ORIGINAL 931580

ATTESTATION PAPER.

No. 931580

No. 2 CONSTRUCTION, B.R. C.E.F.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ..... Duncan
1a. What are your Christian names? ..... John
1b. What is your present address? ..... #240 Gratiot Ave.
2. In what Town, Township or Parish, and in what Country were you born? ..... Peora Ill.
3. What is the name of your next-of kin? ..... Has no relatives
4. What is the address of your next-of-kin? ..... (Mrs. Davis, friend) #214 N. Washington St.
4a. What is the relationship of your next-of-kin? ..... (Peora Ill.
5. What is the date of your birth? ..... Does not know
6. What is your Trade or Calling? ..... Cook
7. Are you married? ..... Single
8. Are you willing to be vaccinated or re-vaccinated and inoculated? ..... Yes
9. Do you now belong to the Active Militia? ..... No
10. Have you ever served in any Military Force? ..... No
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? ..... Yes
12. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force? ..... Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, John Duncan, 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.

John Duncan X (Signature of Recruit)

Date Oct. 13 th. 1916. J.O. Muston (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, John Duncan, 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.

John Duncan X (Signature of Recruit)

Date Oct. 13th. 1916. J.O. Muston (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 Windsor Ont. this 13 th. day of Oct. 1916.

James G. Thyne (Signature of Justice)

M. F. W. 23.
200 M.—11-15.
H. Q. 1772-39-841.

Description of John Duncan on Enlistment.

Apparent Age 24 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 8 ins.

Chest measurement: Girth when fully expanded ..... 33 ins.
Range of expansion ..... 2 1/2 ins.

Complexion ..... Dark

Eyes ..... Dark

Hair ..... Dark

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

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).

None.

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him* Fit for the Canadian Over-Seas Expeditionary Force.

Date Windsor Ont. Oct. 13th 1916 .....

Place Windsor Ont. ..... Capt. A.M.C. .....
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.

..... John Duncan ..... 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. H. Reis Capt (Signature of Officer)

Date OCT 24 1916 191 .

REGIMENTAL DOCUMENTS

NAME DUNCAN JOHN REGT. NO. 931580 UNIT C.F.C. H.Q. FILE NO.

931580 No 2 Constr. Bn.

2nd Enl	CONTENTS	1st Enl	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
S	ATTESTATION PAPER (M.F.W. 23, 133, or 51)	2					DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)	1					Category
	TRAINING HISTORY SHEET (M.F.W. 113)						
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)						
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)	1					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)	1					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)	2					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)						Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					39508 (2)	DEMOB.
1	MEDICAL EXAMINATION (M.F.W. 129)						
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)						
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)	2					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)	2					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					(1)	Deserter.
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)						
	PARTICULARS OF CHARACTER (A.F.W. 3226)						
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)						
1	M.F.W. 67.	1 Pay Cards.					
2	Form CD3.						
1	CADC. 500 gr.						
1	SCR Form. 132						
2	Miscel.						
2	Cas Cards						1-14
2							25-14
1	Pay Cards						27-14
							2

M H

W 2589
100M-11-18
1272 39 1377

#931580
Duplicate

To be made out in duplicate. H.Q. 54-21-23-53

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

INSTRUCTIONS.

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

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

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

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

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

---

(1) Name of Overseas Unit which Soldier joins Forestry Depot, M.D. No. 1.

(2) Regimental Number 931580

(3) Full Name of Soldier John Duncan

(4) Place of Birth Peoria Ill U.S.A.

(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?.....

If so, give number of boys and girls.....

Also their names and ages.....

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? No.

If so, state name and address

(10) Is your Mother alive?

If so, state name and address No.

(11) If your Mother is a widow

Are you her sole support, or not?

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

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

Mrs Davis, (Friend)
214 N Washington st Peoria, Ill U.S.A.

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

15) Are you insured? No.

If so, in what Company?

Have you made arrangements for payment of your Insurance premium

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

W J Douglas Major
O. C. Forestry Depot No. 1 Officer Commanding.

Date Oct 5th 17

SURNAME. Duncan.

CHRISTIAN NAMES John.

REGL. No. 531580. RANK Pte.

UNIT ~~No. 2. Construction~~ For. & Rly. Constr. M.D.1. Draft. ~~Bn~~

FORMER CORPS Nil

CARD NO. 14

FOLL. S.O.S. Demob 25-4-19 DO 128-8-5-19 4 Bn

NEXT OF KIN.

NAMES IN FULL Davis, Mrs.

RELATIONSHIP TO SOLDIER Friend.

ADDRESS 214 N. Washington St. Peoria Ill. USA.

CHANGE OF ADDRESS

COUNTRY OF BIRTH U.S.A. Peoria, Ill. DATE Not known.

PLACE OF ATTESTATION Windsor, Ont. DATE Oct. 13th. 1916

Trans from No 2. Constr Bn to For & Rly. constr Corp.

L. L. 6945. M. & D. 6994. Fed. 0/S-21-12-17

M.D.1. Draft. Auth. M.D.1. Draft. S.L. 13-12-17.

M. F. W. 22. 100M.—8-16. H. Q. ~~1772-39-339~~.

R/c. 23-4-19. 90 Pte

Sailed per S.S. Missanabie. 21-12-17 from Halifax

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING Cook. RELIGION Methodist

DESCRIPTION.

