

REGIMENTAL DOCUMENTS

NAME ANDERSON. William

REGT. NO. 2584317.

UNIT *G. M. P.*

... H. Q. FILE No.

9633

[illegible]

RO 10
A/10
1-19
7.2.19

This space to be for numbers

Proceedings on Discharge.

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

No.	2584317
Rank	Corporal
Surname	ANDERSON
Christian Name	William
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	4th Bn Cdn Garrison Regt CEF
Date of Discharge	Jany 8th 1919
Place of Discharge	Montreal Que
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age.....28.....years.....8.....months.	Descriptive Marks
Height.....5.....feet.....7½.....inches.	
Complexion Fair	
Eyes Blue	
Hair Brown	
Trade Machinist	
Intended place of residence	% Col Burns 427 Mackay St Montreal Que
(To be given as fully as practicable.)	
2. The above-named man is discharged in consequence of	
Demobilization of the CEF. RO 1328 D/Nov 18/18.	
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.	
To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.	3. Conduct and character while in the service have been, according to the records, etc.
	Very good
	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.
To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.	4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)
	Machinist

M. F. B. 218.

100M.—1-17.
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)..... Montreal Que.....

W. Schreder

Lt-Col

(Date)..... Jany 8th 1919.....

O/ Commanding 4th Bn Cdn Garr Regt CEF

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

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

(Place)..... Montreal Que.....

William Anderson (Signature of Soldier.)

(Date)..... Jany 8th 1919.....

Sgt. S. Lawrence (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)..... Montreal Que.....

W. Schreder
(Signature)..... Lt-Col

(Date)..... Jany 8th 1918.....

C. 4th Bn Cdn Garr Regt CEF

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.)

William Anderson

<p>My Conduct Sheet, Middle form B. 102</p> <p>Question Sheet, Middle form B. 102</p> <p>Company</p>	<p>My Conduct Sheet, Middle form B. 102</p> <p>Question Sheet, Middle form B. 102</p> <p>Company</p>
<p>Copies of Certificates by C. P. in MS.</p> <p>Medical Report for Invalidity, Middle form B. 312</p> <p>Statement of Man's Account on Transfer and Last Pay Certificate, D. 872</p> <p>Only if discharged "Mentally unfit"</p>	<p>Copies of Certificates by C. P. in MS.</p> <p>Medical Report for Invalidity, Middle form B. 312</p> <p>Statement of Man's Account on Transfer and Last Pay Certificate, D. 872</p> <p>Only if discharged "Mentally unfit"</p>
<p>In the case of transfers who are reported on final report, the discharge documents will contain of</p> <p>(a) Reservations on Discharge</p> <p>(b) Reservation</p> <p>(c) Medical History Sheet (in the event of such having been furnished)</p>	<p>In the case of transfers who are reported on final report, the discharge documents will contain of</p> <p>(a) Reservations on Discharge</p> <p>(b) Reservation</p> <p>(c) Medical History Sheet (in the event of such having been furnished)</p>

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 herein

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	Attestation Paper,	Militia Form B. 235.
Squadron } Battery } Company }	Conduct Sheet, " B. 263a.	Proceedings on Discharge	" B. 218.
Copies of Convictions, by C. P. in MS.		<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 (in the event of such having been prepared.)</p>	
Med. Hist. Sheet,	Militia Form B. 313		
Medical Report for Invalid*	" B. 227.		
Statement of Man's Account on Transfer and Last Pay Cer- tificate,	" D. 877.		
*Only if discharged "Medically unfit."			

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

GARRISON MILITARY POLICE

Original

ATTESTATION PAPER.

No.

Folio. 2584317

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

Regt No 5828

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? *Roblin Ont*
2. In what Town, Township or Parish, and in what Country were you born? *Roblin, Ont. Canada*
3. What is the name of your next-of-kin? *Wife Mrs. Mabel Anderson*
4. What is the address of your next-of-kin? *Roblin, Ont.*
- 4a. What is the relationship of your next-of-kin? *Wife*
5. What is the date of your birth? *29th April 1890*
6. What is your Trade or Calling? *machinist*
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. in C.E.F.*
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? }
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? *no*
14. If so, what was the nature of the disability? *—*
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected? *no*
16. If so, what was the reason? *—*

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 *July 6th* 191*7*. *John Dugg* (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 *July 6th* 191*7*. *John Dugg* (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 *Montreal* this *6th* day of *June* 191*7*.

