

B/a Oct 1st

Oct 1

N2 B2

Original

ATTESTATION PAPER.

No. 425537

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... *Wilfred Dalgluish*
 2. In what Town, Township or Parish, and in what Country were you born?..... *Dunrea Manitoba Canada*
 3. What is the name of your next-of-kin?..... *Mrs Helen Reid Dalgluish Mother*
 4. What is the address of your next-of-kin?..... *Dunrea Man Canada*
 5. What is the date of your birth?..... *17th March 1896*
 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*
If so, state particulars of former Service.
 11. Do you understand the nature and terms of your engagement?..... *Yes*
 12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?..... *Yes*
- Wilfred Dalgluish* (Signature of Man).
Sergeant Dewey (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Wilfred Dalgluish (Signature of Recruit)
Date: *Sept 29th 1915* *Sergeant Dewey* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Wilfred Dalgluish*, 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.

Wilfred Dalgluish (Signature of Recruit)
Date: *Sept 29th 1915* *Sergeant Dewey* (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 *Camp Hughes* this *29th* day of *Sept* 1915.

Rank: Capt. (Signature of Justice)
I certify that the above is a true copy of the Attestation of the above-named Recruit.
Rank: Capt. (Approving Officer)

Description of Wilfred Dalgluish on Enlistment.

Apparent Age 19 years 6 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. 7 ins.

Chest measurement { Girth when fully expanded 40 ins.
 Range of expansion 4 ins.

Complexion dark

Eyes brown

Hair dark brown

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

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 29th Sept 1915

Place Brandon

Jeremiah S. Clark
 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.

Wilfred Dalgluish 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.

Jeremiah S. Clark (Signature of Officer)

Date Sept 29th 1915

L. J. C.

REGIMENTAL DOCUMENTS

NAME *DAI GLIESH WM. (Sgt)* REGT. NO. *425537* UNIT *45th Bn* H. Q. FILE NO. _____

S

M

H

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DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
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01109

DEATH

Category

DISCHARGE

Category

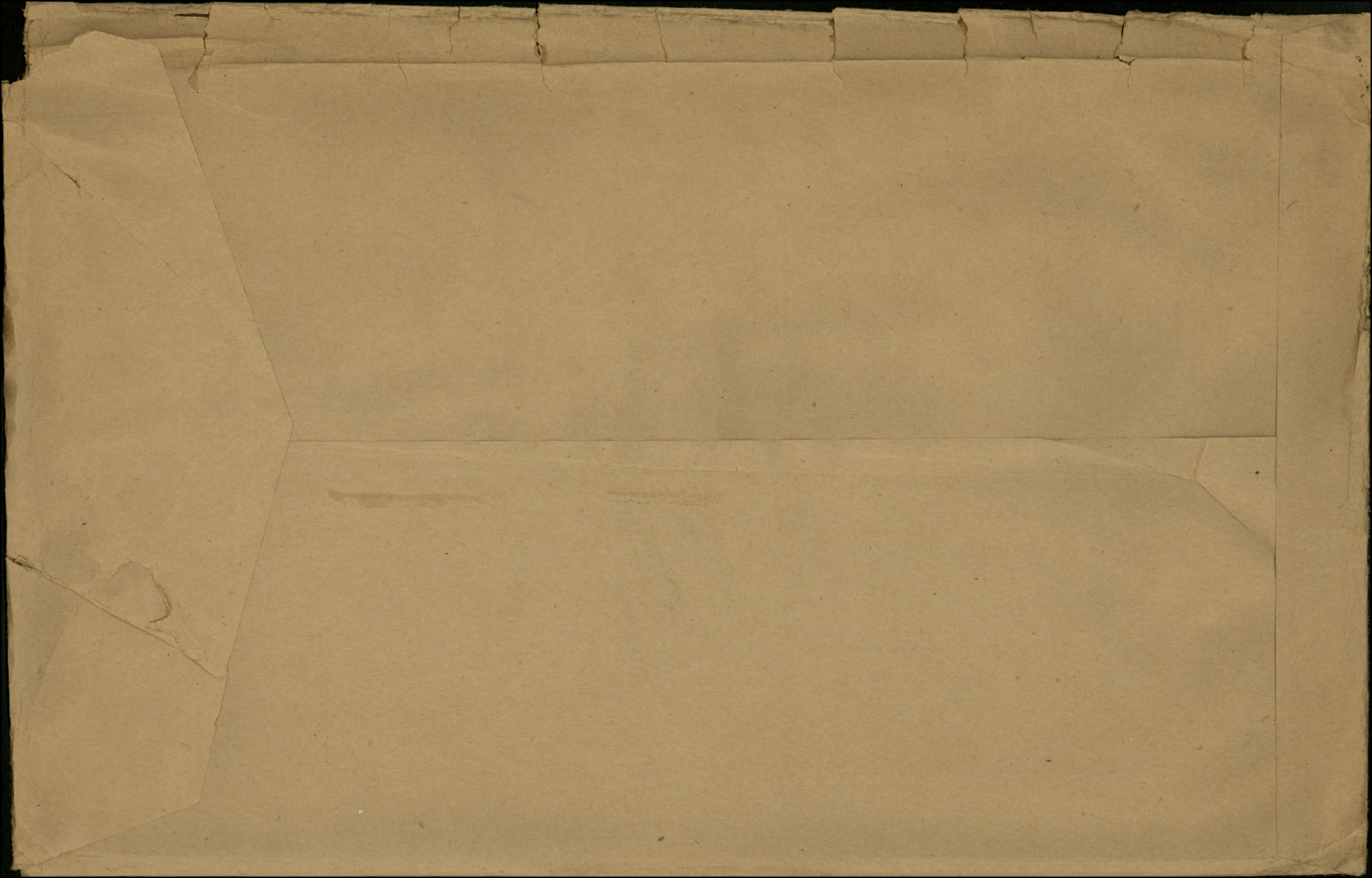
Shenob

DESERTION

H

1-1
20-1
30-1
5

Discharge
CA 85009
R149
no card
4 11 37
9 23 18
made



CANADIAN EXPEDITIONARY FORCE

WAR SERVICE BADGE DISCHARGE CERTIFICATE

CLASS "A" NO. *162298* ISSUED

THIS IS TO CERTIFY that No. *425537* (Rank) *Spr.*

Name (in full) *Dalgleish William* enlisted in the *45th O.B.*

CANADIAN EXPEDITIONARY FORCE at *Camp Hughes* on the *29th* day of *Sept* 19*15*

HE served in *4th Pioneers* *France*

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

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

Age *23.*

Height *5' 7"*

Complexion *Dark*

Eyes *Brown*

Hair *Dk Brown*

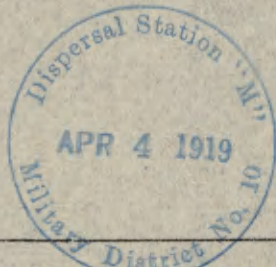
Marks or Scars

W Dalgleish
Signature of Soldier

Wm Hauser
Issuing Officer

Date of Discharge

Leut
Rank



Date *4 4* 19 *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.

Rank _____ Name **DALGLIESH Wilfrid** Reg'l No. **425537**
 Unit **45th. Battalion** If in perm. Corps, }
 What Unit? } **Married or Single** **Single**
 Place and Date of Enlistment **Camp Hughes, Sept. 29th, 1915.** Place of Birth **Dunrea,**
Manitoba, Canada.
 Name and Address, Next-of-Kin **Mrs. Helen Reid Dalgliesh,**
Dunrae, Manitoba, Canada. Relationship **Mother.**

Assigned Pay Monthly \$ _____ Payable to _____ Relationship _____
 Separation Allowance \$ _____ Payable to _____ Relationship _____

N/E, R.B. No. **11319**
 File R.L. _____
 Category **Can OR**

R 153/61

Discharge, Date and Place _____ Reason _____ Character _____

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.				
		<i>Arrived in England.</i>	<i>Lapland</i>		
<i>6.5.16.</i>	<i>Ob. 45th</i>	<i>Admitted Wmne Bks H Troop.</i>	<i>Shorncliffe</i>	<i>25.3.16</i>	<i>Inf'm form 255</i>
<i>25.5.16.</i>	<i>"</i>	<i>Discharged</i>	<i>"</i>	<i>4.5.16</i>	<i>Part II 0.36</i>
<i>5.7.16</i>	<i>45th Bn</i>	<i>S.O.B. Transf'd to C.P.T.D</i>	<i>"</i>	<i>24.5.16</i>	<i>52.43</i>
<i>10-7-16.</i>	<i>P.T.D.</i>	<i>T.O. Strength</i>	<i>O'cliffe</i>	<i>4.7.16</i>	<i>86</i>
<i>20.8.16</i>	<i>"</i>	<i>Trans to 4th Can Bn Bn overseas</i>	<i>"</i>	<i>20.8.16</i>	<i>162</i>
<i>31-8-16</i>	<i>4th Can. Pion.</i>	<i>T.O.S. from C.P.T.D.</i>	<i>"</i>	<i>21-8-16</i>	<i>PII DO 77</i>
<i>4-10-16</i>	<i>"</i>	<i>Adm. G. Evington, Mil Hosp. Leicester</i>	<i>"</i>	<i>28-9-16</i>	<i>CH B21 Bronchitis</i>
<i>9-10-16.</i>	<i>"</i>	<i>Transferred to C.C.A.C. Folkestone In the Field</i>	<i>"</i>	<i>28-9-16</i>	<i>PII DO 108 S</i>
<i>6.10.16</i>	<i>C.C.A.C.</i>	<i>Taken on strength.</i>	<i>4th Can. Folkestone</i>	<i>28.9.16</i>	<i>Pt II D 438</i>

A.F.B. 103 CHECKED
 24 AUG 1916
278

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.				
30.10.16.	67 th Bn.	Ad. Comd. Hap Woodcote Plk.	Epsom	21.10.16.	Sp. B36. Bronchitis
11.11.16.	C.C.A.C.	Reported O/S com.	Muncham	10.11.16	Pt II 0497. C2/B98
12.11.16.	C.C.A.C.	On Command to Comm. Depot cases on com at C.C.D. and for P. J.	Shoreham	10.11.16	Pt II 0498.
18.2.17.	—	S.O.S. on train to Can. Rly to work Purfleet.	Marbury	2.2.17.	Pt II 083
3.2.17	Dep't. C.R.T.	T.O.S. from C.C.A. to.	Purfleet.	3.2.17	— 23
3.2.17.	"	S.O.S. to 5th. C.R.T.	"	4.2.17	— 23
5.2.17	5 th Bn. B. I.	Taken on strength. Embarked for France	do	4.2.17	do 2
30.4.17	5 th BRT	Arrived in France	Stield	24.2.17	Pt II 0036
15-10-17	- Do -	Awarded 1 st good Conduct Badge for Do	Do	29-9-17	— 93
13.12.18	C.R.T.	S.O.S. on sailing from S. Rly to work Purfleet. (Appointed 9 th Dec)	Purfleet.	6-12-18	— 345. 58RS Dec. 141 2/15. 12. 18
15.3.19.	" "	S.O.S. to M.D. 10. Rly	" Knotley Wash	14-3-19	Pt II. eq M.D. 10, D.O. 734/15.3.19
		from 5 33-M-79		23-3-19.	
24-3-19	M.D. 10	S.O.S. Canada	" Rly	23-3-19	- 82

A.F.B. 103 CHECKED
 27 MAR 1917
 J.P.

