

ATTESTATION PAPER.

No. 817191

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your name? *Patrick* **John Walsh**
- 2. In what Town, Township or Parish, and in what Country were you born? **St. John, N. B.**
- 3. What is the name of your next-of kin? **John Walsh**
- 4. What is the address of your next-of-kin? **#3 Carleton St. St. John, N. B.**
- 5. What is the date of your birth? **June 12th., 1896**
- 6. What is your Trade or Calling? **Student**
- 7. Are you married? **No**
- 8. Are you willing to be vaccinated or re-vaccinated? **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 } **Yes**
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

Patrick
John P. Walsh (Signature of Man.)
Wm. Beckwith (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, **John Walsh**, do solemnly declare that the above answers made by me to the above questions 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.

John Patrick Walsh (Signature of Recruit)
 Date **Nov. 23rd.,** 191 **5.** *Wm Beckwith* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, **John Walsh**, 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.

John Walsh (Signature of Recruit)
 Date **Nov. 23rd.,** 191 **5.** *Wm Beckwith* (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 **Sussex, N. B.,** this **23rd.,** day of **November** 191 **5.**

Magr. H. Laugel (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

H. Boegs Major (Approving Officer)

John Patrick Walsh *J.P.W.*
Description of Jon Walsh on Enlistment.

Apparent Age 19 years months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.
 (Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer).

Height 5 ft. 5 ins.

Chest measurement. { Girth when fully expanded 37 ins.
 { Range of expansion 3 1/2 ins.

Complexion Fair
 Eyes Blue
 Hair Brown

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date Nov. 23rd., 1915 *J. M. Bussett*
 Place Sussex, N. B.
 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.

John Walsh 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.

J. M. Bussett (Signature of Officer)
 Date Nov. 23rd., 1915

for O. C. 140th Overseas Battalion C. I. F. 104th Lieut. Col.

DEERTERS
& DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....



- Proceedings of Court of Inquiry or on men reported Missing on Active Service..... 6
- Attestation Papers..... 4 5
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet..... 2
- Compulsory Stoppages.....
- Casualty Forms..... 2
- Proceedings on discharge.....
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- Parchment Certificate.....
- Medical Report for Invalids.....
- Medical History Sheet..... 4
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet..... 2
- Clothing Transfer Certificate.....
- Inventory of Kit.....
- Last Pay Certificate..... 1

