No. XI Overseas Field Ambulance

ORIGINAL

ATTESTATION PAPER.

No. 531771

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Crawford
1a. What are your Christian names?	Kenneth Branaman
1b. What is your present address?	Saskatoon, Sask.
2. In what Town, Township or Parish, and in what Country were you born?	Dixon, Neb. U.S.A.
3. What is the name of your next-of kin?	D. S. Crawford
4. What is the address of your next-of-kin?	Humboldt, Sask. Canada
4a. What is the relationship of your next-of-kin?	Father
5. What is the date of your birth?	June 15th, 1893
6. What is your Trade or Calling?	Law Student
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? If so, state particulars of former Service.	No
11. Do you understand the nature and terms of your engagement?	Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?	Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Kenneth Branaman Crawford, 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.

K. B. Crawford (Signature of Recruit)

Date April 6th 1916. W. T. Murray (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Kenneth Branaman Crawford, 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.

K. B. Crawford (Signature of Recruit)

Date April 6th 1916. W. T. Murray (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 Saskatoon, Sask. this Sixth day of April 1916.

J. D. Cummings (Signature of Justice)

Commissioner for Oaths.

My Commission expires Dec. 31st. 1916.

M. F. W. 23.
600M.—2-16.
H. Q. 1772-39-341.

17
24

Description of Kenneth Branaman Crawford on Enlistment.

Apparent Age 22 years 8 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

Height	5 ft. 10½ ins.
Chest measurement. Girth when fully expanded	36 ins.
Chest measurement. Range of expansion	4 ins.
Complexion	Medium
Eyes	Blue
Hair	Dark brown
Religious denominations. Church of England	
Presbyterian	
Methodist	
Baptist or Congregationalist	Yes
Roman Catholic	
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 March 15th 1916.

Place Saskatoon, Sask.

D. A. Cameron
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.

Kenneth Branaman Crawford 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.

H. H. Mahon (Signature of Officer)
MAJOR
No. 11, Overseas Field Ambulance.

Date APR 14 1916 191 .

3-9-19 pp

REGIMENTAL DOCUMENTS

NAME CRAWFORD KENNETH BRANAMAN REGT. NO. Pte. 531771 UNIT C.A.M.C. H. Q. FILE NO.

3

H

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
1	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)		M		43733	Category
	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)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob.
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)					4
2	C.A. 3					7 10
1	Cas Card					7 10
1	Rim					1 12
	Pay card					

H

W. 2539
10[illegible]-11-18
17.2 39-1377

P. Group P. Wing

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. 531771 Rank Pte Surname CRAWFORD
(Given name in full)
Kenneth Branaman

Unit or Corps C.A.M.C. Birthplace Dixon Neb. U.S.A.

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

1. GENERAL DESCRIPTION: Est.

Physique Good Weight 160 lbs. Height 5 ft. 11 1/2 in. Colour of Eyes Blue

Nutrition Good

Pulse 70. 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).

Brown mark to abdomen. Scar to U. Elbow 1918

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 yes 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.

Furuncle 1918. U. Elbow. } no disability

M. 48 / T. 103 } not available.

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

[OVER]

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Willy (Overseas)

Date 17/2/19 Signed R. Burnett 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 a Medical Board.)

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

auth
DAG - 14-1-48
13-6-19.

RW

M.F.W. 129.

[OVER]

ORIGINAL.

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Crawford *Christian Name* Kenneth Branaman

Examined { on 15 day of March 1916 / at Saskatoon, Sask.

Birthplace { City or Town Dixon / County Neb. U.S.A.

Apparent age 22 yrs. 8 mos.

Trade or occupation Law Student

Height 5 Feet 10½ Inches.

Weight 158 Lbs.

Chest measurement { Minimum 32 inches. / Maximum expansion 36 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right. Left. / Number 0 0

When Vaccinated last 8 years old

(*a*) Marks indicating congenital peculiarities or previous disease None

(*b*) Slight defects but not sufficient to cause rejection None

Approved by C Kerr Capt D G Cameron

Rank Captain A.D.M.C. M.O.