0. Inf. 30000
M. F. W. 51
150M. 10-15.
H.Q. 1772-30-030.

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

Casualty Form—Active Service.

Unit, Regiment or Corps 45TH BATTAL C.E.F.

Regimental No. 425534 Rank Pte. 1st Name Dalglish, Wilfrid

Enlisted (a) 29/9/15 Terms of Service (a) W. & W. Service reckons from (a) 29/9/15

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

Extended _____ Re-engaged _____ Qualification (b) _____

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				
5.7.16	<u>O.C. 45th</u> <u>Bn. D. 86</u> <u>P.T.D.</u>	<u>Embarked Canada 12/2/16</u> <u>Disembarked England 25/2/16</u> <u>Transferred to P.T.D. S. Caesar Camp</u>		<u>4.7.16</u>	<u>E. L. Daniel</u> Captain <u>Adjutant 45th Battalion, C.E.F.</u> <u>S. J. Lapland</u> <u>Nt. 11086</u>
25.8.16	<u>transferred</u>	<u>to the 4th Canadian Pioneer Batt. overseas</u>		<u>20-8-16</u>	<u>Auth. Keinf. 42. 15-8-1</u> <u>W. Simpson</u> <u>and adj. B.M.A.</u>
31.8.16	<u>4th Can. Pnrs.</u> <u>C.B. Dpt</u>	<u>Taken on strength</u>	<u>4th Pnrs</u> <u>field</u>	<u>21/8/16</u>	<u>N.R. 547. P.T.D. 77. 31.8.16</u>
7.9.16	<u>4th. pnrs.</u> <u>A.F.B. 213.</u>	<u>Proceeded to join</u> <u>Joined Unit</u>	<u>unit</u>	<u>5.9.16</u>	<u>N.R.</u>
28.9.16	<u>Anglo-American Hspl.</u>	<u>Sick. Bronchitis</u> <u>"St. Denis"</u>	<u>To England</u>	<u>28.9.16</u>	<u>W. 3083. P.II 108. 10/9. 10. 16</u> <u>O.C. 4th. 7891</u> <u>7.9.16.</u> <u>D.C.S. 14 14.9.16</u>

(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.

21 OCT 1916
for Lt. Col. A. A. G.
Lieut.
canadian section
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				
2/2/17	Transferred from	66AC [unclear] to [unclear]			Bn. Part II D.O. No. [unclear] for Adjutant, Canadian Command Depot, for CAC
3/2/17	Depot CRT GGD	Taken on Str. C.R.T. Trans. 5 th Bn. C.R.T.	Purfleet Lurfleet	3-2-17 4/2/17	R-II D.O. 23 R. Hillington for Lt. Col. D.C. [unclear] C.R.T.
5/2/17	SHORT	Taken on Strength	Purfleet	5/2/17	Co Part II No. 2
2/13/17	Depot	Provided Passage	"	24/1/17	Co Part II No. 4 for Adjutant, DEPOT CAN. RLY. TROOPB.
10-7-16	P.T. D	YOS from 45 th Bn	Shorncliffe	4-7-16	Mb. 110. 121
6-10-16	66AC	Taken on Strength.	Yolkestone.	28-9-16	" " 438
12-11-16	do	On command to Com Depot	Shoreham	10-11-16	" " 498.
18-2-17	do	ceased on com. b.d. lost to C.R.T.	Hastings	2-2-17	" " 83.
6.10.17	5 th Bn.	Landed France Awarded one good Conduct Badge	Hill	29.9.17	FOR LT: COL: I/C RECORDS. C.O.M.F. 24/2/17 L.R. 7641 Part 40 m 36d1-30/4/17 B 213 d, 6-10-17 R. L. 93. d 15/10-17

CORRECTED
 15 APR 1917
 CAN. RECORDS, LONDON

Div 2

Casualty Form - Active Service.

Regiment or Corps *4th*
 Rank *Apr* Surname *Dalgluish* Christian Name *J*
 Religion Age on Enlistment years months
 Enlisted (a) *29/9/15* Terms of Service (a) *War* Service reckons from (a) *29/9/15*
 Date of promotion to present rank Date of appointment to lance rank
 Extended { } Re-engaged { } Qualification (b)
 or Corps Trade and rate
 Occupation Signature of Officer

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked ...			
		Disembarked ...			
<i>12.1.18</i>	<i>5 CAPT.</i>	<i>Granted Leave To</i>	<i>Orleans</i>	<i>7.1.18</i>	<i>B213 11.0.3.</i>
<i>26.1.18</i>	<i>Do</i>	<i>Rejoined unit</i>	<i>Field</i>	<i>21.1.18</i>	<i>Do</i>
<i>23.1.18</i>	<i>29 CCS.</i>	<i>Cyrenhorst adm</i>	<i>29 CCS</i>	<i>23.1.18</i>	<i>66827 C9462.</i>
<i>26.1.18</i>	<i>Do</i>	<i>Do To</i>	<i>49 G</i>	<i>26.1.18</i>	<i>66956 B188</i>
<i>29.1.18</i>	<i>51 Cpl</i>	<i>72 G adm</i>	<i>51 Cpl</i>	<i>29.1.18</i>	<i>11354 D773.</i>
<i>30.5.18</i>	<i>CEB D</i>	<i>70 G a</i>	<i>CEB D</i>	<i>29.5.18</i>	<i>M 83 J</i>
<i>29.5.18</i>	<i>51 Cpl</i>	<i>72 G To</i>	<i>Duty</i>	<i>20</i>	<i>24636</i>
<i>4.6.18</i>	<i>CEB D</i>	<i>To Unit</i>	<i>Field</i>	<i>4.6.18</i>	<i>NR1252</i>
<i>8.6.18</i>	<i>5 CAPT</i>	<i>Rejoined unit</i>	<i>Do</i>	<i>5.6.18</i>	<i>B213</i>
<i>19.11.18</i>	<i>1/3 W-Lance F.A.</i>	<i>has. Hd. Inst (R) Adv</i>	<i>1/3 W-L.F.A.</i>	<i>19.11.18</i>	<i>A 6667.</i>
		<i>To</i>	<i>2 Inst. bll</i>	<i>Do</i>	<i>Do</i>

(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) Signaller, Shoeing-Smith, &c.
 W. 8635 - M2728 2900m 9/17 (8511) C. P. & S. Ltd. Form B/103 E/1807. P.T.O.

425537

Salglicsh N.

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
21-11-18	2 Aust. btl.	L. G. J. Hand. Adm	2 Aust btl	19-11-18.	A. 2391.
23-11-18	13 btl.	L. G. J. Hand. Lt. Adm	13 btl.	21-11-18	Lt.
Lt.	8 staty.	Lt. Adm	17 A. J.	23-11-18.	Lt.
5-12-18	Lt.	Invalided by accid. per A. J. Cambria posted to Ch. d. Perflect.	8 staty	5-12-18.	Lt.
		Has R. Chappell	Lieut. for Lt. Canadian Section, G. H.	Col., A. A. G. Q. 3rd Echelon, B. E. F.	W. 3083. Ar. 6584. G. I. O. 141 d. 13-12-18.
3-2-18	6 A. J. D. posted from 5th btl.		Kilby	6-12-18	Ph. O. 3115
← H. M. T. S. EMPRESS OF BRITAIN. →					Lieut. for Lt. i/o Reserves. on 25
EMBARKED 23-3-19					68
15-3-19	908 C.C.C. Kinmel Park for return to Canada. Part 11 Orders No. 73.				
24-3-19	808 C.C.C. Kinmel Park on embark-ing for Canada, Part 11 Order No. 82.				
		# Ross Lt			
		for DC commanding M. S. 10 Wing. Kinmel Park Camp.			

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

M. F. W. 54. (A. F. B. 103.)

500M.—9-16

H. Q. 1772-30-920.

Casualty Form—Active Service.

Unit, Regiment or Corps. 45 BATT C. E. F.

Regimental No. 425534 Rank Pte Name Dalglish Wilfred
C. E. F.

Enlisted (a)..... Terms of Service (a)..... Service reckons from (a).....

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

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

Report		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				
<u>23-3-19</u>	<u>T.O.S. Dispersal Station</u>	<u>2098 Pa 2</u> <u>M</u>			
	<u>and Dispersed</u>	<u>4.4.19</u>	<u>" do "</u>	<u>3</u>	
	<u>Wm Halladay</u>	<u>Lieut.</u>			
	<u>for O. C. 10 District Depot.</u>				

(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.

