

S

REGIMENTAL DOCUMENTS

NAME *ALACKSON. Sandy*

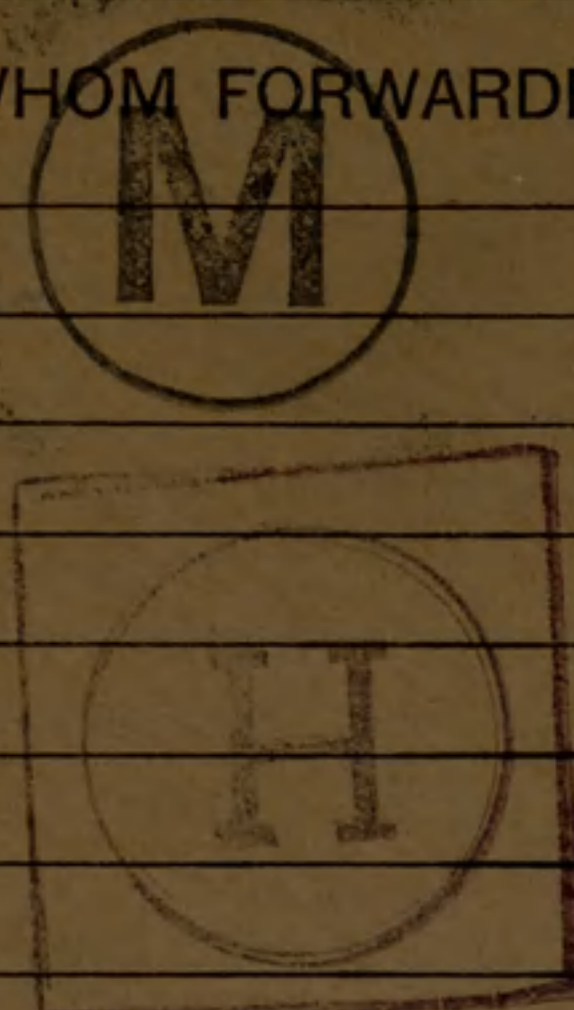
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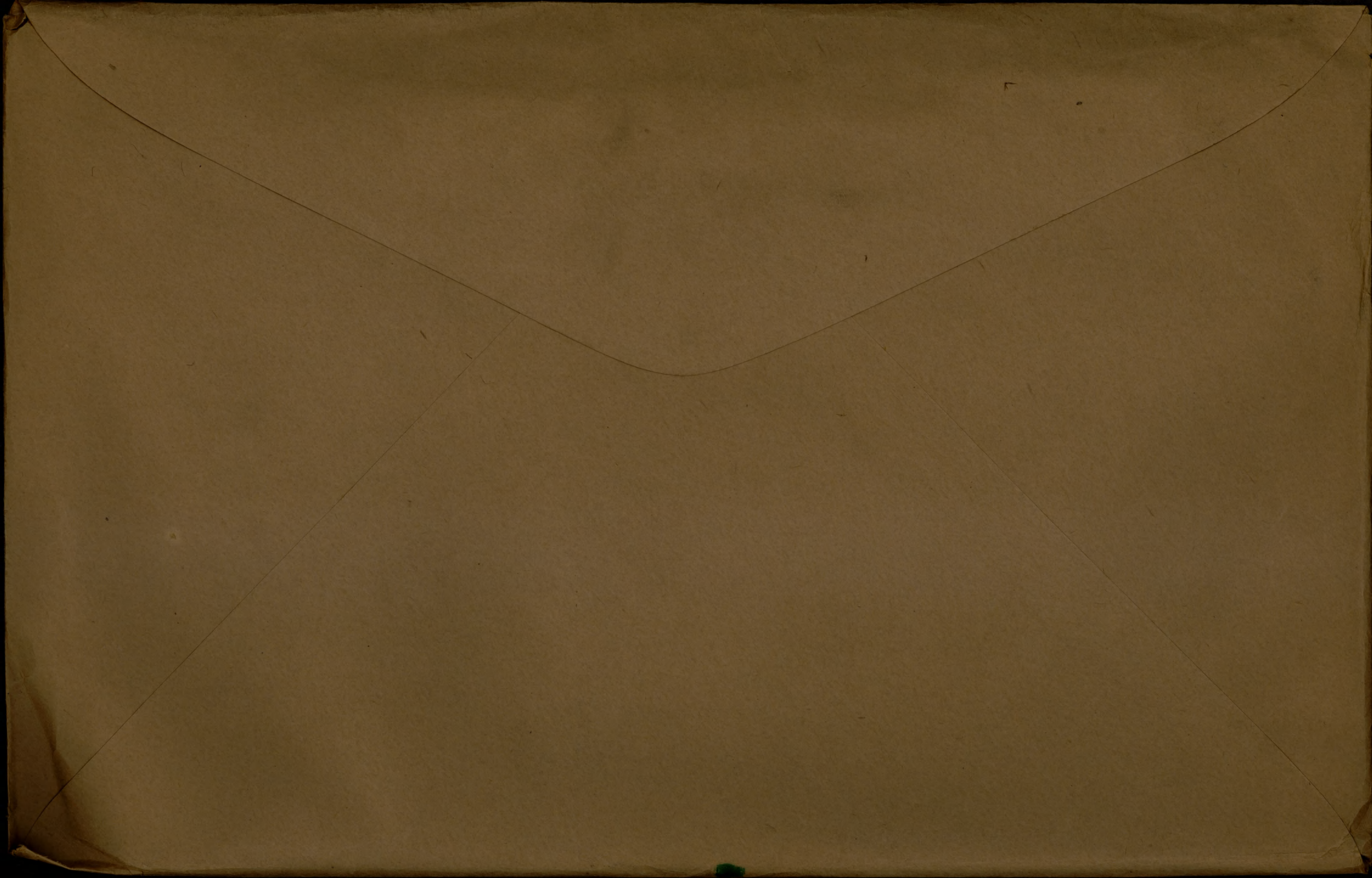
UNIT *b.a.s.c.*

H. Q. FILE NO.

3412

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<i>3</i> ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH	
<i>2</i> CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category	
<i>1</i> TRAINING HISTORY SHEET (M.F.W. 113) <i>Record sheet</i>						
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)						
<i>1</i> REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)						
<i>1</i> COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)						
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<i>6 Misc Cards</i>						
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ATTESTATION PAPER.

No. 2115746

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?.....ALACKSON.
- 1a. What are your Christian names?.....SANDY.
- 1b. What is your present address?.....Camrose, Alta., Canada
2. In what Town, Township or Parish, and in what Country were you born?.....Greggs County North Dakota U.S.A.
3. What is the name of your next-of-kin?.....Selma E Alackson.
4. What is the address of your next-of-kin?.....Camrose, Alta., Canada
- 4a. What is the relationship of your next-of-kin?.....Wife.
5. What is the date of your birth?.....July 14th 1885.
6. What is your Trade or Calling?.....Motor Driver.
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.
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.
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? ..No.
14. If so, what was the nature of the disability? ..
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected? ..No.
16. If so, what was the reason? ..

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I,.....SANDY ALACKSON....., 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.

Sandy Alackson (Signature of Recruit)

Date.....JULY 14th..... 191 7 *R. F. Hodges* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I,.....Sandy Alackson....., 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.

Sandy Alackson (Signature of Recruit)

Date.....July 14th..... 191 7. *R. F. Hodges* (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.

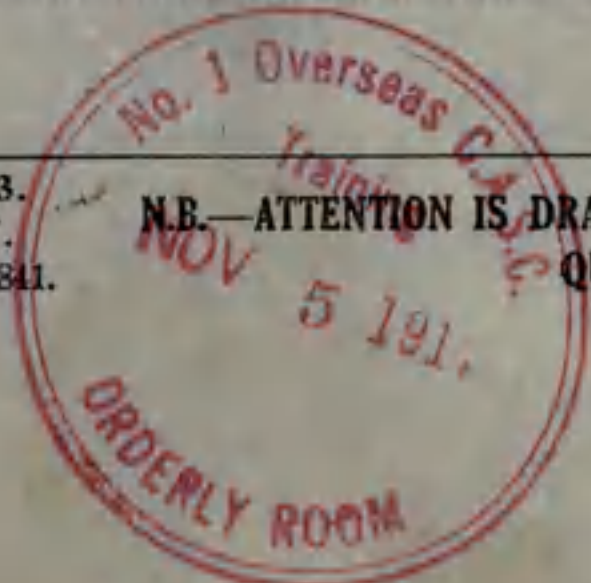
I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath

before me, at Edmonton, Alta. this Fourteenth day of July..... 191 7.

