

REGIMENTAL DOCUMENTS

NAME *McDONALD DAVID*

REGT. NO. *248625* UNIT *16th Bty*

H. Q. FILE NO.

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

S

H

M

DEATH
Category

DISCHARGE
Category *Demob*

68354

DESERTION

- 2* ATTESTATION PAPER (M.F.W. 23, 133, or 51)
- 2* CASUALTY FORM (M.F.W. 54 or A.F.B. 103)
- TRAINING HISTORY SHEET (M.F.W. 113)
- 1* FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)
- REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)
- COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)
- 2* MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)
- 1* DENTAL HISTORY SHEET (M.F.B. 465)
- MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)
- 1* MEDICAL EXAMINATION (M.F.W. 129)
- 2* TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)
- PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)
- DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)
- LAST PAY CERTIFICATE (M.F.W. 44)
- 1* PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)
- PARTICULARS OF CHARACTER (A.F.W. 3226)
- 1* COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

2 Misc

1 Card

1 653

1 1146

1 R122

1

DUPLICATE

Draft Giving F. A. How. Amm. Column.

ATTESTATION PAPER.

No. 248625

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... McDonald
- 1a. What are your Christian names?..... David
- 1b. What is your present address?..... South. Uniacke. Hants. Co. N.S
Rodden. HantsCo, N.S
- 2. In what Town, Township or Parish, and in what Country were you born?.....
- 3. What is the name of your next-of-kin?..... Mrs. Irvn. Pentz
- 4. What is the address of your next-of-kin?..... Mount. Uniacke. Hants. Co. N.S
- 4a. What is the relationship of your next-of-kin?..... Siater
- 5. What is the date of your birth?..... Feby. 28. 1888
- 6. What is your Trade or Calling?..... Lumberman
- 7. Are you married?..... No
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... Yes
- 9. Do you now belong to the Active Militia?..... No
- 10. Have you ever served in any Military Force?..... 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

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, David McDonald, 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.

David McDonald (Signature of Recruit)

Date Nov. 28 191 16 S. Bauthius (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, David McDonald, 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.

David McDonald (Signature of Recruit)

Date Nov. 28 191 16 S. Bauthius (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 Halifax this 28 day of Nov 191 16

Wm. Stairs St. (Signature of Justice)

A. J. P. in r for the County of Halifax, N.S.

copy written

Description of David MacDonald on Enlistment.

Apparent Age 28 years 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. 4 1/2 ins.

Chest measurement. { Girth when fully expanded..... 34 ins.
 Range of expansion..... 2 ins.

Complexion Ruddy

Eyes Blue

Hair Brown

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

right foot flat
scar back of right hand

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

I consider him* fit for the Canadian Over-Seas Expeditionary Force.

Date Nov 28th 1916

Place Halifax N.S.

[Signature]
 Capt [Signature]
 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.

David MacDonald having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

[Signature] (Signature of Officer)

Date Nov. 28th 1916

D. C. Draft Giving F. A. How, Allen, Canada

CANADIAN EXPEDITIONARY FORCE

War Service Badge
Class A, No. 32114

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 248625 (Rank) Gnr.
 Name (in full) Mc Donald, Daniel enlisted in
 the Homes Ammunition Column. C.E.F.
 CANADIAN EXPEDITIONARY FORCE at Halifax on the 28th
 day of November 1916
 HE served in 6th Bde. C.E.F. France & England
 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 30 years
 Height 5' 4 1/2"
 Complexion Ruddy
 Eyes Blue
 Hair Brown

Marks or Scars Nil

D. Mc Donald
 Signature of Soldier.

J. C. Sullivan
 Major
 O.C. Dispersal Station "B"
 Issuing Officer.

Date of Discharge



Rank

JUL 2 1919

Date 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.

- 1.—That discharge certificate must be carried when wearing uniform.
- 2.—That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing, and
- 3.—That wearing of uniform renders him liable to usual military discipline, as if on the strength of a unit.

War Service Badge

Class A, No. 38119

SHORT FORM.

PROCEEDINGS ON DISCHARGE

(Demobilization.)