APPARENT AGE 24. YEARS Not stated MONTHS

HEIGHT 5. FEET 8. INCHES

CHEST MEASUREMENT 33 INCHES EXPANSION 2 1/2 INCHES

COMPLEXION Dark. EYES Dark. HAIR Dark.

DISTINGUISHING MARKS Nil.

MEDICAL EXAMINATION. PLACE Windsor, Ont. DATE Oct. 15th 1918

Present Address. 240 Gratiot Ave.
Windsor, Ont.

No. 931 580 RANK Pte. NAME Duncan. John.

T. O. S. 13-10-16 UNIT No 2. Construction Battalion

DD. 55 19-10-16

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PARTICULARS	AUTHORITY
1916	1916			
Oct. 13.	Oct. 31.	N.		
Nov.		✓		
Dec.		✓		
1917 Jan	1917	✓		
Feb.		N	A W L since 24-2-17.	Mar. pay list.
Mar 1	Mar 19	N	Dec. des. by C of I. 19-3-17	DD 67. 20-3-17
			a/c not closed.	

Form R. 149.

John

931580

Name DUNCAN Rank Pte. Reg. No.

Unit C.F.C. 36 Coy

Next of Kin U.S.A.

Date 1918.	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
15-4.	C.F.C. Hosp La Jouse	Jura	V.D.G.	A.	190	845/13
29-4.	Dis to Duty		Do.	A.	202	1082/18
8.11.18	C.F.C. Hosp. La Jouse	Jura	Myalgia	A	365	5576.3
10 11	Discharged		Do	A	369	5612.8

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

NAME Duncan J

RANK AND CORPS Pte 36th Bn Can Inf Corps

REGT'L. No. 9316-80

H. Q. FILE No 649

FOLLOWS No.

FOLLOWS

CABLE No.	DATE	NATURE OF CASUALTY

L. L. 31493. M. & D. 8476.

M. F. W. 42–100M.—28-11-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
a190	can Tn Corps La Jux. Jura	15-4-18	V D G
a202	Disch to Duty	29-4-18	" " "

Number 931580 Rank Pte

Surname Duncan

Christian Name John

Units C.A.C. Theatre of War France

Date of Service 26-1-18

Remarks

Latest Address Wounded P.O.

Roll No.

200m.-2-21.M. B Page 17814

DATE AND PLACE OF ORIGIN

*DUE TO SERVICE
*NOT DUE TO SERVICE

OSPITAL AS AN ADMISSION

WHERE FROM)

IIT IN CATEGORY

INVALID

WHERE TO)

ITIONS DIAGNOSED

ADDRESS

HOSPITAL STATION

* CROSS OUT CONDITION NOT APPLICABLE.

(OVER)

No. 931580 RANK Pte. NAME Duncan J.

T. O. S. UNIT Forestry & Railway Const. Depot

M. D. I

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PARTICULARS	AUTHORITY
1917 Sep 19	1917 Sept 30	n		
Oct		c		
nov.		c	a. w. L. 12.01 a.m to 8 p.m 1 11/17	Nov Sig list.
Dec		n		

NAME Duncan J. REGT. No. 931580

RANK AND UNIT Pte. 36th Can For Corps.

NEXT OF KIN

CABLE	
No.	DATE

NATURE OF CASUALTY

M. F. W. 42—100M.—8-18.
H.Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
a 368	Cantor. Corps. La Joux Jura	8-11-18	myalgia
a 369	Detention Hosp. Facture Gironde	10-11-18	myalgia

D.M.S. 1300-50M-21-11-17.

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
Duncan	J	931 580

RANK	UNIT	CO.	TROOP	BATTY.
Pte	6 F.C	36		

HOSPITAL	DATE OF ADMISSION
C.F.C.P. La Jouxe Jura	15. 4. 18

1. C F C P La Jouxe Jura HOSP. 8.11.18
2. HOSP.
3. HOSP.
4. HOSP.

DIAGNOSIS V.D.G. 160

1. Myalgia
2.
3.

DISPOSITION

Dis. to Duty. 29-4-18 DATE

Dis. Duty. 10.11.18

REMARKS

Ch 24 4.18 a 190'
" 8-5-18 a 202 (1)
19.11.18 a 368 (1)
20.11.18 a 369 (1)

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT

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

Form R 122.
8750—15M—25-4-17.

FOR&RY CON Dft LON. ONT To B D C F C

W.W.

Rank Name DUNCAN. John. Reg'l No. 931580.

Unit If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Windsor. 13-10-16. Place of Birth Peoria. 111.

Name and Address, Next-of-Kin Mrs. Davis.

