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OTTAWA

ON HER MAJESTY'S SERVICE
SERVICE DE SA MAJESTÉ

CANADA
POSTAGE PAID
PORT PAYÉ

ANDERSON

WILLIAM ALEXANDER

288

C.O.R.C.C.

SAPPER



1867 1967

15/2/47

Service Badge
Class "A" No.

M.D.2

SERVICE GROUP
OCCUPATIONAL GROUP

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)

744 Toronto
Mother 18-10-25
C. Engineer
BBB 208346
A
319

1. No. 288
2. Rank. ~~Spr~~ Pte Spr
3. Name. Anderson William Alexander
4. Unit. C.O.R.C.C.

5. Date of Discharge MAR 26 1919 Place TORONTO, ONT.

6. Reason for Discharge DEMOBILIZATION

7. Authority No. 2 District Depot, Part II, D.O. No.

8. Proposed Residence after Discharge
London Ont.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.
I hereby acknowledge that at the undernoted place and date I received my discharge Certificate
M. F. W.?
SAILING 16 S.S. Cretic
Emb'd at L'pool 13/3/19
L.emb'd at HaL'x 22/3/19
Signature of Soldier.
W.A. Anderson

10. CONFIRMATION.
The discharge of the above named man is hereby confirmed.
TORONTO, ONT.
Place
Date MAR 26 1919
A.C. Dean

Signature (O. C. Discharging Unit.)

28266
E.R.J.

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate.....	Militia Form W. 23
or Particulars of Recruit.....	Militia Form W. 133
Field Conduct Sheet.....	Militia Form W. 178 or A.F.B. 122
Casualty Form.....	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate.....	Militia Form W. 44
Certificate that missing documents are unobtainable.....	
Medical History Sheet.....	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board.....	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet.....	Militia Form B. 465
Medical Report.....	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet.....	Militia Form B. 263
Company Conduct Sheet.....	Militia Form B. 263a

Group..... A

Checked by No. 20

Date..... 11 MAR 1912

ORIGINAL 319
ATTESTATION PAPER.

No. 288

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? *William A Anderson*
2. In what Town, Township or Parish and in what Country were you born? *Bawan: Ontario: Canada*
3. What is the name of your next-of-kin? *Mrs Jas W. Anderson*
4. What is the address of your next-of-kin? *Leedsay P.O. 272*
5. What is the date of your birth? *April 21st 1892*
6. What is your Trade or Calling? *Railroad Const. Engineering*
7. Are you married? *No*
8. Are you willing to be vaccinated or re-vaccinated? *Yes*
9. Do you now belong to the Active Militia? *No*
10. Have you ever served in any Military Force? *No*
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*
W.A. Anderson (Signature of Man).
A. Saunders (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

William A Anderson 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.

W.A. Anderson (Signature of Recruit)
Date *April 7* 191*5* *A. Saunders* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

William A 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.

W.A. Anderson (Signature of Recruit)
Date *April 7/15* *A. Saunders* (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 *7* day of *Apr* 191*5*.

[Signature] (Signature of Justice)

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

[Signature] (Approving Officer)

Description of William Alexander Anderson on Enlistment. 319

Apparent Age. 22 years 11 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 8 1/2 ins.

Chest measurement { Girth when fully expanded 36 ins.
Range of expansion 4 ins.

Complexion Light

Eyes Blue

Hair Light Brown

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

1 Vacc. Left arm

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 April 9th 1915 James J. Bullock

Place Toronto Armouries Cap Bull
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 Alexander 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.

James J. Bullock (Signature of Officer)
Date Jan 11th 1915

CANADIAN OVERSEAS RAILWAY
CONSTRUCTION CORPS.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge

Class

Issued

THIS IS TO CERTIFY that No. 288 (Rank) Pte

Name (in full) William Alexander Anderson enlisted in
the C.O. R.C.C.CANADIAN EXPEDITIONARY FORCE at Toronto on the 7th
day of April 19 15

HE served in France & Belgium

and is now discharged from the service by reason of
Demobilization.
Medical Unfitness.

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

Age 26

Height 5. 8 1/2

Complexion light

Eyes blue

Hair light brown

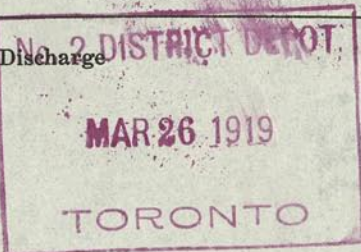
Marks or Scars

1 Vacc. left arm

W.A. Anderson

Signature of Soldier

Date of Discharge



Issuing Officer

For
O.C. No. 2 District Depot.

