FORESTRY COMPANY
SOUTHERN ALBERTA. C. E. F.

Forestry Company.

ORIGINAL

ATTESTATION PAPER.

No. 2288467

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Ward
1a. What are your Christian names?	James.
1b. What is your present address?	Wainwright Alta
2. In what Town, Township or Parish, and in what Country were you born?	Brant Township. Ont.
3. What is the name of your next-of kin?	Margaret Ward.
4. What is the address of your next-of-kin?	Wainwright Alta Con
4a. What is the relationship of your next-of-kin?	Wife.
5. What is the date of your birth?	Aug. 20th 1871.
6. What is your Trade or Calling?	Sawmill Foreman.
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? If so, state particulars of former Service.	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, James Ward, 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.

James Ward (Signature of Recruit)

Date April 12th 1917. J C Stedman (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, James Ward, 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.

James Ward (Signature of Recruit)

Date April 12th 1917. J C Stedman (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 Wainwright Alta this 12th day of April 1917.

Maurice Cardell (Signature of Justice)

Barrister & Notary

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

Reported for duty 1/5/17.

Description of James Ward on Enlistment.

Apparent Age 46 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft 11½ ins.

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

Complexion Fair

Eyes Blue

Hair Fair

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

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

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

Hearing
R. Ear Normal
L. Ear Normal

Eyesight
R. Eye D 20
L. Eye D 20.

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 April 12 1917. J. B. Middleton Lieut

Place Wainwright Alta Wainwright

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
Edmonton 25/4/17
Major C. A. M. C. President
Major C. A. M. C.
Capt.

CERTIFICATE OF OFFICER COMMANDING UNIT.

James Ward 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.

MAY 8 1917

Date ..... 191 .

(Signature of Officer)
Capt OC
FORESTRY COMPANY
SOUTHERN ALBERTA, C. E. F.

RM
29.3-19

O. H. M. S.

REGIMENTAL DOCUMENTS

WARD JAMES REGT. No. 2288467 UNIT C. F. C.

NON-EFFECTIVE BY ..... CATEGORY Demob.

CONTENTS

3 ATTESTATION PAPER (M. F. W. 23, 133 OR 51)
2 CASUALTY FORM (M. F. W. 54 OR A. F. B. 103)
TRAINING HISTORY SHEET (M. F. W. 113)
/ FIELD CONDUCT SHEET (M.F.W. 178 OR A.F.B. 122)
REGT. CONDUCT SHEET (M.F.B. 263 OR A.F.B. 121)
COMPANY CONDUCT SHEET (M.F.B. 263A OR A.F.B. 121)
/ MEDICAL HISTORY SHEET (M.F.B. 313 OR A.F.B. 178)
DENTAL HISTORY SHEET (M. F. B. 465)
/ MEDICAL REPORT (M. F. B. 227 OR A. F. B. 179)
/ MEDICAL EXAMINATION (M. F. W. 129)
/ TRANSFER CLOTHING STATEMENT (M. F. W. 97, OR D. O. S. 2)
PROCEEDINGS, COURT OF INQUIRY (M. F. B. 303 OR A. F. B. [illegible])
DECLARATION, COURT OF INQUIRY (M. F. B. 259 OR A. F. B. [illegible])
/ LAST PAY CERTIFICATE (M. F. W. 44)
/ PROCEEDINGS ON DISCHARGE (M. F. W. 218 OR A. F. B. [illegible])
PARTICULARS OF CHARACTER (A. F. W. 3226)
/ COPY OF PARCHMENT DISCHARGE CERTIFICATE (M. F. W. 39A)
/ DENTAL CERTIFICATE ON DISCHARGE (C. A. D. C. 5609)
/ UNIT INDEX CARD (M. F. W. 71 OR 192)

2 DMS 1394
1 BOC 167
1 MFW 67
1 [illegible]

05943

M. F. B. 270.
850M-5-18
H. Q. 1772-39-67

2288467
I.D. number
No. d'identification

WARD
Surname
Nom de famille

JAMES
Given names
Prénoms

OPEN
ATA

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU PERSONNEL

Location
Lieu 10082

ORIGINAL

To be made out in duplicate. H.Q. 54-21-23-53

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.

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(1) Name of Overseas Unit which Soldier joins..... FORESTRY COMPANY SOUTHERN ALBERTA. C. E. F.

(2) Regimental Number 2288467

(3) Full Name of Soldier..... James Wards

(4) Place of Birth..... Brant Township Bruce County. Ont.

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

(6) If married, state,
(a) Full name of your wife..... Margaret Wards

(b) Present Postal Address..... Wainwright Alta.

(7) Are you a widower ? ..... ✓

(8) Have you any children ?..... Three.

If so, give number of boys and girls..... 2 Boys & 1 girl

Also their names and ages..... James Cecil 20 yrs
Hazel Kathleen 19 yrs.
Charles Edward 15 yrs

M. F. W. 67.

5 M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(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.

C. G. Bowman
Capt *Officer Commanding.*

Date JUN 11 1917

FORESTRY COMPANY
SOUTHERN ALBERTA. C. E. F.

Number 2288467 Rank a/Sgt.

Surname WARD

Christian Name James

Units 6.7.6. Theatre of War England.

Date of Service 5-7-17

Remarks

Latest Address Wainwright, Alta.

Roll No A Pag 2833

200m.-2-21.M.

DESP. SEP 21 1923
REGN. NO. 7080

SURNAME. Ward

CHRISTIAN NAMES James

REGL. No. 2288467 RANK Pte.

UNIT Forestry Coy.

FORMER CORPS Nil.

13

CARD NO.

Demob.

FOLL.

SOS 17.2-19. D0485 / 17/2/19 13DD

NEXT OF KIN.