R. W. Linn (Signature of Justice)

M. F. W. 23.
750 M.-1-17.
H. Q. 1772-39-341.

NOTE.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT.



Description of SANDY ALACKSON on Enlistment.

Apparent Age 32 years 0 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. 7 1/2 ins.

Chest measurement { Girth when fully expanded 37 ins.
 Range of expansion 3 ins.

Complexion Fair

Eyes Grey

Hair L. Brown

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

Hearing
 R. Ear Normal
 L. Ear Normal
 Eyesight
 R. Eye 0 20
 L. Eye 0 30

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 July 14th 191 7

Place Edmonton Alberta. Captain C. A. M. C.
 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:—

Approved by Mobilization Board

Expiry 13-7-17

Clas Jackson
 Major C. A. M. C. President

Major C. A. M. C.

CERTIFICATE OF OFFICER COMMANDING UNIT.

Sandy Alackson 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.

W. A. Scully (Signature of Officer)
 Captain
 C. C. No. 1 OVERSEAS C. A. S. C. Training Depot

Date NOV 1 - 1917 191 7

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 2115746 (Rank) Private

Name (in full) Sandy ALACKSON enlisted in
the Canadian Army Service Corps.

CANADIAN EXPEDITIONARY FORCE at Edmonton, Alta. on the fourteenth
day of July 19 17.

HE served in FRANCE

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

R.O. 1420 -12-12-18

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

Age 33 Years.

Height 5 Feet 8 Inches.

Complexion Fair.

Eyes Grey.

Hair Fair.

Marks or Scars

S.W. Lt. Arm

Sandy Alackson
Signature of Soldier

W. MacEwan
Issuing Officer

Rank

Date of Discharge February 25th, 1919

Officer i/c Discharge Section District Depot M. D. 13

Appointment

Signed at Calgary, Alta. this Twenty-fifth day of February 19 19

in Military District No. 13

File Reference No. 13D A 165

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.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. _____ (Rank) _____ Name _____

Unit _____

Address on Discharge _____

Character and Conduct _____

Former Occupation _____

Special Qualifications of Value in Civil Life _____

Medals and Decorations _____

Remarks _____

Signed at _____ this _____ day of _____ 19 _____

Name of Officer

Rank

Appointment

On demobilization the particulars called for on the back of this certificate will not be completed.

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

A 480

OTTAWA, CANADA.

POST DISBURSED
MAR 27 1919
M. F. W. 2595
1772-39-1389
1160-D.P.-250M-12.18
The District
Office
of
the
War
Service
Gratuity
Commission
Ottawa
Canada

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

If the applicant will enquire at the local Branch of the Canadian Patriotic Fund he will be informed if there is an official who will take this Declaration free of charge.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

- Christian names *Sandy* 2. Surname *A Jackson*
- Rank *Pte* 4. Original Unit *A.S.C.* 5. Reg. No. *2115746*
- Address, in full, to which future payments of gratuity are to be forwarded
*Sandy Jackson
New Norway Alta*
- Date of enlistment in the C.E.F. *July 14 1917*
- Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge
Selma E. Jackson
- Relationship of such dependent *Wife*
- Address, in full, of such dependent
*Selma E. Jackson
New Norway Alta*
- Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *No*
- Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
I went overseas with Army Service Corps & joined the 49 Battalion in France
- Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? *Yes*
- Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service
Work to England with the Army Service Corps & joined the 49 Bat in France
- Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served
13 year 4 mo 10
First served with Army Service Corps till landed in England then was transferred to Infantry and joined the 49 Bat in France and was with them till discharged Feb 25. Length of service 1 year & 7 month
- Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department
No
- Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? *No*

MAR 25 1919
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18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units. *No*
19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid *No*
20. Have you been issued with a War Service Badge? If so, what class? *No*
21. Have you, during the present war, served in the Imperial Forces? *No*
22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled *No*
23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *No*
- (b) If so, was such reversion in consequence of misconduct or inefficiency? *No*
24. Are you now serving in the C.E.F.? *No* If not, give:—(a) Date of discharge *February 25 1919* (b) Reason for discharge *Demobilization*
25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit *No*
26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit *49 Battalion Three Months*
27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? *No*
- (b) If so, are you in receipt of full pay and allowances from that Department? *No*

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: *Sandy Alcock*

Place of Residence: *New Norway*

Declared before me at: *New Norway*

This *15th* day of *March* 191*9*

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths. *J. Olstad*

a Commissioner for Alberta

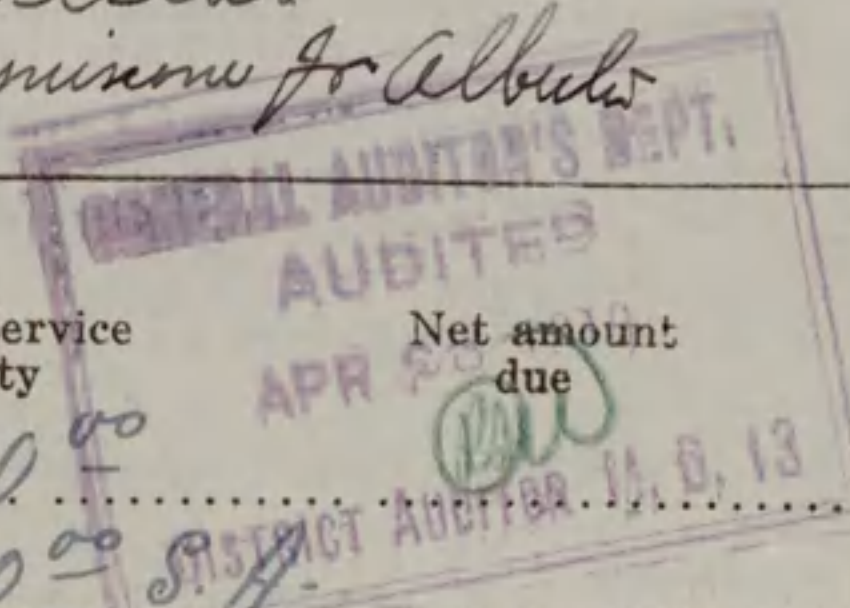
POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent
	<i>Nil.</i>	

War Service Gratuity	Net amount due
<i>280⁰⁰</i>	
<i>120⁰⁰</i>	
<i>400⁰⁰</i>	<i>400⁰⁰</i>

Certified Correct.

G. B. Swards
District Paymaster.



Chk

DD1

CONFIDENTIAL INFORMATION

CATEGORY

Report No. 7430	ALACKSON Sandy	No. of S. C. R. File	No. of Local File	No. of H. Q. File
Unit	Surname Permanent Address	Christian Name		
M.D. No. Thirteen	New Norway Alta			

No.* **2115746** Rank **Pte** Original Unit **C.A.S.C.** Service Unit* **49th Bn**
 Age* **34** Height ft. ins. Complexion Eyes Hair Conduct
 Date of enlistment **14-7-17** Where enlisted **Edmonton** Where seen service* **France**
 Ship returned by **Aquitania** Date of arrival **25-1-19** Port of arrival **Halifax**
 Birthplace* **U.S.A.** Religion **P.**
 Present disease or disability **Ret'd for demob. Cat "A"** Cause or origin

Condition in detail which prevents the soldier from earning a full livelihood **G.S.W. lt arm**

649 A-7811

- 1. Discharge, no pensionable disability.
- 2. Waiting Reclassification.
- 3. Discharge with claim for pension.

