your next-of-kin?..... Bella Stevens (Sister)
  4. What is the address of your next-of-kin?..... Casleton Place Ontario
  5. What is the date of your birth?..... Jan 29<sup>th</sup> 1894
  6. What is your Trade or Calling?..... Carpenter.
  7. Are you married?..... no
  8. Are you willing to be vaccinated or re-vaccinated?..... no
  9. Do you now belong to the Active Militia?..... no
  10. Have you ever served in any Military Force?.. in hos of Scot Vancouver  
If so, state particulars of former Service.
  11. Do you understand the nature and terms of your engagement?..... yes
  12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?} yes
- James Sutherland (Signature of Man).  
M Meaderson (Signature of Witness).

### DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, James Sutherland do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the Canadian Over-Seas Expeditionary Force, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Date July 31<sup>st</sup> 1915 J. Sutherland (Signature of Recruit)  
M Meaderson (Signature of Witness)

### OATH TO BE TAKEN BY MAN ON ATTESTATION.

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

Date July 31<sup>st</sup> 1915 J. Sutherland (Signature of Recruit)  
M Meaderson (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 VERNON, B. C. this 31<sup>st</sup> day of AUG 21 1915 1915.

J. J. J. J. (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

A. J. J. (Approving Officer)

# Description of Sutherland James on Enlistment.

Apparent Age 21 years ..... months.  
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height ..... 5 ft. 7 ins.

*Nil*

Chest measurement { Girth when fully expanded ..... 39 ins.  
 Range of expansion ..... 5 ins.

Complexion Dark

Eyes Grey

Hair Brown

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

## 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\* 24 for the Canadian Over-Seas Expeditionary Force.

Date July 31<sup>st</sup> 1915

Place Repton

*W. Macleod Captn R.A.M.C.*  
*J. S. Shaw. Capt R.A.M.C.*  
*J. Wheeler Captn R.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.

James Sutherland 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.

*A. Graham* (Signature of Officer)

Date AUG 28 1915 1915

*Major*  
 62nd (OVERSEAS) BATT'N, C. E. F.

REGIMENTAL DOCUMENTS

NAME SUTHERLAND, JAMES

REGT. NO. 463669

UNIT 62nd Bn

H. Q. FILE NO.

(S)  
2

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

(M)

DATE FORWARDED

M. F. W. 2505  
REFERENCE

NON-EFFECTIVE BY

(H)

ATTESTATION PAPER (M.F.W. 23, 133, or 51)

15-3-19. JPH

CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

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)

MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

DENTAL HISTORY SHEET (M.F.B. 465)

MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

MEDICAL EXAMINATION (M.F.W. 129)

TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)

PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)

DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)

LAST PAY CERTIFICATE (M.F.W. 44)

PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 263)

PARTICULARS OF CHARACTER (A.F.W. 3226)

COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

1 M.F.W. 192 -

1 Medical sheet

1 R. 149

1 R. 149

1 R. 149

10290

DEATH

Category

DISCHARGE

Category

Demobilization

DESERTION

49831

(H)

39-14

17-14

5-14







Name James SUTHERLAND Rank Spr.Reg. No. 463669Unit 9th Can. Rly. Troop.Next of Kin Bella Flavelle, Bartlett Place  
Out. Can.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917						
28-12	<u>25 F. Amb.</u> <u>A 36-11065</u>	<u>Influenza</u>		<u>0107</u>		
8-1	<u>Discharged to duty</u>	<u>Impetigo</u>		<u>0111</u>		<u>11602</u>
21-1	<u>88 F. Amb.</u>	<u>abscess R.</u> <u>maxilla finger</u>		<u>0123</u>		<u>12392</u>
26-1	<u>To Duty</u>	<u>do</u>		<u>0128</u>		<u>12746</u>
7-7	<u>1st W.G. Hosp. Sweeped</u>	<u>Influenza</u>		<u>B266</u>		<u>21137</u>
21-9	<u>with Gen. Hosp. Epsom</u>	<u>do</u>		<u>B327</u>		<u>17058</u>
27-9	<u>Discharged</u>	<u>do</u>		<u>B.335</u>		<u>8369</u>
27-9	<u>will proceed on 9-10-18 to</u> <u>3 G. B. O. Hospital</u>			<u>Reps. S-3096</u>		





No 463669

RANK

Pl.

NAME

Sutherland J.

T. O. S. 307-15

UNIT

62nd Battalion C.E. A

20-8 of 31-7-15

M. D. //

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 July 30	1915 July 31	✓	Overseas draft	Sept. Paylist.
Aug.		✓		
Sept. 1	Oct. 15	✓		

UNIT SAILED  
APR 22 1916



REGT'L NO 463669

H. Q. FILE NO. 649-

NAME

Lutherland, James

RANK AND CORPS

Pvt. 1st. Cav. Bu.

FOLLOWS

NO.

FOLLOWS

CABLE

No.

DATE

NATURE OF CASUALTY

No.	DATE	NATURE OF CASUALTY
09638 M.S.M.	3-13-17	No record of missing, further enquiries will be made
M 722 M.S.M.	27-3-17	Ref. March 21 <sup>st</sup> 1917 with unit

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
<del>A 240</del>	<del>No. 28 Field Amb.</del>	<del>10-1-17</del>	<del>P.M.O. Cancelled on</del>
<del>A 240</del>	<del>90 No 9 Divl Rest Stat</del>	<del>11-1-17</del>	<del>P.M.O. per Hist A 255</del>
1041	25 7th Amb.	28-1-17	Influenza.
A 111	Disch. to Duty. 88 8th Amb.	8-1-18	Impetigo. Abscess R Ind. Ling
A 128.111	" Disch to Duty.	26-1-18.	" " " " " "
B 266-1	1st West Gen. Liverpool	7-7-17	Influenza.
B 324-2	Mil Conv. Woodcote Pk Epsom	21-9-18	"
B 335-2	" " " Disch	24-9-18	"