214. N. Washington. Street. Peoria. Ill. Relationship Friend.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

N/E. R.B. No. 11899
File R.L.
Category O R Gan

Discharge, Date and Place Reason Character

H. W. V., Ld.—11319-17.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
	C.	Arrived in England		31-12-17	S/S GRAMPIAN
8.1.18.	C.F.C. B.D.	T.O.S. from Canada Pte	S'dale.	31.12.17	Pt II D.O. 7
28.1.18	" "	S.O.S. on perm. to France Pte	"	26.1.18	" D.O. 24
20.2.18	" 36 Cov	T.O.S. on arrival in France Pte	Field.	27.1.18	" D.O. 9
SOS to BDCFC, 1 2.19					
36 Cov DO.6 d.5 2.19 &					
TOS BDCFC Seaford					
11th Res. Bn. DO 33, d 7 2 19					
3-3-19	B.D.C.F.C.	T.O.S. from 11th Res	– S'dale	27-2-19	– 62
27-2-19	11th Res C.F.C. Bns	S.O.S to BDC.F.C. S'dale	– S'ford	27-2-19	– 50
5-4-19	4th CFC MDCM	TOS from CFC.	✓ Rhyl.	1-4-19	✓ 83 & Pt II O 94 BDCFC d/4-4-19
			44	16.4.19.	

ckd 30.1.18 55

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.				
22.4.19	4 MDCW app N C&C	SOD to C&F Can	Pte Rtyl	16-4-19	— 95

Forestry & Ry. Construction Depot M. D. No. 1. #931580 Original

MEDICAL HISTORY SHEET

ORIGINAL

Surname Duncan Christian Name John

Examined on 22 nd. day of Oct. 1917 at London Ont.

Birthplace City or Town Puroy County Ill in. U.S.A.

Apparent age 28 years

Trade or occupation Cook.

Height 15 ft. feet 8¼ ins. Inches

Weight 153 lbs.

Chest measurement Minimum 34 inches Maximum expansion 3½ inches

Physical development Good

Small-pox Marks None

Vaccination Marks Arm Right Left Number none

When Vaccinated last 13 years ago

(a) Marks indicating congential peculiarities or previous disease none

(b) Slight defects but not sufficient to cause rejection none

Approved by [signature]

Rank Capt M.O.

Date	Fit or Unfit	Examined for Re-Engagement
22/10/17	A	A. E. McLarty Capt Cam C M.O.
10/12/17	A	A. E. McLarty Capt. Cam C M.O.
8.1.18	a.2	W B Donald M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations
6/9/17		G W Ballantyne M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
6/9/17		G W Ballantyne M.O.
13/9/17		M.O.
18/9/17		M.O.

Enlisted on day of 191 at

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	No.2 R.R. Con.			
Transferred to	Posted from desertion Forestry CFC O/S	931580		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
Montreal	25/4/1919	Fit for discharge	[signature]
London, Ont.	22/10/17.	Nil	Category "A"

Examined by Med. Board.

A. E. McLarty Capt. Cam C

Pres.

A. E. McLarty Capt. Cam C

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.

9/1/18 A2

M. F. B. 313.

300M.—1-17.
H. Q. 1772-39-439.

Surname Duncan Christian Name John

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				

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) DUNCAN. J.

REGIMENT 11 Res RANK Pte No. 931580

Date of Examination in England 19-2-19 Date of Examination in France

PRESENT DENTAL REQUIREMENTS

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

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
- (*b*) In England
- (*c*) In France

[illegible] No. 4

Signature of Dental Officer [illegible]

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. 931580 Rank Gnr Surname DUNCAN

(Given name in full) JOHN.

Unit or Corps 1st Reserve Birthplace PEORY ILL. U.S.A.

(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. 8 in. Colour of Eyes Brown

Nutrition Good

Pulse 72

Condition of arteries Normal

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).

Scar - left wrist anvil type.

Opinion as to general health and physical condition Good

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

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

Special Senses No Integumentary System No Respiratory System No

Disturbance of Mentality No Muscular System No Digestive System No

Osseous and Joint System No Any other general condition 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.

V.D.C. - 15-4-18. - discharged cured.

Myalgia - 8-11-18 - no disability at present.

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

[OVER]

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Seaford (Overseas)

Date 18-2-19 Signed G W Macleod Capt M.O.

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

Signature John Dawson

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

THIS SECTION FOR USE IN CANADA—

Examined at Montreal (Canada)

Date 25/4/1919 Signed J J Andrews Capt M.O.

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

Signature [illegible]

(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.)

[OVER]

M.F.W. 129.

FORM OF WILL

I, John Duncan (Name in full)

Regimental Number 931580 serving in Forestry Depot, M.D. No. 1.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I devise all my real estate unto

6K. GPO Victoria BC

Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to my friend

Miss Minnie Gordon
329 Munroe Ave.
Detroit, Mich, U.S.A.

Name and Address of person or persons to receive personal estate* (*See note*).

NOTE
This space for the appointment of Executor if necessary.

IMPORTANT NOTE
This must be signed and Dated by THE SOLDIER HIMSELF.

this 5th day of October A.D. 1917

[signature] (John Duncan) Signature of Soldier.

*N.B. Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness R. C. Stock

Address of Witness Woodstock, Ont.

Occupation of Witness Soldier

Signature of Second Witness Alex. O. Potter

Address of Witness Kitchener Ont.

Occupation of Witness Soldier.

ESTATES

MIL. & DEF.
P.M. SEP 8 1919

M. F. W. 82.
300M.-12-16.
1772-39-983.

Ret'd from MD 4.
Nom Roll No 10.