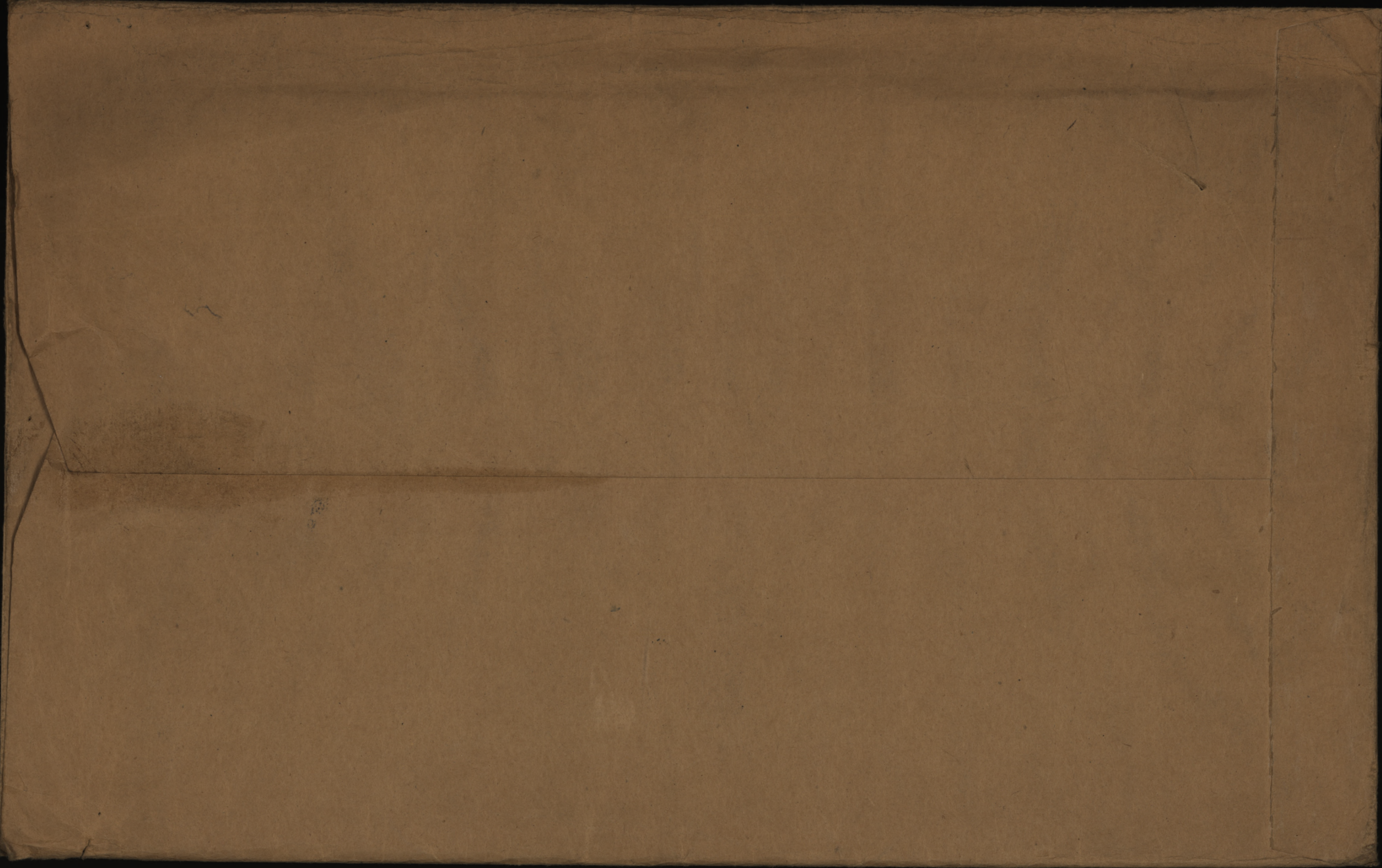
Name WALSH, JOHN. PATRICK,
 Regt. No. 817191 Rank pte
 Corps 165th Bn.
S.O.S. 24-11-16.

Handwritten flourish or signature



04446





SURNAME.

Walsh

CARD No.

CHRISTIAN NAMES

John Patrick

FOLL.

REGL. No.

817191

RANK

Pte

UNIT

140th

Bn.

FORMER CORPS

nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Walsh, John

RELATIONSHIP TO SOLDIER

not stated

ADDRESS

*3 Carleton St., St. John,
N. B.*

COUNTRY OF BIRTH

Canada, St. John, N. B.

DATE

June 12th 1896

PLACE OF ATTESTATION

Sussex, N. B.

DATE

Nov. 23rd 1913

MARRIED

SINGLE *yes*

WIDOWER

TRADE OR CALLING

Student

RELIGION

Roman Catholic

DESCRIPTION.

APPARENT AGE

19 YEARS

MONTHS

HEIGHT

5 FEET

5 INCHES

CHEST MEASUREMENT

37 INCHES

EXPANSION

3 1/2 INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

Brown

DISTINGUISHING MARKS

Not stated

MEDICAL EXAMINATION.

PLACE

Sussex, N. B.

DATE

Nov. 23rd 1915

Present address: - not stated

Reg. No.

817191

Name

Walsh JB

Rank

Pte

Corps

140th

Age

20

Service

C¹⁰/12

Ledger No.

Serial No.

