6th M. D. 1st Depot Battalion Nova Scotia Regiment

Regtl. No. 3188463

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT. 1917.

COPIED FOR B

(Class me)

1. Surname: Dingle
2. Christian name: James Lawrence
3. Present address: Admiral Rock Hants Co NS
4. Military Service Act letter and number: 608 799 GC
5. Date of birth: 19th May 1896
6. Place of birth (town, township or county and country): Admiral Rock NS
7. Married, widower or single: Single
8. Religion: Presbyterian
9. Trade or calling: Farmer
10. Name of next-of-kin: Thomas Dingle
11. Relationship of next-of-kin: Father
12. Address of next-of-kin: Admiral Rock NS
13. Whether at present a member of the Active Militia: No
14. Particulars of previous military or naval service, if any: No
15. Medical Examination under Military Service Act:—
    (a) Place Aldershot NS (b) Date 15/6/18 (c) Category a 2

Sufficient Address

DECLARATION OF RECRUIT

I, James Lawrence Dingle, do solemnly declare that the above particulars refer to me, and are true.

James Lawrence Dingle (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age	22 yrs	mths
Height	5' ft 4	ins.
Chest measurement: fully expanded	36	ins.
Chest measurement: range of expansion	2½	ins.
Complexion	Dark	
Eyes	Grey	
Hair	Dark	

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

Nil

L. H. Parsons Major

for O. C. 1st Depot Btln.

T. S. Regt.

Place Aldershot NS Date 8/6/18

M. F. W. 133
5M.—6-18.

18/7/19/22

REGIMENTAL DOCUMENTS

NAME DINGLE JAMES LAWRENCE REGT. NO. 3188463 UNIT 17th Bn H. Q. FILE NO.

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133, or 51)		Reg No. 3188463			DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
TRAINING HISTORY SHEET (M.F.W. 113)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)				17096	
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
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
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)					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
Pant cut					
Drip cut					
WSB					

CANADIAN FORCES CLAIMANT

404459

404452

Box #2524

COPIED FOR B

W. 2589
100M-11-18
17-39-1327

3188463	DINGLE	James Laurence
I.D. number **No. d'identification**	**Surname** **Nom de famille**	**Given names** **Prénoms**

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU PERSONNEL

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location
Lieu 2524

"CONTENTS CONFIDENTIAL"
"CONTENU CONFIDENTIEL"

ARC-1048 (r. 87/05)

M.S.A. 15.

G. Co
3188463

MILITARY SERVICE ACT, 1917.

ORIGINAL

MEDICAL HISTORY SHEET

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar.

COPIED FOR B

1. Surname Dingle Christian name James Lawrence
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 608799 G.C.
3. Consecutive number on schedule of men reporting for service (if he appears on it)
4. Address (including street and number, if any) Admiral Rock. Hants Co. N.S.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 15 day of June 1917, by the undersigned medical board sitting at Aldershot N.S.

5. Age as stated 22 Years 1 Months. 6. Apparent age Years Months
7. Height 5 Feet 4 Inches. 8. Weight 144 Pounds.
9. Chest measurement { Minimum 36 Ins. Maximum 38½ Ins. 10. Complexion dark { Eyes grey Hair dark
11. Physical development { Good Fair Poor 12. Smallpox marks nil.
13. Number of vaccination marks { Right arm Left arm one 14. When vaccinated last 1916
15. Distinctive marks and marks indicating congenital peculiarities or previous disease nil.
16. Slight defects but not sufficient to cause rejection

The man denies having had { Rheumatism Tuberculosis Syphilis We find no evidence of past { Rheumatism Tuberculosis Syphilis
(Strike out disease admitted or suspected.)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category A2 Rt. 20/30 Lt. 20/30 Hearing Normal

A J Hackwell Capt AMC President.

Member. Member.

Signature of Man James Lawrence Dingle

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
9-6-18		D.F. McInnis M.O.	25-6-18		D.F. McInnis M.O.
		M.O.	30-9-18		urine M.O.
		M.O.			M.O.

Joined 6th day of June 1918 at Aldershot N.S.

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	14th Res Bn	3188463		
Transferred to	17 Res Bn			16-8-18.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
Aldershot N.S.	June 15/18		

N.B.—This sheet is 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.