(Signature of Justice)

Description of William Anderson on Enlistment.
#2584317 Garrison Military Police M.D.#4

Apparent Age 27 years 2 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 7 1/2 ins.

Chest measurement { Girth when fully expanded 38 1/2 ins.
Range of expansion 4 1/8 ins.

Complexion

Eyes

Hair Dark Brown

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

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

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

Eyesight R. D.=
" L. D.=
Hearing R. Ear
" L. "

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* for the Canadian Over-Seas Expeditionary Force.

Date M. D. No. 4 191

Place JUL - 6. 1917

*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:—

"A" Fit for General Service

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.

John B. King (Signature of Officer)

Date July 6 1917

No. 2584317 RANK Plt.

NAME Anderson, Wm.

T. O. S. 6-7-17
2027-6-7-17

UNIT

Garrison Military Police

M. D. 4

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917 June 2	1917 June 31	✓		
Aug		✓		
Sept.		✓		
Oct		✓		
Nov		✓		
Dec		✓		
1918 Jan		✓		
Feb		✓		
Mar		✓		
Apr 1	Apr 16	✓	Transfd Special Service Coy 164-181	W.O. 107 of 17-4-18

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 2584317 (Rank) Corporal

Name (in full) William ANDERSON enlisted in
the Garrison Military Police

CANADIAN EXPEDITIONARY FORCE at Montreal Que on the 6th
day of JULY 19 17

HE served in Garr Military Police & 4th Bn Cdn Garr Regt CEF
and is now discharged from the service by reason of Demobilization of the CEF.

Auth RO 1328 D/ Nov 18th 1918

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

Age 28 yrs 8 mos

Height 5 ft 7 1/2 ins

Complexion Fair

Eyes Blue

Hair Brown

Marks or Scars

William Anderson
Signature of Soldier

W. F. Schreder
Issuing Officer

Issuing Officer

Lt-Colonel

Rank

Date of Discharge January 1919

O.C. 4th Bn Cdn Garr Regt CEF

Appointment

Signed at Montreal Que this 8th day of January 19 19

in Military District No. Foyr

File Reference No. 50-52

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. 2584817 (Rank) Corporal Name William ANDERSON

Unit 4th Bn Can Garr Regt Cdn

Address on Discharge c/o Col Burns 427 Mackay St., Montreal Que

Character and Conduct

very good

Former Occupation Machinist

Special Qualifications of Value in Civil Life

Medals and Decorations

NIL

Remarks

European War, Service in Canada

Signed at Montreal Que this 8th day of January 1919

W. H. C. Turner

Name of Officer

1st Colonel

Rank

C.O. 4th Bn Can Garr Regt Cdn

Appointment

Original not available
Fill in only.—Unit, Number, Rank and Name.

M. F. W. 54. (A. F. B. 103.

500M.—9-16

H. Q. 1772-39-9-0.

Casualty Form—Active Service.

Unit, Regiment or Corps.

4th Det. Garrison Military Police

Regimental No. 2584317

Rank

P^{te}

Name

Anderson, William

Enlisted (a) 6/7/17

Terms of Service (a)

C. E. F.

6-E-7

Service reckons from (a)

6-7-17

Date of promotion to
present rank

Date of appointment
to lance rank

Numerical position on
roll of N. C. Os.

Extended

Re-engaged

Qualification (b)

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
17-4-18	#4 Det. G.M.P.	S.O.S. on trans. to #4 S.S. Coy. Montreal		17-4-18	P6 # D.O. # 107
20-4-18	#4 S.S. Coy.	J.O.S. on trans. from #4 Det. G.M.P.	" "	17-4-18	P6 # D.O. # 110
29-4-18	" " "	S.O.S. on trans. to 4 th C.G.R.	" "	30-4-18	P6 # D.O. # 119.
1-5-18	4 th C.G.R.	J.O.S. on trans. from #4 S.S. Coy.	" "	1-5-18	P6 # D.O. # 1.
10-1-19	" " "	S.O.S. in Demob. Montreal		8-1-19	P6 # D.O. # 10.

[Signature]

Capt. for DofR

(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties.