Degree of Incapacity—Eng. Board. Canadian Board
 Is disability due to or aggravated by Service?
 Probable duration of incapacity
 Does it render him unfit for Military Service?
 Is further treatment or use of appliances recommended, if so, which?
 Destination to which transportation issued **Proceeded to Military District Thirteen**
 Members of Board
 Place Date 19

INFORMATION TO BE FURNISHED BY SOLDIER

DEPENDENTS	NAME	AGE	WHERE—IF EMPLOYED	WAGES	STATE OF HEALTH
Wife	Selm E.	26		no	good
Children 1					
2	1 girl	4			
3					
4					
5					

Name and address next of kin **Wife-**
 Notification of return to be sent to **Same address**
 Occupation prior to enlistment **Farmer** And for how long followed **20 yrs**
 Regular trade or occupation "
 Do you consider that your disability will prevent you from following your previous occupation. **no**
 Average earnings previous to enlistment **\$125.00 per month** Any other income
 Name and address of last employer **Self**
 Rent per month If owner of or purchasing property, amount due and annual payment \$
 Taxes If Homestead or Farm, where located **Peace River County**
 If carrying life or accident insurance, annual premium \$ **\$60.00** Name of Society
 If work should not be available at old occupation, name preference. **Same work**
 I declare that the above statement is correct.

References
 Witness
 Date **27-1-19** Place **Quebec** Signature **S. Alackson**
 Remarks by Interviewer :

Last Pay Cert. Cr., \$ Dr., \$ Amount paid at Depot H.Q., \$ L.P.C. leaving Depot, \$
 Amount forwarded to H.Q. Unit, \$ Credit Clothing allowances, \$
 PENSION—Class..... Amount per year, \$..... Period granted for..... Dating from.....
 First payment date.....
 Form S.C.R. No. 5e.

- A. General Service.
- B. Service abroad, not general.
- C. Service in Canada.
- D. Treatment.

CONFIDENTIAL INFORMATION

CATEGORY

0281 of 0281
Local File
H. D. 121

Report No. 1200

Unit

Permanent Address
Surname
Christian Name

M. O. No.

No. of
Age
Height
Weight
Complexion
Hair
Eyes
Original Unit
Service Unit
Date of enlistment
Where enlisted
Date of arrival
Port of arrival
Ship returned by
Birthplace
Religion
Present disease or disability
Cause or origin

Handwritten notes: 2-5-21, 5-21-21, 2-5-21

Condition in detail which prevents the soldier from earning a full livelihood

Standard Board

Degree of incapacity - Standard Board
Is disability due to or aggravated by service?
Probable duration of incapacity
Does it render him unfit for Military Service?
Is further treatment or use of appliances recommended, if so, what?
Location to which transportation issued

1. Discharge with rating for honor
2. Military Requisition
3. Discharge, no conscious physical disability

INFORMATION TO BE FURNISHED BY SOLDIER

DEPENDENTS	NAME	AGE	WHERE-IF EMPLOYED	WAGES	STATE OF RESIDENCE
Wife		32			
Children					

Name and address next of kin
Notification of return to be sent to
Occupation prior to enlistment
Regular trade or occupation
Do you consider that your disability will prevent you from following your previous occupation?
Average earnings previous to enlistment
Name and address of last employer
Rent per month
If owner of or purchasing property, amount due and annual payment?
Taxes
If Homestead or Farm, where located
If carrying life or accident insurance, annual premium \$
Name of society
If work should not be available at old occupation, name preference
I declare that the above statement is correct.

1. Discharge with rating for honor
2. Military Requisition
3. Discharge, no conscious physical disability

References
Witness
Date
Remarks by Interviewer:
Signature
Date
First payment of PENSION - \$
Amount per year \$
Period granted for dating from
Amount forwarded to H. O. L. \$
Credit Clothing allowances \$
Last Pay Cert. \$
Dt. \$
Amount paid at Depot H. O. \$
L. R. C. leaving period \$

1. Discharge with rating for honor
2. Military Requisition
3. Discharge, no conscious physical disability

No record in Part 21
No date of arrest
in Central Registry file

A 5-73

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

OTTAWA, CANADA.

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

If the applicant will enquire at the local Branch of the Canadian Patriotic Fund he will be informed if there is an official who will take this Declaration free of charge.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

1. Christian Names *Sandy* 2. Surname *ALACKSON*
3. Rank *Pte* 4. Original Unit *A.S.C.* 5. Reg. No. *2115746*
6. Address, in full, to which future payments of gratuity are to be forwarded
New Norway P.O.
Alberta
7. Date of enlistment in the C.E.F. *14/6/16* *14th M* *J.S.O.*
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *Selma ALECKSON*
9. Relationship of such dependent *Wife*
10. Address, in full, of such dependent *New Norway P.O.*
Alberta
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *No*
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:
Yes 49th Bn 10/6/17 to 1/10/18
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? *No*
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service *No*
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served *2 years 8 months*
Canada A.S.C. 14/6/16 to 1/2/17
France 49th Bn 10/6/17 to 1/10/18
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department *No*
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? *No*

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18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units. *No*
19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid. *No*
20. Have you been issued with a War Service Badge? If so, what class? *No*
21. Have you, during the present war, served in the Imperial Forces? *No*
22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled. *No*
23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *No*
 (b) If so, was such reversion in consequence of misconduct or inefficiency? *No*
24. Are you now serving in the C.E.F. *No* If not, give:—(a) Date of discharge *25/2/19* (b) Reason for discharge *Demobilization*
25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit. *District Depot 13*
26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit. *Yes 49th Bn 10/6/17 to 1/10/18*
27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? *No*
 (b) If so, are you in receipt of full pay and allowances from that Department? *No*

ATTESTED
 14 FEB 1919
 DISCHARGED
 25.2.19
 PVT ON PAY
 INDIAN
 EXAMINED
 BY
 J. J. J.
 REMARKS
 No

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: *Sandy Alarson*
 Place of Residence: *New Norway P.O. Alberta*
 Declared before me at: *Edmonton*
 This *14th* day of *February* 19*19*

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths. *[Signature]*

POST DISCHARGE PAY.			War Service Gratuity	Net amount due
Date paid	Paid Soldier	Paid Dependent		
	<i>nil</i>		<i>280 00</i>	
Certified Correct.				
<i>[Signature]</i> District Paymaster.				

GENERAL AUDITOR'S DEPT.
 AUDITED *RPB*
 MAY 14 1919
 DISTRICT AUDITOR M. D. 13

ABH

CANADIAN ARMY DENTAL CORPS, O.M.F.C. DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

MD 13

NAME OF SOLDIER (Block Letters) ALACKSON, S
REGIMENT 49th Bn RANK Plt. No. 2115446

Date of Examination in England 13/1/19 Date of Examination in France _____



PRESENT DENTAL REQUIREMENTS

- 1. FILLINGS
- 2. EXTRACTIONS
- 3. CROWNS
- 4. DENTURES
 - (a) Full Upper
 - (b) Part Upper
 - (c) Full Lower
 - (d) Part Lower

Fit.

HAS HE EVER REFUSED DENTAL TREATMENT?

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)

- (a) In ~~Canada~~
- (b) In ~~England~~ *no.*
- (c) In ~~France~~

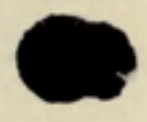
KINMEL PARK,
NORTH WALES.

Signature of Dental Officer

W. H. Reid
Capt.

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.



1000
1000

1000

ALBACON

1000

1000

1000

1000

1000

1000

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. 2115746 Rank Pte Surname ALACKSON
 (Give name in full)
Sandy.
 Unit or Corps 49th Bn Birthplace N.D. U.S.A.

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

1. GENERAL DESCRIPTION:

Physique Good ... Weight. 160 lbs. Height.. 5 ft. 7 in. Colour of Eyes Blue
 Nutrition Good
 Pulse 80
 Condition of arteries..... Normal
 Vision Rt. 20/20 Left. 20/20
 Hearing (conversational voice) Rt. 20 ft.
 Left. 20 ft.

Identification marks, scars, or deformities.
 (Give cause and date of origin.)
None.

Opinion as to general health and physical condition Good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)

Nervous System..... No Genito Urinary System..... No Cardio-Vascular System..... No
 Special Senses..... No Integumentary System..... No Respiratory System..... No
 Disturbance of mentality..... No Muscular System..... No Digestive System..... No
 Osseous and Joint System..... No Any other general condition..... 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.

