NAME CONNOR ARTHUR FREDERTCK REGIMENTAL DOCUMENTS 31 BN H. Q. FILE NO. 32011

	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)					DEATH
	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					CATEGORY
	TRAINING HISTORY SHEET (M.F.W. 113)					
	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.B.W. 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. 173)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)				,	CATEGORY
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					DEMOB
	MEDICAL EXAMINATION (M.F.W. 129)	-/	,9			
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)		2'			
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)		1'/			
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)		12	1	× ×	DESERTION
- 18	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)	- 100				
	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)	1/10/		1 2 1	)	
	CARDS					
	PAY-SHEETS					
	The second secon					

CLASS "A" No. SHORT FORM.

# PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 6 968 96
2 Rank. Ptz.
3. Name. CONNOR, ARTHUR FREGERICK
4. Unit. 315 Bn
5 Date of Discharge Place Calgary
6 Reason for Discharge  DEMOBILIZATION
Doctor 22, 22
7. Authority. 2.2/0/1574
8. Proposed Residence after Discharge Journ Geta
Youngstown, alta
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.?
C. J. Como. Signature of Soldier.
10. CONFIRMATION.
The discharge of the above named man is hereby confirmed.
Place
Date 1919
Signature (0. C. Discharging Unit.)

#### 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

Particulars of Recruit (M.F.W. 133), or

2. Casualty Form (A.F.B. 103).

3. Medical History Sheet (M.F.B. 313 or A.F.B. 178),

4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)

5. Daniel Cartificate (C.A.D.C. 5009a)

5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122.)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 60).

8. Discharge Certificate (M.F.W. 89)

(Enclosed in special envelope (260M) ). 9. Copy of Discharge Certificate (M.F.W. 39a).

10 Dispersal Certificate (C.D.3).

11. Equipment and Clothing Statement Q.M.G. Form (D.O.S. 2).

12. Last Pay Certificate (P, 851). Aug. 13. Pay Book (A.B.64).

14. War Service Gratuity (Form M.F.W. 2595). 15, Sundry Documents.

14

Checked by No ...

Date...

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.

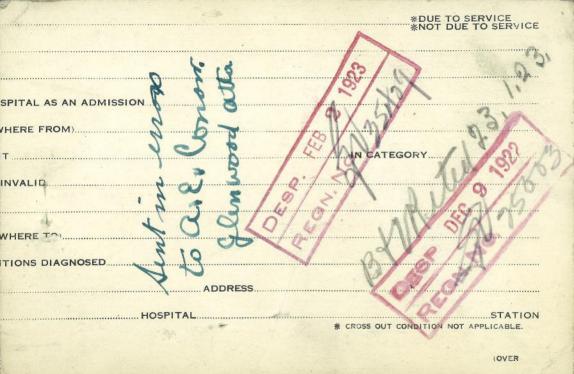
(1)	Name of Overseas Unit which Soldier joins 175/0. Ban C.E.L.
(2)	Regimental Number 696896
(3)	Full Name of Soldier Author Frederick Connor
(4)	Place of Birt's Dublin, Ireland
(5)	Are you married, or not?
(6)	If married, state,  (a) Full name of your wife
	(b) Present Postal Address.
(7)	Are you a widower?
(3)	Have you any children?
	If so, give number of boys and girls
	Also their names and ages.

(9)	Is your Father alive? 100
	If so, state name and address
(10)	Is your Mother alive? how have a second to the second to t
	If so, state name and address.
	If your Mother is a widow
	Are you her sole support, or not?
(12)	If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.
	nest a praesid och organismen samma samma midarit sa ocha ACT yabbandan Symbol och
	estados de 1. Nostados de condes estados estados de contratos de la contrato de contratos en contratos de contratos en con
(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.
	- Company of the Comp
(14)	If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.
(15)	Are you insured?
	If so, in what Company?
	Have you made arrangements for payment of your Insurance premium.
	If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.
	- Murst hiers
Date	deft 23 49/6

Apple for many the food? Some for many the food? Some the many transfer and

(ECLE STATE ACTS)

Number 696896 Rank Surname CONNOR Christian Name W Units 3/Bn Can & Theatre of War C Date of Service Remarks Latest Address .....



