

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133, or 51)	<i>MC 15 4/19</i>				<b>DEATH</b>
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)			Category		
<del>TRAINING HISTORY SHEET (M.F.W. 113)</del> <i>Record sheet</i>					
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)					<i>Memor.</i>
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					<b>DESERTION</b>
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. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
<i>Pl. M. S. 1375</i>					
<i>69116 5009A1</i>					
<i>msw 492</i>					
<i>S. G. A. 132</i>					
<i>MC 15 4/19</i>					
<i>R 122</i>					
<i>Pay sheet</i>					



This space to be for number

# Proceedings on Discharge.

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

EVC.

No. 799996.

Rank Pte.

Surname ANDERSON, WILLIAM.

Christian name

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

Corps (Squadron, Battery or Company) 134th Bn.

(#2 D.D.)

Date of discharge MAR 31 1918

Place of discharge

TORONTO, ONT.

## 1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 43. years.....months.

Height 5 feet.....7½ inches.

Complexion Dark.

Eyes Brown.

Hair Black.

Trade Tinsmith.

Intended place of residence 7 Corbett Ave.

(To be given as fully as practicable.)

Scarlett Plains, West Toronto.

## Descriptive marks

Vaccs. Scars on left arm.

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

Authority for discharge #2 D.D. D.C.Pt.II. #87.

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.

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

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. &amp; O., Canada.)

M. F. B. 218.

200M.—5-18.

H. Q. 1772-39-113.

(OVER)



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

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

6. Medals and Decorations.....

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

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

(Place).....

(Date).....

Commanding.....

#### 8. Certificate to be signed by the Soldier on Discharge

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

(Place) TORONTO, ONT. William Anderson (Signature of Soldier.)

(Date) MAR 31 1919 H. Sargent (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).....

(Signature).....

O. C. Discharge Section,  
No. 2 District



Reservations referred to at Para. 8.

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



## List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263	Attestation Paper	Militia Form W. 23
Squadron } Battery } Company }	Conduct Sheet, " B. 263a	or Particulars of Recruit	" W. 133
or Field Conduct Sheet	" W. 178	Proceedings on Discharge	" B. 218
Copies of Convictions, by C. P.	in MS.	<p>In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p>(a) Proceedings on Discharge</p> <p>(b) Attestation.</p> <p>(c) Medical History Sheet.</p>	
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.			

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.*



H. Q. Reference

No.

Rank

Unit

Surname

Christian names

Kindly forward Medals, to which I am entitled by reason of my  
service in.....

(Theatre of War)

with.....

(Unit with which served in Theatre of War)

No.....

Street.....

Town.....

County.....

(Signature)

(WRITE IN BLOCK LETTERS AND IN INK)



O. H. M. S.

POSTAGE  
FREE

SECRETARY, MILITIA COUNCIL,

DIRECTOR OF RECORDS,

OTTAWA, ONT.



H. Q. Reference

No. **799996** Rank **PRIVATE** Unit **134**

Surname **ANDERSON**

Christian names **WILLIAM**

Kindly forward Medals, to which I am entitled by reason of my  
service in **ENGLAND AND FRANCE**

with **6<sup>TH</sup> BN. RAILWAY TROOPS.**  
(Unit with which served in Theatre of War)

No. **7**  
Street **CORBETT AVENUE**  
Town **WEST TORONTO**  
County **YORK**

*William Anderson*  
(Signature)

(WRITE IN BLOCK LETTERS AND IN INK)



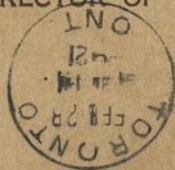
O.H.M.S.

POSTAGE  
FREE

SECRETARY, MILITIA COUNCIL,

DIRECTOR OF RECORDS,

OTTAWA, ONT.





Number

7999996

Rank

Spr

Surname

ANDERSON

Christian Name

William

Units

C.R.T.

Theatre of War

France

Date of Service

22.3.18

Remarks

Latest Address

7 Corbett Ave.,

Scarlett Plains,  
W. Toronto.

Roll No.

200m.-6-21

Page 20200 Ont.



(This form to be filled in by all ranks on voyage to Canada.)

O.....

ER RANK

SURNAME

INITIALS

UNIT

al address.....

(Street)

(City or Town)

(Province)

one person to be notified of arrival.....

Station in Military District to which a furlough warrant is required.....

Railway.....

d, is your wife on board..... Number of children on board.....

stination.....

(Sgd.).....



SURNAME. *Anderson,*

CHRISTIAN NAMES *William*

REGL. NO. *799996* RANK *Pte.*

UNIT *134th*

*Batt.*

FORMER CORPS *Angus Rifles 2 yrs.*

NEXT OF KIN.

NAMES IN FULL *Anderson, Mrs. Annie*

RELATIONSHIP TO SOLDIER *Wife*

ADDRESS *7 Corbett Ave., Toronto, Ont.*

CHANGE OF ADDRESS

COUNTRY OF BIRTH *Scotland, Dorfarshire*

DATE *Nov. 2nd, 1875*

PLACE OF ATTESTATION *Toronto*

DATE *Dec. 1st, 1916*

*Sailed from Halifax Per*

*S.S. Scotiaro 8-8-16 503  
R/b. 5-3-19 2780 Spr 4*

MARRIED *Yes*

SINGLE

WIDOWER

TRADE OR CALLING *Ironsmith*

RELIGION *Presbyterian*

DESCRIPTION.

APPARENT AGE

*40* YEARS

*2* MONTHS

HEIGHT

*5* FEET

*7*<sup>*1*</sup>/<sub>*4*</sub> INCHES

CHEST MEASUREMENT

*35* INCHES

EXPANSION

*3* INCHES

COMPLEXION *Dark*

EYES *Brown*

HAIR *Black*

DISTINGUISHING MARKS *Tattoo marks each finger left hand.*

MEDICAL EXAMINATION.

