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REGIMENTAL DOCUMENTS

NAME AIRIS. Walter Thomas. REGT. NO. 928945. UNIT 153rd Battn H. Q. FILE NO. 3030

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W. 2589
100M-11-19
1772-39-1377

a.

ORIGINAL

1532

ATTESTATION PAPER.

No. 928945

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? — Airis
1a. What are your Christian names? — Walter Thomas
1b. What is your present address? — St Louis Miss. V Co.
2. In what Town, Township or Parish, and in what Country were you born? — St Louis Miss. V Co.
3. What is the name of your next-of kin? — Mrs Laverna Airis
4. What is the address of your next-of-kin? — Catawissa Miss. V Co.
4a. What is the relationship of your next-of-kin? — Mother
5. What is the date of your birth? — Feby 24th 1891
6. What is your Trade or Calling? — Machinist
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, Walter Thomas Airis, 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.

Walter Thomas Airis (Signature of Recruit)

Date Sept 30th 1916. Geo Tunalsh (Signature of Witness)
Recruit

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Walter Thos Airis, 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.

Walter Thomas Airis (Signature of Recruit)

Date Sept 30th 1916. Geo Tunalsh (Signature of Witness)
Recruit

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 Windsor Ont. this 30th day of Sept 1916.

[illegible] (Signature of Justice)
A Unit

M. F. W. 23
750M—3-16
H. Q. 1772-39-341

Description of Walter Thomas Aris on Enlistment.

Apparent Age 25 years 6 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 6 ins.

Chest measurement: Girth when fully expanded 35½ ins.
Range of expansion 3½ ins.

Complexion Fair

Eyes Blue

Hair Light Brown

Religious denominations:
- Church of England —
- Presbyterian —
- Methodist 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).

Face Scar left arm

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date Sept 30th 1916

Place Windsor Ont.

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.

Walter Thomas Aris 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.

R J Pulsford Lt Col (Signature of Officer)
O.C. 153rd Os Battn

Date Sept 30th 1916

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Airis *Christian Name* Walter Thomas

Examined { on 30 day of Sept 1916 / at Windsor Ont

Approved by [signature]

Birthplace { City or Town St Louis / County Nessauri U.S.A.

Rank Capt A.M.C.

Apparent age 25

Trade or occupation Machinist

Height 5 Feet 6 Inches.

Weight 135 Lbs.

Chest measurement { Minimum 32 inches. / Maximum expansion 35½ inches.

Physical development good

Small-Pox Marks none

Vaccination Marks { Arm Right. Left. / Number — 1

When Vaccinated last in childhood

(a) Marks indicating congenital peculiarities or previous disease —

(b) Slight defects but not sufficient to cause rejection

R Eye D 50/20 L Eye D 30/20.

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

Date.	Result.	Vaccinations.
		M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
9/11/16		M.O.
		M.O.
		M.O.

Enlisted on 30 *day of* Sept 1916 *at* Windsor Ont

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	153rd Bn	928945		30/9/16
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
London, Ont.	1916.	On Attestation	considered.
Kakungowill	[signature]	Capt. A. M. C. Chas. F. Dingwall	Capt. A. M. C.

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.

200M—11-15.
H. Q. 1772 39-439.

Surname Cirio Christian Name Walter Thomas

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital.			Dates of Discharge from Hospital.			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.
		Day	Month	Year	Day	Month	Year				

FORM OF WILL.

I, Walter Thomas Airis (Name in full)

Regimental Number 928945 serving in 153rd Battalion.

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

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

absolutely, and my personal estate I bequeath to

Mrs Margaret Thomas. Stand 78. Union Market. St. Louis. Missouri. U.S.A	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 20 day of November A. D. 1916

Walter T. Airis 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 F.G. McLean Sgt

Address of Witness 153rd O.S. Bn

Occupation of Witness Soldier

Signature of Second Witness E. Campbell Sgt

Address of Witness 153rd Battalion C.E.F.

Occupation of Witness Soldier

F. W. 82
00M-5-16.
1772-39-983.

D 3-6

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F.,1916).

Regimental No. 928945 Rank Private Name Airis, Walter Thomas

Corps 153rd. Battalion, C.E.F. who was* declared a deserter

On January 11th., 1917, to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from January 1st., 1917, to Jan. 11th., 1917, the inclusive date of transfer or discharge.