SURNAME. Conno. 649-C-13287	CARD NO.
CHRISTIAN NAMES arthur Frederick	S081-60269
REGL. NO. 696896. RANK PLE.	154436-19
UNIT 175 1/2	inti Jan.
FORMER CORPS Wil	,
NEXT OF KIN.	CHANGE OF ADDRESS
NAMES IN FULL Connor, Thomas D.	
RELATIONSHIP TO SOLDIER Brother.	Ps of D zw
ADDRESS Chinook, alla.	
COUNTRY OF BIRTH Incland, Kublin. DATE	// or all 1000 c.
PLACE OF ATTESTATION Youngstown, Olfa DATE	may 8 1/9/6
OK 3-10-16. PB. 27-5-	
	0 <sub>M</sub> .—2-16. H. Q. 1772-39-339.

Sailed from Halifax SS Saloma 3-10-16

MARRIED SINGLE JES WIDOWER

TRADE OR CALLING Farmer. RELIGION Church of England. 33 YEARS 10 MONTHS APPARENT AGE HEIGHT SEET SINCHES

CHEST MEASUREMENT SINCHES

COMPLEXION SAME EYES Plue HAIR CLAEK. 2 vacc. L. orm DISTINGUISHING MARKS MEDICAL EXAMINATION. PLACE Youngstown, alka DATE May 18th 1916. Present address Chinook, alta.

a

29

# 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	69689 Rank Ptg. Surname CONNOR, ARTHOR
Un	it or Corps 3/21 Bu Birthplace Dululu Tre.
	(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer.)
1.	GENERAL DESCRIPTION:
	Physique . 96.5
	Nutrition
	Condition of arteries . S. S
	Condition of arteries . Soft
	Hearing (conversational voice) Rt. 2.1.ft.
	Left & .fft.
Or	pinion as to general health and physical condition
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 Genito Urinary System Cardio-Vascular System
	Special Senses
	Disturbance of mentality
	Osseous and Joint SystemAny other general condition
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.**

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	Examined at WVMG (Overseas)	
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	Indiana de Francisco de Francis	The second second
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	Date/54.1.1.9 Signed	MCKoyen Cope,
(If not satisfied, M.F.B. 227 will be completed by Medical Board.)  THIS SECTION FOR USE IN CANADA—  Examined at	condition; that I find it correctly stated; and that I have r ing any other affections from which I suffered, either price	ot withheld any information concern- r to or during service.
THIS SECTION FOR USE IN CANADA—  Examined at		
Examined at	(If not satisfied, M.F.B. 227 will be comp	leted by Medical Board.)
	THIS SECTION FOR USE IN CANADA	
	Examined at(Canada)	MINISTER AND ARRESTS
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.		м.о.
Signature	Date	the above description of my present of withheld any information concern-
(If not satisfied, M.F.B. 227 will be completed by Medical Board.)	I hereby certify that I have read, or have heard read, condition; that I find it correctly stated; and that I have ming any other affections from which I suffered, either price	the above description of my present of withheld any information concern-

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

[OVER] E

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

## DENTAL OFFICERS CERTIFICATE FOR DEMOBILIZATION

DIRECTIONS TO

1. This form will be made out for each individual at the

NAME OF SOLDIER (Block letters) time of demobili-zation in England REGIMENT or France. 2. Figures as per chart will be used to designate teeth Date of Examination in England Date of Examination in France concerned. 3. In reference to Partial Dentures the 10 11 12 13 16 numbers of teeth thereon will be stated. 23 24 25 26 27 21 22 28 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?

