

ATTESTATION PAPER.

No.

# 2. Construction Bn.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname? ..... *Dorey*
- 1a. What are your Christian names? ..... *Joseph*
- 1b. What is your present address? ..... *St Catharines Ont*
- 2. In what Town, Township or Parish, and in what Country were you born? ..... *St Catharines Lincoln, Ont*
- 3. What is the name of your next-of kin? ..... *Edith Dorey*
- 4. What is the address of your next-of-kin? ..... *St Catharines 54 Page St*
- 4a. What is the relationship of your next-of-kin? ..... *Mother*
- 5. What is the date of your birth? ..... *Jan 21/1897*
- 6. What is your Trade or Calling? ..... *Labourer*
- 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 } *yes*  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Date: *Sept 28* 1916 *Joseph M Dorey* (Signature of Recruit)  
*Edw J Young* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

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

Date: *Sept 27* 1916. *Joseph M Dorey* (Signature of Recruit)  
*E M. Urylie* (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 *St. Catharines* this *29* day of *September* 1916.  
*Wm H. Urylie J.P.* (Signature of Justice)  
CAPTAIN

# Description of *Joseph Dorsey* on Enlistment.

Apparent Age 18 years 9 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..... 33 1/2 ins.  
 Range of expansion..... 2 ins.

Complexion.....

Eyes..... *Dark Brown*

Hair..... *Black*

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

## 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..... *Sept 26th* 191 *6*

Place..... *St. Catharines*

*J. Sheahan*  
 M.B.  
 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.

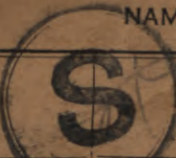

*Joseph Dorsey*.....having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

*C. W. Reis Capt*.....(Signature of Officer)

Date..... *Sept 27* 191 *6*

REGIMENTAL DOCUMENTS

NAME DORSEY JOSEPH M PTE REGT. NO. 931541 UNIT 2 Const Bn H.Q. FILE NO. (21737)

 <b>CONTENTS</b>	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)	8/14/19				<b>DEATH</b>
2 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
TRAINING HISTORY SHEET (M.F.W. 113)					
1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					<b>DISCHARGE</b>
1 DENTAL HISTORY SHEET (M.F.B. 465)					Category <u>Demob</u>
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)				21737	
1 MEDICAL EXAMINATION (M.F.W. 129)					
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					<b>DESERTION</b>
1 LAST PAY CERTIFICATE (M.F.W. 44)					
2 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
<u>D.M.S. 1375</u>					
<u>I.S.O. Form 132</u>					
<u>M.F.W. 142</u>					
<u>CADE. 5009a</u>					
<u>M.F.W. 167</u>					



W04537

2609

931541

DUPLICATE

To be made out in duplicate.

H.Q. 54-21-20-53

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

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

No. 2 CONSTRUCTION, B'n. C.E.F.

(1) Name of Overseas Unit which Soldier joins.....

(2) Regimental Number..... 931541

(3) Full Name of Soldier..... Joseph Kellivan Dorsey

(4) Place of Birth..... St Catharines Ont

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

(6) If married, state,  
 (a) Full name of your wife.....  
 (b) Present Postal Address.....

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

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

(9) Is your Father alive?

yes Mr. Joseph Allan Dorsey  
54 Page St. St. Catharines Ont.

If so, state name and address

(10) Is your Mother alive?

yes Mrs. Edith Dorsey  
54 Page St. St. Catharines Ont.

If so, state name and address

(11) If your Mother is a widow

no

Are you her sole support, or not?

yes

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

\$20 per month. Father has deserted mother  
Have brother (19) but subject to lung trouble.

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

X

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

Yes

(15) Are you insured?

yes

If so, in what Company?

Don't know

Have you made arrangements for payment of your Insurance premium?

Yes

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

NOV 14 1916

Date

D. H. Sutherland

Officer Commanding.

C. Comd'g No. 2 Construction Battalion, C. E. F.

*cat 22.8  
D.T. 8.*

# 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. *931541* Rank *Pte.* Surname *Dorsey*  
(Give name in full)

*Joseph*  
Unit or Corps *2nd D.D.* Birthplace *St. Catherine's Lincoln*  
*Ont*

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

### 1. GENERAL DESCRIPTION:

Physique *good* Weight *139* lbs. Height *5* ft. *7* in. Colour of Eyes *dk. Brown*  
Nutrition *good*  
Pulse *81*  
Condition of arteries *soft*  
Vision Rt. *20/80* Left *20/80*  
Hearing (conversational voice) Rt. *15* ft. Left *15* ft.

Identification marks, scars, or deformities.  
(Give cause and date of origin.)  
*One vacc. left 1918*

Opinion as to general health and physical condition *normal*

### 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 *yes*

### 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.

*Chicken pox in childhood*  
*no albumin, no sugar; no hernia, haemorrhoids,*  
*varicose veins, varicocoele or goitre.*

**APPROVED**  
MAR 13 1919  
*[Signature]*  
FOR A. D. M. S. M. D. 2

# EXAMINATIONS.

## THIS SECTION FOR USE OVERSEAS—

Examined at.....(Overseas)

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 Medical Board.)

## THIS SECTION FOR USE IN CANADA—

Examined at...*Ex. Camp Toronto*.....(Canada)

Date *13-3-19*..... Signed *P. E. Jaed*.....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 Medical Board.)

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

[OVER]



Dawsey

# MEDICAL HISTORY SHEET.

951541

Surname Dawsey Christian Name Joseph

Examined { on 26 day of Sept 1916  
at St Catharines  
Birthplace { City or Town St Catharines  
County Lincoln

Approved by J Sheahan  
Rank MB M.O.

