

NAME CAREY

DUNCAN

REGT. NO 624835

UNIT 8th Cav Bn

H. Q. FILE NO.

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505 REFERENCE

NON-EFFECTIVE BY

(S)

ATTESTATION PAPER (M.F.W. 23, 133, or 51)

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. 120)

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.A. 2)

DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)

LAST PAY CERTIFICATE (M.F.W. 44)

PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)

PARTICULARS OF CHARACTER (A.F.W. 3226)

COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

ORCES
RECOR
CANAL

PERIS
ROOM

(M)

06677

DEATH
Category

DISCHARGE

Category

honor

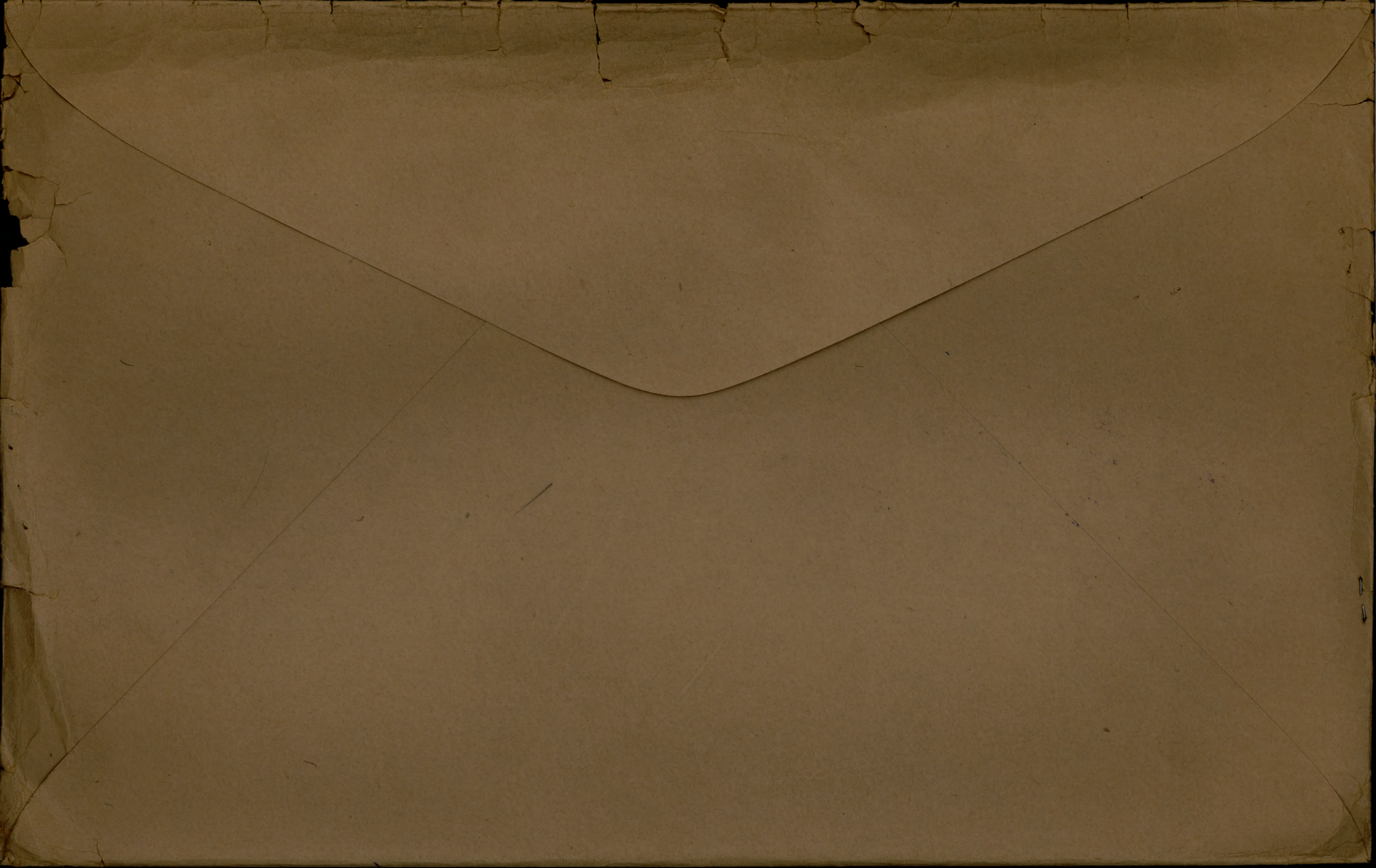
DESERTION

TH

PERIS
RECORDS
CENTRE
ORCES

Box
403406

3
91 - 23
16 - 23
3 - 23
3



ATTESTATION PAPER.

