Cond C 2
5/4/16

Duplicate

ATTESTATION PAPER.

No. 3351

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Duplicat

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? ..... Henry Wilson
2. In what Town, Township or Parish, and in what Country were you born? ..... Hamilton Ontario Canada
3. What is the name of your next-of-kin? ..... J Romas Wilson (father)
4. What is the address of your next-of-kin? ..... South Railway St. Medicine Hat Can
5. What is the date of your birth? ..... February 10th 1886
6. What is your Trade or Calling? ..... Engineer.
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 CANADIAN OVER-SEAS EXPEDITIONARY FORCE? ..... Yes.

(Sgd) H Wilson ..... (Signature of Man).

(Sgd) A.A. McKinnon ..... (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Henry Wilson, 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.

(Sgd) H Wilson ..... (Signature of Recruit)

Date 5 Feb 1915. (Sgd) Alt. C. Kennis J.P. (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Henry Wilson, 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.

(Sgd) H. Wilson ..... (Signature of Recruit)

Date 5 Feb 1915. (Sgd) Alt. C. Kennis J.P. (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 Medicine Hat this 5th day of February 1915

(Sgd) Alt. C. Kennis J.P. (Signature of Justice)

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

(Sgd) Alt. C. Kennis (Approving Officer)

M. F. W. 23.
150 M.—12-14.
H.Q. 1772-39-841.

Lt. Col - 13 C.M.R.

13.

Description of Henry Wilson on Enlistment.

Apparent Age 29 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 5½ ins.

Chest measurement.
- Girth when fully expanded ..... 37 ins.
- Range of expansion ..... 2½ ins.

Complexion Fair

Eyes Grey

Hair Brown

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

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).

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 February 5th 1915 (Sgd.) S. W. Newton

Place Medicine Hat Alta. Major A.M.C.
Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

Henry Wilson 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.

(Sgd.) A. C. Kemmis (Signature of Officer)
Lt. Col. 13 C.M.R.

Date Feb 5th 1915.

REGIMENTAL DOCUMENTS

NAME Wilson Henry (Dt) REGT. NO. 552-551 UNIT 4th Bn H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category H
	TRAINING HISTORY SHEET (M.F.W. 113)					
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)		M1			DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob'n
1	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.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
	Misc					30-6.
1	Cas card			27039		17-6
1	10.122					9-6
						1

W. 2589
100M-11-18
1772-39-1377

DIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS

Number 5-5-235-1 Rank Pte- L/Cpl.

Surname WILSON

Christian Name Henry

Unit 27 Bn. Can Inf Theatre of War France

Date of Service 27-9-16

Remarks

Latest Address ~~5-16 South Railway St. Medicine Hat Alta~~

Roll No. Page 3599 17th St. Macleod. Alta

MAY 2 1921

NAME REGT. No.

RANK AND UNIT

NEXT OF KIN

CABLE		NATURE OF CASUALTY
NO.	DATE	

Pte. Lemp.

S. 19450

M. F. W. 42—100M.—8-18.
H.Q. 1772 39-893.

FORM R. 149.
7106—250m—7/2/17.

Name **WILSON Henry** *Rank* **Pte.** *Reg. No.* **552351**

Unit **27th. Battalion**

Next of Kin **Canada**

Date 1917	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
24-4	Reported From Base	Wounded	A519/M4533/17-5			
25-4	Rejoined Unit	do	a536.			

Date		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List

M" 10 CARD NO.

SURNAME. Kilson.

CHRISTIAN NAMES Henry.

REGL. NO. 53-2351 RANK Pte.

UNIT 13th. C. M. R.

FORMER CORPS Nil.

SOS. Ord. 26-5-19 10 FOLL.
DO. 150 of 30-5-19 " 1000

NEXT OF KIN.

NAMES IN FULL Kilson. Thomas.

RELATIONSHIP TO SOLDIER Father.

ADDRESS South. Railway St.
Medicine Hat, Alta.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada. Hamilton, Ont. DATE Feb. 10th. 1886.

PLACE OF ATTESTATION Macleod. Alta. DATE Feb. 8th. 1915.

R/C. 22-5-19 330/42 Pte.