Apparent age 19  
Trade or occupation Sabun  
Height 5 Feet 4 Inches.  
Weight 135 Lbs.  
Chest measurement { Minimum 33 1/2 inches.  
Maximum expansion 33 1/2 inches.

Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Physical development  
Small-Pox Marks No

Vaccination Marks { Arm Right Left  
Number None  
When Vaccinated last Nil

Date.	Result.	VACCINATIONS.
<u>7/2/17</u>	<u>24911</u>	<u>SS Shepley</u>
		M.O.
		M.O.
		M.O.

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>2/3/17</u>	<u>24911</u>	<u>Dau Murray</u>
<u>4/4/17</u>	<u>24911</u>	<u>Dau Murray</u>
<u>2/4/17</u>	<u>24911</u>	<u>Dau Murray</u>
		M.O.
		M.O.
		M.O.

Enlisted on 27 day of September 1916 at St. Catharines, Ont.

Joined on enlistment	CORPS.	REG'T NUMBER.	HABITS.	DATE.
	<u>#2 Cavalry</u> <u>687</u>	<u>93154</u>		<u>27/9/16</u>
Transferred to				

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Windsor, Ont.</u>	<u>FEB 12 1917</u>	<u>on enlistment</u>	<u>Fit</u>
<u>St. Camp Jamba</u>	<u>13-3-19</u>	<u>2nd - Capt 92</u>	<u>SS Shepley</u> <u>Capt Buss</u> <u>Ret. Med. Coyd.</u>

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



CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44.  
1133 (D.P. 250M-12-18.  
1772-89-903.

LAST PAY CERTIFICATE

Regimental No. 931571 Rank Pte Name Dorsey J. M.  
(Surname first)  
Unit No. 2 District Depot who was\* DISCHARGED  
On MAR 17 1919 191....., to.....  
\*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from Jan 1 to MAR 17 1919 191...  
the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month.....	46.96	
Regimental Pay..... <u>76</u> days at \$..... <u>1</u> c.....		76
Field Allowance..... <u>76</u> days at \$..... <u>10</u> c.....		7.60
Separation Allowance.....		35
Clothing Allowance.....		70
Post Discharge Pay..... <u>was</u>		12
*Other Credits..... <u>Sub 1/2 - 15/3 240 65</u>		
Advances..... <u>S. 104304</u>	40	
Separation Allowance and Assigned Pay Cheque No.....		
*Other Charges.....		
Balance on transfer or on discharge, cheque No..... <u>S. 104523</u>	118.64	
Total.....	<u>200.60</u>	<u>200.60</u>

\*Give particulars.

A monthly stoppage of \$..... 20.00 (†) has..... (‡) been paid on account of  
Assigned Pay for the month of..... Feb. 1919..... }  
and Separation Allee. for month of..... 1919..... } (to) Assignee Mrs. E. Dorsey  
(Address)..... 54 Page St. - St. Catharines Ont.  
(†) Insert amount to be assigned, whether it has been paid or not. (‡) Insert "not" if amount has not been paid for period of account.

ON TRANSFER OF AN OFFICER.

Outfit Allowance of \$..... has been paid by Paymaster, Military District No.....

REMARKS:—

State (1) date of enlistment..... married or single.....  
(2) Separation Allowance, entitled or not..... No (3) Reason for discharge..... Demob.  
(4) Authority for discharge or transfer..... DO. 73

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer or soldier.

Date..... MAR 15 1919  
Place..... TORONTO, ONT.

Malcolm J. Cochrane CAPT.  
PAYMASTER, No. 2 DISTRICT DEPOT

- N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916.  
(B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.  
(C) For purposes of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. As payment of the balance will have been made, the words "on transfer or" will be deleted.  
(D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificate will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.

**CREDITS, ADVANCES, Etc.**

Credits, Advances, Forfeitures, Issues on Repayment, etc., since issue of this L.P.C. are to be entered hereunder:

Date	Place	Cheque No. A.R. No. or Other Particulars.	AMOUNT		Signature of Officer Making Payment.
			Dr.	Cr.	
.....					
.....					
.....					
.....					
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.....					
.....					
.....					
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.....					
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.....					
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.....					
.....					
.....					
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.....					
.....					

(1) Insert amount to be credited, whether it has been paid or not. (2) Insert "No." if amount has not been paid or account (Address) ..... and Separation Allowance for month of ..... (10) Amounts ..... Assigned pay for the month of ..... A monthly allotment of \$ ..... has ..... (1) has ..... (2) been paid on account of ..... Other charges ..... Generation Allowance and Separation Allowance

**ON TRANSFER OF AN OFFICER**

Outfit Allowance of \$ ..... has been paid by Paymaster, Military District No. ....

**REMARKS:**

(1) Date of retirement ..... married or single .....  
 (2) Separation Allowance, either or not ..... Reason for discharge .....  
 (3) Authority for discharge or transfer .....  
**NOTE**—S.A. & A.P. Cash and Index Card (M.E.W. 11) are to accompany Pay Certificate on transfer.

I have carefully examined this statement of account and find it correct except from the Pay Account of the Officer .....  
 Date .....  
 Place .....

com.

Number 931241.

Rank A. Col.

Surname DORSEY.

Christian Name Joseph

Units C.O.R.C.C. Theatre of War France

Date of Service 17. 8. 17.

Remarks 62 North

Latest Address 24 Page St.

St. Catherine's.

Roll No. Ont.

200m.-2-21.M.

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DATE AND PLACE OF ORIGIN

2111111111

\*DUE TO SERVICE  
\*NOT DUE TO SERVICE

Number

111111

HOSPITAL AS AN ADMISSION

WHERE FROM

AT

IN CATEGORY

INVALID

WHERE TO

CONDITIONS DIAGNOSED

ADDRESS

HOSPITAL

STATION

\* CROSS OUT CONDITION NOT APPLICABLE.