PLACE

*Toronto*

DATE

*Feb. 1st, 1916*



No. 799996. RANK Pte

NAME Anderson William

T. O. S. 7-2-16 UNIT 134 Battalion C. E. F. (Highlanders)  
(DD. 24 of 7-2-16)

M. D. 2.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916. Feb. 7.	1916. Feb. 29.	✓		
Mar.		✓		
Apr.		✓		
May.		✓		
June.		✓		
July.		✓		
Aug. Payroll not available.				

UNIT SAILED

AUG 8 1916

CERTIFIED BY OFFICIALS AGREE WITH  
DOCUMENTS

DEPARTMENT OF MILITIA AND DEFENCE.

## WAR SERVICE GRATUITY.

DISCHARGED

OTTAWA, CANADA.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

If the applicant will enquire at the local Branch of the Canadian Patriotic Fund he will be informed if there is an official who will take this Declaration free of charge.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

1. Christian Names *William* 2. Surname *Anderson*
3. Rank *Pte* 4. Original Unit *134th Bn* 5. Reg. No. *7999996*
6. Address, in full, to which future payments of gratuity are to be forwarded  
*7 Corbett Ave. Scarlett Plains  
West Toronto*
7. Date of enlistment in the C.E.F. *1/2/16*
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *Annie Anderson*
9. Relationship of such dependent *Wife*
10. Present address, in full, of such dependent  
*7 Corbett Ave. Scarlett Plains W. Toronto.*
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *No*
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—  
*134th Bn Aug 1916 - March 1918.*
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? *No*
14. Were you on active service only in Canada or the United States? If so, give particulars of units and dates of such service *No*
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served  
*134th Bn - 6th C.R.T.  
1/2/16 to 3/3/19 - 3 Yrs - 1 Mth*
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department *No*
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? *No*



18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units. ....

*No*

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid .....

*No*

20. Have you been issued with a War Service Badge? If so, what class? ....

*No*  
*No*

21. Have you, during the present war, served in the Imperial Forces? .....

22. Are you entitled to received, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled .....

*No*

23 (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England .....

*No*

(b) If so, was such reversion in consequence of misconduct or inefficiency? .....

24. Are you now serving in the C.E.F. .... If not, give:—(a) Date of discharge

*No*

*24/3/19*

(b) Reason for discharge .....

## ON GENERAL DEMOBILIZATION

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit .....

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit .....

*6th C.R.T. March 1918 - Feb 1919*

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? .....

(b) If so, are you in receipt of full pay and allowances from that Department? .....

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant:

*William Anderson*

Place of Residence:

*7 Corbett Ave Scarlett Plain West-Toronto*

Declared before me at:

*Toronto*

This

*22nd*

day of

*March*

19*19*

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner of the Administration of Oaths.

*[Signature]*

### POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
-----------	--------------	----------------	----------------------	----------------

Certified Correct.

District Paymaster.



ET

Rank

P/Lt

Name

ANDERSON, William /

Reg'l No. 799996 /

Unit

134th Battn /

If in perm. Corps,  
What Unit?

Married or Single Married.

Place and Date of Enlistment Toronto. Feb 1st 1916. /

Place of Birth Forfarshire. Scot-  
land. /

Name and Address, Next-of-Kin

Annie Anderson /

7, Corbett Ave, Toronto. Ontario. Canada /

Relationship Wife. /

Assigned Pay Monthly \$

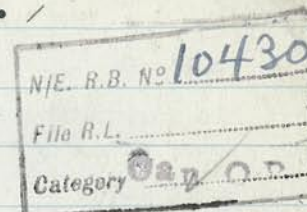
Payable to

Relationship

Separation Allowance \$

Payable to

Relationship



Discharge, Date and Place

Reason

Character

H. W. &amp; V., Ltd.—7165-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
Date.	From whom received.				
ARRIVED IN	ENGLAND	S.S. SCOTIAN.		19-8-16	
28-3-17	134 BN	Posted to Hdqrs Staff Quartermaster Dept Witley		28-3-17	Pt 086
17-5-17	do	On loan to Aldershot Cookery Course	do	17-5-17	-137
16-2-18	"	Awarded 1st Good Army Badge	"	1-2-18	Pt 016
7-3-18	12 Pcs	T.O.S. from 1st Bn	do	6-3-18	Pt 057 { 12th Bn Pt 010 25/6-3-18
15-3-18	"	T.O.S. to 6th Bn	do	15-3-18	Pt 064. 6th Bn Pt 010 15/3/18.
16.3.18	6th Bn	T.O.S. to 6th Bn	Spr. Puffin.	22-3-18	Pt 082. 6th Bn Pt 010 31/4/18.
23.5.18	6th Bn	Awarded Commendation Prize	Field	1-2-18	-51
2-2-19	6th Bn	T.O.S. from 6th Bn	"	1-2-19	-1-28 6th Bn Pt 010 8/1/19

A.F.B. 103 CHECKED  
17 MAR 19181 BOR  
AS



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.				
17.2.19	C.P.S.S.	S.A.S. to M.D. 2. Physl.	Spr. Physl.	16.2.19	MD 2 pt II 43. pt II 42/19-2-19
14.3.19	M.D.C.W. 2 Rangl.	S.O.S. on Proc to Canada.	—	25.2.19	— 62



Nothing to be written in this margin.

W1889-P2 1150 1M 5/18 G.W.P. Co (3490)

## SERVICE AND CASUALTY FORM (Part I).

Army Form B. 103—I.  
Part I.