D E C L A R A T I O N

Of Court of Inquiry held under Section 72 Army Act for the purpose of determining the illigal absence and deficiencies of Kit (if any) of:-

No ..... 931580 Pte. J. Duncan .....

of ..... No 2 Construction Battalion . C.E.F. .....

The Court having heard the evidence declare that No 931580 . Pte. J. Duncan .....

of No 2 Construction Battalion, C.E.F. is illegally absent since the 24th February 1917 and may therefore be proceeded against as a deserter; and that he is also deficient of the following articles of the arms, ammunition, equipments, instruments, regimental necessaries and clothing, which it was his duty to have, viz.

ARTICLES	VALUE		ARTICLES.	VALUE.	
2 Prs Boots.....	$ 8	20	Carried forward.....	$59	54
1 " Puttees	1	00	1 Holdall.....	0	25
1 " Gloves.....	0	37	1 Knife table.....	0	11
1 " Shoes, canvas.	1	70	1 Razor & Case.....	0	55
1 " Braces	0	32	2 Shirts, winter.....	2	30
1 " Trousers, S.D..	3	55	2 Shirts, flannel.....	2	80
1 " " service.	1	15	1 Shirt, service.....	1	15
1 " Socks.....	1	20	1 Spoon.....	0	10
1 Set Badges.....	0	13	2 Towels.....	0	52
1 " Numerals.....	0	04	3 Blankets.....	10	50
1 Greatcoat.....	8	50	1 Palliasse.....	1	65
1 Jacket serge.....	5	25	1 Bolster.....	0	16
1 Sweater.....	1	70	1 Waterbottle.....	0	40
1 Kit bag.....	0	60	Covers, mess tin.....	0	12
1 Brush, cloth.....	0	35	Mess tin complete.....	0	27
1 " hair.....	0	26	1 Carrier, Water bottle..	0	52
1 " tooth.....	0	15	Straps attached.....	0	12
1 " shaving....	0	21	Mess tin	0	02
1 Comb.....	0	46	1 Belt, waist.....	1	59
1 Fork.....	0	11	1 Pack	2	02
1 Drawers, prs.....	2	30	1 Haversack.....	0	82
1 Rubbers, pr.....	1	78	1 Braces.....	1	29
1 Cap, forage.....	1	32	1 Cap, winter.....	1	39
	$59	54	Total.	$60	05

Signed at Truro N.S this 16th day of March 1917.

W A Hayes Capt. President.

Approved.

L D Young Lieut. MEMBER.

D A Sutherland Lieut-Col.

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

M. F. W. 54. (A. F. B. 103:
500M.—9-16
H. Q. 1772-39-920.

Sheet #3

Casualty Form—Active Service.

Unit, Regiment or Corps C.F.C.

Regimental No. 931580 Rank Pte. Name DUNCAN, John.
C. E. F.

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

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

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

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
8-5-19.	O/S	T.O.S. D.D.#4	Montreal	16-4-19.	D.O.Pt.II#128.
8-5-19.		S.O.S. D.D.#4. Demob.	Montreal	25-4-19.	D.O.Pt.II#128 R.O. 1420.

G.H.Fletcher Lieutenant,
a/Assistant Adjutant,
District Depot No. 4.

(*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				

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

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

Casualty Form—Active Service.

~~Unit, Regiment or Corps~~ 702 Const Battn C E F

Regimental No. 931580 Rank Pte Name John Duncan
C. E. F.

Enlisted (a) (2) 13-10-16 Terms of Service (a) Duration of War 6 Months Service reckons from (a) 13-10-16 (2)

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.
	# 2 Constr. Battalion	S. O. S. "Illegally absent" Court of Inquiry held 19-3-17.	Truro.	24-2-17	pt-II 67. Auth. "C" pay list for March 1917
16/11/21.	# 2 Cons. Bn.	Having been declared by C. of I. held 16-3-17 Ill. Absent from 24-2-17. is S.O.S. as Deserter.	Ottawa.	24-2-17	after Order # 10.

Make No Card. Continuous Service "R" 14/12/21.

D. Lutline

Capt.
for D.O.R.

(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				

Army Form B, 103—II.
Part II.

(SERVICE AND CASUALTY FORM Part II).

Regiment or Corps Pte. Regimental Number 931580

*Substantative Rank Surname Duncan, Christian Names John,

*Acting Rank

(* To be entered in pencil to facilitate alteration.)

(A) Report Date.	(A) Report From whom received	(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
6-2-19	O.C. Cdn. S.O.S. for demobilisation to C.F.C. Conc. Cmp. Le Havre		Depot Sunningdale,	1-2-19	N/R. Pt. 2.O/S.	1-2-19 6/1919
			C A Hewett		Lieut. for Lt. Col A.A.G. Cdn. Sect. G.H.Q.	
7-2-19	O.C. 11th Pt-II Bn O33.		T.O.S on reporting from France and posted to C.F.C. Coy	Seaford	7-2-19	

Embarked Liverpool SS BELGIC
April 16th 1919
Disembarked Halifax Apl 2
[signature] Capt & Ad

To be folded on this line.

Nothing to be written in this margin.

A1834 W.6425—P1600 500,000 10/18 G.W.P.Co.3973.