HOSPITALS

DATE

DIAGNOSIS

Military of John
bis to duty

14-5-16

D.D.S

C

ad Rockhead Halipad

9-6-16

D.D.S

C

bis to unit

25-8-16

ad Rockhead

7-9-16

D.D.S

C

bis to unit

23-9-16

HOSPITALS**DATE****DIAGNOSIS**

M. F. W. 2553.
75M.—9-19.
1772-39-1332.

No. 817191. RANK *Pte.*

NAME *Walsh. John. Patrick*

T. O. S.

UNIT *140th Battalion C E F.*

*Trans fr 100th Bu 6-2-16
(Doc-9-2-16)*

M. D. *6.*

| | | | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. | |
|----------------|------------------|---------------|--|----------------------------|
| PAID FROM | PAID TO | SIG. OR REC'T | PARTICULARS | AUTHORITY |
| <i>1916</i> | <i>1916.</i> | | | |
| <i>Feb. 6.</i> | <i>Feb 29</i> | <i>✓</i> | | |
| <i>Mar.</i> | | <i>n.</i> | <i>a. w. d. breaking out of Bks while prisoner, drink & disorderly at home abusing mother. for 2 dys pay. 3 dys CB. 72 hrs. det.</i> | <i>DO 33-14-3-16.</i> |
| <i>Apr.</i> | | <i>✓</i> | | |
| <i>May</i> | | <i>n.</i> | | <i>D.O. 71-27-4-16</i> |
| <i>June</i> | | <i>n.</i> | | |
| <i>July</i> | | <i>n.</i> | | |
| <i>Aug</i> | | <i>n.</i> | | |
| <i>Sept. 1</i> | <i>Sept. 20.</i> | <i>n.</i> | <i>Trans. to M. D. 6 (20-9-16.)</i> | <i>D.O. 198 of 20-9-16</i> |



No. 181505 RANK

Pvt

NAME

Walsh John P.

T. O. S. 23-11-15

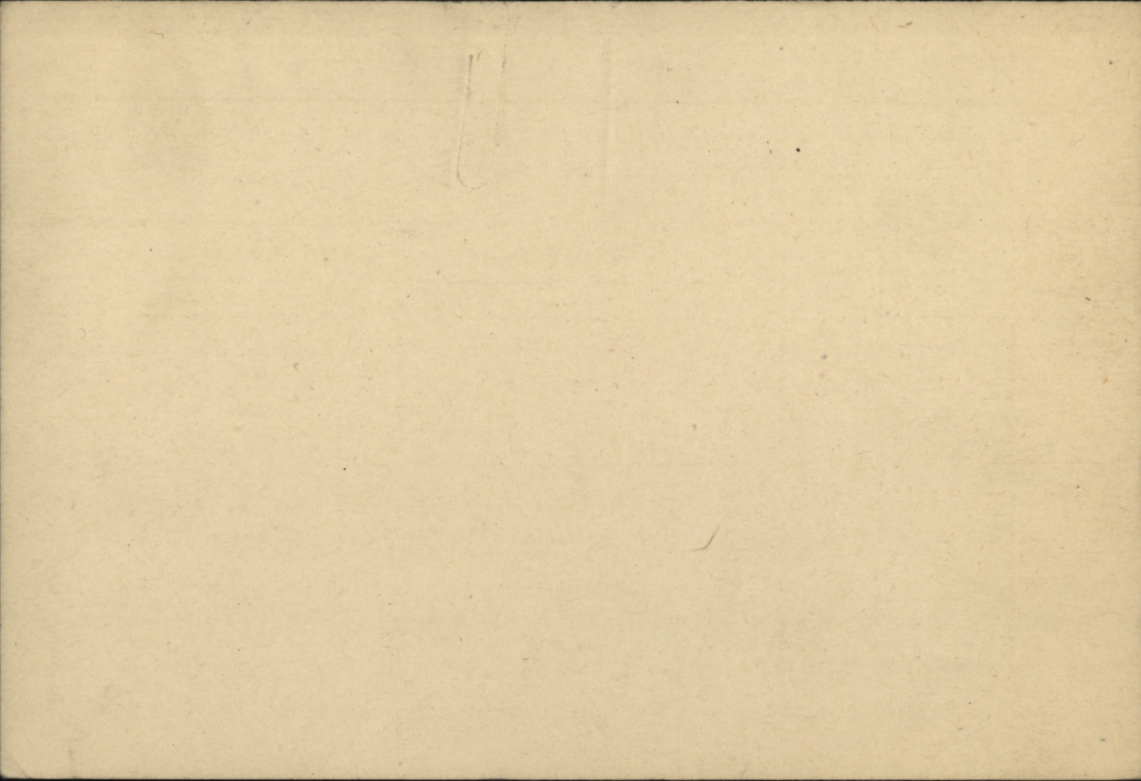
UNIT

104th Battalion, C. E. F.