Address:- New Norway, Alta.

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at.....(Overseas)

Date SignedM.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature

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

THIS SECTION FOR USE IN CANADA—

Examined at...Edmonton....(Canada)

DateFeb. 17th. 1919.... Signed *C. A. M. C.*.....M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature

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

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

[OVER]

Medical Examination upon leaving the Service
of an Officer fit for general service or a Soldier fit for duty.

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank..... *Plt* Name..... *A Jackson* *Sandy*
 Unit or Corps..... *49th Battery* (If a soldier) Regtl. No. *2115746*
 Born at..... *North Dakota U.S.A.* on, date..... *July 14 - 1884*
 Signature (for identification)..... *Sandy Jackson*

The examination is to be made jointly by two Medical Officers.

1. **PHYSIQUE**—Any deformity, maiming or lameness? If so, describe. *None.*

Weight..... *165* lbs.
 Height..... *5 ft 8* ins.

2. **NUTRITION AND DIATHESIS?**

Good.

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. **NERVOUS SYSTEM?**

No.

4. **RESPIRATORY SYSTEM.**

No.

5. **HEART?**

Abnormal Sounds? *No.*

Abnormal Size? *None.*

Pulse Rate? *74.*

Intermittence or irregularity? *No.*

6. **ARTERIES.**—Any hardening?

No.

7. **DIGESTIVE SYSTEM?**

No.

8. **GENITO-URINARY SYSTEM?**

Urinalysis—s.g.?..... *1020.*

Reaction?..... *acid.*

Albumen?..... *0.*

Sugar?..... *0.*

9. **SKIN, MIDDLE EAR, EYE**
or any other part?

No.

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe.

None.

11. Opinion as to the health and physical condition of the one examined?

Good.

Examined at..... *Kimmel pt*

Signed..... *J. J. Lockhart* M.O.

Date..... *15 - 1 - 19*

Signed..... *W. Steephen Lee* M.O.

If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. T 3098 Year 1918	Regimental No.	Rank.	Surname.	Christian Name.
	215746	Pte	Jackson	S.
	Unit.	Age.	Service.	
	49th Can. Div.	34	17/12.	

Station and Date. Disease **H. S. W. Lt. Arm.**

AT Can. Gen
Shoncliffe ¹²⁻¹⁸ **complaint: Nil**

Post History: Wounded Oct 11/18 by Shrapnel. Sent to C.S. and then to Hospital 56th General and then to Chatham and then to U.S.A. Hospital. No operations. Wound healed kindly with very little suppuration.

P.S. No loss of function and no disability at present from wound.

P.C.
Joint on outer side of left arm at insertion of deltoid. No injury to muscle, nerve or bone. No loss of function. G.C. Ford.

Fit for lines A, **1st. Secy Capt**

Deputy Sherriff **Presbyterian**
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.....
 No. 1 Overseas C.A.S.C. Training Depot.

(2) Regimental Number 2115746

(3) Full Name of Soldier..... Alockson, Sandy.

(4) Place of Birth..... Coopers Town, Greigge County, N.D.,

..... U.S.A.

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

(6) If married, state,
 (a) Full name of your wife..... Selma Alockson,

..... Camrose, Alat.

(b) Present Postal Address.....

(7) Are you a widower? No.

(8) Have you any children?..... Yes. One.

If so, give number of boys and girls..... 1 girl

Also their names and ages..... Marcella Alockson, 3½ Yrs.

.....

.....

.....

.....

(9) Is your Father alive?.....**No.**.....

If so, state name and address.....

(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.

W. H. Regier
.....
Officer Commanding.

Date.....**JAN 15 1918**.....

O. C. No. 1 OVERSEAS C. A. S. C. Training Det.

2115746
A.2.

MEDICAL HISTORY SHEET.

Surname SANDY Christian Name ALACKSON

Examined { on 14th day of July 1917
at Edmonton Alberta.
Birthplace { City or Town Greggs County
County North Dakota U.S.A.

Approved by [Signature]
Rank Major C.M.O.

Apparent age 32 Years

Trade or occupation Motor Driver

Height Five Feet Seven & 1/2 Inches

Weight One Hundred & Sixty-five lbs.

Chest measurement { Minimum 34 inches
Maximum expansion 3 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right KXXX Left.
Number One

When Vaccinated last Infancy

(a) Marks indicating congenital peculiarities or previous disease None

(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.	VACCINATIONS.
<u>NOV 24 1917</u>		<u>[Signature]</u> M.O.
		M.O.
		M.O.

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>NOV 10 1917</u>		<u>[Signature]</u> M.O.
<u>NOV 24 1917</u>		<u>[Signature]</u> M.O.
<u>DEC 1 1917</u>		<u>[Signature]</u> M.O.

None
R - D - 20
Vin L - D - 30

Enlisted on 14th day of July 1917 at Edmonton. Alta.

	CORPS.	REG'L NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>No. 1 Overseas C.A.S.C. Training Depot</u>	<u>2115746</u>		<u>14th July 1917</u>
Transferred to	<u>Ottawa O/S Depot C.A.S.C.</u>			<u>15/1/18</u>

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.

ORIGINAL

MEDICAL HISTORY SHEET.

Surname SANDY ALACKSON Christian Name ALACKSON SANDY

Examined { on 14th day of July 1917
at Edmonton Alberta.

Approved by

Justin Lopez
Rank Major C.M.O.

Birthplace { City or Town Greggs County
County North Dakota U.S.A.

Apparent age 32 Years

Trade or occupation Motor Driver

Height Five Feet Seven & 1/2 Inches.

Weight One Hundred & Sixty-five Lbs.

Chest measurement { Minimum 34 inches.
Maximum expansion 3 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm XXXX Left.
Number One

When Vaccinated last Infancy

(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection None

Vision None
Refr 8 - 20
2 - 30

Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.
		10 NOV 1918 M.O.
		13-7-17 M.O.
		<i>Justin Lopez</i> M.O.
		M.O.
		M.O.
		<i>W.A. Gordon</i> M.O.
		M.O.

Date.	Result.	VACCINATIONS.
NOV 24 1917		<i>Swacku</i> M.O.
		M.O.
		M.O.

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
NOV 10 1917		<i>Swacku</i> M.O.
NOV 24 1917		<i>Swacku</i> M.O.
DEC - 1 1917		<i>Swacku</i> M.O.

Enlisted on 14th day of July 1918 at Edmonton, Alta.

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>No. 1 Overseas C.A.S.C. Training Depot</u>	<u>2115746</u>		<u>14th July 1917</u>
Transferred to	<u>OTTAWA 1/2 DEPOT C.A.S.C.</u>			<u>15/1/18</u>
	<u>21ST RES. Bn.</u>			<u>8/8/18</u>
	<u>Hq 4th Bn</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Kinross Park.</u>	<u>15.1.19.</u>	<u>nil.</u>	<u>"A" J. L. L. Capt. C.M.O.</u>
<u>Edmonton Alta.</u>	<u>17.2.19.</u>	<u>M. F. W. 129</u>	<u>A. C. M. C. Capt. C. A. M. C.</u>

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.
H. Q. 1772-39-439.

P.A. 14.7.18
 21.7.18
 21.7.18
 21.7.18

CANADIAN

Surname Alackson. Christian Name Sandy.

STATION.	Date of Arrival at the Station.	DATES OF						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.
		Admission into Hospital			Discharge from Hospital						
		Day	Month	Year	Day	Month	Year				
No. XI CANADIAN GENERAL HOSPITAL, MOORE BARRACKS, SHORNCLIFFE.							G.S.W. Arm 117	117	Wounded Oct 1/18 by shrap sent to C.S. & V.A.D. No operation Wd healed with very little suppuration No disability at present from wd. Faint scar on outer side of Lt Arm No injury to muscle nerve or bone S.C. Good To fines 18/12/18 Kingwood A.	<i>[Signature]</i>	

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

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

Casualty Form—Active Service.

250M.—1-16.

H. Q. 1772-39-920.

Unit, Regiment or Corps

C.A. S.C.

Regimental No.

