

REGIMENTAL DOCUMENTS

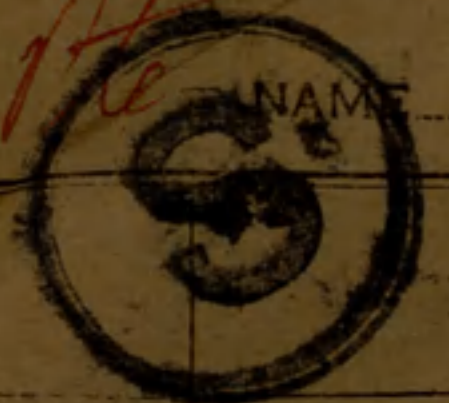
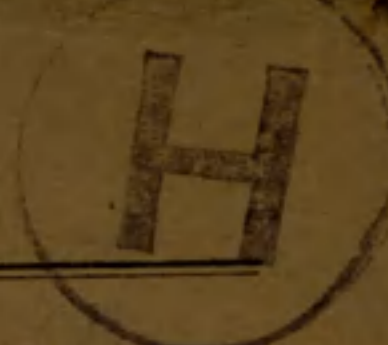
NAME **ANDERSON LEONARD**

REGT. NO. **1006005**

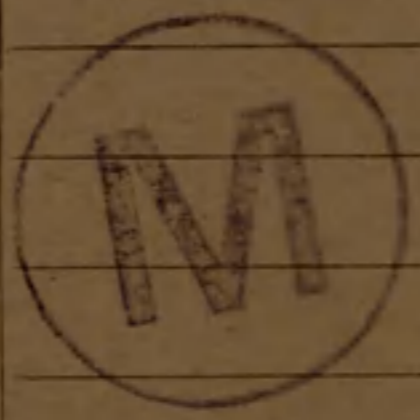
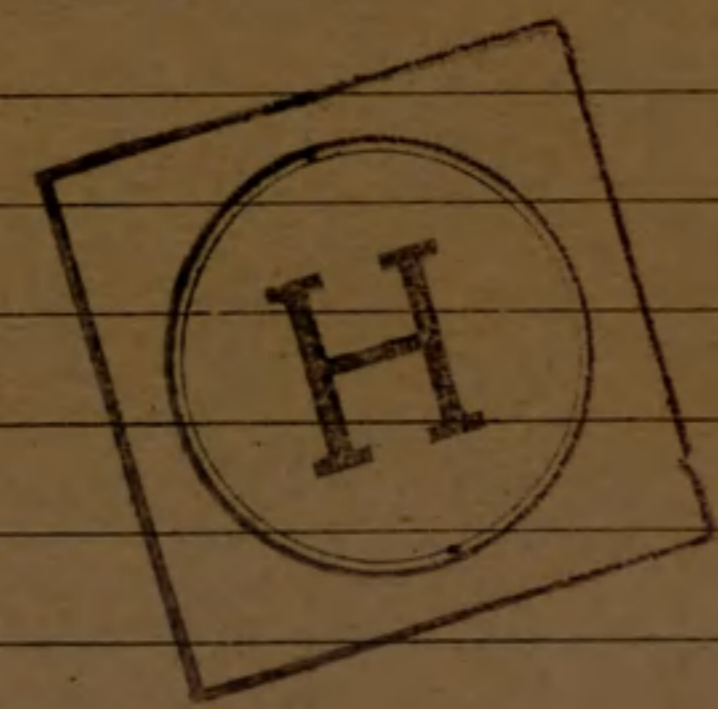
UNIT **225th Reg**

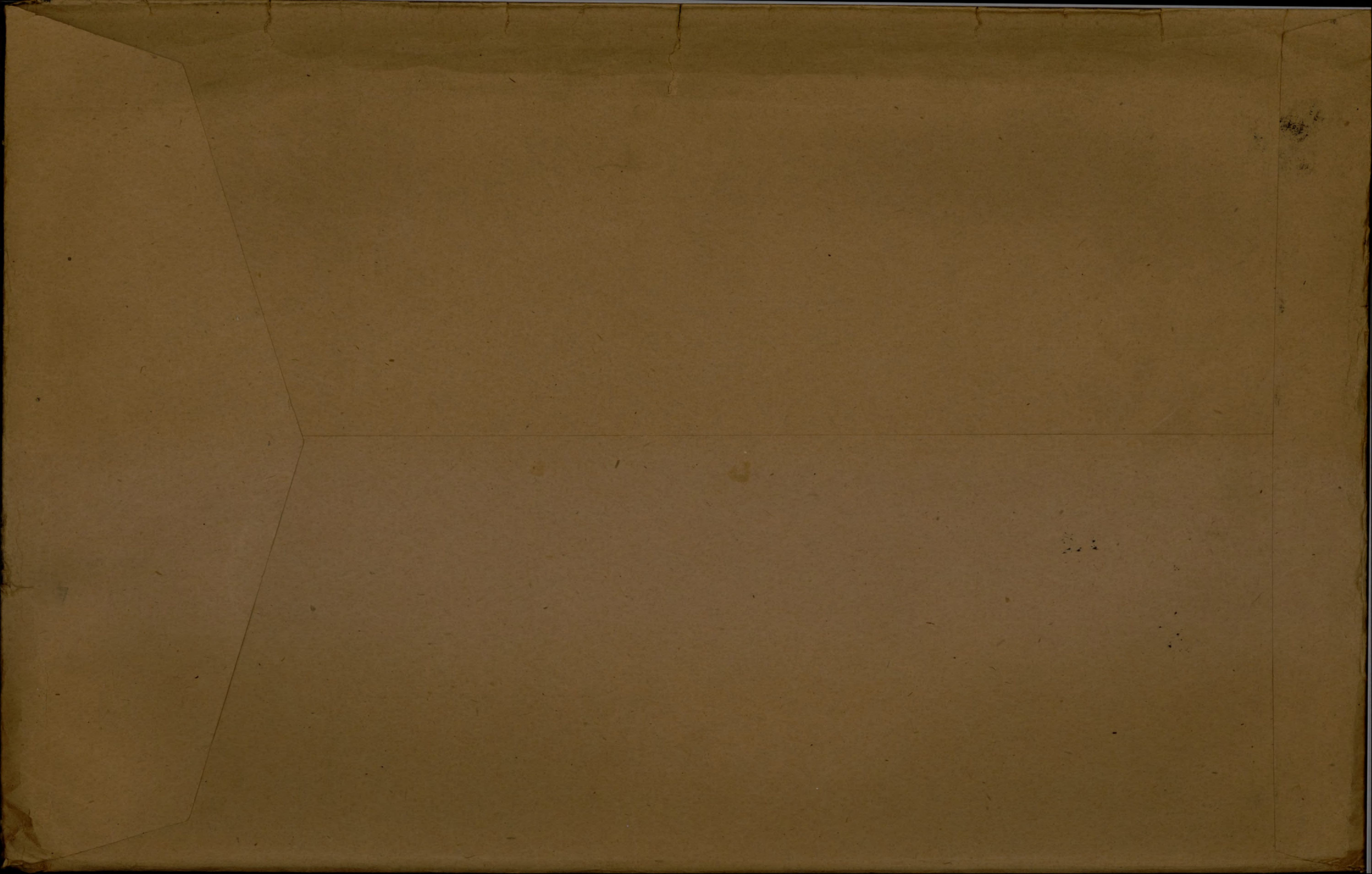
H. Q. FILE NO.