The Inactive Report Form and Instructions
Casualty Form - Active Service

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				

550

SHB

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

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 WILFRED 2. Surname DALELEIGH
3. Rank SPR 4. Original Unit 15th BN 5. Reg. No. 425537
6. Address, in full, to which future payments of gratuity are to be forwarded 7 UNION BANK OF CANADA WAWANESA MAN
7. Date of enlistment in the C.E.F. 25th Sept 1915
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.....
9. Relationship of such dependent.....
10. Address, in full, of such dependent.....
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?.....
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.....
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.....
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department no
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? no

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units.
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.....
20. Have you been issued with a War Service Badge? If so what class?.....
21. Have you, during the present war, served in the Imperial Forces?
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.....
23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?
- (b) If so, was such reversion in consequence of misconduct or inefficiency?.....
24. Are you now serving in the C.E.F.?..... If not, give:—(a) Date of discharge
4-4-19 (b) Reason for discharge.....
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.....
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.....
27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?.....
- (b) If so, are you in receipt of full pay and allowances from that Department?.....

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: *Dalglish & W.*

Place of Residence: *WAWANESAMAN*

Declared before me at: *Liverpool*

This *13th* 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.

W. Clarke Esq

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
			<i>420⁰⁰</i>	<i>380⁰⁰</i>
			<i>70⁰⁰</i>	

Certified Correct.

District Paymaster.

Form A.G. 10410 5M-10238-23-2-17.

OVERSEAS MILITARY FORCES OF CANADA.

DATE

~~30. 4. 1919.~~ 1919.

14. 2. 1919

2/0

To:- Hospital Representative,
Military Convalescent Hospital,
Woodcote Park, Epsom, Surrey.

The marginally named soldier has this day
been medically examined and placed in Category
and is now available to be discharged.

I hereby certify that this man has been
found as this inspection this day free from
Vermin, Venereal and Infectious Diseases.

~~PT A.~~

425537
Pte Daglish W
54. C.R.I.

FURLOUGH ADDRESS.

V.M.C.A
Weymouth
Dorset

CRT

W. James
R. H. G. Ash.

Captain, C.A.M.C.,
for Commandant,

Military Convalescent Hospital,
Woodcote Park, Epsom, Surrey.

NEAREST STATION.

Weymouth

EEG.

1919. 2. 19

A 19

1919. 2. 19

1919. 2. 19

1919. 2. 19

A.G. 10409.
25M-16-1-19.

OVERSEAS MILITARY FORCES OF CANADA

2429
Eps D-
No.

ROUTE LETTER.

No. 425537 Rank Pte. Name Dalgliesh, W. Regiment CRT
Overseas Unit CRT

has permission to proceed on SICK FURLOUGH
from 19 FEB 1919 191 to Seven p.m. March first, 191
for the purpose of proceeding to Weymouth,
Y.M.C.A.

On the expiration of Furlough he will report to CRT Res.
Depot Orderly Room at Knotty Ash, Category A.
Station

Date



T

[Signature]
Hospital Representative.

INSTRUCTIONS TO SOLDIERS PROCEEDING ON SICK FURLOUGH.

Passes and Route Letter:

1. If you lose this Route Letter or your Pass you forfeit the balance of your leave and must immediately report to your Depot or Unit, R-0/6.
2. When evacuated from Hospital and granted Sick Furlough, if staying in London more than twenty four hours, soldier must report to 3 Southampton Street, Strand, and have his Route Letter and Pass vised. Failure to do so will render him liable to arrest by the Military Police for disobedience to orders, R-0/1510.
3. Application for extension of leave due to illness must be addressed to the Officer Commanding the Depot or Unit to which you are to report and must be accompanied by a medical certificate from an M.O. or Doctor.
4. Overstaying Furlough will render you liable to be placed on restricted pay, DO-4-AG-22-1-4.
5. Railway Warrants (Travelling)
You must travel by the shortest and most direct route to your destination.
6. Stating a false destination for the purpose of obtaining leave and staying at an intermediate point renders you liable to be returned immediately to your Depot or Unit. RO-2620-8)10(17.
7. If you lose your Warrant you may obtain another from the R.T.O., but you will be charged up with its value. (D. of S & T. regulations)
8. Pay:- If you lose your money report yourself at once to the A.P.M.
9. Dress:- Trench Patches (Shoulder Badges, Cloth) of Units in France must not be worn. RO-2156-2-8-17.
10. Sickness:- If you contract Venereal Disease, if in London, report at once to 3 Southampton Street, Strand, where you will be given treatment, if elsewhere, report to the nearest Military Hospital.
11. If you go sick while on furlough, you will find instructions as to what to do on the back of your pass.
12. Allowance in lieu of rations for the period of furlough will be credited to you as per following scale.

Warrant Officers 4s. per day.

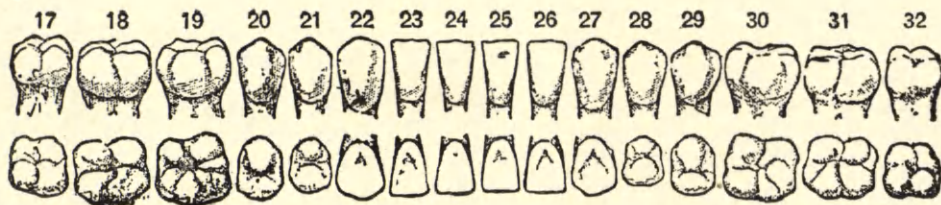
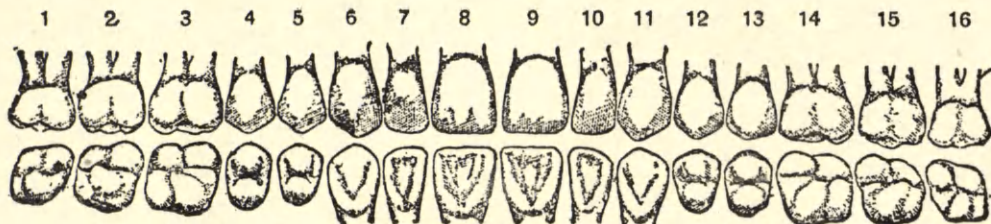
All Other Ranks 3s. per day.

On publication of your having proceeded on furlough in Part 11 Orders of your Unit.

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

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) DALGLEISH W
 REGIMENT 5 C R J RANK Sgt No. 425537
 Date of Examination in England 11. 3. 19. Date of Examination in France _____



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 3. 30.

2. EXTRACTIONS _____

3. CROWNS _____

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 yes.

(b) In England

(c) In France

KNOTTY ASH CAMP,
 LIVERPOOL.

Signature of Dental Officer

Robert Cogh

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.

NOV 27 1937

DATELINE W.

200

11.3.10

3.30

[Handwritten mark]

[Faint handwritten text]

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

KNOTTY ASH CAMP,
LIVERPOOL

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. 425537 Rank Spr Surname Daloleish
(Given name in full) Wiltred
Unit or Corps C.R.T.D. Birthplace Dunroa, Mon.

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

1. GENERAL DESCRIPTION:

Physique good Weight 178 lbs. Height 5 ft. 11 in. Colour of Eyes brown
Nutrition good
Pulse 74
Condition of arteries good
Vision Rt. 6/6 Left 6/6
Hearing (conversational voice) Rt. 21 ft.
Left 21 ft.

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

Opinion as to general health and physical condition good

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

Nervous System no Genito Urinary System no Cardio-Vascular System no
Special Senses no Integumentary System no Respiratory System yes
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.

C.C.H. Epson 20/10/18 - 10/11/18
bronchitis - recovered.
D.C.T. Rt. Hand 6/12/18 - 13/1/19
recovered - no disability

EXAMINATIONS.

KNOTTY ASH CAMP,
LIVERPOOL

THIS SECTION FOR USE OVERSEAS—

Examined at.....(Overseas)

Date March 4th 1919 Signed [Signature] M.O. [Signature]

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 SignedM.O.

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

Signature

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

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

[OVER]

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. 425534 Rank Pte Surname Dalgleish
(Given name in full)
Wilfred
 Unit or Corps 5 C.R.T. Birthplace Dunree man.

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

I. GENERAL DESCRIPTION:

Physique Good Weight 178 lbs. Height 5 10 1/2 ft. Colour of Eyes Brown
 Nutrition Good
 Pulse Good
 Condition of arteries Soft
 Vision Rt. Normal Left Normal
 Hearing (conversational voice) Rt. 20 ft.
 Left 20 ft.

Identification marks, scars, or deformities.
 (Give cause and date of origin).
1 scar. Lepharm.
Tattoo right forearm.

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 Yes Respiratory System Yes
 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.

S.C.T. right hand 21. 11. 18. was hit with hammer, and infected. Now no disability.
Had Bronchitis in 1916. No disability.
No previous disease or injury.

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at M.P.H. Epsom.....(Overseas)

Date 13. 2. 1919..... Signed W. Amies 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 Dalglisk W......

(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.)



MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Can 320	25534	Pte	Dalgleish	W
Year	Unit.	Age.	Service.	
1916	64. Canadians	22	1	

Station and Date.	Disease
Lacibe Sep 29 ²⁸	Bronchitis Transferred from B F F after suffered for 2 weeks from bronchitis Wm. ...
Oct - 16	Pneumonia Wm. ...
20. Oct	Trans: to Epsom

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

13897

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.
13897
Year
1916

Regimental No.	Rank.	Surname.	Christian Name.
425537	Pte.	Doegeish	Welford
Unit.	Age.	Service.	
457th Batt.	B Coy	20	8/12

Station and Date.
Mbest

Disease German Measles

DISCHARGED
25 MAY 1916

Station
and Date.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps 45th Res Batt.