Rank

Date 26 1919 19

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.

DEPARTMENT OF VETERANS AFFAIRS

To Copy for H.O. file.

Attention of

NAME ANDERSON William. A.

SERVICE 288 W.W. 1
NUMBER

C.P.C. No. 208376
W.V.A. No.

NAVY
ARMY ☒
R.C.A.F.

OTTAWA 4, ONTARIO.
Date.....NOVEMBER 8, 1965.

P.A.

The DEPARTMENT has received information from

SUPERINTENDENT OF VETERANS INSURANCE. NOVEMBER 1, 1965.

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death.....24-10-65.

Cause of Death.....

Place of Death.....PORT HOPE, ONTARIO.

Name and Address of next of kin (if known).....

Copies to: W.S.R.

~~W.S.R.~~

~~D.O.~~

D.O. TORONTO.

H.O.

} Destroy form if advice of death already received.

E.C. Richards
for
Chief, Central Registry

Rank

Name ANDERSON, Wm. A. Alexander

Reg'l No. 288

319

Unit Can. Rly. Constr. Corps. If in perm. Corps, }
What Unit? }Married or Single SinglePlace and Date of Enlistment Toronto, Ont. 7th April. 1915 5 Place of Birth Cavan, Ont.Name and Address, Next-of-Kin Mrs Jas. W. Anderson,Lindsay, P.O. 272.

Relationship

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

N/E. R. B. No.	19278
File R.L.	
Category	001 00

Discharge, Date and Place

Reason

Character A + B 130

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				
		<i>Embarked for England from Canada</i>	<i>St John</i>	<i>14.6.15</i>	
		<i>By S.S. "Porthcarr" from</i>			
		<i>Arrived England</i>	<i>Longmoor Camp</i>	<i>25.6.15</i>	
<i>26.8.15</i>	<i>D.A. A 4</i>	<i>Embarked Overseas France.</i>	<i>Southampton</i>	<i>25.6.15</i>	
<i>5.10.15</i>	<i>%</i>	<i>Proceeded to England</i>	<i>Belgium</i>	<i>5.10.15</i>	<i>Arrived in France 26/8/15</i>
<i>1.11.15</i>	<i>" "</i>	<i>Proceeded Overseas</i>	<i>Longmoor</i>	<i>1.11.15</i>	<i>20.1/11-9-15</i>
<i>30.6.17</i>	<i>60 R.L.</i>	<i>Awarded 1 Good Conduct Badge</i>	<i>Field</i>	<i>23.6.17</i>	<i>Now Roll</i>
<i>26.1.19</i>	<i>" "</i>	<i>Posted to 66 I.D.</i>	<i>Spr</i>	<i>17.1.19</i>	<i>Pr. 106.</i>
<i>29.1.19</i>	<i>3rd Bn.</i>	<i>C.A.A. from 1st Corps</i>	<i>" Willey</i>	<i>24.1.19</i>	<i>4</i>
		<i>16-1-23</i>		<i>13-3-19</i>	<i>49</i>
<i>28.2.19</i>	<i>M.D. 2</i>	<i>T.O.S.</i>	<i>" Rhyl</i>	<i>19.2.19</i>	<i>50</i>

BS

+2

319

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					
20.2.19.	3 rd Res. OicR	Sp. S. to MOC: Wang No. 2. S.O. S T 71 71 71 P.2.D.o, 1, 6, 22, 7, 19	sp. Witley	19.2.19. <u>13.3.19</u>	Pl. D.O. 51 PL 16 MD 2.	

Casualty Form—Active Service.

Regiment or Corps _____

Regimental No. 288 Rank Spr Name Anderson, William AlexanderEnlisted (a) 7/4/15 Terms of Service (a) duration of War Service reckons from (a) 7/4/15Date of promotion to } present rank } Date of appointment } Numerical position on }
to lance rank } to lance rank } roll of N.C.Os. }Extended _____ Re-engaged _____ Qualification (b) Civil Engineer

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.