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.
May 1916		J Cuncuillan M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
1916 1st May		C Kerr Capt M.O.
11/5/16		W H Secord M.O.
1/8/16	Parn.	J Cuncuillan M.O.

Enlisted on 15th *day of* March 1916 *at* Saskatoon

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	11th Field Amb	531771	Good	1st May 1916
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 Service, on the man becoming non-effective; the date and cause being stated on next page.

M. F. B. 313.

400M.—1-16.
H. Q. 1772-39-439.

Surname Crawford Christian Name Kenneth, Branaman

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.

C.A.D.C. 5009A

P Group P Wing.

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) CRAWFORD Kenneth B.

REGIMENT C a m b RANK Pte No. S31771

Date of Examination in England 17-7-19 Date of Examination in France

PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS 19.
3. CROWNS 29.
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

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

Signature of Dental Officer A. C. Graham Capt

CERTIFIED CORRECT.
15 AUG. 1916
CAN. RECORDS, LONDON.

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

W.S.B. class "A"

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

Casualty Form—Active Service.

Unit, Regiment or Corps No. XI Overseas Field Ambulance

Regimental No. 531771 Rank Pte. Name Kenneth Branaman Crawford

C. E. F.

Enlisted (a) Ap. 6. 1916 Terms of Service (a) Duration of War. Service reckons from (a) Ap 6 1916

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) Student in Law

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.
16/6/16	O.C.	Embarked.	Canada	19/5/16	S.S. "Adriatic"
16/6/16	O.C.	Arrived	England	29/5/16	[illegible]
6/8/16	O.C.	Proceeded for service	Overseas	10/8/16	Capt. & adjt for Lieut.-Col., O.C. 11th Canadian Field Ambulance.

Disembarked at Havre date ~~11/8/16~~ 11/8/16 Landing return No 6269-6270

28-7-17	11th C F Amb	Granted leave to absence to	Paris	28-7-17	B213 Pt II Ord 57 d/7 8/17
11-8-17	" "	Rejoined from leave		8-8-17	B213 Pt II Ord 59 d/21 8/17
28-10-17	" " "	Wd Shell Gas burns Arms & legs		27-10-17	a 36/B250
16-2-18	" " "	Discharged to duty		27-10-17	
		Granted 14 days leave to	U.K	10-2-18	B213 Pt II 8 d/25-2-18
2-3-18	" "	Rejoined from leave		26-2-18	B213
6-4-18	" "	Awarded Good Conduct Badge		6-4-18	B213 Pt II 15 d/16-4-18
27-4-18	" "	S.O.S 11th Cdn Fld Amb on reposting to 7 Cdn Gen Hosp Auth DGMS B/1500/95 d/22-4-18		26-4-18	B213 Pt II 20 d/8 5/18
28-4-18	7 C G Hp.	T.O.S. on posting from 11th C F Amb		27/4/18	B213 Pt II 25 d/8/5/18

(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 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.
16-5-18.	7 C G Hosp.	Tonsillitis. Adm.	Etaples.	16-5-18.	W/F 1859.
24-5-18.	"	— " — Duty.	"	24-5-18.	W/F 3591.
19/7/18.	"	I. C. S. Lt. Arm. Adm.		19/7/18.	W/G 3215.
23/7/18.	"	I. C. S. do. (Dis.)		23/7/18.	W 3034/G 3981.
29/7/18	"	Carbuncle Elbow Lt. Adm.		29-7-18.	W/G 5478.
6-8-18	"	" " " Duty.		6-8-18.	W/G 7202.
15-9-18	"	Granted 8 days leave	Paris	11-9-18	B213 Pt II DO 64 d/21-9-18.
22-9-18	"	RETURNED FROM LEAVE	Field	19-9-18	B213
9-2-19	"	Granted 14 days leave	England	5-2-19	B213 pt II 08 d 1919
16.3.19	"	posted to CAMC Casualty Company on exp of leave (To Attend Khaki University) A G. 3 to 26-2-4 d 28-2-19)	Shorn	19.2.19	B213 Pt 12 1919 KE 39593/3

C R Ailson Capt. CAMC.
Capt. for Lt.-Col., A. A. G.
Canadian Section, G. H. O. 3rd Echelon, B. E. F.