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

Signature of Dental Officer,

A. D. D. S., M. D. 13

# CANADIAN EXPEDITIONARY FORCE

	CERTIFICATE 249386
War Servi	ce Badge Class A No Issued
THIS IS TO CERTIFY that No. 696	448 CD
Name (in full) CONNOR, A	FR Thur Frederick enlisted in
the 175 By	· · · · · · · · · · · · · · · · · · ·
CANADIAN EXPEDITIONARY FORCE at	loungstown, ack on the &
day of May 19/6	
HE served in England or	of France in the 31 st Bin
and is now discharged from the service by reason	Demobilization.
	-West Californess.
THE DESCRIPTION OF THIS SOLDIER on the	e DATE below is as follows:
Age 36 1/10, 16 mas.	Marks or Scars 2 vaccination
Height 57t 6 1/2	left arm.
Complexion Dark	Scar left lig
Eyes Blue	
Hair Black.	
a. 4 Cours.	
Signature of Soldier	Muchaes
Date of Discharge	Issuing Officer
( B	* * * * * * * * * * * * * * * * * * *
WIN 1 1919	Rank
A STATE OF S	
District District	Date 1019 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.

# ATTESTATION PAPER.

No. 696896

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PU.	BEFORE ATTESTATION.  (ANSWERS.)
1. What is your surname?	Comor
1a. What are your Christian names?	arihun Frederick
1b. What is your present address?	Chinook
2. In what Town, Township or Parish, and in what Country were you born?	Dublin Dublin & Luc
3. What is the name of your next-of kin?	(Comos Thomas D
4. What is the address of your next-of-kin?	Chinook alberta
4a. What is the relationship of your next-of-kin?.	Brother
5. What is the date of your birth?	July 11 th 1882
6. What is your Trade or Calling?	Farmer
7. Are you married?	no
8. Are you willing to be vaccinated or re-	
vaccinated and inoculated?	yeo
9. Do you now belong to the Active Militia?	no
0. Have you ever served in any Military Force?  If so, state particulars of former Service.	no
	U
1. Do you understand the nature and terms of your engagement?	Jes
2. Are you willing to be attested to serve in the )	Yes
Canadian Over-Seas Expeditionary Force?	<b>/</b>
existing between Great Britain and Germany should fiter the termination of that war provided His Majlischarged.  Oate May 8 M 191 G Great Britain and Germany should fiter the termination of that war provided His Majlischarged.	d that war last longer than one year, and for six months esty should so long require my services, or until legally  (Signature of Recruit)  (Signature of Witness)
I, Mahre Frederick Concern true Allegiance to His Majesty King George and duty bound honestly and faithfully defend His M	MAN ON ATTESTATION.  The Man of the Man of the Man of the Fifth, His Heirs and Successors, and that I will as lajesty, His Heirs and Successors, in Person, Crown and bey all orders of His Majesty, His Heirs and Successors, on help me God.
Date May 8 th 191 6	(Signature of Recruit)
CERTIFICATE	OF MAGISTRATE.
The above questions were then read to the R I have taken care that he understands each	

M. F. W. 23. 400M,—1 -15. H. Q. 1772-89-841.

# Description of arhur Frederick Connor on Enlistment.

Apparent Age. 33 years 10 months.  (To be determined according to the instructions given in the Regulations for Army Medical Services.)	
Height	
Girth when fully expanded.  Range of expansion.  Range of expansion.  354 ins.	2 Vaccinations left arm
Complexion Donak,	
Eyes Blue	
Hair Block,	
Church of England	
Presbyterian	
g si Methodist	
Methodist  Baptist or Congregationalist  Roman Catholic	
Roman Catholic.	
Jewish	
Other denominations. (Denomination to be stated.)	
I have examined the above-named Recruit of rejection specified in the Regulations for Army I He can see at the required distance with e free use of his joints and limbs, and he declares the I consider him* for the Date 1916.  Place 1916.	either eye; his heart and lungs are healthy; he has the
CERTIFICATE OF OFFI	CER COMMANDING UNIT.
inspected by me this day, and his Name, Age, Dat been recorded, I certify that I am satisfied with the	te of Attestation, and every prescribed particular having the correctness of this Attestation.
Date June 2 nd 1916	(Signature of Officer)

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

350M.-5-16 Q. 1772-39-920 Casualty Form—Active Service. Unit, Regiment or Corps Rank I ren Terms of Service (a) Service reckons from (a)...... Date of promotion to Numerical position on Date of appointment present rank to lance rank roll of N. C. Os. Extended. Re-engaged. Qualification (b) Report Record of promotions, reductions, transfers, Remarks casualties, etc., during active service, as retaken from Army Form B. 213, ported on Army Form B. 213, Army Form Place Date From whom Army Form A. 36, or other Date A. 36, or in other official documents. The official documents received authority to be quoted in each case