2115-746

Rank

Pte

Name

Blackson

C. E. F.

Enlisted (a)

Terms of Service (a)

Service reckons from (a)

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)

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				
<i>25/2/19</i>					<p>DISCHARGED FROM THE SERVICE BY DISTRICT DEPOT NO. 13, PART 2 ORDER NO. <i>56</i></p> <p>AUTHORITY <i>R. U. 1420</i></p> <p><i>Dated Ottawa 12/12/14.</i> <i>W. W. Macmillan</i> Lieut. Col. Officer Commanding District Depot No. 13</p>

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

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				

DEMOBILIZATION PAY DIVISION, M. D. 13

CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44.
1188 (D.P.) 250M.-12-18.
1772-39-908.

LAST PAY CERTIFICATE

Regimental No. 2115746 Rank Pte. Name Alackson S.
(Surname first)
 Unit CASC who was* Discharged
 On 25/2/19 191....., to.....
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1/2/19 to 25/2/19 191...
 the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month <u>xxxxx</u> <u>Eng LPC</u>	57.64	
Regimental Pay <u>25</u> days at \$ <u>1 c.00</u>		25.00
Field Allowance <u>25</u> days at \$ <u>c.10</u>		2.50
Separation Allowance <u>25 dys Feb.</u>		25.00
Clothing Allowance		35.00
Post Discharge Pay		
*Other Credits <u>Subs. DD 35 1/2/19 - 14/2/19 14 dys @ 80 cts</u>		11.20
Advances		
Separation Allowance and Assigned Pay Cheque No. <u>A 3550</u>	40.00	
*Other Charges		
Balance on transfer or on discharge, cheque No. <u>A 3551</u>	1.06	
Total	98.70	98.70

*Give particulars.

A monthly stoppage of \$ 20.00 (†) has..... (‡) been paid on account of
 Assigned Pay for the month of February 1919 }
 and Separation Allowance for month of Feb 25 dys 1919 } (to) Assignee Mrs. S. E. Alackson
 (Address) New Norway, Alta.
(†) 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.

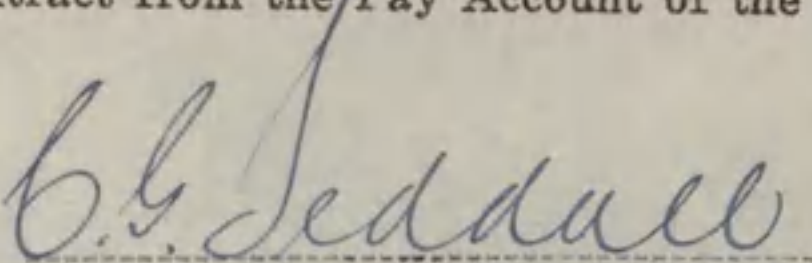
Outfit Allowance of \$..... has been paid by Paymaster, Military District No.

REMARKS:—

State (1) date of enlistment married or single Married
 (2) Separation Allowance, entitled or not Yes (3) Reason for discharge.....
 (4) Authority for discharge or transfer DD 13

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer or soldier.
 Date 24/2/19
 Place Calgary, Alta.


 LIEUT.
 PAYMASTER, DEMOBILIZATION PAY DIVISION, M. D. 13
 Paymaster.

N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916.
 (B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "on discharge cheque No." will be deleted.
 (C) For purpose of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. As payment of the balance will have been made, the words "on transfer or" will be deleted.
 (D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificates will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.



KINGSWOOD PARK HOSPITAL.

Name ^{PT} Blackson

Age 34

Home Address New Norway, Alberta.

Regiment 49 Canadians

Number 2115746

Diagnosis G.S.W. arm (L)

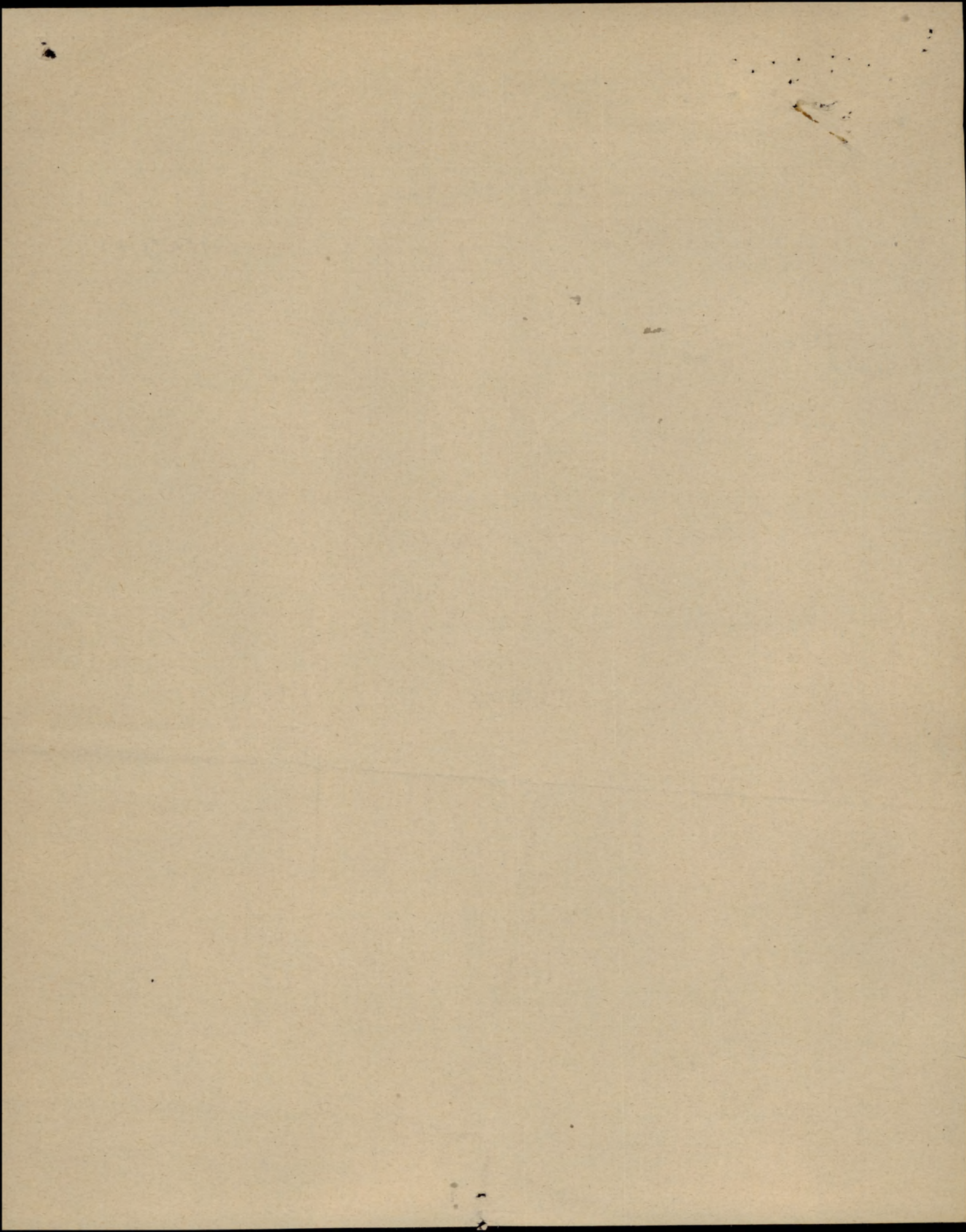
Admittance Oct 6⁰
Wounded 1st

Discharge

Date.

Treatment.

Diet.



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

M. F. W. 54. (A. F. 103.)
350M.—5-1
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps. ~~1st Cdn. Div.~~ ¹⁹¹⁷ ~~C.A.S.C. Medical Depot~~ ^{C.A.S.C.}

Regimental No. 2115746 Rank Private Name ALACKSON, Sandy
C. E. F.