(W.O. 38.24-11-15)

M. D. 6.

| | | | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. | |
|--------------|------------|---------------------|---|-----------------|
| PAID FROM | PAID TO | SIG. OR REC'T | PARTICULARS | AUTHORITY |
| 1915 | 1915 | | | |
| Nov 23 | Nov 30 | ✓ | | |
| Dec 1914 | | ✓ | | |
| Jan | | W | | |
| Feb 1 | Feb 5 | u. | trans to 140 th Bn. 6-2-16 | W.O. 30. 5-2-16 |



No. 917191

RANK *Plt (gwr)*

NAME

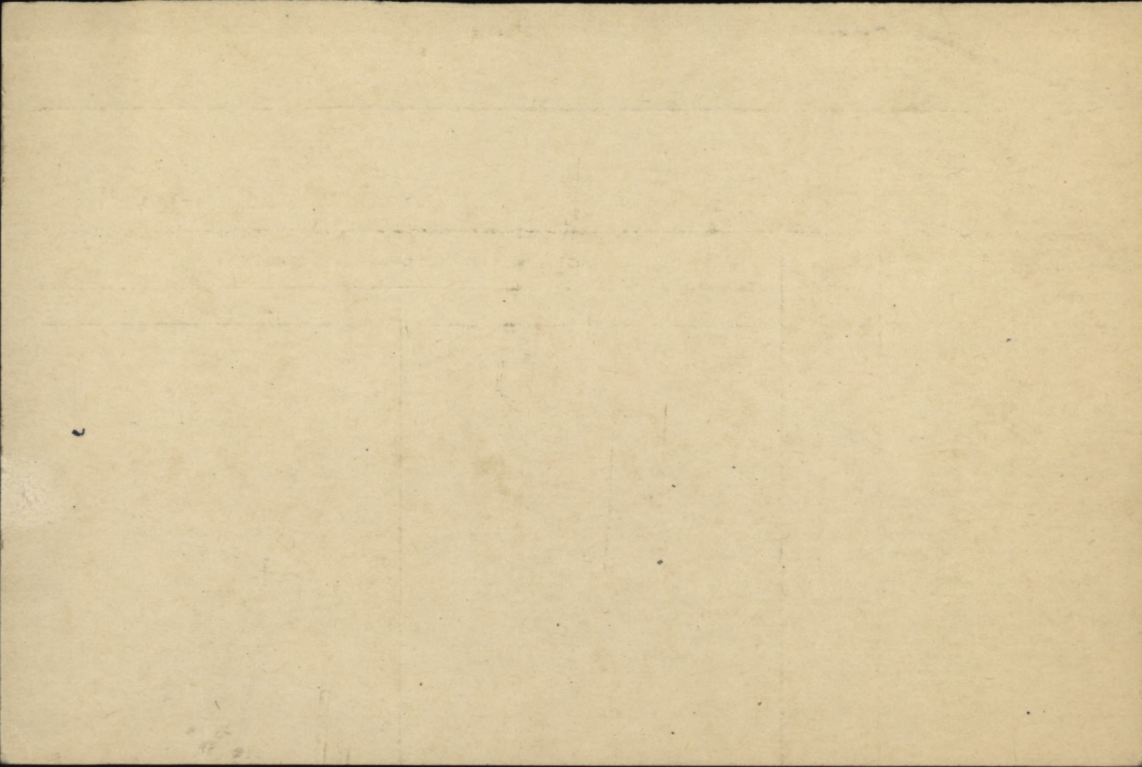
*Walsh John Patrick*T. O. S. *26-10-16*

UNIT

*10th Halifax Siege Battery**D.O. 1 28-10-16*

M. D.

| PAID FROM | PAID TO | SIG. OR REC'T | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. | |
|--------------|-----------------|---------------------|---|------------------------|
| | | | PARTICULARS | AUTHORITY |
| <i>1916</i> | <i>1916</i> | | | |
| <i>Feb 1</i> | <i>Oct 31</i> | <i>n</i> | | |
| | <i>Nov</i> | <i>n</i> | | |
| | <i>Dec</i> | <i>n</i> | | |
| <i>1917</i> | <i>1917</i> | | | |
| <i>Feb</i> | <i>no dates</i> | <i>n</i> | <i>omitted</i> | <i>Feb's pay list.</i> |
| | | | <i>up closed by charges (n)</i> | |



No 817191 RANK *Plt-*NAME *Walsh John P.*

T. O. S.

UNIT

*165th Battalion**Transf.d from 140th or 145th Am 21-9-16**D.O. 225 of 27-10-16*M. D. *6*

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS

AUTHORITY

PAID
FROMPAID
TOSIG.
OR
REC'T*1916**1916**Sept 21 Oct. 31 n**Nov. ✓**Dec. n**1917 1917**Jan. 1 Jan. 31 ✓**Feb. n**Mar 1 Mar 5 n**A.W.L. 21-9-16 mulcted 166 days D.O. 53 = mar payroll-*