<u>31-8-15.</u>	<u>O.C.</u>	<u>Proceeded overseas to</u>	<u>France.</u>	<u>7-5+3.</u>
<u>10-12-16</u>	<u>O.C.</u>	<u>Granted leave to 13-12-16</u>	<u>Field.</u>	<u>3-12-16 B.213 Part II Orders No.96 dated 14-12-1916.</u>
<u>17-12-16.</u>	<u>O.C.</u>	<u>Rejoined from leave</u>	<u>Field.</u>	<u>14-12-16 B.213.CS.168 22-12-1916.</u>
<u>8/4/17</u>	<u>OC</u>	<u>Granted 60p per day Working Pay</u>	<u>Ind</u>	<u>1/4/17 D213 D71 or 13/4/17</u>
<u>23 6/17</u>	<u>OC</u>	<u>Aud. 1 5 6 Badger d.</u>	<u>23 6/17</u>	<u>P. 213</u>
<u>29 12/17</u>	<u>OC</u>	<u>On 10 day leave</u>	<u>d.</u>	<u>24 12/17 B213 P. 1</u>
<u>12 1/18</u>	<u>OC</u>	<u>Rejoined Ind</u>	<u>d.</u>	<u>8 1/18 B213</u>
<u>8.6.18</u>	<u>OC</u>	<u>Granted working pay of one dollar per day</u>		<u>1.6.18 B213 P. 10 33 2/June</u>

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

9319

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				
16-1-19	CGBD	Trans England and posted for demob.	to the CRD Witley	17-1-19.	DO 4 of 1919 <i>St. R. Chaffell.</i> Lieut. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.
19.0.0.		Struck off Strength 3rd. Res. to M.D. No 4 Kimmel Park. Rhyt.	Witley.	19-2-19.	Part 2.D.0.50 <i>A. O. Swanby</i> for Lieut.-Col. Commanding, 3rd. Can. Res. Bn.
Attached G.C.C. Kimmel Park for return to Canada. Part II Orders No. _____ Ceases to be attached G.C.C. Kimmel Park on embarking for Canada, Part II Order No: <u>67</u> 2/20.3.19 Commanding <u>2</u> Wing; Kimmel Park Camp. <i>McDermott</i> SAILING 16 S.S. Cretic Emb'd at L'pool 13/3/19 Disemb'd at HaL'x22/3/19					

2
Fill in only.—Unit, Number, Rank and Name.

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

350m.—5-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

319

Unit, Regiment or Corps

Regimental No. 288 Rank Spr Name Anderson, William Alexander
C. E. F.

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

Date of promotion to } Date of appointment } Numerical position on }
present rank } to lance rank } 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				

MAR 11 1919 O. S. T. O. S. No. 2 DISTRICT DEPT, TORONTO. 1919 PART II D. O. 91
MAR 26 1919 S. O. S. (DISCHARGED FROM H. M. S.) No. 2 DIS. DEPOT, PART II D. O. 91

W. Roberts
Lieut.
For O. C. No. 2 District Depot.

22.7.19. C. R. J. Pers.

S. O. S. O. M. F. C. on
proc to Canada.

London 13.3.19 A.O.I.

D. Rutledge
Capt
for H. R.

(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.

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				

Number

288

Rank

Spr

Surname

ANDERSON

Christian Name

William Alexander

Units

C.O.R.C.C.

Theatre of War

France

Date of Service

25. 6. 15

Remarks

Latest Address

Lindsay
Ont

Roll No.

200m.-6-21. *atd.*

Page 20200

(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.....

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

stination.....

(Sgd.).....

No 288.

RANK

Pte.

NAME

Anderson, W. A.

T. O. S. 7-4-15.

UNIT

Can. Q/S Railway Const. Corps.

(C.O. 18 of 10-4-15.)

M. D. 6.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915. apr. 7.	1915. apr. 30. May June	✓ ✓ ✓	Stapper.	

UNIT SAILED
JUN 14 1915

ORIGINAL.

288

219

Army Form B. 178.

To be used for recruits enlisting direct into the Regular Army only,
Army Form B. 178^A to be used for Special Reserve recruits and
Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Anderson Christian Name W. A.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Barrow County Canada

Examined ... { on 7th day of April 1915.
at Toronto Canada

Declared Age ... 22 years 351 days.

Trade or Occupation ... Railroad Const. Eng. Mkt.

Height ... 5 feet, 8 1/2 inches.

Weight ... lbs.

Chest Measurement. { Girth when fully Expanded. 36 inches.
Range of Expansion. 4 inches.

Physical Development ... Good

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

When Vaccinated ... May 17/15

Vision ... { R.E.—V = 20/20
L.E.—V = 20/20

(a) Marks indicating congenital peculiarities or previous disease ... One vac. on left arm.

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

Approved by (Signature) A. E. Postman
(Rank) Capt. C.R.C.C. Medical Officer.