L. L. 94504. M. & D. 6512.

M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Engineer. RELIGION Wesleyan.

DESCRIPTION.

APPARENT AGE 29. YEARS 0. MONTHS

HEIGHT 5. FEET 5 1/2. INCHES

CHEST MEASUREMENT 37. INCHES EXPANSION 2 1/2. INCHES

COMPLEXION Fair. EYES Gray. HAIR Brown.

DISTINGUISHING MARKS Nil.

MEDICAL EXAMINATION. PLACE Macleod Alta. DATE Febr 8th 1915.

No 13251 Rank Cle Name Wilson Henry
73635-1 Jan. Paylist

T.O.S. 9/2/15 Unit 13th C. M. R.
D.O.1-9/2/15

M.D./3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Feb 8	1915 Feb 28	L		
Mar.		L		
Apr.				
May		L		
June.		L		
July.		L		
Aug.		O.S.	Harvesters pass 20-8-15 to 20-9-15	Aug. Paylist
Sept.		L		
Oct.		L		
Nov.		L		
Dec		L		
1916 Jan.	1916	L		
Feb.		L		
Mar.		L		

(over)

1916 apr.	1916 may	✓ ✓		

REGT'L. NO. 552351

NAME Wilson Henry

H. Q. FILE NO. 649

RANK AND CORPS Pte 27th Bn Form 13th C.M.R.

FOLLOWS NO.

FOLLOWS

CABLE NO.	CABLE DATE	C.	NATURE OF CASUALTY
MH563	15-5-17		Rep. wounded April 10th 1917 returned to regimental duty April 24th 1917

L. L. 18950—M. & D. 7789

M. F. W. 42—30M.—4-17.
H. Q. 1772-39-893.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
A519	Rep. from Base wd.	24-4-17	Not stated.
A536	Rejoined unit	25-4-17	wounded

FORM D.M.S. 1200.
8137—50m—28/2/17.

Surname	Christian Name or Names	Reg. No.
Wilson	H.	552351

Rank Pte | Unit 27th Bn | Co. | Troop | Batty.

Hospital | Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1)

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION | Date

C.L.16-5-17 A519 R.F.B. Wd. 24-4-17

REMARKS

– 5.6.17. a/s 536 Rej Unit 28.4.17. R

A.M.D. 2 DEPT.

Boh. of D.G.M.S. O.M.F.C. London.

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

WAR SERVICE BADGE
CLASS "A" No 189340

THIS IS TO CERTIFY that No. 552351 (Rank) Private

Name (in full) WILSON HENRY enlisted in

the 13th M. R.

CANADIAN EXPEDITIONARY FORCE at Macleod Alta. on the 8th

day of February 1915

HE served in 27th Battalion France

and is now discharged from the service by reason of Demobilization. Demobilization R.O. 1420 (c) ~~Medical Unfitness~~.

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

Age 33 3/12 yrs.

Height 5 ft. 5 1/2 ins

Complexion Fair

Eyes Grey

Hair Brown

H Wilson
Signature of Soldier.

Marks or Scars

Hd.

W Macleod
Issuing Officer.

Rank

Date of Discharge

Dispersal Station "M" MAY 26 1919 Military District No. 13

Date 26. 5. 1919

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.B. 39A.

1.—That discharge certificate must be carried when wearing uniform.

2.—That uniform can be worn only thirty (30) days after discharge or when duly authorized in writing, and

3.—That wearing of uniform renders him liable to usual military discipline, as if on the strength of a unit.

R—122

LTR

Rank

Name WILSON, Henry

Reg'l No. 552351

Unit 13th, O.M.R.

If in perm. Corps, What Unit?

Married or Single Single.

Place and Date of Enlistment MacLeod, 8th, February, 1915,

Place of Birth Hamilton, Ontario, Canada.

Name and Address, Next-of-Kin Thomas Wilson.

South Railway St, Medicine Hatx, Alberta, Canada

Relationship Father.

Assigned Pay Monthly $

Payable to

Relationship

Separation Allowance $

Payable to

Relationship

Discharge, Date and Place

Reason

Character

N/E. R.B. No. 25836

File R.L.

Category CRC.