No. 817191 RANK *Pte.*

NAME

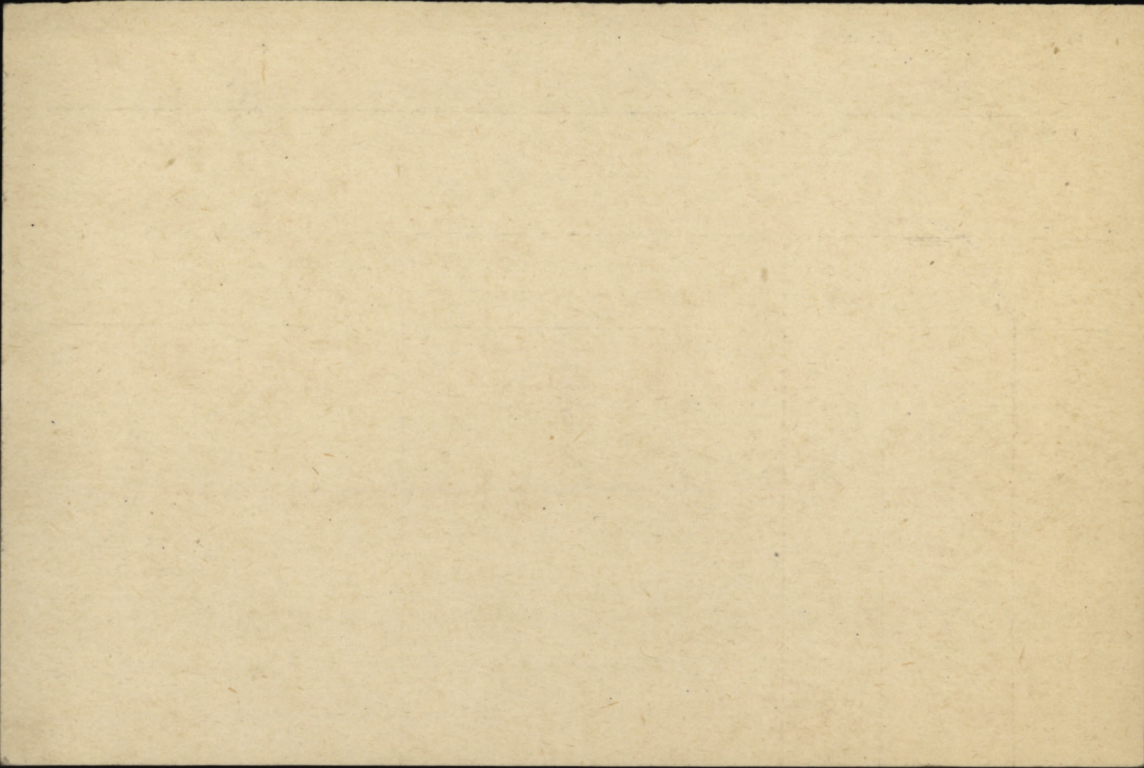
Walsh, J. P

T. O. S.

UNIT

*Composite Battalion*M. D. *6*

| PAID FROM | PAID TO | SIG. OR REC'T | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. | |
|-------------------------|--------------------------|---------------------|--|--|
| | | | PARTICULARS | AUTHORITY |
| <i>1916 Sept. 1</i> | <i>1916 Sept. 30</i> | <i>L</i> | <i>140th Bn attached for pay. 1-9-16 Proceeded o/s. 30-9-16 Do 79 Cancelled by. Trans to 102d Supp Bty 30-9-16</i> | <i>DO 65 of 19-9-16 DO 79 of 5-10-16 DO 98 of 27-10-16 DO 98 of 27-10-16</i> |



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

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

350M.—5-16

H. Q. 1772-39-920.

104th Battalion
Casualty Form—Active Service.

Unit, Regiment or Corps *140th O.S., Bn. I.C.F.*

Regimental No. *817191*

Rank *Pte*

Name *John Patrick Walsh*

Enlisted (a) *Nov 23/15*

Terms of Service *(duration of war)*

Service reckons from (a) *Nov 23/15*

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>5.2.16.</i> | <i>104th Bn</i> | <i>Transferred to 140th Battalion</i> | <i>Sussex N.13.</i> | <i>6.2.16</i> | <i>Pt 11 U.O. 30</i> |
| <i>9.2.16</i> | <i>140th Bn</i> | <i>T.O.S. on trans. from 104th Bn</i> | <i>W. of Sussex N.13.</i> | <i>6.2.16.</i> | <i>Pt 11 U.O. 4</i> |