Occupation Group 8

Dispersal Area B

28945

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

1. No. 248625

2. Rank. Quartermaster

3. Name. Mc Donald David

4. Unit. 16th Battery C.F.A. 6th Brigade

5. Date of Discharge 10/7/19 Place Halifax N.S.

6. Reason for Discharge

DEMobilisation

7. Authority.

R.O. 1420

8. Proposed Residence after Discharge

South Weymouth, N.S.

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.?

D Mc Donald

Signature of Soldier.

10.

CONFIRMATION.

The discharge of the above named man is hereby confirmed.

HALIFAX, N.S. JUL 2 1919

Place

Date

Signature

S Bellman
O. C. Dispersal Station "B"
(O. 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

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 (269M)).
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. 351), *Med Ref.*
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group..... *B*

Checked by No. *[Signature]*

Date..... *16/6/19*

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. 248625 Rank Enw Surname McDonald
 (Given name in full) David
 Unit or Corps C.A.R.D. Birthplace Rodden N.S.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 150 lbs. Height 5 4 1/2 ft. Colour of Eyes Blue
 Nutrition Good
 Pulse 72 regular
 Condition of arteries soft
 Vision Rt. 6/6 Left 6/6
 Hearing (conversational voice) Rt. 20 ft. Left 20 ft.

Identification marks, scars, or deformities.
 (Give cause and date of origin.)
mole 2" above right nipple
mole at back of neck
mole left cheek

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 yes Cardio-Vascular System no
 Special Senses no Integumentary System no Respiratory System no
 Disturbance of Mentality no Muscular System no Digestive System no
 Osseous and Joint System no Any other general condition no

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

VD & 9-2-19 to 9-3-19

No disability

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Repton, Yorks (Overseas)

Date 16-5-19 Signed W. Baldwin M.O. Capt

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. M. Ronald

(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 a Medical Board.)

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

MEDICAL HISTORY SHEET

Surname *MacDonald* Christian Name *David*

Examined { on *28th* day of *Nov* 191*6*
 at *Halifax NS*
 Birthplace { City or Town *Redden*
 County *Hants, n.s.*
 Approved by *[Signature]*
 Rank *Capt* M.O.

Apparent age *28*
 Trade or occupation *Leatherman* M.O.
 Height *5* feet *4 1/2* Inches M.O.
 Weight *134* lbs. M.O.
 Chest measurement { Minimum *32* inches M.O.
 Maximum expansion *34* inches M.O.
 Physical development *Average* M.O.
 Small-pox Marks *nil* M.O.

Vaccination Marks { Arm Right Left
 Number *nil*
 When Vaccinated last *12/2/17* M.O.
 (a) Marks indicating congenital peculiarities or previous disease
 (b) Slight defects but not sufficient to cause rejection

Date	Result	VACCINATIONS	M.O.
<i>1/12/16</i>	<i>1st</i>	<i>[Signature]</i>	M.O.
<i>8/12/16</i>	<i>2nd</i>		M.O.
<i>15/12/16</i>	<i>3rd</i>		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.	M.O.
<i>1/12/16</i>	<i>1st</i>	<i>[Signature]</i>	M.O.
<i>8/12/16</i>	<i>2nd</i>	<i>[Signature]</i>	M.O.
<i>15/12/16</i>	<i>3rd</i>	<i>[Signature]</i>	M.O.

Enlisted on *28* day of *November* 191 *16* at *Halifax*

CORPS	REG'TL NUMBER	HABITS	DATE
<i>Draft Giving F. A. How. Amm Column.</i>	<i>248625</i>		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT

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.

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..... Draft Giving F. A. How. 4th Column.

(2) Regimental Number ~~248624~~ 248625

(3) Full Name of Soldier David M Donald

(4) Place of Birth Redden, Hunts Co. NS

(5) Are you married, or not? No

(6) If married, state,
(a) Full name of your wife No

(b) Present Postal Address South Uniaike
Hunts. Co. NS

(7) Are you a widower? No

(8) Have you any children? No

If so, give number of boys and girls No

Also their names and ages No

(9) Is your Father alive? *No*

If so, state name and address *No*

(10) Is your Mother alive? *No*

If so, state name and address *No*

(11) If your Mother is a widow *No*

Are you her sole support, or not? *No*

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

Not Applicable

(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.

Mrs. Annie Pentz

Mount Prospect

Illinois 60078

(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.