No. 3998

RANK

Pte

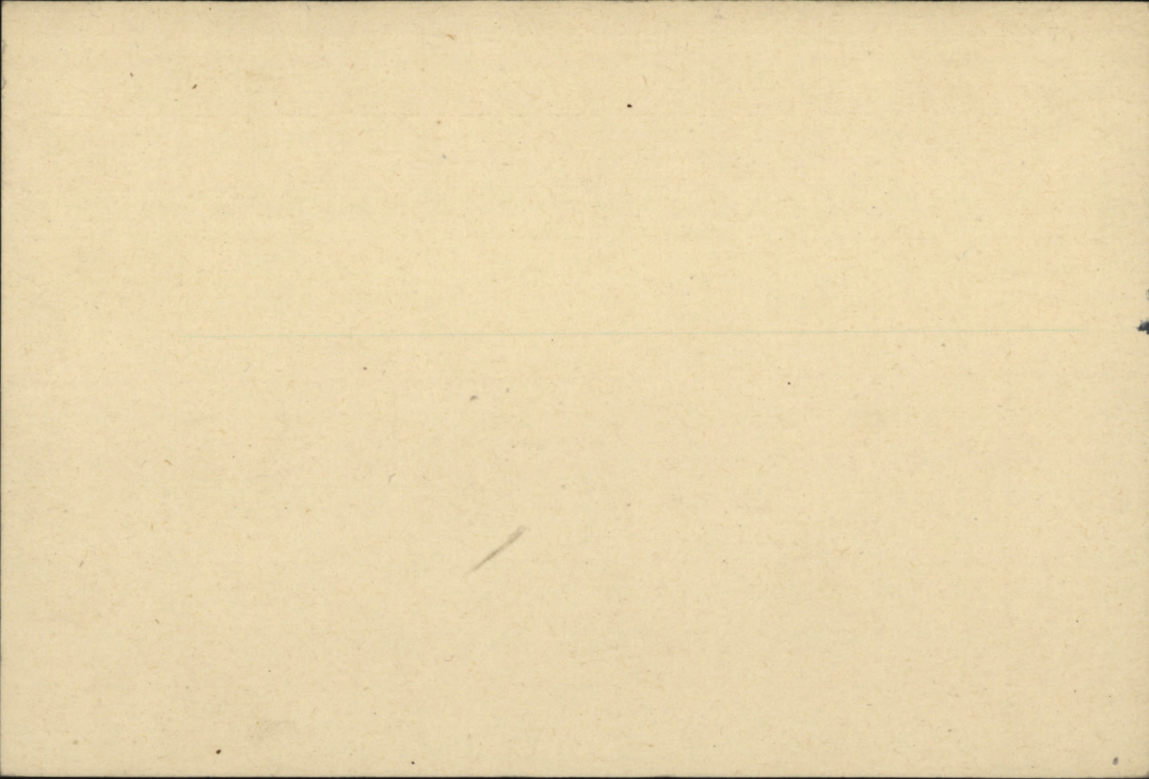
NAME

Sutherland. J

T. O. S. <sup>24/2/15</sup>  
S. O. M. 2 of 1/2/15UNIT 6<sup>th</sup> Regiment. D. C. D. R.

M. D. //

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
<sup>1915</sup> Feb. 24	<sup>1915</sup> Feb. 28	✓		
Mar. 1	Mar. 31	✓		
Apr 1	Apr 30	✓		
	May	✓		
	June	✓		
July 1	July 29	✓	aut. inf. 10 days pay transfd to 62nd Bn 29-7-15	(As# 89 June 1915) (As# 116 July 1915)



SURNAME.

*Lutherland*

*649-8-10290*

<p>11 CARD NO.</p> <p><i>S.O.B. Dated 31-1-19-11</i></p> <p><i>P.O. 24-3-2-19-4m</i></p> <p>FOLL.</p>
---

CHRISTIAN NAMES

*James*

REGL. No.

*463 669*

RANK

*Pte*

UNIT

~~*62nd (1st Bn. 19.)*~~ *# 11. D. 18.*

*Bn.*

FORMER CORPS

*6th W. C. O. P.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

*Favelle, Bella Mrs.*

RELATIONSHIP TO SOLDIER

*Sister*

ADDRESS

*Carleton Place, Ont.*

COUNTRY OF BIRTH

*Canada, Carleton Place, Ont.*

PLACE OF ATTESTATION

*Vernon, B. C.*

DATE

*Aug. 21st 1915*

*Sailed from Montreal*

*1-10-15<sup>219</sup> per S.S.*

L. L. 94504. M. & D. 6512.

*"Scandinavian"*

M. F. W. 22. 250M.-2-16. H. Q. 1772-39-339.

*7316. 25-12-18. <sup>245</sup>/<sub>28</sub>*

MARRIED

SINGLE

*yes*

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE



*med  
Ham*

*B*

Number *463669* Rank *apr*

Surname *SUTHERLAND*

*v*

Christian Name *James*

Units *Can Ry Tro* Theatre of War *France*

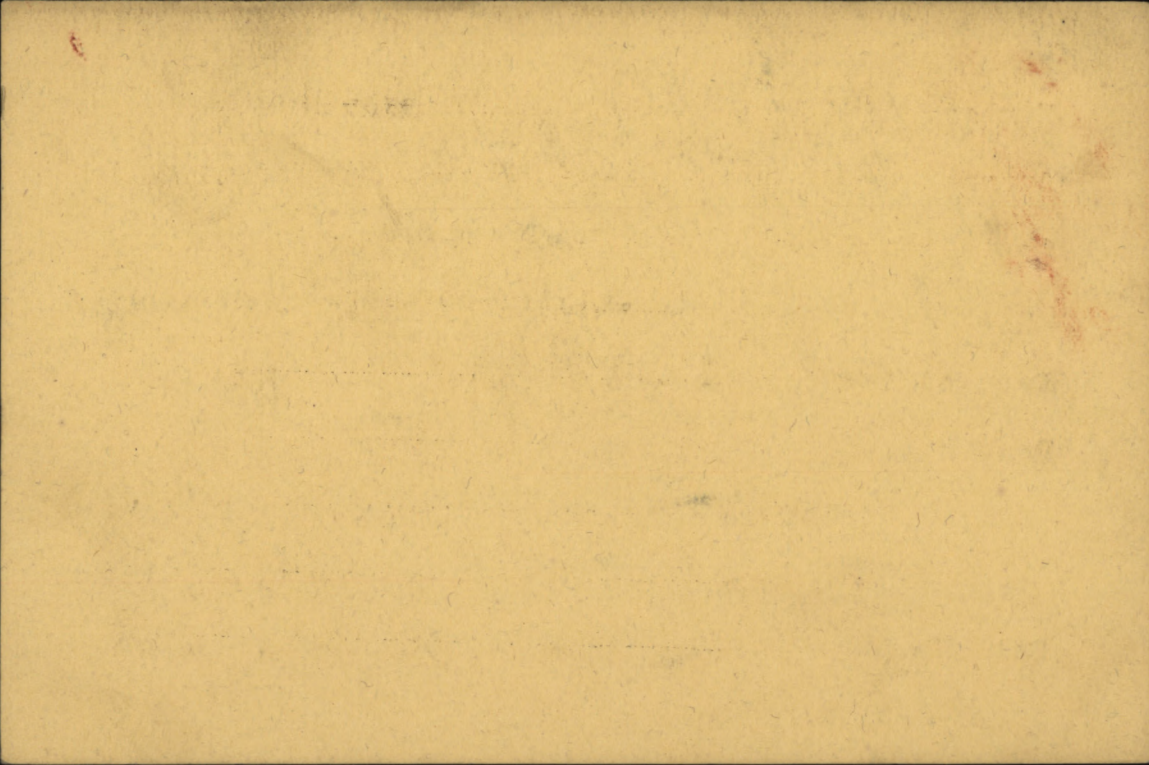
Date of Service *26-5-16*

Remarks

Latest Address *Gen Del Vancouver*  
*B.C.*

Roll No.

200m.-2-21.M. *"B" Page 11995.*



\*Name Sutherland James Rank Spl Regtl. No. 463469  
 Origin unit 62<sup>nd</sup> Regt Present unit CKI Fyle Depot D.D. 5680  
 S. Age 24 Religion C. of S. Ref. H.Q.  
 Port, ship, and date of arrival St. John - Corsican - 25.12.19  
 Next of kin Sister Bella Favelle, Carleton Place, Ont.  
 Address on leave Gen. Dlv, Vancouver.  
 Address on discharge General Delivery, Vancouver, B.C.  
 Transportation issued  Yes  No Date..... Character on discharge.....  
 Previous occupation Carpenter Date and place of enlistment 24 Aug 1915 Vernon B.C.  
 Diagnosis Fit Date of Medical Boards January 20th 1919

Date.	Remarks	Pt. 2 Order No.
3.1.19	T.O.S. from O/seas 15 <sup>12</sup> / <sub>18</sub> Posted to Cas. Coy. 31 <sup>12</sup> / <sub>18</sub> Leave 15 <sup>11</sup> / <sub>19</sub>	3/9c.
31/1/19	Posted to Dis Sec. from Cas Co. 20001618. 1/2/19	34-3/5/19

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

Date.

Remarks.

Pt. 2 Ord. No.

M.F.W. 192  
150M-6-18.  
1772-39-1243.

Surname **Sutherland** Christian Name or Names **J.** Reg. No. **463669**  
 Rank \_\_\_\_\_ Unit \_\_\_\_\_ Co. \_\_\_\_\_ Troop \_\_\_\_\_ Batty. \_\_\_\_\_  
 Pte. **1st Pnrs.**

*96RTJ*

Hospital \_\_\_\_\_ Date of Admission \_\_\_\_\_

**28 Field Ambulance.** **10-1-17.**

Transferred **9 Div. Rest Stat.** Hosp. **11-1-17** } *cancel*

*#25 Yald Amb  
88 Fed Amb*

Hosp. **28.12.17**

*1 Wg Lpool*

Hosp. **21.1.18**

Hosp. **7.7.18.**

Diagnosis **P.U.O.**

(1) Later Diagnosis (if changed)

*Influenza l*

(2) *abscess, R. Index Finger l*

(3) *Influenza R.*

Additional Diagnosis: if more than one state present

DISPOSITION

*Dis. 8.1.18  
Dis. to Duty 26-1-18*

Date

*C.D. 31-1-17 A240*

*cancel on A255*

REMARKS

*Al. 20.2.17. A255 note -*

*Disch. 27-9-18*

*4.1.18 A104*

*12.1.18 A111 (1)*

*26.1.18 A123 - I*

*" 1-2-18 A128*

*16.7.18 B276*

*21.9.18 B327.2*

*3.10.18 B335*

**A.M.D. 2 DEPT.**

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

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

*Woodcote Epsem*

*21-2-18*

2.

