ATTESTATION PAPER.

No. Lieut.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? ..... Calvin Wellington Way
2. In what Town, Township or Parish, and in what Country were you born? ..... Kingston Ontario Canada
3. What is the name of your next-of-kin? ..... Sidney W. Way (Father)
4. What is the address of your next-of-kin? ..... 270 University ave. Kingston Ontario
5. What is the date of your birth? ..... April 19th 1891
6. What is your Trade or Calling? ..... Student.
7. Are you married? ..... No
8. Are you willing to be vaccinated or re-vaccinated? ..... yes
9. Do you now belong to the Active Militia? ..... yes
10. Have you ever served in any Military Force? If so, state particulars of former Service. ..... Cobourg G. Art. 3 yrs. 14th P.W.O.R. 2 yrs.
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

Lieut Battalion

Lt. Calvin W. Way (Signature of Man).

Lt. J. H. Stewart (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Calvin W. Way, 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.

Calvin W. Way (Signature of Recruit)

Date Sept 22 1914. J H Stewart (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Calvin W. Way, 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.

Calvin W. Way (Signature of Recruit)

Date Sept 22 1914. J H Stewart (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 Valcartier, 22nd September 1914 this 5 day of ..... 1914.

E A Ewart (Signature of Justice)

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

E Wasson (Approving Officer)

100 M.—8-14.
H.Q. 1772-1-13.

1 Batt
14 Reg

Description of Calvin Wellington Day on Enlistment.

Apparent Age 23 years 7 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 7 ins.

Chest measurement: Girth when fully expanded 35 ins.
Range of expansion 3 ins.

Complexion fair

Eyes blue

Hair Light brown

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

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

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

Large white birthmark 3" by 1" between right shoulder and spinal column. Vaccination mark left arm.

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 Aug 26 1914. [signature]

Place Val Cartier [signature] 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.

Colin W. Day 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.

[signature] (Signature of Officer)

Date Valcartier, 22nd September 1914. Lt.-Col.

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
Attestation Papers.....
Declaration of change of name.....
Authority for special enlistments.....
Documents of re-enlisted men.....
Regimental Conduct Sheet.....
Compulsory Stoppages.....
Casualty Forms.....
Proceedings on discharge.....
Corps History Sheet.....
Date and No. of Deposit Receipt for Purchase Money and Amount.....
Parchment Certificate.....
Medical Report for Invalids.....
Medical History Sheet.....
Proceedings of Regt. Court Martial.....
Copies of Convictions by Civil Power.....
Company Conduct Sheet.....
Clothing Transfer Certificate.....
Inventory of Kit.....
Last Pay Certificate.....

1 Cas card
1 R 149

M. F. W. 62.
50M.—9-16.
H. Q. 1772—39—935.

M.L. 22 6/20

DISCHARGE DOCUMENTS

R. O. No. .....
H. Q. No. .....

Name DAY CALVIN, WELLINGTON

Regt. No. — Rank Lieut

Corps 2nd Bn C.E.F.

07244

Killed in Action 26 Apr 15

J. H

J. H

H

Pay Corp

BOX 404304

1-20
1-20

Open
ATIP

K/A 23-4-1915

Box
2376

8915—Wt. W4862—540.—600,000.—9-14.—G. A. T. & S., Ltd. Forms B. 103/1.

Army Form B. 103.

CERTIFIED CORRECT
14 NOV 1918
CANADIAN ... OFFICE

Casualty Form—Active Service.

Regiment or Corps 2nd Bn C E F

Regimental No. — Rank Lieut Name Day. Calvin Willington

Enlisted (a) 22. 9. 1914 Terms of Service (a) Period of War Service reckons from (a) 22. 9. 1914

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: 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.
26/4/15	1st Can Div.	Killed.	—	26-4-15	Telegram A29.
		OC 2nd Bn Killed in Action Operations to 26,4,15	Field		B 213 dated 1,5,15 [signature] CAPT. OFFICER i/c RECORDS CANADIAN SECTION G. H. Q.

H.

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.

Report		Record of promotions. reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				

W.A.T.

~~K.4-7-2/D.~~

Army Form B. 2090A.

K 14-D-

FIELD SERVICE.

REPORT of Death of a Soldier to be forwarded to the War Office with the least possible delay after receipt of notification of death on Army Form B. 213 or Army Form A. 36 or from other official documentary sources.