(A) Report Date.	(A) Report From whom received	(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I, 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
24/2/19	Or 11th	50	S.O.S. on transfer to C.F.C. Sunningdale	Seaford	27/2/19	Pt II Bnd 50
						S S Cameron LT. For ADJT. 11th RES. BTN. (MAN.)
3-3-19			O.C. C.F.C. T.O.S. Base Depot, C.F.C. Sunningdale	27-2-19	Pt. 11 D.O.	62
			From 11th Res Batt			
4-4-19.	B.D.C.F.C.		S.O.S. BASE DEPOT C.F.C. SUNNINGDALE on posting to Can Camp Rhyl.	4-4-19	Pt. II D.O.	94
						W. F. Stewart Lt. for O.C. B.D.C.F.C.
4/4/19.	T.O.S.		C.C.C. Kinmel Park for return to Canada Part II Order No.			
			C.C.C. Kinmel Park on Embarking for Canada Part II Order No.			

Lieut.
Officer I/c Records
No. 4 M.D. Concentration Wing.

Nothing to be written in this margin.

36

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps Forestry Depot, M. D. No. 1. to B.D. C.F.C.

Regimental No. 931580 Rank Pte. Name Duncan, John

Enlisted (a) Windsor 13-10-16 C. E. F. Terms of Service (a) Duration of War ~~Six months after~~ Service reckons from (a) 13-10-16

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) (Cook)

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.
		EMBARKED	CANADA		H. M. T.
		DISEMBARKED	ENGLAND		H. M. T.

Date	From whom received		Date Transferred.	Authority
	Forestry &Rly Con.	Transferred O/s London, Ont.	14-12-17	H.Q.698-6-7 d/4-12-17
		Embarked St Johns.	Canada DEC 19 1917	H.M.T. Missanabie
8/1/18	C.F.C.B.D.	Disembarked Liverpool	England DEC 31 1917	H.M.T.

BASE DEPOT C.F.C. SUNNINGDALE 31/12/17 PT. II. NO. 7 C.F.C.

(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.

CERTIFIED CORRECT
1 FEB 1918

BASE DEPOT C.F.C. SUNNINGDALE 26-1-18 PT. II. DO. NO. 24
A K Aug Capt for O.C. C.F.C.

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.
28-1-18	O.C. C.F.C. BD.	S.O.S. on transfer to France			
27/1/18	C.G.B.L.	Taken on Strength of 36 Coy C.F.C.	Field	27/1/18	W.S.P. W/R. R&R. 484 d/29/1/18. Part 2. order No 9. d/20/2/18
21-2-18	O.C. 36 Co.	Sentenced to 7 days F.P. # 2. for A.W.L. from 9.30 A.M. 12-2-18. to 7.00 A.M. 15-2-18. Forfeits four days pay by R.W.	Field	16-2-18	B2069 Pt II O. # 12 a/ 6/3/18
15-4-18	Jura Hosp.	V.D.G.	admitted	15-4-18	W8271/E5125.
4/5/18	O.C. 36 Co	"	Discharged	29-4-18	B213 & W3034 a/ 29-4-18
4/5/18	"	Forfeits fld allowance & is placed under stoppages of pay at the rate of 50 cents per diem while in hospital from 15/4/18 to 29/4/18 — 15 days			B213 Pt II O. 21 of May 1918
12-9-18	2 Cdn. Con Coy.	Sentenced to 15 days F.P. # 2. 10-9-18 for "A.W.L. from 9.30 P.M. 8-9-18 to 7 P.M. 9-9-18. Forfeits one days pay by RW			B2069 Pt II O # 41 a/ Sept 27th 1918
8-11-18	Jura Hosp	Myalgia Adm.	Jura Hosp	8-11-18	W-1449.
10-11-18	" "	" " Disch.	" "	10-11-18	W-1787.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 931580 (Rank) Private

Name (in full) Duncan, John enlisted in

the Canadian Forestry Corps

CANADIAN EXPEDITIONARY FORCE at Windsor, Ont. on the 13th

day of October 1916

HE served in France

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	25 years, 3 months	Marks or Scars	Scar on left wrist
Height	5 feet, 8 inches		
Complexion	Dark		
Eyes	Dark		
Hair	Dark		

Signature of Soldier

Date of Discharge

Dispersal Station "F" APR 25 1919 Military District No. 4

Issuing Officer

Lieutenant

Officer I/c Discharge Section, Dispersal Station "F"

Rank

Date April 25th 1919

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.

M.F.B. 39A.
1049-D.P.-300M-11-18.
H.Q. 1772-39-882.

DISCHARGE CERTIFICATE

CANADIAN EXPEDITIONARY FORCE

C. Coy. 22.3.19.

P. 880.

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

5

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 John 2. Surname Duncan

3. Rank Pte. 4. Original Unit CFC 5. Reg. No. 931580

6. Address, in full, to which future payments of gratuity are to be forwarded
Bank of Montreal. Montreal.

S. Lwr 7. ~~Date of enlistment in the C.E.F.~~ Oct-13-16

8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge

9. Relationship of such dependent

10. Address, in full, of such dependent

11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? 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?~~

S. Lwr 14. ~~Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service~~

15. ~~Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served~~

16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department No

17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? No

5434. Wt. /30P. 50,000(3). 2/19. S.O.,F.Ltd.

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?~~

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

(b) If so, was such reversion in consequence of misconduct or inefficiency? Not applicable

24. ~~Are you now serving in the C.E.F.?~~ If not, give: ~~(a) Date of discharge~~ ~~(b) Reason for discharge~~

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

26. ~~Did you at any time serve at the front in an actual theatre of war?~~ If so, give particulars of one unit in which you served at the front, and dates of such service with that unit

27. (a) ~~Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?~~

(b) ~~If so, are you in receipt of full pay and allowances from that Department?~~

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: John Kane

Place of Residence: Montreal. (none fixed)

Declared before me at: Smiths Lawn Sunningdale Berks. Eng.