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CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1 ATTESTATION PAPER (M.F.W. 23, 133, or 51) 3	Mar 4/19				DEATH
2 CASUALTY FORM (M.F.W. 54 or A.F.B. 103) 2					Category
1 TRAINING HISTORY SHEET (M.F.W. 113) <i>Rec'd Sheet</i>					
1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1 REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1 COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1 DENTAL HISTORY SHEET (M.F.B. 465)					Category
1 MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
1 MEDICAL EXAMINATION (M.F.W. 129)					
1 TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
1 PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
1 DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					<i>Memob</i>
1 LAST PAY CERTIFICATE (M.F.W. 44)					DESERTION
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1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1 <i>U. M. S. 1375</i>					
1 <i>I. S. C. 132</i>					
1 <i>m SW 192</i>					
1 <i>G. U. M. C. 5009A</i>					
1 <i>...</i>					
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ATTESTATION PAPER.

No. 1006005

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

S.R.

- 1. What is your surname? *Anderson*
- 1a. What are your Christian names? *Leonard*
- 1b. What is your present address? *Norfolk Bay Ontario*
- 2. In what Town, Township or Parish, and in what Country were you born? *St. Michaels Bruce County Ont.*
- 3. What is the name of your next-of-kin? *Mrs. Ethel Anderson*
- 4. What is the address of your next-of-kin? *Norfolk Bay Ontario*
- 4a. What is the relationship of your next-of-kin? *Wife*
- 5. What is the date of your birth? *Dec. 14th 1890*
- 6. What is your Trade or Calling? *Stationery Engineer*
- 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*
- 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, *Leonard Anderson*, 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.

Date *March 21st* 1916. *Leonard Anderson* (Signature of Recruit) *W. H. Ferguson* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Leonard Anderson*, 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.

Date *March 21st* 1916. *Leonard Anderson* (Signature of Recruit) *W. H. Ferguson* (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 *Norfolk Bay* this *21st* day of *March* 1916. *Geo. L. T. Bull* (Signature of Justice)

Approved for attesting app. in S.C.O.

Description of Leonard Anderson on Enlistment.

Apparent Age 25 years 3 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. 5 1/4 ins.

Chest measurement { Girth when fully expanded 36 ins.
 Range of expansion 4 ins.

nil

Complexion Fair

Eyes Blue

Hair Fair

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

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 March 21 1916 A. W. Vennuch, M.D.

Place North Bay 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.

Leonard Anderson 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.

A. Sarsburn Lt. Col. (Signature of Officer)
 G. C. NORTHERN FUSILIERS 228TH O. S. BATTALION

Date March 21 1916

1916

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 1006005 (Rank) pt.

Name (in full) ANDERSON, LEONARD enlisted in
the 228th Bn

CANADIAN EXPEDITIONARY FORCE at North Bay on the 21st
day of March 19 16.

HE served in En land and France

and is now discharged from the service by reason of Demobilization

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

Age 28 yrs. 3 mos.

Height 5' 5 1/2"

Complexion Fair

Eyes Grey

Hair Fair

Marks or Scars

acc. marks..... L. Arm

L. Anderson
Signature of Soldier

H. Sargeant
Issuing Officer

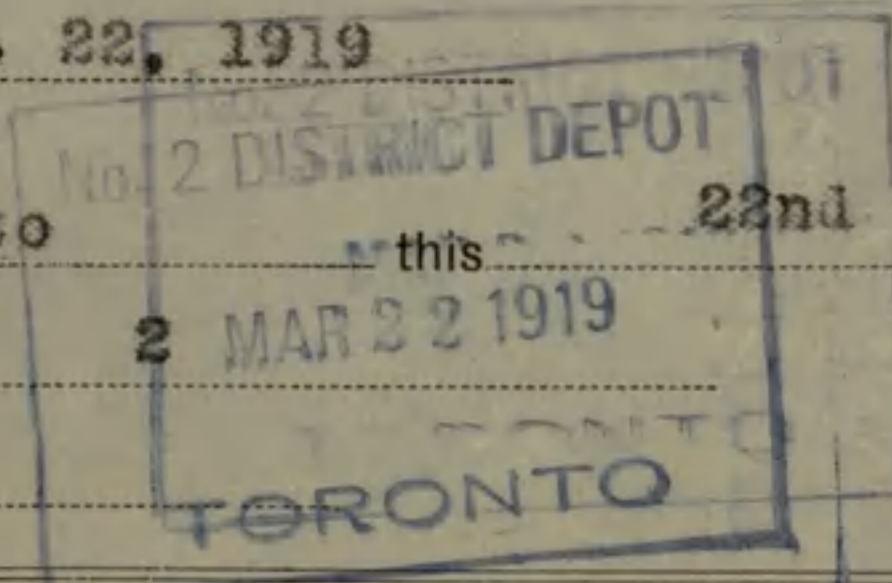
Date of Discharge March 22, 1919

For
O.C. No. 2 District Depot.

Signed at Toronto this 22nd day of March 19 19

in Military District No. 2

File Reference No. TORONTO



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.

G.R.

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.

Uniform is not to be worn after expiration of one month from date of discharge, except by special permission of G. O. C. District

DUPLICATE

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... **228th Os Bn C. E. F.**

(2) Regimental Number ... **1006005**

(3) Full Name of Soldier... **Leonard Anderson**

(4) Place of Birth... **Lucknow Ontario.**

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

(6) If married, state,
(a) Full name of your wife..... **Mrs. Ethel May Anderson**

(b) Present Postal Address..... **Box 358 North Bay Ontario.**

(7) Are you a widower? **No.**

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

If so, give number of boys and girls..... **One Boy.**

Also their names and ages..... **Charles Llyod Anderson 2Years 2 Months.**

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

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

(10) Is your Mother alive?..... **Yes.**.....

If so, state name and address..... **Mrs. Cora May Anderson**.....

..... **85 Wellington Street Sault Ste. Marie Ontario.**.....

(11) If your Mother is a widow..... **Yes.**.....

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.

.....
.....

(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?..... **Yes.**.....

If so, in what Company?..... **Metropolitan Insurance Company**.....

Have you made arrangements for payment of your Insurance premium..... **Yes.**.....

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

a Sachin
.....
Officer Commanding.

Date **January 11th 1917.**.....

O. C. NORTHERN FUSILIERS 228TH O. S. BATTALION

A₂

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. 1006005 Rank Sap Surname ANDERSON
(Give name in full)
Leonard
Unit or Corps 2 DD Birthplace Bruce Co. Can.