No

(15) Are you insured? *No*

If so, in what Company? *No*

Have you made arrangements for payment of your Insurance premium? *No*

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

Lu Stairs Lieut.
Officer Commanding.

Date *26/12/16*

O. C. Draft Giving F. A. How, Amm. Calu...

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) McDONALD D
 REGIMENT CARD RANK Ens No. 248625

Date of Examination in England 19-5-19 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 3
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 yes
- (b) In England _____
- (c) In France _____

Signature of Dental Officer K. Berry

C.T. Rank Name McDONALD David Reg'l No. 248625
 Unit Dft. Giving F.A.H.A.C. If in perm. Corps, }
 What Unit? } Married or Single Single
 Place and Date of Enlistment Halifax. 28th Nov. 1916 Place of Birth Rodden, Hants Co.
 Name and Address, Next-of-Kin Mrs Irwin Pentz, N.S. Canada.
 Mount Uniacke, Hants Co. Nova Scotia, Canada. Relationship Sister
 Assigned Pay Monthly \$ Payable to

Separation Allowance \$ Payable to Relationship
 Relationship

N/E. R.B. M
 F.H. R.
 Category

Discharge, Date and Place Reason Character
 H. W. & V., Ltd.—9546-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
		Arrived in England.	S.S. Southland.	27-2-17.	
1-3-17.	O.C. R. Bde	Taken on strength.	S'bliffe	27-2-17	Pr II 0. 60.
19-4-17	R. Bde	S.O.S. Proceeding overseas to 2nd Bde		19-4-17	- 109 5/2
25.4.17	2nd Dbl	and from Eng as R is attached to Col	Field	21.4.17	Pr II 0 68
2. 6. 17	6th Bde	T.O.S. on posting from 2nd Bde	"	21.4.17	" " " 99
2. 6. 17	2nd Bde	cross attached post to 6th Bde	"	21.4.17	" " " 95
35. 4. 19	Art. Pool	T.O.S. from 6th Bde C.F. at Gn	"	16.4.19	" " " 487 2047 7/18 1/19
3-5-19	Art. Pool	2.O.S. from art pool	Ripon	2-5-19	DD 123 + art pool no 53 7/25/19
22-4-19	Art. Pool	suspending 26. Bde	Abbeville	15-4-19	DD 30
		Tobanada	84-B-30	28-6-19	

A.F.B. 103 CHECKED
14 MAY 1917

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.				
19.5.19	J. Hoig CC	T.O.S. on CAR 19	Witley Gnr	17.5.19	- 12
30.6.19	do	1st Lt. to Canada	do	26.6.19	- 31

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

NZ

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

250M.—1-16.

H. Q. 1772-29-920.

Casualty Form—Active Service.

Unit, Regiment or Corps W. S. B. Class A Draft Giving F. A. How. Amm. Column

Regimental No. 248625 Rank Gr Name McDonald, David

Enlisted (a) 28/11/16 Terms of Service (a) Period of War Service reckons from (a) Date of enlistment

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

Extended _____ Re-engaged _____ Qualification (b) Lumberman

Report Date	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.
-------------	--------------------	---	-------	------	--

Embarked Halifax 16.2.17
Disembarked Liverpool 26.2.17

O.C.R.B. C.F.A. 2.O.S. Res. Bde C.F.A. Shorecliffe 27.2.17 B.O. Prs 60. d/1. 3.17.

Res. To 2nd Bde. Shorecliffe 19 APR 1917 B.O. pt II 109. Adjutant, Reserve Brigade, C.F.A.

21.4.17. C.B.D. Arrived as Reinforcement and attached to 2nd C.B.D. France. 21-4-17 M.R. Pt 10/20 68 of 25-4-17

25.4.17. D. Left for Column. Field 25.4.17 M.R.

28.4.17. C.B. Unit. Joined to Column. " 25.4.17 B213.

Do. C.B.A. Posted to 6th Bde C.F.A. " 21.4.17 S.C./1-364 of 26 of 26-17


Do. C.B.A. T.O.S. 6th Bde. C.F.A. " 21.4.17 D8 Pt 10/20 99 of 26-17

26.1.18 6th Bde Granted 14 days leave Eng. 23.1.18 B213. Pt. II. O. No-16 D4-2-18

(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.