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

Date	Report From whom received	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
	11	Arrived CBD. Reinf. Left for Unit.  n. Arrived Unit.  Left for week  Arrived their  14-days leave  Rett from	Havre. Field.	3.3.17	NR. P20 No 7 d/2./2/17.  N.R.  B213.  B213 d/10-3-17.
15.6.18 7-12-18 28/12/18	" on the comp.	Revarded, good lon Ba Franks , H days leave Cight from leave Proceeded to England.		8.5.18 30-11-18 24/14/1	B213, P20.116-19-12-18.  8 .  Pt.2 O.No. d/
22-4-19	P. Sking	J.O.S. O.M. Fr. C. on transfer to 6. E.F. in Canada	Witley "	19 N	AV1918  LIEUT. FOR LTCOL. A.A.G.
TOTAL		の		F	WINGPO.C.C., WITLEY.

Casualty Form—Active Service.

		Unit, Regiment or Corps	175: 0	· Wn	
Regimen	ntal No. 69	Unit, Regiment or Corps.  6896 Rank Ole Nam	ne Conn	or a	Justen Frederick
Enlisted	(a). 8. et.	Terms of Service (a)	Se	ervice reckon	s from (a) 8 5.16
		Date of appointme to lance rank			of N. C. Os.
Extende	d	Re-engaged.	Qualification (	b)	
	Report	Record of promotions, reductions, transfers, casualties, etc., during active service, as re-			Remarks
Date	From whom received	ported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	taken from Army Form B. 213, Army Form A. 36, or other official documents
	TAKEN ON	STRENGTH, OF NO. 13 DISTRICT DE	POT PART 2 OR	DER NO.	154 DATED 19:5-19
	DISCHARGE	D FROM H. M. SERVICE BY NO. 13 DIS	TRICT DEPOT PA	RT 2 ORDE	R NO. 154 DATIM2-6-19
	AUTH	pm		40.7	2 Capillent
			0	Officer	Commanding No. 13 District

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 re-			Remarks				
Date	From whom received	ported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	taken from Army Form B. 213, Army Form A. 36, or other official documents				
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		av agi contain							
		al all and a great and a second	grade ( art of						
			296-51-51						
				,					
					*				

MEDICAL HISTORY SHEET.

29

Surname O o	nos	Ci	hristia.	n Nan	re arth	un Tred	euck
	lay of May		Аррі	oved by	Me	W.Com	22.
ISITTATA CA	Dublin			Ra	nk III	Ramo	Z. M.O.
Apparent age 33	Means 10 mon	tho	Date.	Fit or Unfit.	Exami	NED FOR RE-ENGAGEMEN	r.
Trade or occupation.	Farmer						M.O.
Height 5 F	eet 6 1/2	Inches.					M.O.
Weight 12					У		M.O.
Chest measurement { Mir	nimum 32	inches.					M.O.
(*Ma	ximum expansion 35	the same the same					M.O.
Physical development	n 1						M.O.
Small-Pox Marks							M.O.
Vaccination Marks Arn	Bight. Lef	(LC)	Date.	Result.		VACCINATIONS.	
When Vaccinated last			7-11-16	Ols	EX	evade	M.O.
(a) Marks indicating		rities or				2./4.	
previous disease							M.O.
<u> </u>			Date.	Result.	ANTI-T	YPHOID INOCULATIONS, I	AND DESCRIPTION OF THE PROPERTY OF THE PROPERT
(b) Slight defects but no	t sufficient to cause	rejection			9 K	( ) S = 200	7
· "ho	ne		11/8/16		9 K	115000	M.O.
RD. 29	2 D 20		20/10/.	6	5 10	Wall	M.O.
Entisted on & the day	of May		10	16 00	Your	gstown a	
	Corps.	REGT'L N	1		Brs.	DATE.	
Joined on enlistment	25 H OB W	hala	106				101/
	75 kh. OBalk 1s Reserve Ba	1000	00 81	1		may 8 th	1916
Transferred to	" Keserve Ja	an, al	berlal	Deaf	ord.	141/17	
	ransferred to 3/2	. Batis	lon.				
						1 6 FEB 1917	
EXAMI	NED OR DISC	HARGI	ED BY	A ME	DICAL E	BOARD.	
STATION.	DATE.		Dis	ease.		RESULT.	
		, E.					