Surname O'Dwyer Christian Name James Lawrence

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital			Dates of Discharge from Hospital.			DISEASE.	Number of days in Hospital.	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Day	Month	Year	Day	Month	Year				

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

COPIED FOR B

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. 3188463 Rank Pte. Surname DINGLE
(Given name in full) James Lawrence
Unit or Corps 14th Res. Birthplace Admiral Rock N.S.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 160 lbs. Height 5 ft. 4 in. Colour of Eyes Grey

Nutrition Good

Pulse 72

Condition of arteries Good

Vision Rt. 6/6 Left 6/6

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

Identification marks, scars, or deformities. (Give cause and date of origin).
Scars left forearm.
~~Tonsil~~

Opinion as to general health and physical condition Good

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

Nervous System No Genito Urinary System No Cardio-Vascular System No

Special Senses No Integumentary System No Respiratory System No

Disturbance of Mentality No Muscular System 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.

No disability.

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

[OVER]

EXAMINATIONS

COPIED FOR B

THIS SECTION FOR USE OVERSEAS—

Examined at Bifron York (Overseas)

Date 23-5-14 Signed [illegible] 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 [illegible]

(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.)

C.A.D.C. 5009A

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

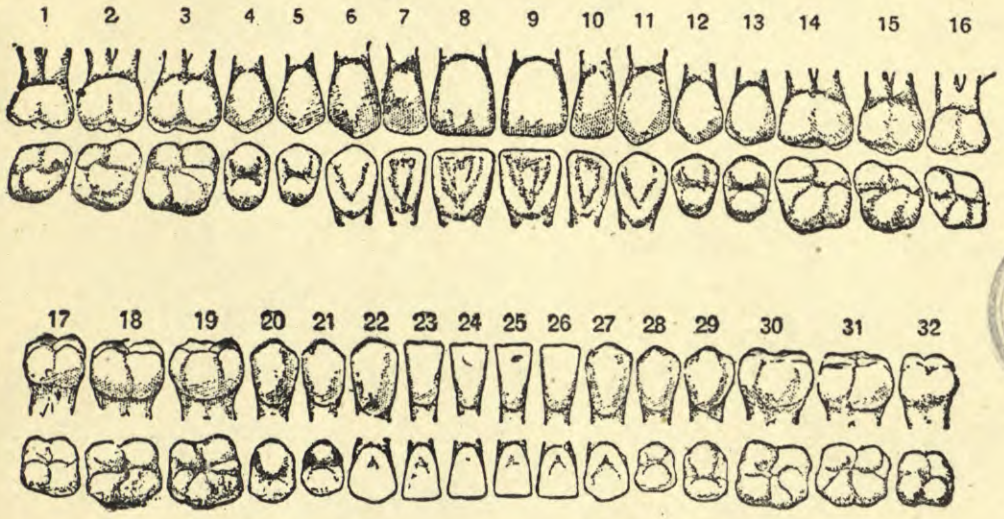
DIRECTIONS TO DENTAL OFFICERS

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) DINGLE, J. L.

REGIMENT 17th R. B. Bn. RANK Pte. No. 3188463

Date of Examination in England 23-5-19 Date of Examination in France



DENTAL BOARD 23 MAY 1919 RIPON

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 7, 12, 11, 16, 17, 32,
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper 3 4 5, 7 12 13, 14, 15, 16
   - (c) Full Lower
   - (d) Part Lower

ASSISTANT DIRECTOR OF DENTAL SERVICES M.D. No. 6 JUL 4 1919

HAS HE EVER REFUSED DENTAL TREATMENT? No

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "*Yes*" where applicable to any or all of *a*, *b* or *c*.)

- (a) In Canada No
- (b) In England Yes
- (c) In France

Signature of Dental Officer [signature]

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

District: M.D. 46

Name of Soldier: Dingle James R.

Regiment: 14th N.B. Regt. Rank: Pte. No. 3168463

INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

	Date		Amalgam	Temporary Filling (a),G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	Dentures U	Dentures L	Dentures P	Gold Clasp	Gold Filling	Crowns Gold	Crowns Porcelain	Bridge Work	OPERATOR	Military Dist.	REMARKS
Condition on first Examination	19-6-18											16 30									R.J. Irving	6	Cavities 7.11.18. Extractions 3.4.5.12.
	"	"										3.4.5. 12.13.14. 18.19.									R.J.I.	6	13.14, 18.19.

M.F.B. 465
2M-M-1-17
1772-39 950

P 880.