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

1. GENERAL DESCRIPTION:

Physique good Weight 127 lbs. Height 5 ft. 5 1/4 in. Colour of Eyes Grey
Nutrition good
Pulse 72
Condition of arteries normal
Vision Rt. 20/30 Left 20/30
Hearing (conversational voice) Rt. 21 ft.
Left 21 ft.

Identification marks, scars, or deformities.
(Give cause and date of origin.)
Wound L. Arm. Lost. 16-12-16.

Opinion as to general health and physical condition A₂

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 no alb. no sugar. 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.

hemia no haemorrhoid no varicose no
varicose vein no goitre no
Hydrocele R. slight no disability -
previous to enlistment, no aggravation.

APPROVED
MAR 19 1919
W. H. M. S. M. D. 2
FOR A. D. M. S. M. D. 2

(If space is insufficient, continue on back of form.)

[OVER]

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.....(Canada)

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

[OVER]

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT *2*

NAME OF SOLDIER *Anderson Leonard*

REGIMENT

RANK *Sp. Pr.*

No. *1006005*



INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

	Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhoea	Synthetic Porcelain	Extracting	DENTURES			Gold Clasp	Gold Filling	CROWNS		Bridge Work	OPERATOR	Military District	REMARKS
												U	L	P			Gold	Porcelain				
Condition on first Examination																						
	<i>Discharge Exam At Exhibition Camp</i>																					
	<i>Date. MAR 19 1919</i>																					<i>Certificate issued for Filling Prophylaxis</i>
																						<i>W. Sample Major</i>

CERTIFIED PARTICULARS AGREE WITH DOCUMENTS

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

DISCHARGED

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 *Leonard*..... 2. Surname *Anderson*.....
3. Rank *Pte*..... 4. Original Unit *228 Bn.*..... 5. Reg. No. *1006005*.....
6. Address, in full, to which future payments of gratuity are to be forwarded
Box 358 North Bay - Ont.
7. Date of enlistment in the C.E.F. *21 Mar 1916*.....
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *Mr. E. Anderson*.....
9. Relationship of such dependent *Wife*.....
10. Present address, in full, of such dependent *as above*.....
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:—
228 Bn Feb 1917 - Mar 1917.....
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 units 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
228 Bn - 6 C.R.I. - 21/3/16 to 22/3/19. 3 years 1 day
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*.....

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
- 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?
24. Are you now serving in the C.E.F. *No*. If not, give:—(a) Date of discharge *22/3/19*
 (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
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
C.R.S. April 1917 - Dec 1918
27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?
 (b) If so, are you in receipt of full pay and allowances from that Department?

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

Signature of Applicant: *L. Andersson*

Place of Residence: *North Bay Ont*

Declared before me at: *Toronto*

This *18*

day of *Mar*

19*19*

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

[Signature]

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....
.....
.....

Certified Correct.

District Paymaster.

MEDICAL HISTORY SHEET.

Surname Anderson Christian Name Leonard

Examined { on 21 day of March 1916
 at North Bay
 Birthplace { City or Town Lusknow
 County Bruce

Approved by A. H. Murchy M.D.
 Rank 2nd M.O.

Apparent age 26
 Trade or occupation Stationary Engineer
 Height 5 Feet 5 1/4 Inches. M.O.
 Weight 125 3/4 Lbs. M.O.
 Chest measurement { Minimum 32 inches. M.O.
 Maximum expansion 36 inches. M.O.
 Physical development good M.O.
 Small-Pox Marks none M.O.

Vaccination Marks { Arm Right Left
 Number 0 , ,
 When Vaccinated last 21 years ago
 (a) Marks indicating congenital peculiarities or previous disease nil M.O.

(b) Slight defects but not sufficient to cause rejection
slight enlargement of right testicle
 Date 1916 Result VACCINATIONS. M.O.
July 19 A. H. Murchy M.O.
26 A. H. Murchy M.O.
Aug 2 A. H. Murchy M.O.

Enlisted on 21st day of March 1916 at North Bay

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>228th Bn</u>	<u>1006005</u>		<u>2/13/16</u>
Transferred to..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Toronto</u>	<u>2/2/17</u>		<u>passed</u>
<u>Kanawake</u>	<u>28/1/19</u>	<u>nil</u>	<u>passed</u>
<u>Essex Camp Toronto</u>	<u>19-3-19</u>	<u>nil</u>	<u>passed</u>

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 S. Pr. Name Anderson Surname Leonard
 Unit or Corps C.R.I. 228th (If a soldier) Regtl. No. 1006005
 Born at Lucknow, Ontario on date Dec. 14th 1880
 Signature (for identification) L. Anderson

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

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

Weight 140 lbs.
 Height 5 ft. 7 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?** no
 Abnormal Sounds? no
 Abnormal Size? no
 Pulse Rate? 76 Intermittence or irregularity? no

6. **ARTERIES.**—Any hardening? no

7. **DIGESTIVE SYSTEM?** no

8. **GENITO-URINARY SYSTEM?** no
 Urinalysis—s.g.? 1.014 Reaction? ac 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 Park { Signed J. J. Howard M.O.
 Date 25/1/19 { Signed J. Locke 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 Examination upon leaving the Service

Order of the General Service of a Soldier in the Army

Medical Examination upon leaving the Service

100000
100000
100000

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

DIRECTIONS TO
DENTAL OFFICERS

Canadian Printing and Stationery Services, London

MD2.