(1)*Substantive rank *Acting rank [To be entered in pencil to facilitate alteration.]				(2) Regiment or Corps	(3) Regtl. No.
(4) Surname					
(5) Christian Names					
(6) Army Form, number of, Attestation Form or Record of Service paper )					
(7) Whether of British or of Alien origin [vide A.C.I. 578 of 1918]					
(8) Date of birth as stated on enlistment					
(9) (a)					
(10) Enlistment (b)				(11) Engagement (c)	
(12) Service reckons from (date)				(13) Special conditions (if any) of enlistment (d)	
(14) Any subsequent variations (if any) of conditions of service )				(Initials and Rank of an Officer.)	
(Authority)				(date)	
(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) (Record of Occupation in Civil life (vide Army Order 93 of 1917)	
				Industrial Group No.	
				Trade or Calling	
				Married or Single	
				Particulars of Trade Test	
				Occupation Cards despatched on (date)	
				Second Occupation Card despatched on (date)	
(17) Next of Kin				(Signature of	
(18) Demobilizer (f)				(Place)	(Posting Officer)
(19) Pivotal-man (f)				(Date)	
(20) Qualifications (g)				or (21) Corps trade and rate	
(22) Extended {				(23) Re-engaged {	
(24) Miscellaneous entries:—					

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



(A) Report		(B)	(C)	(D)	(E)	(F)
Date	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer

19 FEB 1919

Attached C.C.C. Kinmel Park for return to Canada. Part II Orders No. \_\_\_\_\_. Ceases to be attached C.C.C. Kinmel Park on embarking for Canada, Part II Order No: 62

*W. Parkes* Capt 14/4/19  
Commanding \_\_\_\_\_ Wing,  
Kinmel Park Camp.

24-10 EMBARKED LIVERPOOL

FEB 25 1919 O.S. T.O.S. No. 2 DISTRICT DEPOT. TORONTO

1919 PART II D.O. 7

31/3/19 S.O.S. (Discharged) No. 2 District Depot  
for

O.C. No. 2 District Depot. Part II, D.O. No. 87

For O. C. No. 2 District Depot

Nothing to be written in this margin.



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

# Casualty Form—Active Service.

M. F. W. 54.  
150M. 10-15.  
H.Q. 1772-39-920.

Unit, Regiment or Corps

184th OVERSEAS BATTALION

48th HIGHLANDERS, C.E.F.

Regimental No. 799996

Rank Private

Name Anderson, William

C. E. F.

Enlisted (a) 1/2/16

Terms of Service (a) Duration of War

Service reckons from (a) 7/2/16

Date of promotion to present rank. }

Date of appointment to lance rank }

Numerical position on roll of N. C. Os. }

Extended

Re-engaged

Qualification (b) (Jin Smith)

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, Canada	Halifax	8/8/16	H.M.T. Scotian
		Disembarked, England	Liverpool	19/8/16	
16-2-18	OC 134 <sup>th</sup> Bn	Granted good conduct badge.	Witley	1/2/18	Part II 100 # 16
6.3.1918	OC 134 <sup>th</sup> Bn	Transferred to 12 <sup>th</sup> Cdn Res Bn Witley		6.3.1918	Part II 100 No 25 12 <sup>th</sup> Canadian Inf Bn
7-3-18	12th. Bn.	T.O.S. 12th. Res. Bn.	Witley.	6-3-18	Part II 57.
15-3-18	do.	S.O.S. to C.R. Troops.	do.	15-3-18	Part II 64. Lieut. i/c Records 12th. Res. Bn.
15-3-18	CR 72	Transfer to 12th Bn	Perfect	15-3-18	Part II 74
23/3/18	CR 72	Post to 12th Bn CR 72	Perfect	22/3/18	Part II 82 Witley Bn. P.O.C.

DEPOT CAN. RLY. TROOPS.

(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				
28.3.17 17.5.17	134 <sup>th</sup> Bn do	Posted to Adgts Staff. Quartermaster Dept. on comm to Aldershot Cookery Course.	Witley do	28.3.17 17.5.17	P. 110 + 86. — 137 550. R. B. Blom. LIEUT. FOR LT: COL: I/C RECORDS. C.O.M.F.
5-4-18.	6 CRT	Arrived in France and TOS	Unit	25-3-18.	Part 2 Order No.31.
26-3-18.	CGBD	Left for Unit	Field	26-3-18.	N.R.1093
30-3-18.	6 CRT	Joined Unit	do	27-3-18.	B.213.
23.5.18 26.1.19	do C.G.B.D.	Granted 1 G.C. Badge No. R. D. to England for Kinmel and posted to G. R. S. Dept. Kinmel Ash.	1-2.18. 47.1.19	1111.51 of 1918. P. 78 of 1919 H.R.E.S. B. Schaffell. Lieut. for Lt.-Col. A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B.E.F.	
2 FEB 1919 16/2/19	CRTD CRTD	Taken on strength s.o.s. to Kinmel Park, M.D. Wing, No. 2	Kinmel Ash KNOTTY ASH	1 FEB 1919 PART 2. 42	P. II 28.

R. G. Harrison  
Jark  
DEPT CAN. RLY. TROOPS.



# CANADIAN EXPEDITIONARY FORCE

## Discharge Certificate

This is to Certify that No. 799996. (Rank) Pte.

Name (in full) ANDERSON, WILLIAM. enlisted in  
the 134th Bn.

CANADIAN EXPEDITIONARY FORCE at Toronto, Ont. on the 1st.  
day of Feb. 19 16.

HE served in England and France.

and is now discharged from the service by reason of  
"DEMOBILIZATION."

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

Age 43.