R E Easton Lt
OFFICER i/c RECORDS,
"P" WING C. C. G. WITLEY

S.O.S. O.M.F.C. TO C.E.F.
PT. II ORDER No. 78 DATED 7/8/19

HMT CARONIA SAILING NO 101
SAILED LIVERPOOL 9 8 19

REGINA DISPERSAL AREA "O"
T.O.S. R.O. 1420 D.D.O. 233 Para 3111
T.O.S. R.O. " D.D.O. " Para 3112

R—122

J.M. Rank Name CRAWFORD, Kenneth Branaman. Reg'l No. 531771

Unit 11TH FLD. AMB. If in perm. Corps, What Unit? Married or Single Single

B

Place and Date of Enlistment Saskatoon Apr 6th 1916 Place of Birth Dixon, Nebo. U.S.A.

Name and Address, Next-of-Kin D.S. Crawford

Humboldt, Sask. Can. Relationship Father

Assigned Pay Monthly $ Payable to

Relationship O/R Can

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

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.
C.		Arrived in England	29 MAY 1916		S.S. Adriatic
10 AUG 1916		Embarked for France.		10 AUG 1916	Pt. 11 D. O, 154 A.F. Bros checked 14.8.16
6.11.17	C.L.A.	Adm #11 Can Field Amb	Pte Field	27.10.17	CLA 55 Shell Gas Wd & Legs. Arms
6.11.17	do	Dish to Duty	" do.	27.10.17	—— 55 do.
16.4.18	11th Fld. Amb.	Granted Good Conduct Badge	" do	6.4.18	Pt II D.O. 15
8.5.18	#7 C. Genl Hsp	T.O.S on reposting from #11 C.F. Amb	" do	27.4.18	—— 25 #11 C Fld Amb Pt II D.O. 20 d/ 8/5/18
		To be SOS of Gen Hp & posted to Camb Depot & posted to London University to complete course			authority R.L.G. d/20-2-19
1.3.19	Camb C Coy	T.O.S from 7 C.G.Hp. & shown on leave with pay & allow. to complete course with Khaki University	" S'cliffe	20.2.19	Pt II D.O. 51 T 12.7th C.S.H 29.3.19

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.
10-7-19	CAMC CDH	SOS to "P" Wing. CCC.	Phi. Witley	13-7-19	Pt. II DO 166 / Pt. 66 of 15 7/19.
	CAMC		101-P-91.	9.8.19.	
9.8.19	P wing	SOS to Canada	✓ ✓	8.8.19	— 79

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

WAR SERVICE BADGE.
CLASS "A" No. 240622

THIS IS TO CERTIFY that No. 531771 (Rank) Private

Name (in full) Kenneth Branaman Crawford enlisted in

the 11th Canadian Field Ambulance

CANADIAN EXPEDITIONARY FORCE at Saskatoon on the 6th

day of April 1916.

HE served in France with 11th Field Ambulance

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 26 yrs.

Height 5 ft 11½ ins

Complexion Medium

Eyes Blue

Hair Dark Brown

Marks or Scars Brown mark to abdomen, scar to left elbow 1918

Signature of Soldier.

Date of Discharge

Dispersal Station "O" AUG 23 1919 Military District No. 12

Issuing Officer CAPT.

Rank

Date 19

NB - 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.

ORIGINAL

ORIGINAL

To be made out in duplicate.

H.Q. 54-21-23-53

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

---

(1) Name of Overseas Unit which Soldier joins ..... No. XI Overseas Field Ambulance

(2) Regimental Number 531771

(3) Full Name of Soldier ..... Kenneth Bannaman Crawford

(4) Place of Birth ..... Dixon, Nebraska, U.S.A.

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

(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 .....