No. 624835

Folio. 26

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... Carey
- 1a. What are your Christian names?..... Duncan
- 1b. What is your present address?..... Islay Alberta
- 2. In what Town, Township or Parish, and in what Country were you born?..... Alexandria, A. Glengary Ontario
- 3. What is the name of your next-of-kin?..... Mrs. Annie Carey
- 4. What is the address of your next-of-kin?..... Glen Robertson, Glengary Ontario
- 4a. What is the relationship of your next-of-kin?..... Mother CANADA.
- 5. What is the date of your birth?..... 13 July 1890
- 6. What is your Trade or Calling?..... Farmer
- 7. Are you married?..... No
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... Yes
- 9. Do you now belong to the Active Militia?..... No
- 10. Have you ever served in any Military Force?..... No
- 11. Do you understand the nature and terms of your engagement?..... Yes
- 12. Are you willing to be attested to serve in the } CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Duncan Carey, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the Canadian Over-Seas Expeditionary Force, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Date 17 February 1916 Duncan Carey (Signature of Recruit)
C. Howson (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

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

Date 15 February 1916 Duncan Carey (Signature of Recruit)
C. Howson (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 Islay this 15th day of February 1916
(Islay) Sydney Geomay (Signature of Justice)

Description of Duncan Carey on Enlistment.

Apparent Age... 25 years 7 months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Weight... 135 lbs

Height..... 5 ft. 6 1/2 ins.

Chest measurement. { Girth when fully expanded..... 34 ins.
 Range of expansion.... 3 1/2 ins.

Complexion Medium

Eyes Blue

Hair Brown

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

None

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 15 February 1916.

Place Islay Alberta

C. Howson
 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.

Duncan Carey.....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.

Date Feb. 15th 1916.

J. H. Smith (Signature of Officer)

151ST OVERSEAS BATT., C.E.F.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 624835 (Rank) Lance/Cpl.

Name (in full) CAREY, Duncan. enlisted in

the 15th Battalion.

CANADIAN EXPEDITIONARY FORCE at Islay Alta. on the 15th

day of February 1917,

HE served in France, with 16th Battalion.

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

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

Age 24 years.

Marks or Scars

Height 5' 6 1/2"

Scar on Shoulder

Complexion Medium.

Eyes Blue.

Hair Brown.

D. Carey
Signature of Soldier

J. Howland
Issuing Officer

Date of Discharge

Major

O. C., Dispersal Station "S"



Rank

Date MAY 14 1919 19

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.

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. 624835 Rank L/eppl Surname Carey
 (Given name in full)
Duncan
 Unit or Corps 16th Bu Birthplace Alexandria, Ill.

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

I. GENERAL DESCRIPTION:

Physique Good Weight 145 lbs. Height 5' 6 1/2" Colour of Eyes Blue
 Nutrition Good
 Pulse normal
 Condition of arteries soft
 Vision Rt. 18/8 Left 18/18
 Hearing (conversational voice) Rt. 15 ft.
 Left 15 ft.

Identification marks, scars, or deformities.
 (Give cause and date of origin).
Large broad scar on rt. shoulder. + two small scars left shoulder over scapula.

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 Yes 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.

Oct. 1- 1918 G. S. W. shoulder flesh (severe)
gutter wound across body of rt. scapula
also causing two smaller wds over left scapula
No injury to the scapula - No nerve injury.
Scars are well healed about 6" long and 2" wide.
The wound causes no disability. Has full
movement at shoulder joint and the right
arm is as strong as the left. Fit for Col A.

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Meusepsom.....(Overseas)

Date 21-2-19.....

Signed R. D. Lakey Capt......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 H. Carey.....

(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 a Medical Board.)

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

[OVER]

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

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

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

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

*Mr John Carley
Glen Robertson Ontario*

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

Are you her sole support, or not?..... *No*

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

(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.

Date..... *AUG 8 1916*

[Signature]
Officer Commanding

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..... *157 Overseas Batta C.E.F.*

(2) Regimental Number..... *624835*

(3) Full Name of Soldier..... *Duncan Carly*

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

(5) Are you married, or not?..... *No*

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

 (b) Present Postal Address..... _____

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

(8) Have you any children?..... _____
 If so, give number of boys and girls..... _____
 Also their names and ages..... _____

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

C-1881

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

- 1. Christian names *Duncan* 2. Surname *Carey*
- 3. Rank *L/C* 4. Original Unit *15th Batt* 5. Reg. No. *624835*
- 6. Address, in full, to which future payments of gratuity are to be forwarded
*Merchant's Bank
Calgary Alta.*
- 7. Date of enlistment in the C.E.F. *15-2-16* ✓
- 8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *None*
- 9. Relationship of such dependent *Not applicable*
- 10. Address, in full, of such dependent *Not applicable*
- 11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *Not applicable*

12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—

13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States?

14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service.