DESP. AUG 21 1922  
REGN. No. 333333

(OVER

SURNAME.

*Dorsey*

649-10-17458

CARD NO.

*X 2*  
*505 demob 17-3-19*  
*DO. 43 FOLL. 143-19*  
*No 200.*

CHRISTIAN NAMES

*Joseph*  
*Pte.*

REGL. No.

*931541*

RANK

UNIT

*No. 2. Construction. No 200.*

*En.*

FORMER CORPS

*Mk.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

*Dorsey. Mrs. Edith.*

RELATIONSHIP TO SOLDIER

*Mother.*

ADDRESS

*54 Prage St. St Catharines.  
Ont*

COUNTRY OF BIRTH

*Canada, St. Catharines Ont.*

DATE

*Jan 8th 1897.*

PLACE OF ATTESTATION

*St. Catharines, Ont.*

DATE

*Sept 27th 1916*

*R/C. 25-2-19. 270 Pte.  
20.*

*From Halifax per S.S. 'Southland' 28/3/17*

MARRIED

SINGLE

*Yes*

WIDOWER

TRADE OR CALLING

*Labourer*

RELIGION

*Methodist*

DESCRIPTION.

APPARENT AGE

*18*

YEARS

*9*

MONTHS

HEIGHT

*5*

FEET

*7*

INCHES

CHEST MEASUREMENT

*35 1/2*

INCHES

EXPANSION

*4*

INCHES

COMPLEXION

*Coloured*

EYES

*Dark Brown*

HAIR

*Black*

DISTINGUISHING MARKS

*Not stated*

MEDICAL EXAMINATION.

PLACE

*St. Catharines, Ont.*

DATE

*Sept 26th, 1916*

*Present Address St. Catharines, Ont.*



No

RANK

*Pte*

NAME

*Dorsey, Joseph.*T. O. S. *27-9-16**CO 308 27-9-16*

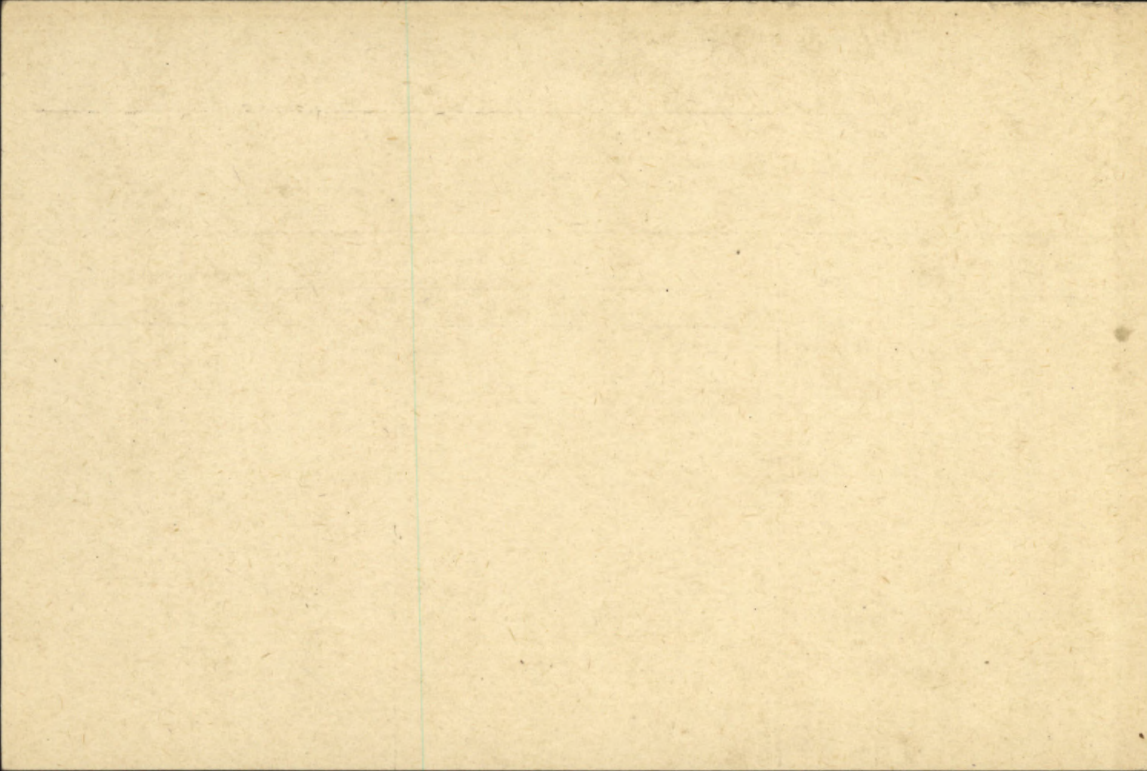
UNIT

*Recruiting Depot. St. Catharines*

M. D.

*2*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916 Sept 27</i>	<i>1916 Sept 27</i>	<i>n.</i>	<i>transfd to #2 Const Co. 27/9/16</i>	<i>CO 308 27-9-16</i>