Military Hospital Batalia

No. 425537

Rank and Name Private Wilfred Widgeon

Age 20

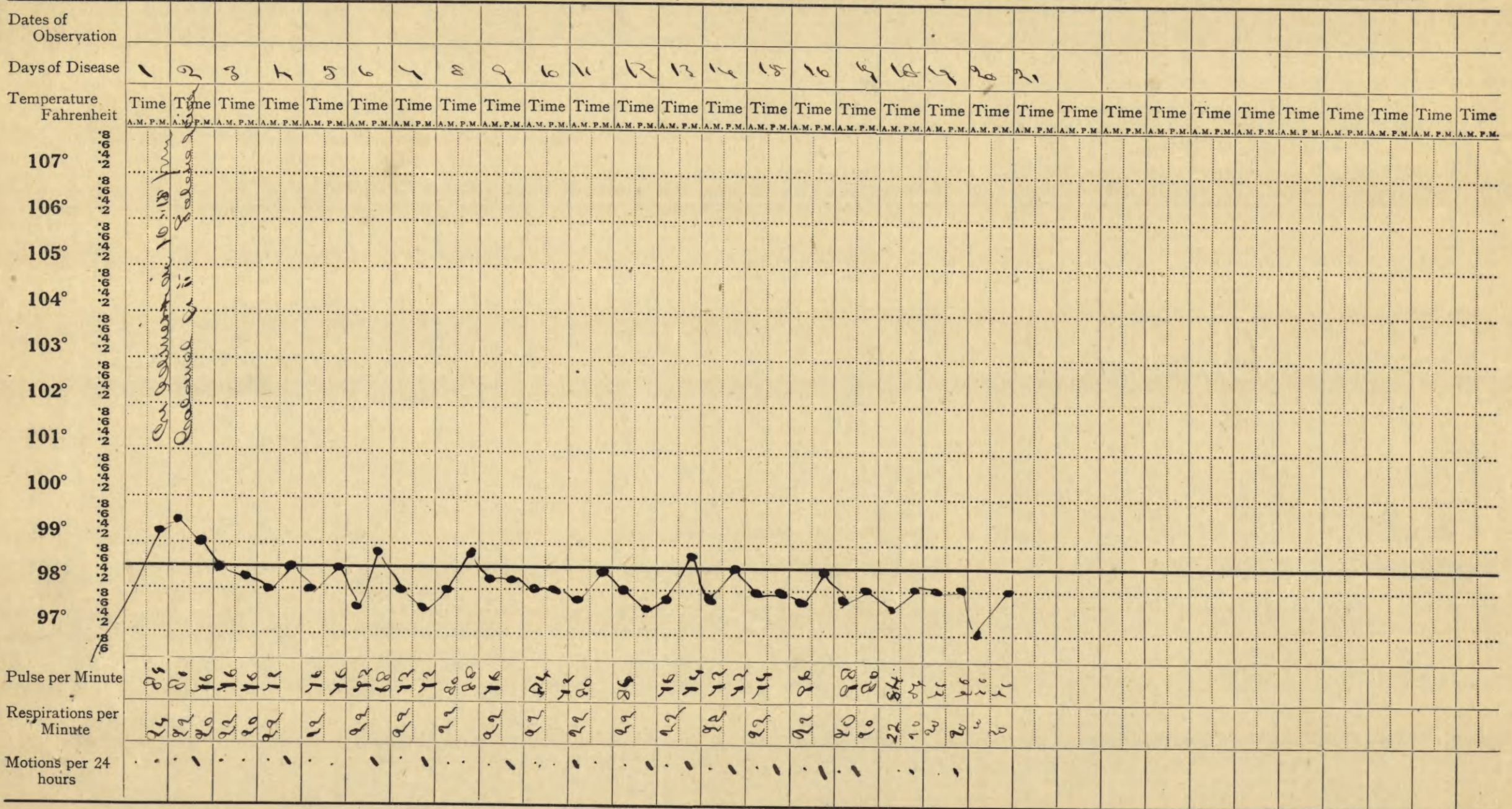
Service 8 months

Disease Muscle Rupture

Date of admission 4th May

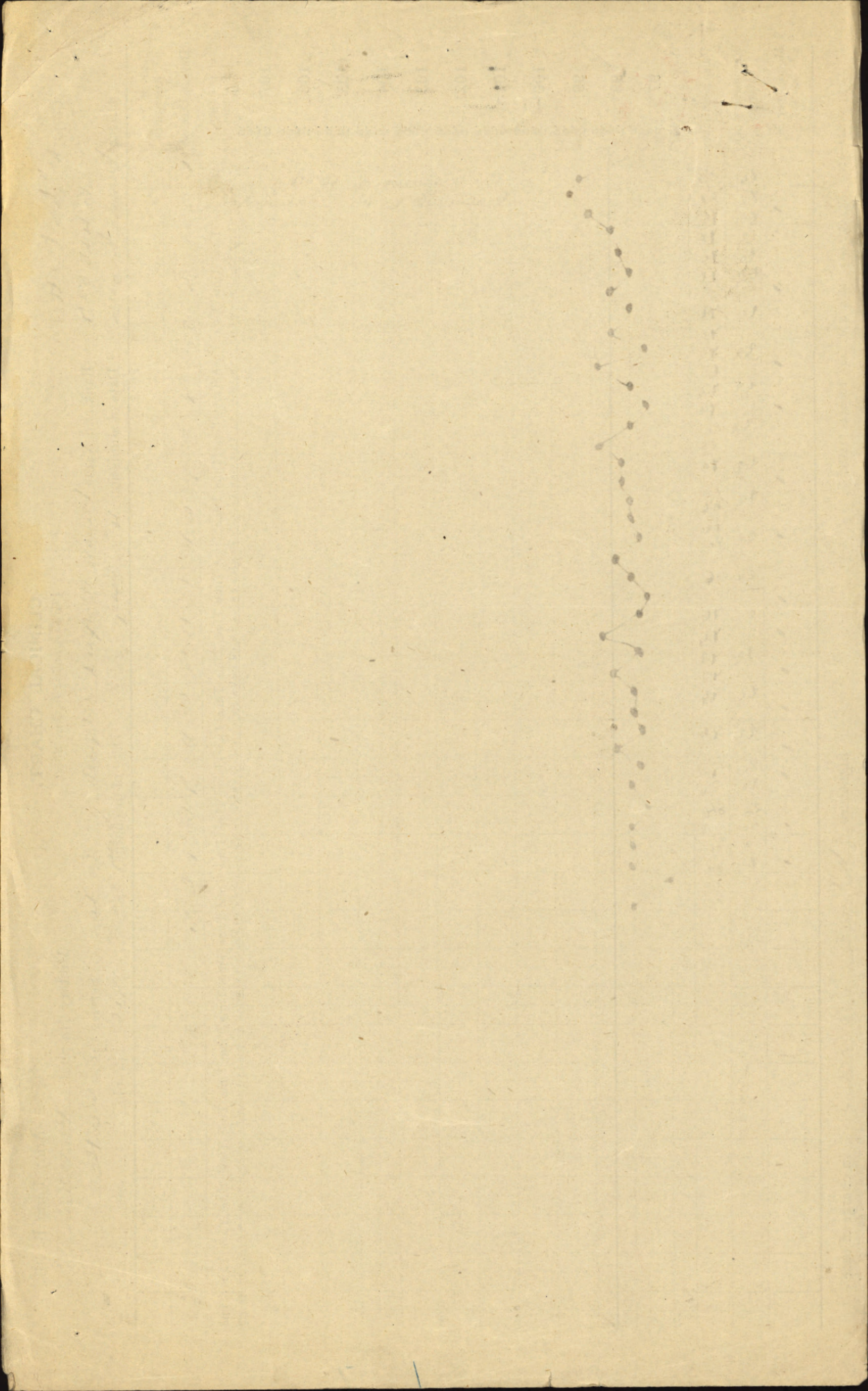
Date of discharge June 22nd 1916

Result



Car. Examination 10:15 pm
 Batalia 4th

Signature W. Beattie Muse - In charge of case.



Temporary ORIGINAL

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY OF

Surname Dilglish, Christian Name W.

TABLE I.—General Table.

Birthplace { Parish, County
Examined { on, day of, 191, at
Declared Age, years, days
Trade or Occupation
Height, feet, inches
Weight, lbs.
Chest Measurement { Girth when fully Expanded, Range of Expansion, inches
Physical Development
Vaccination Marks { Arm, RIGHT, LEFT, Number
When Vaccinated
Vision { R.E.—V=, L.E.—V=
(a) Marks indicating congenital peculiarities or previous disease
(b) Slight defects but not sufficient to cause rejection

Approved by
Rank
Medical Officer.

TABLE III.—Boards; Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Table with 2 columns: Date, Brief Details and Signature. Includes handwritten date 11/3/19 and signature.

Enlisted { at, on, day of, 191
Corps, Regtl. No.
67th Bn. 425337
5th Bn. C.R.F. 11/2/19
Became non-effective by
on, day of, 191
(Signature)
(Rank)

TABLE IV.—Service Table.

Table with 3 columns: Station or Troopship, Date of arrival or embarkation, Date of departure or disembarkation.

11/2 Dunning

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY OF

Surname DALGLIESH Christian Name WILFRED

TABLE I.—General Table.

Birthplace { Parish Dunree, Man.
County

Examined { on 29 day of Sept 1915
at Brandon

Declared Age 19 years 180 days.

Trade or Occupation Farmer

Height 5 feet 7 inches

Weight

Chest Measurement { Girth when fully Expanded 40 inches
Range of Expansion 4 inches

Physical Development

Vaccination Marks { Arm..... RIGHT | LEFT
Number

When Vaccinated

Vision { R.E.—V=
L.E.—V=

(a) Marks indicating congenital peculiarities or previous disease—
.....
.....

(b) Slight defects but not sufficient to cause rejection—
.....
.....

Approved by [Signature]
Rank

Medical Officer.

Enlisted { at Camp Hughes
on 29 day of Sept 1915

Joined on enlistment	Corps	Regtl. No.
		<u>425537</u>
Transferred to		

Became non-effective by

on day of 191.....

(Signature)

(Rank)

TABLE III.—Boards; Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief Details and Signature
	<u>18 DEC 1918</u>
<u>3/2/19</u>	<u>Car. D.I. [Signature]</u>
<u>13/2/19</u>	<u>Boarded Cat. A. [Signature]</u>
<u>Inoculations</u>	
<u>20/3</u>	<u>17-1-19 [Signature]</u>
<u>24</u>	<u>1. 19 [Signature]</u>
<u>1/3/19</u>	<u>Fit [Signature]</u>

TABLE IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

CANADIAN

TABLE II.—Only for admissions to Hospital or to the Sick List in case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
PRINCESS CHRISTIAN HOSPITAL MEMPHIS	6	12	18	13	1	19	Bl. Y Hand RT		Deep spot on palm of RT Hand. 21/11/18 whitlow excised. Pus evacuated. Convalescent.	
W.C. Hosp Epsom	13	1	19	10 FEB 1919 19	2	19	Bl. T. right Hand (Conol)	38	On admission small wd on palmar surface of metacarpal joint healed cannot fully extend the joint other systems normal. 3/2/19 G.C. good Cat DI 13/2/19 Boarded Cat. A.	W. J. Dennis W. J. Dennis "H" DIVISION.