REGIMENT or CORPS: 2nd. Battalion.

Squadron, Troop, Battery or Company:

Regtl. No.

Rank: Lieut.

Name: Day C.W.

Died — Date: April 26th. 1915.

Died — Place: In the field.

Died — Cause of Death*: Killed in action.

* Specially state if killed in action, or died from wounds received in action, or from illness due to field operations or to fatigue, privation, or exposure while on military duty, or from injury while on military duty.

State whether he leaves a will or not

(*a*) in Pay Book (Army Book 64): No.

(*b*) in Small Book (if at Base): No.

(*c*) as a separate document: No.

All private documents and effects received from the front or hospital, as well as the Pay Book, should be examined, and if any will is found it should be at once forwarded to the War Office.

Any information received as to verbal expressions by a deceased soldier of his wishes as to the disposal of his estate should be reported to the War Office as soon as possible.

A duplicate of this Report is to be sent to the Paymaster at the Base (see Field Service Regulations, Part II.), together with the deceased's Pay Book (after withdrawal of any will from the latter). If the deceased's Small Book is at the Base, it should be forwarded to the War Office with this Report.

Signature of Officer in charge of Section Adjutant-General's Office at the Base: [signature]

Lieut. Colonel.

D.A.A.G.

Station and Date: Rouen. June 3rd., 1915.

(4 11 3) H W V 100,000 8/14 Forms

29247 THE MORTIMER SYSTEMS
OTTAWA, CANADA

NAME DAY, Calvin Wellington Lieut.

Regimental No.

Unit 2nd Bat'n.

Date of enlistment 22nd Sept., 1914

Place of birth, Ontario

Married (yes or no) No

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin
Sidney W. Day, (father)
270 University Ave., Kingston, Ont.

Date and place discharged 24/4/15 C.L. 46

Reason for discharge Killed in action

Character on discharge

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
			2.00	80												
[illegible]	30/10/14	40	[illegible]	[illegible]	40	60	24	1	104			102 50			102 50	
1/11/14	30/11/14	30	2.00	60	30	.60	18	1 50	79 50			77 50			77 50	✓
1/12/14	31/12/14	31	2	62	31	60	18 60	2	82 60			82 60			82 60	✓
1/1/15	31/1/15	31.		62	31.		18 60		80 60			80 60			80 60	✓
1/2/15	28/2/15	28		56	28		16 80		72 80			72 80			72 80	✓
1/3/15	31/3/15	31		62	31		18 60	31.	111 60			111 60			111 60	Mens of

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					

Day. C. W.

Lieut. 2nd. Battn.

KILLED IN ACTION:-

Correct date of death:- 23-4-15.

C.L. 28-4-15. 46.
20-4-16. 344. Reported from base.

A.M.D. 2 DEPT.

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

Surname Christian Name Reg. No.

Rank Unit

MEDICAL BOARD held at Date Serial No.

(1)

Other Medical Boards at Date Serial No.

(2)

(3)

(4)

(5)

Condition found by Board

Disposition Recommended

(1)

(2)

(3)

(4)

(5)

PENSIONS & CLAIMS BOARD held at Date .....

Disposition

Remarks

Indicate by a P.T.O. if continued on other side.

H. W. & V., Ld.—3594-15.

a.F.B. 104-93

Name **DAY C.W.** *Rank* **Lieutenant** *Reg. No.*

Unit **2nd Battalion**

Next of Kin Canada

Date		Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
26	4	Rep. from Base	Killed		46	27/4	
		~~Correct date of death~~	23-4-15		~~344~~		

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

Number ..... Rank LIEUT

Surname DAY

Christian Names CALVIN WELLINGTON

Unit 2nd Bn ..... Theatre of War FRANCE

Date of Service 22.9.14 - 9.2.15 23.4.15

Remarks

Latest Address Alfred Ernest Day (eldest B.)
256 University Ave
Kingston Ont

Roll No. Page 4022 13.4.16

M. A. 7615 Desp

No. Rank Lieut. Name Day, Calvin W.

T. O. S. Unit 14th Regt.

M. D. 3

PAID FROM	PAID TO	SIG OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914	1914			
Au. 7	Au. 22	✓		
Aug. 23	Sep. 21	✓	now shown on 2nd Bn. paylist.	
Sep. 22	Oct. 31	✓		

UNIT SAILED OCT 3 1914

Eligible for 14/15 Star. Lt. 2nd Bn. H.A.2.