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				

**CANADIAN CONTINGENT EXPEDITIONARY FORCE
LAST PAY CERTIFICATE**

Regtl.No. 1584317 Rank A/SGT. Name ANDERSON W.

Corps 4th Battn. Can. Garrison who was DISCHARGED

On January 8th. Regt. CEF. 1919 to -----

The following is a Statement of the account of the above from 1-1-19
to 8-1-19 191 the inclusive date of Transfer or Discharge.

Bal.Dr. from Prev.month.			Bal.Cr. from Prev.Month		<u>25.</u>
Advance) No. <u>25599</u>	<u>35</u>	<u>00</u>	Regtl.Pay <u>8</u> Days <u>\$1.10</u>	<u>8</u>	<u>80</u>
by) No. <u> </u>			Field All. <u>8</u> Days <u>.10</u>		<u>80</u>
Cheque)			Sep. All. (monthly) <u>8</u> days	<u>8</u>	<u>00</u>
Assgd. Pay & Sep. All. <u>25608</u>	<u>43</u>	<u>00</u>	underpd 11 days Sub. Dec.	<u>8</u>	<u>80</u>
Other Charges			Other Allowances <u>8</u> days Sub	<u>6</u>	<u>40</u>
Payment on Trans. or Disch. <u>25611</u>	<u>23</u>	<u>05</u>	Civ. Clothes	<u>35</u>	<u>00</u>
Bal. Cr. (to be paid by New Unit)			Other Credits PDP and PDPS	<u>53</u>	<u>00</u>
			1 years Service		
			Bal. Dr. (to be deducted by New Unit)		
Total....	<u>101</u>	<u>05</u>	Total....	<u>101</u>	<u>05</u>

A monthly Stoppage of 20.00 has been paid on account of A.P.
for the month of January 1919
and Sep. All. for to Mrs. M. Anderson
the month of 8 days Jan. 1919

Address 20 Buckingham Ave. Montreal P.Q.

Remarks. -

- (1) Date of Enlistment 6-7-17-
- (2) If married and if S.A. Card has been Submitted Pd. Jan.
- (3) Cause of Disch. ~~OTHER~~ Demob. CEF. Auth. R.O. 1528

I have carefully examined this Statement of account and find it to be
a correct extract from the Pay List of this Unit

Date Jan. 11th 1919

Place Montreal P.Q.

[Signature]
Paymaster
4th Bn. Can. Garr. Regt. CEF

MEDICAL HISTORY SHEET

Surname Anderson Christian Name William

JUL - 6 1917

MONTREAL, P. Q.

Examined { on 6th day of July 1917
at Montreal

Birthplace { City or Town Roblin
County Ontario

Apparent age 27 years

Trade or occupation Machinist

Height 5 feet 7 1/2 Inches

Weight 171 lbs.

Chest measurement { Minimum 34 inches
Maximum expansion 38 1/2 inches

Physical development Good

Small-pox Marks 0

Vaccination Marks { Arm. Right 0 Left 0
Number 0 0

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Declared FIT by MEDICAL BOARD
MOBILIZATION CENTRE, M. D. #4

Approved by H. Aubry Major
Rank President, S. M. B. M.O.

Date Fit or Unfit EXAMINED FOR RE-ENGAGEMENT
CATEGORY "A" II M.O.

"A" Fit for General Service M.O.

M.O.

M.O.

M.O.

M.O.

M.O.

M.O.

M.O.

M.O.

Date Result VACCINATIONS

M.O.

M.O.

M.O.

M.O.

M.O.

M.O.

Date Result ANTI-TYPHOID INOCULATIONS, ETC.

M.O.

M.O.

M.O.

M.O.

M.O.

M.O.

Enlisted on 6th day of July 1917 at Montreal

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>Garrison Military Police M D 4</u>	<u>2584817</u>		
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT
<u>Montreal</u>	<u>Jan 6/19</u>	<u>none A II</u>	<u>no Reserve Corps</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	Christian Name	Christian Name
Canderson		Pellegrini

[illegible]

Original not available

M. F. W. 54. (A. F. B. 103.

500M.—9-16

H. Q. 1772-39-920.

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

Casualty Form—Active Service.

Unit, Regiment or Corps.

21st Bn. C.E.F.

Regimental No. 1295

Rank Pte.