O'Leary

Div 2

Forms
I. 237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year	Unit.	Age.	Service.	
Station and Date.	Disease			
	425537	Pte.	Salgeisk	W.
	5th Ban Prov. Troops.			
	I.C.T. right hand.			
<div style="border: 1px solid black; padding: 2px;"> Convalescent Hospital. No. Date: Woodcote Park, Epsom. </div>	Small wound on palmar surface of metacarpal-phalangeal joint. Healed. cannot fully extend the joint. Other systems normal.			
14 JAN 1919	Massage. Tab 1-5			
22 JAN 1919	W. Simms Capt			
27 JAN 1919	Dise. man. joints normal			
3 FEB 1919	PT, General Condition good. Col. D. W. Simms Capt.			
13.2.19.	GC Good. Col A Boarded. W. Simms Capt.			

* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.
 (6365) W2944/P138 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2349) [P.T.O.]

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	425537	Dr.	Salghub	W.
Year	Unit.	Age.	Service.	
	5 Canadian Railway Troop	25	3 ³ / ₄	
Station and Date.	Disease			
	Lb. Y. Hand Rt			
	Septic Spot on palm of hand.			
	Swelling.			
21/11/18.	Whellow excised. & pus evacuated			
6/12/18.	Admitted	PRINCESS CHRISTIAN HOSPITAL,		
	Convalescent.			
		Shuler B. Harper M.D.		

* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.
(6365) W2914/P138 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2349) [P.T.O.]

Station
and Date.

PATHOLOGICAL LABORATORY

URINALYSIS.

Capt. R. Jordan

"H." Division.

Canadian Convalescent Hospital
Woodcote Park, Epsom.

Oct 27 1916.

Hut.....

Rank..... Pte

Regtl. No..... 425537

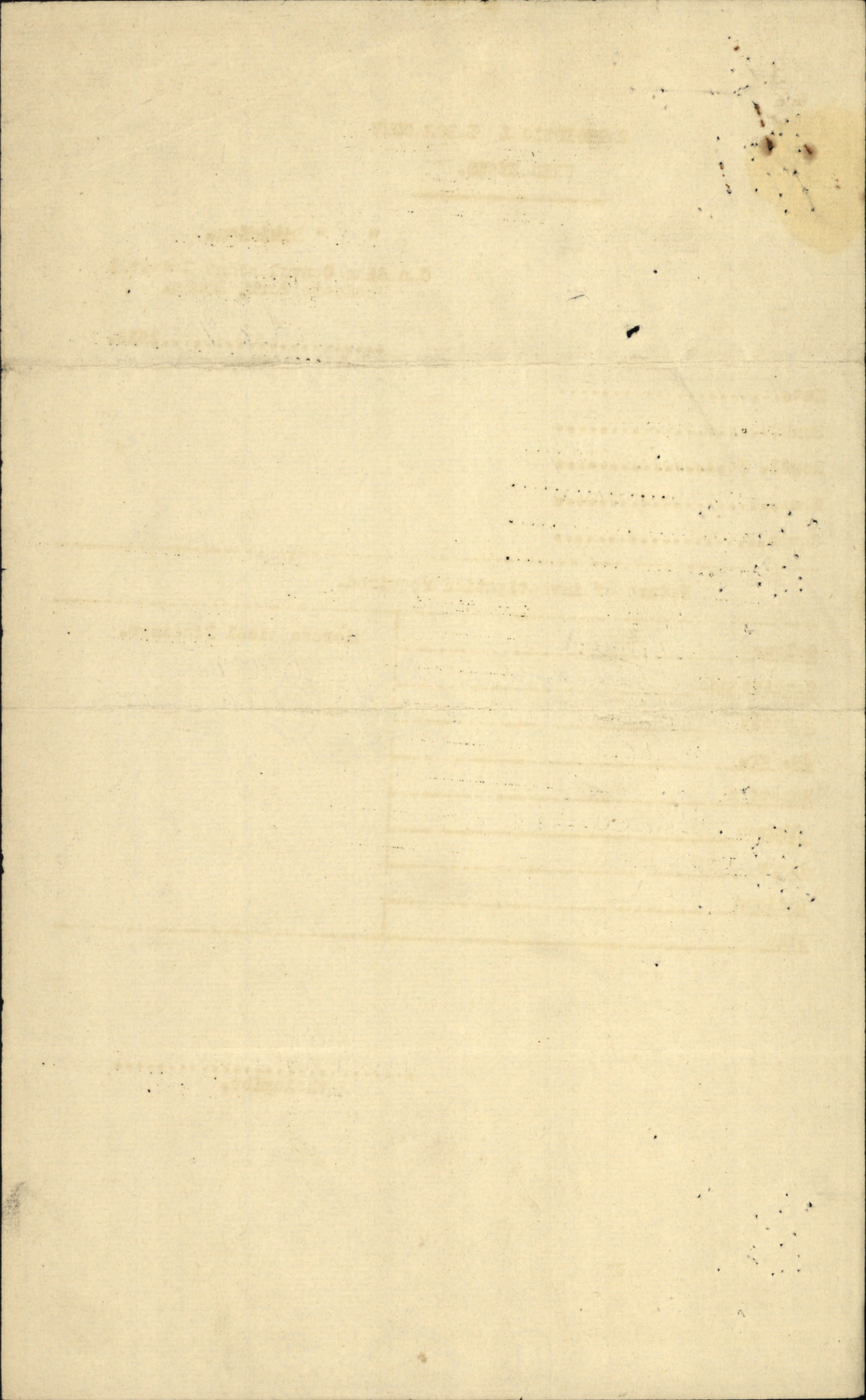
Name..... Dalgleish

Corps.....

Nature of investigation required.

Colour	Amber	Microscopical Findings. Loaded with amorphous urates and bacteria.
Consistence	Opalescent.	
Deposit	Flocculent ppt.	
Sp. gr.	1020	
Reaction	acid.	
Albumen	Trace - slight.	
Sugar	Negative	
Indican	No increase	
Bile	Negative	

M. G. Bramwell
Pathologist.



2nd Contingent

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

To Whom

Address

*Mrs Helen Reid Dalgleish
Dunree
Man*

By Whom Assigned

Regtl. No.

Rank

Corps

*Dalgleish Wilfred
425537
Pte
45th Batta*

Rate

\$15.00 MAR 1 1916

PAYMENTS

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

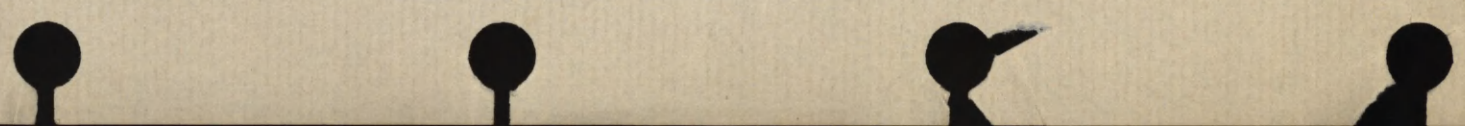


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121 200521

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1



2nd Conangou

MILITIA AND DEFENCE

M. F. W. 12a.
60m.-12-15.
1772-39-819.

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.

Mr. Henry Reid Dalglisk

Name of Soldier

Re Dalglisk Wilfred
425537
45-12 att

PAYMENTS.

L. L. Job 89002.-Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>8'15-</i>
				MAR 1 1916
April	1916	<i>U 2698</i>	<i>30</i>	<i>Include Mar. payment.</i>
May		<i>de 6071</i>	<i>15</i>	
June		<i>R 8707</i>	<i>15</i>	
July		<i>H 8751</i>	<i>15</i>	
Aug.		<i>212126</i>	<i>15</i>	
Sept.		<i>D 16063</i>	<i>15</i>	
Oct.		<i>D 20489</i>	<i>15</i>	
Nov.		<i>L 25680</i>	<i>15</i>	
Dec.		<i>L 33008</i>	<i>15</i>	
Jan.	1917	<i>J 38525</i>	<i>15</i>	
Feb.		<i>J 43833</i>	<i>15</i>	
March		<i>K 49685</i>	<i>15</i>	
April		<i>J 1008</i>	<i>15</i>	
May		<i>J 87410</i>	<i>15</i>	
June		<i>X 14208</i>	<i>15</i>	
July		<i>K 21178</i>	<i>15</i>	
Aug.		<i>J 27950</i>	<i>15</i>	
Sept.		<i>J 34597</i>	<i>15</i>	
Oct.		<i>C 40728</i>	<i>15</i>	
Nov.		<i>Q 53412</i>	<i>15</i>	
Dec.		<i>R 56446</i>	<i>15</i>	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

66-110

low

110

*150
150
300*

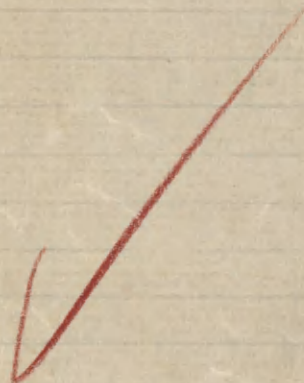
300

*15-L-
15.E.*

15-M

*W.
6
5*

330



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.				

Surname *Dalglish, W.* Christian Name or Names
 Rank *Pte.* Unit *#5* Co. *Batt. 5. C.R.T.* Troop Batty.
 Hospital *4th Pioneer* Reg. No. *425537*
 Date of Admission

Transferred *Moose Barge* Hosp. *5.5.16*
Isolation Folkestone Hosp. *6.5.16*
Mt. Erington War Leicester Hosp. *28-9-16.*
Epsom Convales Hosp. *21.10.16*

Diagnosis *Pneumonia*
 (1) *Bronchitis*
 Later Diagnosis (if changed)
 (2) *P.D. G.I.*
 (3)

Additional Diagnoses: If more than one state present
J.C.T. Hand R.