DAY, Calvin Wellington, Lieut. 2nd Bn.

13313

MEDALS & DECORATIONS — Alfred Ernest Day (Elder Brother)
256 University Ave., Kingston, Ont.

PLAQUE & SCROLL — Brother, as above.

(Serial no. 782174.) Scroll Desp. FEB 18 1921 Reqn. No. Z-20971

Plaque Desp. DEC 23 1921 Reqn No. Ph 873

MEMORIAL CROSS — Brother, as above.
Mother, died subsequently.

Desp. JUL 5 1920 (B.) C. 14212.

15

13.

455

CARD NO.

FOLL. D

SURNAME. Day

CHRISTIAN NAMES Calvin Wellington.

REGL. NO. RANK Lieut.

UNIT 2nd Bn

FORMER CORPS 14th Regt. (2 yrs)

NEXT OF KIN.

NAMES IN FULL Day, Sidney W.

RELATIONSHIP TO SOLDIER Father

ADDRESS 270 University Ave., Kingston, Ont.

CHANGE OF ADDRESS

Also notify A. E. Day (brother) % Nickle, Farrell & Day Kingston Ont.

with letter 8/6/17

COUNTRY OF BIRTH Canada, Kingston, Ont. DATE April 19th, 1891

PLACE OF ATTESTATION Valcartier, P.Q. DATE Sept. 22nd, 1914.

O.I.S. 7-10-14 2/13

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

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

Sailed from Quebec per S.S. Cassandra, Oct. 15/14

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING Student, RELIGION Church of England.

DESCRIPTION.

APPARENT AGE 23 YEARS 7. MONTHS

HEIGHT 5 FEET 7. INCHES

CHEST MEASUREMENT 35 INCHES EXPANSION 3. INCHES

COMPLEXION Fair EYES Blue HAIR Light Brown.

DISTINGUISHING MARKS Large white birthmark 3" by 1½" between R shoulder & spinal column. Vacc left arm.

MEDICAL EXAMINATION. PLACE Valcartier, P.Q. DATE Aug. 26th, 1914.

Present Address. Not Stated.

NAME Day, Calvin Wellington.

H. Q. FILE No. 649-

REGT'L. No.

RANK AND CORPS Lieut. 2nd. Battalion.

NO. 431

FOLL.

CABLE NO.	CABLE DATE	NATURE OF CASUALTY
C. 383.	Apl. 27/15.	Killed in action, 26/4/15 D65.
B2090a	Rouen 13-4-14	Killed in Action 23-4-15.

L. L. Job 83225—M. & D. 5812.

M. F. W. 42—50m 7-15.
H. Q. 1772—39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
46			Killed
	~~Date of death~~		~~April 26th /15.~~
	H.Q. file #332-14-5.		
344.	Correct date of death		April 23rd 1915. As Per List 344

P—15.

ASSIGNED PAY. UNIT. 2nd Battalion RANK. Lieut NAME.

	NAME OF	DATE	AUTHORITY		DATE	AUTHORITY
Beneficiary						
Address						
Amount. $						

Name Day.
Initials C. W.
Bank

Separation Allowance issued. Yes or No..... Killed in action 24/4/15 C. L. 46

DATE	No OF DAYS	REGT RATE	AMOUNT REGIMENTAL	~~PARTICULARS~~ F.A.	MESSING	OTHER CREDITS	~~CK. NO.~~ TOTAL	~~OR.~~ ASS. PAY	~~DR.~~ CHARGES	~~ASSIGNED PAY PAID IN CANADA~~ DR. BALANCE	CREDIT BALANCE	~~SPECIAL AUTHORITIES~~ ~~To be initialled by P.M. in every case.~~ BANK	INITIALS.
22. 9. 14 30. 10. 14	40	$2. Pay 60¢ F.A. $1. Mess	80	24			104				1 50	102 50	
1. 11. 14 30. 11. 14	30		60	18		1 50	79 50				2	77 50	
1. 12. 14 31. 12. 14	31		62	18 60		2	82 60					82 60	
1. 1. 15 31. 1. 15	31		62	18 60			80 60					80 60	
1. 2. 15 28. 2. 15	28		56	16 80			72 80					72 80	
1. 3. 15 31. 3. 15	31		62	18 60	31		111 60					111 60	
1. 4. 15 30. 4. 15	30		60	18	58		136					136	Mess includes Feb. 28 days

Nil Wage sent to Ottawa 7-10-16

Statement of
SEP 30 1916
Account rendered

NAME Day. C. H. (Lieut)

DATE OF APPOINTMENT 22.9.14.