Height 5'7½"

Complexion Dark.

Eyes Brown.

Hair Black.

Marks or Scars

Vacc. Scars on left arm.

Signature of Soldier

*William Anderson*

Signature of Soldier

*H. Sargent - En*

Issuing Officer

O.C. No. 2 District Depot.  
Rank

Date of Discharge Mar. 31st, 1919.

Appointment

Signed at Toronto, Ont. this 31st. day of Mar. 19 19.

in Military District No. MAR 31 1919

File Reference No. TORONTO

RVC.

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 cer-  
tificate will not be com-  
pleted.

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

## DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters)

ANDERSON W.

REGIMENT

6<sup>th</sup> C.R.T.

RANK

Sgt.

No.

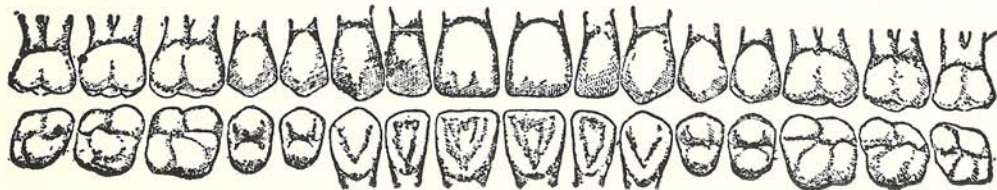
799996

Date of Examination in England

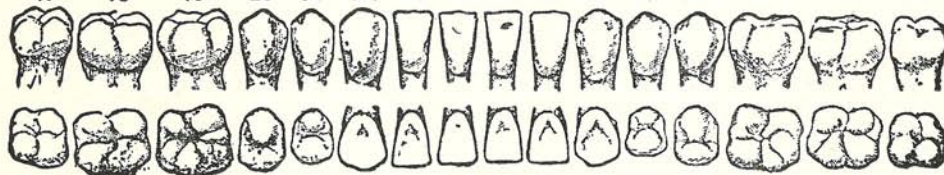
10/2/19

Date of Examination in France

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16



17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32



## PRESENT DENTAL REQUIREMENTS

1. FILLINGS

16.

2. EXTRACTIONS

3. CROWNS

4. DENTURES

(a) Full Upper

(b) Part Upper

(c) Full Lower

(d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

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

(a) In Canada

(b) In England

(c) In France

No.

KNOTTY ASH CAMP,  
LIVERPOOL

Signature of Dental Officer

A. La Rocque

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



# 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. 799996 Rank Spr Surname ANDERSON  
(Given name in full)

Unit or Corps #2 D.O. Birthplace William Forsyth, Scotland

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

## 1. GENERAL DESCRIPTION;

Physique Good Weight 121 1/2 lbs. Height 5 ft. 7 1/4 in. Colour of Eyes Brown  
Nutrition Normal  
Pulse 76  
Condition of arteries Normal  
Vision Rt. 20/20 Left 20/20  
Hearing (conversational voice) Rt. 21 ft. Left 21 ft.

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

1 brace L. arm.

Opinion as to general health and physical condition Am

## 2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)

Nervous System no Genito Urinary System no Cardio-Vascular System no  
Special Senses no Integumentary System no Respiratory System no  
Disturbance of mentality no Muscular System no Digestive System no  
Osseous and Joint System no Any other general condition no

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

no hernia varicose varicose veins  
pus or gout  
Urinalyses - no albumen & sugar  
M. H. S. clear.

APPROVED

MAR 27 1919

J. R. Kustan CAPT.  
FOR A. D. M. S. M. D. 2

(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 *Toronto* ..... (Canada)

Date *27-3-19* ..... Signed *J. J. Anderson* ..... 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 *J. J. Anderson* .....

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

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



# **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 Sapper Name William Surname Anderson  
 Unit or Corps 6th C.R.T. (If a soldier) Regtl. No. 799996  
 Born at Carmyllie Forfarshire Scotland on, date 2nd November 1875.  
 Signature (for identification) William Anderson

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

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

Weight 135 lbs.  
 Height 5 ft. 7 ins.

2. **NUTRITION AND DIATHESIS** ?

Normal

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? None  
 Abnormal Size? None  
 Pulse Rate? 92 Intermittence or irregularity? None

6. **ARTERIES.**—Any hardening?

None

7. **DIGESTIVE SYSTEM** ?

Normal

8. **GENITO-URINARY SYSTEM** ?

Urinalysis—s.g. ? 1012 Reaction ? acid Albumen ? None Sugar ? None

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.

None.

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

Fit

Examined at KNOTTY ASH CAMP, LIVERPOOL Signed James E. Madworth M.O.  
 Date Feb 8 1919 Signed E. Wagner M.O.

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



# DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT.....

NAME OF SOLDIER.....