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.

Christian Name and King of minder Surname Con

	Date of Arrival			DATI	ss of				Number of	Remarks on nature of the disease; how induced; if mild or severe; if com-	
STATION.	at the	int	dmissio o Hospi	n tal.	fro	Discharg m Hosp	e ital	DISMASE.	days in	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
	Station.	Day	Month	Year	Day	Month	Year		Hospital	appliances supplied. Particulars of prophylactic inoculations.	
0											
					N. September 1						
								A			
			3.39								
								W. Carlotte			
					TOTAL STREET						
									1	<b>分类的是是一种企业的企业的企业的企业</b>	

R—122 8,401—50,000—21-10-16.

Rank A.C.

Name

CONNOR, Arthur Frederick.

Reg'l No.

696896 /

Unit

175th. Bn.

If in perm. Corps, What Unit?

Married or Single

Single. /

Place and Date of Enlistment Youngstown, May. 8th. 1916.

Place of Birth Dublin, Dublin Co Ireland.

Name and Address, Next-of-Kin

Thomas Connor, /

Brother. /

Chinook, Alberta.

Relationship

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason

Character

	Rep Date.	From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service.  The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
	AR	RIVED I	N ENGLAND "8.8.EA	XONIA 13	-10-16	9
	10-1-17	175taBn.	S. O. S, To 21st Res. Bn	. Seaford I	0-I-17	Pt. 2 D. O. 10
	10.1.1	17 21 Re	e Fr T. O. S. fr 178 th. I	n. Seaford	IO-1-	17 Pt II, D.C.1 8 8.
	16-2-17	000	8.05. 7031 5 Bu France	80	16-2-17	
	21.2.17		T.O.S of 31st Bn	Field.	17.2.17	" 11 " "
	22-6-18		awarded one Soud. C. Badge	lt. "	8-5-18	. 44
			M. M			
	22.4.19.1	8 Ming	. J.o.S. from 31	Milley	12.4.19.	2010.
		1				
3.	30519 R	Wing S	To Canada Witley	18 5 19 DO	34	

	0.041					
Repor	rt. From whom	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.	received.	The authority to be quoted in each case.	Times	Date.	Taken from Official Documents.	
			ni saninat		a i grimett yall acched	
	*	Julius Asia				
					S someth words you	
	HELMAN		A species we			
			1,0388	DATA.	Section I the Theorem	
					*	
			3000			
	7					
			4.5			
13						

NO. 696 896 RANK Pde. NAME Conner arthur Frederick T.O.S. 8.5-16 UNIT 175 & Battalion, 6. 6 7 (9.01/2 of 8-5-16) M. D. 13 PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PAID PAID SIG. OR TO REC'T FROM PARTICULARS AUTHORITY 1916 1916 June 30 may UNIT SAILED

OCT 3 1916

### DEPARTMENT OF MILITIA AND DEFENCE.

# WAR SERVICE GRATUITY.

6-20fo

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.