Enlisted (a) July 14/17 Terms of Service (a) None ^{None} Service reckons from (a) July 14, 1917

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) Motor Driver

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
Transferred to	OTTAWA OVERSEAS	DEPOT C.A.S.C.	JAN 15 1918	no Record.
	Embarked	Canada	21/2/18	
	Disembarked	England	4/3/18	✓
	Taken on strength on arrival from Canada.	BRAMSHOTT.	4 MAR '18	✓ Pl. II D.O. No. 83.
	PROCEEDED OVERSEAS FOR SERVICE WITH 49 TH BATTALION.	BRAMSHOTT, AUG	8 1918	✓ Pl. II D.O. No. 187
	Landed in France. strength 58th Cdn. Bn.		9-8-18	✓
	Left for			
	Arrived			
10-8-18	CIBD	Field	13-8-18	NR. 1343.
17-8-18	Or. 40th		16-8-18	B213.

CERTIFIED CORRECT.
 APR 18
 AUG 1918
 CAN. RECORDS, LONDON.

8161

(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]

General Form - Active Service

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				
4-10-18	56 th Genl.	Wounded (SW Arm) & posted to Arrai. Reg. Depot. Bramshott. per H/S Stad Antwerpen		4-10-18	W 3083/6148. D.O.I. 98, d/10-10-18. E. W. Dorrie Lieut. for Lt. Col. A.A.P.
23-11-18 to 10-10-18	A.R.D.	TOS from 49 Bn	B. Shott	4-10-18	DO 298 L. S. Lundy LIEUT: FOR LT. COL: I/C RECORDS, C.O.M.F
24-12-18	21st Res Bn	T O S from A.R.D. ON CMD. KINMEL PK. CAMP, RHYL.	B. Shott	21-12-18	PT 200 <u>304</u> Pl. II D.D. No. Lieut. & Asst. Adjt. Battalion (Alberta.) H. M. T. 'AQUITANIA' EMBKO. LVP'L JAN. 18. 1919 DEBKO. HALIFAX. N.S. JAN. 24. 1919
19-1-19		Taken on strength of District Depot 13, Part 2 Order No. 13 Commanding 13. Wing, Kinmel Park Camp.			Lieut. Col. Officer Commanding District Depot No. 13

Attached C.C.C. Kinmel Park for return to Canada. Part II Orders No. 9. Ceases to be attached C.C.C. Kinmel Park on embarking for Canada, Part II Order No. 16

107. O. Brice. H. Saunders. Lt. Commanding 13. Wing, Kinmel Park Camp.

H. M. T. 'AQUITANIA'
EMBKO. LVP'L JAN. 18. 1919
DEBKO. HALIFAX. N.S.
JAN. 24. 1919

35
W. Masmyth Lieut. Col.
Officer Commanding District Depot No. 13

Surname

Christian Name or Names

Reg. No.

ALACKSON.

S.

2115746.

Rank
Pte.

Unit. 49.

Cas. List.

9-10-18. A339/4 ... 56. G.H. Etaples. 2-10-18.

G.S.W. L. Arm. 6/

20-11-18 B375

Fort Pitt Mil. Chatham 6-11-18.

17-12-18 B398

11 C. G. A. Shorncliffe 12-12-18.

24-12-18 B404

Mis. 21-12-18.

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

D.M.S. 1300. 50M-30-8-18.

LOCAL CARD

*Name **JACKSON Sandy** Rank **Pte.** Regtl. No. **2115746**
 Original unit **AS** Present unit **49th. Bn.** M. or S. **M** Age **34** Religion **Pres.** Fyle Depot **I.3.D.A-165**
 Port, ship, and date of arrival **Aquitania, Halifax, 25-1-19**
 Next of kin **Mrs. S. Alackson, wife, New Norway, Alta.**
 Address on leave **same**
 Address on discharge **as above**
 Transportation issued Yes No Date Character on discharge
 Previous occupation **Real Estate** Date and place of enlistment **Edmonton, 4-7-17.**
 Diagnosis **Fit** Date of Medical Boards **17-2-19**

Date.	Remarks	Pt. 2 Order No.
T.O.S.		
19-1-19	Posted to Gas Co Edmonton 1-2-19	35
	leave with sub to 14-2-19	35
25-2-19	Discharged from H.M. Service	56

*—Name will be given in full; surname first.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
<i>Mr</i> <i>AL</i> Number.....	2115746	Rank <i>PT</i>	
Surname.....	ALACKSON		
Christian Names.....	Sunday		
Unit.....	49th Central Postal Directory Theatre of War France		
Date of Service.....	9-8-48		
Remarks.....			
Latest Address.....	New Norway Acta		
Roll No.	<i>B Page 3254</i>		

B

N

NAME

REGT. No.

RANK AND UNIT

NEXT OF KIN

CABLE

NATURE OF CASUALTY

No.

DATE

929160000p

REGT'L. No. 2115746
H. Q. FILE NO 649

NAME Blackson, Sandy

RANK AND CORPS Pte 49th Bn. Inf. M. B. Co

FOLLOWS
No. _____
FOLLOWS

CABLE		NATURE OF CASUALTY
NO.	DATE	
<u>N.O.X.</u>	<u>Mrs. Selma E. Blackson. (wife) Cam-</u> <u>rose. Alta.</u>	
<u>18382</u>	<u>11-10-18</u>	<u>Adm 56 Gen Hosp Staples</u>
<u>20-11</u> <u>AT. 9339</u>	<u>9-10-18</u>	<u>Oct 2nd. 1918. Gsw Arm.</u>

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

B375	Mil: Lt. Pitt Chatham	6-11-18	Gsw: Lt Arm
B398	11 th Cav Gen: Shoinc	12-12-18	" " " "
B404	Dise	21-12-18	" " " "

No. 366.
 211 5746 Nov. Paylist.

RANK Pte.

NAME Blackson S.

T.O.S. Trans. from 16th. UNIT Can Army Service Corps #1 Training Depot
 10ft. C.C. S. C. (M.D. 13.)
 1. 11. 17. (20. 31 of 3. 11. 17.)

M. D. 10.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917. Oct. 1.	1917. Oct. 31.	✓	From L.P.C. 16th. Rein'd ft. m. 20. 13.	Oct. Paylist.
1918. Nov. Dec. Jan.	1918.	✓ ✓ ✓	Proceeding to with 15th. 29ft.	20. 31 of 31. 1. 18.

No

Rank

Name

T.O.S

Unit

M.D.

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

SIX
OR
FIVE

DATE
TO

DATE
FROM

PARTICULARS

AUTHORITY

No. 366.