CERTIFIED CORRECT.
 23 MAY 1917
 CAN. RECORDS, LONDON.

248625 Gnr McDonald D.

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				
16.2.18	6th Ad. Bn	Rejoined from Leave	Unit	8.2.18	B213 Pt. II. O. No 24 227/2/18
18.1.19.	do	Proc on 14 days leave.	U.K.	14.1.19.	B213. O. D. 15-1919
12.3.19	9 Cdn Slaty	nos.	ad 9 Cdn Slaty	12.3.19	W3034. W 9076 K.T. 17-6
18.4.19	aaq	Sold to CAR Pool		15 APR 1919	N.R. PL 2 O. No 47 J. Skelton Capt Capt J. H. Col aas
25.6.19	T. O. S. No. 6 D. D. from.....and posted.....				Dispt. B. H. No. 185- 185-
10.7.19	Res On discharge				
					 CAPTAIN ADJUTANT NO. 6 DISTRICT DEPOT

SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103-1.
Part I.

(1)*Substantive rank *Acting rank [To be entered in pencil to facilitate alteration.] (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)	(2) Regiment or Corps	(3) Regtl. No.
---	-----------------------	----------------

(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, Shoing-smith, &c.

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

Nothing to be written in this margin.

W1889-PP1150 IM 5/18 G.W.P.Co (3,490)

Surname

Christian Name or Names

Reg. No.

MC DONALD.

D.

248625.

Rank

Unit

Dvr.

C.A. 6B.

Cas. List.

9. C.S.H. Camiers.

12-2-19.

22-2-19. A482/3.

V.D.G. 6.

23.4.19. 0531

Discharged

17.4.19.

McC
41

B
X

Number..... *248625-* Rank *York*

Surname *McDONALD*

Christian Name *David*

Units *6. H. A.* Theatre of War *France*

Date of Service..... *19-4-17*

Remarks.....

Latest Address..... *P.O. South Yonkers*
Hants Co., N.S.

Roll No. *B. Page 8412.*

DESP. NOV 1 1921

REGN. NO. 974 645'4

No. 248625 RANK Pte.

NAME McDonald. D.

T. O. S. 28-11-16.

UNIT

14th Edge.
Draft, Living Field Artillery, How. Amm, Col.

D.O. 35 of 28-11-16.

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Nov. 28	Nov. 30	✓		
Dec:		✓		
1917	1917			
Jan:		✓		
Feb:		✓	A. W. L. 2 days. Proceeded 1/3 16-2-17.	D.O. 37 of 13-2-17. Feb. Paylist.

SURNAME.

*McDonald**86*

CARD NO.

CHRISTIAN NAMES

*David**SOS Reg: 8-7-19
D0185 POLLY 7-19
Dennis # 600*

REGL. NO.

248625.

RANK

Ynr.

UNIT

Draft Giving Depot. 3rd. Art. How. amm. Col. (3rd RD)

FORMER CORPS

nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Pentz, Mrs. Irven

RELATIONSHIP TO SOLDIER

Sister

ADDRESS

*Mount Uniacke, Hants Co.,
N.S.*

COUNTRY OF BIRTH

Canada, Rodden, N.S.

DATE

Feb. 28th 1888.

PLACE OF ATTESTATION

Halifax, N.S.

DATE

*Nov. 28th 1916.**RLB. 2/7/19⁰⁶ 24 Ynr*

MARRIED

SINGLE *Yes.*

WIDOWER

TRADE OR CALLING

Lumberman

RELIGION

Presbyterian.

DESCRIPTION.

APPARENT AGE

28. YEARS

MONTHS

HEIGHT

5. FEET

4 1/2. INCHES

CHEST MEASUREMENT

34. INCHES

EXPANSION

2. INCHES

COMPLEXION

Ruddy.

EYES

Blue

HAIR

Brown

DISTINGUISHING MARKS

rt. foot flat. Scar back of rt. hand.

MEDICAL EXAMINATION.

PLACE

Halifax, N.S.

DATE

Nov. 28th 1916.

Present Address. South Uniacke, Hants Co., N.S.

NAME

McDonald. D.

REGT. NO.

248625

RANK AND UNIT

Drvt.