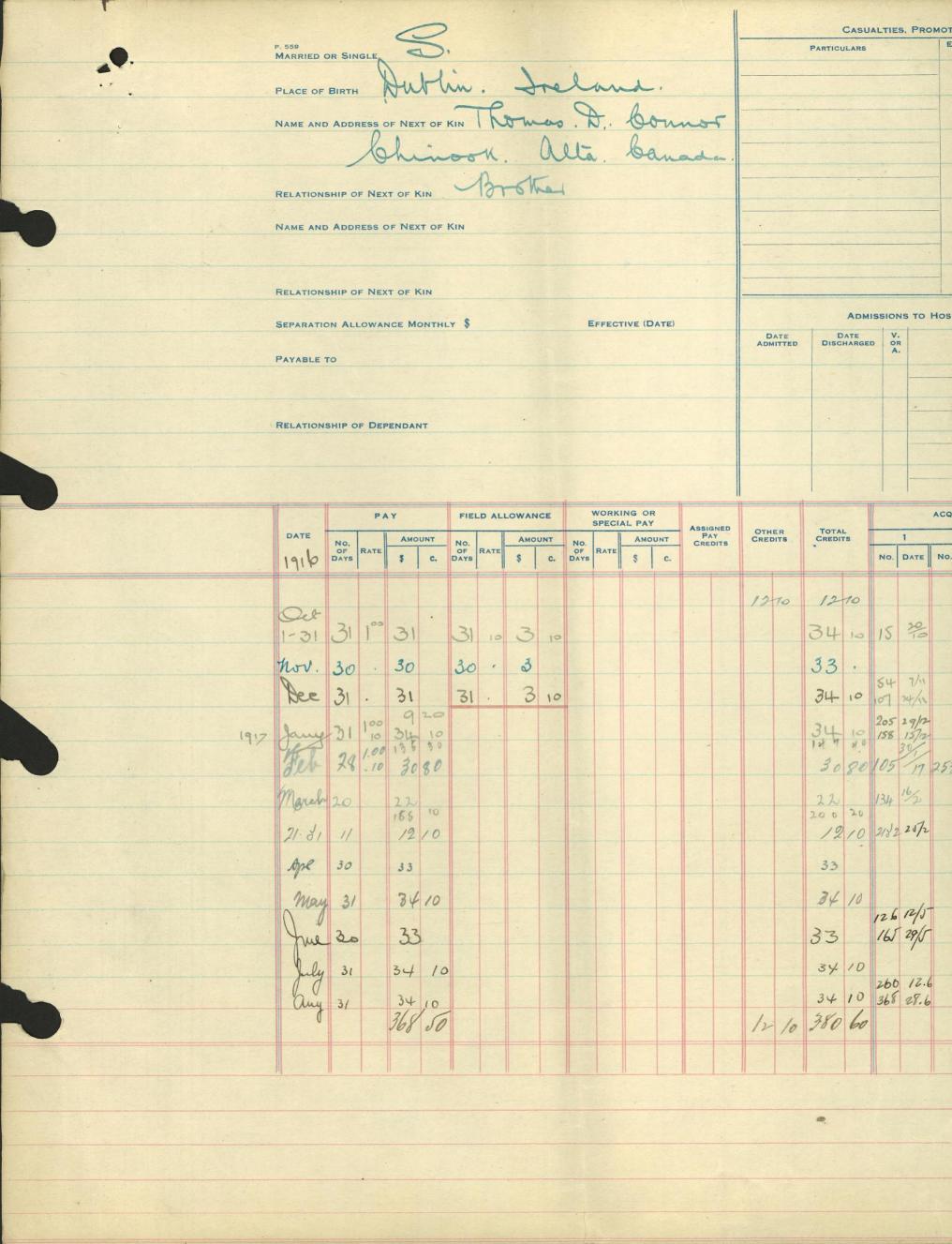
On completion, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

1.	Christian names arthur Drednick 2. Surname Connor.
3.	Rank (75 1310) 5. Reg. No. 69.689.6.
6.	Address, in full, to which future payments of gratuity are to be forwarded
	The Bank of Commence
	eldingstown alto
7.	Date of enlistment in the C.E.F. 8 may 1916.
0	Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, im-
8.	mediately prior to your discharge
	mediately prof to your displayed
9.	Relationship of such dependent
	-110
10.	Address, in full, of such dependent
11.	Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account
4,010	of another soldier?
4	
124	Were you at any time on the strongth for pay and allowances of a unit of the CEF which was out of canada or the United States when such pay and allowances were issuable? If so, give particulars of one
	such mit 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?
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
	64 1011 11 7
	particulars of units on whose strength you served.
	17-12-17. Oct 16: 1916 21 St Neserve. 17/2/17
	Date of clischarge 31 loan duf
10	Ways you at the time of exhiptment a civil employee of the Dominion Government? If an att
16.	Were you at the time of enlistment a civil employee of the Dominion Government? If so, state
	Department
17.	Were you a member of the Permanent Force at the time of enlistment in the C.E.F.?
	4. Wt. /30P. 150,000(8). 2/19. S.O.,F.Rd.