This 21 day of March 19 19

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths under P.C. 2767, dated 11th Nov., 1918.

A. Lwillman major

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due

Certified Correct.

District Paymaster.

931580

ORIGINAL

MEDICAL HISTORY SHEET. 931580

Surname Duncan *Christian Name* John

Examined { on ~~13~~ 13 day of Oct. 1916 / at Windsor Ont.

Birthplace { City or Town Peora Ill. / County Illinois

Apparent age 24

Trade or occupation Laborer

Height 5 Feet 8 Inches.

Weight 150 Lbs.

Chest measurement { Minimum 31 1/2 inches. / Maximum expansion 33 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right. Left. Yes / Number One

When Vaccinated last 1911

(*a*) Marks indicating congenital peculiarities or previous disease No

(*b*) Slight defects but not sufficient to cause rejection

Vis:- Both eyes 20/20

Approved by [signature]

Rank Capt. A.M.C. M.O.

Date.	Fit or Unfit.	Examined for Re-engagement.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
		M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
		M.O.
		M.O.
		M.O.

Enlisted on 13 *day of* Oct. 1916 *at* Windsor Ont.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	#2 Const Bn C.E.F.	931580		13/10/16
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Windsor Ont	Oct. 13/16	On Enlistment	Fit
[signature]	[signature]	Fed Thurs	[signature]
Major AMC		Capt AMC	Capt A.M.C.

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

M. F. B. 313.

200M—11-15.
H. Q. 1772 39-439.

Surname Duncan Christian Name John

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

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ENGLAND OR CANADA.	SEPARATION ALLOWANCE. 690 * ENGLAND OR CANADA.	NAME — D
EFFECTIVE DATE :—	EFFECTIVE DATE :—	NUMBER :—
AMOUNT :—	AMOUNT :—	PARTIC

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.

AUTHORIT

Lost pay book. 10/3/19

ORIGINAL UN

DATE ACCOUN

AUTHORITY

a/c agreed 30.9.18. 9/1850.

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
~~22.3.19~~	~~10178~~	~~BD. C&L~~	~~14 60~~				

DAILY

AUTHO

PARTICULARS OF RENDERING NON-EFFECTIVE :— DIS to Canada 31/3/19 NR S/date 5184 22/3/19 mid 42. D.A.F.
£10 encroach Def Pay P.M.G 6/2/19.

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1
Mch	Bala forward				
415 (5) Apl	P. Pay	33		AR 67 - No 5 Dist - 8/4/18	3 57
				AR 157 - " 24/4/18	3 57
		33			7 14
May	"	34 10		V. D. Stoppages 15/4/18 to 29/4/18 (15 days) WO. 21 - SO. 3 - 36 ch 6°. 16/5/18	
				AR 339 - " 9/5/18	3 57
				AR 448 " 25/5/18	3 57
		34 10			7 14
June		33		AR 593 " 9/6/18	3 57
				DN/AR 870 " 27/6/18	3 57
		33			7 14
July	P. pay	34 10		AR 980 5 D 15.7.18	3 57
				" 1159 " 25.7.18	3 57
		34 10			7 14
Augt	P. Pay	34 10		" 1283 " 10.8.18	3 57
				" 1496 " 25.8.18	3 57
		34 10			7 14
Sept	P.P.	33		a.R. 1697 11-9-18 5 Dist	3 57
				" 1905 25-9-18 "	3 57
				10-9-18 Sentenced to 15 days F.P. No 2. for AWL from 9.30 p.m. 8-9-18 to 7 p.m. 9-9-18 Forfeits 1 days pay by R.W. D.O. 41503 36 Cay 27-9-18	
		33			7 14
Oct	P.P.	34 10		AR. 2098. 12.10.18. 5 Dist	3 73
		34 10			3 73
Nov	P.P.	33		2720. 18. 11.18. 5 Dist	5 60
Dec	—	34 10		3056. 18. 12.18 "	7 46
Jan	—	34 10		DN/AR 2900 26.11.18. RSR	13 06
		101 20			26 12

ENGLAND OR CANADA.

SEPARATION ALLOWANCE. 690

* ENGLAND OR CANADA.

EFFECTIVE DATE:-

AMOUNT:-

NAME:- DUNCAN. John

NUMBER:- 931580.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:- London 7 Ldn

DATE ACCOUNT FIRST OPENED:- 1-1-18

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			C.F.C. Eng
	1-4-18	25-4-18	" " France

DAILY RATES OF PAY AND ALLOWANCES

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

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

1st pay book. 15/3/19

a/c agreed 30.9.18. 9850.

VICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A/R	UNIT PAID BY	AMOUNT
	14 60				

NON-EFFECTIVE:- D/S to C.B. 2nd 31/3/19 NR 5/date 5184 22/3/19 mid 42 D.A.F. 5184 22/3 5 date 1/4

7 to encroach Def Pay P.M.G. 6/19.

LARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
ard.								90 82	145	
	33		AR 67 - No 5 Dist - 8/4/18	3 5 7						
			AR 157 - " 24/4/18	3 5 7				116 68	60	
	33 34 10		D Stoppages 15/4/18 to 29/4/18 (15 days) @ 6d. - 16/5/18	7 14					7	
			AR 339 - " 9/5/18	3 5 7						
			AR 448 " 25/5/18	3 5 7				134 44	71 25	
	34 10			7 14	9					
	33		AR 593 " 9/6/18	3 5 7						
			AR 870 " 24/6/18	3 5 7				160 50	86 25	
	33 34 10		AR 980 5d 15.7.18	7 14 3 5 7						
			" 1159 " 25.7.18	3 5 7				187 46	101 25	
	34 10			7 14						
	34 10		" 1283 " 10.8.18	3 5 7						
			" 1496 " 25.8.18	3 5 7				214 42	116 25	
	34 10			7 14						
	33		a.R. 1697 11-9-18 5 Dist	3 5 7						
			" 1905 25-9-18 "	3 5 7						
			10-9-18 Sentenced to 15 days F.P. No 2. for AWL from 9.30 p.m. 8-9-18 to 7 p.m. 9-9-18 Forfeit 1 days pay by R.W. D.O. 41 503 36 Cay 27-9-18		1760			222 68	123 25	
	33			7 14	1760					
	34 10		AR. 2098. 12.10.18. 5 Dist	3 7 3				253 05		
	34 10			3 7 3						
	33		2730. 18. 11. 18. 5 Dist	5 6 0						
	34 10		3056. 18. 12. 18 "	7 4 6						
	34 10		DW/DR 2900 26.11.18. R.S.R.	13 0 6				328 13	183 25	
	101 20			26 12					148 67	
									134 58	

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS			DR. 1	DR. 2	DR. 3.	DR. 4.
Feb	Feb	30 80		3212.	10.1.19.	5 Dist	3 73			
Mar		34 10		3684.	3.2.19	Seaford	73 –			
	Int on deferred pay	6 32		3322.	25.1.19.	5 Dist	5 60			
				CP. 25922.	6.2.19	Ldn	48 67			
				3900	15.2.19	S'ford.	24 33			
				3991	18.2.19	"	48 67			
				9171.	3.3.19.	3D	9 73			
				9556.	8.3.19.	✓	24 33			
		71 22		14005	14.2.19	36 Co.	238 67			
				10518	22.3.19	3D	14 60			
		71 22					253 33			
Apl				187	7/4/19.	Kimmel	9 73			
							9 73			

A & M. FORM REN'S ~~EFFEC.~~ 31/3/19.
DISCHARGED TO Cr DATE 25/3/19.
PAY BOOK VERIFIED 25/3/19.
BAL. 146 69 L.P.C. REN'S 25/3/19
AUTHY.

COMPILED BY [signature]
CHECKED BY [signature]

P868 rendered 26/3/19. pd 67¢ Bal now 146.02
Apr 187 End " " 136.29

S.O.S. Canada 16/4/19 8 L 44

NAME

Cr. 1.		Cr. 2.		PARTICULARS			Dr. 1		Dr. 2	Dr. 3.	Dr. 4.	BALANCE		DEFERRED		SEPARATION	
												328	13	134	58		
30	80			3212.	14.1.19.	5 Dist	3	73									
34	10			3684.	3.2.19	Seafood	73	-									
6	32			3322.	25.1.19.	5 Dist	5	60									
				CP. 25922.	6.2.19	Ldn	48	67									
				3900	15.2.19	S'food.	24	33									
				3991	18.2.19	"	48	67									
				9171.	3.3.19.	BD	9	73									
				9556.	8.3.19.	✓	9	33									
71	22			Nitoos	14.2.19	3b Co.	238	67									
				10518	22.3.19	BD	14	60	✓			14	02				
71	22			/			253	33				146	02				
				187	7/4/19.	Kinnock	97	73									
							97	73				136	29				

328 13
71 22
399 35
238 06
161 29
14 60
146 69

P. 559.

MARRIED OR SINGLE Single

PLACE OF BIRTH Peroia Ill. U.S.A.

NAME AND ADDRESS OF NEXT OF KIN Mrs Davis
2911 Durban St. Chicago,
~~214 N. Washington St.~~ ~~Peoria~~ ~~Ill.~~ U.S.A.

RELATIONSHIP OF NEXT OF KIN Friend.