M.F.W. 67.

200M.—3-16.
1772 39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes.

If so, state name and address D. S. Crawford, Humboldt, Sask.

(10) Is your Mother alive? Yes

If so, state name and address Mrs. D. S. Crawford, Humboldt, Sask

(11) If your Mother is a widow.....

Are you her sole support, or not?.....

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

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

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

(15) Are you insured? No.

If so, in what Company?.....

Have you made arrangements for payment of your Insurance premium.....

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

MAY 1 1916

Date.....

J. D. McLaren
Officer Commanding.
Lieut. Col.
O. C. No. 11, Overseas Field Ambulance

P.827.
30M-16-8-18.

OVERSEAS MILITARY FORCES OF CANADA

TRAVELLING CLAIMS.

STATEMENT OF ~~ACQUITTANCE ROLLS~~

Series of A.Rs. From 77 To 80 Voucher No.

CREDIT:- Paymaster Captain. G.B. Brown. Unit No 52 District, CFC.

DEBIT:- A/C. No. Francs Dollars Sterling

A.R. Nos.	Francs	Dollars	Sterling	A R Nos.	Francs	Dollars	Sterling
77			1- 2-6	Forward			3 4- 5-6
78			1- 4-0				
79			11-6				
80			7-6				
Totals			3 4- 5-6	Totals			3 4- 5-6

Certified Correct.

Place Carlisle.

Capt & Paymaster.

Date July 8th 1919.

No 52 District, Can.For.Corps. Unit.

For use of P.G. only.	
Checked	Approved

In reply please quote
Minute No._____.

2nd August, 1919.

From: Officer i/c Accounting Branch.

To: Cashier, Pay II.

531771.Pte.Crawford.K.B.

I would advise you that my Transfer Voucher U.776. was passed to the Officer i/c Pay 2 Accounts, crediting the marginally noted soldier with the sum of £3. 7. 10. in the month of July.

This credit was in respect of subsistence allowance for the period 1/7/19 - 11/7/19.

It will therefore be in order for you to make him an advance of a like amount, please.

$16.51

Cr note issued

Paid in Cash

P868 not to be rendered

[signature]
Major.
Officer i/c Accounting Branch.

L- L. Job 310—M. & [illegible]74.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

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

To Whom Mrs. D. S. Crawford

Address Humboldt Sask.

By Whom Assigned Crawford K. B

Regtl. No. 531771

Rank Pte

Corps 11th. Field Ambulance

Rate $16.00 20 MAY 1916 OCT 1/16

2 M 18/10/16 FEB 22/12/16

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

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS

M. F. W. 12a.
50m.—4-16.
1772—39—812.

Mrs. D. S. Crawford

Sheet No. 2.

L. L. Job 310.—Req. 6574.

Name of Soldier Crawford, K. B.

#531771—11th Field Amb.

$16.00 20.00 Oct 1/16

MAY 1 1916

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May		R5883	16	
June		R8228	16	
July		H8279	16	
Aug.		J10983	16	
Sept.		Y17285	16	
Oct.		Z17269	16	
Nov.		H26167	16	
Dec.		L32712	16	
Jan.	1917	~~C39274~~ R38223	~~28~~ 32	32.00 to adj
Feb.		C44337	20	20.00 Feb future J. A. E. L.
March		D50004	20	20 LL
April		B1401	20	20 B.
May		Y7940	20	20
June		P14218	20	20 Ch
July		D21391	20	B.
Aug.		J28577	20	D
Sept.		35254	20	Cu
Oct.		Y47278	20	
Nov.		Q52776	20	
Dec.		J55867	20	$380.00
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

Obed B

Cancelled

320.

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.				

FORM D.M.S. 1300

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
CRAWFORD.	K.B.	531771.

RANK	UNIT	CO.	TROOP	BATTY.
Pte.		C.A.M.C.	11F A.	7 Gen.