MARRIED (YES OR NO) No.

NEXT OF KIN:— NAME Father. Sidney. H. Day.

ADDRESS 270. University Ave. Kingston. Ont.

DATE NON-EFFECTIVE AND CAUSE 24/4/15 Killed in action

UNIT 2 Battalion

ASSIGNED PAY:—

MONTHLY AMOUNT

TO WHOM PAYABLE

1915-16

BANK IN WHICH PAY & ALLOWANCES DEPOSITED Bank of Montreal

PERIOD From 1915	PERIOD To	No. of Days	Regtl. Rate	PAY Amount of Regimental	PAY Command	PAY Adjutant	PAY Cr. from Prev. Account	PAY Total Pay	Rate of Field Allowance	ALLOWANCES Amount of Field Allowance	ALLOWANCES P. F. Allowance	ALLOWANCES Messing	ALLOWANCES Subsistence	ALLOWANCES Total	Total Pay and Allowances	Assigned Pay	Sundry Deductions	Net P. A.	Paid in Cash	Deposited in Bank	Carried Forward	Remarks
apl 1	apl 30	30	2	60				60	60	18		58		76	136			136		136		Incl. Feb

SUNDRY PAYMENTS

Date		Cheque No.	Particulars	Amount $	c.	£	s.	d.	Remarks
5	21.	1436	Outfit acc	100		20	10	11	

NAME Day. C. W. (Lieut)

DATE OF APPOINTMENT 22.9.14.

MARRIED (YES OR NO) No.

NEXT OF KIN:— NAME Father. Sidney. H. Day.

ADDRESS 270. University Ave. Kingston. Ont.

DATE NON-EFFECTIVE AND CAUSE 24/4/15. C.I. 46 Killed in action

UNIT 2 Battalion

ASSIGNED PAY:—

MONTHLY AMOUNT

TO WHOM PAYABLE

1915-16

BANK IN WHICH PAY & ALLOWANCES DEPOSITED Bank of

PERIOD From 1915	PERIOD To	No. of Days	Regtl. Rate	PAY Amount of Regimental	PAY Command	PAY Adjutant	PAY Cr. from Prev. Account	PAY Total Pay	Rate of Field Allowance	ALLOWANCES Amount of Field Allowance	ALLOWANCES P. F. Allowance	ALLOWANCES Messing	ALLOWANCES Subsistence	ALLOWANCES Total	Total Pay and Allowances	Assigned Pay	Sundry Deductions	Net P. A.	Paid in Cash
Apl 1	Apl 30	30	2	60				60	60	18		58		76	136			136	

SUNDRY PAYMENTS

DATE		CHEQUE No.	PARTICULARS	AMOUNT $	C.	£	S.	D.
5	21.	1436	Outfit all	100		20	10	11

Rank and Name Day, Calvin Wellington (Lieut.) + Sig. Officer

Regimental No.

Unit 2nd Battn.

Date of enlistment Sept. 22, 1914

Place of birth Ontario

Married (Yes or No) No

If in Permanent Force

Promotions or appointments

Name and Address of Next-of-kin

Sidney W. Day - father

270 University Ave., Kingston, Ont.

Date and place of discharge

Reason for discharge

Character on discharge

A.P. Filed

Killed in action

R.M.

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
	W.O.	Embarked	Avonmouth	9/4/15	
		On Strength 2nd Inf. Battn.	France	1/4/15	A.F. B 158
27/4/15	W.O.	Reported from Base Killed in Action			On. Cas. Report No 46.
25.15	O/C 2nd Bn.	Struck off Strength Killed in action	-	23-4-15 ~~26-4-15~~	C.L. 344. RL9-D-65. Pt. 016 2 Bn 4/14 4/16 Part 11 of 10 AFB. 2090A

A.F.B. 14 NOV. 1918

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				