[This section is crossed out with a large X]

- 15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served.
*Beys & 1 mo total
in Canada 2 mo with 15th
" England 6 " " 1st
" France 23 " " 16th*
- 16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department *ND*
- 17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? *No*

14. 6. 19 *Mauritania*

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units. *No*

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid. *No*

20. Have you been issued with a War Service Badge? If so what class? *No*

21. Have you, during the present war, served in the Imperial Forces? *No*

22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled. *No*

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *No*

(b) If so, was such reversion in consequence of misconduct or inefficiency? *Not applicable*

24. Are you now serving in the C.E.F.? *Yes* If not, give:—(a) Date of discharge *MAY 14 1919* (b) Reason for discharge *DEMobilIZATION*

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit. *No*

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit in which you served at the front, and dates of such service with that unit. *No*

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? *No*

(b) If so, are you in receipt of full pay and allowances from that Department? *No*

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

Signature of Applicant: *P. Carey*
Place of Residence: *Islay Alta*
Declared before me at: *Seaford Sussex*
This *29* day of *March*, 19*19*.

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths under P.C. 2767, dated 11th Nov., 1918.

Wadger L. C.

EXAMINED BY *Stella*
REMARKS
ATTESTED *15/2/19*
DISCHARGED *14/5/19*
PUT ON PAY
INITIALS

POST DISCHARGE PAY.

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

nil *420 00*

Certified Correct.

Edwards-Mayor

District Paymaster.

GENERAL AUDITOR'S DEPT.
AUDITED
JUN 19 1919
DISTRICT

ALM.

1229

ORIGINAL ORIGINAL

MEDICAL HISTORY SHEET.

Surname Carey Christian Name Duncan

Examined { on 15 day of Feb 1916
 at Islay
 Birthplace { City or Town Alexandria
 County Ontario

Approved by Bernard R Mooney
 for Medical & Hall
 Rank Capt & M.O.

Apparent age 25 1/2
 Trade or occupation Farmer
 Height 5 Feet 6 1/2 Inches.
 Weight 145 Lbs.
 Chest measurement { Minimum 34 inches.
 Maximum expansion 37 1/2 inches.
 Physical development Good
 Small-Pox Marks nil

Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.	
<u>5 FEB 1919</u>		<u>[Signature]</u>	M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.

Vaccination Marks { Arm Right. Left.
 Number nil
 When Vaccinated last never.

Date.	Result.	VACCINATIONS.	
<u>6/28/16</u>	<u>good</u>	<u>Bernard Mooney</u>	M.O.
			M.O.
			M.O.

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

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.	
<u>3/9/16</u>	<u>Good</u>	<u>Bernard Mooney</u>	M.O.
<u>6/20/16</u>	<u>"</u>	<u>Bernard Mooney</u>	M.O.
<u>6/30/16</u>	<u>"</u>	<u>Bernard Mooney</u>	M.O.

Enlisted on 15 day of Feb 1916 at Islay.

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>151st O. Battalion</u>	<u>624835</u>		<u>Feb. 15th 1916</u>
Transferred to	<u>6th O. Bn.</u>			<u>13-10-16</u>
	<u>16th O. Bn.</u>			<u>17. 11. 16</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

CANADIAN

Christian Name

Surname

STATION.	Date of Arrival at the Station.	DATES OF						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.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
Berrington War Hosp Shrewsbury		21	10	18	2	1	19	¹⁴ / ₂ Bullet wd of chest with injury to scapula	74	A long T+T wound in both scapula regions. (X) side. damage to scapula. Torn muscle excised + sutured. 13.11-18 Wounds healthy + healing. 3.1.19. Wounds quite healed Transferred to Can Con Hosp Epsom	<i>R. H. Penn</i> Major R.A.M.C.
McEwen Epsom		3	1	19				DO	63	Wound healed may possible give trouble if carried a heavy pack no disability of shoulder fit for D & C A.	<i>Capt. J.A.M.C.</i> No. 1 Division. 7000 5-2-19

5 MAR 1919
10 MAR 1919

Capt. J.A.M.C.

SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103—I.
Part I.

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

Nothing to be written in this margin.

W1889—PP 1150 1M 5/18 G.W.P.Co (3490)

(1)*Substantive rank *Acting rank *[To be entered in pencil to facilitate alteration.] (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)	(2) Regiment or Corps	(3) Regtl. No.
--	-----------------------	----------------

(10) Enlistment (b) (12) Service reckons from (date) (14) Any subsequent variations (if any) } of conditions of service }	(11) Engagement (c) (13) Special conditions (if any) of enlistment (d) (Authority) _____ (date) _____	Initials and Rank of an Officer.
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(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) (19) Pivotal-man (f) (20) Qualifications (g)	(Place) (Date) or (21) Corps trade and rate	(Signature of Posting Officer)
(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, Shoing-smith, &c.

(A) Report		(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
Date.	From whom received					

T.O.S C.C.C. Kinmel Park for
return to Canada. Part 11 Orders
No. 82.
C.C.C. Kinmel Park on embark-
ing for Canada, Part 11 Order
No: 104

Commanding 13 Wing,
Kinmel Park Camp.

A. C. McKenna Lieut.
O i/c DISPATCH OF C.P. D. 13.

TAKEN ON STRENGTH OF NO. 13 DISTRICT DEPOT PART 2 ORDER NO. 139 DATED 3-5-19 AND
DISCHARGED FROM H. M. SERVICE BY NO. 13 DISTRICT DEPOT PART 2 ORDER NO. 139 DATED 19-5-19
AUTH. RD 1420.