H. W. & V., Ld.—7165-16.

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. S.S. Olympic. 6th July 1916			
23-7-16	13th. C, M, R,	Transf'd to C, C, D-S'liffe		19.7.16	Pt.2 DO. No/176
21.7.16.	O/C	LSHRR · Taken On Strength. Shorncliffe		19-7-16	PTIIDO. 4[illegible]
20-9-16	"	S off S to 11th Res. Bn	"	17-9-16	Pt. II. O. 101
18.9.16	11th B"	Taken on strength.	"	17.9.16	" 223.
24.9.16	.	S.O.S. to 24th Bn O'seas	"	24.9.16	" 231
3.10.16.	27th Bn.	T. O. S. of 27th Bn	In the Field	28.9.16	Pt II O46
7.3.17	27th B"	Awarded G. C. Badge	Field	8.2.17	Pt II DO 12
16-5-17	— " —	Wounded Reported from Base	— " —	24-4-17	GL. A. 519.
5-6-17	— " —	Rejoined Unit	— " —	25-4-17	GL. A. 536.

A.F.B. 122 REJECTED 10 OCT 1916

Pt II O. 36 d/18-6-17 of 27th Bn

not Stated

Wounded.

552351. Wilson H.

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.	Part II order No.	REMARKS Taken from Official Documents.
18.3.18	27th Batt	appt. L/corpl;	Pte. Field	1.1.18.	20.	
14.1.19	27th/13th	Reverts to Ranks (own request)	— " —	2.12.18	II 2.	
		14 4 19 27BN PROC TO ENGLAND 12 4 19 D0 26				
		15 4 19 M'W CCC TOE FROM 27th WitleY 13 4 19 D0 5				
		13 5 19 M wung S O S to Canada Wit D 13 5 19 D 33				
		To Canada 13.5.19			62/M36	

W.S. B. 6 Class A Dept.

Dlbw.

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.

552351 Unit, Regiment or Corps 13th O.M.R. Bn

Regimental No. ~~3357~~ Rank Pte Name Wilson Henry

C. E. F.

Enlisted (a) 8.2.15 Terms of Service (a) Dur War Service reckons from (a) 8.2.15

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) Engineer

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				
		Embarked Canada, 29.6.16. SS Olympic. Disembarked England 5.7.16.			
		19.7.16. Taken on strength of L.S.H.(RC)RR. by CCD Order No. 39, or 20.7.16.			
		H.E. Whitelaw CAPT. & ADJT. L.S.H. (R.C.) REG.			
		Transferred to the 11th Reserve Battalion H.E. Whitelaw Lt. & ADJT. L.S.H. (R.C.) RES. REG.			
18-9-16	O.C. 11th	Taken on strength 11th Bn Shorncliffe 17-9-16 Pt.II.B.O.223			
27-9-16	O.C. 11th Bn.	Trans. to 27th Batt.	Overseas	27-9-16	Pt. II. B.O. 231

Captain & Adjutant,
11th (Res.) Battalion.

CERTIFIED CORRECT.
28 OCT 1916
CAN. RECORDS, LONDON.

(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				
28/9/16	OC CBD	Arrvd. CBD	France	28/9/16	NR. Pt. 2/0 46. 3/12/16
	do	Left do			do
13/10/16	do 27 En.	Arrvd. Unit	Field.	10/10/16	B 213
9/10/16	CBD	20 CBD TR.	CBD	9/10/16	WR
24/2/17.	27th.	Awarded Good Conduct Badge.	Field.	8/2/17.	B.213 PII.O.12.d/7/3/17.
28/4/17	"	Wounded to Fld Amb		24/4/17	B213. 237. 15/5/17
19/5/17	"	Rejoined Unit		25/4/17	" B6. 31/5/17
9/6/17	"	1/ Badge		8/6/17	" PII O/38. 19/6/17
15/9/17	"	10 dy Leave		9/9/17	" 55 25/9/17
24/11/17	"	NBO 2 Boulogne		20/11/17	" 114 - 24/11/17
2.3.18	"	appt'd L/6pl. vice 622600 L/6pl. Davis (Prom)		1.1.18	" PII 9/20 d/18/3/18
22-6-18	"	to A.P.M. 2 Div.		15-6-18	B213
23-11-18	"	Prom		16-11-18	"
7-12-18	"	Reverts to the ranks at own Request. Certificate of reversion	Field	7-12-18.	B213 P20 ~~confirmed~~ 20/1919
		Embk. Camp. Proceeded to England.		12-4-19	N.R. Pt.2 O.No. d/

LIEUT
FOR LT COL.
A.A.G.

SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103—I.
Part I.

(1)*Substantative rank *Acting rank *[To be entered in pencil to facilitate alteration.]	(2) Regiment or Corps	(3) Regtl. No.
(4) Surname		
(5) Christian Names		
(6) Army Form, number of, Attestation Form or Record of Service paper		
(7) Whether of British or of Alien origin [*vide* A.C.I. 578 of 1918]		
(8) Date of birth as stated on enlistment		
(9) (*a*)		

(10) Enlistment (*b*) (11) Engagement (*c*)

(12) Service reckons from (*date*) (13) Special conditions (if any) of enlistment (*d*)

(14) Any subsequent variations (if any) of conditions of service

Initials and Rank of an Officer.

(Authority) (*date*)

(15) Category	Date	Medical Authority	Initials and Rank of an Officer

(16) (Record of Occupation in Civil life (*vide* Army Order 93 of 1917)

Industrial Group No.
Trade or Calling
Married or Single
Particulars of Trade Test

Occupation Cards despatched on (*date*)
Second Occupation Card despatched on (*date*)

(17) Next of Kin
(18) Demobilizer (*f*) (Place) (Signature of Posting Officer
(19) Pivotal-man (*f*) (Date)
(20) Qualifications (*g*) *or* (21) Corps trade and rate

(22) Extended (23) Re-engaged

(24) Miscellaneous entries:—

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [*vide* A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoeing-smith, &c.

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W1889—P21150 1M 5/18 G.W.P.Co (3490)

552354 Pte Wilson H. Sheet—II

(A) Report: Date.	(A) Report: From whom received	(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
13. 5. 19.			S.O.S. OF O.M.F.C. ON PROCEEDING TO CANADA. for discharge. DO Pt II No 33		13.5.19.	

J. McLennan LIEUT.
FOR OFFICER COMMANDING,
"M" WING, C.C.C.

H. M. T. ⇒ NORTHLAND ⇐
EMB. LIVERPOOL 13-5-19
DISEMB. HALIFAX 23 5' 19

13.5.19 T.O.S. Dispersal Station M Do 150 Part 2

and Dispersed 26.5.19 do " 3

Lieut.
for O. C. 10 District Depot.

Nothing to be written in this margin.

Grp 25

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. 552357 Rank Pte Surname Wilson (Given name in full) Henry

Unit or Corps 24th Batt Birthplace Hamilton Ont

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

1. **GENERAL DESCRIPTION:**

Physique Good Weight 152 lbs. Height 5 ft. 6 1/2 in. Colour of Eyes Blue

Nutrition Good

Pulse 72 Regular

Condition of arteries Soft

Vision Rt. 6/12 Left 6/12

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

Identification marks, scars, or deformities. (Give cause and date of origin.)

1. V. in L. arm.

Opinion as to general health and physical condition Good

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

Nervous System No Genito Urinary System No Cardio-Vascular System No

Special Senses No Integumentary System No Respiratory System No

Disturbance of mentality No Muscular System No Digestive System No

Osseous and Joint System No Any other general condition No

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

Mumps in childhood.

24/4/17 S.W. Face L. cheek.

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

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Witley (Overseas)

Date 18/4/19 Signed [signature] 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 [signature]

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

THIS SECTION FOR USE IN CANADA—

Examined at .....(Canada)

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

[signature]

[OVER]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-39-1142.

Original ORIGINAL

MEDICAL HISTORY SHEET.

Surname 13357 Wilson Christian Name Henry.

Examined { on 8th day of Feb 1915
at Macleod

Approved by
J. W. Hewetson
Rank Major A.M.C M.O.

Birthplace { City or Town Hamilton
County Ontario Canada

Apparent age 29

Trade or occupation Engineer

Height 5 Feet 5½ Inches.

Weight 137 Lbs.

Chest measurement { Minimum 35 inches.
Maximum expansion 2½ inches.

