Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers.....2 3

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....1

Compulsory Stoppages.....

Casualty Forms.....1

Proceedings on discharge.....1

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....2

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....1

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....1

M. F. W 67 — 2

M. F. W. 62.
100m.—6-17.
H. Q. 1772—39—935.

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name Brown, John David.

Regt. No. 2250929 Rank Pte

Corps 7th Forestry Draft

41395

Deserter.

20-10-20

H

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H

1.

ORIGINAL

Canadian.

225 09 295

ATTESTATION PAPER.

No.

#7. Forestry Draft.

Folio.

0929

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS.)
1. What is your surname?	BROWN.
1a. What are your Christian names?	John David.
1b. What is your present address?	114 Pearson Ave, Toronto, Canada.
2. In what Town, Township or Parish, and in what Country were you born?	Oshawa, Ont. Canada.
3. What is the name of your next-of kin?	Jane Elizabeth Brown.
4. What is the address of your next-of-kin?	114 Pearson Ave, Toronto, Canada.
4a. What is the relationship of your next-of-kin?	Wife.
5. What is the date of your birth?	July 2nd, 1885.
6. What is your Trade or Calling?	Labourer.
7. Are you married?	Married.
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.
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit?	No.
14. If so, what was the nature of the disability?	
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?	Yes.
16. If so, what was the reason?	Lumbago.

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, John David Brown., 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.

John D Brown (Signature of Recruit)

Date May 21st, 1917. 191 . (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, John David Brown, do make Oath, that I will be faithful and bear true Allegiance to His Majesty **King George the Fifth,** His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

John D Brown (Signature of Recruit)

Date May 21st, 1917. 191 . (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 Toronto, Canada this 21st day of May, 1917. 191 .

(Signature of Justice)

M. F. W. 23.
750 M.—1-17.
H. Q. 1772-39-841.

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

Digitized 2014

Description of John David Brown on Enlistment.

Apparent Age 31 years 10 months.

(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 11¼ ins.

Chest measurement: Girth when fully expanded 39 ins.; Range of expansion 3 ins.

Complexion Dark

Eyes Grey

Hair Brown

Religious denominations:
- Church of England
- Presbyterian Pres.
- Methodist
- 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).

Tattoo, Woman right arm, scar on left shoulder, mole on upper lip

Hearing, O. K. R. V. D. 60 L. V. D. 120, Nose and throat, O. K. slight flat feet.

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 May 21st, 1917. 191 .

Place Toronto, Canada.

Medical Officer.

Toronto Mobilization Centre.

*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:—

DECLARED FIT BY MEDICAL BOARD TORONTO MOBILIZATION CENTRE

A R Macdonald M.O. PRESIDENT

Capt

CERTIFICATE OF OFFICER COMMANDING UNIT.

John David Brown 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.

C. F. Miles Capt (Signature of Officer)

Date May 28 1917.

FORM OF WILL.

2250929

I, John David Brown (Name in full)

Regimental Number 2250929 serving in Forestry Draft, No. 7

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I bequeath all my real estate unto

Mrs Jane Elizabeth Brown
114 Pearson Ave.
Toronto.

Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

Mrs Jane Elizabeth Brown
114 Pearson Ave.
Toronto.

Name and Address of person or persons to receive personal estate* *(See note).*

IMPORTANT NOTE
This must be Signed and Dated by THE SOLDIER HIMSELF.

this 28 day of May A. D. 1917

John David Brown Signature of Soldier.

*N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness J B Clay Lieut.

Address of Witness 109 Warren Rd. Toronto.

Occupation of Witness Soldier

Signature of Second Witness E. T. Wilson Corpl

Address of Witness 860 Yonge Street, Toronto.

Occupation of Witness Soldier

M. F. W. 82
300M-5-16.
1772-39-983.

ORIGINAL 2250929

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.

---

(1) Name of Overseas Unit which Soldier joins Forestry Draft, No. 7

(2) Regimental Number 2250929

(3) Full Name of Soldier Jno. David Brown.

(4) Place of Birth Oshawa, Ont.

(5) Are you married, or not? Yes

(6) If married, state,
(a) Full name of your wife Jane Elizabeth Brown.

(b) Present Postal Address 114 Pearson Ave. Toronto.

(7) Are you a widower? No

(8) Have you any children? No

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes

If so, state name and address J. I. Brown, 114 Pearson Ave. Toronto.

(10) Is your Mother alive? Yes

If so, state name and address Mrs Mary Brown,

114 Pearson Ave. Toronto

(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. F. Miller Capt

Officer Commanding.

Date 28 May 1917

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

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

Regimental No. 2259929 Rank Private Name Brown, J.D.

Corps Depot Forestry & Construction Units. who was* Struck off

On 23-8-17 191..., to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-8-17 191..., to 23-8-17 191..., the inclusive date of transfer or discharge.