6 Bn.

NEXT OF KIN

CABLE

No.

DATE

NATURE OF CASUALTY

con art.
REMARKS

LIST NO.

HOSPITAL

DATE OF
ADMISSION

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
a 482 - 3	9 Can. Stat. Lancers	12-2-19.	20
a 531	Disch.	17-4-19	20

20

20

P. 559.
MARRIED OR SINGLE

Single.

PLACE OF BIRTH

Rodden Hanis Co N.S.

NAME AND ADDRESS OF NEXT OF KIN

Mrs Irvin Pentz Can.

Mount Uniacke Hanis Co. N.S.

RELATIONSHIP OF NEXT OF KIN

Sister.

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	AUTHORITY

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	
			\$	C.			\$	C.			\$	C.				NO.	DATE	NO.	DATE	NO.	DATE
1917															25 60						
March 31	1 ⁰⁰ / ₁₀		34	10											34 10						
Apr. 30	"		33												33						
May 31	1 ⁰⁰ / ₁₀		34	10											34 10						
June 30			33												33						
July 31			34	10											34 10						
Aug 10			11												11						
21.			23	10.											23 10.						
Sept. 30			33	00											33 00						
			235	40											235 40						
															25 60						
															261 00						
MONTH	PARTICULARS				CR. 1	CR. 2	PARTICULARS				DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER. PAY	SEP. ALLG. ENG.				
	Bal. Forw														70 85						
Oct.	Gmt. Pay				34 10										20						
							A.P. b/sde. 675 9/9/17				2 68				82 27						
					34 10						2 68				20						

* Strike out whichever inapplicable

ASSIGNED PAY: ENGLAND OR CANADA.	SEPARATION ALLOWANCE: ENGLAND OR CANADA.
EFFECTIVE DATE: 1-4-17	EFFECTIVE DATE: -
AMOUNT: 20 ⁰⁰	AMOUNT: -
NAME, ADDRESS, RELATIONSHIP & AUTHORITY	
Mr. Edgar McDonald, South Uniacke, Hants Co. N.S. (Brother)	
WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.	

NAME: **McDONALD David**

NUMBER: **248625**

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Gunner

UNIT AND TRANSFERS

ORIGINAL UNIT: **Apt. How. Am. C. to R.B.C.F.A.**

DATE ACCOUNT FIRST OPENED: -

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S D	UNIT TRANSFERRED TO
			6 Bde C.F.A.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
4/9/19	25/19	P. 4/19	£5. 24 53				
15/5/19	6844	Report	£1. 4. 84				

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

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	100	10		

L.P.C. 844 Bal. 10 1/2

PARTICULARS OF RENDERING NON-EFFECTIVE: - Dis to Can. 31/5 9231 Rpn. 20/5 Rpn. m. 2 6.

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
1918											
Mar	Balford								33 92		
Apl.	Gen. Pay	33		A.P.				20			
				AR 661 12/4 Bnde	3 54						
				✓ 89 23/4	4 46				38 89		
		33			8 03			20			
May	Gen.	34 10		AP				20			
				AR 156 11/5 Bnde	3 54						
				✓ 219 23/5	4 46				44 96		
		34 10			8 03			20			
June		33		AP				20			
				AR 359 17/6 Bnde	3 54						
				✓ 295 27/6	4 46				49 93		
		33			8 03			20			
July		34 10		AP				20			
				386 9/7	4 46						
				450 24/7	3 54				56 00		
		34 10			8 03			20			
Aug		34 10		AP				20	70 10		
				522 19/8	7 14				62 96		
		34 10			7 14			20			

(Brother)

Miss

UNIT AND TRANSFERS

ORIGINAL UNIT: *Off. How. Am. C. to R.B.C.F.A.*

DATE ACCOUNT FIRST OPENED: -

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S F D	UNIT TRANSFERRED TO
			<i>6 Bde C.F.A.</i>

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
<i>4953</i>	<i>31/19</i>	<i>Q.pts</i>	<i>£5. 24 33</i>				
<i>15/19</i>	<i>6841</i>	<i>Rapon</i>	<i>£1. 4. 84</i>				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	<i>100</i>	<i>10</i>		

L.P.C. 84 Bal. 10 14

PARTICULARS OF RENDERING NON-EFFECTIVE: -

Dis to Com. 31/5 9231 Rapon. 20/5 Rapon. M.D 6.