REGIMENT..... RANK..... No. 799996

Condition on first Examination

Date

Amalgam

Temporary Filling  
(a) G. P.  
(b) Cement

Cement

Treatment  
Putrescent Pulp

Root Filling

Pulp Cap

Devitalization

Pyrrhoea

Synthetic Porcelain

Extracting

U  
L  
P  
DENTURES

Gold Clasp

Gold Filling

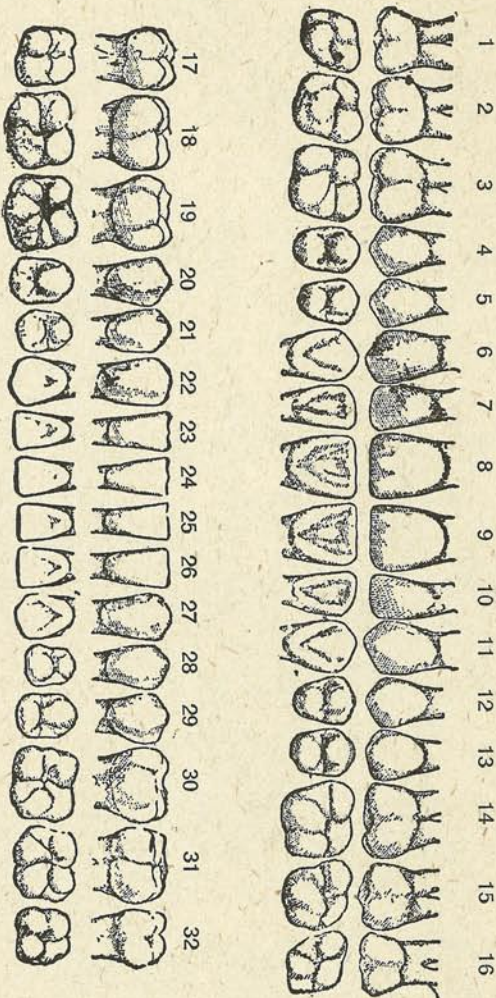
Gold  
Porcelain  
CROWNS

Bridge Work

OPERATOR

Military District

REMARKS



## 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.

MAR 27 1919

DENTALLY FIT

Stalder  
major



## MEDICAL HISTORY SHEET

Surname Anderson Christian Name WilliamExamined on 1st day of February 1916  
at Toronto Canada.

Approved by

C. T. LawrenceBirthplace { City or Town Forfarshire  
Scotland  
County TorontoRank Private M.O.  
Toronto recruiting depot.Apparent age 40 yrs 2 mosTrade or occupation TinsmithHeight 5 Feet 7½ Inches.Weight 115 Lbs.Chest measurement { Minimum 32 inches.  
Maximum expansion 35 inches.Physical development Good,Small-Pox Marks NilVaccination Marks { Arm Right Left I  
Number IWhen Vaccinated last Childhood(a) Marks indicating congenital peculiarities or previous disease NilTattoos marks each finger left hand  
(b) Slight defects but not sufficient to cause rejection.Nil

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

Date	Result	VACCINATIONS
10/3/16	+	<u>Swoughard</u> M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
26/2/16	+	<u>Swoughard</u> M.O.
4/3/16	+	<u>Swoughard</u> M.O.
11/3/16	+	<u>Swoughard</u> M.O.

Enlisted on 1st day of February 1916 at Toronto Canada

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>134th Battn</u>	<u>799996</u>		
Transferred to	<u>12th Res Bn</u> <u>C R Troop</u> <u>1 CRT</u>	<u>1570/18</u>		<u>6.3.18</u>

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT
<u>KNOTTY ASH CAMP,</u> <u>LIVERPOOL.</u> <u>Toronto</u>	<u>8/2/19</u>	<u>A</u>	<u>James Wadsworth &amp; Co</u>
	<u>27-3-19</u>	<u>Nil</u>	<u>A. J. G. G. G. G.</u>

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



Surname Anderson Christian Name William

[illegible]



## ATTESTATION PAPER.

No. 799996

134th. OVERSEAS BATTALION C.E.F. (48th HIGHLANDERS)  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio.

## QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? Anderson
- 1a. What are your Christian names? William
- 1b. What is your present address? 7 Corbett Ave, Toronto Canada.
2. In what Town, Township or Parish, and in what Country were you born? Forfarshire, Scotland
3. What is the name of your next-of-kin? Annie Anderson
4. What is the address of your next-of-kin? 7 Corbett Ave, Toronto Canada.
- 4a. What is the relationship of your next-of-kin? Wife.
5. What is the date of your birth? November 2nd 1875
6. What is your Trade or Calling? Tinsmith
7. Are you married? Yes.
8. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes
9. Do you now belong to the Active Militia? No.
10. Have you ever served in any Military Force? Yes. Angus Rifles, 2 years as Pte.  
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 } Yes.  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

## DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

*William Anderson*

(Signature of Recruit)

Date February 1st 1916*A. Malone*

(Signature of Witness)

## OATH TO BE TAKEN BY MAN ON ATTESTATION.

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

*William Anderson*

(Signature of Recruit)

Date February 1st 1916*A. Malone*

(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 Toronto this 1st day of February 1916

*Thomas Murphy*

(Signature of Justice)



Description of William Anderson on Enlistment.Apparent Age 40 years 2 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. 7½ ins.Chest measurement { Girth when fully expanded 35 ins.  
Range of expansion 3 ins.Complexion DarkEyes BrownHair Black

Religious denominations { Church of England

Presbyterian Pres

Methodist

Baptist or Congregationalist

Roman Catholic

Jewish

Other denominations  
(Denomination to be stated.)

Tattoo marks.

each finger left hand.

## CERTIFICATE OF MEDICAL EXAMINATION.

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

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

I consider him\* fit for the Canadian Over-Sea Expeditionary Force.Date February 1st 191 6.Place Toronto CanadaToronto recruiting Medical Officer.

\*Insert here "fit" or "unfit."

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

## CERTIFICATE OF OFFICER COMMANDING UNIT.

William Anderson

.....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.

[Signature] (Signature of Officer)Date February 1st 191 6.B. C. 184th OVERSEAS BATTALION  
(40TH HIGHLANDERS) C.F.C.



Name L. ANDERSON Wm Rank Spr Regtl. No. 799996 LH  
 Fyle Depot 24 An 168  
 Original unit 134 Bn Present unit 134 Bn M. or S. M Age 42 Religion Pres Ref. H.Q.   
 Port, ship and date of arrival Megantic Halifax 5-3-19  
 Next of kin Wife Annie Anderson 7 Corbett Ave., Toronto  
 Address on leave Same  
 Address on discharge Same Scarlett Plains, West Toronto.  
 Transportation issued No Yes Date  Character on discharge   
 Previous occupation Tinsmith Date and place of enlistment Toronto Feb 1-16  
 Diagnosis Demob. Date of Medical Boards 27-3-19.