Enlisted ... { at Toronto Canada
on 7th day of April 1915.

Joined on Enlistment	Corps.	Regtl. No.
	<u>Canadian Overseas</u>	<u>288</u>
Transferred to	<u>Railway Construction</u>	
	<u>Corp.</u>	

Became non-effective by ...
on ... day of ... 191 ...

(Signature) ...
(Rank) ...

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

[illegible]

+ 2

List in the case of Warrant Officers treated in quarters.

marks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.

Signature of Medical Officer

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
April 29/15	1 st Anti-typhoid inoculation
May 8/15	2 nd "
May 17/15	Vaccination
14-2-19	A C Bouché caps

Table IV.—Service Table.

[illegible]

2

P. 880.

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

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

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, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

1. Christian names *William Alex* 2. Surname *Anderson*
3. Rank *Spr.* 4. Original Unit *Co R C C* 5. Reg. No. *288*
6. Address, in full, to which future payments of gratuity are to be forwarded
Box 272 Lindsay Ont.
7. Date of enlistment in the C.E.F. *Apr 7/1915*
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *No*
9. Relationship of such dependent *ma*
10. Address, in full, of such dependent *No*
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:—
.....
.....
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 unit and dates of such service.....
.....
.....
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.....
.....
.....
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-enlistment: 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?
21. Have you, during the present war, served in the Imperial Forces?
22. Are you entitled to receive, 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
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 *Dec 1918*
MAR 2 8 1919 (b) Reason for discharge *Discharged*
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 in which you served at the front, and dates of such service with that unit
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: *W. A. Anderson*

Place of Residence: *Lindsay Ont.*

Declared before me at: *K. P. C.*

This *27th* day of *March* 19 *19*

Signature of Barrister of the
 Supreme Court Stipendiary Magis-
 trate, Notary Public, Justice of the
 Peace, or Commissioner for the
 Administration of Oaths under
 P.C. 2767, dated 11th Nov., 1918.

W. J. Wellwood
M. J. M.

POST DISCHARGE PAY.

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

Certified Correct.

District Paymaster.

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. A

REGIMENT

30 Res. Bn.

RANK

Plt

No.

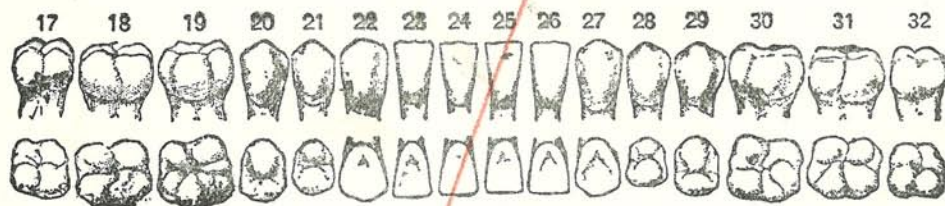
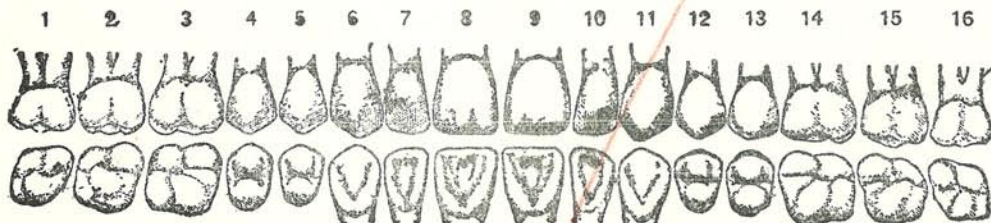
288

Date of Examination in England

Date of Examination in France

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.



PRESENT DENTAL REQUIREMENTS

1. FILLINGS

2. EXTRACTIONS

3. CROWNS

4. DENTURES

(a) Full Upper

(b) Part Upper

(c) Full Lower

(d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? *no*

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 *yes*

Signature of Dental Officer

A handwritten signature in cursive script, likely of the Dental Officer, written over a horizontal line.

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. 288 Rank Sapper Surname ANDERSON
(Given name in full)
William Alexander
Unit or Corps 3rd Canadian Bn. B.C.A. Birthplace Baran, Ontario

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

1. GENERAL DESCRIPTION:

Physique Good Weight 162 lbs. Height 5 ft. 9 1/2 in. Colour of Eyes Blue
Nutrition Good
Pulse 72 Good
Condition of arteries Good
Vision Rt. M/6 Left M/6
Hearing (conversational voice) Rt. 21 ft.
Left 21 ft.