3.

4.

5.

6.

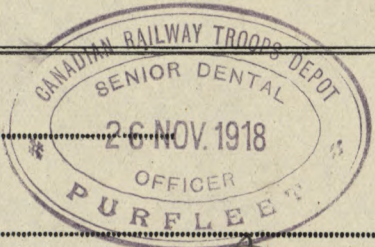
7.

CANADIAN ARMY DENTAL CORPS.

DENTAL CERTIFICATE.

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

REGTL. No.	* NAME	RANK	UNIT
463669	SOTHERLANDS	SPR	CRTD
Date of Examination		26 NOV 18	
Present Dental Condition		FIT	
In case of loss, or decay of teeth, is the loss due to wounds, injury, or disease, directly attributable to Active Service?		NO	
Has he ever declined Dental Treatment?		NO	
Recommendation			



Date..... 26 NOV. 1918

Station.....

Signature of Examining Officer *Eric Burrows* ..... Capt.  
C.A.D.C.

\* Name should be entered in block letters.

DENTAL CERTIFICATE  
INDIAN ARMY DENTAL CORPS

Note: This form will be attached to the Medical History Report  
and sent to the Dental Officer, being returned to the dental officer for disposal.

NAME	RANK	BIRTH
Date of examination:		
Dental Officer's Name:		
<input type="checkbox"/> No loss of teeth or decay of teeth. <input type="checkbox"/> Loss due to wounds, injury, or disease, or other attributable cause. <input type="checkbox"/> Active service.		
<input type="checkbox"/> In active service. <input type="checkbox"/> Dental treatment.		
<input type="checkbox"/> Recommendation.		

U.S. Army  
D.A.D.C.

\* Name should be entered in block letters.



# CANADIAN EXPEDITIONARY FORCE Discharge Certificate



This is to Certify that No. 463669 (Rank) Sgt.

Name (in full) James Sutherland enlisted in  
the 62nd Bn.

CANADIAN EXPEDITIONARY FORCE at Vernon B.C. on the 31st  
day of July 1915

HE served in France with the 1st Bn. C.A.F.

and is now discharged from the service by reason of demobilization under  
P.B. 1420 (c) of 12/12/18

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

Age 25 yrs.

Height 5' 4"

Complexion dark

Eyes grey

Hair brown

Marks or Scars G.S.W. scar under  
left knee. 1 Vacc. left arm.

James Sutherland  
Signature of Soldier

H. B. Andrews  
Issuing Officer

Date of Discharge Jan'y 31/19

Capt.  
Rank

for C.B. D.D. No 11  
Appointment

Signed at Vernon B.C. this 31st day of Jan'y 1919

in Military District No. XI

File Reference No. D.D. S. 5680

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

CANADIAN EXPEDITIONARY FORCE  
**Discharge Certificate**

No. .... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

Medals and Decorations .....

Remarks .....

Signed at ..... this ..... day of ..... 19 .....

.....  
Name of Officer

.....  
Rank

.....  
Appointment

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

## Casualty Form—Active Service.

Canadian Record Office,  
Westminster House,  
7, Millbank, S.W.

Regiment or Corps

~~CANADIAN PIONEER~~  
~~TRAINING DEPOT.~~62nd Battalion  
Westminster House,  
7, Millbank, S.W.Regimental No. 462669 Rank Pte Name Sutherland JamesEnlisted (a) 31/7/15 Terms of Service (a) War Service reckons from (a) 31/7/15Date of promotion } Date of appointment } Numerical position on }  
to present rank } to lance rank } roll of N.C.Os. }Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) (Carpenter)

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
<i>Proceeded Overseas 25/5/16 to 1st Can. Pioneer Bn.</i>					
<i>to a Stegans Capt Adj.</i>					
<i>CANADIAN PIONEER TRAINING DEPOT.</i>					
		EMBARKED FOR FRANCE		25/5/16	Troopers 184 A.G.2a d/24/5/16
		LANDED IN FRANCE and Taken on Strength of Battalion		26/5/16	O.C.C.B.D. Havre Nom Roll d/26/5/16 D.O.Pt. 11 No. 11 d/31-5-16
26/5/16	O.C.C.B.D.				Can. Sec. 3rd. Ech. No. 1 d/1/6/16
	Havre	Proceeded to Unit	Field	30/5/16	Nom Roll D.C.S. No. 61
3/6/16	O.C. Unit	Arrived at Unit	-do-	31/5/16	A.F.B. 213 D.C.S. 66
15.9.16	C.E. Co. Cpl.	Attd 1st Army Troops Co.	Field	15.9.16	B. 213 D.C.S. 139
22.10.16	...	Returned to Unit	"	11-10-16	... 149
13.1.17	O.C. Unit	Sick to Hospital	"	10.1.17	B 213
14.1.17	O.C. 28 C.Y.A.	P.O.	adju	28.1.17	A 36. D.C.S. 179
			7th	9.1.17	
12.1.17	O.C. 24 C.Y.A.		adju	24.1.17	A 36 D.C.S. 180
			7th	25.1.17	A. 36 D.C.S. 1
26.1.17	" "	"	7th	30.5.17	B 213 Pt II No 50/14/15-6-17
2.6.17	" Unit	Granted Leave to buy and		15.9.6.17	

(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.]

463669 *McC Sutherland*

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				
16-6-17	O.C. Lt	Rejoined Unit from Leave	Field	12/6/17	B213 O.C. II DO 71d 28-8-17
12-7-17	O.C. Unit	When on Active Service: Sustained to forfeit 3 days pay for 1. Being out of Billings Area without a pass. II Improperly dressed.	Field	10-7-17	B2069 O.C. II DO. 61-187 <sup>29-7-17</sup>
9-10-17	O.C. UNIT	Awarded <b>GOOD CONDUCT STRIPE</b>	Field	31-7-17	PT. II DO No 85 D, 9-10-17
8-1-18	25 F.A.	Impuligo Adm	25 F. Amb	25-12-17	} a 36 a 5883
		7 Fed	Duty	8-1-18	
29-12-17	O.C. Unit	Sick to Hospital	Field	28-12-17	B213
12-1-18	"	Rejoined from "	"	8-1-18	"
26-1-18	"	Sick to Hospital	"	21-1-18	"
21-1-18	88 F.A.	Abcess Index finger R. Hand Adm	88 F. Amb.	21-1-18	a 36 a 6701
26-1-18	do	do To	Duty	26-1-18	a 36 a 7046
2-2-18	O.C. Unit	Rejoined from Hosp.	Field	26-1-18	B213
28-2-18	"	Sustained to forfeit 2 days pay for W.O.A.S. absent without leave from 12 noon 17-2-18 to 10.30 am 18-2-18. (Absent 22 1/2 hrs)			a.7. B. 2069
		Forfeits 2 days pay under P. W.		18-2-18	PT II DO 20 d 10-3-18
23-3-18	✓	attached for duty to 1st Bn. C. O. T.	Field	21-3-18	B213: HQ-6RT File a-1-2-16459 d 15-3-18
27-4-18	✓	Rejoined from att. to 1st Bn C.O.T.	"	21-4-18	B213
2-7-18	48 F.A.	Influenza Adm	To: 36 d n Staty	2-7-18	} a 4954 & 4980
		✓			
4-7-18	6th Caval H.	✓ "5" Adm.		4-7-18	to 6105

*Sheet II*

**Casualty Form—Active Service.**

Regiment or Corps 9th Battn. Canadian RLY. TROOPS

Rank Spr Surname Sutherland Christian Name James

Religion Cal Age on Enlistment 22 years 0 months

Enlisted (a) 31-7-15 Terms of Service (a) Of War Service reckons from (a) 31-7-15

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

Extended { ..... } Re-engaged { ..... } Qualification (b) civil Carpenter  
or Corps Trade and Rate .....