No. 931 54. RANK Cte

NAME Dorsey Joseph

T. O. S. 27-9-16.

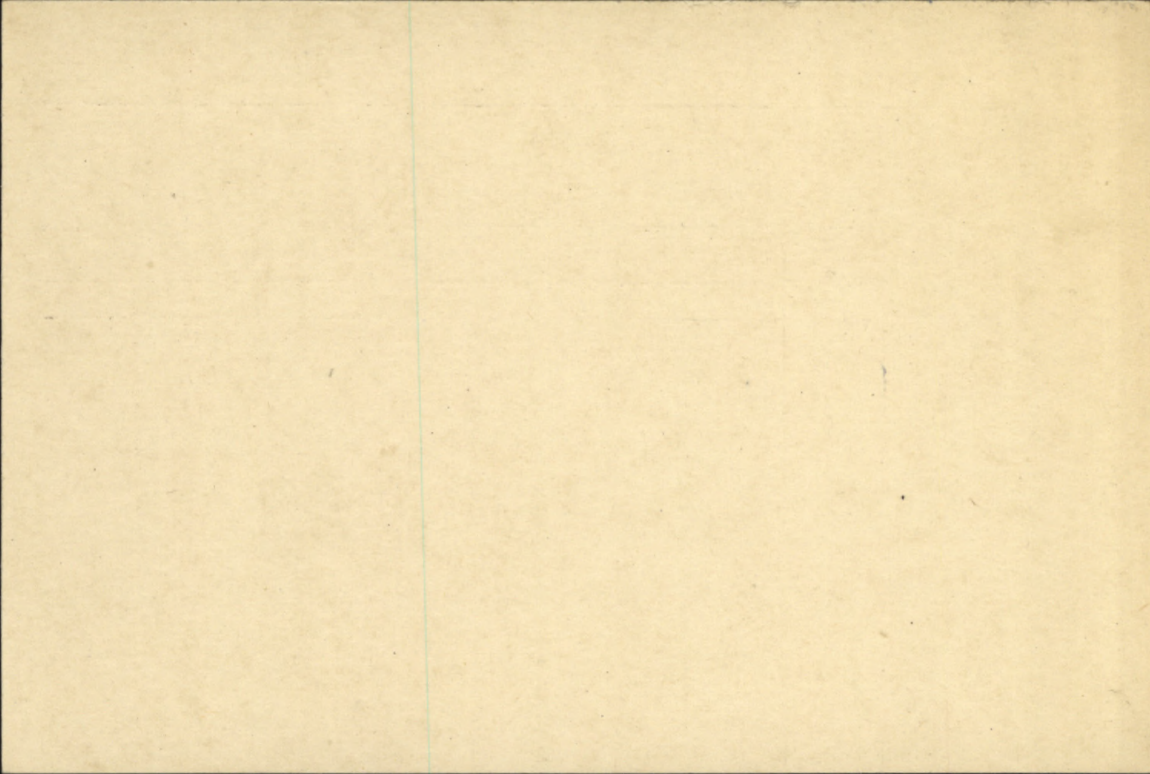
UNIT

No 2. Construction Battalion.

A. O. 41. 3-10-16

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916.			
Sept. 27.	Oct. 31.	n-		
	Nov.	✓		
	Dec.	✓		
1917	Jan 1917	✓		
	Feb.	✓		
	Mar.	n	Prom <sup>Pass</sup> Cpl. 20-1-17	d. O. 61. 12-3-17




\*Name L DORSEY, Joseph M Rank Pte Regtl. No. 931541  
 Original unit NSRD Present unit NSRD M. or S. Age 21 Religion Meth Fyle Depot 3400242  
 Ref. H.Q.                       
 Port, ship, and date of arrival Empress Britain, Halifax, 25-2-19  
 Next of kin Mother, Edith Dorsey St. Catharines (54 Page St)  
 Address on leave Same  
 Address on discharge Same  
 Transportation issued  Yes 17-3-19 Character on discharge St. Catherines  
 No Date                       
 Previous occupation Labourer Date and place of enlistment St. Catharines Setp 27/16  
 Diagnosis Demobilization Date of Medical Boards 13-3-19

Date	Remarks	Pt. 2 Order No.
17-2-19	Posted to Gas Co (Ex Camp) 25-2-19	63
17-3-19	Leave & Subs from 1-3-19 to 15-3-19	73
17-3-19	SOS DISCHGD. "DEMOB'N" ENTITLED TO WSG	73

Date.

Remarks.

Pt.  rder No.

M.F.W. 192  
150M-6-18.  
1772-39-1243.

# DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT *2*

NAME OF SOLDIER

*Dorsey Joe*

REGIMENT

RANK

*Pte.*

No. *931541*

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16



17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32



## 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.

Condition on first Examination	Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhoea	Synthetic Porcelain	Extracting	DENTURES			Gold Clasp	Gold Filling	CROWNS		Bridge Work	OPERATOR	Military District	REMARKS	
												U	L	P			Gold	Porcelain					
<p><i>Discharge Exam.</i> <i>At Exhibition Camp</i> <i>Date. MAR 13 1919</i> } <i>Certificate issued for</i> <i>Dorsey, Joe</i></p>																							
																				<i>Haseuple</i> <i>major</i>			





# Medical Examination upon leaving the Service of an Officer fit for general service or a Soldier fit for duty.

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank Pte Name Dorsey Surname J.M.  
Unit or Corps 2600 Corps (If a soldier) Regtl. No. 981591  
Born at St Cathrines Ont. on, date 8-1-98  
Signature (for identification) J.M. Dorsey

The examination is to be made jointly by two Medical Officers.

**1. PHYSIQUE**—Any deformity, maiming or lameness? If so, describe. no

Weight 175 lbs.  
Height 5 ft. 6 ins.

**2. NUTRITION AND DIATHESIS ?**

normal

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

**3. NERVOUS SYSTEM ?**

normal

**4. RESPIRATORY SYSTEM.**

normal

**5. HEART ?**

Abnormal Sounds? no  
Abnormal Size? no  
Pulse Rate? 60 Intermittence or irregularity? no

**6. ARTERIES.**—Any hardening?

no

**7. DIGESTIVE SYSTEM ?**

normal

**8. GENITO-URINARY SYSTEM ?**

Urinalysis—s.g.? 1.020 Reaction? oe Albumen? no Sugar? no

**9. SKIN, MIDDLE EAR, EYE**  
or any other part?

normal

**10.** Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe.

no

**11.** Opinion as to the health and physical condition of the one examined?

good

Examined at Kimberly Signed J. L. ... M.O.  
Date 28/12/18 Signed J. T. ... M.O.