NAMES IN FULL Ward, Mrs. Margaret

RELATIONSHIP TO SOLDIER Wife

ADDRESS Wainwright, Alta.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada Brant Tp. Ont. DATE Aug. 20th 1871

PLACE OF ATTESTATION Wainwright, Alta. DATE Apr. 12th 1917

O/S. 25-6-17 894/9

R/C 26/12/18 246/49, 13

L. L. 10437. M. & D. 7253. M. F. W. 22. 100M. -11-16. H. Q. 17 2-39-339.

MARRIED Yes SINGLE WIDOWER

TRADE OR CALLING Sawmill Foreman RELIGION Methodist-

DESCRIPTION.

APPARENT AGE	46	YEARS		MONTHS	
HEIGHT	5-	FEET	11½	INCHES	
CHEST MEASUREMENT	36	INCHES	EXPANSION	4	INCHES
COMPLEXION Fair		EYES Blue	HAIR Fair		

DISTINGUISHING MARKS Nil.

MEDICAL EXAMINATION. PLACE Wainwright, Alta DATE Apr. 12th 1917

Present address Wainwright, Alta.

LOCAL CARD

Name WARD James. Rank Sgt. Regtl. No. 2288467

Fyle Depot 3.D. W-294

Original unit C.F.C. Present unit ... M. or S ... Age 2[illegible] Religion Met. Ref. H.Q.

Port, ship and date of arrival Halifax. Northland. 25-12-18-

Next of kin Mrs M. Ward. wife. Wainwright. Alta.

Address on leave Same.

Address on discharge as above

Transportation issued Yes – No Date ... Character on discharge ...

Previous occupation Farmer. Date and place of enlistment 12-4-17- Wainwright.

Diagnosis Fit E. Date of Medical Boards 20-I-19

Date	Remarks	Pt. 2 Order No.
15-12-18-	Posted to Cas Co Edmonton. 31-12-18-	3
	Granted leave with subsistance. 14-1-19-	3
17-2-19	Discharged from H.M. service	48

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

(over)

Date.	Remarks	Pt. 2 Order

M. F. W. 192
150m.—5-18
1772-39-1243

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

M. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps

Regimental No. 228 8467 Rank Private Name Ward James
C. E. F.

Enlisted (a) 12-4-17 Terms of Service (a) Duration of War Service reckons from (a) 12-4-17

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: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36. or other official documents.
17-2-19		DISCHARGED FROM THE SERVICE BY DISTRICT DEPOT NO. 13. PART 2 ORDER NO. 2048 AUTHORITY RO 1420 Dated Ottawa 12-12-18 W. Wadsworth Officer Commanding 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, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.

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				

C.A.D.C.5009.
2[redacted]9-2-18.

13

2288467.
Sgt Ward J.

DENTAL CERTIFICATE.

The following Certificates will be attached to the Medical History Sheets of all Other Ranks being returned to Canada for disposal.

1.Y16.

Date of Examination.	Present Dental Condition.	In case of loss or decay of teeth. Is the loss due to wounds, injury or disease directly attributed to Active Service?	Has he ever declined Dental Treatment.	Recommendation.
CANADIAN DISCHARGE DEPOT DEC 8 1918	Sat	—	—	—

H Cowan
Capt. C.A.D.D.

O.A.D.C.5000
3-18.

DEMOBILIZATION
PAY DIVISION, M. D. 13

CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44.
1133 (D.P.) 250M.-12-18.
1772-39-903.

LAST PAY CERTIFICATE

Regimental No. 2288467 Rank Pte. Name Ward J.
(Surname first)

Unit C.E.C. who was* Discharged

On 17/2/19 191..., to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1/2/19 to 17/2/19 191... the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month		23.93
Regimental Pay 17 days at $1.00c		17.00
Field Allowance 17 days at $ c. 10		1.70
Separation Allowance 17 dys. Feb.		17.00
Clothing Allowance		35.00
Post Discharge Pay		
*Other Credits		
Advances		
Separation Allowance ~~and Assigned Pay~~ Cheque No. G 88	17.00	
*Other Charges		
Balance on transfer or on discharge, cheque No. G.87	77.63	
Total	94.63	94.63

*Give particulars.

A monthly stoppage of $ 25.00 (†) has (‡) been paid on account of

Assigned Pay for the month of Jan. 191.9.
and Separation Allce. for month of Feb. 17 dys. 191.9.

(to) Assignee Mrs. M. Ward

(Address) Wainwright. 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 14/2/19

Place Calgary, Alta.

PAYMASTER— DEMOBILIZATION PAY DIVISION M. D. 13 LIEUT.

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 "or 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.

M. B.

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.	

ORIGINAL

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. 2288467 Rank Sgt. Surname Ward. (Given name in full) James.

Unit or Corps C.A.F.C. Birthplace Ontario.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 160 lbs. Height 6 ft. 0 in. Colour of Eyes Blue.

Nutrition Good.

Pulse 80

Condition of arteries Normal for age.

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 Sytem 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.

Cat. "E."

Address: -Wainwright, Alberta.

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

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at ..... (Overseas)

Date ..... Signed ..... M.O.

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

Signature .....

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

THIS SECTION FOR USE IN CANADA—

Examined at Edmonton (Canada)

Date 20/1/19 Signed A. E. Henderson 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 James Ward

(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.)

APPROVED BY

MAJOR C. A. M. C.
for Captain C. A. M. C.
Supervisor of Medical Board

For The Adjt. M.D.13.

[OVER]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-89-1142.

S.A. Forestry Coy (Attached to) 20-7-17 D.O. 73

FORESTRY COMPANY
SOUTHERN ALBERTA. C. E. F.