Occupation ..... Signature of Officer .....

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				
<u>6-7-18</u>	<u>6 General A</u>	<u>Invalided sick from A.T. frontally, battle &amp; posted to 6 RT Depot Perflect</u>	<u>England</u>	<u>6-7-18</u>	<u>Ar 3083/5620 Pt II DO. 86d/12-7-18</u>
<u>19-7-18</u>	<u>6 RTL</u>	<u>TLLS posting from 9th CRT</u>	<u>Perflect</u>	<u>7-7-18</u>	<u>OS 11 198 R2632 Bul</u>

*Gibson*  
Lieut. for Lt.-Col., A. A. G.  
Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

Lieut.  
for Lt Col i/c Records, OMAEC

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

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				
27.11.18	DISCHARGED FROM 3 <sup>RD</sup> C. C. D. Seaford		SR.719. BN. PA. I IED. No. 287.	27.11.18	
					3 <sup>rd</sup> Canadian Command Depot.
30-9-18	b.R. 1 depot	on Comd 3 <sup>rd</sup> C.C.D. Seaford	Perflect	27-9-18	Part II 271
27.11.18	do	off Comd Seaford	do	27.11.18	Part II 329
S.O.S. C.R.T.D ON EMBARKING TO CANADA 12 DEC, /18		<i>Christie</i>			Lieut, for O.C. Canadian Railway Troop Depot.
3/1/19	Overseas (T. O. S. District Depot, M. D. XI.		Victoria, B. C.	18/2/18	D. O. Part II 3/4 1919
Discharged		Demobilization R. O. 1420 C of 12/12/18	Vancouver	31/1/19	D. O. 34/190D 3/2/19 J.A. Maclean Capt. for O.C. District Depot, XI

MILITIA AND DEFENCE  
 ASSIGNED PAY  
 OVERSEAS CONTINGENTS

M. F. W. 12.

25m-4-17.

H. Q. 1772-39-819.

403

To Whom *Mrs M. Saville*  
 Address *Carleton Place*  
*Ont.*

By Whom Assigned *Buthvland J*  
 Regtl. No. *463669*  
 Rank *PL*  
 Corps *1 Pwr Bn*

Rate *£ 50 00*

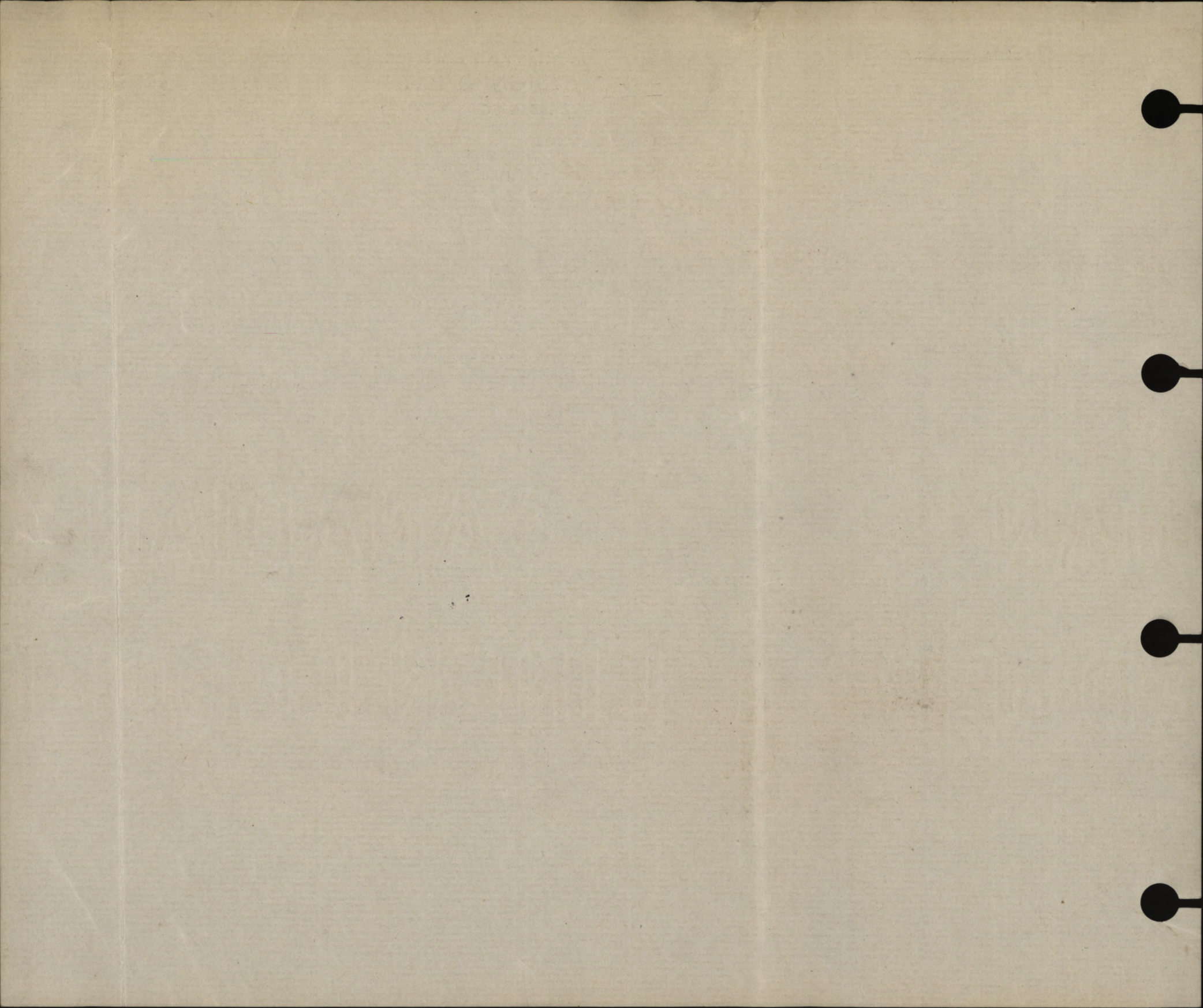
SPECIAL REMITTANCE

*Chkd 372 29.5.17*

## PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	<i>1915</i>			
Feb.				
March				
April				
May				
June		<i>A 12589</i>	<i>50 -</i>	
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				







Rank

*Pte.*

Name

SUTHERLAND, James

Reg'l No. 463669

P-56

Unit

62nd Bn.

If in perm. Corps,  
What Unit?Married or Single *Single*Place and Date of Enlistment *Vernon July 31st 1915.*Place of Birth *Carleton Place, Ont. Can*Name and Address, Next-of-Kin *Bella Favèlle, Carleton Place, Ontario, Canada*Relationship *Sister*