HOSPITAL — DATE OF ADMISSION

11. C.F. Amb. — 27-10-17.

7 C. G. Etaples — 16-5-18

1. 7 Can Gen. Etaples, HOSP. 19.7.18

2. 7. " " " HOSP. 29.7.18

3. HOSP.

4. HOSP.

DIAGNOSIS

1. Shl. Gas. Wd. Arms. & Legs.

2. Tonsillitis a/s.

3. I.C.T.L. Arm. a/s. Carbuncle L. Elbow. a/s.

DISPOSITION — Dis to Duty. 27-10-17. DATE

C.L. 7-11-17. A55(2)
22-5-18 a 218 (3)
30.5.18 a 275
25.7.18 A 272.
30.7.18 a 276.1
16.8.18 a 282.
12-8-18 a 284

REMARKS Dis. 24.5.18
Dis 23.7.18
" 6-8-18

A.M.D. 2 Dept.
Behalf of D.G.M.S. O.M.F.C. London

EPITOME OF HOSPITAL TREATMENT

	HOSPITAL	ADM.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

12 "P."

CARD NO. ✓

SURNAME. Crawford.

CHRISTIAN NAMES Kenneth Branaman

REGL. No. 531771 RANK Pte.

UNIT 11th Fld. Amb.

FORMER CORPS nil.

SOS Drs Demob. 23.8.19

FOLL.

Dr 233. 21.8.19 12 Dr

NEXT OF KIN.

NAMES IN FULL Crawford. D. S.

RELATIONSHIP TO SOLDIER father

ADDRESS Humboldt. Sask.

CHANGE OF ADDRESS

COUNTRY OF BIRTH U.S.A. Dixon. Neb. DATE June 15th 1893

PLACE OF ATTESTATION Saskatoon. Sask. DATE Apr. 6th 1916.

R/C 17-8-19 389/68 Pte

L. L. 90589.—M. & D. 6312. M. F. W. 22. 100m.—1-16. H. Q. 1772-39-839.

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING Law Student RELIGION Baptist or Congreg.

DESCRIPTION.

APPARENT AGE 22 YEARS 8 MONTHS

HEIGHT 5' FEET 10 1/2 INCHES

CHEST MEASUREMENT 36 INCHES EXPANSION 4 INCHES

COMPLEXION medium EYES blue HAIR Dk. brown

DISTINGUISHING MARKS nil.

MEDICAL EXAMINATION. PLACE Saskatoon. Sask. DATE Mar. 15th 1916.

Present Address. Saskatoon. Sask.

No. 531771 RANK Pte. NAME Crawford K. B.

T. O. S. 11-4-16 (DO 33 of 11-4-16) UNIT # 11 Overseas Field Ambulance C. A. M. C.

M. D. 10

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 apr. 11	1916 apr. 36	✓		

REGT'L No. 531771

H. Q. FILE No. 649.

NAME Crawford, Kenneth Branaman

RANK AND CORPS Pte 9th Fld Amb. (form 11th Fld Amb.)

FOLLOWS No.

CABLE No.	CABLE DATE	C. NATURE OF CASUALTY	FOLLOWS
M6312 217-3	9-11-17	Rep. wounded slightly rem. at duty Oct. 27th 1917. (Gas poisoning.)	

L. L. 26438. M. & D. 8207.

M. F. W. 42—50M.—8-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 55-2	#11 Can. Fld Amb.	27-10-17	Shell gas Wd. Arms & Leg
A 552	Disc. to Duty	27-10-17	" " " "
A-218 (B)	#7 Can. Gen. Etaples	16-5-18	[illegible]
A 225	Disch.	24-5-18	" C.A.M.C.
A 272	No 7 Can. Gen., Etaples	19-7-18.	I.C.T.L. Arm
A 276 (1)	Disch.	23-7-18.	" " " " "
A 282.	#7 Can Gen Etaples.	29-7-18	Carbuncle L Elbow
A. 287.	Disch.	6-8-18	" " "

Form R. 149.