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
<i>Mar</i>	<i>Balford</i>								<i>33 92</i>		
<i>Apr</i>	<i>Am. Pay</i>	<i>33</i>		<i>A.P.</i>				<i>20</i>			
				<i>AR 61 12/4 Wnde</i>	<i>3 54</i>						
				<i>✓ 89 23/4 ✓</i>	<i>4 46</i>				<i>38 89</i>		
		<i>33</i>			<i>8 03</i>			<i>20</i>			
<i>May</i>	<i>Gas</i>	<i>34 10</i>		<i>AP</i>				<i>20</i>			
				<i>AR 154 11/5 Wnde</i>	<i>3 54</i>						
				<i>✓ 219 23/5 ✓</i>	<i>4 46</i>				<i>44 96</i>		
		<i>34 10</i>			<i>8 03</i>			<i>20</i>			
<i>June</i>	<i>-</i>	<i>33</i>		<i>AP</i>				<i>20</i>			
				<i>AR 359 12/6 6 Bde.</i>	<i>3 54</i>						
				<i>✓ 295 27/6 ✓</i>	<i>4 46</i>				<i>49 93</i>		
		<i>33</i>			<i>8 03</i>			<i>20</i>			
<i>July</i>	<i>✓</i>	<i>34 10</i>		<i>AP</i>				<i>20</i>			
				<i>386 9/7 ✓</i>	<i>4 46</i>						
				<i>450 24/7 ✓</i>	<i>3 54</i>				<i>56 00</i>		
		<i>34 10</i>			<i>8 03</i>			<i>20</i>			
<i>Aug</i>	<i>✓</i>	<i>34 10</i>		<i>AP</i>				<i>20</i>	<i>70 10</i>		
				<i>522 19/8 ✓</i>	<i>7 14</i>				<i>62 96</i>		
		<i>34 10</i>			<i>7 14</i>			<i>20</i>			
<i>Sept</i>	<i>-</i>	<i>33</i>		<i>AP</i>				<i>20</i>	<i>75 96</i>		
				<i>600 10/9 ✓</i>	<i>3 54</i>						
				<i>685 27/9 ✓</i>	<i>3 54</i>				<i>68 82</i>		
		<i>33</i>			<i>7 14</i>			<i>20</i>			
<i>Oct</i>	<i>✓</i>	<i>34 10</i>		<i>AP</i>				<i>20</i>	<i>82 92</i>		
				<i>862 14/10</i>	<i>3 73</i>				<i>79 19</i>		
				<i>928 27/10</i>	<i>3 73</i>				<i>75 46</i>		
		<i>34 10</i>			<i>7 46</i>			<i>20</i>			

COMPILED BY

CHECKED BY

NUMBER 248625 RANK

Gm.

NAME McDONALD. D.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
	Bac. Fwd.								75 46		
Nov	Gm. P.	33		Cap				20			
Dec. Jan	"	68 20		AR. 1040. 643ae. 15/11	3 73						
				" 1189 .. 23/11	13 06						
				Cap. Dec Jan				40	99 87		
		101 20			16 79			60			
				1758. " 27/12.	1 30						
				1625 " 14/1	11 32						
				1574 " 9/1	3 77						
				1286 " 17/12	6 49						
				G.P. 24259 4/1/11	12 17						
				Snaf. Lc 93. " 14/1/19	58 40						
Feb Mar	"	64 90		Cap. Feb. Mar				40	31 32		
		64 90			93 45			40			
Apr	"	33		Cap. apr	40			20			
				1765 CQB2. 18/4	4 56						
				Harp. S1872 v. D. 12/2 - 18/4 58 days		34 80					
				2052. at Core. 1/5							
May		34 10		Cap May				20	19 06		
				4953 CARD 5/5	24 33						
				6841 " 15/5	4 87				10 14		
		67 10			33 76	34 80		40			
				Send. JWing 5825 3/6/19	24 33						
				" 10560 2/1/6	9 73				44 20		
					24 33						
					9 73						
					34 06						
					34 06						