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

A.D.M.S. HEADQUARTERS
CANADIAN TROOPS,
18 FEB 1919
WITLEY, SURREY.

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 Yes

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.

Varicose veins Left Leg contracted prior to enlistment

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at..... *Wichita* (Overseas)

Date *14/2/19*

Signed *T. Wolf* 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 *W.A. Anderson*

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

THIS SECTION FOR USE IN CANADA—

Examined at..... (Canada)

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

[OVER]

MILITIA DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom

Address

James W. Anderson
C.P. R. Agent, Box 272
Lindsay, Ont.,

By Whom Assigned

Regtl. No. 288

Rank *Sap*

Corps

Anderson W.A.
Can. Overseas Rly. Const. Corps

Rate

~~\$30.00~~
\$25.00 from Oct 1/15 to 2 m 28 1/2 - 1915
PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>Consolidated account</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June		<i>A 290</i>	<i>20 00</i>	
July		<i>T 250</i>	<i>20 00</i>	
Aug.		<i>V 2019</i>	<i>20 -</i>	
Sept.		<i>3910</i>	<i>20 -</i>	
Oct.		<i>A 2506</i>	<i>20 -</i>	
Nov.		<i>N 9382</i>	<i>30 -</i>	<i>ck for cheque for 30.00 to adjust for Oct</i>
Dec.		<i>D 11674</i>	<i>25 -</i>	
Jan.	1916	<i>J 11640</i>	<i>25 -</i>	
Feb.		<i>W 14559</i>	<i>25 -</i>	
March		<i>X 14515</i>	<i>25 -</i>	<i>2.30</i>

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 60m.—12-15.
 1772—39—819.

Sheet No. 2.

L. L. Job 89002.—Req. 6213.

James W. Anderson

PAYMENTS.

Name of Soldier

#288

Anderson, W.A.
C.O.S. Ry Court. Corps

Month.	Year.	Cheque No.	Amt.	Remarks.
			230	\$2500
April	1916	J 612	25-	
May		K 3998	25	
June		L 4013	25-	
July		A 7547	25	
Aug.		Q 12006	25	
Sept.		F 16104	25-	
Oct.		F 20416	25	
Nov.		H 75052	25	
Dec.		B 33191	25	
Jan.	1917	D 37852	25	
Feb.		J 42661	25	25
March		J 43994	25	25-L.
April		K 57	25	25-L.
May		K 6195	25	
June		K 12842	25	25-B.
July		K 19806	25	6
Aug.		M 29369	25	6
Sept.		L 33733	25	6 680.✓
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

Is job

lee

*230
25*

(Jw)

653

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.				

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

2775

June 1/15
Oct 1st/15

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

ANOTHER IN

Spur Run.

Ledger

Ledger

Ledger

Ledger

Ledger

RATE OF ASSIGNMENT

20	25		
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PARTICULARS OF SEPARATION ALLOWANCE

No. *288*

Rank *Spv* Promoted Reverted Discharge

Soldier's Name *W.A. Anderson*

Battalion *Can. O/S Rly Const Corps*

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name *James W. Anderson*

Address *C.P.R. Agent Box 272 Lindsay Ont*

Change of Address

1
2
3
4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
30/9/17			680 ✓	680	
Oct.	C 51556		25	25	
Nov	C 52792		25	25	
Dec.	F 55111		25	25	
Jan	A 54402		25	25	
Febr	B 92630 ✓		25	25	
Mar	G 99861		25	25	
April	A 7651		25	25	
May	A 12609		25	25	
June	B 15452		25	25	
July	Y 28432		25	25	
Aug	A 30959		25	25	
Sept.	A 37662		25	25	
Oct.	A 44304		25	25	
Nov	A 52389		25	25	
Dec	B 64003		25	25	
Jan	B 71659		25	25	
Feb	A 78614		25	25	
MAR	D 84274		25	25	
			1130	1130	

AUDITED.