NAME OF SOLDIER (Block Letters) ANDERSON L

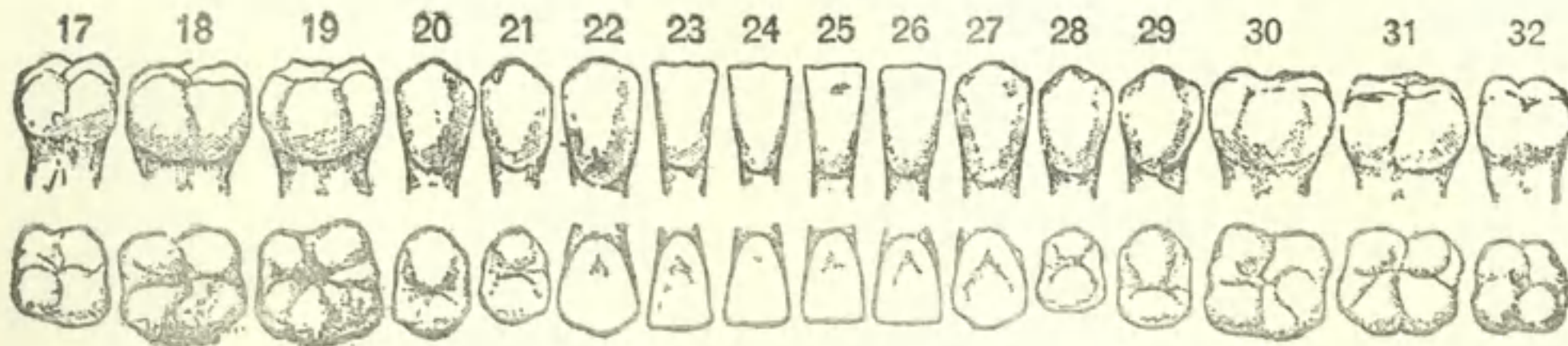
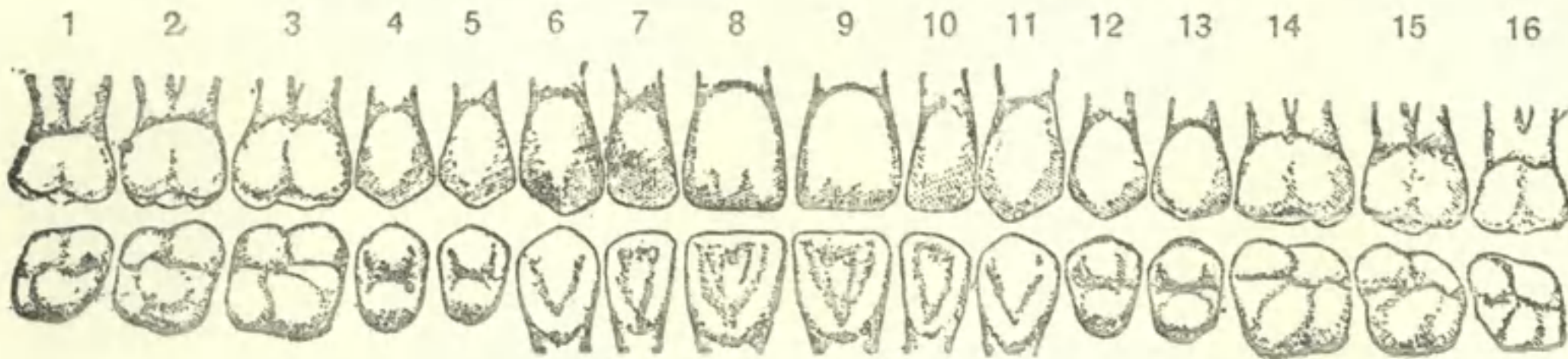
REGIMENT 6 CRT RANK SPR No 1006005

Date of Examination in England 27/1/19 Date of Examination in France _____

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

2. EXTRACTIONS

3. CROWNS

4. DENTURES

(a) Full Upper

(b) Part Upper

(c) Full Lower

(d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

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

(a) In Canada

(b) In England

(c) In France yes

KINMEL PARK,
NORTH WALES.

Signature of Dental Officer

C. C. Graham Esq

ANDERSON
1892

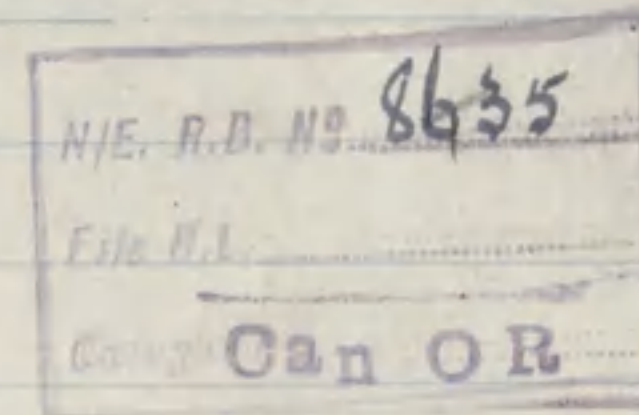
Rank **J.P.** Name **ANDERSON, Leonard.** Reg'l No. **1006005.**
 Unit **228th Bn.** If in perm. Corps, }
 What Unit? }
 Married or Single **Married.**
 Place and Date of Enlistment **North Bay. ^{21st} March. 1916.** Place of Birth **Lucknow. Bruce Co. Ont.**
 Name and Address, Next-of-Kin **Mrs. Ethel Anderson.**
North Bay. Ontario. Relationship **Wife.**

Assigned Pay Monthly \$ Payable to

Relationship

Separation Allowance \$ Payable to

Relationship



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>ARRIVED IN ENGLAND per S.S. MISSANABIE. 27.2.17</i>					
<i>12:3:17</i>	<i>—</i>	<i>—</i>	<i>6th Bn. C.R.I. Pt. II. D.O. 71.</i>	<i>—</i>	<i>—</i>
<i>14:4:17</i>	<i>6th Bn. C.R.I.</i>	<i>Arrived in France</i>	<i>—</i>	<i>3:4:17</i>	<i>Pt. II D.O. 1.</i>
<i>23.5.18</i>	<i>do</i>	<i>Awarded Good Conduct Badge</i>	<i>Field</i>	<i>Apr. 21.3.18</i>	<i>— 51</i>
<i>4:1.19</i>	<i>C.R.T.D.</i>	<i>Posted from 6th C.R.T.</i>	<i>Witley</i>	<i>25.12.18</i>	<i>Pt. II 3.</i>
<i>31-1-18</i>	<i>1st Lt. D.</i>	<i>Att. from 6th Bn.</i>	<i>"</i>	<i>" 25-12-18</i>	<i>— 362.</i>
<i>14.1.19.</i>	<i>C.R.T.D.</i>	<i>Course on Com'd to 1st C.R.D.</i>	<i>"</i>	<i>" 13.1.19</i>	<i>— 13</i>
<i>15.1.19</i>	<i>6th C.R.D.</i>	<i>Transf to England for demob. } posted to 6th Bn.</i>	<i>Field</i>	<i>" 21.12.18</i>	<i>— 3.</i>

A.F.B. 103 CHECKED
19 APR 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.				
24-1-19	C.R.T.D.	S.O.S. to M.D. 2. Phyl.	Spr. # Wiley	24-1-19	MD 2 PI-11 D 027d/24 1/19.
28.2.19	MD 2	Sol to CEF in Canada	Phyl	19.2.19	50

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

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

350M.—5-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

228th O'S BN CEF

Unit, Regiment or Corps

Regimental No. 1006005 Rank Pte Name Anderson Leonard

Enlisted (a) March 21st '16 Terms of Service (a) Duration of War Service reckons from (a) March 21st/16

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) Sta Engineer "Civil"

CERTIFIED CORRECT,
 17 MAY 1977
 CAN. RECORDS, LONDON.

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
		Embarked		16-2-17. Canada
		Arrived		27-2-17 England.
42/2/17	228 Bn. Taken on strength 6th BRY	Perth	8/3/17	Port II DO 71
44/4/17	6th BRY Arrived in France	Field	3/4/17	1. 4/14-4-17
				<u>Blown</u>
12.4.18	Granted 14 days LEAVE	No.	19.3.18	100.32.
27.4.18	Returned from LEAVE	No.	18.4.18	B 213.
23.5.18	Granted 14c. Budget	No.	21.3.18	100.51 of 1918.
23-12-18	Trans to Eng & posted to COT sep withy		23 12/18	100.15

Cap Hewett
 Lieut. for Lt.-Col., A. A. G.
 Canadian Section, G. H. Q. 3rd Echelon, B. E. E.