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason

Character

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						
<i>16/10/15</i>	<i>30/11/15</i>	<i>46</i>	<i>1.00</i>	<i>46 00</i>	<i>46</i>	<i>10</i>	<i>4 60</i>	<i>50 60</i>	<i>453</i> <i>514</i>	<i>14 60</i> <i>17 03</i>				<i>31 63</i>	<i>18 97</i>		
<i>1.12.15</i>	<i>31.12.15</i>	<i>31</i>	<i>1.00</i>	<i>31 00</i>	<i>31</i>	<i>10</i>	<i>3 10</i>	<i>34 10</i>	<i>600</i>	<i>29 20</i>		<i>6 60</i>	<i>35 80</i>	<i>17 27</i>		<i>absent 1 day R.P. 2 days</i> <i>5 days B.C. 24/5</i>	
<i>1.1.16</i>	<i>31.1.16</i>	<i>31</i>	<i>"</i>	<i>31 00</i>	<i>31</i>	<i>"</i>	<i>3 10</i>	<i>34 10</i>	<i>713</i> <i>760</i>	<i>4 87</i> <i>9 98</i>			<i>56 15 41</i>	<i>33 96</i>		<i>Lod. Kid.</i>	
<i>1.2.16</i>	<i>29.2.16</i>	<i>29</i>	<i>"</i>	<i>29 00</i>	<i>29</i>	<i>01</i>	<i>2 90</i>	<i>31 90</i>	<i>836</i>	<i>17 03</i>			<i>17 03</i>	<i>50 83</i>			
<i>1.3.16</i>	<i>31.3.16</i>	<i>31</i>	<i>"</i>	<i>31 00</i>	<i>31</i>	<i>"</i>	<i>3 10</i>	<i>34 10</i>	<i>904</i>	<i>9 98</i>			<i>9 98</i>	<i>74 95</i>		<i>Trans to C.P.J. Danthorn B.C.</i>	
	<i>Mar</i>			<i>168 00</i>			<i>16 80</i>			<i>14 61</i>		<i>4 16</i>	<i>109 85</i> <i>14 61</i>	<i>60 34</i>			
				<i>168 00</i>			<i>16 80</i>	<i>184 80</i>		<i>117 30</i>		<i>7 16</i>	<i>124 46</i>			<i>Checked <i>Gunter</i></i>	

BALANCE TRANSFERRED TO NEW LEDGER.

CANADIAN  
ASSIGNED PAY AUDITED

AUDIT CLERK

DATE *24/6/19*



cc  
P+a  
leave

5-680

X1 C.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. 463669... Rank... Sapper... Surname... Sutherland...  
(Given name in full).

..... James .....

Unit or Corps... 1st Can. Pioneers... Birthplace... Canleton, Place, Ont....

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

1. GENERAL DESCRIPTION:

Physique... Good... Weight... 151... lbs. Height... 5... ft. 7... in. Colour of eyes... Grey.....

Nutrition... Good.....

Pulse..... 76..... Identification marks, scars, or deformities. (Give cause and date of origin).

Condition of arteries... Good..... G.S.W. scar under left knee

Vision Rt... 20/20... Lt... 20/20... wounded in June 1916.

Hearing (Conversational voice) Rt... 20... ft. Lt... 20... ft. 1 Vacc. mark left arm. Aug 1915.

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 Systems... No.... Genito Urinary System... No... Cardio-Vascular System... No....

Special Senses... No.... Integumentary System... No... Respiratory System... No....

Disturbance of mentality... No.... Muscular System... No.... Digestive System... No....

Osseous and Joint System... No.... Any other general condition... No....

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

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 New Westminster, B.C..(Canada)

Date..January..20th..1919..... Signed *B. H. Wallace*.....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 *Sutherland James*.....

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

(This space to be used, if necessary, in connection with Section 2, overleaf, only.)





# Demobilization Pay M.D. No. 11

## 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. 463669 Rank Pte Name Sutherland J  
 Corps 11 District Depot who was\* discharged  
 On 21/1/19 191... to 1/12/18  
 \*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1/12/18 191...  
 to 21/1/19 191..., the inclusive date of transfer or discharge.

	Dr.	\$	c.		Cr.	\$	c.
Bal. Dr. from prev. month				Balance Cr. from prev. month		476	71
Advances } No. ....		10	-	Reg'tl. Pay <u>62</u> days at \$ <u>1</u> c. ....			
by } No. ....				Field Allow. <u>62</u> days at \$ <u>-</u> c. <u>10</u> .....			
Cheques } No. ....				Separation Allowances* (Monthly) .....			
Assigned Pay and Sep'n Allee. No. ....				Other Allowances* <u>5.00</u> .....		11	00
Other charges .....				Other Credits* <u>Cloth</u> .....		35	-
Payment on transfer or discharge No. ....		651	36	Bal. Dr. (to be deducted by new unit) .....		70	-
Balance Cr. (to be paid by the new unit) .....							
<b>Total</b> .....		661	36	<b>Total</b> .....		661	36

\*Give particulars.

A monthly stoppage of \$..... (†) has..... (‡) been paid on account of Assigned  
 Pay for the month of ..... 191...  
 and Sep'n Allee. for month of ..... 191... (to) Assignee .....  
 (Address) .....

(†) 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 Yes .....
- (3) cause of discharge ..... authority SO # .....
- (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 21/1/19  
 Place Victoria B.C.  
[Signature]  
 Captain  
 Demobilization Pay M. D. No. 11  
 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.

CANADIAN GOVERNMENT EXPERIMENTAL FORCE

PATENT OFFICE





MEDICAL CASE SHEET.\*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	463669	Private	Butherland	J.
Year	Unit.	Age.	Service.	
1918	9 Can D. I.	28	3 6/12	
Station and Date.	Disease			
66th Coy. 21/9/18.	E. O. W. Lt knee (old wound) Pt. W Healed <del>D.I</del> B.C.H.			

WATERLOO & DUNDEE IN FULL

12 Queen St.  
Glasgow

14.3.18 A.B.G.  
24.9.18 M.H.S.



MEDICAL CASE SHEET.\*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year	Unit.	Age.	Service.	
	#63669.	Pk	Sutherland	J.
	9 <sup>th</sup> B.R.T.	28	F.S. 2 1/2	3 1/2

Station and Date.	Disease
VENICE STREET (AUX) MILITARY HOSPITAL, ATT: 101 WESTERN HOSPITAL, LIVERPOOL	S. S. W. - L. H. P. M. H. G. Lee in Hospital - S. W. P. M. W. Chel. 2 p.m. 1918 - S. W. P. M. - L. H. P. M. Healed. M. W. M. S. M. P. M. Recommended for Epsom.
19-8-18	H. J. M. X. 9.

Station  
and Date.

D 4741  
463669

# ORIGINAL

## MEDICAL HISTORY SHEET.

Surname Sutherland Christian Name James

Examined { on 31 day of July 1915 Approved by J. Shaw  
 { at Vernon B.C.  
 Birthplace { City or Town Carleton Place Rank Capt Camm M.O.  
 { County Ont.

Apparent age 21  
 Trade or occupation Carpenter  
 Height 5 Feet 7 Inches.  
 Weight \_\_\_\_\_ Lbs.  
 Chest measurement { Minimum 34 inches.  
 { Maximum expansion 39 inches.  
 Physical development \_\_\_\_\_  
 Small-Pox Marks \_\_\_\_\_

Vaccination Marks { Arm Right Left  
 { Number \_\_\_\_\_  
 When Vaccinated last \_\_\_\_\_  
 (a) Marks indicating congenital peculiarities or previous disease \_\_\_\_\_

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT.
21.9.18	DI	BCA. M.O.
		1 JUL 1918 M.O.

Date	Result	VACCINATIONS.
23/8/15	OK	J. Shaw M.O.
24.9.18	BCA	
14.3.18	A.1364	ANTI-TYPHOID INOCULATIONS, ETC.
3/8/15	OK	J. Shaw M.O.
13/8/15	OK	J. Shaw M.O.
7/9/15	OK	J. Shaw M.O.

(b) Slight defects but not sufficient to cause rejection \_\_\_\_\_  
 Enlisted on 31<sup>st</sup> day of July 1915 at Vernon B.C.

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	62nd (OVERSEAS) BATTN, C. E. F.			JUL 30 1915
Transferred to..	48th BATTALION, C. E. F.	463669		

### EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
3 <sup>rd</sup> C. B. D. Seaford.	20/11/18.	Fit for Duty. Aiii.	H. C. Watson Capt
Purfleet	28/11/18	Fit for duty A	for Major. C. A. M. G. S. S. S. S.

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

CANADIAN

c.