1.7.19

10		
18.	Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments?	
	and under what regimental numbers and units.	,
	The state of the s	
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	
20.	Have you been issued with a War Service Bodge? If so what class?	
21.	Have you, during the present war, served in the Imperial Forces?	
00		
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	
- 00	(A) D:1	
23.	(a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival	
	in England? 0.	
	(b) If so, was such reversion in consequence of misconduct or inefficiency?	
24.	Are you now serving in the C.E.E.?	
and the same of	(b) Reason for discharge	
	TYM	
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	1
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	
	D. C. C.	
0.5	(a) And the property of the Devictor of Gallin 1 G. 11 D.	
27.	(a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?	-
1444500	(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	140
sam	e force and effect as if made under oath and in virtue of the Canadian Evidence Act.	I.
Sign	nature of Applicant: and J. Ceomor.	No.
	201	
		-
Dec	dared before me at: Withy Surrey Questions 12, 13, 14, 20, 24,	
This	s Unulumly day of figure 19/9 25, 26 and 27, are unanswered	
	Signature of Barrister of the	mid .
	Supreme Court Stipendiary Magistrate, Notary Public, Justice of the	
	Peace, or Commissioner for the Lieut. Colonel.	
	P.C. 2767, dated 11th Nov., 1918. Comdg. 31st Cdn. Bn. Alberta Regimen	26
	POST DISCHARGE PAY.	
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	Soldier, Dependent Gratuity due	
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	Certified Correct.  District Paymaster.	
	District Paymaster.	13
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L. L. Job 24892,-M. & D. 8135.



M. F. W. 11. 15m.—7-17. H. Q. 1772-39-818.

SEPARATION, ALLOWANCE

Name Herbert D. Con

Address

Relation to Soldier

wife, child or mother

Name of Soldier

Regtl. No. 696896

Rank VE

Corps / 75th On

To what Corps belonging

when called out

## PAYMENTS

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M. F. W. 11a. 50m.-6-16. 1772-39-818.

SEPARATION ALLOWANCE

Herbert &. OVERSEAS CONTINGENTS.
Connor PAYMENTS.

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

L. L. Jon 4003.—Req. 6832.	Con	100				1696076. Vie.	1 /2 nen.	
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MILITIA AND DEFENCE

# SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

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

Month.	Year.	Cheque No.	Amt.	Remarks.	
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PAYMASTER OMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING REGT. NO. 696896 RANK PK NAME (IN FULL) CONNOR, A.F. DAILY RATE OF PAY AND ALLOWANCES ORIGINAL UNIT PARTICULARS EFFECTIVE DATE AUTHORITY (BLOCK LETTERS SURNAME FIRST PLACE OF ATTESTATION TRANSFERRED TO AUTHORITY DATE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY and of to ommerce ASSIGNED PAY \$ DATE EFFECTIVE ANY CHANGE IN ASSIGNEE OR ADDRESS STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE PLACE DISCHARGED DATE IF ENTITLED TO aksary JUN / 1919 ACQUITTANCE ROLLS CASH PAYMENTS REGI-ASSIGNED TOTAL L. NO. 1 COL. NO. 2 COL. NO. 3 COL. NO. 1 MENTAL COL. NO. 2 PAY COL. NO. 3 CHARGES CHARGES DEBITS DEBIT CREDIT PARTICULARS OR REMARKS 24 33 150 Bal. Eng/L. P. C TRAIN CK. Clothing Allowance \$35.00. 74888 298 08 1st Payment/W. S. G. \$70.00 29/20 248 Granier Vernes Solder Depend 70 342 62 30 280 40 00 40 00 70 140 40 70 70 342 22 420

# MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

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### PARTICULARS OF SEPARATION ALLOWANCE

## PARTICULARS OF ASSIGNMENT

	No.	Name
	Rank Promoted . Reverted Discharge	Address
	Soldier's Name	Change of Address
,	Battalion	1
	Beneficiary	2
	Relationship	3
	Address	4

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