At Closed

Ret'd per

Date

Clerk

Cretic

22-8-14

13 am

M.F.W. 187

140

2 8-3-14

82574



Date of Assignment

OVERSEAS CONTINGENTS

RATE OF ASSIGNMENT

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PARTICULARS OF ASSIGNMENT

4

M. F. W. 128
400M.—6-17-1772-39-1141
L. L. 22320-M. & D. 7993.

Rank *Sapper* Name **ANDERSON, Wm. A.** Reg'l No. **288**
 Unit **Can. Rly. Constr. Corps.** If in perm. Corps, What Unit? Married or Single **Single**
 Place and Date of Enlistment **Toronto, Ont. 7th April, 1915** Place of Birth **Cavan, Ont.**
 Name and Address, Next-of-Kin **Mrs Jas. W. Anderson,**
Lindsay, P.O. 272. Relationship **2**

Assigned Pay Monthly \$ ~~20.00~~ **25.00** Payable to *Jas W Anderson PO Box 272 Lindsay Ont*
 Relationship

Separation Allowance \$ ~~20.00~~ 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>June 30</i>								<i>10</i>									
<i>July 1</i>	31	31	<i>1.00</i>	31	31	<i>1.00</i>	31.00	<i>10</i>	44.10	13		5	20		25	19.10	
<i>Aug 1</i>	31	31	<i>1.00</i>	31	31	<i>1.00</i>	31.00	<i>13</i>	53.33			17.03	20		37.03	16.30	
<i>Sept 1</i>	30	30		30	30		30.00		16.30			7.14	20		30.71	18.59	
<i>Oct 1</i>	31	31		31	31		31.00	<i>18.59</i>	49.30			3.57	25		29.87	22.82	
<i>Nov 1</i>	30	30		30	30		30.00		22.82			9.73	25		34.73	21.09	
<i>Dec 1</i>	31	31		31	31		31.00		21.09			3.49	25		28.49	26.70	
<i>1916 Jan 1</i>	31	31		31	31		31.00		26.70				25		25	35.80	
<i>Feb 1</i>	29	29		29	29		29.00		35.80			14.44	25		42.44	25.26	
<i>Mar 1</i>	31	31		31	31		31.00		25.26			8.42	25		33.42	25.64	
				275			275.00	10 13	312.63			46.99	210		286.99	25.64	

360
 210
 570

210
 200

[illegible]

ASSIGNED
PAY.ENGLAND OR
CANADA.SEPARATION
ALLOWANCE.ENGLAND OR
CANADA.NAME:- **ANDERSON**W^{2nd} Cl.EFFECTIVE
DATE:-

1/10/15

EFFECTIVE
DATE:-NUMBER:- **288**

AMOUNT:-

25.00

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.**Jas. W. Anderson**
P.O. Box 272 Lindsay
Ont. Canada.

AUTHORITY

DATE
EFFECTIVE

RANK OR APPOINTMENT

UNIT AND TRANSFERS

ORIGINAL UNIT:- **C.O.R.C.C.**

DATE ACCOUNT FIRST OPENED:-

AUTHORITY

DATE
EFFECTIVEDATE LEDGER
SHEET T'S'D

UNIT TRANSFERRED TO

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS

UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED
BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
3-2-19	4053	3 C. & Eln	97 33			Ledger Bal.	325 44
3-2-19		Londons	48 67				160 60
11-2-19		3 C. & Eln	14 60			L.P.C. Bal	164 84
			160 60				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY

PAY

F.A.

P.F.A.

SUBS'CE
ALL'CE

1 - - 10 - 100

PARTICULARS OF RENDERING NON-EFFECTIVE:

Trans. to Canada. 1.3.19. A.P. 3029. Willey 14.2.19 Willey M.D.2

1918 MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
March	Real Fwd.								87 40	nil	
April	P. Pay	33		AR 23 6/4/18 correc	8 92						
	W. Pay	18		C.A. Pay				25	104 45	11	
		57			8 92			25			
May	P.P.	34 10		A.R. 7 4/5/15 ..	14 28						
	W.P. \$1.60	18 60						25	117 90	11	
		52 70			14 28			25			
June	P.P.	33		" 378 4/6/18 ..	10 71						
	W.P. \$1.00	30						25	145 19	15	
		63			10 71			25			
July	P.P.	34 10		A.B. 100 5/2/18 correc.	8 92						
	W.P. \$1.00	31		P. 304 5/7/18 ..	48 66						
		65 10			57 58			25	127 71	10	
Aug.	P.P.	34 10		810 8/8 ..	8 92						
	W.P. \$1.00	31 00		Can Ar.				25	128 89	10	
		65 10			8 92			25			
Sept.		33		C.A.				25			
		30		AR 1015 4-9-18 Correc.	8 92						

DATE ACCOUNT FIRST OPENED:-

DATE
EFFECTIVE

DATE LEDGER
SHEET T'SF'D

UNIT TRANSFERRED TO

UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED
BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
3-2-19	4053	3 ^d C. & O.	97 33			Ledger Bal.	325 46
3-2-19		Londons	48 67				160 60
11-2-19		3 C. & O.	14 60			L.P.C. Bal	164 80
			160 60				

AUTHORITY

PAY

F.A.