DISPOSITION *Dis.* 24-5-16 Date
Disch 10-11-16

6.12.16-16
13.5.16-17
e.L. 7-9-16 43.
e.L. 4-10-16 B21
- 30.10.16 B36
- 22-1-17 B98.
29-1-18 @ 125 (2)
6.2.18 @ 132 (4)
4.6-18. @ 231 (3)
29. 11. 18 @ 384-2.
10-12-18 9393-1.
16-1-19 B422
24. 2. 19 B 455 - 4

REMARKS *Dis-29.5-18.*
Dis - 19.2.19.

A.M.D. 2 Dept.

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

PR
AW

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

- | | | |
|----|------------------------|-------------|
| 1. | 29. Cas. Cl. Station | 23-1-18. |
| 2. | 51 Gen. Staples | 29-1-18 |
| | 8. Stat Wimereux | 23. 11. 18. |
| 3. | Cent. Mil. Weymouth. ! | 6-12-18. |
| 4. | Woodcote Pk Epsom | 14-1-19 |
| 5. | | |
| 6. | | |
| 7. | | |

Number 425537 ✓ Rank Private ✓

Surname DALGLIESH ✓

Christian Name Wilfrid ✓

Units 4th Div. P.M. Theatre of War ✓ France

Date of Service 20-8-16 ✓

Remarks

Latest Address Hexham ✓
North

Roll No. Box 55 Mc Gregor, Man 77/24

200m.-2-21.M. B Page 2 1935.

*DUE TO SERVICE
*NOT DUE TO SERVICE

HOSPITAL AS AN ADMISSION

WHERE FROM)

IT

IN CATEGORY

INVALID

WHERE TO)

ITIONS DIAGNOSED

ADDRESS

DEPT. JUL 9 1924
REAN. NO. 5-816

OSF/A

STATION

* CROSS OUT CONDITION NOT APPLICABLE.

Name *Dalghish Hank Dte.*Reg. No. *425537*Unit *45th Batt.*Next of Kin *Canada*

Date	Movement	Place	Casualty <i>M.</i>	List No.	Notified N/K O.	W.O. L.
<i>5-5-16.</i>	<i>Move Barrack</i>	<i>German</i>	<i>Muster</i>	<i>16.</i>		
<i>6-5-16</i>	<i>Evolution</i>	<i>Folkestone</i>	<i>" "</i>	<i>17</i>		
<i>24-5.</i>	<i>Discharged</i>	<i>"</i>	<i>"</i>	<i>43</i>		

Reg. No. 425537 Name Walglisk W
Rank Pte Corps 45th Age - Service -

Ledger No. Serial No.

HOSPITALS

DATE

DIAGNOSIS

St. Boniface Winnipeg
Wia to Unit

16-2-16

21-2-16

Influenza

e

HOSPITALS**DATE****DIAGNOSIS**

M. F. W. 2553.
75M.—9-19.
1772-39-1332.

Wilfred

Name **DALGLIESH** Rank **Spr.** Reg. No. **425537**Unit **5th - E.R.T.**Next of Kin **Mrs H. R. Dalgliesh, @ Wrae
Man. Conn.**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918						
23-11	8 Stg. Dep. Homebase		I.C.T.			
6-12-18	Dep. Mil. Weymouth		Hand	2388		5877-1
			do	2393		2783
11-1-19	Mil (Con) H. Epsom		20. Pt	422		4930
19-2	Discharged		-no-	6455		1859

MOORE BARRACKS, CANADIAN HOSPITAL, SHORNCLIFFE.

ADMITTING CARD.

Regt. No. *425537* A. & D. No. *13897-752*

Rank *Pte.*

Name *Dalgeish Wilford.*

Corps *45th Coy Bact B Coy.*

Religion *Pres* Age *20*

M. H. Rec'd M. H. Requested M. H. Ret'd

Disease *German measles*

Admitted *4/5/16*

Discharged *MAY 24 1916* Discharged to *Duty*

Place in Hospital *Isolation, Folkstone*

Transferred

Results

Sp. Brandon. no. no. 9.30 P.T.O.

REMARKS:

MEDICAL SYSTEMS SUPPLY	Issued from	45th Bn	19/5/1916
	Issued to		/.../191
	Issued from	45th Bn	25/5/1916
	Issued to		/.../191
	Received from Registrar this	Orig. Dup.	/.../191
		Ward	

NAME

Dalglisk, W

REGT. NO.

425537

RANK AND UNIT

Pte

56. R. T.

NEXT OF KIN

CABLE

NATURE OF CASUALTY

No.

DATE

LIST NO.

HOSPITAL

DATE OF
ADMISSION

REMARKS

A384	8. Stat Wernereus	23-11-18	9 de 5 hand
B422	Mil Com. W. to R. E. P. M. Cent Mil Weymouth	14-1-19	5 C. J. - R. H. Hand

NAME

Dalglish W

H. Q. FILE No. 649-

REGT'L. No.

4 25 534

RANK AND CORPS

Pte. 45th Bn

CABLE

NO.

DATE

NATURE OF CASUALTY

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
11c	Moore Bar. Shorne	5-5-16	German Measles.
14	† Isolation " Holkstone	6-5-16	" " "
43	mil. Shorne.	24-5-16	" " Disc.
B21	North Crington Mil., Leicester	28-9-16	Bronchitis
B36	† ^{no} Woodcot Pk. Epsom	21-10-16	"
1398	" " " " "	Disc 10-11-16	" "
A125 ⁽²⁾	29 Has. Sby Station.	23-1-18	V.D.G. (War. Rly Trps.)
Q, 132 ⁽⁴⁾	51 Gen. Etaples	29-1-18	" " " (" " ")
A. 231 ⁽³⁾	Deich.	29-5-18	" " " (" " ")
B393	Central mil. Weymouth	6-12-18	I.C.O. Hand
B455	† Alsea	19-2-19	"

Wilfrid ✓

Name *DALGLISH* Rank *Sgt.* Reg. No. *425537*
 Unit *6th Coy* *Railway Troops*
 Next of Kin *Parents* *Ef.*

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
<i>1918</i>						
<i>23-1</i>	<i>29 less latij St.</i>					
<i>24-1</i>	<i>51 G. F. Etaples</i>			<i>A125</i>		
<i>24-5</i>	<i>Discharged</i>			<i>A231</i>		<i>1201</i>
<i>AD 24-6</i>						

SURNAME. *Dalghiesh*

CHRISTIAN NAMES *Wilfred*

REGL. NO. *425537* RANK *Plt.*

UNIT *45th*

FORMER CORPS *nil*

(649-20-8269) 10. area m.
CARD NO.

S.O.S. No. 4-15-19.
FOLL.

Det. Genial - 100
Cont. No. 98 of 1000.
Batt.

NEXT OF KIN.

NAMES IN FULL *Dalghiesh, Mrs. Helen, Reid*

RELATIONSHIP TO SOLDIER *Mother*

ADDRESS *Dunree, Man.*

CHANGE OF ADDRESS

COUNTRY OF BIRTH *Ireland, Dunree, Man.* DATE

PLACE OF ATTESTATION *Camp St Hughes* DATE *29/9/15*

Sailed from Halifax per S.S. Baltic
1-4-16 *21-10-19* *294/84*
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

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE

CANADIAN CONVALESCENT HOSPITAL

AT

A A. & D. CARD.

Regt. No.

425534

A. & D. No.

Rank

Name

Pr Corps
Balglish W

Age

64
22

Religion

Pres

Service at Home

„ „ Front

Diagnosis

Admitted

20 OCT 1916

Discharged

10/11/16

Place in Hospital

M. H. Rec'd

Transferred

Results

14-2/16
Bronchitis
W. L. L. L. L. L.
blab. Shor for P.T.

(See Document Card)

23/10/16. Special Et few days then
P.T. Capt Johnston.

27/10/16. Dizziness, urine ~~W.~~ Et
^{otherwise} ~~Albumin~~, Good - Bronch Resorbed.
P.T.

2/11/16. Fit.

Thos J Butters Capt

REMARKS:

Leave this
Blank.

2-15

ALMERIC PAGET MILITARY MASSAGE CORPS, MILITARY CONVALESCENT HOSPITAL, EPSOM.

Division.

II

Hut.

D78

Patient transferred from

Weymouth

Date

13. 1. 19

Regt. No.

42553

Rank

Private

Name

Dalgleish W.

Unit

5/C.R. 4

TREATMENT.

Massage—Vibrations.

Movements—Heat.

Ionization (^{Salt} Salicylate)

Galvanism

Faradism

Interrupted Sinusoidal.

Breathing Exercises.

Gen. Strengthening Tr.

DISABILITY.

L.C.T. R. Hand.

for extension of 4th finger.

Rt. (Injured with hammer.

Unable to fully extend. metacarpal
phal joint of 4th finger. Hd healed 10 days

Date of Injury.

21. 11. 18

Date of Admission
to Department.

15. 1. 19

PREVIOUS TREATMENT.

none.

PROGRESS AND REMARKS.

Leave this
Blank.