SOS. 25/6/19. SH 8th CARD

1758. " 27/12 1 30
 1625 " 14/1 11 32
 1574 " 9/1 3 77
 1286 " 17/12 6 49
 G.P. 24259 4/2/19 12 17
 Small LC 93. " 14/1/19 58 40

Feb-Mar " 6490 ✓
 Cap. Feb. Mar 40 3132

Apr " 6490 ✓
 33 ✓
 Cap. Apr 40 20

May 3410 ✓
 Cap May 20 1906

4953 CARD 5/5 24 33
 6841 " 15/5 4 87
 6710 ✓
 3376 3480 40
 Ended. J Wing 5825 3/6/19 24 33
 " 10560 24/6 9 73
 3406
 3406

S.O.S. 25/6/19. S4 Pt. CARD

Caronia 2.7.19.

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

M. OR S. _____ REGT. No. *248625* RANK *Dr* NAME (IN FULL) *McDonald, David*

NEXT OF KIN _____ RELATIONSHIP _____ ORIGINAL UNIT C.E.F. *Art. 1* IN P.F. WHAT UNIT? _____ (BLOCK LETTERS SURNAME FIRST)

ADDRESS _____ PLACE OF ATTESTATION _____ TRANSFERRED TO _____ DATE _____ AUTHORITY _____

DATE OF ATTESTATION _____ TRANSFERRED TO _____ DATE _____ AUTHORITY _____

IS SEPARATION ALLOWANCE PAID? _____ DATE EFFECTIVE _____ ASSIGNED PAY \$ *2000* DATE EFFECTIVE *1.8.19.*

TO WHOM PAID _____ RELATIONSHIP _____ PAYABLE TO *Eagar Mac Donald's* RELATIONSHIP _____ ANY CHANGE IN ASSIGNEE OR ADDRESS _____

ADDRESS *ms* ADDRESS *South Uniacke* _____

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE *2-8-19* EFFECTIVE _____

DISCHARGED _____ PLACE *Nfr* DATE *JUL 10 1919* REASON *Demot.* AUTHORITY *Leo. 210* IF ENTITLED TO POST DISCHARGE PAY _____

MONTH	NO. OF DAYS	PAY AND F.A.		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY		REGI-MENTAL CHARGES		OTHER CHARGES		TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS
		AMOUNT				COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3									DEBIT	CREDIT			
		\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	
<i>31.5.19</i>																								<i>Dr Bal Co accd</i>
<i>10.7.19</i>	<i>10</i>	<i>110</i>	<i>44.00</i>	<i>85.00</i>	<i>70.00</i>								<i>487</i>	<i>5.00</i>	<i>70.00</i>	<i>40.00</i>			<i>34.06</i>		<i>164.07</i>	<i>15.07</i>		<i>adv wsg</i>
<i>WAR SERVICE GRATUITY W.S.G. S.A.</i>																								
<i>15.2.19</i>				<i>350.00</i>		<i>350.00</i>									<i>70.00</i>						<i>280.00</i>			<i>100 Pmt w.s.g.</i>
															<i>5495</i>				<i>15.07</i>		<i>210.00</i>			<i>Dr Bal Indoned.</i>
															<i>70.00</i>						<i>140.00</i>			<i>895810. 2-8-19.</i>
															<i>70.00</i>						<i>70.00</i>			<i>134540 3-9-19.</i>
															<i>70.00</i>						<i>Nil.</i>			<i>1504102 3-10-19.</i>
				<i>350.00</i>		<i>350.00</i>									<i>33493</i>				<i>15.07</i>		<i>350.00</i>			<i>1769227 4-11-19.</i>

Certified that all payments due on this acct. have been paid.

