REGIMENTAL DOCUMENTS

NAME MORTON, Edward REGT. NO. 273918 UNIT 43rd Bty H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	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)					
1	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)				35354	
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
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1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					9-22
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1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
3	Mon					
6	Misc.					
1	A. F. B. 181					
1	A. F. B. 1237					
	Card					
	Pagent					

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M

H

W. 2503
100M-11-18
1772 J. 1877

ORIGINAL

ATTESTATION PAPER.

No. 273918

218TH OVERSEAS BN., C.E.F.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? — Morton
1a. What are your Christian names? — Edward
1b. What is your present address? — 360 Chateau Briand Ave. Montreal Que.
2. In what Town, Township or Parish, and in what Country were you born? — Montreal Quebec
3. What is the name of your next-of kin? — Beatrice Morton
4. What is the address of your next-of-kin? — 360 Chateau Briand Ave. Montreal Que.
4a. What is the relationship of your next-of-kin? — wife
5. What is the date of your birth? — August 9th 1886
6. What is your Trade or Calling? — Laborer
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 (C.M.W.)
10. Have you ever served in any Military Force? If so, state particulars of former Service. — Yes 4 months w. C.S.C.
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

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Edward Morton, 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.

Edward Morton (Signature of Recruit)

Date Nov 16th 1916. Corpl E Lamkin (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Edward Morton, 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.

Edward Morton (Signature of Recruit)

Date Nov 16th 1916. Corpl E Lamkin (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 Que. this 16th day of Nov 1916.

C A Gold J.P. (Signature of Justice)

M. S. W. 32.
600M.—2-16.
H. Q. 1772-39 34L.

Description of Edward Morton on Enlistment.

Apparent Age 30 years 4 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 4 ft. 10 ins.

Chest measurement: Girth when fully expanded 34 ins.
Range of expansion 3 ins.

Complexion Dark

Eyes Blue

Hair Brown

Religious denominations:
- Church of England Yes
- 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).

Scars right wrist

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-Seas Expeditionary Force.

Date Nov. 16. 1916.

Place Montreal Que.

Lewis Smith
Lieut.
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.

Edward Morton 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.

Date Nov 18th 1916

(Signature of Officer)
Lt. Col.
216th O.S. Battalion, C.E.F.
"SANTAMS"

To be made out in duplicate. H.Q. 54-21-23-53

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

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(1) Name of Overseas Unit which Soldier joins 216th O.S. Bn. C.E.F.

(2) Regimental Number 273918.

(3) Full Name of Soldier Edward Morton.

(4) Place of Birth Montreal Que.

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

(6) If married, state,
(a) Full name of your wife Beatrice Morton.

(b) Present Postal Address 2245 B. St Andre St. Montreal Que.

(7) Are you a widower?

(8) Have you any children? yes.

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

Also their names and ages George - 8½ years. William - 5 years - Robert - 3 years. Beatrice - 7 years. - Agnes. - 8 months.

M. F. W. 67.

500M.—9-16.
1772-39-951.

(SEE OTHER SIDE.)

DUPLICATE

(9) Is your Father alive? John Morton.

If so, state name and address Morrisburg Ont.

(10) Is your Mother alive? No.

If so, state name and address

(11) 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.

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

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

yes.

(15) Are you insured? No

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.

Officer Commanding.

Lt. Col.

216th O.S. Battalion, C.E.F.

"BANTAMS"

Date 11/1/17.

649-7M-31795

FORM OF WILL.

I, Edward Morton. (Name in full)

Regimental Number 273918 serving in 216th O.S. Bn C.E.F.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I bequeath all my real estate unto

Beatrice Morton.
2245 B. St. Andre St.
Montreal Que.

Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

Beatrice Morton.
2245 B. St. Andre St.
Montreal Que.

Name and Address of person or persons to receive personal estate* (*See note*).

IMPORTANT NOTE
This must be Signed and Dated by THE SOLDIER HIMSELF.

this 11th day of January A. D. 1917.

Edward Morton Signature of Soldier.

*N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness A. E. Murdy Major
Address of Witness 23 Wells St. Toronto Ont.
Occupation of Witness Soldier
Signature of Second Witness Robert Riddagh.
Address of Witness 1649A St. Clair Ave. Toronto. Ont.
Occupation of Witness Bricklayer.

369 Boyd Ave Montreal

M. F. W. 82
300M-5-16.
1772-39-983.

Form R 122.
2353—100M—9-12-16.

LTR

Rank Name MORTON, Edward. Reg'l No. 273918

Unit 216th Bn. to 1st Cen.Ont.Regt. What Unit? (in perm. Corps,) Married or Single Married.

Place and Date of Enlistment Montreal. Nov, 16th, 1916. Place of Birth Montreal. Quebec.

Name and Address, Next-of-Kin Beatrice Morton

360 Chateau Briand Ave.Montreal. Quebec. Relationship Wife.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

H. W. V., Ld.—9546-16.

Report. Date.	Report. 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.
ARRIVED IN ENGLAND 29 4 17 S.S. SCANDINAVIAn					
5 - MAY 1917	3rd Res	T O S	w Sandling	30 APR 1917	Pt II 122
20-6-17	" "	S O S to Res Bde 67a.	"	20-6-17	— 168
21.6.17	Res Bde 67a	S.O.S from 3rd Res Bde — Sheffd		21.6.17	P.II.O 172
22.6.17	" "	S O S to 1st Res Bde	"	22.6.17	" " " 173
"	1st Res Bde	T O S from Res Bde	"	22.6.17	" " " 1
23-9-17	do	S.O.S. of 1st Res on proc Overseas to 8th Bde	Bex Witley	22-9-17	P.II.O 94
27-9-17	8 Bde	T.O.S of 8 Bde	Field	24-9-17	P.II.O 121
7.3.19		Proceeded to England		2.3.19	17
20.3.19.	"	S.O.S. CARD Witley	"	20.3.19	19 CARD. P.II 74 15.3.19
11-4-19	CARD	Attached from Hosp.	" Bejon	10.4.19	— 101

A.F.B. 103 CHECKED
OCT 1919

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.				
27-5-19	M. wing C.C.C.	T. O. S. Pending R.T.O.	Gnr. Willey.	27-5-19	— 47 & Cash 156 25.6.19
		To Canada 84-F-5025-6-19			
					P.O.S. To CANADA OHCF 1.2.D.C. 1 8 25/19

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W1889—P2 1150 1M 5/18 G.W.P.Co (3490)

SERVICE AND CASUALTY FORM (Part I).