Kenneth Branaman

Name Crawford Rank Pte Reg. No. 531771

Unit C Am C 7 Gen

Next of Kin Canada

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
16-5	7 Can Gen	Etaples	Tonsillitis	a 218		1345/4
24-5	To Duty	"	"	a 225		1595/16
19-7	7 Can Gen	"	I.C.T. L. Arm	a 272		2732/4
23-7	Disc	"	"	a 276		2808/14
29-7	7 Can Gen	"	Carbuncle L. Elbow	a 282		2926/7
6-8	Disc		"	a 287		3059/11

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

FORM R. 149.
7106—250m—7/2/17.

✓ Kenneth Branaman ✓

Name CRAWFORD Rank Pte . Reg. No. 531771

Unit C.A.M.C. (11th Fld Amb)

Next of Kin Canada H.S.

Date 1917		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List
27-	10	11 C F A		Shell Gas Arm	A	M	6313	6902
27-	10	To Lenty		Legs	55			

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

E.M.N. 75

Number 531771 Rank Pte

Surname CRAWFORD

Christian Name Kenneth Branaman

P Units C.a M.C. Theatre of War France

Date of Service 11/8/16

Remarks (now St.) Off. i/c Recruiting Sub St. #5

Latest Address Suite 2) 104 4th Ave Nth Saskatoon

Medow Lake. Sask

Roll No. B. Page 21145

30/11/42

200m.-6-21.M.

REGT. NO. ..... RANK ..... NAME .....

UNIT ..... AGE ..... SERIAL NO. IN A. AND D.

TOTAL SERVICE WHERE AND HOW LONG ..... DATE AND PLACE OF ORI

DISEASE OR INJURY .....

OPERATIONS .....

RESULT OF OPERATIONS .....

(A DATE OF ARRIVAL AT HOSPITAL AS AN ADMISSION .....

B) AS A TRANSFER (STATE WHERE FROM) ..... NAME OF HOSPITAL

DATE OF DISCHARGE TO UNIT ..... IN CA

DATE OF DISCHARGE AS AN INVALID .....

DATE OF DEATH .....

DATE OF TRANSFER (STATE WHERE TO) ..... NAME OF HOSPITAL

OTHER INDEPENDENT CONDITIONS DIAGNOSED .....

DESP. DEC 3 1942
REGN NO. 361

P. 559

MARRIED OR SINGLE: Single

PLACE OF BIRTH: Dixon. Neb. U.S.A.

NAME AND ADDRESS OF NEXT OF KIN: D. S. Crawford. Humboldt, Sask, Canada.

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

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 731771 RANK Private NAME Crawford. Kenneth Branaman

IF IN PERMT. CORPS WHAT UNIT: UNIT 11th Fld Ambce

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION: Saskatoon, Sask.

DATE OF ATTESTATION: 6th April 1916.

TRANSFERRED TO / DATE / AUTHORITY

ASSIGNED PAY MONTHLY $ ~~£0~~ $20.00 DATE EFFECTIVE 1st October 1916

PAYABLE TO: Mrs D S Crawford, Humboldt, Sask. RELATIONSHIP: Mother

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
Mar 31.															47 50															29 90	17 60				Balance from Canada.
June 30	30	1.00	30	00	30	10¢	3	00							33 00	3		11			20			7 30	9 73		2 43	16	50		35 96	11 64				
July 31	31	1.00	31	00	31	10¢	3	10							34 10			30	157-16						7 30			16	00		23 30	25 44				
Aug 31	31	"	31	"	31	"	3	10							34 10	59	31-7-16								9 74			16	00		25 74	33 80				
Sept 30	30	"	30	"	30	"	3	"							33 "	68	31-8-16	70	15-9-16						2 62 2 62	2 62			16	"		23 86	42 94				
Oct 31	31	"	31	"	31	"	3	10							34 10	81	1-10-16								2 62						22 62	54 42				
Nov 30	30		30		30		3								33	106	11/11/16.								2 62			20			25 23	62 19		20	42 19	
																94	15/10/16.								2 61										
Dec 31	31		31		31		3	10							34 10	118	15/11/16.								2 61			20			22 61	73 68				
			21	40			21	40																												
1917																142	15/8/16								2 61										
Jan 31	31	1.00 .10	34	10											34 10	130	1/9/16.								11 34			20			33 95	73 83				
Feb.	28	"	30	80											30 80	154	11/1/17								2 62			20			22 62	82 01			82 01	
																207	1-3-17								2 62										
Mar 31	31	"	34	10											34 10	195	15-2-17								5 24			20			33 09	83 02				
																169	15-1-17	220	5/3.						2 62	2 61									
Apl			33												33					27 4/4	H.W.	D.T.					2 61		20			22 61	93 41			