Physical development Good

Small-Pox Marks

Vaccination Marks { Arm Right. Left.
Number

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

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

Date	Result	Vaccinations.
4 Feb 1915	Good	W W Milburn M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
March 1915	Good	W W Milburn M.O.
10/8/15		Chas Anderson M.O.
		M.O.

Enlisted on 8th day of February 1915 at Macleod Alta

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	13th C.M.R. 11TH BATTALION (CANADIANS)	~~257~~ 502357.		8/2/15
Transferred to..	27 Bn.			27/9/16

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.

M. F. B. 313.

50M—9-14.
H. Q. 1772-39-439.

Surname Williams Christian Name Henry

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	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.
R.F.B.		24	4	17	25	4	17	Wounded		Rej. Unit	A519-A536 WH

C.A.D.C. 5009A

"M" WING, C.C.C.

group 3

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.

NAME OF SOLDIER (Block Letters) WILSON H

REGIMENT 27 Bn RANK Pte No 55 23 51

Date of Examination in England 16/4/19 | Date of Examination in France

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 29.
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? No

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

- (a) In Canada
- (b) In England No
- (c) In France

Signature of Dental Officer W W Lonsdale

L- L. Job 310 & D. 6574.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M F W 12.
50m.—4-16.
H. Q. 1772-39-819.

To Whom Thomas Wilson

Address S. Railway, Sx
Medicine Hat
Alta

Rate $15.00

By Whom Assigned Wilson

Regtl. No. 13351 55 2351

Rank Pte

Corps 13 Can B. Dn

JUL 1916

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 7

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—4-16.
1772—39—819.

L. L. Job 310.—Req. 6574.

Sheet No. 2. Thomas. Wilson

Name of Soldier Wilson A. 13351 13 Can R Pte

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July		B10144	15	
Aug.		[illegible]5930	15	
Sept.		[illegible]9305	15	
Oct.		D24048	15	
Nov.		[illegible]29668	15	
Dec.		R33898	15	
Jan.	1917	T42366	15	
Feb.		T48322	15	
March		9.53702	15	
April		U5527	15	15 Bo
May		[illegible]12257	15	
June		[illegible]19965	15	S
July		[illegible]26317	15	
Aug.		[illegible]33425	15	
Sept.		V39673	15	
Oct.		A23047	15	
Nov.		[illegible]54604	15	
Dec.		Y60931	15	
Jan.	1918			$270.00
Feb.				
March				
April				
May				
June				
July				

15.00

JUL 1916

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.				

P. 559.
MARRIED OR SINGLE Single

PLACE OF BIRTH Hamilton ont Can.

NAME AND ADDRESS OF NEXT OF KIN Thos Wilson
Soo R.R. Railway Street Medicine Hat Alta Can.

RELATIONSHIP OF NEXT OF KIN Father

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
appt 4/Cpl. ✓	1-1-18	Bo 20 19/3/18.

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L. No. 55351 RANK 4/Cpl. Pte. NAME Wilson, Henry

IF IN PERMT. CORPS WHAT UNIT UNIT 13th C.M.R. TRANSFERRED TO ~~Dft.~~ C.C.D. DATE JUL 19 1916 AUTHORITY 20176

PERMANENT FORCE ALLOWANCES TRANSFERRED TO 11th Bn DATE 17/9/16 AUTHORITY R.O 101

PLACE OF ATTESTATION Macleod, alta TRANSFERRED TO 27th Batt'n DATE 11.10.16 AUTHORITY B.O 231 27/9/16

DATE OF ATTESTATION 8-2-15 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 15.00 DATE EFFECTIVE