ORIGINAL

2288467

MEDICAL HISTORY SHEET

Surname Ward Christian Name James

Examined on 12 day of April 1917 at Wainwright Alta.

Approved by J. Muddiman Lieut

Rank M.O.

Birthplace City or Town Eden Grove
County Brant Co. Bruce Co. Ont.

Apparent age 46

Trade or occupation Sawmill Foreman

Height 5 feet 11½ Inches

Weight 150 lbs.

Chest measurement Minimum 32 inches
Maximum expansion 36 inches

Physical development Good

Small-pox Marks

Vaccination Marks Arm Right — Left —
Number

When Vaccinated last

(a) Marks indicating congential peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Date	Fit or Unfit	Examined for Re-Engagement	
27/8/17	B.1.	Gen R	M.O.
4/10/17		~~Approved by Medical Examination Board~~ ~~C.A.M.C.~~ Edmonton Alta. 4/10/17	M.O.
		[illegible]	M.O.
		Major C. A. M. C. President	M.O.
		[illegible]	M.O.
		Major C. A. M. C.	M.O.
		W. A. Scanlan Capt.	M.O.

Date	Result	Vaccinations	
APR 30 1917		Lilson Harrison	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
22/6/17	7/17	Lilson Harrison	M.O.
MAY 14 1917		Lilson Harrison	M.O.
~~MAY 14 1917~~ 22/6/17		Clinton Staples Major.	M.O.

Enlisted on 12 day of April 1917 at Wainwright Alta

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	Forestry Co S.A.C.E.F.	2288467		12/4/17
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
Summerdale	10.7.17	Arteriosclerosis	Class B2 cat.
A.D.M.S. CANADIANS, LONDON AREA, LONDON.	Approved:- 16 JUL 1917		W. Macdonell Captain C.A.M.C., A.D.M.S. Canadians, London Area.
~~Rock Woods~~ Summerdale	4/10/17 27.11.18	Arteriosclerosis	B2 ~~A1~~ M Coal Miners

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.

Edmonton Alta 20. 1-19. M. Fw. 139. E. A. Henderson CAPT. C. A. M. C.

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

Surname Christian Name

STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer
		Day	Month	Year	Day	Month	Year				

64

121

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

M. F. W. 54. (A. F. B. 103.)
350M.—5-16
H. Q. 1772-39-9-20.

Casualty Form—Active Service.

Unit, Regiment or Corps FORESTRY COMPANY SOUTHERN ALBERTA, C. E. F.

Regimental No. 2288467 Rank Private C. E. F. Name Ward James

Enlisted (a) 12/4/17 Terms of Service (a) Can. Ex. Force Service reckons from (a) 12/4/17

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) Sawmill Foreman

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
		EMBARKED HALIFAX 22.6.17 DISEMBARKED L-POOL, 4.7.17			
8-7-17	HD.CFC.	T.O.S. Base Depot CFC R.H.Elliot	Sunningdale	4-7-17 Lt. & A/Adjt .C.F.C.	Pt.11.D.O.No.60
1/11/17.	O.C. 51 Dist 6.7.6.	appointed a/sgt. to complete establishment at 121 coy. Loch Morlich Guy R. Lowe Capt & Jr O.C. 51 Dist C.F.C.	Nairn	4/8/17.	D.O. Pt II, no 136.
17/11/17	O.C. 51 Dist 6.7.6.	S.O.S. 51 Dist-6.7.6. 51 Dist-6.7.6. 121 coy	Nairn	19/11/17 Guy R Lowe Captain & Adjt., for O.C. No. 51 District, Canadian Forestry Corps.	Pt II D O 139

(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.

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				
19-11-17	O.C. 51. Dist. C.F.C.	T.O.S. #55. Dist C.F.C. on posting to 121 Coy	Stirling	19-11-17	D.O. Pt. II #2 d/28-11-17 [signature] Captain & Adj. #55. Dist. C.F.C.
22.11.18	OC 55 Dist C.F.C.	T.O.S. 55 Dist C.F.C. Cal. 121 Coy to Base Depot C.F.C.	Stirling	22.11.18	D.O. Pt. II No 56 d/27.11.18 [signature] Capt. & Adjt 55 Dist C.F.C.
		26-11-18 O.C. C.F.C. T.O.S. Base Depot, C.F.C. from 121 Coy. Dist 55.	Sunningdale	22-11-18	Pt. 11. D.O. 282 [signature] Lt. & A/Adjt. For O.C. Base Depot, Canadian Forestry Corps.
3.12.18		Attached C.F.D. [illegible] Ceases to [illegible]	[illegible] return to Canada, Part [illegible] Buxton on embarking for [illegible]		286 [signature] Capt. for O.C. Commanding Canadian Discharge Depot.
		11 EMBARKED S, S, NORTHLAND [illegible] POOL DEC 15 1918			[signature] Capt. SHIPS ADJUTANT.
15-12-18.		TAKEN ON STRENGTH OF DISTRICT DEPOT 13, PART 2 ORDER NO. 3			[signature] Lieut. Col. Officer Commanding District Depot No. 13

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 2288467 (Rank) ----Private ------

Name (in full) ---- James WARD ---------- enlisted in

the The Canadian Forestry Corps ----------

CANADIAN EXPEDITIONARY FORCE at Wainwright, Alta. on the Twelfth

day of April 19 17.

HE served in ENGLAND

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

H.Q. 1420 12-12-18

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

Age 47 Years.

Height 6 Feet

Complexion Fair.

Eyes Blue.

Hair Grey.

Marks or Scars NIL.

James Ward
Signature of Soldier #2288467

W. MacEwan Lt.
Issuing Officer

Rank

Date of Discharge February 17th, 1919

Appointment

Signed at Calgary, Alberta. this Seventeenth day of February 19

in Military District No. 13.