Army Form B. 103—I.
Part I.

(1) *Substantative rank *Acting rank *[To be entered in pencil to facilitate alteration.]	(2) Regiment or Corps	(3) Regtl. No.
(4) Surname		
(5) Christian Names		
(6) Army Form, number of, Attestation Form or Record of Service paper		
(7) Whether of British or of Alien origin [*vide* A.C.I. 578 of 1918]		
(8) Date of birth as stated on enlistment		
(9) (*a*)		

(10) Enlistment (*b*) (11) Engagement (*c*)

(12) Service reckons from (*date*) (13) Special conditions (if any) of enlistment (*d*)

(14) Any subsequent variations (if any) of conditions of service (Authority) (*date*) Initials and Rank of an Officer.

(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) (Record of Occupation in Civil life (*vide* Army Order 93 of 1917)
				Industrial Group No.
				Trade or Calling
				Married or Single
				Particulars of Trade Test
				Occupation Cards despatched on (*date*)
				Second Occupation Card despatched on (*date*)

(17) Next of Kin

(18) Demobilizer (*f*) (Place) (Signature of Posting Officer

(19) Pivotal-man (*f*) (Date)

(20) Qualifications (*g*) *or* (21) Corps trade and rate

(22) Extended (23) Re-engaged

(24) Miscellaneous entries:—

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

Morton Edward. pte. 273918.

(A) Report: Date.	(A) Report: From whom received	(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
			T.O.S. OF O.M.F.C. ON PROCEEDING TO CANADA.			
	21/6/19		For Discharge.			Do pte No 12. 21.6.19 T McLean Lieut for O.C. M. Wing CCC
10-7-19	O/S		T.O.S. D.D.#4Disp.Stn."F"	MTL.	25-6-19	D.O. PT. II #191
"			S.O.S. " " Demob.	"	4-7-19	D.O. PT. II # 191 R.O. 1420

G.H. Fletcher Lieutenant,
a/ Assistant Adjutant,
District Depot No. 4.

Nothing to be written in this margin.

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps 216TH OVERSEAS BN., C.E.F.

Regimental No. 273918 Rank Pte Name Edward Morton

Enlisted (a) Nov 16th/16 Terms of Service (a) 6 months C.E.F. Service reckons from (a) November 16th 1916

Date of promotion to present rank. } Date of appointment to lance rank } Numerical position on roll of N. C. Os. } Bombr

Extended Re-engaged Qualification (b) Labourer

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked	Halifax	18-4-17	
		Disembarked	Liverpool	29-4-17	
30-4-17	O.C. ~~3rd~~ 216th Bn.	Transferred to 3rd. Can. Res. Bn.	West Sandling	30)4-17	Part 11 B. O. 90
					A H Fuller Adjutant for Lieut-Colonel O.C. 216th. Can. Bn.
5-5-17	O.C. 3rd	Takem on the strength of the 3rd Can. Res. Bn.	West Sandling	30-5-17	Part 11 B.O. 122
20/6/17	O.C. 3rd Res. Bn. C.E.F.	Transferred to C.R. Artillery	W. Sandling	20/6/17	Pt II Bn O. 68 Army Form Lt. Col. O.C. 3rd RESERVE BN. C.E.F.
21.6.17	Res. Bde C.F.A.	T.O.S. Can. Res. Arty	S'cliffe	21.6.17	G.R.O. Orders 172

(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				
22.6.17	121 Bde C.R.A.	T.O.S. & absorbed from Res. Bde C.F.A.	S.cliffe	22.6.17	B.O. Part II 1
23 SEP 1917	OC. 1st Bde C.R.A.	Proceeded o/seas to 8th Army Bde C.F.A.	Witley	22 SEP 1917	B.O. Part II No 94 G. H. Lloyd Lieutenant First Brigade Canadian Reserve Artillery
22.6.17.	Res Bde	TOS to 1st Res Arty	Shorncliffe	22.6.17	Part II Orders 173
27.9.17.	8th A Bde.	Taken on Strength	Field.	24.9.17	— 121.
					LIEUT. FOR LT. COL. I/C RECORDS, C.O.M.F.
24/9/17	C.G.B.D.	T.O.S. 8th A Bde C.F. on arrival from England as Reinf.	Base	24/9/17	NR B.O. 121 d/27/9/17
27/9/17	"	Left for Reinf. Camp	"	27/9/17	NR
27/9/17	C.C.R.C.	Arrived Reinf. Camp	Field	29/9/17	NR
6/10/17	"	Left for Unit	"	6/10/17	NR
4/11/17	O.C. Unit	Arrived Unit	"	4/10/17	Lt.
26.10.18	8th A Bde	Granted 14 days Leave to	Paris	17.10.18	B.O. 13 B.O. 22 d/5.11.18
8.11.18	do	Reported from Leave	Field	6.11.18	B.O. 13
	Eint Camp	Proceeded to England		23.19	NR
		B.O.R. OF O.M.F.O. ON PROCEEDING TO CANADA. for discharge			
15.3.19	C.A.R.D.	T.O.S. from 8 Bde	Witley	5.3.19	B.O. 74

For O.C. Lt

W. H. Taylor Lt for Lt Col. D.A.G.

WAR SERVICE BADGE
CLASS "A" No. 74986

DA-F
O.G-12

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

HM T·CARONIA
SAILING, No 84
Embarked 25, 6, 19.

1. No. 273918
2. Rank. Gunner
3. Name. Morton, Edward
4. Unit. 43rd Batty. C.F.A
5. Date of Discharge 4-7-19. Place Montreal, P.Q.
6. Reason for Discharge Demobilization
7. Authority. D.D.#4 R.O. 1420 D.O.Pt.II#191.
8. Proposed Residence after Discharge 369 Bayer St Montreal P.Q.

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.? B.O.9 Montreal July 4 1919

Edmonton
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Montreal

Date July 4 1919

Signature [illegible]
(O. C. Discharging Unit.)
Officer Ic Discharge Section, Dispersal Stn

M.F.B. 218a—300M.-11-18—1772-39-113.

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

1. Triplicate Attestation Paper (M.F.W. 23), or
   Particulars of Recruit (M.F.W. 133).
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. 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. 39)
   (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).
13. Pay Book (C.B.64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group B

Checked by No. 17

Date 20 JUN 1919

War Service Badge
Class "A" No.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 273918 (Rank) Gunner

Name (in full) Morton Edward enlisted in

the 216th Bn

CANADIAN EXPEDITIONARY FORCE at Montreal on the Sixteenth

day of November 1916

HE served in 8th Art Bde France

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 32 yrs - 10 mo

Height 4' 10"

Complexion Fair

Eyes Grey

Hair Brown

Marks or Scars 3 Vacc right arm. 2 scars left forearm. 2 scars right forearm

E Morton
Signature of Soldier.