January 21st Movements normal

Reactions normal

Disposition

Fit

Date

January 22nd

Masseuse

Miss Lunn

M.O. i/c case

James
Case

MARRIED OR SINGLE *S.*

PLACE OF BIRTH *Duurea man Canada*

NAME AND ADDRESS OF NEXT OF KIN *Helen Reid Dalgleish
Duurea, Manitoba Canada*

RELATIONSHIP OF NEXT OF KIN *Mother*

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
<i>Awarded me good conduct badge</i>	<i>29/9/17</i>	<i>PLI 93 15/10/17</i>

ADMISSIONS TO HOSPITAL, &c.			
DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG. NO. *425537* RANK *Private* NAME *Dalgleish Wilfrid*

IF IN PERM. CORPS | WHAT UNIT | UNIT *45th Batta.* TRANSFERRED TO *C.P.T. D.* DATE *4/7/16* AUTHORITY *B.S. 86*

PERMANENT FORCE ALLOWANCES TRANSFERRED TO *4 Pensions* DATE *11-9-16* AUTHORITY *B.S. 77, 51-8-16.*

PLACE OF ATTESTATION *Camp Hughes* TRANSFERRED TO *C.P.T. D.* DATE *11/10/16* AUTHORITY *Casualty List B 21*

DATE OF ATTESTATION *29 Sept. 1915* TRANSFERRED TO *S.P.C. D.* DATE *21-4-17* AUTHORITY *Proctor*

ASSIGNED PAY MONTHLY \$ *15.00* DATE EFFECTIVE *1/5/16*

PAYABLE TO *Mrs. H.R. Dalgleish Duurea man Canada* 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	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS								
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1	2	3	4	1	2	3	4				CREDIT	DEBIT											
			\$	C.			\$	C.			\$	C.																				NO.	DATE	NO.	DATE	NO.	DATE	NO.	DATE
<i>1916</i>																																							
<i>May 1</i>			<i>4 77</i>																																				
<i>31</i>	<i>31</i>	<i>1</i>	<i>31</i>	<i>31</i>	<i>10</i>	<i>3</i>	<i>10</i>					<i>4 77</i>																											
<i>June 1-30</i>	<i>30</i>	<i>..</i>	<i>30</i>	<i>30</i>	<i>..</i>	<i>3</i>						<i>33</i>			<i>150 30</i>																								
<i>July 1-4</i>	<i>4</i>	<i>..</i>	<i>4</i>	<i>4</i>	<i>..</i>	<i>40</i>						<i>4 40</i>																											
<i>July 27</i>	<i>27</i>	<i>..</i>	<i>27</i>	<i>27</i>	<i>..</i>	<i>2 70</i>						<i>29 70</i>																											
<i>Aug 1-31</i>	<i>31</i>	<i>..</i>	<i>31</i>	<i>31</i>	<i>..</i>	<i>3 10</i>						<i>34 10</i>	<i>493</i>	<i>21/1/16</i>	<i>1916</i>																								
<i>Sept 1-10</i>	<i>10</i>	<i>1</i>	<i>10</i>	<i>10</i>	<i>10</i>	<i>1</i>						<i>11</i>																											
<i>4/30</i>						<i>13 30</i>																																	
<i>4/20/9</i>	<i>20</i>	<i>..</i>	<i>20</i>	<i>20</i>	<i>10</i>	<i>2 00</i>						<i>22 00</i>																											
<i>Oct 1-31</i>	<i>31</i>	<i>..</i>	<i>31</i>	<i>31</i>	<i>10</i>	<i>3 10</i>						<i>34 10</i>																											
<i>Nov 1-20</i>	<i>20</i>	<i>..</i>	<i>20</i>	<i>20</i>	<i>..</i>	<i>2</i>						<i>32</i>																											
<i>Dec 1-31</i>	<i>31</i>	<i>..</i>	<i>31</i>	<i>31</i>	<i>..</i>	<i>3 10</i>						<i>34 10</i>																											
<i>Jan 1</i>	<i>31</i>	<i>100</i>	<i>24 50</i>									<i>34 10</i>																											
<i>Jan 31</i>	<i>31</i>	<i>..</i>	<i>34 10</i>			<i>2 45 0</i>						<i>34 10</i>																											
<i>2/28/17</i>	<i>28</i>	<i>..</i>	<i>30 80</i>									<i>30 80</i>																											
			<i>339 17</i>									<i>339 17</i>																											

Checked *[Signature]*

Checked *[Signature]*

Checked *[Signature]*

*67/0530 10/6
200 3145 24/100
C.P.T. D. 1917
C.O. 3214 1/11*

*R.D. 458 27/11
3922.008 4344.00
18/12 10-1-17
C.C.D.
491830/1*

*Transferred to Pensions
11/9/16 Auth. P.O. 77 21/9/16*

C.I.

* Strike out whichever inapplicable

ASSIGNED PAY. EFFECTIVE DATE: - 1-5-16 AMOUNT: - 15 ⁰⁰	ENGLAND or CANADA. ENGLAND or CANADA.	SEPARATION ALLOWANCE. EFFECTIVE DATE: -	ENGLAND or CANADA. NAME: DALGLEISH Wilfrid NUMBER: - 425537
NAME, ADDRESS, RELATIONSHIP & AUTHORITY		PARTICULARS OF RANK OR APPOINTMENT	
Mrs. G. R. Dalglish (Mother) Dunrea, Manitoba,		4277	Private
Stopped eff. 1-4-14		Cash to Cash	
		MD10	
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS		UNIT AND TRANSFERS	
DATE OF PAYMENT NUMBER OF A.R. UNIT PAID BY AMOUNT		ORIGINAL UNIT: - 45 th Battalion DATE ACCOUNT FIRST OPENED: - 1-5-16	
5-3-14 4450 B.A.P. 15 73 00		56.R.T.	
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS		DAILY RATES OF PAY AND ALLOWANCES	
DATE OF PAYMENT NUMBER OF A.R. UNIT PAID BY AMOUNT		AUTHORITY PAY F.A. P.F.A. SUBS'CE ALL'CE	
		1 - 10	

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
5-3-14	4450	B.A.P.	15 73 00				

PARTICULARS OF RENDERING NON-EFFECTIVE: *October 31/14 1101 4377 3 months 8/14 1501 2110 2500 223 8/14 150 8/14 150 8/14 150*

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
1918									102 36		
Mar 31	Balance Forward								102 36		
April		PP	33					15	120 36		
			33					15			
May		PP	34 10	B.A.P.				15			
			34 10	CR 3606 31/5/18 Gen Base Dept	2 46			15	135 00		
June			33	B.A.P.				15	153 00		
			33	389. SCRT 15/6/18	2 68				150 32		
				531 ✓ 20.6.18	3 57				146 75		
			32 -		6 25			15			
July			34 10	ap.				15	165 85		
			34 10	663. SCRT 15/7	3 57				162 28		
				879. ✓ 31/7	3 57				158 71		
			34 10		7 14			15			
Aug			34 10	ap.				15	177 81		
			34 10	1004. ✓ 15/8	3 57				170 67		
				1080. ✓ 21/8	3 57						
			34 10		7 14			15			
Sept			33 -	ap.				15	188 67		
			33	1201. ✓ 15/9	3 57				185 10		
				1311. ✓ 30/9	3 57				181 53		
			33		7 14			15			
Oct			34 10	ap.				15	200 63		
			34 10	1411. ✓ 15/10	3 73				196 90		
				CR 1515 ✓ 31/10	3 73				193 17		
			34 10		7 46			15			

COMPILED BY *John Jones*
CHECKED BY *[Signature]*

NUMBER	RANK	NAME	MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
				forward								19317		
Nov				AP	33	-					15	21115		
				1603. 5 CRT. (57) 20/11				933				20184		
Dec				AP	34	10					15	22094		
Jan				AP	34	10					15	24004		
					10120			933			45			
Feb.				AP	30	80					15	25584		
				5798. 66/11. Epnom 2/1				487				25097		
				4054 3/2 Epnom				487				24610		
				725 19/2 - "				4867				19443		
Mar				AP	34	10		5941			15	21653		
				17. 19/2 - 1/2/19 0050 25/2/19 CRTS	7	30						22383		
							6450 5/3 CRTS	7300				15083		
							3935 120/3 KP	13741				14110		
					7220			14114			30.			

V.O. 27.3.1954 33 CRT.

War Veterans Allowance

Name: *Wilfred Halgleish*

No: *425537*

1. THEATRES OF SERVICE

(1) South African War

Date and port of disembarkation:

(2) World War I *Canada, U.K. France.*

) Date(s) disembarked in U.K.
 IF CANADA)
 AND) Date(s) S.O.S. in U.K. for Canada
 U.K. ONLY)
) Period(s) of desertion in U.K.

(3) World War II

Date of embarkation:

(4) Korean War

Date of embarkation:

2. Date and place of all enlistments:

29 September 1915 Camp Hughes, Man

3. Date of all discharges and reason:

4 April 1919. Demob.

4. Date and place of birth as per attestation paper:

17 March 1896. Sunra. Man.

5. Marital status: If married, name in full of wife:

Single

6. Any other military service:

Nil

7. Decorations, if any.

Nil

Clerk's Initials:

*Winnipeg
7/12/59*

SECTION OF SERVICE

(1) Section 1

Date and time of departure

(2) Section 2

- (a) Date(s) of departure in U.K.
- (b) Date(s) of departure in U.S.A.
- (c) Date(s) of departure in U.K. only
- (d) Date(s) of departure in U.S.A. only

(3) Section 3

Date of arrival

(a) Section 4

Date of arrival

Date and time of all arrivals

Date of all departures and arrivals

Date and time of arrival and departure

Medical status of patient

Date and time of arrival

Date and time of departure

Date of arrival

ACCESU REVIENED/DECLHUUFRIBI
REVISION D'ACCES/DECLHUUFRIB:

RECOIU GRUUR/GRUURE D'ACHIAVESI RG. 150

ACC. 1992-93/1166

YUL/DUX/DUITI 2269-9

FILE/DOSSIERI 425537

OPEN/OUVERT ✓

FO

CLOSED/REMISE

D

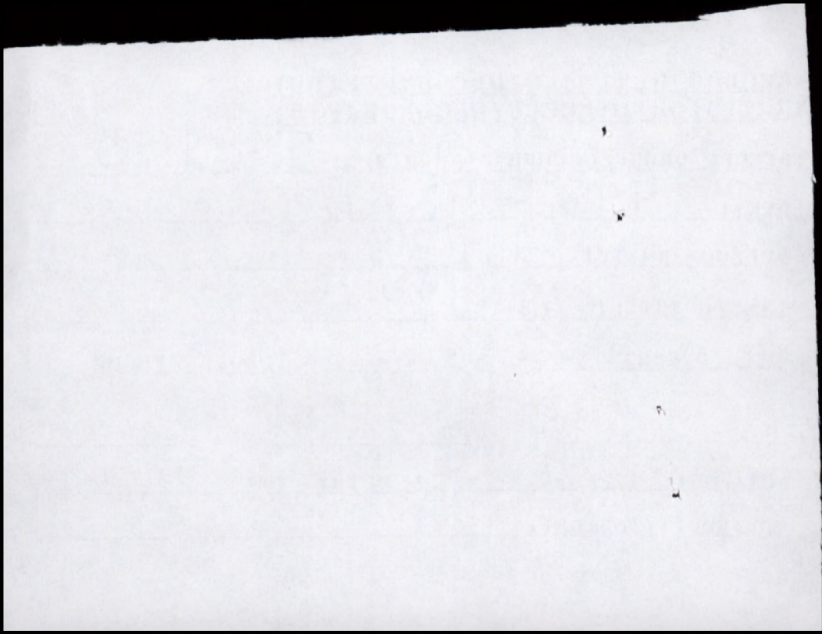
FO

RE

DY/PARI J.P.