File Reference No. 13D -M 294.

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.

M. F. W. 39a
200m.—2-18.
H.Q. 1772-39-882

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

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

.....
Name of Officer

.....
Rank

.....
Appointment

BW. Form R 122
2353—100M—9-12-16.

Rank Name WARD James. Reg'l No. 2288467

Unit If in perm. Corps, What Unit? Married or Single Married.

Sthn Alberta Forestry Dft. to Base Depot

Place and Date of Enlistment Wainwright, Alta. April 12, 1917. Place of Birth Brant Township, Ont.

Name and Address, Next-of-Kin Margaret Ward,

Wainwright, Alta, Can. Relationship Wife.

Assigned Pay Monthly $ Payable to

Relationship

N/E. R.B. No. 4410
File R.L.
Category Can OPC

a/Sgt.

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

H. W. V., Ld.—9546-16.

Report. Date.	Report. From whom received.	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.
		ARRIVED IN ENGLAND 5-7-17. S/S JUSTICIA				
		6.7.17. C.F.C BD T O S SUN'DALE 4 7, 17 Pt 11, O 60				
21.7.17	BD CFC	SOS to #1 Dist CFC	pte	S'Dale	20.7.17	Pt II D.O. 73 #1 Dist Pt II DO 72 d/27.7.17
31.10.17	#51 Dis CFC	Appt a/Sgt	"	Nairn	4.8.17	" 135
22.11.17	— " —	S.O.S. to 55 Dis CFC	a/Sgt	— " —	19.11.17	" 139 Pt II O 2 a/28.11.17 55 Dis CFC. T.O.S.
22.11.18	C.F.C. B.D.	T.O.S. from Dist. 55. C.F.C.	a/Sgt.	S'dale	22.11.18	" 282. S.O.S. Dist. 55. Pt II 56 d/27/11/18 a/Sgt.
2.12.18	" "	On Comd to C.A.D. Buxton	a/Sgt.	"	2.12.18	" 287
		SOS to Canada MD 13				
		15 12 18				
		BDCFC Pt. II. O 13 d: 13-1-19				

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.					

wife

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
18m.—4-17.
1772—39—819.

Sheet No. 2. Mrs Margaret Ward
(Assignee)

PAYMENTS.

Name of Soldier Ward James
2288467, Pte. Forestry Co

L. L. Job 19227—M. & D. 7814.

20.

JUN 1 1917

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June		A 13200	20	20-2
July		T 26390	20	
Aug.		J 33424	20	
Sept.		V 39241	20	
Oct.		B 49686	20	
Nov.		M 53756	20	
Dec.		C 63047	20	
			140	00
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

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.				

L. L. Job 4503.—M. & D. 6332.

D/E 1-5-17

MILITIA AND DEFENCE

M. F. W. 11.
50m.—6-16.
H. Q. 177-39-818.

SEPARATION ALLOWANCE

Name Margaret Ward

Address Wainwright
Alta

Relation to Soldier
wife, child or mother } Wife

Name of Soldier Ward. James

Regtl. No. 2288467

Rank Pte

Corps Forestry Coy. So Alta

To what Corps belonging
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				

CONSOLIDATED 4 ACCOUNT

D/E 1-5-17

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
50m.–6-16.
1772—39—818.

Sheet No. 2.

L. L. Job 4503.–Req. 6832.

Name of Soldier Ward. James

Margaret Ward Wife

Pte

2288467 Remarks. Forestry Coy

Month.	Year.	Cheque No.	Amt.		
April	1916				
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1917				
Feb.					
March					
April				60	
May					
June		D 8919	40		40 R
July		B. 14735	20		20
Aug.		O. 15786.	20		20
Sept.		S. 19103	20		T
Oct.		A. 11535	20		M
Nov.		25591	20		B
Dec.		28389	20	160	Sd
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

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.				

L.L. 19226—M. & D. 7814.

wife

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

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

Mrs

To Whom Margaret Ward

Address Wainwright Alta

By Whom Assigned Ward James

Regtl. No. 2288467

Rank Pte

Corps Forestry Coy

Rate 20.

JUN 1917

PAYMENTS

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

CONSOLIDATED ACCOUNT

160
140
300

FORM P. 559
8248-150M.-7/3/17

MARRIED OR SINGLE PM.

PLACE OF BIRTH Downs Township Ont.

NAME OF NEXT OF KIN Mrs. Margaret Ward RELATIONSHIP Wife

ADDRESS Wainwright Alta

NAME OF NEXT OF KIN RELATIONSHIP

ADDRESS

APPOINTMENTS.
PROMOTIONS AND REVERSIONS.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Appointed Pte	4/8/17	DO 135 3/9/17

DATE ADMITTED	ADMISSIONS DATE DISCH'D	V. OR A.	TO HOSPITAL, &c. NAME OF HOSPITAL.

SEPARATION ALLOWANCE.

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE) STOPPED EFFECTIVE (DATE)

PAYABLE TO REASON

RELATIONSHIP AUTHORITY

AUTHORITY FOR ISSUE REMARKS

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE DATE STOPPED EFFECTIVE (DATE)

PAYABLE TO REASON

RELATIONSHIP AUTHORITY

AUTHORITY FOR ISSUE REMARKS

NEW PAYBOOK ISSUED NEW PAYBOOK ISSUED

REG'L. No. 2288467 RANK ~~Pte~~ A/Sgt. NAME Ward. James.

PLACE OF ATTESTATION Wainwright Alta. DATE OF ATTESTATION 18-4-17 ORIGINAL UNIT Alta Forestry Draft.

PRESENT UNIT.....