If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.

of an ... for general service of a ... for duty

1451341  
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(2)

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

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

500M.—9-16

H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps.....

Regimental No. 931541 Rank pt6 Name Dorsey Joseph  
C. E. F.

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

Date of promotion to } Date of appointment } Numerical position on }  
present rank } to lance rank } 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				

FEB 17 1919 O. S.

T. O. S. No. 2 DISTRICT DEPOT, TORONTO

1919 PART II D. O. 63

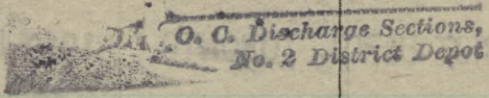
*[Handwritten Signature]*

Lieut.

For O. C. No. 2 District Dep.

(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties.

# 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				
17/3/19		S.O.S. (Discharged) No. 2 District Depot Part II, D.O. No. <u>73</u> <i>Bruce Thompson</i>			
					

*Auro 10*

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

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

359m.—5-16

H. Q. 1772-39-920.

# Casualty Form Active Service.

Unit, Regiment or Corps

*1st Construction Batt C.E.F.*

Regimental No.

*931.541*

Rank

*pte*

Name

*Joseph Dorsey DORSEY*

C. E. F.

Enlisted (a)

*27-9-16*

Terms of Service (a)

*period of war 46 months*

Service reckons from (a)

*27-9-16*

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				
		<i>Embarked, Canada</i>	<i>Halifax N.S.</i>	<i>25/3/17</i>	
		<i>Disembarked, England</i>	<i>Liverpool</i>	<i>7/4/17</i>	
		<i>Proceeded Overseas</i>	<i>Seaford</i>	<i>17/5/17</i>	<i>Bt = D.O.#</i>
					<i>Accountant for the District</i>
			<i>Landed in France</i>	<i>17-5-17</i>	<i>N.R.</i>
<i>17-5-17</i>	<i>OC</i>	<i>appt - appt with pay</i>		<i>16/5/17</i>	<i>Auth N.R. KG16/25295 P/135- dt 20-10-17.</i>
<i>14-9-18</i>	<i>43 COE</i>	<i>Granted 14 day leave</i>	<i>UK</i>	<i>12-9-18</i>	<i>Br 3 102 53 of Sep 1918</i>
<i>28-9-18</i>	<i>44</i>	<i>Return from leave</i>	<i>France</i>	<i>23-9-18</i>	<i>B.213</i>

CERTIFIED CORRECT.  
6 JUL 1917  
CAN. RECORDS, LONDON.

*C. No 2  
Linton  
Bath*

(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties. (P.T.O.)

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				
30.6.17	o-e	<u>Deprived of act appoint</u> for neglect of duty.	Ed	29.6.17	B2069 P 135 of 20 <sup>10</sup> /17
5/1/18	oc Unit	att to 1 <sup>st</sup> Dist CFC.		30/12/17	B 713

11<sup>12</sup>/18  
 dag  
 Train to England & parked  
 to 1<sup>st</sup> S. Reg Depot Bramshott  
 14<sup>12</sup>/18  
 Lt. for Lt.-Col., A. A. G.  
 Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

17.12.18. M.S.R.D. T.O.S. and att'd 2nd b.b.D.  
 for Quarters & Nations  
 Bramshott 14.12.18 D.O. 305

NSRD ON COMMAND TO CDD Kimmel  
 BRAMSHOTT

PART II D.O. J.S.R.D. 3/13 27<sup>12</sup>/18

Attached C.C.C. Kimmel Park for  
 return to Canada. Part II Orders  
 No. \_\_\_\_\_ Ceases to be attached  
 C.C.C. Kimmel Park on embarking  
 for Canada, Part II Order  
 No: 36 12/2/19  
 46747  
 in Commanding 2 Wing,  
 Kimmel Park Camp.

EMPIRE OF BRITAIN

b.a. Knight LIEUT.  
 OFFICER in CHARGE,  
 NOVA SCOTIA REG. DEPT.  
 SAILED  
 FEB 17 1919  
 ARRIVED  
 FEB 25 1919

*N.I. 2*

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) *DORBEY, N.*  
REGIMENT *R. C. I.* RANK *Pte.* No. *931541*

Date of Examination in England *12/6/18.* Date of Examination in France \_\_\_\_\_

DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.



PRESENT DENTAL REQUIREMENTS

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

*Fit*

HAS HE EVER REFUSED DENTAL TREATMENT?

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

- (a) ~~In Canada~~
- (b) In England *Yes*
- (c) In France *Yes*

*Kimmel Park*  
*N. Wales.*

Signature of Dental Officer *H. Goodhead*  
*Capt.*

1911

W. B. ...

1911

...

...

...

...

...

...

...



File: RQ-4/2-1

Public Archives Records Centre,  
Ottawa 3, Ontario.