DATE July 18/01

AUTHORITY/AUTORITEBI



66

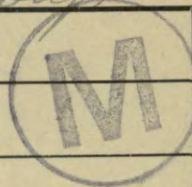
M

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)

M. D.
10.

Group 1

WAR SERVICE BADGE
CLASS "A" No. 1625298



1. No. 425537

2 Rank. Spr.

3. Name. Dalgleish, W.

4. Unit. CrT 45th Bn.

5 Date of Discharge 4 4 19 Place Winnipeg.

6 Reason for Discharge

A Mother.

7. Authority.

8. Proposed Residence after Discharge Wawanesa, Man.

War Service Badge
Class "A" No.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate
M. F. W.? H. M. T. S. EMPRESS OF BRITAIN

EMBARKED 23-3-19

W Dalgleish

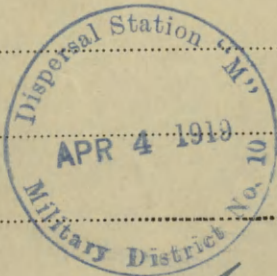
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

Date



Signature

(O. C. Discharging Unit.)

amk.

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).
13. Pay Book (A.B.64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

1.	N
2.	F
3.	N
4.	U
5.	I
6.	F
7.	
8.	
9.	
10.	

Group..... A

Checked by No. 24

[Signature]

Date 22/3/19

- 20 -

Perforated sheet for Will from Pay Book of Reg.
 No. 425537
 Name Wilfred Wilfred
 Unit 5th A.R.S.

Military Will.

I, Wilfred Wilfred do
 hereby bequeath all
 my property personal
 + together with to my mother
 Helen R. Wilfred of
 Dunsmuir, Man. Canada

Witness
 Capt. L. H. D'Amico
 H. Tucker 5th A.R.S.

Signature Wilfred Wilfred

Rank and Regt 5th A.R.S.

Date June 9th 1917

DISCHARGE FROM HOSPITAL.

Canadian Form A.M.S 1002.
For W.O's, N.C.O's & Men.

70

Do not fail
to strike out
two of these
on each sheet

1. To ~~Chief Paymaster~~ Canadians,
7, Millbank, London, S.W.
 2. To ~~Officer in Charge~~ Canadians (Casualty Branch),
7, Millbank, London, S.W.
 3. To Officer Commanding, 45th Res Bn
(Name of Unit to which discharge is made)
- At Lower basar Camp Station.

Unit or Corps 45th Bn Regt. Number 425537 Rank Pte. Name (Surname first) Salisbury W.

The above mentioned Canadian soldier will be discharged from this Hospital on the

24 day of May 1916.
He may be expected to arrive at Winton Railway Station,
at 12 o'clock noon on the 24 day of May 1916.

- i. I consider him "Fit for duty"
 - ii. ~~I do not consider him "Fit for Duty"~~
 - iii. ~~I consider him fit for his former "light duty"~~
 - iv. ~~I do not consider him fit for his former "light duty"~~
- Strike out that which is inapplicable.

Name of Central Hospital Lower Basar Camp at Stoncliffe
Signed Shumway Capt J Officer in Charge.

This return is to be made out in quadruplicate. If discharge is made to the Canadian Casualty Assembly Centre, one copy is to be forwarded to each of the Officers specified 48 hours previous to discharge. If discharge is made to any other Unit, the copies are to be forwarded 24 hours previous to discharge. One copy is to be retained by Hospital for its records.

*For patients admitted to hospitals from "light duty Service" only.

DISCHARGES FROM HOSPITALS.

HOSPITALS.	Patients from Troops serving Overseas from the United Kingdom.	Patients from Troops stationed in the United Kingdom.			
		Admitted from "Light Duty Service."		Other Patients.	
		All Patients.	If fit to resume former "Light Duty."	If not fit to resume former "Light Duty."	If "Fit for Duty."
British Hospitals.	Cannot Discharge.	Discharge to former "Light Duty."	Cannot Discharge.	Discharge to Unit or Reserve Unit.	Cannot Discharge.
Canadian Military Hospitals.	Cannot Discharge.	Discharge to former "Light Duty."	Cannot Discharge.	Discharge to Unit or Reserve Unit.	Cannot Discharge.
Canadian Convalescent Hospitals.	Discharge to Canadian Casualty Assembly Centre.	Discharge to former "Light Duty."	Discharge to Canadian Casualty Assembly Centre.	Discharge to Unit or Reserve Unit.	Discharge to Canadian Casualty Assembly Centre.

This form may be obtained from Officer in Charge of Purchases, Canadians, 14, Gt. Smith Street, London, S.W.

DISCHARGE FROM HOSPITAL

MADE AT CROXLEY

1804

DICKINSON BOND

1804

MADE AT CROXLEY

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

D 290

Mar 1/16.

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

15			
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218

PARTICULARS OF SEPARATION ALLOWANCE

No. *425537*
 Rank *Plt* Promoted Reverted Discharge
 Soldier's Name *Wilfred Dalgleish*
 Battalion *45 Battrn.*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *Mrs. Helen Reid Dalgleish*
 Address *Dunree Man.*
 Change of Address
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Dec 31</i>			<i>330</i>	<i>330</i>	<i>L</i>
<i>Jan</i>	<i>66159 B</i>		<i>15</i>	<i>15</i>	<i>S</i>
<i>Feb.</i>	<i>91979 E</i>		<i>15</i>	<i>15</i>	
<i>Mar</i>	<i>121128 A</i>		<i>15</i>	<i>15</i>	
<i>April</i>	<i>3600 B</i>		<i>15</i>	<i>15</i>	<i>L</i>
<i>May</i>	<i>19810 M</i>		<i>15</i>	<i>15</i>	<i>L</i>
<i>June</i>	<i>23374 I</i>		<i>15</i>	<i>15</i>	<i>L</i>
<i>July</i>	<i>27997 Q</i>		<i>15</i>	<i>15</i>	<i>L</i>
<i>Aug</i>	<i>37179 I</i>		<i>15</i>	<i>15</i>	<i>L</i>
<i>Sept</i>	<i>46689 L</i>		<i>15</i>	<i>15</i>	<i>L</i>
<i>Oct</i>	<i>54611 M</i>		<i>15</i>	<i>15</i>	
<i>Nov</i>	<i>57053 I</i>		<i>15</i>	<i>15</i>	
<i>Dec</i>	<i>69083 R</i>		<i>15</i>	<i>15</i>	
<i>Jan</i>	<i>74792 M</i>		<i>15</i>	<i>15</i>	
<i>Feb</i>	<i>80008 P</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Mar</i>	<i>82118 J</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Apr</i>			<i>555</i>	<i>555</i>	

4189-W-11

M. F. W. 128
400M-6-17-1772-39-1141
L. L. 22220-M. & D. 7998.

AUDITED
 A/c Closed 31-3-19
 Ret'd per... *Impress of Binlan*
 Date 31-3-19... M.F.W.187 7-4-19
 Clerk... *J. Clarke*



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

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PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
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M. F. W. 128
 4003-6-17-1772-38-1141
 L. L. 22320-M. & D. 7483.

Emp of Brit

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

AUDITOR *[Signature]* PAYMASTER *[Signature]*

M. OR S. _____ REGT. No. *425537* RANK *Spr* NAME (IN FULL) *Dalglish W*

ORIGINAL UNIT C.E.F. *45* IF IN P.F. WHAT UNIT? _____ (BLOCK LETTERS SURNAME FIRST)

PLACE OF ATTESTATION *Dis Str M* DATE *MAR 23 1919* AUTHORITY *D098*

DATE OF ATTESTATION *25-9-15* TRANSFERRED TO _____ DATE _____ AUTHORITY _____

ASSIGNED PAY \$ *15.00* DATE EFFECTIVE _____

PAYABLE TO *Mr W. Dalglish* RELATIONSHIP _____ ANY CHANGE IN ASSIGNEE OR ADDRESS _____

ADDRESS *Union Bank ~~Branch~~* _____

Nawanessa Man _____

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE *Closed 31-3-19 PAYMEN 197* EFFECTIVE _____

DISCHARGED PLACE *MD10* DATE *APR - 4 1919* REASON *D* AUTHORITY *D098* IF ENTITLED TO POST DISCHARGE PAY _____

MONTH	PAY AND F.A.		OTHER CREDITS	TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS	
	NO. OF DAYS	RATE		AMOUNT		COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3					DEBIT	CREDIT		
				\$	C.														\$
31-3-19					150	83											150	83	BAL. ENG L.P.C.
1-12/4/19	12	1.00	13	20	35	-													Clothing Allow. 1st payment W.S.G.
					70	-													Advances - Boat - Train
																			A.P. chkd: Eng L.P.C. <i>April</i>
																			Enrol chkd to his
																			193 days @ min W.S.G.
					420	-													W.S.S.
																			Balance
																			70 -
																			8 80
					15 00	435	-												350 -
May 8																			341 20
- 25																			356 20
June 9																			286 20
July 9																			241 20
																			201 20
																			131 20
																			61 20
																			8
																			435
																			426 20
																			8 50
																			435
																			W
																			W

AUDITED
AUG 5 1919
Audit Clerk
M. F. W.

Handwritten signature

50