ASSIGNED PAY

PER MONTH $ ~~100~~ 25.00 DATE EFFECTIVE 1/2/18 AUTHY. A2M Form

PAYABLE TO Mrs Margaret Ward. Wainwright Alta. RELATIONSHIP wife

(2) PER MONTH $ DATE EFFECTIVE AUTHY.

PAYABLE TO RELATIONSHIP

(3) PER MONTH $ DATE EFFECTIVE AUTHY.

PAYABLE TO RELATIONSHIP

(4) PER MONTH $ DATE EFFECTIVE AUTHY.

PAYABLE TO RELATIONSHIP

DISCHARGE DATE AND PLACE

REASON AND AUTHORITY

(1) STOPPED EFFECTIVE
CAUSE
DATE A3M FORMS REND.

(2) STOPPED EFFECTIVE
CAUSE
DATE A3M FORMS REND.

(3) STOPPED EFFECTIVE
CAUSE
DATE A3M FORMS REND.

(4) STOPPED EFFECTIVE
CAUSE
DATE A3M FORMS REND.

ACCOUNT TRANSFERRED TO N.E. BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

PARTICULARS OF TRANSFERS

TO UNIT	EFFECTIVE DATE	AUTHORITY

PERIOD FROM	PERIOD TO	PAY AND FIELD ALLOWANCE No. OF DAYS	RATE	$ c.	WORKING PAY No. OF DAYS	RATE	$ c.	SEPARATION ALLOWANCE $ c.	ASSIGNED PAY CREDITS $ c.	ANY OTHER CREDITS $ c.	TOTAL CREDITS $ c.	SEPARATION ALLOWANCE $ c.	CASH PAYMENTS DURING THE MONTH 1 $ c.	2 $ c.	3 $ c.	4 $ c.	ASSIGNED PAY $ c.	OTHER CHARGES $ c.	TOTAL DEBITS $ c.	BALANCE CARRIED FORWARD CREDIT $ c.	BALANCE CARRIED FORWARD DEBIT $ c.	NUMBER OF ACQUITTANCE ROLLS 1	2	NUMBER OF S.A. AND A.P. CHEQUE	REMARKS. ALL CASUALTIES, PROMOTIONS, &c., TO BE NOTED. ALSO PARTICULARS OF "OTHER CREDITS" OR "OTHER CHARGES"
										10 10															C 62
July 1st 1917		Balance from Canada									10 10									10 10					
July	31	1.0	34 10								34 10						20		20	24 30					
Aug	31		34 10								34 10						20		20	38 30					
Sep.	30		33								33						20		20	51 30 ✓					
			101 20							10 10	111 30						60		60						

MONTH PARTICULARS CR.1 CR.2 PARTICULARS DR.1 DR.2 DR.3 DR.4 BALANCE DEFERRED PAY SEP ALLCE ENG.

			101 20							10 10	111 30						60 00		60 00						

2288467 ~~Pte~~ a/Sgt Ward J. 2007

Period From	Period To	Pay and Field Allowance No. of Days	Rate	$ c.	Working Pay No. of Days	Rate	$ c.	Separation Allowance $ c.	Assigned Pay Credits $ c.	Any Other Credits $ c.	Total Credits $ c.	Separation Allowance $ c.	Cash Payments During the Month 1 $ c.	2 $ c.	3 $ c.	4 $ c.	Assigned Pay $ c.	Other Charges $ c.	Total Debits $ c.	Balance Carried Forward Credit $ c.	Debit $ c.	Number of Acquittance Rolls 1	2	Number of S.A. and A.P. Cheque	Remarks. All Casualties, Promotions, &c., to be Noted, also Particulars of "Other Credits" or "Other Charges"
MONTH		PARTICULARS			CR. 1		CR. 2	PARTICULARS			DR. 1	DR. 2	DR. 3	DR. 4	BALANCE		DEFER-RED. PAY	SER. ALLCE. ENG.							
					~~51 30~~									51 30											
	Oct	Sgt Pay			46 50 ~~34 10~~				C.A.P.				20												
		Diff in Pay as Sgt 58 days at 40¢			23 20			A.R. 422 - 24/7/17 - 64 Co.			4 87														
								A.R. 495 - 21/8/17 - 121 Co C.F.C.			12 17			83 96											
	Nov				69 70 ~~34 10~~			Can A.P.			17 04		20 20												
		Sgt Pay			45			A.R. N136 23/10/17 121 Coy.			12 17														
	Dec	Sgt Pay			46 50			A.R. 36 27/9/17 121 Coy			12 17 24 34														
								A.R. 2818 16-7-17 BD			4 87 29 21														
									C.A.P.				20	106 25											
1918					91 50						29 21		40												
Jany		Sgt Pay			46 50				C.A.P. Jany 18.				20												
								A.R. 76304 20-11-17 121 Coy			48 67			84 08											
					46 50						48 67		20												
Feb		Sgt Pay			42				C.A.P.				25												
								A.R. 80 16-1-18 121 Co			9 73														
								A.R. N761 1-1-18 " "			12 17 21 90			79 18											
March		Sgt's Pay			42 46 50				C.A.P.				25 25												
								A.R. 226. 25.2.18. 121 Coy			21 90														
								A.R. 501. 20.3.18 121 Co			21 90			56 88											
					46 50						43 80		25												

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:- 25.		EFFECTIVE DATE:-	
AMOUNT:- 1.2.18.		AMOUNT:-	

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 Margaret Ward,
Wainwright
Alta

Stop Eff: 1/1/19

NAME:- WARD James

NUMBER:- 2288467

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
S.O.135. 31/10/17	4.4.17	A/Sgt.

UNIT AND TRANSFERS

ORIGINAL UNIT:- Alta Forestry Draft.