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]

Casualty 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				
H-1-19	G.R.T.D.	T.O.S. Whitley	25-12-18	Part 2 DO 3	
24/1/19	"	S.O.S. Kimmel M.D.R	Whitley	24/1/19	pt 2 DO 3
<p><i>John Kimmel</i> for P.C. ERTB</p>					
<p>Attached C.C.C. Kimmel Park for return to Canada. Part 11 Orders No. _____. Ceases to be attached C.C.C. Kimmel Park on embarking for Canada, Part 11 Order No: 5233 7/8/19</p> <p><i>f 50</i> Commanding <u>2</u> Wing, Kimmel Park Camp.</p> <p>Embarked SS section Liverpool 19/2/19 Disembarked Station SS John</p>					
					25 JAN 1919
					1 - MAR 1919

2

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

Casualty Form—Active Service.

Unit, Regiment or Corps.....

Regimental No. 1006005 Rank..... Name Anderson, Lew
C. E. F.

Enlisted (a)..... Terms of Service (a)..... Service reckons from (a).....

Date of promotion to } Date of appointment } Numerical position on }
present rank } to lance rank } 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				
FEB 19 1919	O. S.	T. O. S. No. 2 DISTRICT DEPOT, TORONTO		1919	PART II D. O. 64 <i>McLennan</i> Lieut. For O. C. No. 2 District Dep.
22/3/19		S.O.S. (Discharged) No. 2 District Depot <i>St. Martin</i>			Part II, D.O. No. 79

O. C. Discharge Section
No. 2 District Depot

(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]

CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44.
1183 (D.P.) 250M.-12-18.
1772-39-903.

LAST PAY CERTIFICATE

Regimental No. 1006005 Rank Spv Name Anderson, L.
(Surname first)

Unit No. 2 District Depot who was* DISCHARGED

On MAR 22 19 1919, to.....
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from Feb to MAR 22 19 1919 the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month	64.34	
Regimental Pay..... <u>50</u> days at \$..... <u>1</u> .c. <u>10</u>		55
Field Allowance..... <u>50</u> days at \$..... <u>1</u> .c.		3.5
Separation Allowance		10.0
Clothing Allowance		12
Post Discharge Pay		
*Other Credits		
Advances	25	
Separation Allowance and Assigned Pay Cheque No. <u>S. 104378</u> <u>S. 106269</u>	30	
*Other Charges	8.70	
Balance on transfer or on discharge, cheque No. <u>S. 106258</u>	93.96	
Total	202	202

*Give particulars.

CREDITS, ADVANCES, Etc.

Credits, Advances, Forfeitures, Issues on Repayment, etc., since issue of this L.P.C. are to be entered hereunder:

Date	Place	Cheque No. A.R. No. or Other Particulars.	AMOUNT		Signature of Officer Making Payment.
			Dr.	Cr.	
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....

53

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

Opp
To Whom *Ethel Anderson* By Whom Assigned *Leonard Anderson*
 Address ~~*St. Lawrence St.*~~ Regtl. No. *1006005*
Box 358 Toronto Rank *Pte*
North Bay, Ont. Corps *228th Bn*
 Rate *20⁰⁰*

FEB 1917

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>Consolidated Account</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

111 1033

1033

111. 1033

1033

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2. *Mrs Ethel Anderson Wife*
(Assignee)

Name of Soldier *Leonard Anderson*

PAYMENTS.

Pte. 1006005. 228th Bu.

L. L. Job 5470—Req. 6888.

Month.	Year.	Cheque No.	Am't.	Remarks.
				<i>20⁰⁰</i>
				FEB 1917
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March		<i>L 51360</i>	<i>40</i>	<i>40K</i>
April		<i>J 226</i>	<i>20</i>	<i>20.8. Box 358, North Bay Ont.</i>
May		<i>J 6520</i>	<i>20</i>	
June		<i>J 13129</i>	<i>20</i>	<i>20.8</i>
July		<i>J 19930</i>	<i>20</i>	<i>S</i>
Aug.		<i>L 27028</i>	<i>20</i>	<i>B</i>
Sept.		<i>K 33727</i>	<i>20</i>	<i>in 160. ✓</i>
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

CANADIAN
ASSIGNED PAY AUDITED

[Signature]
AUDIT CLERK

DATE *16/5/19*

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.				

21-3-16.

MILITIA AND DEFENCE

M. F. W. 11.
50m.—4-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name *Ethel Anderson.*

Name of Soldier *Anderson Leonard.*

Address ~~*172-3rd Ave. E.*~~

Regtl. No. *100 6005*

~~*81 Crawford St., North Bay.*~~

Rank *plc.*

~~*Towato, Ont.*~~

Corps *228 Btm.*

Relation to Soldier *Box 358 North Bay, Ont. E1327 3/7*

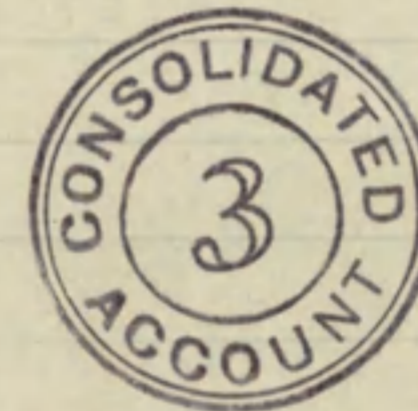
To what Corps belonging

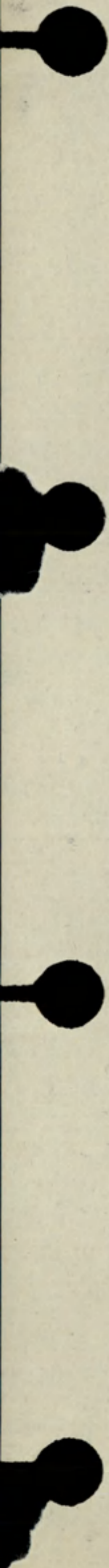
wife, child or mother } *wife.*

when called out

PAYMENTS

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

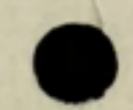




F I S

F I S

F I S



Name L. ANDERSON Leonard Rank Spr. Regtl. No. 1006005

Fyle Depot 24 AN-156

Original unit Present unit C.R.T. M. or S. Age 28 Religion Meth. Ref. H.Q.

Port, ship and date of arrival St. John Scotian 1-3-19

Next of kin Wife Mrs. E. Anderson North Bay Ont.

Address on leave Same

Address on discharge Same Box 358

Transportation issued Yes Date North Bay Character on discharge

Previous occupation Stationery Engineer Date and place of enlistment North Bay March 21/16

Diagnosis Demobilization Date of Medical Boards 19 3 19

Date.	Remarks.	Pt. 2 Order No.
TOS 19-2-19	posted to CasCoExCamp 1-3-19	
	leave with subs from 3-3-19 to 17-3-19	64
22-3-19	S.O.S. DISCH. "DEMOB'N" ENTITLED TO W.S.G.	79

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

Date.

Remarks

Pt. 2 Order No.