Issuing Officer.

Lieutenant
Officer i/c Discharge Section, Dispersal Station "Que"
Rank

Date of Discharge

4-7-19

Date July 4 1919

N.B.- AS NO DUPLICATE OF THIS CERTIFICATE WILL BE ISSUED, ANY PERSON FINDING SAME IS REQUESTED TO FORWARD IT IN AN UNSTAMPED ENVELOPE TO THE SECRETARY, MILITIA COUNCIL, OTTAWA, CANADA.

M.F.B. 39A.

ORIGINAL

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Morton Christian Name Edward

Examined on 16 day of Nov 191 6 at Montreal Que

Approved by Geo. E. Smith

Rank Capt M.O.

Birthplace City or Town Montreal County Quebec

Apparent age 30 yrs 4 mos

Trade or occupation Labourer

Height 5 Feet 10 Inches.

Weight 143 " Lbs.

Chest measurement Minimum 31 inches. Maximum expansion 34 inches.

Physical development Good

Small-Pox Marks None.

Vaccination Marks Arm Right. Left. Number 3

When Vaccinated last Child

(a) Marks indicating congenital peculiarities or previous disease —

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

Date.	Fit or Unfit.	Examined for Re-engagement.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vacoinations.
28/12/16	W. Struthers	M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
14/12/16		M.O.
21/12/16	W. Struthers	M.O.
28/12/16	Vac. & Typhoid Cons	M.O.

Enlisted on 16th day of Nov 191 6 at Montreal Que

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment		273918		
Transferred to	216th Bn Can. Ld. Artillery P.O.S. to 8th Army Bde. C.F.A.	—	—	20/6/17 22/9/17

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
WITLEY CAMP, SURREY.	13/6 1919	V.D.S. (A)	

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.

M. F. B. 313.

400M.—1-16.

M. G. 1779-30-430.

1 APR 1919

CANADIAN

T.MC

Surname Morton Christian Name Oliver

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
12 Bramshott Military Hospital.		4	3	19	23	3	19	Influenza.	19	Influenza and febrile 4 days with ronchi in chest and large amount of white frothy sputum. Hæmorrhagic rash appeared on arms legs and body and a sore on penis Wassermann +++ positive Transferred to special Hosp. Whitley. Signed: C D Farquharson Capt.	W F Graydon. Capt C A M C.
CANADIAN SPECIAL HOSPITAL WITLEY, SURREY.		23	3	19	9	4	19	V.D.S	18	Generalized Syphilis 7 full courses 914 + Hg. Wass = Pos +++ Stoppages as per date	Westmorland Capt. F O'Neil CAPT REGISTRAR

Regional No. _____ **MEDICAL HISTORY of—** A.F. B.178

Regimental No. 243018 Region _____

Surname Mason Christian Names E

TABLE I.—General Table.

Birthplace { Parish _____ County _____

Examined { on _____ day of _____ 191 , at _____

Declared Age _____ years _____ days.

Trade or Occupation _____

Height _____ feet _____ inches. Weight _____ lbs.

Colour of Hair _____ Complexion _____

" Eyes _____

Chest Measurement { Girth when fully expanded _____ inches. Range of expansion _____ inches.

Physical Development _____

Vaccination Marks { Arm, Right. _____ Left. _____ Number _____ _____

When Vaccinated _____

Vision { R.E.—V= _____ L.E.—V= _____ With Glasses { R. _____ L. _____

Identification Marks, such as Tattoo, Moles, Scars, etc. :—

Defects or Ailments :—

Examined and found—

Fit for Grade { I. II. III. IV.

(Strike out those which do not apply.)

Signature _____

Chairman of Medical Board.

Re-examined for posting at _____

On _____ day of _____ 191__

Enlisted { at _____ on _____ day of _____ 191__

	Corps.	Regtl. No.
Joined on enlistment		
Transferred to		

TABLE III.—Boards, Courts of Enquiry, 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

Special Remarks : state if a discharged Soldier

TABLE IV.—Service Table.

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

Became non-effective by _____

on _____ day of _____ 191__

(*Signature*) _____

(*Rank*) _____

7430 2998/403 250m (4) 4/18 J.P. Gp. 158
8045 9152/666 250m (5) 6/18

TABLE II.—Only for admissions to Hospital or to the Sick List in Case of Warrant Officers treated in quarters

Name of Hospital	Admitted to Hospital.			Discharged from Hospital			Disease	Number of days in Hospital	Remarks 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
	Day	Month	Year	Day	Month	Year				
Bremahoee Military Hospital	4	3	19.	23	3	19	Influenza. Stomatitis V.D.S.	20	Moderate attack of influenza slight chest involvement made good recovery. Slight stomatitis, tonsilitis made good recovery. Developed rash on arms and legs. with a small sore on foreskin. Wassermann test +++ positive 21-3-19. Transferred to Wolley special Hosp.	Wolgaydon Capt. C.A.M.C

284

C.A.D.C. O.M.F.C.

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

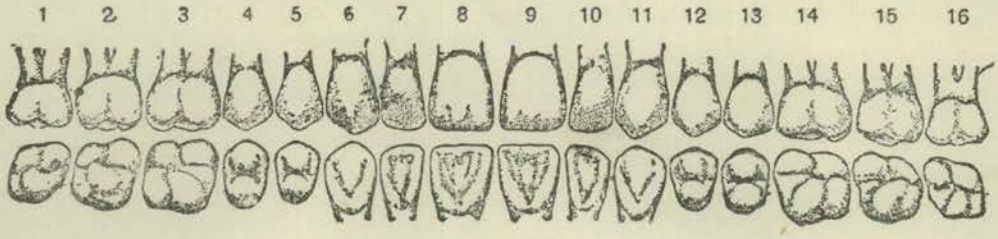
DIRECTIONS TO DENTAL OFFICERS

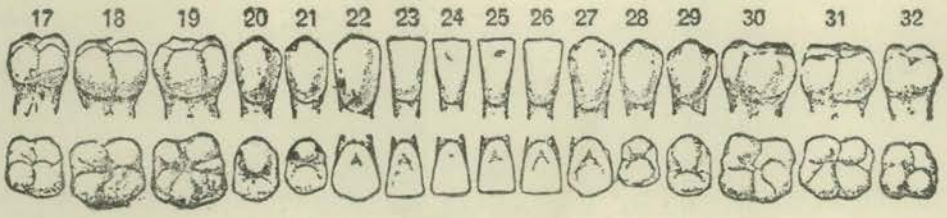
1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated

NAME OF SOLDIER (Block Letters) MORTON E

REGIMENT L 3 Batty RANK Gun. No. 275918

Date of Examination in England 2.6.19 Date of Examination in France





PRESENT DENTAL REQUIREMENTS

1. FILLINGS 5.
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 yes.
- (c) In France

A. D. D. S. M. D. No. 4

Signature of Dental Officer H. Simmons Capt

Forms
I. 1237
11

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year		Unit.	Age.	Service.