12-14

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 James Lawrence 2. Surname Dingle
3. Rank Pte 4. Original Unit 1st DB NSR 5. Reg. No. 3188463
6. Address, in full, to which future payments of gratuity are to be forwarded
P.O. Admiral Rock
Hants Co N.S.
7. Date of enlistment in the C.E.F. June 8 1918
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge nil
9. Relationship of such dependent NOT APPLICABLE
10. Address, in full, of such dependent NOT APPLICABLE
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? NOT APPLICABLE
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States?
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service
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 Canada 1st DB 2 mos.
England 17th Res. 10 mos.
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

5434. Wt. /30P. 150,000(8). 2/19. S.O.,F.Rd.

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

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

20. ~~Have you been issued with a War Service Badge? If so what class?~~

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

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

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

NOT APPLICABLE

(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 JUL 13 1919 (b) Reason for discharge DEMOBILIZATION

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit

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: Dingle J. L.

Place of Residence: Admiral Robt. Hants Co N.S.

Declared before me at: Ripon

This 2nd day of JUN 1919

Questions 12, 13, 14, 20, 24, 25, 26 and 27 not answered.

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.

D H Sutherland MAJOR

For Officer Comdg. 17th Can. Res. Bn.

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
			122 days	$280.00
			Less 40%	70
				$210.00

Certified Correct.

District Paymaster.

a.m.m.

Number 318463 Rank Pte.

Surname DINGLE

Christian Name James Lawrence

Units N.S.R., Theatre of War England

Date of Service 15-8-18

Remarks

Latest Address Admiral Rock, N.S.

Roll No. A Page 3434

200m.-2-21.M.

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

.....

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

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

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

.....

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

..... Railway.....

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

tination.....

(Sgd.).....

6 area B.

H. Q.

M. D. No. 6

Surname Dingle

T. O. S. June 8th 1918

Christian names James Lawrence

D. O. Pt. II 156 of 7-6-18

Regtl. No. 3188463 Rank Pte.

S. O. S. July 13th 1919

Unit N.S. Regt. 1st Depot Bn.

Reason Dis Demob

Auth. AO 1907 9-7-19 #6200

Next of kin Dingle Thomas Relationship Father

Address Admiral Rock Hants Co. N.S.

Also notify:

BORN—Place Canada Admiral Rock N.S. Date May 19th 1896

ATTESTED—Place Windsor N.S. Date June 8th 1918

O/S 3-9-18 25/1262

R/C 3-7-19 364/119

W. 22—10 M-7-18. 177239-839.

Form R 122.
2353—100M—9-12-16.

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Rank | Name DINGLE, James Lawrence. | Reg'l No. 3188463

Unit 102nd Bn 1st Bn N S | If in perm. Corps, What Unit? | Married or Single Single

Place and Date of Enlistment Aldershot N.S 8th June 1918 | Place of Birth Admiral Rock NS.

Name and Address, Next-of-Kin Thomas Dingle
Admiral Rock, Hants Co. NS. | Relationship Father

Assigned Pay Monthly $ | Payable to | Relationship

Separation Allowance $ | Payable to | Relationship

Discharge, Date and Place | Reason | Character

N/E. R.B. No. 11873
File H.L.
Category OR CAN

H. W. & V., Ld.—9546-16.

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.
		Arrived in England.		15 8 18	S S NELLORE
22 8 18	17 Res,	Taken on Strength	B/shott	16-8-18	D-O 198
28-6-19	— "	SOS to Canada	Pte Ripon	28-6-19	— 148.
		94-B-128 d/28.6.19			

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.					

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

COPIED FOR B

M. F. W. 54. (A. F. B. 103.
350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 1st. DEPOT BATTALION, Nova Scotia Regiment

Regimental No. 318842/63 Rank Pte Name Dingle Jas Lawrence

Enlisted (a) 8/6/18 Terms of Service (a) C. E. F. WAR and 6 Mos. Service reckons from (a) 8/6/18

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) Farmer

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				
		Transferred to 6 Bn. CEFR		3-7-18	W. S. Simpson Capt. Adjt. 1st Depot B'n N. S. Regiment
		Embarked for overseas	Halifax.	2-8-18.	
		Disembarked.	Liverpool.	16-8-18.	
22-8-18.	O.C.17th.	TOS. on arrival from Canada and shown on cmd. to Bourley Seg. Camp. Aldershot.	Bramshott.	16-8-18.	Pt.11.O.198.
23-9-18	O.C17th.	Reported off command.	Bramshott.	23-9-18	Pt.11.O. 231
28-6-19	17 Res. Bn.	S.O.S.-O.M.F.C.-on Trans. To C.E.F.			D O 148

HMT MAURETANIA
SAILED 91
SAILED SOUTON 28-6-19

N. D. Lockhart
Lieut., Asst. Adjt.,
17th Canadian Res. Batt.

(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.