Name

Anderson, Wm.

Enlisted (a) 15.3.15

Terms of Service (a)

C. E. F.

DoFW

Service reckons from (a)

15.3.15

Date of promotion to
present rank

Date of appointment
to lance rank

Numerical position on
roll of N. C. Os.

Extended

Re-engaged

Qualification (b)

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
8.5.15	21st Bn	208 Deserter	S.S. Mutagama	5.5.15	WO 150

(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				

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. 284317 Rank Sgt Surname William Anderson
(Given name in full)

Unit or Corps 4 e GR Birthplace Rollin Ont.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 175 lbs. Height 5 ft. 7 1/2 in. Colour of Eyes Brown
Nutrition Good
Pulse 72
Condition of arteries Good
Vision Rt. 20 Left 20
Hearing (conversational voice) Rt. 25 ft.
Left 25 ft.

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

None

Opinion as to general health and physical condition Good

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

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

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

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at(Overseas)

Date

SignedM.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 *Montreal*(Canada)

Date *Jan 6th 1919*

Signed *W. R. Radtke*M.O.

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

Signature *William Anderson*

(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 3, overleaf, only.)

M. OR S.

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

REGT. No. 2584

NEXT OF KIN

RELATIONSHIP

ADDRESS

PARTICULARS

EFFECTIVE
DATE

AUTHORITY

ORIGINAL UNIT
C. E. F.PLACE OF
ATTESTATIONDATE OF
ATTESTATION

ASSIGNED PAY, \$

PAYABLE TO

ADDRESS

STOP PAYMENT FORM
ASSIGNED PAY
RENDERED, DATE

DISCHARGED

IS SEPARATION ALLOWANCE PAID?

DATE EFFECTIVE

TO WHOM PAID

RELATIONSHIP

ADDRESS

Mrs M. Anderson

Wife

20 Buckingham Avenue
Montreal P. Q.

MONTH

PAY AND F. A.

OTHER
CREDITSTOTAL
CREDITS

ACQUITTANCE ROLLS

CASH PAYMENTS

ASSIGNED
PAYREGI-
MENTAL
CHARGESNO.
OF
DAYS

RATE

AMOUNT

\$ C.

\$ C.

\$ C.

\$ C.

COL. NO. 1

COL. NO. 2

COL. NO. 3

COL. NO. 1

COL. NO. 2

COL. NO. 3

\$ C.

\$ C.

\$ C.

Balance from
previous
account

Date Chk. No.

Credit
W. S. f. S. A. Total
40 00 30 00 100 00Month Said
March April May June July Aug

100 00

Paid up

Observation

[illegible]

[illegible]

D/E. 6. 7. 17.

MILITIA AND DEFENCE

M. F. W. 11.

50m.—6-16.

H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Mabel AndersonName of Soldier Anderson, WilliamAddress RoblinRegtl. No. 5-8284193-a - Second AveRank Plt.Verdum - MeCorps Gar. Military Police

Relation to Soldier

To what Corps belonging

wife, child or mother

} Wife

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				



D/E. 6. 7. 17.

MILITIA AND DEFENCE

M. F. W. 11a.

5 m. 6-16.

1772-39-818.

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

Mabel Anderson Wife

Name of Soldier

Anderson William

PAYMENTS.

Plc. 3-8284. Gar. Military Police

L. L. Job 4533. Req. 6832.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July			36	
Aug.		3 15256	36	
Sept		71 19301	20	
Oct.			20	
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

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 An

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

6-7-17

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

24	1/12/17		
	25		

P 3257

RATE OF ASSIGNMENT

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PARTICULARS OF SEPARATION ALLOWANCE

No. 58284

Rank Pte. Promoted

Reverted

Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

William Anderson

Yar. Military Police

Mapel Anderson

Wife

Poblin Ent.

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1 193^a Second Ave. Verdun Bgr.

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
30/9/17		56		56	
Oct	C 51553	20		20	
Nov	C 52789	20		20	
Dec	F 55108	20		20	
Jan	A 54399	30		30	
		146		146	

0379-W-70

MRD 213 destroy 3/5/18

Paymaster Paying

From 1-2-18

To M.A. 4

21.3.18



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank

Promoted

Reverted

Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

Date

Cheque
No.Amount
S/AAmount
A/P

Total

REMARKS