Lovmiller Major
Lieut. Col.
Officer Commanding No. 13 District Depot

Nothing to be written in this margin.

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				
25-8-17	o.c.b.n.	Joined Unit	UK	238-17	B 273-481
15 DEC 1917		GRANTED 14 DAYS LEAVE		9-12-17	Pt. 11 No 130d/1/.....
29 DEC 1917		RETURNED FROM LEAVE		25-12-17	B 273
1-2-18	17a	K.O.	17a	1-2-18	a36-5882
2-2-18	267a	K.O.	267a	2-2-18	51007 wrote 18th
2-2-18	o.c.b.n.	add. 3rd ass. Tunneling Coy.	267a	2-2-18	B 273
2-2-18	1c7a	K.O.	267a	2-2-18	a36-51629
21-2-18	267a	K.O.	Sett	20-2-18	B 4142
23-2-18	o.c.b.n.	Wives		2-2-18	B 273
23-2-18	o.c.b.n.	Rejoined Unit		20-2-18	B 273
25-4-18	o.c.b.n.	sentenced to 14 days for (1) Drunkenness (2) Being on enclosed premises		20-4-18	B 2069
20-8-18	o.c.b.n.	appd. of Lt. with pay.		28-7-18	K 918/10724
20-8-18		Confirmed in rank of Lt.		11-8-18	Pt. 11 O. 87/1915
2-10-18	18th	W. Beach	18th	2-10-18	K 7455
10-10-18	1CC	W.	19th	3-10-18	L 284
21-10-18	18th	W.	Lang.	21-10-18	L 9094
21-10-18	Prin. Elizabeth	W. (Wounded) posted to M.A.S. Seaford.		21-10-18	W. 3083-6326
				21-10-18	Pt. 11 O. 127/18
I know how for Lt. Col. asg.					
2.11.18	R.R.K.	Taken on strength	Seaford	21.10.18	PE 11 O 306 1015me
14-3-19	18th	T.O.S. from M.A.S.	Seaford	10-3-19	DD 73/11/1918
10/4/19	O.C. 18th	SOS on transfer to Kinmel Park for return to Canada	Wing 13 Seaford	10/4/19	Do 100.

LIEUT.
FOR LT. COL. I/C RECORDS. C.O.M.F.

Lieut

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

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) CAREY D

REGIMENT 18th Res RANK L/Cpl No. 624835

Date of Examination in England 1/4/19 Date of Examination in France _____

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.



PRESENT DENTAL REQUIREMENTS

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

HAS HE EVER REFUSED DENTAL TREATMENT? 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 Yes
- (c) In France

AB Wood
A. D. D. S., M. D. 13

Signature of Dental Officer *F. J. J. J.*
Capt.

A 10

11

1/1/18

1/1/18

1/1/18

1/1/18

1/1/18

1/1/18

Faint text on the right side of the page, possibly bleed-through from the reverse side.

Name

Carry Est. 15-2-16

Date of Embarkation for England

3-10-16

Proceeded to France

12-11-16

Returned to England

21-10-18

wded

Date returned to Canada

3/5/19

P.R. 2855

Ones

checked 12.7.29.

Leas. Sheet

30-4-17 S. W. thigh Rt. to duty 16/5/17.

1-2-18 P. U. D to duty 20/2/18.

3-10-18 G. S. W Back To Eng. 21-10-18.

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom *Miss A Carey*
 Address *Esley*
Alta

By Whom Assigned *Carey D.*
 Regtl. No. *624835*
 Rank *pte.*
 Corps *16. Bn.*

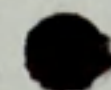
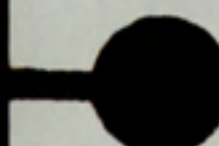
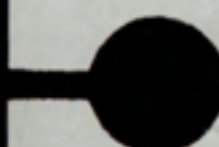
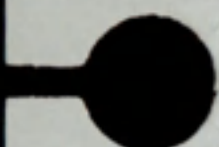
SPECIAL REMITTANCE

Rate \$ *50.00*

PAYMENTS

Sched 440 9.10.17

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.	1917			
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct. <i>Nov</i>		<i>43323</i>	<i>50-</i>	
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



Faint, illegible blue ink markings or bleed-through from the reverse side of the page.

Date of Enlistment 12.2.16.

MILITIA AND DEFENCE

Date of Assignment C.16208 1 Sept. 1918.