Station and Date.

Disease

Complaint – Cough. dry. 2 days.
headache 1 day

Was wett when coming across the channel from France on Sunday march 2nd. After this his cough began to get worse. head ached & he had chills.

Had influenza in July 1918 & was in bed for 3 days. good recovery.
Had typhoid fever in 1900. ~~good~~ 5 months in hospital. good recovery.

Does not look seriously ill. Face slightly flushed. Tongue coated. Coughs a good deal but does not raise sputum.
There are a few whistling rales audible over lower brown at back of chest.

9-3-19. Cough less troublesome. slight amount of whitish sputum.

12-3-19. Still coughs a good deal. Spits up moderate amount of sputum.

13-3-19. There are sibilant rales audible ~~of~~ over whole of chest. Coughs up a good deal of white watery sputum.

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

(23205) Wt.W 4234—M 627. 1,000,000. 8/16. C.F.&S. Forms/I. 1237/11.

P.T.O.

Station and Date.	
18-3-19	Still has occasional rales in chest. Cough much improved. Has scabies. Transferred to isolation annex. A. Torgerson capt.
21-3-19.	Chest clear. Has scabies on arms legs and body. With a Balanitis and a small sore on fore skin of penis.
23-3-19	Wasserman Test. 21-3-19 +++ Positive Transferred to Whitley for further treatment.

Wlg.

Army Form B. 181.

CLINICAL CHART.

(To be attached to Case Sheet.)

Corps C. F. A.

Military Hospital No 12 C.C.S. 76.

No. 2739 18 Rank and Name Gnr. Morton E Age Service

Disease Influenza Date of admission 4-3-19. Date of discharge Result

Dates of Observation: 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18

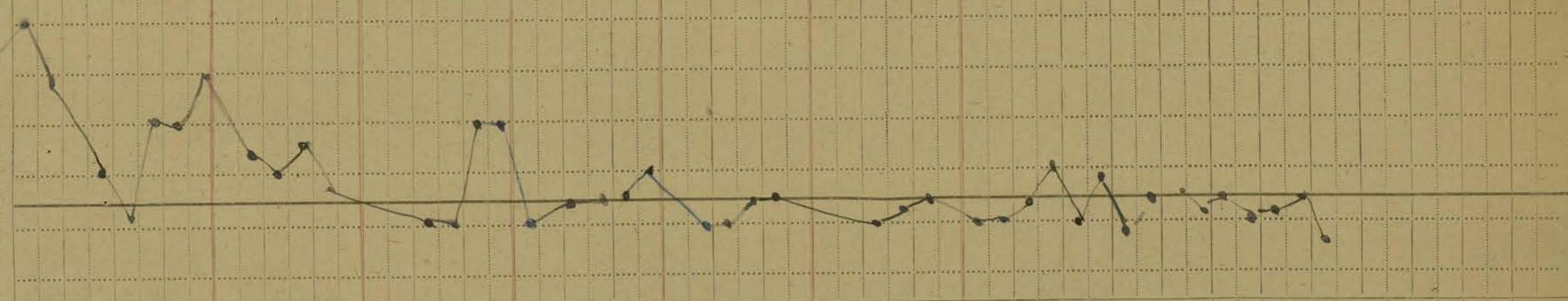
Days of Disease

Temperature Fahrenheit: 107° 106° 105° 104° 103° 102° 101° 100° 99° 98° 97°

Pulse per Minute

Respirations per Minute

Motions per 24 hours



Signature W. Graydon Capt In charge of case.

(6378) Wt. W4612/P566 2,000,000 2/18 McA & W Ltd A.F.B. 181/5 (E. 2565)

M.

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Witley DATE 13-6-19

1. 1 (a) Unit C.F.A. (b) Regimental No. 273918 (c) Rank Gnr.

(d) Surname MORTON (e) Christian name Edward.

(f) Home address 369 Boyer St. Montreal

(g) Next of Kin Mrs E. Morton. (h) Relationship wife

(i) Address of Next of Kin 369 Boyer St. Montreal.

2. Age last birthday 32 Date of birth 9-9-87.

3. Enlistment, or Appointment (if an Officer) (a) Place Montreal (b) Date 16-11-16.

4. Personal description:

(a) Height 4ft-10in (b) Weight 133 (stripped) (c) Complexion Fair

(d) Colour of hair Brown (e) Colour of eyes Grey (f) Identification marks, Scars, etc.

Vacc 3 right: 2 ~~small~~ scars left forearm. 2 scars Rt forearm.

5. Former trade or occupation Labourer.

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	2 yrs.	107

	Periods From	Periods To
Canada	16-11-16	18-4-17.
England	18-4-17	22-6-17
France or other theatres of War	22-6-17	3-3-19

7. Original disease, or injury V.D.S.

(a) Date of origin 23-3-19 (b) Place of origin France.

(c) Cause Infection

M. F. B. 227.

300M.—8-18.
1772-39-117.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

No visible lesions. (V.D.S)

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Widley 13-6-19.
Wasserman Test: negative.
J Gurofsky Capt Clerk.

No lesions present.

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above? (Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System: No — Cardio-Vascular System: No (If pulse rate is abnormal, B. P. will be taken.) — Genito-Urinary System: No (Albumen and Sugar will be excluded.)

Special Senses: No — Respiratory System: No — Integumentary System: No

Disturbances of Mentality: No — Digestive System: No — Muscular System: No

Osseous and Joint Systems: No — Any other general condition: No.

10. (a) History (of the condition referred to in Section 9 (a).)

Can Spec. Hosp. 23-3-19 to 9-4-19. V.D.S.
Generalized syphilis. Full course 914 and Hg.
Was = pos. +++.
Brenshott Military Hosp. 4-3-19 to 23-3-19. Influenza.
Influenza and febrile 4 days with bronchitis in chest. Have
Coloured rash appearing on arms and legs and body
and a sore on penis Wasserman +++ positive.