No 531771. Pte Crawford. K.B

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.	Acquittance Rolls 1 Date	Acquittance Rolls 2 No.	Acquittance Rolls 2 Date	Acquittance Rolls 3 No.	Acquittance Rolls 3 Date	Acquittance Rolls 4 No.	Acquittance Rolls 4 Date	Cash Payments 1	Cash Payments 2	Cash Payments 3	Cash Payments 4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
May		1.10	34	10.											34 10.	62	10/4	74	5/5.					2 61	2 68.			20		25 29	102 22				
June			33												33	145	1/6.							2 68				20		22 68	112 54				
July			34	10.											34 10.													20		20	126 64.				
Aug			34	10.											34 10.	184	17/6.							2 67.				20		22 67	138 07				
Sept			33												33					344 133 266	17/7 17/5 4/7					5 35 2 67 2 68		20		30 70	140 37				

Month	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Deferred Pay	Sep. Allce. Eng.
Oct 1	Cr. Bal	~~140 37~~							140 37		
	P.P.	34 10.						20			
				AR 2964 11th F Amb 7/8/17	8 93						
				" 528 " " " 4/9/17	2 68						
				" 388 4th Div F Amb 27/7/17	89 22				53 64		
		34 10			100 83			20			
Nov	P.P.	33		" 650. 11th F Amb 2.10.17.	3 57			20			
				" 704 " 17.10.17.	4 46						
Dec	P.P.	34 10		" 579 " 16.9.17	2 67			20			
				" DN. 480. 4th F Amb. 21.8.17.	2 68						
				AR 750. 6.11.17. 4 Div F Amb	3 57				63 79		
		67 10			16 95			40			
1918 Jan	P.P.	34 10		AR 916. 3.12.17. 4 Div F Amb	5 35			20			
				" 849. 18.11.17 "	12 49				60 05		
Feb	P.P.	34 10			17 84			20			
		30 80		1281. 21/1. "	4 46						
				1348 2/2 "	3 57						
				1108 4/1 do.	3 57						
		30 80		AR. F6(4) 2649	11 60			20	59 25		
Mar				C1 10/2/18 4 C.D.F.A.	38 93			20			
	P.P.	34 10		~~AR. 1749~~ ~~C23 4/3 do~~							
				AR 1999 C36 19/3 do	4 46				29 96		
					43 39						
				C.A.P.				20	29 96 nil		
		34 10			43 39			20			

No. 12 DISTRICT DEPOT

FILE C1307 S/S Laconia 17/8/19

AUDITOR | PAYMASTER

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

M. OR S. | REGT. No 531771 RANK Pte NAME (IN FULL) CRAWFORD K B.

NEXT OF KIN | RELATIONSHIP

ADDRESS Royal Bank of Canada, Saskatoon, Sask.

IS SEPARATION ALLOWANCE PAID? | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS Nil

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 6 a.m.c. | IF IN P.F. WHAT UNIT? | (BLOCK LETTERS SURNAME FIRST)

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 6/4/16 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ | DATE EFFECTIVE