| <i>20.7.16.</i> | <i>"</i> | <i>Transferred to M.O. 6.</i> | <i>"</i> | <i>20.9.16</i> | <i>Pt 11 U.O. 198.</i> |
| <i>27.10.16.</i> | <i>165th Bn</i> | <i>T.O.S. on transfer from 140th Battalion</i> | <i>H.O. 6. 13</i> | <i>21.9.16</i> | <i>Cancelled by after order H2 d/6-3-23 Pt 11 U.O. 3, 225.</i> |
| <i>March. 1917</i> | <i>"</i> | <i>a.c.o.s. 21.9.16</i> | <i>"</i> | <i>21.9.16</i> | <i>Cancelled by after order H2 d/6-3-23 Pt 11 U.O. 53.</i> |
| <i>6.3-23</i> | <i>"</i> | <i>coff held 6.2.17 quashed</i> | <i>Issued by DofR</i> | <i>—</i> | <i>after order H2.</i> |
| <i>19.9.16</i> | <i>Comp Bn</i> | <i>Attached for pay</i> | <i>Halifax</i> | <i>1-9-16</i> | <i>Pt 4 65.</i> |
| <i>5.10.16</i> | <i>"</i> | <i>ceases att. for pay & SOS to 10th Siege Bty</i> | <i>"</i> | <i>26.10.16</i> | <i>" " 79</i> |

(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.

| 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 | | | | |
| 28-10-16 | 105.B. | Yos from Comp Bn mD6. | Halifax | 26-10-16 | Nc # 1, |
| " | " | So Sasa Deserter by Cof I held 6-2-17 16-12-16. | St. John's B. | 21-9-16 24-11-16 | auth mi B 303 |

Clyde Scott

for dopa

MEDICAL HISTORY SHEET

Surname Walsh Christian Name John Patrick

Examined { on 26 day of Oct 1916
 at Halifax
 Birthplace { City or Town St John
 County New Brunswick

Approved by H.S. White
 Rank Capt QMC M.O.