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

15.00			
-------	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. 624835
 Rank Pte. Promoted Reverted Discharge
 Soldier's Name
 Battalion 151st Bn.
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name
 Address
 Change of Address
 1 MISS AGNES CAREY,
 ISLAY,
 2 ALTA. 15 15.00
 3 % 624835 PTE DUNCAN CAREY
 FIFTEEN DOLLARS
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total
1918				
Sept.	Y 43550		15	15 ✓
Oct	Q 49393		15	15 ✓
Nov	R 61993		15	15 ✓
Dec	M 65325		15	15 ✓
Jan '19	J 69997		15	15 ✓
FEB	K 80193		15	15 ✓
MAR	L 91727		15	15 ✓
APR	N 9961		15	15 ✓
May	F 6601		15	15 ✓
			<u>135</u>	

7-02763-D-6 REMARKS n. Roll 151

31-5-19 AUDITED.
 A/c Closed
 Ret'd per Mauritania
 Date 25-1-19 M. F. W. 183
 Clerk Mrs. 103126

AUTHORITY 2m. 8.7.18.
 FOR m. Holleran
 NEW ACCT. 18.9.18

82966
Bab.

1270
53
66
57
123

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

A

04/10/40 ED

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.
40/M. 2-17-1772 39-1141
L. L. 2320-M. & D. 7993.

AUTHORITY
FOR
NEW ACCT.

Surname **Carey** Christian Name or Names **D.** Reg. No. **624835**
 Rank **Lt** Unit **16th Bn** Co. **Man** Troop **624835** Batty.
 Hospital **Lt** Date of Admission

Transferred **1 C.G.H. Etaples 30-4-17** Hosp.

6 Comm. Depot Etaples Hosp. **12.5.17**
1. Can. Fld. Amb. Hosp. **1-2-18.**
2 " " " " Hosp. **2-2-18**

Diagnosis **S.W. Rt Thigh**

(1) Later Diagnosis (if changed)

(2) **P.U.O.**
 (3)

Additional Diagnosis: if more than one state present

SW. Back

DISPOSITION

Date

Discharged.

13. 5. 17

Dis REMARKS

20-2-18

Dis

10.3.19

C.L. 8-5-17 A636

21. 5. 17 A. 647

29. 5. 17 A. 648
6. 2. 18 @ 1320

8-2-18 A134

26-2-18 A149-1.
11-10-18 @ 3420

29. 10. 18 B 357

8. 1. 19 B 415-3.

13. 3. 19 B470'

A.M.D. 2 Dept.

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

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

18. Gen. Camiers

3.10.18.

Berrington War Shrewsbury

21.10.18

2.

Epsom Conv.

4.1.19.

3.

4.

5.

6.

7.

REGT'L. No. 624835

H. Q. FILE No. 649

NAME

Carey Duncan

RANK AND CORPS

Plt 16th Bn Form 157th Bn

FOLLOWS

No.

CABLE

NO.

DATE

NATURE OF CASUALTY

FOLLOWS

CABLE NO.	DATE	NATURE OF CASUALTY
H 3684	8-5-17	Adm to 1st Gen Hosp. April 30 th 17. Inj. High.
98-3		Carey Mrs John Robertson Ont.
H 386	4-10-18	Adm 18 Gen H James Cairns Oct 3 rd 18. Inj. Back

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
A-636-2	No. 1. Can Gen - Kestaples	30-4-17.	S.W. R. Thigh Alb.
A 647.	6 Conv. Sep " "	12-5-17	" " "
A 648	" Disc to Details	13-5-17	" " "
A 1327	# 1 Can. Fld. Amb.	1-2-18	P. U. O.
A 134	2 Can. Fld Amb	2-2-18	" " " Man Regt
A 149	Disch. to duty	20-2-18	P. U. O.
A 342	18 Gen H. Cameron	3-10-18	Grew Back
A 357	Burrington Shrewsbury	21-10-18	" " " "
B 415	mil bone Epsom	4-1-19	" " " "
B 470	Discharged	10-2-18	Grew Back

No. 624835 RANK *Pte.*

NAME *Lacey D.*

T. O. S. 15/2/16

UNIT *1st Battalion C.E.F.*

D.O. 417 18/2/16

M. D. *13*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916</i>	<i>1916</i>			
<i>Feb. 15</i>	<i>Feb. 29</i>	<input checked="" type="checkbox"/>		
<i>Mar.</i>		<input checked="" type="checkbox"/>		
<i>April</i>		<input checked="" type="checkbox"/>	<i>Vermilion Section.</i>	<i>April Pay List</i>
<i>May</i>		<input checked="" type="checkbox"/>		
<i>June</i>		<input checked="" type="checkbox"/>		
<i>July</i>		<input checked="" type="checkbox"/>	<i>awh 30-6.16 to 1-7.16 forfeits 2 days pay</i>	<i>Do 156, 158</i>
<i>Aug.</i>		<input checked="" type="checkbox"/>		
<i>Sept.</i>		<input checked="" type="checkbox"/>		
<i>Oct. 1</i>	<i>Oct 12.</i>	<i>n.</i>	<i>Trans. to 9th Bn. Res. 13.12.16.</i>	<i>Do 246. UNIT SAILED</i>

OCT 3 1916



Number.....Rank.....

Surname.....

Christian Name.....

Units.....Theatre of War.....

Date of Service.....

Remarks.....

Latest Address.....
.....

Roll no.....

200m.-6-21.

(This form to be filled in by all ranks on voyage to Canada.)

.....
RANK SURNAME INITIALS UNIT
.....

al address.....
(Street) (City or Town) (Province)

one person to be notified of arrival.....
.....