COPIED FOR 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				
28/6/19	25	T. O. S. No. 6 D. D. from C/S. .....and posted Disp Stn B Hfx DC.			190
13/9/19		SGS on Discharge			190

A M Ferguson
.....Lieut.
Officer i/c Records No. 6 D.D.

CANADIAN EXPEDITIONARY FORCE

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DISCHARGE CERTIFICATE

Service Badge Issued,
Class..... No.....

THIS IS TO CERTIFY that No. 3188463 (Rank) Pte.
Name (in full) Dingle James Lawrence enlisted in
the 1st. Depot. Bn. N.S. Regt.
CANADIAN EXPEDITIONARY FORCE at Aldershot N.S. on the 8.
day of June 1918
HE served in 17th Res. Bn. Eng.
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	23-1	Marks or Scars	Nil
Height	5-4		
Complexion	Dark		
Eyes	Grey		
Hair	Dark		

F L Dingle
Signature of Soldier.

R S Allison Capt
Major
O. C. Dispersal Station "B"
for
Issuing Officer.

Date of Discharge

Dispersal Station "B" JUL 13 1919 Military District No. 6

Rank

HALIFAX, N.S. JUL 4 1919
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.

1.—That discharge certificate must be carried when wearing uniform.

2.—That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing, and

3.—That wearing of uniform renders him liable to usual military discipline, as if on the strength of a unit.

P 820
12474—375M—13-2-18.

* Strike out whichever is inapplicable.

ASSIGNED PAY.	* ~~ENGLAND or~~ CANADA.
EFFECTIVE DATE:–	1/8/18
AMOUNT:–	20—

SEPARATION ALLOWANCE.	* ENGLAND or CANADA.
EFFECTIVE DATE:–	
AMOUNT:–	

NAME:– DINGLE. James Lawrence

NUMBER:– 318 846 3

NAME, ADDRESS, RELATIONSHIP & AUTHORITY

Mrs Thos Dingle (Mother)
Admiral Road
Hantsport NS

Stopped 1-7-19

WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
I Pb. Can	1/8/18	Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:– Dft 102 N.S. Regt.

DATE ACCOUNT FIRST OPENED:– 1/8/18

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			17th Res

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS — UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
~~28/4/19~~	1001	Repon	~~4 87~~				
~~2/6/19~~	1218		~~14 60~~				
			19 47				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 .	. 10		

~~Pb~~ cr 18.89

PARTICULARS OF RENDERING NON-EFFECTIVE:– Dis Can 30/6/19 Pb 10224 Pb 662 2/6. mdb. Repon Ledger cr. 38.36

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
31/7/18	Bal from Can								10 20		
Aug	P.'s Pay	34 10		Can. A.P.				20			
				4 23.8. Pc.	4 87				19 43		
		34 10			4 87			20	52 43		
SEP 1918	✓	33		C.A.P.				20			
				AR 1003 4/9/18 13.6	4 87						
				✓ 2726 27/9 17 Res	4 87				22 69	a/c	
		33			9 74			20			
Oct	✓	34 10		C.A.P.				20			
				AR 3101 10/10/18 17 Res	2 43						
				AR. 3282 29/10/18 —	7 30				27 06		
		34 10			9 73			20			
& Dec	✓	67 10		C.A.P.				20			
Jan	✓	34 10		AR 3447 13/11/18 N.S.R.	9 73						
				AR 3859 26/11/18 N.S.R.	14 60						
				C.A.P.	24 33			20			
				AR 4224 17/12/18 —	9 73						
				C.A.P.	34 06			20	34 20		
		101 20			34 06			60			
Feby & Mar	—	64 90		C.A.P.				20			
				AR 4528 10-1-19 17 Res.	7 30						
				" 4858 29-1-19 —	4 87						
				" 5104 13-2-19 —	4 87						
				" 5321 27.2.19 17 Res	7 30						
				" 5757 15.3.19 —	14 60						
		64 90		C.A.P.	38 94			20	20 16		
					38 94			40			