PAYABLE TO Thomas Wilson S. Railroad St. Med Hat RELATIONSHIP Father

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE 1916	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT C.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT C.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT C.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
Jun 30														2 90	2 90															2 90				Balance from Canada.
Checked Jul 19	19	1 00	19		19	10	1 90							20 90															15		15	8 50			Trans. to C.C.D. 19/7/16 B.O. 176
Checked Aug 20	31	43	43		43		4 30							47 30	1494 31/7	1953 15/8							4 86	7 30				15		24 16	28 94			
Checked Sept	16		16		16		1 60							14 60	2133 31/8								4 30					15		22 30	24 24			Trans. 11th Bn. 17/9/16. R.O. 101
	17-30	14		14		14		1 40						15 40																64 46	29 64			
Oct	1-10	10		10		10		1						11	2333 23/9				CCD 2770 15/9				9 73		9 73			15		34 46	16 18			Trans to 27th Bn B.O. 231. 27/9/16
	11-31	21		21		21		2 10						23 10					CBD 7778 Hosp'l					4 36			60			43 46	34 96			
Nov	1-30	30	1	30		30	10	3 -						33 -	1905 28/10								2 62							2 62	65 30		✓	
Dec	1-31	31	1	31		31	10	3 10						34 10	1990 28/11 2074 1/12	2150 6/12							2 62 2 62 11 34 2 61					15 15		46 57	52 83			A. Pay Nov 1916 not chgd. in Pay Lists
	1917.			18 40				18 40																										
Jan	1-31	31	1 10	34 10										34 10	2193 28/12 2223	338 12/1							2 61 2 62	2 62				15		22 85	64 08			
Feb	1-28	28	1 10	30 80										30 80	2443 25/1	2500 6/2							2 62	2 62				15		20 41	74 64			
March	1-31	31	1 10	34 10										34 10	2662 28/2	2696 24/3 2644 19/3							2 61	2 62 2 61				15		22 84	85 90			

552351 Hopl (Lt) Wilson H.

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
Apl 1-30	30	1.10	33	00											33	00			55	54					-1	62		15		14	62	101	28			
May 1-31	31	1.10	34	10											34	10							-262					15		17	62	117	76			
June 1-30	30	1.10	33	-											33	-	179 226	27/s	264	3/6			-267 -HH6		-268			15		24	81	125	95			
July 1-31	31	1.10	34	10											34	10												15		15		140	05			
Aug	31		34	10											34	10												15		15		164	15			
Sept	30		33												33		306 408 341	17-7 17-7 16-6	619 576	30-8 16-8	CCS 1611	23/7	-268 -268 -268		-267	-268		15		33	74	163	41			

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER-RED PAY	SER. ALLCE. ENG.
Bal: fwd		~~163 44~~							163 41		
Oct:	Private Pay 31 days	34 10						15			
				AR 646 18/9/17 24 Bn		103 49					
				" 656 18/9/17 24 Bn		5 35					
		34 10				108 84		15	43 64		
Nov.	" " 30	33 00		" 928 5/10/17 " "		3 57		15			
Dec.	" "	34 10		" 977 19/10/17 "		4 46					
				" 1022 24/11/17 " "		3 57					
1918				C.P.C.		11 60		15	99 17		
Jan		67 10		Can A Pay				15			
	" " 31 "	34 10		AR. 884 21 11/17 28th Bn.		13 38					
				" 622 12 12/17 " 2 Pdr. C.C.R.C.		4 46					
				" 960 21 12/17 24 Bn		3 57			96 86		
		34 10				21 41		15			
Feb.				C. A.P.				15			
	28 days P.P.	30 80		AR. 943 - 6/1/18 - 24 Bn		3 57					
				" 1044 - 25-1-18 ✓		4 46					
				" 1091 - 13-2-18 ✓		3 57			101 06		
		30 80				11 60		15			

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER-RED PAY	SER. ALLCE. ENG.
									101 06		
Mar.	Hopl. R. Bn. Pay in Part Hopl. Bn. from 1-1-18 - 28-2-18	3565	Cap.					15			
		295		AR 1108 24/2/18 27 Bn		5 35					
				AR 1112 9/2/18 27 "		H H6					
				AR 1248 23/2/18 " "		3 57			111 28		
		3860				13 38		15			

2nd

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY * ENGLAND OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- ~~1/1~~	EFFECTIVE DATE:-
AMOUNT:- 15.00	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.

Thomas Wilson
S. Railroad St Med Hat
Father Alta.

Stopped Effec 1.5'.19

358
NAME:- WILSON Henry
NUMBER:- 552351 361

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
B.O. 20. 18/1/18	1-1-18	Capl.
D.O. 2 14/1/19. 27Bn	2/12/18	Reverts to Ranks at own request.