Station in Military District to which a furlough warrant is required.....
..... Railway.....

d, is your wife on board..... Number of children on board.....

destination.....

(Sgd.).....

Am Number 624835 Rank 2nd Lt

Surname CAPEY

Christian Name Duncan

Units 16th Bn. Can. Inf Theatre of War France

Date of Service 13-11-26

Remarks

Latest Address Islay

Alta

Roll no.

200m. -6-21. *Page 20060*

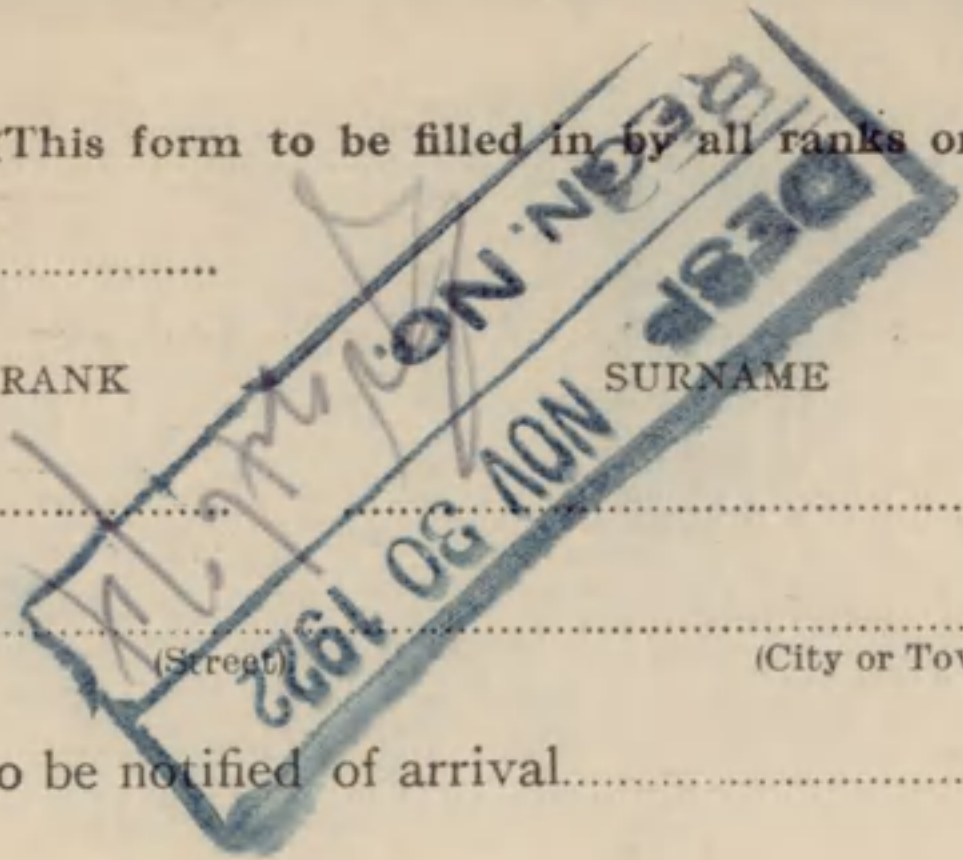
(This form to be filled in by all ranks on voyage to Canada.)

RANK

SURNAME

INITIALS

UNIT



al address.....

(Street)

(City or Town)

(Province)

one person to be notified of arrival.....

Station in Military District to which a furlough warrant is required.....

Railway.....

is your wife on board.....

Number of children on board.....

destination.....

(Sgd.).....

135 CARD NO. ✓
 S.O.S. Dis. 14/5/19
 FOLL 9/5/19
 D.O. 139
 # 134A
 Bin

C
 Surname *Carey*
 Christian Names *M.M. Duncan*
 Regl. No. *624835* Rank *Pte.*
 Unit *151st*
 Former Corps *Nil*

Next of Kin
 Names in Full *Carey, Mrs. John*
 Relationship to Soldier *Mother*
 Address *Glen Robertson, Ont.*

CHANGE OF ADDRESS

Country of Birth *Canada*
 Place of Attestation *Alexandria, Gt. Britain*
Islay, Alta. (Ont.)

DATE *July 13th 1890.*
 DATE *Feb 15th 1916.*

Sailed From Halifax 23.9.16
Res. J. S. Lapland
R/C M. F. W. 22. 250M. 246. H. Q. 1772-39-339.
9/5/19 318 R/C
140 R/C

MARRIED

SINGLE

Yes,

WIDOWER

TRADE OR CALLING

Farmer.

RELIGION

Roman Catholic.

DESCRIPTION.

APPARENT AGE

25

YEARS

7

MONTHS

HEIGHT

5

FEET

6 1/2

INCHES

CHEST MEASUREMENT

34

INCHES

EXPANSION

3 1/2

INCHES

COMPLEXION

Medium.

EYES

Blue.

HAIR

Brown.

DISTINGUISHING MARKS.

Nil.