DATE ACCOUNT FIRST OPENED:- 1.7.17

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			E.F. Clang

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
~~14/11/18.~~	~~1575~~	~~Blue~~ 12.12.18.	~~24 33~~				
~~30/11/18.~~	~~4774~~	~~BD.~~ 16.12.18.	~~4 87~~				
			29 20				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
A/Sgt. S.O.175. 31/10/17	1 35	.15		

PARTICULARS OF RENDERING NON-EFFECTIVE: Disch: to Canada for disposal 31/12/18. Authy AR.267 30/11/18. AR 267 30/11

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
March	Balance Ford.								56 88	- -	
April	Sgt. P.	45 -		C.A.P.				25 -			
				ab 207. 25/4/18. 121 Coy	21 90 -				54 98		
		45			21 90			25			
May	Sgt. P.	46 50		C.A.P.				25			
				Ab. 332. 23.5.18 121 Co	24 33 -				52 15	- -	
		46 50			24 33			25			
June	Sgt. P.	45		C.A.P.				25			
				" 495 19.6.18 "	24 33 -				47 82	- -	
		45			24 33			25			
July	Sgt. P.	46 50		C.A.P.				25			
				" 748 16.7.18 121 Co	29 20 -				40 12		
		46 50			29 20			25			
Aug	Sgt. P.	46 50		C.A.P.				25			
				" 937 14.8.18 "	24 33 -				37 29		
		46 50			24 33			25			
Sept	"	45 -		C.A.P.				25			
				" 1270 26.9.18 "	24 33 -				32 96		
		45			24 33			25			
Oct	"	46 50		C.A.P.				25			
				" 1377 17.10.18 "	24 33 -				30 13		
		46 50			24 33			25 -			
Nov	Sgl Pay	45		C.A.P.				25	50 13		
				" 1575 4.11.18 "	24 33						
				" B4774 29.11.18 BD	4 87						
Dec	"	46 50		C.A.P.				25	71 63		
				AR 5015. 11.12.18 Buxton (Cond)	9 73						
									32 70		
	Corrected Balce 32 70 Due to AR 5015.	91 50			38 93			50 -			

A 3 M. FORM REN'R ..... EFFEC. .....
DISCHARGED TO Canada DATE 31/12/18.
PAY BOOK VERIFIED 2/12/18.
Cr. BAL. 42 43. L.P.C. REN'R. 2/12/18.
AUTHY A.R. 267. 30/11/18.
Checked by Robertson.

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION

PART I. A.F.B. 179 Canada (Revised 1918). 4182 100m. 16/11/18 D.495

Reserved for M.H.C.

Regt. No. 2288467 Rank S'G'T Surname WARD Christian Name JAMES

Unit or Corps—(a) Overseas from United Kingdom ——— (b) in United Kingdom C.F.C.

Born at—Town EDEN GROVE County or Province ONTARIO Country CAN.

Date of Birth—Day 20 Month AUGUST Year 1871 Age 47 yrs. 3 months.

Joined at WAINWRIGHT, ALBERTA. Date APRIL 12th 1917

Former trade or occupation FARMER

Permanent Marks or any peculiarity that will serve for future identification :—

~~FACE MARKS L. K. ARM~~ SCARS.

Height—feet 6 inches ——— Colour of eyes BLUE

Signature of Soldier (*for identification purposes*) James Ward.

Medical Report

☞ *Read carefully the instructions on last page of this form.*

1. DISABILITY.

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (*a*) SENILITY.

Disabilities Group (*b*)

Disabilities Group (*c*)

2. CAUSE OF DISABILITY

		Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	AGE & HARD WORK.	CANADA.	1916.
(*ii.*) As to Group (*b*) above.			
(*iii.*) As to Group (*c*) above.			

3. Is the disability due to disease contracted or injuries received prior to Active Service ? Yes

(*i.*) As to Group (*a*) above ? Yes If yes, has Active Service aggravated it ? Yes

(*ii.*) As to Group (*b*) above ? If yes, has Active Service aggravated it ?

(*iii.*) As to Group (*c*) above ? If yes, has Active Service aggravated it ?

4. Is the disability due to disease contracted or injuries received while on Active Service ? NO

(*i.*) As to Group (*a*) above ? NO

(*ii.*) As to Group (*b*) above ?

(*iii.*) As to Group (*c*) above ?

PART I. (continued).

5. MEDICAL HISTORY. General health has always been good but he has never been robust. His occupation has been that of farmer, carpenter and carter.
12 - IV - 17 - Enlisted.
4 - VII - 17 - Arrived in England. Has not been in France. Civil occupation has been that of Wood Carpenter and Wood Cartloader - heavy work. In the fall of 1917 he suffered slightly from rheumatic pains in back and legs. This has disappeared since giving constitional improved.

6. PRESENT CONDITION.
Subjective - No complaints.

Objective - Heart - split first sound in 4th left interspace - no enlargement - no organic lesions.
Arteries sclerosed. Pulse tension - not markedly increased.
Urinalysis - normal.
Other systems - normal.

7. OPERATION. (i.) Was one performed? No (ii.) If so, state what. N A.
(iii.) Was one advised and declined? No

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto, unless there is evidence to the contrary.

8. (i.) Is there loss or decay of teeth attributable to Active Service? Yes
(ii.) If so, describe. 14 decayed roots removed and an upper plate fitted - satisfactory.

9. DO YOU RECOMMEND:—
(a) Fit for duty? (state category) Yes B II
(b) Invalid to Canada?
(c) Discharge from the Service as permanently unfit?

Date of Report November 27th 191 8
Signed C V Bailey Capt.
Officer in medical charge of case.
Station Sunningdale Berks

I have satisfied myself of the general accuracy of the above Report,
and concur therein *except Not in hospital {Officer i/c Hospital / S.M.O. / Brigade} Strike out one of these

Dated at ..... Station, on ..... 191.....
*Delete if inapplicable.