UNIT AND TRANSFERS

ORIGINAL UNIT:- 13th CMR 2Ft CCS
DATE ACCOUNT FIRST OPENED:- 1-7-16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			27th Bn

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
1/11	137	~~~	3 73			Ledger Cr Bal	64 89
18/11	~~710~~ 515	Mining	6 27			LDG Dr Bal	11 11
			10 00				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
B.O. 20. 18/1/18. 27 Bn	1 05 - 10			✓
	19			

PARTICULARS OF RENDERING NON-EFFECTIVE:- 30.4.19 Dis to Canada E7769 Pte 4/19 Ft Shoal 1100

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mar	Bal. Fd								111 28	2 25	
Apr	Capl 4 M.	34 50		Cas.				15-			
				A.R. 21. 12/4/18. 27 Bn.	357				127 21	2 25	
		34 50			357			15			
May	Capl	35 65		Cas.				15			
				A.R. 91 5/5/18 27 Bn	803						
				A.R. 140. 25/5/18 "	446				135 83 37 X		
		35 65			1249			15			
June	Capl. P	34 50		Cas.				15			
				A.R 193. 11-6-18 27 Bn	357						
				" 670 25-6-18 27 B.C.	535				114595		
		34 50			892			15			
July	Capl P.	35 65		A.P.				15			
				A.R 873 12-7-18 "	446						
				" 947 25-7-18 "	357				158 57	3 25	
		35 65			803			15			
Aug	Capl. P.	35 65		A.P.				15			
				A.R 1204 2nd Cdn. Div. Sig Co. 24/8/18	714				172 08	3 25	
		35 65			714			15			
Sep.	—	34 50		A.P.				15			
				" 1361 17-9-18 27 Bn	357				188 61		
		34 50			357			15			
Oct	.	35 65		C.A.O				15			
				1755 26 Div Sig Co 8/10	746						
				1295 Det. 25/10	933						
				1000 Details 26/10	4664						
				1324 " 28/10	3731						
				3024 Trafalgar Hosp & Div. 1/11	3731				~~7061~~		
		35 65			13805			15			

338

NUMBER 552351 RANK Pte. NAME WILSON H.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1918	Forward	35 65		Forward	138 05			15			
				AR 1701 30/10/18 C. Details Paris	27 99						
		35 65			166 04			15	42 62		
Nov	2/Pte Pay	34 50		AR. 1349 3/11/18 C. Details Paris	25 19						
				Cap				15			
				AR. 3514 27 Bn 28.11.18	14 93						
				" 3860 16/12/18 27 Bn.	6 49						
Dec	"	35 65		Cap.	46 61			15			
1919 Jan	"	35 65		"				15			
		105 80			46 61			45	56 81		
				Reverts to Ranks 2/12/18.							
				Overpaid 61 days @ 5		3 05					
Feb	P.P.S	30 80		AR. 4921 21/1/19 27 Bn.	3 93						
Mch	" "	34 10		" 4405 14/1/19 "	5 03						
				" 5227 9/2/19 "	3 93						
				" 5701 25.2.19. "	3 73						
				" 6070 5.3.19 "	18 25						
				Cap. Deb Mch.				30			
				AR 6421. 11.3.19. "	3 65						
				" 7038 21.3.19 "	3 65				116 89		
		64 90			111 77	3 05		30	33		
									79 89		
Apr	P.P.	33		Cap Apr				15	86 79		
				AR 737 3.4.19 "	3 65						
				" 515 16.4.19 address	63 07						
				" 2048. 5.5.19 M. wing	4 87				6 90		
		33.			71 79			15.			
				Sailed for Canada 13.5.19							
				S.L.L. M.Q.D.							

64 89
16
11.11
RPG.

WAR SERVICE BADGE
CLASS "A" No. 189340

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

D. A. G. M
D. G. 21

M

1. No. 552351.

2 Rank. Private

3. Name. WILSON HENRY.

4. Unit. 79th Battalion.

5 Date of Discharge 26. 5. 19. Place ~~Medicine Hat Alta~~ Winnipeg

6 Reason for Discharge Demobilization

H

7. Authority. DO 150

8. Proposed Residence after Discharge 516 South Railway St. Medicine Hat. Alta.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W.?