[Signature]
For Senior Officer Pay Services, M.D. 6

JUL 31 1919

Separation and Assigned Pay Branch **M**

2685 Apr. 1/17

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

20.			
-----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. **248625**
 Rank **Dr.** Promoted Reverted Discharge
 Soldier's Name **David Mac Donald**
 Battalion **How. Amm. Col.**
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

^{Edgar}
 Name **Hector Mac Donald**
 Address **South Uniacke**
 Change of Address **Hants Co. N.S.**
 1
 2
 3
 4

Date 1914	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Dec 31			180	180	Edgar Mac Donald, auth file 012273-2-726
Jan 18	65963		20	20	Special ck for March ordered 263-18-0 1/11
Feb ..	74177		20	20	
Mar ..	85241		20	20	
Apr ..	882		20	20	
May ..	15731		20	20	
June	20326		20	20	
July	33576		20	20	
Aug	37664		20	20	
Sept	42334		20	20	
Oct	55347		20	20	
Nov	60685		20	20	
Dec	65386		20	20	
Jan 1919	71714		20	20	
Feb	76571		20	20	
Mar	89397		20	20	
April	1817		20	20	
May	6225		20	20	
June	7695		20	20	
July	11677		20	20	
			560 ⁰⁰	560 ⁰⁰	

012273-2-94
 Edgar Mac Donald, auth file 012273-2-726
 Special ck for March ordered 263-18-0 1/11
 A/c Closed 31-7-19
 #6. Ret'd per... Caronia...
 Date... 2/7/19... M.F.W. 187-1579.
 m.d. Clerk...
 m. P.O. No. 113002. destroy. 15/79 E.S.

M. F. W. 128
 400M-6-17-1772-38-1141
 L. L. 25250-M. & D. 7583.



Authority File 012273-D-126
 26th 4/10/17

Brother

MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12.
 25m-4-17.
 H. Q. 1772-39-819.

To Whom

Edgar

Hector MacDonald

By Whom Assigned

Hector MacDonald

Address

South Unisacke
 Hawks Co NS

Regtl. No.

248625

Rank

Dr.

Corps

How Am Col

Rate

② 20⁰⁰ ~~Apr 1/17~~ 1/11/17

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			0 2 M 6/4/17 BL 9/5/17
Sept.				③ 1 on 30/10/17 sub 3/11/17
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



Edgar
Hector Mac Donald
ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2
(Assignee)

Name of Soldier

PAYMENTS.

Dr. 248625
MacDonald David
How Am Col

L. L. Job 5470—Req. 6888.

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>2000</i> <i>April/17</i> <i>1/11/17</i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May		<i>Z 14106</i>	<i>40</i>	<i>40. 3</i>
June		<i>N 17139</i>	<i>20</i>	<i>20.</i>
July		<i>F 23667</i>	<i>20</i>	<i>Pa</i>
Aug.		<i>R 31105</i>	<i>20</i>	
Sept.		<i>P 37475</i>	<i>20</i>	<i>ln</i>
Oct.		<i>B 44299</i>	<i>20</i>	<i>1800</i>
Nov.		<i>O 50716</i>	<i>20</i>	
Dec.		<i>59791 R 59790</i>	<i>20</i>	<i>59790 can e</i>
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

Handwritten scribble

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2.(Contd.)

Name of Soldier _____

PAYMENTS.

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.				



Library and Archives
Canada

395 Wellington Street
Ottawa, ON K1A 0N4

Bibliothèque et Archives
Canada

395, rue Wellington
Ottawa, ON K1A 0N4

For material still subject to legislative, contractual or institutional obligations, users warrant that they will respect those obligations and not use LAC collections in a manner that would infringe the rights of others. Liability that may arise in the use of a copy is assumed in full by the user. LAC accepts no responsibility for unauthorized use of collection material by users.

To ensure proper citation and to facilitate relocation of an item, the source of the material and its reference number should always accompany the copy.

Pour les documents faisant encore l'objet d'obligations législatives, contractuelles ou institutionnelles, les usagers s'engagent à respecter ces obligations et à ne pas utiliser les documents des collections de BAC de façon à nuire aux droits d'autrui. Ils doivent assumer entièrement toute responsabilité qui pourrait découler de l'utilisation d'une reproduction de document. BAC décline toute responsabilité quant à l'utilisation non autorisée de documents provenant de ses collections.

Afin de citer un document avec exactitude et d'en faciliter le repérage, sa source et son numéro de référence doivent toujours accompagner la reproduction.

TITLE/TITRE _____
RG 150 MG _____ R- _____ SERIES/SÉRIE _____
ACCESSION 1992-93/166 VOL _____ PAGE(S) 43
BOX/BOÎTE 6711-48 REEL/BOBINÉ _____
FILE/DOSSIER GNR MCDONALD, DAVID #248625
DATE JANUARY 2013