M. F. W. 192

150m.—5 18

1772-39-1243

Date of Enlistment

21-3-16

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

A

Date of Assignment

2607

Feb. 19

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

<i>20</i>	<i>1/21/17</i>	<i>30</i>	
-----------	----------------	-----------	--

PC 3257 PC 2753 MD 27432

RATE OF ASSIGNMENT

<i>\$20-</i>			
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PARTICULARS OF SEPARATION ALLOWANCE

No. *1006005*
 Rank *Pte.* Promoted Reverted Discharge
 Soldier's Name *Leonard Anderson*
 Battalion *228th Batt.*
 Beneficiary *Mrs. Ethel Anderson*
 Relationship *Wife* MFW 2554 *1 8/18*
 Address *Box 358, North Bay, Ont.*

PARTICULARS OF ASSIGNMENT

Name *Mrs. Ethel Anderson (wife)*
 Address *Box 358, North Bay, Ont.*
 Change of Address

- 1
- 2
- 3
- 4

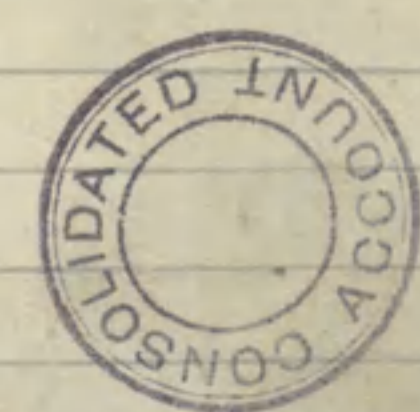
Date	Cheque No.	Amount S/A	Amount A/P	Total
<i>30/9/17</i>		<i>366</i>	<i>160</i>	<i>526</i>
<i>Oct</i>	<i>C 51388</i>	<i>20</i>	<i>20</i>	<i>40</i>
<i>Nov</i>	<i>C 52624</i>	<i>20</i>	<i>20</i>	<i>40</i>
<i>Dec</i>	<i>F 54948</i>	<i>20</i>	<i>20</i>	<i>40</i>
<i>Jan</i>	<i>A 54235</i>	<i>30</i>	<i>20</i>	<i>50</i>
<i>Feb</i>	<i>B 92462</i>	<i>25</i>	<i>20</i>	<i>45</i>
<i>Mar</i>	<i>G 93697</i>	<i>25</i>	<i>20</i>	<i>45</i>
<i>April</i>	<i>H 7494</i>	<i>25</i>	<i>20</i>	<i>45</i>
<i>May</i>	<i>A 12446</i>	<i>25</i>	<i>20</i>	<i>45</i>
<i>June</i>	<i>B 15291</i>	<i>25</i>	<i>20</i>	<i>45</i>
<i>July</i>	<i>Y 28271</i>	<i>25</i>	<i>20</i>	<i>45</i>
<i>Aug</i>	<i>A 30797</i>	<i>25</i>	<i>20</i>	<i>45</i>
<i>Sep</i>	<i>A 37486</i>	<i>25</i>	<i>20</i>	<i>45</i>
<i>Oct</i>	<i>A 44129</i>	<i>25</i>	<i>20</i>	<i>45</i>
<i>Nov</i>	<i>A 52219</i>	<i>25</i>	<i>20</i>	<i>45</i>
<i>Dec</i>	<i>A 63051</i>	<i>45</i>	<i>20</i>	<i>65</i>
<i>Jan</i>	<i>B 71507</i>	<i>30</i>	<i>20</i>	<i>50</i>
<i>Feb</i>	<i>A 78477</i>	<i>30</i>	<i>20</i>	<i>50</i>
<i>March</i>	<i>D 84147</i>	<i>30</i>	<i>20</i>	<i>50</i>
		<i>841</i>	<i>520</i>	

0367-L-4.

REMARKS

0367-L-25

CANADIAN
 ASSIGNED PAY AUDITED
 AUDIT CLERK
 DATE *16/5/19*



M. F. W. 128
 400M-6-17-1772-33-141
 L. L. 22220-M. & D. 533.

A/c Closed
 Ret'd per *Section*
 Date *2-3-19* M.F.W. 187 *4-3-19*
 Clerk *MD-2. B. ...* *MO 71560*

Date of Enlistment _____

MILITIA AND DEFENCE

Date of Assignment _____

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No.	Rank	Promoted	Reverted	Discharge
Soldier's Name				
Battalion				
Beneficiary				
Relationship				
Address				

PARTICULARS OF ASSIGNMENT

Name	
Address	
Change of Address	
1	
2	
3	
4	

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

REMARKS

M. F. W. 128
 400M-6-17-1772-88-1141
 L. L. 22320-M. & D. 7493.

SEPARATION ALLOWANCE

Sheet No. 2

Ethel Anderson.

OVERSEAS CONTINGENTS

PAYMENTS.

Name of Soldier

Anderson, Leonard.
plc.

L. L. Job 310.—Req. 6574.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May		<i>J 7128</i>	<i>46 -</i>	<i>46</i>
June		<i>D 2092</i>	<i>20</i>	<i>20</i>
July		<i>L 10208</i>	<i>20</i>	<i>20</i>
Aug.		<i>A 11905</i>	<i>20</i>	<i>20</i>
Sept.		<i>H 14704</i>	<i>20</i>	<i>20</i>
Oct.		<i>E 17943</i>	<i>20</i>	<i>20</i>
Nov.	<i>20 S.M.</i>	<i>E 20997</i>	<i>20</i>	<i>20</i> <i>81 Crawford St, Toronto, Ont.</i>
Dec.		<i>E 24482</i>	<i>20</i>	<i>20</i>
Jan.	1917	<i>E 27941</i>	<i>20</i>	<i>20</i>
Feb.		<i>E 30958</i>	<i>20</i>	<i>20</i>
March	<i>27</i>	<i>E 34243</i>	<i>20</i>	<i>20</i> <i>Box 358 North Bay, Ont EB 27³/₁₇</i>
April	<i>F 1405</i>	<i>J 64</i>	<i>20</i>	<i>20</i> <i>F 64 Cancelled.</i> RE-WRITE
May		<i>J 3687</i>	<i>20</i>	<i>20</i>
June		<i>G 6879</i>	<i>20</i>	<i>20</i>
July		<i>F 10554</i>	<i>20</i>	<i>20</i>
Aug.		<i>H 12892</i>	<i>20</i>	<i>T</i>
Sept.		<i>G 16711</i>	<i>20</i>	<i>B 366, ✓</i>
Oct.			<i>20</i>	<i>m</i>
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

P. SW
24⁴/₇

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
 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.				

$$\begin{array}{r}
 244 \\
 177 \\
 \hline
 67
 \end{array}$$

No. 1006 no 5. RANK *Pte*

NAME *Anderson. Leonard.*

T. O. S. *21-3-16* UNIT

D.O. 2. 21-3-16

228th Battalion.