Apparent age 20 yrs 4 mos
 Trade or occupation Student
 Height 5 feet 7 Inches
 Weight 135 lbs.
 Chest measurement { Minimum 32 inches
 Maximum expansion 36 inches
 Physical development Good
 Small-pox Marks Nil

| Date | Fit or Unfit | EXAMINED FOR RE-ENGAGEMENT |
|------|--------------|----------------------------|
| | | M.O. |
| | | M.O. |
| | | M.O. |
| | | M.O. |
| | | M.O. |
| | | M.O. |

Vaccination Marks { Arm ~~Right~~ Left
 Number 2
 When Vaccinated last 1897

| Date | Result | VACCINATIONS |
|------|--------|--------------|
| | | M.O. |
| | | M.O. |
| | | M.O. |

(a) Marks indicating congenital peculiarities or previous disease
 (b) Slight defects but not sufficient to cause rejection

| Date | Result | ANTI-TYPHOID INOCULATIONS, ETC. |
|------|--------|---------------------------------|
| | | M.O. |
| | | M.O. |
| | | M.O. |

Enlisted on 26th day of October 1916 at Halifax

| | CORPS | REG'TL NUMBER | HABITS | DATE |
|----------------------|-----------------------------------|---------------|--------|-----------------|
| Joined on enlistment | <u>140th Bn C.F.P.</u> | | | |
| Transferred to | <u>2010 Hqs Dig Battery</u> | <u>817191</u> | | <u>26-10-16</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.

DUPLICATE.

MEDICAL HISTORY SHEET.

Surname Walsh. Christian Name John. Patrick

| | | |
|---|---|---------------------------------|
| Examined { on <u>23rd.</u> day of <u>Nov.</u> 191 <u>5.</u> at <u>Sussex, N.B.</u> | Approved by (Sgd) <u>J. D. Burnett</u> | Rank _____ M.O. |
| Birthplace { City or Town <u>St. John,</u> County <u>St. John Co., N.B.</u> | | |
| Apparent age <u>19 years.</u> | | |
| Trade or occupation <u>19 years.</u> | | M.O. |
| Height <u>5</u> Feet <u>5</u> Inches. | | M.O. |
| Weight _____ Lbs. | | M.O. |
| Chest measurement { Minimum <u>34</u> inches. Maximum expansion <u>3 1/2</u> inches. | | M.O. |
| Physical development <u>Good</u> | | M.O. |
| Small-Pox Marks <u>None</u> | | M.O. |
| Vaccination Marks { Arm <u>Right.</u> <u>Left.</u> Number _____ | Date. Result. | VACCINATIONS. |
| When Vaccinated last _____ | | M.O. |
| (a) Marks indicating congenital peculiarities or previous disease _____ | | M.O. |
| (b) Slight defects but not sufficient to cause rejection _____ | Date. Result. | ANTI-TYPHOID INOCULATIONS, ETC. |
| | | M.O. |
| | | M.O. |
| | | M.O. |

Enlisted on 27 day of Nov 1915 at Sussex N.B.

| | CORPS. | REGT'L NUMBER. | HABITS. | DATE. |
|----------------------|---|-----------------|---------|-----------------|
| Joined on enlistment | <u>104th. Batt.</u> | <u>181505.</u> | | <u>23-9-16.</u> |
| Transferred to | <u>140th. O.S.</u> | <u>817,191.</u> | | <u>6-2-16.</u> |
| | <u>Batt. C.E.F.</u> <u>165th. O.S.</u> | | | <u>21-9-16</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.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

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

Regimental No. 817191 Rank Private Name Walsh J.P.

Corps 165th. Battalion C.E.F. who was* A Deserter

On 21-9-16 1916, to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from L.P.C 21-9-16 1916, to 5-3-17 1916, the inclusive date of transfer or discharge.

| Dr. | \$ | c | Cr. | \$ | c |
|--|------------|-----------|---------------------------------------|------------|-----------|
| Bal. Dr. from prev. month | | | Bal. Cr. from prev. month | 344 | 40 |
| Advances } No | | | Reg'tl Pay 5 days at \$ 1.00 | 5 | 00 |
| by } No | | | Field Allow. 5 days at \$ c 10 | | 50 |
| Cheques } No | | | Other Allowances* | | |
| Assigned Pay No. | | | Other Credits* | | |
| Other Charges* | 182 | 60 | | | |
| Payment on transfer or discharge No. | | | | | |
| Balance Cr. (to be paid by the new unit) | 167 | 30 | Bal. Dr. (to be deducted by new unit) | | |
| Total | 349 | 90 | Total | 349 | 90 |

*Give Particulars.