RANK *Pte*

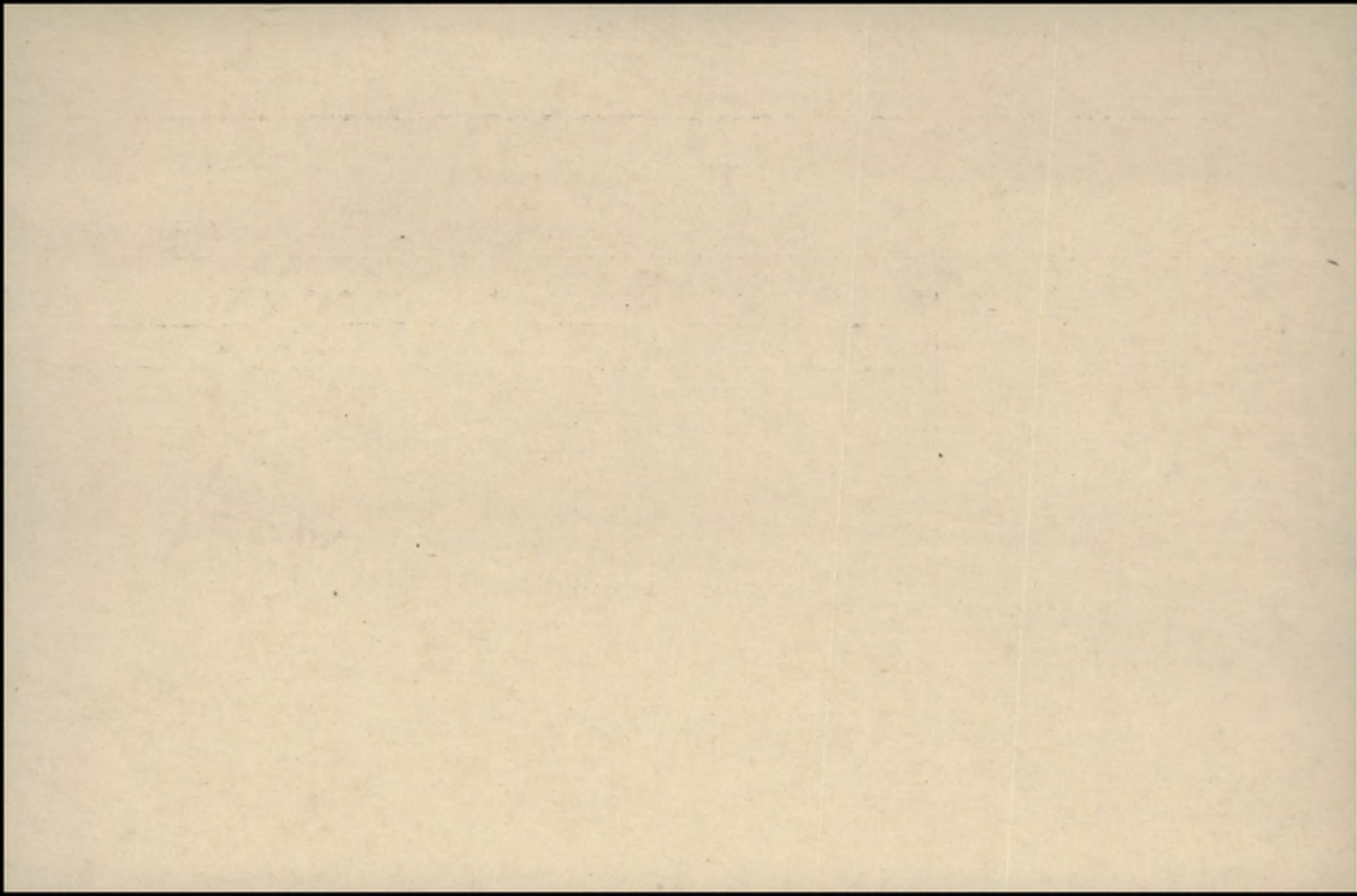
NAME *Blackson Sandy*

T. O. S. *14. 7. 17.* UNIT *Reinforcements C.A.S.E*

DD. 339.

#
M. D. *13*

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
<i>1917</i> <i>Sept. 25.</i>	<i>1917.</i> <i>Sept. 30.</i>	<i>✓</i>		



ET.

Rank

Name

ALACKSON, Sandy

Reg'l No. 2115746

Unit

Dr C A S O.

If in perm. Corps,
What Unit? }

Married or Single **Married.**

Place and Date of Enlistment

Edmonton, July 14th. 1917.

Place of Birth Greggs Co.,

Name and Address, Next-of-Kin

Selma E. Alackson,

N. D. U. S. A.

Camrose, Alberta, Canada

Relationship

Wife.

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

N/E. R. B. No. 9210
File No. CAN. CR
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.				
<i>6.</i>			Arrived in England	4-3-18	S/S CRETIC
8-4-18	2 nd Res. B.	T.O.S. on arr. from Canada	Bramshott	4-3-18	P 2083
9-9-18	"	S.O.S. to 49. B. ops	"	8-8-18	" 184 & 66 49 B. 9/17/18/19
9-10-18	ARK 49	Wounded	Field	2-10-18	C.L. A 839
10-10-18	49. B.	S.O.S. posted to ARD.	"	4-10-18	P 20. 98 A.R.D. P. II 298
24.12.	R. 21 st Res	" S.O.S. from A.R.	Bokett	21.12.18.	P. II 304 A.R.D. P. II 325 13 " 18 24/18
10-1-19	✓	On Com. to Stuyvesant, Pk Rhyf	✓	10-1-19	✓ 8
29 1 19	- "	S.O.S. to C of Canada	" Ripon	18-1-19	P. II 22

A.F.B. 103
12 AUG 1918

Date of Enlistment

14/1/18

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

A 1030 Mar 18

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

20	25	30
		1-9-18

Ob. 2753
M.A.O. 26942

AUTHORITY
FOR
NEW ACC'T.

WR.

RATE OF ASSIGNMENT

15.			
-----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. 2115746
 Rank Pte Promoted Reverted Discharge
 Soldier's Name Alackson Sandy
 Battalion no. 1 of case I.D.
 Beneficiary Mrs Selma E Alackson
 Relationship Wife M7W 2554 30/9/18
 Address New Norway

PARTICULARS OF ASSIGNMENT (wife)

Name Mrs Belma E. Alackson
 Address ~~Carnrose Alta~~
 Change of Address
 1 New Norway Alta
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total
Feb	077410	140		
Mar 1918	M 77211		15	15
April	G 7982		15	15
May	A 10915	25	15	40
April	G 6239	75		75
June	R 13531	25	15	40
July	Y 26793	25	15	40
Aug	A 29271	25	15	40
Sept.	A 35896	25	15	40
OCT	A 42534	25	15	40
NOV	A 50632	25	15	40
DEC	A 62533	45	15	60
JAN	B 70041	30	15	45
FEB		30	15	45
		<u>465</u>	<u>165</u>	

File REMARKS 165-S-3-
 M7W 2554 ok Hb 9/18. M Ro B rendered 24/1/18 (67616)
 \$15 to adj. SA. for Feb March & April Mailed 24/4/18 29/4/18

M. F. W. 128.
40M. 6-7-17-39-1141
L. L. 2220-M. & D. 7893.

Balabanley 4-5-18

A/c Closed 31/1/19
 Ret'd per Aquitania
 Date 25/1/19 M.F.W. 187-30/1/19
 J. Hallis

M.R.O. 1a

Date of Enlistment

14/7/17

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

20	25		
----	----	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. *2115746*
 Rank *Pte* Promoted Reverted Discharge
 Soldier's Name *Blackson Sandy*
 Battalion *No. 1 O.P. C.A. S.C. J.D.*
 Beneficiary *Mrs Selina E. Blackson*
 Relationship *wife*
 Address *New Norway, Alta.*

PARTICULARS OF ASSIGNMENT

Name
 Address
 Change of Address
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Feb 27th 18</i>	<i>77410</i>	<i>140 00</i>		<i>140 00</i>	<i>mailed 28/2/18 Special adj. cheque for \$140⁰⁰ ordered 27/2/18, adjusting S.A. from enlistment to 31/1/18, from which date it should be paid by P.M. Auth ruling of Maclell on S.A. card file 168-8-3. J.P.S. 27/2/18.</i>

M. OR S. *M*

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

REGT. No. *2115746* RANK *PTE.* NAME (IN FULL) *ALACKSON, S.* (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?
ADDRESS					PLACE OF ATTESTATION	TRANSFERRED TO DATE AUTHORITY
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				DATE OF ATTESTATION	TRANSFERRED TO DATE AUTHORITY
TO WHOM PAID	RELATIONSHIP				ASSIGNED PAY \$	DATE EFFECTIVE
ADDRESS					PAYABLE TO	RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS
					ADDRESS	
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE
					DISCHARGED	PLACE DATE REASON AUTHORITY IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A.		OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGIMENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS	
	NO. OF DAYS	RATE			AMOUNT	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2					COL. NO. 3	DEBIT		CREDIT
31-1-19	1 ¹⁰			2 23													<i>Bal. E. etc.</i>	
1-2-19				2 23				4 57	50.00	5.00				59.87				
25/2/19	25	1 ¹⁰	27.50	35.00 25.00	98 70					1.06	40.00			98 70 41 06			<i>Separation Allowance \$ 25.00 Feb 25 days 35 subsistence 14 days 11.25 Feb 1-14 19 Block ing. Allow. 35.00</i>	
			27.50	71.20	2 23			4 87	50.00	6 06	40.00			100 93			<i>DISCHARGE FEB 25 1919 65 Suddaer fund</i>	
<p>Continued opening entries on this Ledger Sheet have been audited by <i>[Signature]</i> Date <i>25/4/19</i></p>																		
			122 days	280 120 9 49	49 49			70		70	70			100 210 109 49 140			<i>cheque 134226 - 25-3-19 by 9.49 per fund 21.18-3/19 by 1.06 per fund 2-4-19 944355748 25/4/19</i>	
				289 49 130.00	409 49			70		70	70			100 70			<i>6608929-30 23-5-19 8871681-682 14-6-19</i>	
								289 49		150.00				409 49			<i>Payments Due on This Account have been completed.</i>	

[Signature]
Paymaster War Service Gratuity M. D.