H Wilson
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Dispersal Station No. 1 Military District No. 13 MAY 26 1919

Place H. M. T. NORTHLAND

Date L.M.B. LIVERPOOL 13-5-19

L.M.EMB. HALIFAX 23 5 19

Signature for (O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

AS
14-4-53

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

1. Triplicate Attestation Paper (M.F.W. 23). or
   Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122.)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
   (Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing } Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851). Dup.
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group B.

Checked by No.

Date 12 MAY 1919

AUDITOR | PAYMASTER

M. OR S. W.1129

NORTHLAND

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

REGT. No. 552351 RANK Pte. NAME (IN FULL) Wilson. H (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE

TO WHOM PAID No — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 13th C.M.R. — IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO Dis Stn M — DATE MAY 13 1919 — AUTHORITY D, O 150

DATE OF ATTESTATION 8-2-15. — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 15.00 — DATE EFFECTIVE

PAYABLE TO D. Wilson — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Redwood St. P.O. Medicine Hat Alta

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE M.D. 10 — DATE MAY 26 1919 — REASON D — AUTHORITY D, O, 150 — IF ENTITLED TO POST DISCHARGE PAY

26

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.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																													11	11	11	11	11	11	Dr. BAL. ENG. L.P.C.
1/5-2/6	33	1.10	36	30	35 00 / 70 00				141	30					266	11	487		487				15	00					130	19					Clothing Allce. 1st payment W.S.G.
																																	Advances - Boat - Train
																																	A.F. Engd. [illegible] to May
	60 Dys. D.A.						War Service Gratuity																60 D.S. D.A.										Soldier dependent		1st Payment W.S.G. as above
193 days @ minimum			420	00					420	00													70	00									350 00 Mid		
																											7	70					34	30	Bx 7.70 @ 1/10 97/5-2/6 @ 1.10
June 16																	766331		70														27	30	70 2nd Payt. W.S.G.
July 16																	791202		70														20	30	70 3rd - -
							Aug. 26.										1792519		70														13	30	70 4th - -
							Sep. 26.										1845401		70														6	30	70 5th - -
							Oct. 26.										1890865		62	30													2		Final - -
			420	-															412	30					7	70			420						

a/c closed

AUDITED
OCT 22 1919
Audit Clerk
M.B. 18

200M-3-19.—L. ... 58788-H. & D. 9985.
M. F. W. 2496.
1772-39-1390.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

July - 16

RATE OF SEPARATION ALLOWANCE

W 7552

RATE OF ASSIGNMENT

15·			

PARTICULARS OF SEPARATION ALLOWANCE

No. 13351

Rank Pte Promoted Reverted Discharge

Soldier's Name H. Wilson

Battalion 13 C.M.R. ~~Can. Mk.~~ B Co.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Thomas Wilson

Address S. Railway St.

Change of Address Medicine Hat Alta

1

2

3

4

019485-H-295·

Date 1917	Cheque No.	Amount S/A	Amount A/P ✓	Total		REMARKS
Dec 31	—	✓	270	270		
Jan 18	169959		15	15		
Feb 18.	P 93289	✓	15	7 15·	R.C.	
Mar	X 95539		15	15	✓	
Apr	X 7783		15	15	✓	
May	X 17837		15	15	✓	
June	T 26594		15	15	✓	
July	B 26747		15	15	✓	
Aug	V 40954		15	15	✓	
Sept	W 42172		15	15	✓	
Oct	K 55145		15	15	✓	
Nov	Q 61077		15	15		
Dec	W 67222		15·	15·	✓	
Jan	R 70178		15·	15·	✓	
Feb.	X 75102		15·	15·	✓	
Mar.	O 82168		15·	15·	✓	
Apr.	V 36273		15	15	✓	
May	V 54558		15·	11·		
			5·25	5·25		

A/c Closed 31-5-19.

Rec'd per Northland

Date 23/5/19. P.I. 30/5/19.

Clerk Kay.

M.D. #10.

R.W. Roll · 55870 Destroyed.

M. F. W. 128
400m—6-17—177-39-1141
L. L. 22520—M. & D. 7493.

A STE
HAS BEEN
FOR THIS ACCO

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. 7993.