PART II.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

10. Is the disability fully described in Part I. (1)? If not, describe it. Yes

11. Is the cause of the disability fully described in Part I. (2)? If not, describe it. Yes

12. From the medical information now adduced, was the disability caused or aggravated by :—
(a) Negligence of the Soldier { Caused? / Aggravated? } No
(b) Misconduct of the Soldier { Caused? / Aggravated? } No

13. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour? (*Estimate at none, 5%, 10%, 15%, 20%, etc.*) Ten Percent

14. THE DISABILITY DUE TO SERVICE.—(*See Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in this estimate.*)
What part of the entire disability estimated next above (13) is due to causes arising during Active Service? (*Estimate at none, 1/10, 2/10, 3/10, etc., or all.*) None

15. Permanency of the Disability due to Service estimated next above in (14).
(*i.*) Is it permanent? Not applicable
(*ii.*) If not permanent, what is its probable minimum duration (*in months*)? Not applicable

16. If an operation was advised and declined, do you consider the refusal to have been unreasonable? Not applicable

17. Can the former trade or occupation be resumed? Yes

18. REMARKS :—

This trans condition has not been aggravated by service.

Authority for board A. G. Telegram
9083 11. 11. 18

19. RECOMMENDATION :—
(a) Fit for duty? (*state category*) B2
(b) Invalid to Canada? —
(c) Discharge from Service as permanently unfit? —

Date of Board 27. 11. 18

Signatures of the Board: J. L. Cock Major Chairman President. Frederick S. Phelps Maj.

Station Sunningdale

Approved Frederick S. Phelps Maj. A.D.M.S.

Dated at ..... Major, C.A.M.C. Station
for A.D.M.S., Canadians, London Area.

ASSISTANT DIRECTOR OF MEDICAL SERVICES, CANADIANS, LONDON AREA. NOV 29 1918 13. BERNERS ST. LONDON, W.1

191

Statement of the Soldier

(This is to be completed only in the case of the Soldier taking his ~~Discharge in England~~.)
(Sections 1, 2, 5, and 6 are to be read to the Soldier.)

I, the undersigned..F. Ward 2288467.....have heard the description of my disability read, and am satisfied (~~or not satisfied~~) with it. (If dissatisfied, statement should follow.) I complain in addition of :—

James Ward
Signature of Soldier examined.

Instructions to Medical Officers

Question 1.—State the disability in terms of a diagnosis, that is, a diagnosis of the existing condition as distinguished from the disease or injury which caused it. It should be noted that in medical cases the disability may be the actual disease; for example, Tubercle of Lung, Chronic Bronchitis, Myalgia, Gastric conditions and so forth. (Follow the nomenclature as laid down in the "List of Diseases" of 1915, and amended by A. C. I. No. 1587 of 1917.)

Question 2.—The cause of the disability when known should be stated and care should be taken to establish as correctly as possible the place and date of origin. This is important in view of the relationship of Questions 3 and 4 to Question 5.

Questions 3 and 4.—*NOTE*—By Active Service is meant Service with the Colours in Canada, the United Kingdom or elsewhere during the present war, (since the 4th August, 1914.)

Question 5.—MEDICAL HISTORY.—State concisely the essential points of the history of the case as supported by documentary evidence. If further evidence is considered necessary to complete the Medical History, the same not being supported by documents, this should be obtained by questioning the soldier, but should be distinctly shown as "Patient's Statement." It is considered advisable that these latter statements be grouped apart from the evidence supported by documents available to the Medical Officer.

Extracts should be made from all entries on the Medical History Sheet.

If answers to Nos. 2, 3 or 4 show that the Soldier is suffering from some condition which pre-existed enlistment, it is advisable that these answers be substantiated as far as possible by statements obtained from the Soldier showing history of previous illness or injury.

Question 6.—PRESENT CONDITION.—As this question is primarily intended for the Medical Officer's report, in answering show clearly the condition of the Soldier at the time of examination.

It is directed that the objective and subjective matter be arranged in separate groups. The objective matter is considered to be the more important, in that it consists of a statement of the Medical Officer's actual finding.

Specialists' reports bearing on the PRESENT CONDITION should be attached.

In addition to description of the disability, a report on "all systems" is required in order that the whole when completed may be a true pen portrait of the Soldier's condition.

The Medical Officer in charge of the case will fill out pages 1 and 2 of this Form. The original must be wholly in the handwriting of the Medical Officer. The copies may be typewritten but must be signed by the Medical Officer who must be responsible that these are true copies of the original.

Finally the O. C. Hospital or S. M. O. or an Officer delegated for such duty by the A. D. M. S., is required to sign a certificate at the bottom of page 2, which reads as follows :—

"I have satisfied myself of the general accuracy of this report and concur therewith, except....."

This is a most important part of the paper and one to which the attention of the Officers concerned should be frequently drawn as it is by such strict supervision that the accuracy and good results of Medical Board work can be assured.

ENTRIES OF RECATEGORIZATION

Date	Station	Category	Signature of M. O.	Date	Station	Category	Signature of M. O.

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. 2288467

Rank ~~Qcc~~.Sgt. ~~xxxxx~~ Private

Surname WARD

Christian name James

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) C.F.C.

Date of discharge February 17th, 1919

Place of discharge Calgary, Alta.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 47 years months.

Height 6 feet inches.

Complexion Fair

Eyes Blue

Hair Grey

Trade Farmer - Sawmill-Foreman.

Intended place of residence (To be given as fully as practicable.) Wainwright, Alta.