A monthly stoppage of \$ Nil (†) has _____ (‡) been paid on account of Assigned Pay for the month of _____ 1916 to (Assignee) _____
 (Address) _____

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

On Transfer of an Officer.

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

REMARKS:—

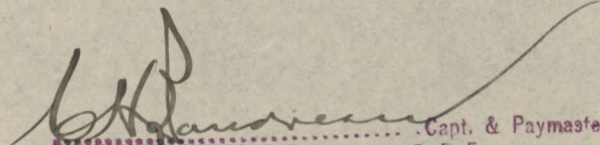
State (1) date of enlistment 23-11-15
 (2) if married and if a Separation Allowance Card has been submitted No
 (3) cause of discharge and authority Deserter

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

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

Date Mch. 6/17

Place St. John N.B.


 _____ Capt. & Paymaster
 165th Acadian Battalion C.E.F.
 Paymaster

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

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

M. F. W. 44.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all ranks (Vide Articles 122, 130 and 141 Financial Instructions, 25715c, C.E.F. (1915))

Regimental No. 2151st
Rank Private
Name
Donor
C.O.P. 21-10-15
On 21-10-15
The following is a statement of the amount of the above named from 21-10-15 to 21-10-15

Table with columns for Description, Amount, and Total. Rows include: Total, Gratuity, Other Allowances, Other Credits, and Total Deductions.

Pay for the month of ...
A monthly allowance of \$...
(1) has been paid on account of Assigned ...
(2) has been paid on account of Assigned ...

If there is any amount to be assigned, it shall be paid on the ...
On transfer of an Officer ...
has been paid by Paymaster, Military District No. ...

On transfer of an Officer ...
has been paid by Paymaster, Military District No. ...

It is hereby certified that the above named ...
has been paid by Paymaster, Military District No. ...

The above named ...
has been paid by Paymaster, Military District No. ...

For purposes of this certificate ...
The following is a statement of the amount of the above named ...

165th BATTALION C.E.F.

DUPLICATE

To be made out in duplicate.

H.Q. 54-21-23-53

copy

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 *40th C.S. Battalion C.E.F.*

(2) Regimental Number *817/91*

(3) Full Name of Soldier *John Patrick Walsh*

(4) Place of Birth *St. John N.S.*

(5) Are you married, or not? *single*

(6) If married, state,
(a) Full name of your wife _____
(b) Present Postal Address _____

(7) Are you a widower? *No*

(8) Have you any children? *No*

If so, give number of boys and girls _____

Also their names and ages _____

(9) Is your Father alive?

If so, state name and address

*Yes, John Walsh
+ 3000 W. 1st St., St. John N.B.*

(10) Is your Mother alive?

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.

(15) Are you insured?

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.

L. C. D'Agyle
Lieut.-Colonel,
Commanding 165th "Acadian" Batt'n., C. E. F.,
Officer Commanding.

Date.....

5. 2. 17

To be made out in duplicate.

H.Q. 54-21-23-53

copy

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 14th Co. Battalion C.F.

(2) Regimental Number 817191

(3) Full Name of Soldier John Patrick Walsh

(4) Place of Birth St. John, N.S.

(5) Are you married, or not? single

(6) If married, state,
(a) Full name of your wife _____

(b) Present Postal Address _____

(7) Are you a widower? No.

(8) Have you any children? No

If so, give number of boys and girls _____

Also their names and ages _____

(9) Is your Father alive? yes, John Walsh
If so, state name and address # 7 Coletan St, Newark N.J.

(10) Is your Mother alive? _____
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.

(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.

L. G. Dagle
Lieut.-Colonel,
Commanding 165th "Asadian" Batt'n., C. E. F.
Officer Commanding.

Date 5. 3. 17