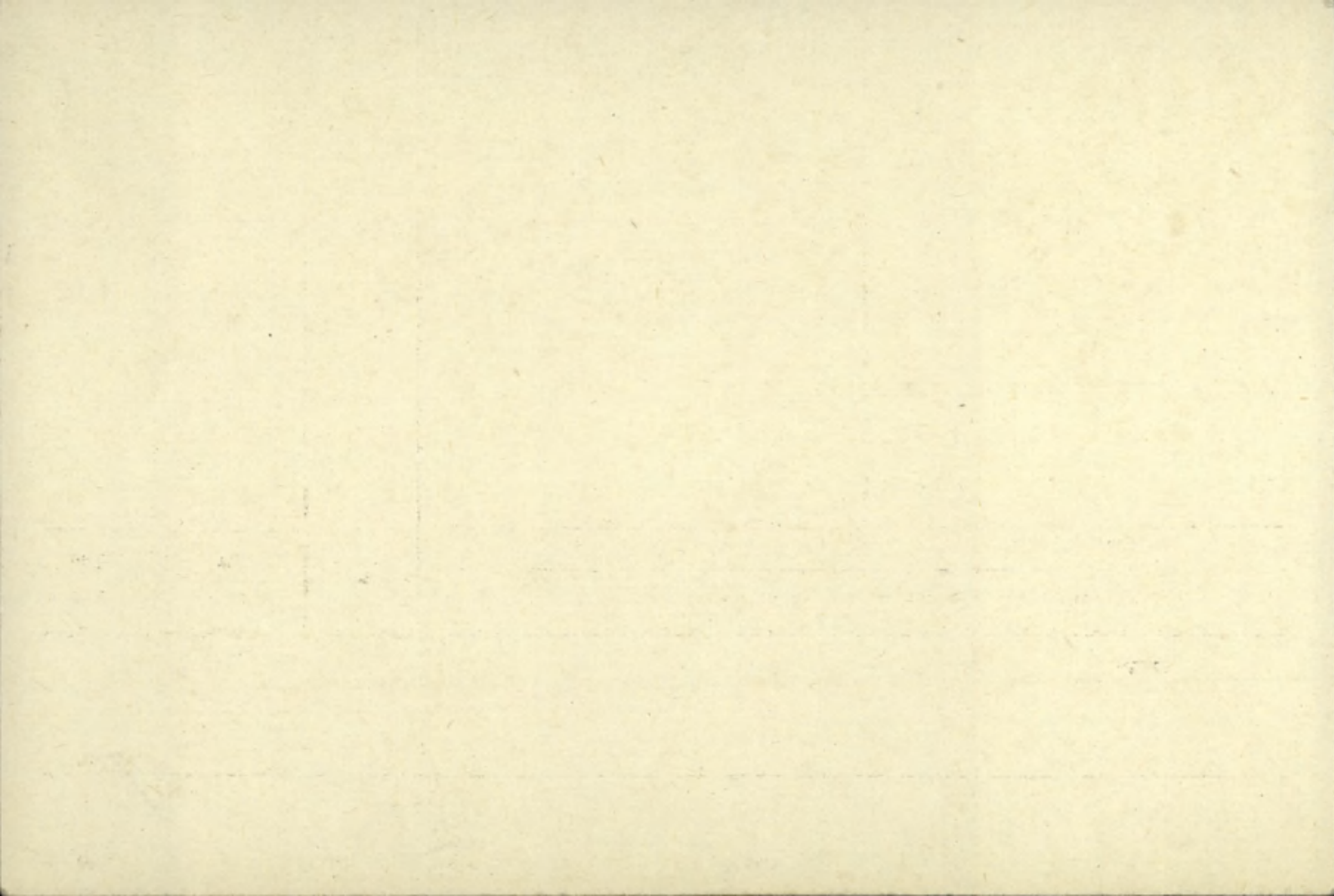
Construction Co

M. D. *2*

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
<i>1916</i> <i>Mar 29</i>	<i>1916</i> <i>Apr 30</i>	<i>✓</i>	<i>Given leave till 29-3-16</i>	<i>Apr. P. L.</i>
	<i>May</i>	<i>✓</i>		
	<i>June</i>	<i>n</i>		
	<i>July</i>	<i>n</i>		
	<i>Aug.</i>	<i>n</i>		
	<i>Sept</i>	<i>n</i>		
	<i>Oct.</i>	<i>n</i>		
	<i>Nov.</i>	<i>n</i>		
	<i>Dec.</i>	<i>n</i>		
<i>1917. Jan</i>	<i>1917</i>	<i>n</i>		
<i>Feb pay lists not available.</i>				

UNIT SAILED

FEB 16 1917



List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263	Attestation Paper	Militia Form W. 23
Squadron } Battery } Company }	Conduct Sheet, " B. 263a	or Particulars of Recruit	" W. 133
or Field Conduct Sheet	" W. 178	Proceedings on Discharge	" B. 218
Copies of Convictions, by C. P.	in MS.	In the case of recruits who are rejected on final approval, the discharge documents will consist of	
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	(a) Proceedings on Discharge.	
Duplicate Discharge Certificate	" W. 39A	(b) Attestation.	
‡Form of Will	" W. 82	(c) Medical History Sheet.	
§Only if discharged "Medically unfit."			
‡Only if man has not been overseas.			

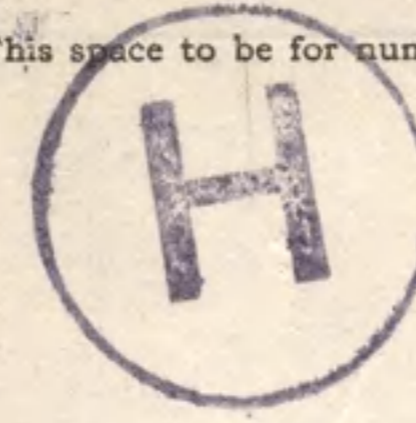
Documents not accompanying this form should be crossed out.

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.

This space to be for numbers.



Proceedings on Discharge.

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

No. 1006005	
Rank Pte.	
Surname <u>ANDERSON, LEONARD</u>	
Christian name	
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company) <u>228th Bn (#2 D???)</u>	
Date of discharge <u>MAR 22 1919</u>	
Place of discharge <u>TORONTO, ONT.</u>	
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age <u>28</u> years <u>3</u> months.	Descriptive marks <u>Vacc. Marks..... L. Arm</u>
Height <u>5</u> feet <u>5 1/4</u> inches.	
Complexion <u>Fair</u>	
Eyes <u>Grey</u>	
Hair <u>Fair</u>	
Trade <u>Stationery Engineer</u>	
Intended place of residence	Box 358 North Bay, Ont.
(To be given as fully as practicable.)	
2. The above-named man is discharged in consequence of	
ON GENERAL DEMOBILIZATION	
Authority for discharge <u>#2 D.D. Pt. 11 # 79</u>	
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.

(OVER)

G.R.

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.

TORONTO, ONT. Leonard Anderson (Signature of Soldier.)

MAR 22 1919 (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.

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

TORONTO, ONT. (Place).....

MAR 22 1919 (Date).....

(Signature) H. Sergeant Coy

For

O.C. No. 2 District Depot

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.)

assigned Pay # 2007 Lead.