~~P.F.A.~~

SUBS'CE
ALL'CE

1

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X

2

1

PARTICULARS OF RENDERING NON-EFFECTIVE

Thank to Canada. 1.3.19. A.P. 3029. Willey 14.2.19 Willey M.D.2

1918	MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
March		Paul Ford.								87 40	nil	
April		P. Pay	33		AR 22 6/4/18 correc	8 92						
		W. Pay	18		W. a. Pay				25	104 45	nil	
			57			8 92			25			
May		P.P.	34 10		A.R. 7 4/5/15 ..	14 28						
		W.P. \$60	18 60						25	117 90	nil	
			52 70			14 28			25			
June		P.P.	33		" 378 4/6/18 ..	10 71						
		W.P. \$1,00	30						25	145 19	15	phagme
			63			10 71			25			24A
July		P.P.	34 10		A.R. 600 5/2/18 correc.	8 92						
		W.P. \$100	31		A. 204 6/7/18 ..	48 66						
			65 10			57 58			25	127 71	10	
			65 10			57 58			25			
Aug.		P.P.	34 10		810 8/8 "	8 92						
		W.P. \$100	31 00		Can ar.				25	128 89	16	
			65 10			8 92			25			
Sept.			33		Car.				25		90	
			30		AR 1015 4-9-18 CorR66.	8 92						
			63			8 92			25	187 97		
Oct		P.P. + W.P.	31 00		Car.				25	228 07	25	
			34 10		✓ 1158 (13) 8-10	13 06				215 01		
			65 10			13 06			25			
Nov		P.P. + W.P. 33 + 30	63		Car				25	253 01	30	
Dec		✓ (2410 + 31)	65 10		Car				25	293 11	35	
					✓ 1342 51 6.12	18 66				274 45	40	
Jan			65 10		Car.				25	314 55		
			193 20			18 66			75			

NUMBER 288

RANK

Sp

NAME

Quacron W a

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
	Bal Forward								31455		
	P.P. W.P. 3080 + 28.	5880						75	34835		
				CR 1454 8. 6.1.19 Corce	933	-			33902		
				✓ 7807 6. 16.1.19 GYBS	466	-			33436		
				✓ 9800 36. 25.1. Miley	973	-			32463		
	Interest on Deferred Pay	81							32544		
				✓ 22951 43. 32. CPM	4867	-			27677		
				✓ 4053 49. 42 3Rs	9733	-			17944		
				✓ 4354 70 13.7	1460	-			16484		
		5961			18432			25			
				508. 13.3.19 SL 16.							

✓ 22951	43	3.2	CFM.	4867	-	27677
✓ 4053	49	42	3Res.	9733	-	17944
✓ 4354	70	13.2	✓	1460	-	16484
				18432		25

5961

Sos. 13.3.19 SL. 16.

MARRIED OR SINGLE

PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$

EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS

EFFECTIVE DATE

AUTHOR

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED

DATE DISCHARGED

V. OR A.

NAME OF HOSPITAL

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																	
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1		2		3																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																													
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Mar 31			275	00			27	50						10 13	312	63																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																	

CTIONS, &c.
EFFECTIVE DATE
AUTHORITY

REG'L. No. 288 RANK Sapper NAME Anderson, J. A.
IF IN PERMT. CORPS
WHAT UNIT UNIT C.O.R.B.B. TRANSFERRED TO DATE AUTHORITY
PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY
PLACE OF ATTESTATION Toronto, Ont. TRANSFERRED TO DATE AUTHORITY
DATE OF ATTESTATION April 4th 1915 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY \$ 25⁰⁰ DATE EFFECTIVE Oct 1/15
PAYABLE TO Jas. V. Anderson. P.O. Box 242 Lindsay Ont. RELATIONSHIP
ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE

PITAL, &c.
NAME OF HOSPITAL

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)

QUITTANCE ROLLS					CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
2	3	4			1	2	3	4				CREDIT	DEBIT			
DATE	NO.	DATE	NO.	DATE												
								76 99	210 00		286 99	25 64				
					6 98				25		31 98	26 66				
					6 81				25		31 81	28 95				
						3 40			25		28 40	33 55				
					6 81	10 46			25		42 24	25 38				
						6 98			25		21 98	24 50				
79						6 97			25		31 97	28 53				
10-10						6 98			25		31 98	30 65				
5-11						5 23			25		30 23	33 42				
									25		25	42 52				
10/11	72	5 23	9 73		8 72	5 23	9 73		25		48 68	27 94				
					29 32	45 25	9 73	76 99	25		25	33 74				
									485		64 629					
									25		25	42 84				
					29 32	45 25	9 73	76 99	510		671 29					

Anderson J. A.