Dr.	$	c	Cr.	$	c
Bal. Dr. from prev. month			Bal. Cr. from prev. month	18	.
Advances by Cheques } No.			Regt'l Pay 23 days at $ 1 c	23	.
Advances by Cheques } No.			Field Allow. 23 days at $ c 10	2	.30
Assigned Pay No.			Other Allowances*		
Other Charges* Mulct pay	35	.20	Other Credits*		
Payment on transfer or discharge No.		10			
Balance Cr. ~~(to be paid by the new unit)~~	8	.90	Bal. Dr. (to be deducted by new unit)		
Total	43	.30	Total	43	.30

*Give Particulars.

A monthly stoppage of $.....(†) has .....(‡) been paid on account of Assigned Pay for the month of.....191.... to (Assignee).....

(Address).....

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

On Transfer of an Officer.

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

REMARKS:—

State (1) date of enlistment 19-5-17

(2) if married and if a Separation Allowance Card has been submitted

(3) cause of discharge and authority Illegally absent. D.O.167

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

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

Date August 28th, 1917

Place Camp Borden, Ont.

Arthur J. Rose Capt.
Paymaster

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

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

M. F. W. 44.

150M.—4-17.
H. Q. 1772-39-903.

Discharged 2-2-18 DD

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 180 and 141, Financial Instructions, 2571Se, C.E.F., 1916).

Regimental No. ..... Rank ..... Name .....

Corps .....

On ..... 191 .. to .....

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from ..... 191 .. to ..... 191 .. the inclusive date of transfer or discharge.

Dr.	$	c	Cr.	$	c
Bal. Dr. from prev. month			Bal. Cr. from prev. month		
Advances by Cheques No.			Reg't'l Pay ..... days at $ c		
Advances by Cheques No.			Field Allow. ..... days at $ c		
Assigned Pay No.			Other Allowances*		
Other Charges*			Other Credits*		
Payment on transfer or discharge No.					
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total			Total		

*Give Particulars.

A monthly stoppage of $ ..... (†) has ..... (‡) been paid on account of Assigned Pay for the month of ..... 191 .. to (Assignee) .....

(Address) .....

.....

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

On Transfer of an Officer.

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

REMARKS:—

State (1) date of enlistment .....

(2) if married and if a Separation Allowance Card has been submitted .....

(3) cause of discharge and authority .....

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

.....

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

Date .....

Place .....

Paymaster

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

M. P. W. 44.

16m.—4-17.
H. Q. 1172-39-903.

ORIGINAL

225929

MEDICAL HISTORY SHEET

Surname Brown *Christian Name* John David

Examined { on 21st day of May, 1917 191 / at Toronto, Canada.

Birthplace { City or Town Oshawa, Ont / County Canada.

Apparent age 31 yrs 10 mos.

Trade or occupation Labourer

Height 5 feet 11¾ Inches

Weight 174¼ lbs.

Chest measurement { Minimum 36 inches / Maximum expansion 39 inches

Physical development Good

Small-pox Marks nil

Vaccination Marks { Arm Right Left / Number nil

When Vaccinated last nil

(*a*) Marks indicating congential peculiarities or previous disease

Very slight flat feet.

(*b*) Slight defects but not sufficient to cause rejection

Hearing, O. K. R. V. D. 60
L. V. D. 120. Nose and throat
O. K.

Approved by

Rank

Toronto Mobilization Centre. M.O.

Date	Fit or Unfit	Examined for Re-Engagement	
		DECLARED FIT BY MEDICAL BOARD TORONTO MOBILIZATION CENTRE	M.O.
			M.O.
		A T Macdonald M.O. PRESIDENT	M.O.
		Capt	M.O.
			M.O.
			M.O.
			M.O.

Date	Result	Vaccinations	
			M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
6/7/17		John Blayney	M.O.
14/7/17			M.O.
20/7/17			M.O.

Enlisted on 21st *day of* May, 1917 *191* *at* Toronto, Canada.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	#7 Forestry Draft	225929		
Transferred to				

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 Servcie, on the man becoming non-effective; the date and cause being stated on next page.

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

Surname Brown Christian Name John David

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				

L. L. Job 4503.—M. & D. 6332.

D/E. 19-5-17. 33 41

MILITIA AND DEFENCE

M. F. W. 11.
50m.—6-16.
H. Q. 1774-39-818.

SEPARATION ALLOWANCE

Name Jane E. Brown

Address 114 Pearson Ave
Toronto
Ont

Relation to Soldier wife, child or mother } Wife

Name of Soldier Brown John David

Regtl. No. 2250929

Rank Pte

Corps Depot Forestry Units

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				

ACCOUNT CONSOLI

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-920.

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

Casualty Form—Active Service.

2250929

Unit, Regiment or Corps Forestry Draftm, No. 7 Foresty & Rly. Cons. Depot M.D.2.

Regimental No. ..... Rank Pte Name Brown, Jno. David.

Enlisted (a) 21 May '17 Terms of Service (a) Duration of war & six mos after Service reckons from (a) 28 May 1917

Date of promotion to present rank ..... Date of appointment to lance rank ..... Numerical position on roll of N. C. Os. .....