* Strike out whichever inapplicable.

ASSIGNED PAY	ENGLAND OR CANADA.	SEPARATION ALLOWANCE	ENGLAND OR CANADA.
EFFECTIVE DATE:-	1. 3. 18	EFFECTIVE DATE:-	
AMOUNT:-	15 ⁰⁰	AMOUNT:-	

NAME:- *ALACKSON Sandy*

NUMBER:- *2115446*

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 Selma E. Alackson *Wife*

New Norway, Alta.

Stopped 1/2/19 *NR*

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
<i>Cant Pl.</i>		<i>Pte</i>

UNIT AND TRANSFERS

ORIGINAL UNIT *#7 Cash Draft*

DATE ACCOUNT FIRST OPENED:- *1. 3. 18*

AUTHORITY	DATE EFFECTIVE	DATE LODGED SHEET T'S/O	UNIT TRANSFERRED TO
<i>66</i>	<i>17.8.18</i>	<i>9.8.18</i>	<i>19.18</i>
			<i>31st Res Pn.</i>
			<i>49 Bn</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>20/1/18</i>	<i>6357</i>	<i>Thorncliffe 11th Bn</i>	<i>£10</i>				
			<i>48.67</i>				

P. 868 Rend. M.C. to Credit #9.49 6/1/19

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
<i>Cant Pl.</i>	<i>1</i>	<i>10</i>		

and 2118-9/1/19 1730 2nd 13

PARTICULARS OF RENDERING NON-EFFECTIVE:- *Discharged to Canada 2/1/19 also 2118-9/1/19 dis. 13 Cr. Bal. 223*

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
<i>Mar. 31</i>	<i>Balance Forward</i>								<i>39 40</i>		
<i>Apr.</i>	<i>P. Pay</i>	<i>33</i>		<i>Can. A.P.</i>				<i>15</i>			
				<i>AR 35 - 15.4.18 21 Res</i>	<i>4 87</i>						
				<i>116 22.4.18</i>	<i>24 33</i>						
				<i>2n. 3860 15.3.18 - 6.2.5.6</i>	<i>4 87</i>						
				<i>2705 16.3.18</i>	<i>24 33</i>				<i>1 -</i>		
		<i>33</i>			<i>58 40</i>			<i>15</i>			
<i>May</i>	<i>P. Pay</i>	<i>34 10</i>		<i>Can. A.P.</i>				<i>15</i>			
				<i>AR 310 15.5.18 21 Res</i>	<i>9 73</i>						
				<i>443 20.5.18</i>	<i>17 03</i>				<i>8 66</i>		<i>P839 17.6.18</i>
		<i>34 10</i>			<i>26 76</i>			<i>15</i>			
<i>June</i>	<i>P. Pay</i>	<i>33</i>		<i>Can. A.P.</i>				<i>15</i>			
				<i>AR 624 15.6.18 21 Res</i>	<i>7 30</i>						
				<i>746 29.6.18</i>	<i>2 43</i>				<i>- 39</i>		<i>7.</i>
		<i>33</i>			<i>9 73</i>			<i>15</i>			
<i>July</i>	<i>P. Pay</i>	<i>34 10</i>		<i>Can. A.P.</i>				<i>15</i>			
				<i>AR 880 15.7.18 21 Res</i>	<i>2 43</i>						
				<i>1040 20.7.18</i>	<i>12 17</i>				<i>4 11</i>		
		<i>34 10</i>			<i>14 60</i>			<i>15</i>			
<i>Aug</i>	<i>P. Pay</i>	<i>34 10</i>		<i>Can. A.P.</i>				<i>15</i>			
				<i>Bn. 1045 18.8.18 703 B.</i>	<i>3 57</i>						
				<i>1093 21.8.18</i>	<i>1 78</i>						
				<i>1600 12.8.18 - 6.9.18</i>	<i>4 46</i>				<i>13 40</i>		
		<i>34 10</i>			<i>9 81</i>			<i>15</i>			
<i>Sept.</i>	<i>P. Pay</i>	<i>33</i>		<i>Can. A.P.</i>				<i>15</i>			
				<i>AR 1155 3-9-18 HQ Bn</i>	<i>3 57</i>						
				<i>1394 15-9-18</i>	<i>3 57</i>				<i>24 26</i>		
		<i>33</i>			<i>7 11</i>			<i>15</i>			

431

AR

Compiled
Arter 11/1/19
Checked
10/9/18

NUMBER 2115746 RANK

NAME ALACKSON Sandy

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
OCT									24 26		
	P Pay	34 10		CAP				15			
				NR 42742 5/10	9 73				33 63		
		34 10			9 43			15			
NOV				CAP				15			
Dec	✓	67 10		NR. 50779 13/11	4 87						
				NR. 54703 27/11	9 73						
				NR. 58237 11/12/18	9 73						
Jan	✓	34 10		CAP				15			
				6232 18/12 Schife	14 60						
				loan				15			ml
				6357 20/12	4 86						
		10 20			87 60			45	2 23		
FEB	S. O. S. from 21-12-18 to 3-1-19 (19 days) R. M. S. A.										
	A 282 = A. O. 304 24/12/18 21st Res.	9 49									
		9 49							11 72		

S. O. S. to Canada, M. A. 13. 18-1-19 sailing list 7. 21st Res.

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263
Squadron } Battery } Company }	Conduct Sheet, " B. 263a
or	
Field Conduct Sheet	" W. 178
Copies of Convictions, by C. P.	in MS.
Med. Hist. Sheet,	Militia form B. 313
Casualty Form	" W. 54
Medical Report for Invalid§	" B. 227
Dental History Sheet	" B. 465
Last Pay Certificate	" W. 44
Duplicate Discharge Certificate	" W. 39A
‡Form of Will	" W. 82
§Only if discharged "Medically unfit."	
‡Only if man has not been overseas.	

Attestation Paper	Militia Form W. 23
or	
Particulars of Recruit	" W. 133
Proceedings on Discharge	" B. 218

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

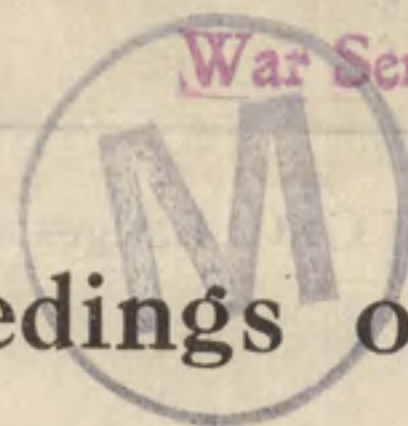
- (a) Proceedings on Discharge
- (b) Attestation.
- (c) Medical History Sheet.

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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.



Proceedings on Discharge.

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

No. 2115746	
Rank Pte.	
Surname ALACKSON	
Christian name Sandy	
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company) A.S.C.	
Date of discharge February 25th, 1919	
Place of discharge Calgary, Alta.	
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age..... 33years.....months. Height..... 5feet..... 8inches. Complexion Fair Eyes Grey Hair Fair Trade Farmer Intended place of residence New Norway, Alta. (To be given as fully as practicable.)	Descriptive marks .S.W. Lt.Arm
2. The above-named man is discharged in consequence of	
DEMobilIZATION	
Authority for discharge..... R.O. 1420 12-12-18	
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.	
3. Conduct and character while in the service have been, according to the records, etc.	
N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.	
4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)	

M. F. B. 218.
200M.—5-18.
H. Q. 1772-39-113.

A C

(OVER)

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

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

6. Medals and Decorations.....

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).....

(Date).....

Commanding.....

8. Certificate to be signed by the Soldier on Discharge

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, and that I have received my permanent discharge certificate.

(Place) Edmonton Armouries..... (Signature of Soldier.) Sandy Alackson

(Date) 17/2/19 H. Freeman..... (Signature of Witness.) Pte

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.

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

(Place) Calgary, Alta......

(Signature) W. MacIsaac.....
Discharge Section District Depot M. D. 12

(Date) 25-2-19.....

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.)

Pay as per paybook balance.

Sandy Alackson