MEDICAL EXAMINATION.

PLACE

Islay, Alta.

DATE

Feb. 15th, 1916.

Present Address: - Islay, Alta.

Name

CAREY, -

Rank

Duncan, - 1/cpl.

Reg. No.

624835

Unit

16th BATT. -

Next of Kin

Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918.						
1-2	1st C.Y.A.	P.H.O.		13133		13035
2-2	2. C.Y.A.	do.		13134		13103
20-2	Dis. to Duty.	(do.)		13149		14104
3-10	18. G. H. Camiers	Cpl. Back				14-4851
21-10	Berrington	W. H. Shurston		13152, H286		20036
4-1-19	Wib (Edna) Epsom			13157		4340
10-2	Disch'd			13175		2370
20-3-19	W.O.B. Control	Reg. 11 5-19		13178		

Name: Carey, D.

624835: Pte. (R.I.C.)

Unit: 16th. Bu. M.R.

Awarded: M.M.

Auth: R.G. # 31173

no file no 11-2-19
noted
mk

Rank _____ Name **CAREY. Duncan.** Reg'l No. **624835** ✓
 Unit **151st Bn.** If in perm. Corps, }
 What Unit? } Married or Single **Single.** ✓
 Place and Date of Enlistment **Islay. 15th Febr'y 1916.** Place of Birth **Alexandria. Glengary.**
Ont. Canada. ✓
 Name and Address, Next-of-Kin **Mrs Annie Carey.** ✓

Glen Robertson. Glengary. Ontario. Canada ✓ Relationship **Mother** ✓
 Assigned Pay Monthly \$ _____ Payable to _____ Relationship _____
 Separation Allowance \$ _____ Payable to _____ Relationship _____

N/E. R.B. No. **20587**
 File R.L. _____
 Category **O.R. Can**

Discharge, Date and Place Reason Character

H. W. & V., Ltd. - 7165-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
Date.	From whom received.				
C		Arrived in England S.S. California, 13-10-16.			
14.10.16	151 Bn	Trans. To 9 Res Bn.	S'cliffe	13.10.16	Pt 2 246
14.10.16	9th Bn	Taken on strength	"	13.10.16	" 288
12.11.16.	"	S.O.S. on 1/2 to 16th Bn O'Leas.	"	12.11.16	" 317.
16.11.16	16th. BN	Taken on Strength	Field,	13.11.16.	Pt, 2-O, 79.
9.5.17	---	Adm No 1 Com Gen Hosp	---	30.4.17	CL A 636 S.W. R. High St
21.5.17	---	Ins'd No 6 Com Depot	Etaples	12.5.17	CL A 647
22.5.17	---	Discharged to Details		13.5.17	CL A 648
28-8-18	---	applied as L/C. with pay	Pte Field	28-7-18	Pt. O. 87.
28-8-18	---	Confirmed in rank of L/Cpl as L/C		28-8-18	Pt. O. 87.

A.F.B. 103 CHECKED
16 NOV. 1916

624835

Carey, D.

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.				
11-10-18	16 th Bn	Dounded	Field	3-10-18	624342.
		M.M.			
31-10-18	16 th Bn	Inv. w reported to MRD	Lt Field	21-10-18	MRD PI 0.306. PI 0127. 42-11-18
15-3-19	MRW	SOS to 18 Res Bn	Lt Seaford	10-3-19	18 Res PI 74 734/14-3-19
14-4-19	MRW 13	SOS from 18 Res	Lt Rhyll	10-4-19	PI 86 + 18 Res 80/02 14/19
3-5-19	do	S.O.S. on proceeding to Canada	Lt " "	3-5-19	PI 103.

To Canada 3-5-19

53 S. 138.

to telegraph in his name.

AAA

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. 5909a).
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 Statement Q.M.G. Form (D.O.S. 2) and Clothing.
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B. 641).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

War Service Badge
 Class "A" No. 253151

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

19-6 15
 N

1. No.	624835	
2. Rank.	P/Corp.	
3. Name.	CAREY - DUNCAN.	
4. Unit.	18 th Reg. - 16 th Btlw - 151 st Btlw.	
5. Date of Discharge	MAY 14 1919	Place EDMONTON, ALTA.
6. Reason for Discharge	Demobilization	
7. Authority.	Mothe A Re Part II RR-14-220 #159 d/19-5-19	
8. Proposed Residence after Discharge	26 Delay	
9.	<p style="text-align: center;">CERTIFICATE TO BE SIGNED BY SOLDIER.</p> <p>I hereby acknowledge that at the undernoted place and date I received my discharge Certificate M. F. W. 39.</p> <p style="text-align: right;"><i>D. Carey</i> Signature of Soldier.</p>	
10.	<p style="text-align: center;">CONFIRMATION.</p> <p>The discharge of the above named man is hereby confirmed.</p> <p>Place EDMONTON, ALTA. H.M.T. Maurel Date MAY 14 1919 Director of O.C. Dispersal Station <i>J. Howland</i> Signature (O. C. Discharging Unit.)</p>	

Group a
 Checked by No. 28
 Date 14/4/19

* Strike out whichever inapplicable.