Surname *Sutherland*

Christian Name *James*

STATION.	Date of Arrival at the Station.	DATES OF						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.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
<i>ST JOHN HOSPITAL, THE GRANGE, SOUTHPORT.</i>		7	7	18					<i>? influenza</i>		
<i>VENICE STREET (AUX) MILITARY HOSPITAL ATT. 1ST WESTN GENL HOSPITAL, LIVERPOOL</i>		19	8	19	20	9	18	33	<i>GSW L' hip</i>	<i>Trans. to Woodcote Park, Epsom</i>	<i>Com. E. Bentall H. T. N. [Signature]</i>
<i>McNEEPOON</i>		20	9	18	27	SEP	1918	8	<i>Do. <u>knee</u></i>	<i>Wound healed - no disability. Heart &amp; Lungs normal. Dis- charged to Command Depot. Category DI.</i>	<i>[Signature] Capt. Caine</i>

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

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

Rank SPR Name JAMES Surname SUTHERLAND  
 Unit or Corps C.R.T. (If a soldier) Regtl. No. 463669  
 Born at CARLTON PLACE ONT CANADA on date JAN. 29 1894  
 Signature (for identification) J. Sutherland

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

1. **PHYSIQUE**—Any deformity, maiming or lameness? If so, describe. No.

Weight 160 lbs.  
 Height 5 ft. 7 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** normal

4. **RESPIRATORY SYSTEM.** normal

5. **HEART**  
 Abnormal Sounds? No  
 Abnormal Size? No  
 Pulse Rate? 70 Intermittence or irregularity? No

6. **ARTERIES.**—Any hardening? No

7. **DIGESTIVE SYSTEM** normal

8. **GENITO-URINARY SYSTEM** normal  
 Urinalysis—s.g.? 1.016 Reaction? acid Albumen? No Sugar? No

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

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? Fit A

Examined at Perth { Signed Walter Stewart  
 Date 28/11/18 { Signed Walter Stewart

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.

Medical Examination upon leaving the  
of an Officer fit for general service in a regular  
of the Army

298

JAMES

Sutherland

45 3667

Cavalry Force OUT CANADA

100

100

James

James

100

100

100

100

James

James

100

James

100

100

James  
100







ASSIGNED PAY.	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.	NAME:- SUTHERLAND James			
EFFECTIVE DATE:- 1-6-18.		EFFECTIVE DATE:-		NUMBER:- 463669			
AMOUNT:- 75. <sup>00</sup>		AMOUNT:-		* PARTICULARS OF RANK OR APPOINTMENT			
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.		AUTHORITY			
Mrs Bella Favella. Babylon Place. Sister Ottawa 1-18				DATE EFFECTIVE			
				RANK OR APPOINTMENT Sp4			
UNIT AND TRANSFERS							
ORIGINAL UNIT:- 62nd Batta							
DATE ACCOUNT FIRST OPENED:-							
				AUTHORITY			
				DATE EFFECTIVE			
				DATE LEDGER SHEET T'SFD			
				UNIT TRANSFERRED TO 9CRT			
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS							
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
Nov 18 1111		Seaford	19.47				
12184			4.87				
				L.P.B. Remd Dec 1/18			
				Ledger Balce #581.42.			
				L.P.B. do 557.08			
DAILY RATES OF PAY AND ALLOWANCES							
AUTHORITY		PAY	F.A.	P.F.A.	SUBS'CE ALL'CE		
		7	10				

PARTICULARS OF RENDERING NON-EFFECTIVE:- Trans Canada 30.11.18 a gza. 14.1.48 d. 15.11.18

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
March 31	Balance forward								47806	403	
April	PP	33		AR 10. 1 ep 4 4/4	0	803					
				124 qcr 4 2/4	8	354					
				173 do 26/4	19	354			495	89	418
May	PP	33	3410		15	17					
				259 15/5 ..	5	446					
				AR 343 do 27/5	12	354			521	96	433
						803					
June	PP	33		BAR				15			
				AR 434 do 15/6	4	446					
				522 do 26/6	14	354					
						803					
July	PP	33	3410	CAP				15	531	93	
								15	551	03	
								15	585	13	
Aug	PP	33	3410	P.R.P.				15	570	13	
				22327 2/8 H Rem	2	973					
				P 8876 20/8 #59H.	9	243			557	97	433
				9756 30/8 "	17	243			555	54	
						1459					
Sept	PP	33	3410	P10881 16/4/18 #500H	1	487			573	54	
				CAP				15			
				4398 23/9 Epsom	7	487					
				6209 27/9 "	12	4867			515	13	433
						5841					
								15			

New AS Pay Book # 58417 issued 1-8-18.

CANADIAN  
ASSIGNED PAY AUDITED  
*[Signature]*  
AUDIT CLERK  
DATE 24/6/19

Forward

NUMBER 463669 RANK *Sp*

NAME SUTHERLAND J.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
				Balance Forward					51513	133	
<i>Oct</i>	<i>PP</i>	<i>3410</i>		<i>cap</i>				<i>13</i>	<i>53423</i>		
				<i>awh. 1pm 9/10/18 to 530pm 10/18. DO 288 1/2 CR 44</i>		<i>110</i>			<i>53313</i>		
	<i>5F 27/18 to 4/10/18. 12 days. DO 232 2/8 3 cch. 846</i>								<i>54189</i>		
				<i>6856 15/10/18 3 cch 26</i>	<i>487</i>				<i>53702</i>		
				<i>4146 20/10/18 do 38</i>	<i>943</i>				<i>52729</i>		
		<i>1786</i>			<i>1460</i>	<i>110</i>		<i>18</i>			
<i>Nov</i>	<i>P.P</i>	<i>33</i>		<i>cap</i>				<i>15</i>	<i>54529</i>		
	<i>Int on Def Pay</i>	<i>3613</i>							<i>58142</i>		
				<i>7771 19/11/18 3 cch 5</i>	<i>1947</i>				<i>56195</i>		
				<i>6189 24/11</i>	<i>33</i>				<i>55708</i>		
<i>Dec</i>	<del><i>PP</i></del>	<del><i>3410</i></del>		<del><i>cap</i></del>	<del><i>2430</i></del>			<del><i>15</i></del>	<del><i>54618</i></del>		
<i>1919</i>											
<i>Jan</i>	<del><i>PP</i></del>	<del><i>3410</i></del>		<del><i>cap</i></del>				<del><i>15</i></del>	<del><i>54528</i></del>		
		<i>6913</i>		<i>awd 5 days 27/12 10/1/18 CR 170. 10/1/18 do 342 10/1/18</i>		<i>550</i>			<i>55158</i>		
				<i>advised 27/1/19</i>	<i>2434</i>	<i>550</i>		<i>15</i>			

This space to be for numbers.

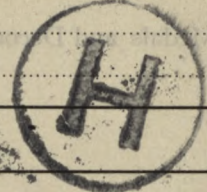
5-3-19 70



# Proceedings on Discharge.

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

No.	463669
Rank	Sgt.
Surname	Sutherland
Christian name	James
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	62nd Bn.
Date of discharge	Jan'y 31/19
Place of discharge	Vancl. Bb.



### 1. DESCRIPTION AT THE TIME OF DISCHARGE.

	Descriptive marks
Age..... 25 years..... months.	
Height..... 5 feet..... 7 inches.	
Complexion..... dark.	g.s.w. scar under left.
Eyes..... grey.	humer. Vacc. left arm.
Hair..... brown.	
Trade..... carpenter.	
Intended place of residence..... Genl. Bb.	
(To be given as fully as practicable.)..... Vancouver Bb.	

2. The above-named man is discharged in consequence of demobilization  
under  
 Authority for discharge..... P.O. 1420 (c) 12/12/18

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

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

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

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

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

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

Proceedings on Discharge

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

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

6. Medals and Decorations.....

Form with horizontal lines for listing medals and decorations.

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

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

(Place).....

(Date).....

Commanding.....

8. Certificate to be signed by the Soldier on Discharge

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

(Place)..... James Sutherland (Signature of Soldier.)

(Date)..... Fred Bowes (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).....

(Date).....

(Signature).....