To:

The Public Trustee  
145 Queen St. W.  
Toronto 1, Ontario  
Attn: Y. M. Scott

Re: Request for Details of Birth

Name:

931541 - DORSEY, Joseph  
Your file: P. 12271-B - YMS

Dear Sirs:

According to our records, details of birth pertaining to the above-mentioned veteran are as follows:

(1) Date and place of birth (as given on Attestation):

8 January 1897 - St Catharines, Ont.

(2) Date of Attestation (i.e. enlistment)

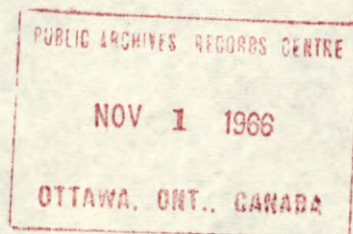
27 September 1916

(3) Age given at time of discharge

22 years

(4) Date of discharge

17 March 1919



Yours sincerely,

J. H. Logan,  
Head, Accessions and Reference.

File: 80-4-2-1

Public Archives Records Centre,  
Ottawa 3, Ontario

Mr. [Name]  
[Address]  
[City, Province]

To:

Re: Request for details of birth

Name: [Name]

Dear Sir:

According to our records, details of birth pertaining  
to the above-mentioned veteran are as follows:

(1) Date and place of birth (as given on Attestation):

(2) Date of Attestation (i.e. enlistment):

(3) Age given at time of discharge:

(4) Date of discharge:

Yours sincerely,

J. H. Logan,  
Head, Accessions and Reference.

J.P. Rank Name DORSEY, Joseph Reg'l No. 931541.  
 Unit No2. Const Bn. } If in perm. Corps }  
 What Unit? } Married or Single Single.  
 Place and Date of Enlistment St. Catharines. 27th Sept. 1916. Place of Birth St. Catharines. Ont.  
 Name and Address, Next-of-Kin Edith Dorsey.  
 57 Page St. St. Catharines, Ont. Relationship Mother.

Assigned Pay Monthly \$ Payable to

Relationship

Separation Allowance \$ Payable to

Relationship

NIE. R.B. No. 729A  
 File R.L.  
 Categor. ORCAN M.P. 2

Discharge, Date and Place Reason Character

H. W. V., Ld.—9:46-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
		Arrived in England. S.S. Southland		7.4.17.	<u>Awaw.</u>
14-6-17 <sup>#</sup>	R.C.C.	Arrived in France	Field	17-5-17	115
20-10-17	"	App'd as Cpl with pay Pk	"	16.5.17	135
"	"	Should be deprived of Rank of Cpl + reduced to perm grade Pk.		29.6.17	135.
16-12-18	NSRD	TOS from 2nd Coy	Bobhat	14-12-18 + 305 + 71 d/	19-12-18 2nd Coy
27-12-18	NSRD	Re to C.O.D. Rly	Bobhat	27-12-18 D.O. 913	
14-3-19	NSRD	leaves Cpl to C.O.D. in S.O.S to C.E. Canada M.D. 2 (Auth R.L. 23-6 Vol 23(24) RIFs 11.3-19	Repon	17.2.19 - 59 46 d/24-2.19 mod.	

A.F.B. 103 CHECKED  
 29 MAY 1917

ME

MS



MILITIA AND DEFENCE  
ASSIGNED PAY  
OVERSEAS CONTINGENTS

M. F. W. 12  
50m.—7-16  
H. Q. 1772-39-819

To Whom *Mrs. Edith Dorsey*  
Address *54 Page st  
st. Catherine  
Out*  
Rate *10<sup>00</sup>*

By Whom Assigned *Dorsey Joseph*  
Regtl. No. *931541*  
Rank *Pte*  
Corps *no 2 const. Bn.*

APR 1917

## 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				



1 1/2 lbs

NOV 28 1940

11/28/40

# ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. *Mrs Edith Dorsey*  
(Assignee)

Name of Soldier

PAYMENTS.

*No 931541*

*Dorsey Joseph*  
*Pte No 2 Const Bu*

L. L. Job 5470—Req. 6888.

Month.	Year.	Cheque No.	Amnt.	Remarks.
				<i>10<sup>00</sup></i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		<i>Z 4784</i>	<i>10.</i>	
May		<i>T 7612</i>	<i>10.</i>	<i>10.75</i>
June		<i>O 14486</i>	<i>10.</i>	<i>10.45</i>
July		<i>Y 21268</i>	<i>10.</i>	<i>c</i>
Aug.		<i>X 29406</i>	<i>10.</i>	<i>25</i>
Sept.		<i>Z 37582</i>	<i>10.</i>	<i>25</i>
Oct.		<i>R 41029</i>	<i>10.</i>	
Nov.		<i>Q 54311</i>	<i>10.</i>	
Dec.		<i>M 57625</i>	<i>10.</i>	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

**APR 1917**

**CANADIAN ASSIGNED PAY AUDIT**  
 DATE *10/6/15*  
 AUDIT CLERK *[Signature]*

*908*

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.				



# CANADIAN EXPEDITIONARY FORCE

## Discharge Certificate

This is to Certify that No. 931541 (Rank) Pte.

Name (in full) DORSEY, JOSEPH enlisted in  
the #2 Const. Bn.

CANADIAN EXPEDITIONARY FORCE at St. Catharines, Ont. on the 27th  
day of September 1916

HE served in England and France

and is now discharged from the service by reason of Demobilization

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

Age 20 yrs.

Height 5' 3"

Complexion Dark

Eyes B. Brown

Hair Black

Marks or Scars

Vacc. scars on left arm

*J M Dorsey*  
Signature of Soldier

*H Sergeant*  
Issuing Officer

C. C. No. 2 District Depot.  
Rank

Date of Discharge March 13th, 1919

Appointment

Signed at Toronto, Ont. this 17th day of March 1919

in Military District No. 2 MAR 17 1919

File Reference No. DISTRICT DEPOT

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.

ES.

CANADIAN EXPEDITIONARY FORCE  
Discharge Certificate

CANADIAN EXPEDITIONARY FORCE  
Discharge Certificate

No. .... (Rank) ..... Name .....  
Unit .....  
Address on Discharge .....  
Character and Conduct .....  
Former Occupation .....  
Special Qualifications of Value in Civil Life .....  
Medals and Decorations .....  
Remarks .....  
Signed at ..... this ..... day of ..... 19 .....