Descriptive marks

NIL

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

Demobilization

Authority for discharge R.O. 1420 12-12-18

13DD- Part II DO 48 17-2-19.

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

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

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

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.

A C

200M.—5-18.
H. Q. 1772-39-113.

(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) Armouries Edmonton James Ward *(Signature of Soldier.)*

(Date) January 20th/1919 A Holmes Pte *(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.

(Place) Calgary Alta.

(Signature) W. MacLeod

(Date) Feb. 17th, 1919

Officer i/c Discharge Section 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.)

Pay as per paybook balance.

James Ward

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.

Date of Enlistment

1-5-17

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

Jun 1-17

RATE OF SEPARATION ALLOWANCE

~~20~~	$ 25.00 1-12-17 P.C. 3257	30 1-2-18. PC 2753 MP038532.	

RATE OF ASSIGNMENT

~~20~~	25 1-2-18.		

1859

6196 5 QR

PARTICULARS OF SEPARATION ALLOWANCE

No. 2288467

Rank Pte Promoted Cpl. 4-8-17 Reverted Discharge

Soldier's Name James Ward.

Battalion Forestry Coy

Beneficiary Mrs Margaret Ward.

Relationship wife

Address

M.F.W 2334 Rend 26/4.

PARTICULARS OF ASSIGNMENT

Name Mrs. Margaret Ward wife

Address Wainwright Alta.

Change of Address

1

2

3

4

Date	Cheque No.		Amount S/A	Amount A/P	Total		REMARKS
Dec 31/17			160	140	300		
Jan	70625	T	30	20	50	BB	
Feb	73245	X	25	20	45	CC	
Feb	77345	Z	19		19		
Mar	93363	Z	25	25	50	✓	mailed 28-2-18
Apl	11718	W	25	25	50	✓	
May	17473	W	25	25	50	✓	W
June	25358	K	25	25	50		W
July	27239	D	25	25	50		
Aug.	34743	S	25	25	50		
Sept	44960	S	25	25	50		
Oct.	48786	K	25	25	50		T
Nov.	60359	O	25	25	50		
Dec	69023	J	45	25	70		
Jan			30	25	55		
			504	430	934		

Assignment changed per 2 M. stated 29 Jan 5th 18 on file 018796-1-5. PSD. 6-3-18. M.O. 1 issued 6-3-18

A/c Closed 31-12-18.

Ret'd per Northland.

Date 26-12-18 M.F.W.187 MD13.

Closed 31-12-18 G Frick

M. F. W. 128
400m.—6-17—1772-39-1141
L. L. 22320—M. & D. 7993.

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

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—1772-39-1141
L. L. 22320—M. & D. 7983.

AUDITOR	PAYMASTER
[initials]	[initials]

M. or S. Married

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

REGT. No. 2288467 RANK Pte NAME (IN FULL) Ward J. (BLOCK LETTERS SURNAME FIRST) M

NEXT OF KIN RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Yes DATE EFFECTIVE

TO WHOM PAID Mrs M Ward RELATIONSHIP

ADDRESS Wainwright Alta

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Hold S.A. till further orders see letter on file both Wainwright Alta		

ORIGINAL UNIT C.E.F. C.F.C. IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY $ 25.00 DATE EFFECTIVE

PAYABLE TO Mrs M. Ward RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Wainwright Alta

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE Calgary DATE 17-2-19 REASON AUTHORITY DD #13 IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. No. of Days	Rate	Amount $ c.	Other Credits $ c.	$ c.	Total Credits $ c.	Acquittance Rolls Col. No. 1 No.	Date	Col. No. 2 No.	Date	Col. No. 3 No.	Date	Cash Payments Col. No. 1 $ c.	Col. No. 2 $ c.	Col. No. 3 $ c.	Assigned Pay $ c.	Regimental Charges $ c.	Other Charges $ c.	$ c.	Total Debits $ c.	Balance Debit $ c.	Balance Credit $ c.	Particulars or Remarks
Balance from previous account 31-1-19				-	23 93																		Ct 23.93 Jan Pay List
1.2.19																							
17.2.19	17	1 10	18 70	35 00	17 00	94 63			324	12/2/19	324	12/2/19			77 63	17 00				94 63			Ct 35.00 Clothing Allce Ct 17.00 FA Feb 17 days
			18 70	35 -	40 93	94 63									77 63	17 -				94 63			DISCHARGED 17-2-19
																							6G [illegible]

Certified opening entries on this Ledger Sheet have been audited by [initials] Date 10.6.19

War Service Gratuity

MONTH	No. of Days	Rate	Amount	Other Credits	$ c.	Total Credits	Acq. Col. 1 No.	Date	Col. 2 No.	Date	Col. 3 No.	Date	Cash Col. No. 1	Col. No. 2	Col. No. 3	Assigned Pay	Regimental Charges	Other Charges	$ c.	Total Debits	Balance Debit	Balance Credit	Particulars or Remarks
				280 00	120 00	400							70 00			30				100 00	210	90 00	Cheque 139404-5. 8.4.19
													70			30				100	140	60 00	609093-4 8.5.19
													70							70	70	60 00	687080-5 8-6-19
													70 00							130	xx	60 -	861171 8.7.19
																60 -					Nil	Nil	1-12-19. Ch # G 14797995
				280 -	120 -	400 -							280 -			120				400 -	0	0	

SA suspended

All Payments Due on This Account have been completed.
G. Edwards Major
S.O.P.S. M.D. No. 13

718

MONTH	PAY AND F.A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGI-MENTAL CHARGES		OTHER CHARGES				TOTAL DEBITS		BALANCE				PARTICULARS OR REMARKS
	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		
			$	C.	$	C.	$	C.	$	C.	NO.	DATE	NO.	DATE	NO.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	