Date.	Remarks.	Pt. 2 Order No.
T.O.S.		
25-2-19	Posted to Gas. Co. (Ex. Camp) 5-3-19.	
	Leave & Subs. from 8-3-19 to 22-3-19.	70
31-3-19	SOS DISCHARGED "DEMOB" ENTITLED TO W.S.G.	87

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

(over)



Date.

Remarks

Pt.  der No.



# CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44.  
1188 (D.P.) 250M.-12-18.  
1772-89-903.

## LAST PAY CERTIFICATE

Regimental No. 799996 Rank Opr. Name Anderson Wm  
(Surname first)  
Unit No. 2 District Depot. who was\* **DISCHARGED**  
On MAR 31 1919 191... to...  
\*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from Mar 1 to MAR 31 1919 191...  
the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month		45.23
Regimental Pay..... 31 days at \$. 1 c. 10		34.10
Field Allowance..... 31 days at \$. 1 c.		35
Separation Allowance		100
Clothing Allowance		12
Post Discharge Pay		
*Other Credits <u>Sub. 100.70</u>		
Advances <u>\$ 105.995</u>	50	
Separation Allowance and Assigned Pay Cheque No. <u>\$ 108.574</u>	30	
*Other Charges		
Balance on transfer or on discharge, cheque No. <u>\$ 108.573</u>	146 33	
Total	226 33	226 33

\*Give particulars.



### CREDITS, ADVANCES, Etc.

Credits, Advances, Forfeitures, Issues on Repayment, etc., since issue of this L.P.C. are to be entered hereunder:

[illegible]



DUPLICATE

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.....

134th O.S. Battalion, C.E.F. (48th Highlanders)

(2) Regimental Number ..... 799996 .....

(3) Full Name of Soldier..... William Anderson .....

(4) Place of Birth..... Forfarshire, Scotland .....

(5) Are you married, or not? ... yes .....

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

(b) Present Postal Address.....

7 Corbett Ave., West Toronto

(7) Are you a widower? ... No .....

(8) Have you any children? ... yes .....

If so, give number of boys and girls... 2 boys; 3 girls

Also their names and ages... Robert Anderson 20 years

Alexander Anderson 13 years

Florence Anderson 15 years

Agnes Anderson 11 years



(9) Is your Father alive? yes

If so, state name and address Alexander Anderson, 9 Corbett Ave., West Toronto

(10) Is your Mother alive? yes

If so, state name and address Agnes Anderson, Do. Do.

(11) If your Mother is a widow no

Are you her sole support, or not? no

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

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

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

Yes

(15) Are you insured? yes

If so, in what Company? Can't say

Have you made arrangements for payment of your Insurance premium? yes

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

R. A. Miller  
Major  
Officer Commanding.

Date Aug 1/16



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

799996

TORONTBALANCE  
FROM  
PREVIOUS  
ACCOUNT



**PAYMASTER**

ANDERSON, Wm.

[illegible]



MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

M. F. W. 12.  
 50m.—6-16.  
 H. Q. 1772-39-819.

To Whom

*Wife*  
*Mrs Annie Anderson*

By Whom Assigned

*Anderson Gpm*

Address

*7 Corbett Avenue  
 West Toronto Ont*

Regtl. No.

*799996*

Rank

*Plt*

Corps

*Staff 134 Bn*

Rate

*20 00  
 xx*

AUG 1 1916

**PAYMENTS**

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

*Consolidated  
 Accounts*



## ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.

*Annie Anderson*

PAYMENTS.

Name of Soldier.

*Anderson*  
*Staff-134 Em*

L. L. Job 4503. - Req. 6832.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.		K15341	20	
Sept.		F16085	20	
Oct.		F20439	20	
Nov.		F15073	20	
Dec.		B33213	20	
Jan.	1917	J37583	20	
Feb.		J42691	20	
March		J49025	20	
April		K 90	20	
May		K6226	20	
June		K12872	20	
July		K19842	20	
Aug.		M29403	20	
Sept.		L33766	20	
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

AUG 1 1916

20  $\frac{00}{xx}$ 20  
20.6  
20.6

20.6

6

6 280. ✓

CANADIAN  
ASSIGNED PAY AUDITED*W. Binks*

AUDIT CLERK

DATE *20/5/19*



MILITIA AND DEFENCE  
**ASSIGNED PAY**  
OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

**PAYMENTS.**

Name of Soldier \_\_\_\_\_

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



1-3-16

MILITIA AND DEFENCE

## SEPARATION ALLOWANCE

M. F. W. 11.  
20m.—11-15.  
H. Q. 1772-39-818.

Name *Annie Anderson*  
 Address *7 Corbett Ave*  
*West Toronto*  
*Ont-*

Relation to Soldier }  
 wife, child or mother }

*Wife*Name of Soldier *Anderson, Wm*

Regtl. No.

Rank *R/c*Corps *184<sup>th</sup> Batt*

To what Corps belonging }

when called out }

## PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March		<i>L 26074</i>	<i>20</i>	<i>20</i>





MILITIA AND DEFENCE

# SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Annie Anderson <sup>Wife</sup>  
Wife  
PAYMENTS.

Name of Soldier Anderson, Wm  
Rhe

Sheet No. 2.