1006205 Pde Anderson

Remark

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS			
	NO. OF DAYS	RATE	AMOUNT	NO. OF DAYS	RATE	AMOUNT				NO. OF DAYS	RATE	AMOUNT	1	2	3	4	1				2	3				4	CREDIT	DEBIT
1917	MONTH PARTICULARS		CR 1	CR 2	PARTICULARS		DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	MONTH PARTICULARS				CR. 1	CR. 2	PARTICULARS		DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER. SEP. RED. ALLGE. PAY ENG.	DEFER. SEP. RED. ALLGE. PAY ENG.		
Oct 31	Bal Forward										4565																	
Nov					AR 544	16/10/17	6262	268																				
					AR 488	24/9/17	6262	268																				
					455	22/9/17		268																				
			2.8	33.00							20																	
					596	31/10/17		268																				
			2.8	34.10		Dear					20	92.02																
1918			2.8	44.16		Dear		10.72			40																	
Jan					643	30/11/17		892																				
					699	27.12.17		1695																				
			2.8	34.10		C. A. P.		25.87			20	80.26																
Jan					754	17.1.18		7.14			20	83.92																
					876	6 CRT 28/2		7.14			20																	
					893	do 22/3		4.14			20																	
March					893	do 22/3		4.14			20	15.61																
								87.44																				

CANADIAN
ASSIGNED PAY AUDITED
AUDIT CLERK
DATE 11/2/19

* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.
EFFECTIVE DATE:-	1-2-17	EFFECTIVE DATE:-	
AMOUNT:-	20 ⁰⁰	AMOUNT:-	

NAME:- **ANDERSON Leonard**

NUMBER:- **1006005**

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 Ethel Anderson~~
81 Crawford St
"Wife" Toronto, Ont.
Stopped 1-2-17.

PARTICULARS OF RANK OR APPOINTMENT		
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Sapper

UNIT AND TRANSFERS

ORIGINAL UNIT:- **228th Baltn**

DATE ACCOUNT FIRST OPENED:- **1-3-17**

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S F'D	UNIT TRANSFERRED TO
			6 th BR

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
21.12.1770		Fees	466	31.1.17		Co Bee L.S.	9194
28.12.1775		recd	4867			R.P.C.	2526
11.1.179495			487				
20.1.17		Oncos. MU9	848				
			6618				

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE:- *to Canada 31.1.17 NR 265. Hilly, 20.1.17 Rly. MP 2.*

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
Nov 31	Balance Forward								1561		
April	Apr Pay	33	-	AP.				20			
				AR 1074 CARB. 15/4/18	3 57				2504		
		33			3 57			20			
May		34 10		AP				20	39 14		
				93. 6 C.R.T. 21/5/18	7 14				32 00		
		34 10			7 14			20	68		
June	PP	33						20	52 57		
				M 238 2 1/2 6 C.R.T.	3 57						
		33			3 57			20	41 43		
				✓ 325 8/7 ✓	3 57						
				✓ 448 18/7/18 ✓	3 57						
July		34 10		AP	7 14			20			
		34 10			7 14			20	48 39		
Aug		34 10		CAR				20			
				✓ 565 5/8/18 ✓	3 57						
				✓ 663 21/8/18 ✓	3 57						
		34 10			7 14			20	55 35		
Sept		33		CAR				20			
				✓ 779 1-9-18 ✓	3 57						
				✓ 237/609 16-7-18 ✓	32						
				✓ 890 25-9-18 ✓	3 57						
		33			7 14			20	60 89		
Oct		34 10		CAR				20	74 99		
				✓ 983 12-10 ✓	3 73				71 26		
				✓ 1084 38 31-10 ✓	3 73				67 53		
		34 10			7 14						

60 89 a/c agreed

74 99

71 26

67 53

Over

NUMBER *1006005* RANK *Spr*

NAME *ANDERSON Leonard*

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
	<i>Balance Forward</i>								<i>67 53</i>		
<i>Nov</i>		<i>33</i>		<i>Cap.</i>				<i>20</i>	<i>80 53</i>		
				<i>AR 1212 1 15-11 6th CRT</i>	<i>16 79 -</i>				<i>63 74</i>		
<i>Dec</i>		<i>34 10</i>		<i>Cap.</i>				<i>20</i>	<i>77 84</i>		
<i>Jan</i>		<i>34 10</i>		<i>Cap.</i>				<i>20</i>	<i>91 94</i>		
		<i>101 20</i>			<i>16 79</i>			<i>60</i>			
				<i>v 9275 12. 28.12 1000</i>	<i>48 67 -</i>				<i>43 27</i>		
				<i>v 8773 15 24.12 6400</i>	<i>4 66 -</i>				<i>38 61</i>		
				<i>v 9493 9. 9.12. 1000</i>	<i>4 87 -</i>				<i>33 74</i>		
				<i>Quoos. A49 52 21.1.19 CRT</i>	<i>8 48 -</i>				<i>25 26</i>		
				<i>AR 9463. 4.2. Jan v</i>	<i>9 73 -</i>				<i>15 53</i>		
					<i>76 41</i>						
				<i>SOS. 20.1.19 1/10 20. 24.1.19 CRT</i>							

CANADIAN
ASSIGNED PAY AUDITED

[Signature]
AUDIT CLERK

DATE *12/19*

CERTIFIED THAT THIS A.S.P.B.
has been duly verified with the
relative ledger account and all
uncharged items properly extra-
cted to Form P. 697.

..... Pay Sgt. Unit.....

"SCOTIAN"

1:3:19

No. 2 DISTRICT DEPOT

Q 607

AUDITOR PAYMASTER

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

REGT. No. 1006005 RANK Spr. NAME (IN FULL)

ANDERSON L

22

M. OR S.

PPM

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?	(BLOCK LETTERS, SURNAME FIRST)
ADDRESS					B.P.F.	Sanct	
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				PLACE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
TO WHOM PAID	RELATIONSHIP				DATE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
ADDRESS					ASSIGNED PAY, \$	DATE EFFECTIVE	
	yes. same.		1-4-19		20.00	1-4-19	
					PAYABLE TO	RELATIONSHIP	ANY CHANGE IN ASSIGNEE OR ADDRESS
					Mrs. Ethel Anderson.	Wife	
					ADDRESS		
					Box 358 North Bay.	Ont.	
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE	
					DISCHARGED	PLACE DATE REASON AUTHORITY	IF ENTITLED TO POST DISCHARGE PAY
						Toronto 22.3.19 Demob Do 79	Yes

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	PAY						DEBIT	CREDIT															
			\$	C.	\$	C.	\$	C.	\$	C.	\$	C.											\$	C.	\$		C.	\$	C.						
Balance from previous account	31-1-19	4.10																																	
	1-2-19	50	10	55	12	35	202																												
	22.3.19																																		
	183dys																																		

Feb & March 1919. 0 P. 41.7
T.O.S. 1917 D.O. 6.7
SUBS. 10.17 D.O. 6.7
870 over pd S.A.

Due Soldier's Depend.
1st W.S.G. PAID IN FULL
FOR PAYMASTER WAR SERVICE GRATUITY