Dr.	$	c	Cr.	$	c
Bal. Dr. from prev. month			Bal. Cr. from prev. month	44	10
Advances by Cheques } No.			Regt'l Pay 11 days at $1.00c	11	00
Advances by Cheques } No.			Field Allow. 11 days at $ .10c	1	10
Assigned Pay No.			Other Allowances*		
Other Charges* Forfeiture A.W.L.	30	80	Other Credits*		
Payment on transfer or discharge No.					
Balance Cr. (to be paid by the new unit)	25	40	Bal. Dr. (to be deducted by new unit)		
Total	56	20	Total	56	20

*Give Particulars.

Kit Deficiency - $44.97

A monthly stoppage of $ (†) has (‡) been paid on account of Assigned Pay for the month of 191 to (Assignee)

(Address)

(†) Insert amount to be assigned, whether it has been paid or not.
(‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer.

Outfit Allowance of $ has been paid by Paymaster, Military District No.

REMARKS:—

State (1) date of enlistment 30-9-16

(2) if married and if a Separation Allowance Card has been submitted No. No.

(3) cause of discharge and authority D. O. 20

If discharged from the Contingent, state if Stop Payment advice for Assigned Pay has been forwarded, and date

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date January 24th., 1917.

Place St. Thomas, Ont. G. Butler Capt.
Paymaster

N.B.—For purposes of transfer this form is to be made out in quadruplicate. One copy to Paymaster of new unit; one to District Paymaster; one to accompany the pay-list at the end of the month, and; one for retention as a record.

For purposes of discharge it is to be made out in triplicate. One copy to accompany discharge papers; one copy to accompany pay-list at the end of the month, and; one for retention as a record.

M. F. W. 44.

200M.—6-16.
H. Q. 1772-39-903

No 928946 RANK Pte. NAME Aris Walter E.
Airis Thomas

T. O. S. 30-9-16. UNIT 153rd Battalion C. E. F.
S.O. 234 of 3-10-16.

M. D. 1

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Sept 30	Oct. 31	✓		
Nov.		✓		
Dec.		✓		
1917				
Jan 1	Jan. 11	n.	Declared Deserter. 11-1-17	S.O. 20 of 23-1-17.
			a/c. not closed.	n.

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	Attestation Paper,	Militia Form B. 235.
Squadron / Battery / Company Conduct Sheet,	" B. 263a.	Proceedings on Discharge	" B. 218.
Copies of Convictions, by C. P.	in MS.		
Med. Hist. Sheet,	Militia Form B. 313		
Medical Report for Invalid*	" B. 227.		
Statement of Man's Account on Transfer and Last Pay Certificate,	" D. 877.		

*Only if discharged "Medically unfit."

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet (in the event of such having been prepared.)

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

This space to be for numbers.

Proceedings on ~~Discharge~~ Desertion.

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

No.	928945
Rank	Private
Name NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	Walter Thomas Aires Aires
Corps (Squadron, Battery or Company)	153rd Battalion C.E.F.
Date of ~~Discharge~~ Desertion	15-12-16
Place of ~~Discharge~~ Desertion	St. Thomas Ont.

1. DESCRIPTION AT THE TIME OF ~~DISCHARGE~~ DESERTION.

		Descriptive Marks
Age	25 years 6 months.	1 Vaccination scar on left arm
Height	5 feet 6 inches.	
Complexion	Fair	
Eyes	Blue	
Hair	Light Brown	
Trade		
Intended place of residence (To be given as fully as practicable.)		

2. The above-named man is discharged in consequence of

Deserter

Pardoned under the General Amnesty of Dec. 20, 1919

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

3. Conduct and character while in the service have been, according to the records, etc.

Good

N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

Machinist

M. F. B. 218.

50m.—3-16.
H. Q. 1772-39-113.

(OVER)

noted 18-7-17. E.O.

5. He is in possession of the following number of G. C. Badges:

nil

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations..... nil

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (*Squadron or Battery*), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place) St. Thomas Ont. R T Pritchard Lt Col

(Date) 11/1/17 *Commanding* 153rd Battalion

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

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

(Place)..... nil ..... *(Signature of Soldier.)*

(Date)..... *(Signature of Witness.)*

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. **Additional Certificate in the case of a Soldier who takes his discharge on his own request.**

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

..... *(Signature of Soldier.)*

10. **Statement of Service.**

Service toward Engagement to.....(the date to which the Record of Service is completed).....years.....days.

Total.....years.....days.

11. **Confirmation of ~~Discharge~~ Desertion.**

The discharge of the above-named man is hereby confirmed.

(Place) St. Thomas Ont.

(Date) 11/1/17 *(Signature)* R T Pritchard Lt Col 153rd Batn

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

nil

(OVER)