10.—(b) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (a).)

Typhoid Fever 1904, recovery.
Branch H- Mil. Hosp. 4-3-19 to 23-1-19 Influenza.

(c) (Here give a description of wounds, scars, and deformities.

2 scars left-forearm. 2 scars right-forearm.

11.—(a) Did the disabling condition have its origin before enlistment? No.

(b) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

N. A.

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? (a) yes. (b) No.

The regimental documents will be referred to.

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 3-6 months.

14. Treatment (Case reports, general or special, should be secured and attached where possible.) Can. Special Hosp.
Full course 914 and Hg. Wassermann Pos +++
13-6-19 Wassermann negative.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?
(If the answer is "yes" state nature of treatment required and probable duration)

Suggested he be dealt with on arrival in Canada in accordance with P.C.O. 477 20-1-19.

16. Can the former trade or occupation be resumed? Yes.
(If not, briefly state why)

17. Recommendations.

G. Cuzner Castleman
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned Edward Morton have heard the description of my disability and present condition read, and am satisfied (~~or not~~ satisfied) with it. (If dissatisfied, statement should follow.)

I complain in addition of

Edward Morton Gnr. Rank.
Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticised.

Yes we concur

19. Is the invalid fit for

(*a*) General service,	(Category A)	(Yes or ~~No.~~) Yes A
(*b*) Service abroad, not general service,	(" B)	(Yes or No.)
(*c*) Home service (Canada only),	(" C)	(Yes or No.)
(*d*) Temporarily unfit.	(" D)	(Yes or No.)
(*e*) Unfit for service in Categories A, B and C	(" E)	(Yes or No.)

20. It is certified that the invalid

(*a*) ~~Does require treatment.~~ (Give the nature of the condition and of the treatment required and its probable duration.)

Suggest he be discharged on leave in Canada in accordance with par 4, 7, 4 ss, 1, 14.

(*b*) ~~Does~~ not require treatment.

(*c*) Should ~~pass~~ under his own control.

(*d*) Should ~~not pass~~ under his own control.

(Strike out condition not applicable.)

21. It is recommended that the ~~invalid be discharged~~. (When not for discharge add special recommendation.)

R.T.C. Amts of Tel 908 3 of 11.11.18

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

H H Macdonald Capt *President.*

J Macdonald Capt Camp

PLACE WITLEY CAMP, SURREY.

13/6 1919

DATE

Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned.....understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....

Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

President.

PLACE

DATE

Members

APPROVED BY

W Grant Capt

pr Assistant Director of Medical Services

DATE

APPROVED BY

Director-General of Medical Services.

DATE

A.D.M.S. HEADQUARTERS
CANADIAN CORPS CAMP.
14 JUN 1919
WITLEY SECTION.

Surname	Christian Name or Names	Reg. No.
MORTON.	E.	273918.

Rank 1. Dvr. Unit 1. C.A. 8B.
2. 2.
3. 3.
4. 4.

Cas List.	Hospital and Diagnosis	Date
10-3-19. B495.	12. C.G.H. B'shott.	5-3-19.
	Influ'za.	
28.3.19 B511 2	6. Spec Wirley	24.3.19
	Influ + V.D.S. E.	
16.4.19 B527 2	D.A.	9.4.19

A.M.D. 2 Dept.
Bch. of D.G.M.S. O.M.F.C. London

Nl

B

Number 273918 Rank Dvr

Surname MORTON

Christian Name Edward

Units C.F.A. Theatre of War France

Date of Service 22-9-17.

Remarks

Latest Address 369 Boyer St
Montreal

P.D.

Roll No. B Page 6091

No. 273918 RANK Pte. NAME Morton E.

T.O.S. 16-11-16 UNIT 216th Battalion
D.O. 207 - 18-11-16

M.D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Nov. 16	Nov. 30	✓		
Dec.		✓		
1917	1917			
Jan.		✓		
Feb.		✓	Bombing Course. 12-2-17	D.O. 36 - Feb. paylist
Mar.		✓	Retd. to duty 17-3-17	D.O. 78 - Mar. paylist
Apr.		N.		

UNIT SAILED
APR 18 1917

SURNAME. Morton. 714

CARD NO. SOS Dis. 4-7-19 Demob. #4 Pt. 001911 FOLIO 7-19

CHRISTIAN NAMES Edward

REGL. No. 273918 RANK Pte.

UNIT 216th. Bn.

FORMER CORPS C.A.S.C. (4 mos.)

NEXT OF KIN.

NAMES IN FULL Morton, Mrs. Beatrice

RELATIONSHIP TO SOLDIER Wife

ADDRESS ~~360 Chateaubriand Ave.~~, 369 Boyer St. Montreal P.Q.

C.A.A.P. - 20-5-18

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Montreal P.Q. DATE Aug. 9th. 1886

PLACE OF ATTESTATION Montreal P.Q. DATE Nov. 16th. 1916

R/B. 2/7/19 060 40 Im.

MARRIED Yes SINGLE WIDOWER

TRADE OR CALLING Laborier RELIGION Church of England

DESCRIPTION.

APPARENT AGE 30 YEARS 4 MONTHS

HEIGHT 4 FEET 10 INCHES

CHEST MEASUREMENT 34 INCHES EXPANSION 3 INCHES

COMPLEXION Dark EYES Blue HAIR Brown

DISTINGUISHING MARKS Scar R. wrist.

MEDICAL EXAMINATION. PLACE Montreal P. Q. DATE Nov. 16th. 1916

Present address, 360 Chateaubriand, Ave., Montreal P. Q.

Form R. 149.

Edward. F.

Name MORTON A. Rank Dvr. Reg. No. 273918.

Unit 8TH BDE

Next of Kin Canada

Date		Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
5.3	19	12 Can Gen	Brantford	Influenza	B495		8321
24.3.	—	Can Spec Hosp	Witley	do 7-42	B511		9044
9.4.	19	Disch'd	do	do	B524		3258

NAME Morton E

REGT. No. 273918.

RANK AND UNIT Dvr. S.B. Cav Art.

NEXT OF KIN

CABLE		NATURE OF CASUALTY
No.	DATE	

M. F. W. 42—100M.—8-18.
H.Q. 1772 39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
B495	12 Can Gen. Bramshott	5-3-19	Influenza
B511	Can Spec. Witley	24-3-19	" " " +42
B527	Dosch	9-4-19	" " " 42

ASSIGNED PAY.