On demobilization the particulars called for on the back of this certificate will not be completed.

.....  
Name of Officer

.....  
Rank

.....  
Appointment

Uniform is not to be worn after expiration of one month from date of discharge, except by special permission of G. O. C district.

ASSIGNED PAY. ENGLAND OR CANADA. SEPARATION ALLOWANCE. ENGLAND OR CANADA. NAME: **DORSEY Jos. E**

EFFECTIVE DATE: **1<sup>st</sup> April 1918** EFFECTIVE DATE: NUMBER: **931541**

AMOUNT: **20<sup>00</sup>** AMOUNT: PARTICULARS OF RANK OR APPOINTMENT

NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

**Mrs Edith Dorsey Mother**  
**54 Page St. St. Catharines Ont**

UNIT AND TRANSFERS

ORIGINAL UNIT: **2<sup>nd</sup> Construction Bn**  
DATE ACCOUNT FIRST OPENED - **1<sup>st</sup> April 1918**

AUTHORITY: **Canada Section**

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
<del>9/2/18</del>	<del>6593</del>	<del>Bald</del>	<del>11.66</del>				
<del>18/1/18</del>	<del>3567</del>	<del>BRDY.</del>	<del>9.73</del>				
			14.39				

PARTICULARS OF RENDERING NON-EFFECTIVE: **Trans to Can 31/12 AR 161 17/12 2000 2000 CR Bal 67.24 81.63**

1918 MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
MAR	Bal Ford								156.25	60	
apl	P. Pay	33		Ass Pay				20			
				AR 268. 19/4 - CTC2 dist	2.68						
				- 289 29/4 - R dist	3.57				162.97	60	
May		33		Ass Pay	6.25			20			
	P. Pay	34	10	AR 358 7/5. CTC 12	3.57						
				AR 573 17/5 - -	3.57						
				AR 1097. 28/5 - -	2.68				167.25	60	
June	P.P.	34	10		9.82			20			
		33		Ass Pay				20			
				AR 908. 7/6 CFC 1	3.57					60	
				✓ 104 22/6 ✓	3.57				173.11		
July	PP.	33			7.14			20			
		34	10	Can AP				20			
				AR 1294 6/7 CFC 1	3.57						
				AR 1503 22/7 ✓	3.57				180.07	60	
Aug	PP	34	10		7.14			20			
		34	10	Can AP				20			
				AR 1698. 6/8 6761	3.57						
				AR 1946 22/8 ✓	3.57						
				AR 665 6/8 LIN	50.00				137.03		
Sep	PP	34	10		57.14			20			
		33		Can AP				20			
				CP 33210 13/9 London	24.33						
				AR 2201 6/9 CFC 1	3.57						
				AR 2254 10/9 CFC 1	1.78						
				CP 34364 16/9 London	7.30						
				AR 4186 10/9 CFC 1	48.67						
		33		Jord	85.65			20	137.03	60	

COMPILED BY: **W. Harris**  
CHECKED BY: **W. Harris**

CANADIAN ASSIGNED PAY AUDITED  
DATE: **10/11/18**  
AUDIT CLERK: **W. Harris**

NUMBER 931541 RANK *Pre* NAME *DORSEY J*

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
		33		Broffward	8565			20	137 03	60	
		33		AR 2442 23/9 CFCI.	357			20	60 81	60	<i>4/11</i>
Oct	<i>99</i>	34 10		cat				20			
				AR 2679 7/18 CFCI	373						
				AR 2981 23/10/8	373				67 45		
		34 10			17 46			20			
Nov		33		cat				20			
				AR 3098 11/18 CFCI	373						
				AR 3305 23/11/8	1306						
Dec	<i>Int Pay 30/12/18</i>	34 10		Canat.				20			
				AR 6573 10/12/18 CFCI	1679				87 38	60	
				AR 3567 18-12-18 B' Reg Sp.	466				81 63		
					973				67 24		
					31 18			40 -			
				AR 1149 13/19 bond on to PC	943						
				" 16 21119 28/19	487				52 64		
				AR 1425 10/19	973				42 91		
					24 33						
				<i>S.O.S - CANADA - 9-1-19 2016-1-19</i>							





This space to be for numbers.

9-10-35

War Service Badge

Class

No. 89667 issued

JK

# Proceedings on Discharge.

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page.)

No.	931541
Rank	Pte.
Surname	DORSEY. JOSEPH
Christian name	
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	#2 Const. Bn. (#2 D.D.)
Date of discharge	March 17th, 1919
Place of discharge	TORONTO, ONT.

## 1. DESCRIPTION AT THE TIME OF DISCHARGE.

	Descriptive marks
Age.....20.....years.....months.	
Height.....5.....feet.....7.....inches.	
Complexion Dark	Vacc. scars on left arm
Eyes D. Brown	
Hair Black	
Trade Labourer	
Intended place of residence	
(To be given as fully as practicable.)	
54 Page St.,	
St. Catherines, Ont.	

2. The above-named man is discharged in consequence of

### ON GENERAL DEMOBILIZATION

Authority for discharge.....D.O.....D.D.#2 Pt.,11.#73....

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

3. Conduct and character while in the service have been, according to the records, etc.

N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

M. F. B. 218.

200M.—5-18.  
H. Q. 1772-29-113.

(OVER)

5. He is in possession of the following number of G. C. Badges

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company, (Squadron or Battery, and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place).....

(Date).....

Commanding.....

8. Certificate to be signed by the Soldier on Discharge

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page, and that I have received my permanent discharge certificate.

(Place)..... TORONTO, ONT. (Signature of Soldier.)

(Date)..... March 17th, 1919 (Signature of Witness.)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

..... (Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to.... (the date to which the Record of Service is completed).....years.....days.

Total.....years.....days.