W. Andrews Capt. for G. C. District Depot, XI



**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.)

*None*

List of Discharge Documents

*James Sutherland*

Key Conduct Sheet	Minutes form B. 263	Attestation Paper	Minutes Form W. 27
Squadron Battery Company	Conduct Sheet	or	Particulars of Record
			Minutes form B. 263
Field Conduct Sheet	Minutes form B. 263	or	Proceedings on Discharge
			Minutes form B. 263
Copies of Convictions by C. P. in MS.			
Med. Hist. Sheet	Minutes form B. 313	In the case of recruits who are rejected on final approval, the discharge documents will consist of	
Casualty Form	W. 24		
Medical Report for Invalids	H. 227	(a) Proceedings on Discharge	
Dental History Sheet	B. 462		
Last Pay Certificate	W. 44	(b) Attestation	
Duplicate Discharge Certificate	W. 39A		
Form of Will	W. 81	(c) Medical History Sheet	
Only if discharged "Medically unfit"			
Only if man has not been overseas			
Documents not accompanying this form should be crossed out			

I hereby certify that the following documents are unobtainable.

Officer Commanding

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

## List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263	
Squadron } Battery } Company }	Conduct Sheet,	" B. 263a
or		
Field Conduct Sheet	"	W. 178
Copies of Convictions, by C. P.		in MS.
Med. Hist. Sheet,	Militia form B. 313	
Casualty Form	"	W. 54
Medical Report for Invalid§	"	B. 227
Dental History Sheet	"	B. 465
Last Pay Certificate	"	W. 44
Duplicate Discharge Certificate	"	W. 39A
‡Form of Will	"	W. 82

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

Attestation Paper	Militia Form W. 23	
or		
Particulars of Recruit	"	W. 133
Proceedings on Discharge	"	B. 218

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.

Documents not accompanying this form should be crossed out.

*I hereby certify that the following documents are unobtainable.*

*Officer Commanding.*

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



To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital.  
 Army Form B. 178<sup>A</sup> to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

**MEDICAL HISTORY of**

Surname SUTHERLAND Christian Name James

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Carleton Place County Ont.

Examined ... { on 31st day of July, 1915,  
 at Vernon B.C.

Declared Age ... 21 years ... days.

Trade or Occupation ... Carpenter

Height ... 5 feet 7 inches.

Weight ... lbs.

Chest Measurement { Girth when fully Expanded 39 inches.  
 Range of Expansion 5 inches.

Physical Development ...

Vaccination Marks { Arm ... Right Left  
 Number

When Vaccinated ...

Vision ... { R.E.—V=  
 L.E.—V=

(a) Marks indicating congenital peculiarities or previous disease ... (a)

(b) Slight defects but not sufficient to cause rejection ... (b)

Approved by (Signature) J.G. Shaw  
 (Rank) Capt. C.A.M.C.  
 Medical Officer.

Enlisted ... { at Vernon B.C.  
 on 31st day of July, 1915.

Corps.	Regtl. No.
<u>62nd Overseas Battn.C.E.F.</u>	<u>463669</u>
<u>48th Battn.C.E.F.</u>	

Became non-effective by ...

This Medical History Sheet has been compared with the Corresponding Attestation Paper, and entries made in red have been taken from the Attestation (Signature) H. ...  
 (Rank) ...





**Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.**

Date	Brief details, and signature
23-8-15	Vaccination - O.K. - J.G. Shaw
3-8-15	Inoculation -do-
13-8-15	-do-
7-9-15	-do-

**Table IV.—Service Table.**

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

For the Officer in Charge of Records  
 Contingents.

I certify the foregoing to be a true copy of an original entry on a  
 historical sheet of this man.  
 O.A.M.C.

P. 878.

Extract D.O. No.

94

Unit.- @ R.T.

Date:-

Reg. No.

Rank

Name

463669

Spr.

SUTHERLAND. J.

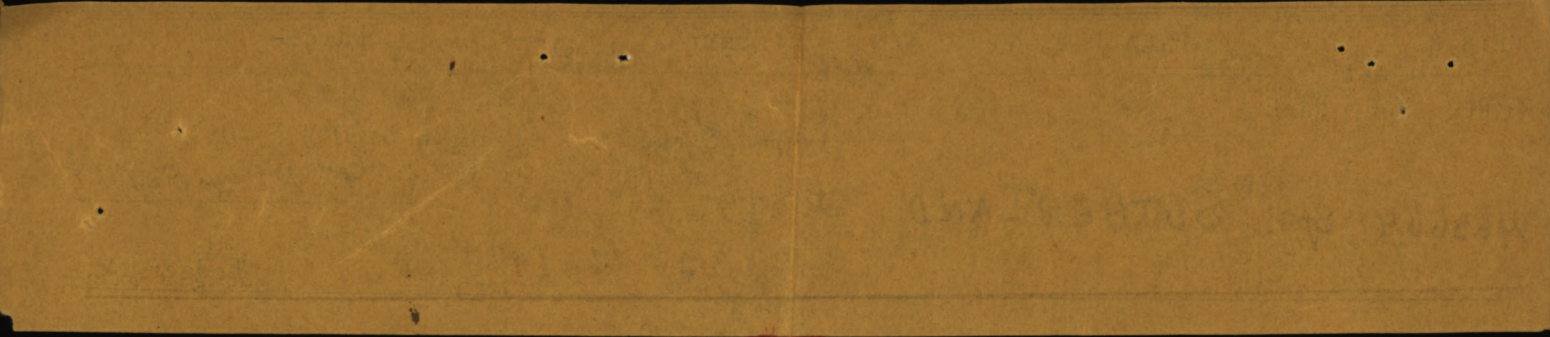
Struck off Strength of O.M.F. of C.  
on transfer to C.E.F. Canada.

45011

12. 12. 18

Acted on

Ledger Ck.



Rank \_\_\_\_\_ Name SUTHERLAND, James Reg'l No. 463669  
 Unit 62nd Bn. If in perm. Corps, }  
 What Unit? } Married or Single Single  
 Place and Date of Enlistment Vernon July 31st 1915. Place of Birth Carleton Place, Ont. Can.  
 Name and Address, Next-of-Kin Bella Favéle, Carleton Place, Ontario, Canada

Relationship Sister

Assigned Pay Monthly \$ \_\_\_\_\_ Payable to \_\_\_\_\_

Relationship \_\_\_\_\_

Separation Allowance \$ \_\_\_\_\_ Payable to \_\_\_\_\_

Relationship \_\_\_\_\_

Discharge, Date and Place \_\_\_\_\_ Reason \_\_\_\_\_ Character \_\_\_\_\_

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				
				<u>11/10-15</u>	
<u>8/12-15</u>	<u>0/48.</u>	<u>arrived in England.</u>		<u>8.12.15</u>	<u>PT II 227</u>
<u>22.12.15.</u>	<u>"</u>	<u>arrived from Hospital</u>	<u>"</u>	<u>21.12.15.</u>	<u>PT II 241</u>
<u>28.12.15.</u>	<u>"</u>	<u>3 days P.O. on a.w.c.</u>	<u>"</u>	<u>27.12.15</u>	<u>PT II 245</u>
<u>25.5.16</u>	<u>P.T. II</u>	<u>forfeit 1. days pay</u>	<u>Field</u>	<u>25.5.16</u>	<u>PT II 75</u>
<u>31-5-16</u>	<u>1st Pnt B.</u>	<u>Issd to 1st Pnt Bn.</u>	<u>"</u>	<u>26-5-16</u>	<u>PT II 0 #11</u>
<u>5. 10. 16.</u>	<u>10. J. Co. C.E.</u>	<u>Att. 1st Army Troop. Co. C.E.</u>	<u>---</u>	<u>12.9.16.</u>	<u>---</u> 41.
<u>31. 10. 16.</u>	<u>---</u>	<u>Ceases to be attached.</u>	<u>---</u>	<u>11. 10. 16.</u>	<u>---</u> 48.
<u>31. 1. 17.</u>	<u>1 Pioneer</u>	<u>P.U.O. #28 7th. A.C.</u>	<u>Cancelled.</u>	<u>10. 1. 17.</u>	<u>by C.L.G. 255. #9 Div. Rest Sta. 11. 17. 0. 240.</u>



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				
20-6-17	1st Pms	Now known as 9-Bu BRT	Field		OS 44
9-10-17	9 BRT	Awarded one Good Conduct Strike Spn	do	31-7-17	OS 85 Det BRT
12-7-18	Do	Spik. Inv. & Eng. posted to Depot BRT	Field	6-7-18	OS 86 OS 198 1918
2-10-18	3062L	Attached for P.T. from BRT	Spn Seafood	27-9-18	OS 232 BRT OS 271 30-9-18
27-11-18	CRT D.	ceases att'd 3rd CCD.	"	Perflet 27-11-18	OO 329.
12-12-18	OO	Sol. OMFC to CEF in Canada.	"	12-12-18	OO 344.