L. L. Job 4503.—M. & D. 6332.

MILITIA AND DEFENCE

M. F. W. 11.
50m.—6-16.
H. Q. 177-39-818.

(Wife)

SEPARATION ALLOWANCE

Name Beatrice Morton

Address 2245 B St Andre St
Montreal Que

Relation to Soldier wife, child or mother } Rate $20.00

Name of Soldier Morton E.

Regtl. No. 273918

Rank Pte

Corps 216th Bn.

To what Corps belonging when called out }

APR 1- 1917

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				

CONSOLIDATED ACCOUNT 5

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2. Beatrice Morton (Wife)
(Assignee)

PAYMENTS.

Name of Soldier Morton E

L. L. Job 5470—Req. 6888.

$20.00

APR 1 1917 273918

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May		N 12651	40	40 ch
June		H 66694	20	
July		73808	20	
Aug.		30741	20	
Sept.		37385	20	
Oct.		N 44273	20	
Nov.		K 51195	20	
Dec.		L 60951	20	
Jan.	1918		180	
Feb.				
March				
April				
May				
June				
July				

16 11/16

L. L. Job 4503.—M. D. 6834.

MILITIA AND DEFENCE

M. F. W. 11.
50m.—6-16.
H. Q. 1774-39-813.

SEPARATION ALLOWANCE

Name Mrs. Beatrice Morton,

Address 2245 b St-Andre St., Montreal, P.Q.

Relation to Soldier wife, child or mother } wife

Name of Soldier Morton, C.

Regtl. No. 273918

Rank pte.

Corps 216 th Battn.

To what Corps belonging when called out }

PAYMENTS

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

CONSOLIDATED ACCOUNT 5

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

M. F. W. 11a.
50m.—4-16.
1772—39—818.

Sheet No. 2. Mrs. Beatrice Morton wife

Name of Soldier Morton, E. Pte.

L. L. Job 310.—Req. 6574.

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.		K 27070	30	30 J.W.
Jan.	1917	a 30373	20	20
Feb.		a 33314	20	20
March		a 36538	20	20
April		Q 2031	20	20
May		B 5462	20	20
June		B 9795	20	20
July		B 13647	20	T.
Aug.		J 14813	20	M
Sept.		Q 18725	20	B
Oct.		Y 20982	20	B
Nov.		G 23027	20	M
Dec.		L 27629	20	W
Jan.	1918			
Feb.			270	
March				
April				
May				
June				
July				

AUTHOR | PAYMASTER

M. OR S.

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

REGT. NO. 273418 RANK Gte NAME (IN FULL) MORTON EDWARD

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? | DATE EFFECTIVE

Can. Pat. Fund in trust 1919

TO WHOM | RELATIONSHIP

Mrs B Morton | WIFE

ADDRESS

~~369 Bagg St.~~

~~Montreal~~

Que

Can Pat Fund - in Trust

PARTICULARS	EFFECTIVE DATE	AUTHORITY
T.O.S.	20/6/19	DO 191 P. 45 B SUPP 2 W/P 86

ORIGINAL UNIT C.E.F. 216th Batt. | IF IN P.F. WHAT UNIT? | (BLOCK LETTERS SURNAME FIRST)

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 16-11-16 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ 30.00 | DATE EFFECTIVE 1-8-19

PAYABLE TO Mrs B Morton | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS W.S.G.

ADDRESS ~~369 Bagg St~~ City & Dist. Bank Montreal .6.

Montreal . Que.

STOP PAYMENT FORM ASSIGNED PAY RENDERED. DATE | EFFECTIVE

DISCHARGED | PLACE Montreal | DATE 4-7-19 | REASON Demob | AUTHORITY DO 191 P 45-B SUPP 2 W/P 86 | IF ENTITLED TO POST DISCHARGE PAY

BALANCE FROM PREVIOUS ACCOUNT

MONTH	No. of Days	Pay and F.A. Rate	Pay and F.A. Amount $	C.	Other Credits $	C.			Total Credits $	C.	Acquittance Rolls Col. No. 1 No.	Date	Col. No. 2 No.	Date	Col. No. 3 No.	Date	Cash Payments Col. No. 1 $	C.	Col. No. 2 $	C.	Col. No. 3 $	C.	Assigned Pay $	C.	Regimental Charges $	C.	Other Charges $	C.			Total Debits $	C.	Balance Debit $	C.	Balance Credit $	C.	Particulars or Remarks
																													19	54	19	54	19	54			"Caronia"
1/6/19					35	00									OHK																						Dr Bal Eng L.V.R. 19 89
																																					C.R. 35.00 W.S.G. 70.00
10/7/19	40	1.10	44	00	70	00			149	10	Bal.		TRAIN		OHK 260634		4	37	5	00	79	24	40	00			6	60			135	71	66	0			A.P. for June & July 40.00
																																					P.T. & O.D. 5-7-19 to
				SA	4	00			4	00																					30	00	26	00			10-7-19 6.60 - SA & P.D.
									153	-																					185	60	32	60			5/7/19 to 31/7/19 26.00

Other Credits	W.	S.	C.	S.	A.	Total
	350		150			500

War Service Gratuity

Other Charges	W.	S.	G.	S.	A.	Total	Soldier	Balance Dependant
	70					70	280	150
66						66		
86 -						86 -	273 40	124
	70		60			130	203 40	64
	70			30		100	133 40	34
	63 40			400		67 40	70 00	31 00
				30		30		
	70					70		

Pay Bal. W.S.G. to Dependant

A.P. 1316-B-B. 19/120

S.A. portion of W.S.G. to be Int. Pat. Fund in Trust with Letter Pat. Fund 267 in JB 7.8.19

Pay to Depn

4/8/19

4-9-19

4/10/19

4/11/19

31/1/20

1868807 1268805

1521785 1521786

1631566 1631567

1648170

1802717

No more make payments of W.S.G.

Paid

200M-3-19.—L. ... 58788-... & D. 9985.
M. F. W. 2.96.
1772-39-1390.

Date of Enlistment 16/11/16

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

M 20317

Date of Assignment Apr. 1/17

RATE OF SEPARATION ALLOWANCE

20	~~$25.00~~ 1-12-17 P.C. 3257	30. 1-9-18 P.C. 2753 M.O. 41532	

RATE OF ASSIGNMENT

20			

9 24 mo 11 ff

PARTICULARS OF SEPARATION ALLOWANCE

No. 273918

Rank Pte. Promoted Reverted Discharge

Soldier's Name C. Morton

Battalion 216 Bn.