Extended ..... Re-engaged ..... Qualification (b) Labourer

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
23-8-17	Forest. Draft	Des Tel Abs. by C. of I.	Camp Borden	23-7-17	Pt. II D.O. 167.
13-9-21	R'ly Const. + Forestry Depot	Pt. II O. # 167 d/23-8-17, amended to read:- Illeg. absent from 23-7-17, by C. of I. held 23-8-17, is S.O.S. as Deserter w/e.	Issued at Ottawa	13-8-17	after Order # 2.

D. Guthrie
Capt. for Dy. S

(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				

D/E 19-5-17

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

M. F. W. 11a.
50m.-6-16.
1772—39—818.

Sheet No. 2. Jane E. Brown Hyp

PAYMENTS.

Name of Soldier Brown J. D.

Pte 2250929 Dep. Fty. Units

L. L. Job 4503.—Req. 6832.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June		B11086	28	28 R
July		O10987	20	48.00 M13697 Can.
Aug.		~~M13697~~	~~20~~	M awl 23/7/17 DBwl #2 4/8/17.
Sept.			20	Bo pay not. Emd 15/8/17
Oct.				
Nov.				
Dec.				
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.				

SURNAME. Brown

CARD NO. 4

CHRISTIAN NAMES John David

S.O.S. Des. 23/7/17 2

REGL. No. 2250429 RANK Pte.

UNIT Forestry Coy. (M.D.2)

FORMER CORPS Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Brown Mrs. Jane Elizabeth

RELATIONSHIP TO SOLDIER Wife.

ADDRESS 114 Pearson Ave. Toronto Ont.

COUNTRY OF BIRTH Canada Oshawa Ont. DATE July 2nd 1886

PLACE OF ATTESTATION Toronto Ont. DATE May 21st 1917

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

L.D.

MARRIED Yes SINGLE WIDOWER

TRADE OR CALLING Labourer RELIGION Presbyterian

DESCRIPTION.

APPARENT AGE 31 YEARS 10 MONTHS

HEIGHT 5 FEET 11 3/4 INCHES

CHEST MEASUREMENT 34 INCHES EXPANSION 3 INCHES

COMPLEXION Dark EYES Grey HAIR Brown.

DISTINGUISHING MARKS Tattoo woman right arm. Scar on left shoulder. Mole on upper lip.

MEDICAL EXAMINATION. PLACE Toronto Ont. DATE May 21st 1917

Present Address 114 Pearson Ave. Toronto Ont.

Date of Enlistment

19. 5-'17

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

20			

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No. 225-0929

Rank Trooper Promoted Reverted Discharge

Soldier's Name John David Brown

Battalion Depot Forestry Units

Beneficiary Mrs Jane E. Brown

Relationship wife

Address 114 Pearson Ave Toronto. Ont-

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
July 31		48		48	soldier not overseas 19 10/17; a/c closed 31 7/17 a.w.l.
					Acct Closed

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

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7693.

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	Attestation Paper,	Militia Form B. 235.
Squadron / Battery / Company } Conduct Sheet,	" B. 263a.	Proceedings on Discharge	" B. 218.
Copies of Convictions, by C. P.	in MS.		
Med. Hist. Sheet,	Militia Form B. 313		
Medical Report for Invalid*	" B. 227.		
Statement of Man's Account on Transfer and Last Pay Certificate,	" D. 877.		

*Only if discharged "Medically unfit."

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 (in the event of such having been prepared.)

N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

This space to be for numbers.

Proceedings on Discharge.

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

No. 2250929.

Rank Private.

Name Brown, John David.

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

Corps (Squadron, Battery or Company) Forestry & Railway Const.Depot. M.D #2

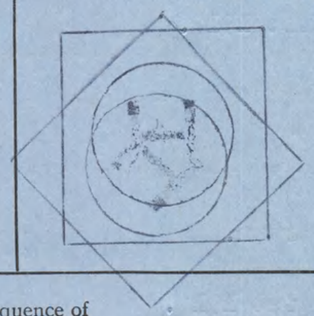
Date of Discharge 23 July 1917.

Place of Discharge Camp Borden.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 31 years 10 months.
Height 5 feet 11¾ inches.
Complexion Dark,
Eyes Grey,
Hair Brown.
Trade Labourer.
Intended place of residence (To be given as fully as practicable.)

Descriptive Marks



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

Being illegally absent.

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.

Good.

N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

Labourer.

M. F. B. 218.

190m.—6-16.
H. Q. 1772-39-113

(OVER)

Disch. Bad

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

Nil.

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

6. Medals and Decorations ..... Nil.

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) Camp Borden. ..... [signature] Major.

(Date) 23rd August 1917. ..... *Commanding* O. C. Forestry Depot.

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.

(Place) Camp Borden. ..... *(Signature of Soldier.)*

(Date) 23rd August 1917. ..... Major *(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 95 days.

Total..-..years 95 days.

11. **Confirmation of Discharge.**

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

(Place) Camp Borden. ..... *(Signature)* [signature] Major.

(Date) 23rd August 1917. .....

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.)

(OVER)