11. Confirmation of Discharge.

The discharge of the above-named man is hereby confirmed.

(Place)..... TORONTO, ONT.

(Signature).....

(Date)..... March 17th, 1919

FOR [Signature]



**Reservations referred to at Para. 8.**

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

**List of Discharge Documents**

Statement Type	Statement Form
Particulars of Discharge	Form 100
Particulars of Discharge	Form 100
Particulars of Discharge	Form 100
Particulars of Discharge	Form 100
Particulars of Discharge	Form 100
Particulars of Discharge	Form 100
Particulars of Discharge	Form 100
Particulars of Discharge	Form 100
Particulars of Discharge	Form 100
Particulars of Discharge	Form 100

I hereby certify that the following documents are indelible:

(When Continued)

amount of same is to be noted below.  
 the date and number of deposit receipt with  
 in the case of a man discharged by purchase.

## List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263</p> <p>Squadron }          Battery } Conduct Sheet, " B. 263a          Company }          or          Field Conduct Sheet " W. 178</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia form B. 313</p> <p>Casualty Form " W. 54</p> <p>Medical Report for Invalid§ " B. 227</p> <p>Dental History Sheet " B. 465</p> <p>Last Pay Certificate " W. 44</p> <p>Duplicate Discharge Certificate " W. 39A</p> <p>‡Form of Will " W. 82</p> <p>§Only if discharged "Medically unfit."          ‡Only if man has not been overseas.</p>	<p>Attestation Paper Militia Form W. 23          or          Particulars of Recruit " W. 133</p> <p>Proceedings on Discharge " B. 218</p> <hr/> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p style="padding-left: 40px;">(a) Proceedings on Discharge.</p> <p style="padding-left: 40px;">(b) Attestation.</p> <p style="padding-left: 40px;">(c) Medical History Sheet.</p>
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Documents not accompanying this form should be crossed out.

*I hereby certify that the following documents are unobtainable.*

*Officer Commanding.*

*N.B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.*

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

REGT. No. 931541

RANK Pte.

NAME (IN FULL)

DORSEY, J.M.

M. OR S.

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C. E. F.	IF IN P. F. WHAT UNIT?	(BLOCK LETTERS, SURNAME FIRST)
ADDRESS					2 Con. Co.	TRANSFERRED TO	DATE AUTHORITY
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE					TRANSFERRED TO	DATE AUTHORITY
TO WHOM PAID	RELATIONSHIP				20.00	DATE EFFECTIVE	
ADDRESS					1-3-19	ASSIGNED PAY \$	
						PAYABLE TO	RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS
						54 Page St., St. Catherine's Brother Que. Ont.	
						STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE
						DISCHARGED	REASON AUTHORITY IF ENTITLED TO POST DISCHARGE PAY
						Toronto	17.3.19 Demob. 2073 Yes

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	\$	C.	\$	C.	COL. NO. 1			COL. NO. 1		COL. NO. 2		\$	C.	\$	C.	\$	C.	\$	C.	
								NO.	DATE	NO.	DATE	NO.	DATE	\$									
Balance from previous account																							
9/1-12-18		\$ 1.10																					
1-1-19	76	10	83 60																				
Mar 17																							
153 dys.																							

Jan 4 Feb 1919 P.P. 7.7  
17/2 D.O. 63  
17/3 15/2 63

1st W. G. Paid by #2 D.D.

W.S.G. PAID IN FULL

*[Signature]*  
PER PAYMASTER



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

D

5810

1/4/18  
April 1919

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

10	20 <sup>00</sup>		
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## PARTICULARS OF SEPARATION ALLOWANCE

No. 931541  
 Rank Pte. Promoted Reverted Discharge  
 Soldier's Name Joseph Dorsey  
 Battalion No 2 Const. Battn  
 Beneficiary  
 Relationship  
 Address

## PARTICULARS OF ASSIGNMENT

Name Mrs. Edith Dorsey (mother)  
 Address 54 Page St, St. Catherine's  
 Change of Address Ont.  
 1  
 2  
 3  
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917					4896-9-1
Jan 1918	M 67525		90	90	
Feb	E 97175		10	10	m <sup>c</sup>
March	A 126260		10	10	
April	X 13334		20	20	Che M.R.O 16 sent 2/4/18.
May	O 17520		20	20	Che
June	K 20720		20	20	Che
July	O 33171		20	20	J
Aug	K 35209		20	20	J
Sept	N 45719		20	20	J
Oct	O 54762		20	20	J
Nov	K 57313		20	20	J
Dec	J 66125		20	20	J
1919	O 72851		20	20	
Dec	S 79168		20	20	
			340	340	

CANADIAN  
 ASSIGNED PAY AUDIT  
 AUDIT CLERK  
 DATE 10/6/19

M. F. W. 128  
 4004 6-17-1772-38-141  
 L. L. 2220-M. & D. 1983.

A/c Closed 28-2-19  
 Ret'd per Comptroller of Britain  
 Date 25-2-19 M.F.W. 187... 3-3-19  
 No. of M. Cameron  
 INFO. 73738 (Destroy)



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.				
Rank	Promoted	Reverted	Discharge	
Soldier's Name				
Battalion				
Beneficiary				
Relationship				
Address				

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-6-17-1772-89-1141  
L. L. 22320-M. & D. 7593.

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

To Whom *Mrs Edith Dorsey* By Whom Assigned *Dorsey J. M.*  
 Address *54 Page St* Regtl. No. *931541*  
*St Catherines* Rank *pte.*  
*Ont* Corps *2 Con Bn*  
 Rate *\$ 30.00*

*Sched 465.26.11.17* PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915 1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.		<i>47556</i>	<i>30</i>	<i>Mailed 19-12-17.</i>
Jan.	1916			
Feb.				
March				

Two