Beneficiary Mrs. Beatrice Morton

Relationship Wife. M. F. H. 2554 issued 23/7/18

Address Retd 21-11-18

PARTICULARS OF ASSIGNMENT

Name Mrs Beatrice Morton wife

Address ~~2245 B. St. Andre St Montreal, Que.~~

Change of Address

1 369 Boyer St., Montreal, Que. 7-5-18

2

3

4

131b3.C.3

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
Dec 31	/	270	180	450		
1918 Jan	X 68360	30	20	50	✓	
~~Feb.~~	~~O 75313~~	~~25~~	~~20~~	~~45~~	✓	O-75313 cancelled,
Feb.	U-75877	25	20	45	✓	mailed 22-1-18.
Mar.	N 92739	25	20	45	✓	
Apr.	N 10768	25	20	45	✓	
May	R 17991	25	20	45	✓	
June	N 22224	25	20	45	✓	
July	H 31637	25	20	45	✓	
Aug	B 40929	25	20	45	✓	
Sept.	U 43235	25	20	45	✓	
Oct.	W 54482	25	20	45	✓	
Nov.	U 57681	25	20	45	✓	
Dec.	P 68318	45	20	65	✓✓	
1919 Jan.	U ~~72944~~	~~30~~	~~20~~	~~50~~	✓	U 72944 Canc. by MR.
Jan	Y 71536	30	20	50	✓	
Feb	W 77209	30	20	50	✓	
Mar.	M 86438	30	20	50	✓	
Apr.	P 4000	30	20	50	✓	
May	G 8426	30	20	50	✓	
June	N 11479	30	20	50	✓	
July	Y 11655	30	20	50	✓	
		805	560	1365		

A/c Closed 31.7.19

Ret'd per B.P. Supervisor

Date 7.7.19 M.F.W.187 M.O. 4

Clerk B.P. Supervisor 12-7-19

MO-1-1-113504-10-12 7/19 B.P. JWD

M. F. W. 128
400M.—6-17—172-39-1141
L. L. 22520—M. & D. 1193.

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY	* ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:- 1-5-~~18~~17.		EFFECTIVE DATE:-	
AMOUNT:- 20.00		AMOUNT:-	

NAME:- MORTON Edward

NUMBER:- 273918

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.

Mrs Beatrice Morton
2245 "B" St Andrew St.
Montreal.
Wife

Stopped 1/6/19

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Gnr

UNIT AND TRANSFERS

ORIGINAL UNIT:- 216 Bde

DATE ACCOUNT FIRST OPENED:- 1-5-~~18~~17

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			5 Bde CFA

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
13-4	1199	Ripon	~~11 87~~				
28-4	3466	"	~~14 60~~				
12-5	6069	"	~~9 73~~				
			29 30			F.P. cr Bde	$14 ~~17~~

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	10		

PARTICULARS OF RENDERING NON-EFFECTIVE: Struck Canada 31/5/19 Auth MR 8819 Ripon B Ripon 14/5/19 MD 1

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
Mar 31	Bro Forward								10 66		
Apr	Fur Pay	33		Cal				20			
				" 8th Bde 10/4	1 78						
				83 - 27/4	3 57				18 31		
		33			5 35			20			
May	Fur Pay	34 10		Cal				20	32 41		
				161 - 8/5	4 46						
				195 - 22/5	3 57				24 38		
		34 10			8 03			20			
June	F Pay	33		Cal				20	37 38		
				274 6/6	3 57						
				354 23/6	3 57						
		33			7 14			20	30 24		
July	F Pay	34 10		Cal				20			
				411 11/7	3 57						
				473 23/7	4 46				36 31		
		34 10			8 03			20			
Aug	—	34 10		Cal				20	50 41		
				555 8/8	3 57						
				654 23/8	3 57				43 27		
		34 10			7 14			20			

Montreal

Wife

Stopped 1/6/19

UNIT AND TRANSFERS

ORIGINAL UNIT – 216 Bde

DATE ACCOUNT FIRST OPENED – 1-5-1917

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			838 C.T.A.

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
13-4	1199	Ripon	~~14 64~~				
28-4	3466	"	~~14 60~~				
12-5	6069	"	~~9 72~~				
			29 20			L.G. cable	$14 12

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	10		

PARTICULARS OF RENDERING NON-EFFECTIVE: Dr. Canada 31/5/19 Auth MA 8819 Ripon to Ripon 14/5/19 MD 1

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
March	Bro forward								10 66		
Apr	Sur Pay	33		Cal.				20			
				" 8 Bde 10/4	1 78						
				83 " 24/4	3 57				18 31		
		33			5 35			20			
May	Sur Pay	34 10		Cal				20	32 44		
				161 – 8/5	4 46						
				195 – 22/5	3 57				24 38		
		34 10			8 03			20			
June	Pay	33		Cal				20	37 38		
				274 6/6	3 57						
				354 22/6	3 57						
		33			7 14			20	30 24		
July	Pay	34 10		Cal				20			
				411 11/7	3 57						
				473 23/7	4 46				36 31		
		34 10			8 03			20			
Aug	—	34 10		Cal				20	50 41		
				555 8/8	3 57						
				654 25/8	3 57				43 27		
		34 10			7 14			20			
Sep	—	33		Cal				20	56 21		
				692 10/9	3 57				52 70		
				791 25/9	3 57				49 13		Ch agreed
		33			7 14			20			
Oct		34 10		Cal				20	63 23		
				865 9/10	3 73						
				947 21/10	49 44				10 01		
		34 10			53 17			20			

NUMBER 273918 RANK Gnr NAME MORTON — E.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
Oct	Fwd	34 10			53 17			20	10 06		
				1438 28/10 Outside Pair	3 73				6 33		
		34 10			56 90			20			
Nov	App	33		a/c				20			
				1203 12/11 8 Bde.	3 73						
				1320 23/11	13 06						
				1436 9/12	3 73						
Dec		34 10		a/c				20			
Jan		34 10		a/c				20	27 01		
		101 20			20 57			60			
Feb				1559 24/12	8 39						
				1555 24/12	3 73						
				1746 8/1	3 73						
				1923 21/1	3 73						
				2132 11/2	3 73						
Mch		64 90		a/c				40			
				2981 23/2	7 46						
				5321 19/3 12 Cbt.	4 87				16 27		
		64 90			35 64			40			
April		33		Cab				20			
May		34 10		Cab				20	43 37		
				a/c 1199 13/4 Ripon	4 87						
				A.R. 3466 23/4 "	14 60						
				6069 12/5 "	19 47 / 9 73				34 17		
		67 10			29 20			20			
				4052 3/6 M. Wing End	24 33						
				5241, 18/6 " "	9 73				— 11		
					34 06						