ASSIGNED PAY. ENGLAND CANADA.	SEPARATION ALLOWANCE. ENGLAND OR CANADA.	NAME:- CAREY <i>Duncan</i>
EFFECTIVE DATE:- 1.9.18	EFFECTIVE DATE:-	NUMBER:- 624835
AMOUNT:- 15.00	AMOUNT:-	PARTICULARS OF RANK OR APPOINTMENT
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.		AUTHORITY DATE EFFECTIVE RANK OR APPOINTMENT
<i>Miss Agnes Carey Islay Alta. (Sister) Canada. A2M. 8/7/18</i>		<i>B.O. 87.16 Pm 25/3/18 28.7.18 App'd for Dec. Cpl. with pay 11.8.18 Confirmed Dec. Cpl.</i>
<i>Slipped 1/5/19</i>		UNIT AND TRANSFERS
		ORIGINAL UNIT:- <i>151 Bn</i>
		DATE ACCOUNT FIRST OPENED:- <i>1.10.16</i>
		AUTHORITY DATE EFFECTIVE DATE LEDGER SHEET T'S P'D UNIT TRANSFERRED TO
		<i>16 Bn</i>

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
<i>28/9</i>	<i>4464</i>	<i>18 Re</i>	<i>14 60</i>			<i>L.P. Bal</i>	<i>445 79</i>
<i>1/4</i>	<i>8</i>	<i>✓</i>	<i>34 07</i>			<i>ledger</i>	<i>194 46</i>
			<i>48 67</i>				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	<i>1 05</i>	<i>10</i>		

PARTICULARS OF RENDERING NON-EFFECTIVE *Slipped 1/5/19. M.D. 13, AR 3, 18 Re 1/4/19. Operate Food Co. 5.1. 4/4/19*

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
<i>Mar 31</i>	<i>Bal Fwd</i>								<i>295 40</i>	<i>270</i>	
<i>Apr</i>	<i>P.P.</i>	<i>33</i>		<i>AR 66. 16 Pm. 18/4/18</i>	<i>3 57</i>						
		<i>33</i>		<i>✓ 7. ✓ 11/4/18</i>	<i>4 46</i>				<i>320 42</i>	<i>285</i>	
					<i>8 03</i>						
<i>May</i>	<i>P.Pay</i>	<i>34 10</i>		<i>B.O. 42. 3/5/18. Soutward to 14 day F.R. 20.4.18 D.B. 1000000 & Bonus enclosed premium</i>		<i>15 40</i>					
				<i>AR 143. 16 Pm. 8/5/18</i>	<i>4 46</i>						
				<i>✓ 20H ✓ 15/5</i>	<i>3 57</i>					<i>293</i>	
		<i>34 10</i>		<i>✓ 267 ✓ 30.5.18</i>	<i>4 46</i>				<i>326 63</i>	<i>293</i>	
					<i>12 49</i>	<i>15 40</i>					
<i>June</i>	<i>P.Pay</i>	<i>33</i>		<i>AR 332 16 Pm 14.6.18</i>	<i>3 57</i>				<i>356 06</i>		
		<i>33</i>			<i>3 57</i>					<i>308</i>	
<i>July</i>	<i>P.Pay</i>	<i>34 10</i>		<i>✓ 7 ✓ 2.7.18</i>	<i>4 46</i>						
		<i>34 10</i>		<i>✓ 166 ✓ 14.7.18</i>	<i>3 57</i>				<i>382 13</i>	<i>323</i>	
					<i>8 03</i>						
<i>Aug</i>	<i>P.Pay</i>	<i>34 10</i>		<i>✓ 278 ✓ 2.8.18</i>	<i>3 57</i>						
	<i>14c Pay as Dec. Cpl. 25/7/18 to 3/8/18 = 35 days @ 5p</i>	<i>1 75</i>		<i>✓ 367 ✓ 24.8.18</i>	<i>3 57</i>				<i>410 64</i>	<i>338</i>	
		<i>35 85</i>			<i>7 14</i>						
<i>Sept</i>	<i>L/c Pay</i>	<i>34 50</i>		<i>C.A.P.</i>				<i>15</i>			
				<i>AR 570 ✓ 14.9.18</i>	<i>4 46</i>						
		<i>34 50</i>		<i>✓ 441 ✓ 6.9.18</i>	<i>3 57</i>				<i>422 31</i>	<i>338</i>	
					<i>8 03</i>			<i>15</i>			
<i>OCT</i>		<i>35 65</i>		<i>B.O.P.</i>				<i>15</i>	<i>442 96</i>		
				<i>No Mon 47856 16 Bn 30-10 973</i>							
				<i>overstaying pay from 02.10.18 to 23.10.18 28/10/18</i>							
				<i>2 days M.D. DO 29-29.10.18 16.3.11.18</i>					<i>433 23</i>	<i>338</i>	
		<i>35 15</i>			<i>9 73</i>			<i>15</i>			