L. L. Job 89002.—Req. 6213.

M. F. W. 11a.  
60m.—12.15.  
1772—39—818.

Month.	Year.	Cheque No.	<sup>10</sup> Amt.	Remarks.
April	1916	A124	20	70
May		J4378	20	20
June		D2150	20	20
July		L10266	20	20
Aug.		A11965	20	20
Sept.		E14675	20	20
Oct.		E18013	20	20
Nov.		E21063	20	20
Dec.		E24548	20	20
Jan.	1917	E28013	20	20
Feb.		E31031	20	20
March		E34316	20	20
April		F1407 <del>7138</del>	20	20 RE-WRITE 7138 cancel H.
May		J43760	20	20
June		G6401	20	20
July		F10628	20	20
Aug.		G12966	20	T
Sept.		J16783	20	B 380. ✓
Oct.			20	m
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				



MILITIA AND DEFENCE  
**SEPARATION ALLOWANCE**  
OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

**PAYMENTS.**

Name of Soldier.....

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



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

## Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

8 20.00	1/12/17 25	30	
---------	---------------	----	--

PC 3257

1-4-18  
PC 2753  
MO 27491

PARTICULARS OF SEPARATION ALLOWANCE

No. 799996

Rank Pte. Promoted

Reverted

Discharge

Soldier's Name

Wm. Anderson

Battalion

Staff 134 Bn.

Beneficiary

Annie Anderson

Relationship

Wife

MFW 2554 2 8/18

Address

7 Corbett ave. West Toronto, Ont.

RATE OF ASSIGNMENT

20			
----	--	--	--

PARTICULARS OF ASSIGNMENT

Name

Mrs Annie Anderson (wife)

Address

7 Corbett Ave. West Toronto Ont.

Change of Address

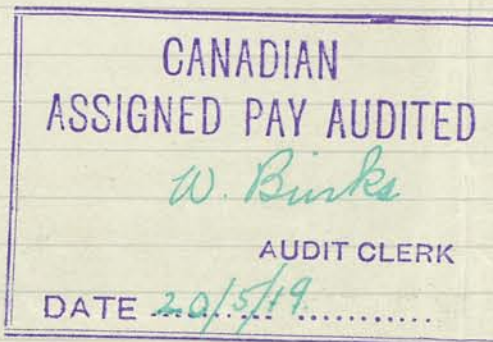
1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
30/9/17		380	280	660	0379-158
Oct	C 51543	20	20	40	MFW 2554 Rec. 19-11-18. OK
Nov	C 52778	20	20	40	
Dec.	F 55098	20	20	40	
Jan	A 54389	30	30	50	
Feb	B 92618	25	20	45	
Mar	G 99849	25	20	45	
April	H 7648	25	20	45	
May	A 12606	25	20	45	
June	B 15449	25	20	45	
July	Y 28429	25	20	45	
Aug	A 30956	25	20	45	
Sept.	A 37659	25	20	45	
Oct.	A 44307	25	20	45	
Nov	A 52384	25	20	45	
Dec.	A 63114	45	20	65	
Jan	B 71656	30	20	50	
Feb.	H 78712	30	20	50	
MAR	A 84272	30	20	50	
		855	640		



AUDITED.

A/c Closed

Ret'd per

Date 5-3-19

Clerk

M. J. Gault

M. F. W. 187

10-3-19

15555

MO

M. J. 2

M. F. W. 128  
400M-6-17-1772-89-1141  
L. L. 2320-M. & D. 7393.



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

## Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

## PARTICULARS OF SEPARATION ALLOWANCE

No. 66  
355  
 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/AAmount  
A/P

Total

REMARKS



ASSIGNED PAY	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.	NAME:-
EFFECTIVE DATE:- 1/8/16		EFFECTIVE DATE:-		ANDERSON. William
AMOUNT:- 20.		AMOUNT:-		NUMBER:- 799996
NAME, ADDRESS, RELATIONSHIP & AUTHORITY				PARTICULARS OF RANK OR APPOINTMENT
M <sup>rs</sup> Annie Anderson (Wife) 7 Corbett Ave. West Toronto, Ont. Slipped 1.3.19				Private
UNIT AND TRANSFERS				
ORIGINAL UNIT:- 134 <sup>th</sup> Bn				
DATE ACCOUNT FIRST OPENED - 1/8/16				
AUTHORITY				DATE EFFECTIVE
74 15/3/18 1-4-18 26-4-18				134 <sup>th</sup> Bn
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS				UNIT TRANSFERRED TO
UPON CANCELLATION OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK				6 R.S.D.
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	
8-2-19	5589	K. Ark	2433	
28-2-19		Co Bae L.S.	12943	
		L.P.C.	10510	
DAILY RATES OF PAY AND ALLOWANCES				
AUTHORITY				PAY
				1
				10
PARTICULARS OF RENDERING NON-EFFECTIVE				
To Canada 28.2.19. NR 2894 Knocks Ash to Klink M.D. 2 12.2.19				
MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS
21/3/18	Balance fwd			
April	Pte Pay	33-		A.P.
				9389 6.4 B.N. 30.3.18. 446
				25. 6 C.R.T. 28/4. 714
		33-		1160
May	✓	3410		A.P. £ # 2 2
		3410		
June	PP	33		
		33		
July	✓	3410		nd
		3410		
Aug	✓	3410		CaP
		3410		
Sept		33-		CaP
		33-		
Oct		3410		CaP
		3410		
Nov		33-		CaP
				ad 1212 1 15-11 608 1679
				10815







003 4

CANADIAN  
ASSIGNED PAY AUDITED  
*E. B. Bradley*  
AUDIT CLERK  
DATE *20/3/19*



CANADIAN  
DESIGNED PAY AUDITED

*E. B. Bradley*  
AUDIT CLERK

DATE *20/5/19*



P. 559.  
MARRIED OR SINGLE *Married*

### PLACE OF BIRTH

Forfarshire, Scotland.