S.O.S SL84 25/8/19

			1320	23/11	13 06		
			1436	9/12	3 73		
Dec		34 10	a/c			20	
Jan		34 10	a/c			20	27 01
		101 20			20 52	60	
Feb			1559	24/12	8 39		
			1555	24/12	3 73		
			1746	8/1	3 73		
			1923	21/1	3 73		
			2132	11/2	3 73		
Mch		64 90	a/c			40	
			2981	23/2	7 46		
			5321	19/3	12 Cl. H. 4 87		16 27
		64 90			35 64	40	
April		33	Cab			20	
May		34 10	Cab			20	43 37
			a/c 1199	13/4	Ripon 4 87		
			a/c 3466	23/4	" 14 60		
			6069	12/5	" 19 47 73		34 17
		67 10			29 20	20	
			4052	3-6	M. Wing End 24 33		
			5241	18/6	" " 9 73		- 11
					34 06		

S.O.S. SL84 25/6/19

P. 559

MARRIED OR SINGLE: Married

PLACE OF BIRTH: Montreal, Que.

NAME AND ADDRESS OF NEXT OF KIN: Mrs. Beatrice Morton, 224½ "B" St. Andre St., Montreal, Que.

RELATIONSHIP OF NEXT OF KIN: Wife

NAME AND ADDRESS OF NEXT OF KIN:

RELATIONSHIP OF NEXT OF KIN:

SEPARATION ALLOWANCE MONTHLY $ 20 00 EFFECTIVE (DATE) MAY 1 - 1917

PAYABLE TO: Mrs. Beatrice Morton,

RELATIONSHIP OF DEPENDANT: Wife

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

DATE 1917	PAY NO. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c	FIELD ALLOWANCE NO OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c	WORKING OR SPECIAL PAY NO OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 NO	1 DATE	2 NO	2 DATE	3 NO	3 DATE	4 NO	4 DATE
May 1	Balance from Canada													18 -	18 -								
1-31	31	1/10	34	10											34 10								
June	30	.	33												33	435 28/5	383 21/5						
July	31	.	34	10											34 10								
Aug	31	.	34	10											34 10	601 15/6							
Sept	30	.	33	.											33 .								
			168	30										18	186 30								

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLCE ENG
Sept. 30	Bal.	~~3598~~							3598		
Oct.				Can N.P.				20	1598		
	Ste Jary	34 10							5008		
		34 10						20			

hor.

Dec

OTIONS, &c.

Effective Date	Authority

OSPITAL, &c.

Name of Hospital

Reg'l No. 273918 Rank Pte Name Morton, Edward

If in Permt. Corps What Unit | Unit 216th BATTALION, C.E.F.

Transferred to 3rd Res. Bn. Date 1/5/17 Authority D.O. 127 3/5/17

Permanent Force Allowances

Transferred to 8th Bde C.F.A. Date 1/11/17 Authority

Place of Attestation Montreal, Que.

Transferred to Date Authority

Date of Attestation Nov. 16/16

Transferred to Date Authority

Assigned Pay Monthly $ 20.00 Date Effective MAY 1 - 1917

Payable to Mrs. Beatrice Morton, 2245 "B" St. Andre St., Montreal P.Q. Relationship Wife

Assigned Pay Monthly $ Date Effective

Payable to Relationship

Stop-Payment Form (Assigned Pay) Rendered (Date) Effective Reason

Discharge Date and Place Reason and Authority

Account Transferred to Non-Effective Branch (Date)

Account Transferred to Officers' Pay Branch (Date)

C.S.

Acquittance Rolls 2 No	2 Date	3 No	3 Date	4 No	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
													18 –				
										20		20	32 10				
						14 60				20		46 76	18 34				
						12 16											
										20		20	32 44				
						4 86				20	15 40	40 26	26 38 ✓				14 days 7P for Drunk 1st offence DO 227 18/7 Res C7a.
										20	3 30	23 30	35 98 ✓				3 days 7P for Aust. DO 61, 21/8 Res C7a
						31 62				100	18 70	150 32					

Balance	Deferred Pay	Sep. Allce Eng.	Month	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	3	4	Balance	Deferred Pay
35 98			Nov.	Bal Fwd.								50 08	
15 98				Ste Pay	33		a/c				20		
50 08							a/c 703 8 Res 9/10/17	4 46					
							Dn a/c 2669 Res Adj 2/9	2 44					
							Dn. a/c. 2252 Res. a/c. 22/8/17.	2 43					
							a/c 753 8 Bde. 23/10/17	3 54					
			Dec	Pay	34 10		a/c				20		
					67 10			12 90			40		

#27918 Pte. Morton Edward

Date	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4
Month	Particulars				CR. 1	CR. 2			Particulars					DR. 1	DR. 2	DR. 3	DR. 4	Balance		Deer. Red. Pay	Ger. Allow. Ent.			Month	Particulars	CR. 1	CR. 2
Dec Brot Fow.					67 10									12 90			40										
Dec									Dr al 1935. cha.				30/4/17.	7 30.													
									Dr al 2499. cha.				10/9/17.	4 87													
									" " 1407 "				29/6/17.	9 73													
									" " 2410 "				30/8/17.	2 43													
									" " 1630 "				13/7/17.	14 60.													
									" " 2097 "				14/8/17.	4 86.				20 49									
					67 10									56 69			40										
Jany Ent Pay					34 10				Al								20										
									QH005/A31				19/9	10													
									" /A231				13/9	1 45													
									Al 818	Bloe			9/11	4 46													
									" 840	"			25/11	12 49													
									" 936	"			7/12	4 46													
									" 1008	"			21/12	3 57				8 06									
					34 10									26 33			20										
Jany Ent Pay					30 80				Al								20										
									" 1083	Bloe			7/1	4 46													
									1159	—			28/1	3 57													
									1218	—			6/2	4 46				6 37									
					30 80									12 49			20										
Mchr Pay					34 10				Al								20										
									Al 1275	Bloe			20/2	3 57													
									1326	"			6/3	4 46													
									" 1412	"			27/3	1 78				10 66									
					34 10									9 81			20										

CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
	2	3	4				CREDIT	DEBIT			
ICULARS	CR. 1	CR. 2	PARTICULARS				DR. 1	DR. 2	DR. 3 DR. 4	BALANCE	DEFER- SEP. ACD. ALLCE. PAY ENC.

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DATE November, 2013