COMPILED BY J H Thurlow
CHECKED BY Woodhead

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									20 16		
Apr & May	P. P.	67 10		Cab				40	67 10		
				ab. 290. 11-4-19. 17 Res	7 30				87 16		
				" 542. 25. 4. 19 —	7 30				64 90		
				" 875 16 5. 19 —"—	7 30				25 36		
		67 10			21 90			40			
June	" "	33		Cab				20	38 36		
				" 1001. 17 Res 30/5	4 80						
				✓ 1218. " 3/6.	14 60						
									18 89		
		33			19 49			20			
				S.O.S. 28-6-19							
				S.L. 94							

AUDITOR 6 | PAYMASTER

Mauretania 4.7.19

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

M. OR S. | REGT. NO. 3188463 | RANK Pte. | NAME (IN FULL) Dingle Jas S. (BLOCK LETTERS, SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS Mrs

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Trans	28-6-19	Leo. 190

ORIGINAL UNIT C.E.F. 17 Res | IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION | TRANSFERRED TO | DATE 1514 | AUTHORITY

ASSIGNED PAY $ 20 00 | DATE EFFECTIVE 7.8.19

PAYABLE TO Mrs. J. Dingle | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS as given

ADDRESS ~~Admiral Rock~~ Admiral Rock Hants Co. N.S.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE Hfx | DATE JUL 13 1919 | REASON Demob | AUTHORITY Leo. 190 | IF ENTITLED TO POST DISCHARGE PAY

E.C.P.S. adj to

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	$	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					
30.6.19					18 89																																Gen Pub Utilities Co N.S.
					35 00																																Cash Coast Co 1/17
13.7.19	13	1 10	14 30		90 00				138	19							4 87	600	108	32	20	00									138	19					Bal Due Col 3
																																					A. P. July
122 days					280	00			280	00													70	00													Dep Pay & Allow
																							70										140				1120638 13-8-19
																							70										70				1136975 10/9/19
																							70								280		Mil				1308232 11-10-19
			280						280														280								280						

WAR SERVICE GRATUITY W.S.G. S.A.

Completed

Certified that all payments due on this acct. have been paid.

H. M. Allen CAPT.
For Senior Officer Pay Services, M. D. 6

AUG 1 1919

200M-3-19.—L. L. 58789-... & D. 9985.
M. F. W. 2.96.
1772-39-1390.

Dispersal Area No. B

Individual Group No. 1

W.S.B. Class " "

HMT MAURETANIA
SAILING
SAILED SOUTHAMPTON 28-6-19

SHORT FORM.

PROCEEDINGS ON DISCHARGE

(Demobilization.)

1. No. 3188463

2. Rank. Pte

3. Name. Dingle James Lawrence

4. Unit. 17 Res Bn N.S.R.

5. Date of Discharge 13/7/19 Place

6. Reason for Discharge Demob.
N of Kin Father
Religion Presb.

7. Authority. R.O. 1420

8. Proposed Residence after Discharge
Admiral Rock.
N.S.

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.?

James L Dingle
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place HALIFAX, N.S. JUL 4 1919

Date

Signature R S Bellman Capt
for O. C. Dispersal Station "B"
(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—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

Date of Enlistment 8th June, 1918.

MILITIA AND DEFENCE

Separation and Assigned Pay Branch D 10207

OVERSEAS CONTINGENTS

Date of Assignment 1st Aug. 1918.

I

9L8D20
5.K

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

20 00			

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion No. 1 Depot Battn. N.S. Regt. 102 Dgt.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1 MRS.THOMAS DINGLE,
2 ADMIRAL ROCK,
HANTS CO.N.S. 20 20.00
3 % 3188463 PTE JAMES L.DINGLE
TWENTY DOLLARS
4

4696.80

Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
Aug.	Y 39894		20	20		
Sept	N 44368		20	20		
Oct	O 53409		20	20		
Nov	J 61477		20	20		
Dec	T 65186		20	20		
Jan	O 71622		20	20		
FEB	J 78053		20	20		
Mar	J 83676		20	20		
Apr.	M 2315		20	20		
May	J 7768		20	20		
June	H 11610		20	20		
JUL	K 12727		20	20		
			240	240		

Accd Maurehani

Ret'd per

Date 4-7-19 M.F.W.187 16-7-19

AUDITED. 17/7/19

Jas. McLean S.P. No 6

NRO 99979

AUTHORITY FOR NEW ACCT. M.D. 6-B-3 M. Clancy 28-8-18

M. F. W. 128
400M.—6-17—1772-39-141
L. L. 22320—M. & D. 7893.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128.
400M.—6-17—1772:39-1141
L. L. 92330—M. & D. 7993.