NAME AND ADDRESS OF NEXT OF KIN

Mr. Annie Anderson

7 Corbett Ave., West Toronto, Ont.

RELATIONSHIP OF NEXT OF KIN

Wife

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$

EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

### CASUALTIES, PROMOTIONS, &c.

[illegible]

## ADMISSIONS TO HOSPITAL. &amp;c.

[illegible][illegible]



[illegible]NAME OF HOSPITAL

REG'L. No. 799996

RANK *Pte*

NAME *Anderson* *William*

IF IN PERMT. CORPS }  
WHAT UNIT }

UNIT 134<sup>th</sup> In. 687.

TRANSFERRED TO

DATE \_\_\_\_\_

### AUTHORITY

### PERMANENT FORCE ALLOWANCES

TRANSFERRED TO

DATE \_\_\_\_\_

#### AUTHORITY

PLACE OF ATTESTATION *Toronto, Ont.*

TRANSFERRED TO

DATE \_\_\_\_\_

### AUTHORITY

DATE OF ATTESTATION 7<sup>th</sup> February 1916..

TRANSFERRED TO

DATE \_\_\_\_\_

### AUTHORITY

ASSIGNED PAY MONTHLY \$ 20.

DATE EFFECTIVE 1<sup>st</sup> August 1916

PAYABLE TO Mrs. Annie Anderson, 7 Corbett Ave., West Toronto Ont.

RELATIONSHIP *Wife*

ASSIGNED PAY MONTHLY \$

DATE EFFECTIVE

PAYABLE TO

## RELATIONSHIP

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

## EFFECTIVE

REASON

DISCHARGE DATE AND PLACE

## REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DISTANCE ROLLS					CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
3			4		1	2	3	4				CREDIT	DEBIT			
DATE	NO.	DATE	NO.	DATE												
												10 00				Balance from Canada.
					9 73 -				20 00		29 73	14 37				
9/9/16					4 87 -	4 87 -			20 00		29 74	17 63				
9/10/16					4 86 -	4 87 -			20 00		29 73	22 00				
8/11/16					4 87 -	9 74 -			20 00		34 61	20 39		<del>20 00</del>	39	
10/12					4 86 -	7 30 -			20 00		32 16	22 33				
10/1/17					4 87 -	9 73 -			20 00		34 60	21 83				
2/2					4 87 -	7 30 -			20 00		32 17	20 46				46
6/3						7 30 -			20		32 17	22 39				
4/3/17						4 87 -			20		20	35 39				
					9 73 -				20		34 60	34 89				
					4 87 -				20		34 60	33 29				
					9 73 -				20		34 60	33 29				
					4 87 -				20		34 60	33 29				
					68 13	55 98			220 00		344 11	33 29				



# 799996 C. Anderson

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS		
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1		2		3		4		1	2	3
			\$	C.			\$	C.			\$	C.				NO.	DATE	NO.	DATE	NO.	DATE	NO.	DATE			
Bro Fwd.			367	40									10	377	40								68	13	55	98
July 1-31	31	1 <sup>00</sup> / <sub>10</sub>	34	10										34	10	382	29/6						7	30		
Aug 1-31	31	1 <sup>00</sup> / <sub>10</sub>	34	10										34	10	334	15/6/12						4	87		
																469	30/7	564	28/8				9	73	9	73
Sept 1-30	30	1 <sup>00</sup> / <sub>10</sub>	33											33		475	17/7	516	14/8				4	87	4	86
			468	60									10	478	60								94	90	70	57

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER-RED. PAY	SER. ALLGE. ENG.
Sept 30	Balance								33 13		
Oct	P. Pay	34 10		Can. A. P.				20	47 23		
				AR. 621 13.9.17 134 <sup>th</sup> Bu.	4 87						
				AR. 664 25.9.17 134 <sup>th</sup> Bu.	7 30				35 06		
		34 10			12 17			20			
Nov.	P. Pay	33		Can. A. P.				20			
				AR. 715 15.10.17 134 <sup>th</sup> Bu.	4 87						
				A.R. 804 30.10.17 134 <sup>th</sup> Bu.	9 73						
				AR. 812 14.11.17 134 <sup>th</sup> Bu.	4 87						
					19 27						
Dec.	P. Pay	34 10		Can. A. P.				20	42 69		
1918		67 10			19 47			40			
Jan.	P. Pay	34 10		Can. A. P.				20	56 79		
				AR. 907 5.12.17 134 <sup>th</sup> Bu.	4 87						
				AR. 890 27.11.17 " "	7 30						
				AR. 995 17.12.17 " "	12 17				32 45		
		34 10			24 34			20			
Feb.	P. P.	30 80		Can. A. P.				20			
				AR. 1082 4.1.18 134 <sup>th</sup> Bu.	4 87						
				AR. 1140 29.1.18 " "	7 30						
				AR. 1206 7.2.18 " "	4 87				26 21		
		30 80			17 04			20			
Mar	P. P.	34 10		Can. A. P.				20			
				AR. 1311 26/2/18 - do	4 87						
				1913 22/3 CRID.	7 30				28 14		
		34 10			12 17			20			

CAN. ASSIGNED  
DATE



mon, William      Apr 20.<sup>00</sup>

PAYMENTS		ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
3	4				CREDIT	DEBIT			

220.	344 11.	33 29.
20	27 30	40 09
20	24 87	49 32.
20	49 19	33 13
280	445 47	

CANADIAN  
SIGNED PAY AUDITED  
*E. H. Bradley*  
AUDIT CLERK  
DATE *20/5/19*