Spr. Sample.

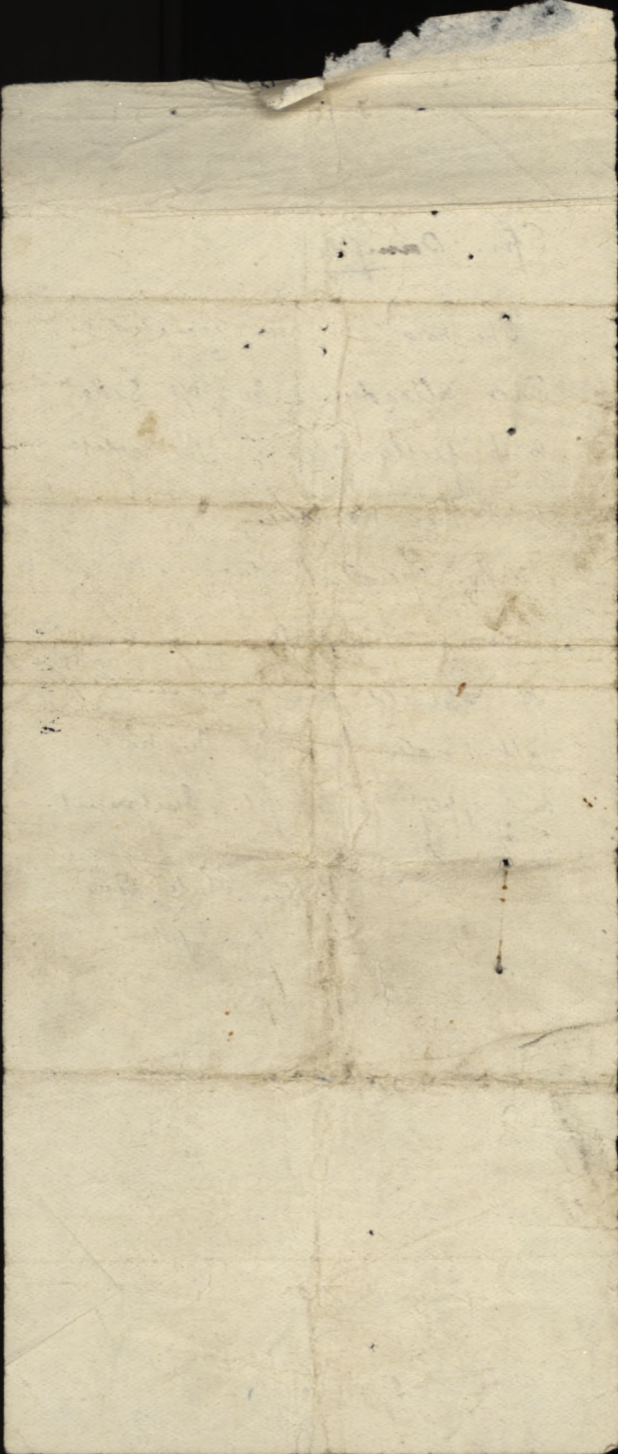
The nose has been operated on twice already. The left side is perfectly clear, the right is rather narrow.

Further operation does not seem advisable.

He should sniff warm salt water through the nose and apply Eucalypt. Ointment into it.

Arthur. Hutchinson  
Capt

attach M.P.S. p



MEDICAL CASE SHEET.\*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year	Unit.		Age.	Service.
Station and Date.	Disease			
1915	463669		Sutherland	James
	48 Batt C. 87		21	10 months
Grange Hoop Dec. 8/12/15 9th Shorncliffe in A	<u>Cold.</u>			
	Med. I.A.S.		Experienced med.	
	Discharged 29/12/15		C. D. Skyles	

2 3 1 2 4

\*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.  
(J 3521.) Wt. W 5606-2621. 2,000,000. 7/15. D & S.



Date of Enlistment 31-7-15

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

13830

1 June 18

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

# 15.			
-------	--	--	--

# S

## PARTICULARS OF SEPARATION ALLOWANCE

No. 463669  
 Rank Spr. Promoted Reverted Discharge  
 Soldier's Name Jas. Sutherland  
 Battalion 1 Can Pioneers 62nd Battn  
 Beneficiary  
 Relationship Sister  
 Address

## PARTICULARS OF ASSIGNMENT

Name Mrs. Bella Favelle  
 Address Carleton Place, Ont.

1	Change of Address		
2	MRS. BELLA FAVELLE,		
3	CARLETON PLACE,		
4	ONT.	15	15.00
	% 463669 SPR JAS. SUTHERLAND		
	FIFTEEN DOLLARS		

Date	Cheque No.	Amount S/A	Amount A/P	Total
June	Y 24273		15	15
July	A 23448		15	15
Aug	Y 34575		15	15
Sept	F 40342		15	15
Oct	D 47345		15	15
Nov	F 55494		15	15
Dec	U 62999		15	15
			105	105

File 017636-J.76 N.H.-62

REMARKS  
 A/c Closed 31<sup>st</sup> 17/18  
 Ret'd per...  
 Date 35<sup>th</sup> 17/18 M.F.W. 187  
 Clerk No. Bonneauville

m.d. # 11  
 m. R. O. R. P. 45587 (Destruct) Rendered 30<sup>th</sup> 18

CANADIAN  
 ASSIGNED PAY AUDITED  
 [Signature]  
 AUDIT CLERK  
 DATE 24/6/19

AUTHORITY } 2 m 30 April 18  
 FOR }  
 NEW ACCT. } Blague 12-6-18

M. F. W. 128  
 400M-517-1773-38-1141  
 I. L. 22220-M. & D. 1903.



1074

AUDITOR *[initials]* PAYMASTER *[initials]*

M. OR S. *Single* PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES REGT. No. *463669* RANK *Oto* NAME (IN FULL) *Sutherland J*

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?
ADDRESS		<i>10 S.</i>	<i>1-12-18</i>	<i>08 10</i>	<i>C.R.T.</i>	
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				ASSIGNED PAY \$	DATE EFFECTIVE
<i>No</i>					<i>15 00/100</i>	<i>1-1-19</i>
TO WHOM PAID	RELATIONSHIP				PAYABLE TO	RELATIONSHIP
ADDRESS					<i>Mrs Della Favelle</i>	
					<i>Carleton Place Ont.</i>	
						<i>General Delivery</i>
						<i>Quebec</i>
					STOP PAYMENT FORM RENDERED, DATE	EFFECTIVE
					<i>31.1.19</i>	
					DISCHARGED	REASON
					<i>Vacation</i>	<i>DD 34</i>

MONTH	PAY AND F.A.		OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGIMENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS
	NO. OF DAYS	RATE			AMOUNT	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2					COL. NO. 3	DEBIT	
		<i>1.10</i>															<i>14 days Subs 08 10</i>
<i>4/2/18</i>	<i>62</i>		<i>168 20</i>	<i>11 25</i>				<i>10 -</i>									
<i>31/1/19</i>			<i>35 -</i>					<i>65 36</i>									<i>(initials)</i>
								<i>70 00</i>	<i>70 00</i>	<i>70 00</i>							
								<i>70 00</i>	<i>70 00</i>	<i>70 00</i>							<i>70 - pro duty by 10.00</i>
								<i>70 00</i>	<i>70 00</i>	<i>70 00</i>							
								<i>420 -</i>									

BALANCE FROM PREVIOUS ACCOUNT

Certified that all payments have been made on this account for which covering authority has been received to date. *Andruel* Paymaster, Demobilization

WAR GRATUITY

Lieut., *Service 2 yrs* M.D. No. 11

I certify that all payments of War Service Gratuity have been made on this account according to the period of Service shown on the M.F.W. 2595 received.

*[Signature]* Capt. Officer in Charge War Service Gratuity M.D. No. 11