Closed 31.3.19. See M.F.W. 187

PAYABLE TO | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Nil

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE Regina | DATE 23/8/19 | REASON Demob | AUTHORITY D.O.R.S. | IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.			TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	COL. NO. 1 DATE	COL. NO. 2 NO.	COL. NO. 2 DATE	COL. NO. 3 NO.	COL. NO. 3 DATE	CASH PAYMENTS COL. NO. 1 $	COL. NO. 1 C.	COL. NO. 2 $	COL. NO. 2 C.	COL. NO. 3 $	COL. NO. 3 C.	ASSIGNED PAY $	ASSIGNED PAY C.	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C.	OTHER CHARGES $	OTHER CHARGES C.			TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					
31/7/19					7 54				7 54																										7 54		C/F Bal 2 Aug 54
																	P Wing	973																		A Class 3 Aug 1
																	Boat	489																		Do Pay 6 Aug 26
																	Train	500																		
1-29/8/19	29	1/0	31	90	35	00			66	90							6 Kits	119	84										66	60					146	04	76	60	
			31	90	37	54			69	44							WAR SERVICE GRATUITY M.D. 12	139	44										66	60					146	04	76	60	
																																			Soldier		
	153				420	00			420	00																			76	60					343	40			646364 SEP 23 1919
																																			270				654590 OCT 23 1919
																																			216	60	203	40	1657860 NOV 23 1919
																																			63	40	140		1661884 DEC 23 1919
																																			280		70		1664319 JAN 23 1920
																																			350				
			420		420				420																											420				

I certify that all payments due on this account have been completed.

Paymaster War Service Gratuity
or Military Secretary

J. Mitchell CAPTAIN
For ASST. DIRECTOR OF PAY SERVICES
MILITARY DISTRICT No. 12

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1172-39-1390.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

C

2114 May 1-16

Date of Assignment Oct 1/16

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

$	20			

11-2046 Bdle

PARTICULARS OF SEPARATION ALLOWANCE

No. 531771

Rank Pte Promoted Reverted Discharge

Soldier's Name K. B. Crawford

Battalion 11th Fld Amb

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs D. S. Crawford

Address ~~Humboldt~~

Change of Address Sask

1 North Battleford Sask. 1-3-18 WK.

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
						03896-½-6.
1917 Dec 31			380 –	380 –	P	
Jan	T 65980		20	20 00	adeg	Jany. 1917 – $32.00 to adjust. $20.00 Feby & future. 1-5-16 $16
Feby	D 100602		20	20 –		MR O 13 issued 1-3-18 WK. 1-10-16 $20
Mch	A 118795		20	20 –		
Apl.	B 1276		20	20 –	J32	A.P. a/c closed off 1-4-19 auth. 18850. MR O/16978
May	M 17374		20	20		
June	L 21071		20	20		
July	S 32304		20	20		
Aug	D 34786		20	20		
Sept	L 44166		20	20		
Oct	M 53098		20	20		
Nov	D 60150		20	20		
Dec	9 67346		20	20		
Jan	M 72513		20	20		
Feb	P 77940		20	20		
Mar	H 90191		20	20		
Apr.		Closed	~~80~~ XX	XX		

A/c Closed 31-3-19
Ret'd per... Caronia
Date 18-8-19 M.F.W. 187 W.D. 12
Closed ... W.P.A. 30-8-19

CONSOLIDATED ACCOUNT

M. F. W. 128
400M.-6.17—177-39-1141
L. L. 22530—M. & D. 1488.

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—177-39-1141
L. L. 22220—M. & D. 7593.

P. Group P Wing

War Service Badge
Class "A" No. 240622
13.6.46

D. A. P
O. G. 19

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)

1. No. 531771

2. Rank Pte

3. Name CRAWFORD, Kenneth Branaman

4. Unit C.A.M.C

5. Date of Discharge REGINA, SASK. AUG 23 1919 Place Saskatoon Sask

6. Reason for Discharge Demobilization

7. Authority R.O. 1420 (D.D.O 233 Para 3112

8. Proposed Residence after Discharge Vancouver B.C.

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. ?

K B Crawford

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

Date

Dispersal Station "O" AUG 23 1919 Military District No. 12

Signature W. [illegible]
(O.C. Discharging Unit.)

CAPT.

M.F.B. 218a—150M-3-19—1772-39-113.

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. 18
Date 5 AUG 1919