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																			
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MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER- -RED. PAY	SER. ALLGE. ENG.
	Oct. P.P. 460	52 70							146 83		
Oct.	P.P. 460 ^{W.P.}	52 70							25 174 53		
Nov.	P.P.	33		R. 76 85 16/11/17 L.O.R. L.L.	24 33				25		
	W.P. 60 ^d	18 -		A.R. 362 7/10/17 L.O.R. L.L.	17 84						
Dec.	P.P.	34 10							25		
	W.P. 60 ^d	18 60							186 06		
Jan.	P.P.	103 70							70 83		
	W.P. 60 ^d	34 10		A.R. 420 10/1/17 L.O.R. L.L.	14 28				50 52 70		
		18 60		" 5562 31/2/17 L.O.R. L.L.	44 61				25 23 87 6		
				" 474 L.O.R. L.L.	17 84				101 73		
Feb.	P.P.	52 70							137 03		
	W.P. 60 ^d	30 80		A.R. 6959 5/1/18 L.O.R. L.L.	26 77				47 60		
		16 80		" 4281 25/2/18 L.O.R. L.L.	44 61				25 184 63		
				" 561 22/1/18 L.O.R. L.L.	10 71				107 09		
Mar.	P.P.	47 60							77 54		
	W.P. 60 ^d	34 10		" 1 L.O.R. L.L.	892				52 70		
		18 60		" 14 " 11/3/18 L.O.R. L.L.	892				130 24		
		52 70							42 84		
									87 40		

J. H. A.

F.P.

Effect.

PAYMENTS		ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
3	4				CREDIT	DEBIT			
		25		25	6884				
8	2430	25		3928	8226				
		25		25	10826				
		25		25	13596				
		25		3571	15295				
4		25		5712	14683				

Granted WIP 60°
per day 1⁴/₇ 13071 13⁴/₁₇

22: 3: 19

DAILY RATE OF PAY AND ALLOWANCES

M. & R. S.

REGT. No.

288

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.
ADDRESS					PLACE OF ATTESTATION
					DATE OF ATTESTATION
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				ASSIGNED PAY \$
TO WHOM PAID	RELATIONSHIP				PAYABLE TO
ADDRESS					ADDRESS
					STOP PAYMENT FORM
					ASSIGNED PAY
					RENDERED, DATE
					DISCHARGED

[illegible]

"CRETIC"

22:3:19

DISPERSAL "I"

AUDITOR

PAYMASTER

A 880

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

REGT. NO.

288

RANK

SPT.

NAME (IN FULL)

ANDERSON

WM, A.

PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?	(BLOCK LETTERS SURNAME FIRST)
			C.R.T.		Same
			PLACE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
			DATE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
			ASSIGNED PAY \$	DATE EFFECTIVE	
			25.00	31.3.19	6 lost by Ottawa
			PAYABLE TO	RELATIONSHIP	ANY CHANGE IN ASSIGNEE OR ADDRESS
			James W Anderson		
			ADDRESS		
			CPR Agent Box 272		
			Lindsay Ont		
			STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE	
			DISCHARGED	PLACE	DATE
				Toronto.	26:3:19
				REASON	Demob.
				AUTHORITY	D.O. 91
				IF ENTITLED TO POST DISCHARGE PAY	Yes

ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS
COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3					DEBIT	CREDIT	
NO. DATE	NO. DATE	NO. DATE	\$ C.	\$ C.	\$ C.	\$ C.	\$ C.	\$ C.	\$ C.	\$ C.	\$ C.	
												13/3/19 91 ✓
												164 84 ✓
						25.00						28 days P.A. 1.3.19 to 28.2.19
												clothing allow
												1st pay to 3.9.
												March 19.19
												Train & Boat allow
17463			487 5.00						32864			70.00 W.S.G. paid above
			29377									14.20 2 days P.A. over
						70.00		4.20				1st W.S.G. Paid by #2 D.D.
									74 20	345 80		
						70			144 20	275 80		
						65 80			21 00	21 00		W.S.G. PAID IN FULL
						70			280	140		
						70			350	70		
						70			420			
						415 80		4.20	420			