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date
MONTH	PARTICULARS				CR. 1		CR. 2		PARTICULARS					DR. 1	DR. 2	DR. 3	DR. 4	BALANCE		DEFER-RED. PAY	SEP. ALLCE. ENG.		
DEC 31 1917	BALANCE FROM CANADA																	34	10				
1918 Jan	P. Pay				34	10												68	20	$15			
					34	10																	
Feby	P. Pay				30	80			AR B886 28. 1. 18 Bass Dpt					19	47			79	53				
					30	80								19	47			79	53				
Mch	"				34	10			D.O. 12. 6 3/18. C7CFr 366 (16 2/18) 7 ds FP2. AWL from 9 30 pm 12 2/18 to 7 am 15 2/18 11 ds forfeit						12	10								
									DNAR. 1936. 14 2/18 Jara					7	14								
									" 2203. 15 3/18 "					3	57			90	82	45.00			
					34	10								18	71	12	10						

OMOTIONS, &c.

EFFECTIVE DATE	AUTHORITY

HOSPITAL, &c.

NAME OF HOSPITAL

REG'L. No. 9316 80 RANK Private NAME DUNCAN JOHN

IF IN PERMT. CORPS / WHAT UNIT } UNIT London Ontario Forestry TRANSFERRED TO C.S.C. Eng DATE AUTHORITY

PERMANENT FORCE ALLOWANCES TRANSFERRED TO ... France DATE 1.4.18 AUTHORITY

PLACE OF ATTESTATION Windsor Ontario, Canada. TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 13/10/16. TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ ~~45 0 0~~ nil DATE EFFECTIVE ~~4/4/18~~

PAYABLE TO ~~Mrs Susan Oliver~~, Williamson Castle, Jamaica ~~West Indies~~ RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

ACQUITTANCE ROLLS 2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
														~~34 10~~			

ALANCE	DEFER. SEP. -RED. ALLCE. PAY ENG.
34 10	
68 20	6 15
79 53 / 79 53	
90 82	45 00

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS			
	NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.				1 NO.	1 DATE	2 NO.	2 DATE	3 NO.	3 DATE	4 NO.	4 DATE	1	2	3	4

CASH PAYMENTS			ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
2	3	4				CREDIT	DEBIT			

93/580

Duncan, John

53

Cat A. 4-4-19

S.G. 26

A.G. 12

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 931580

2 Rank. Pte.

3. Name. Duncans John.

4. Unit. C. F. C.

5 Date of Discharge 25-4-19. Place Montreal

6 Reason for Discharge Demobilization

WAR SERVICE BADGE. CLASS "A" No. 270744

7. Authority. D.D.#4. R.O. 1420. D.O.Pt.II#128.

8. Proposed Residence after Discharge Montreal.

Embarked Liverpool SS BELGIC April 16th 1919 Disembarked Halifax Apl 23/19 Capt & Adj.

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.~~? B39 Montreal April 25th 1919.

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Montreal

Date April 25th 1919

Signature ..... Lieutenant

(O. C. Discharging Unit.)

Officer i/c Discharge Section, Dispersal Station "F"

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

✓1. Triplicate Attestation Paper (M F.W. 23), or Particulars of Recruit (M.F.W. 133). E&S
✓2. Casualty Form (A.F.B. 103).
✓3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
✓4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
✓5. Dental Certificate (C.A.D.C. 5609a).
✓6. Field Conduct Sheet (A.F.B. 122.)
✓7. Proceedings on Discharge (M.F.B. 218a)
✓8. Discharge Certificate (M.F.W. 39)
(Enclosed in special envelope (260M)).
✓9. Copy of Discharge Certificate (M.F.W. 39a).
✓10. Universal Certificate (C.B. 3).
✓11. Equipment Statement Q.M.G. Form (D.O.S. 2), and (Clothing)
✓12. Last Pay Certificate (F. 851).
✓13. Pay Book (F. 1164).
✓14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group A
Checked by No. 22
[illegible] Lieut
Date 6/4/19

Group A
Checked by No. 22
[illegible]
Date 15/4/19

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

D . 7812

Date of Assignment Jan 1/18

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15			

PARTICULARS OF SEPARATION ALLOWANCE

No. 931580

Rank Pte Promoted Reverted Discharge

Soldier's Name John Duncan

Battalion For. & Ry. Const. Depot M.D. #1

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Susan Olivia,

Address Windsor Castle, Jamaica,

Change of Address West Indies

1

2

3

4

05106 J 103

Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
Jan	E 60014		15	15	D	
Feb	E 99017		15	15		
Mar	A 128091		15	15		
Apr	A 7099		15	15	L.	
May	O 19480		15	15	H	
June	K 22595		15	15	H	
July	O 28500		15	15	H	
Aug	K 37188		15	15		
Sept	N. 47835		15	15	H	
Oct	2 51260		15	15	L	
Nov	K. 59431		15	15	L	
Dec	J 67627		15	15	L	
Jan 1919	O 74796		15	15	L	
Feb	S 80961		15	15	C	
Mar.	J 88392		15	15	C	
Apr.	M 4488		15	15	C	
			240	240		

30 4/19 A/c Closed

Ret'd per Belgii

MD 4 Date 23 4/19 F.X. 1 5/19

Clerk H B Spencer

96908 D 1 5/19

AUDITED.

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

M. F. W. 128.
400M.—6-17—1772 39-1141
L. L. 22320—M. & D. 7993.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128.
400M.—5-17—1772 39-1141
L. L. 22830—M. & D. 7993.

AUDITOR | PAYMASTER

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

M. OR S. | REGT. No. 931590 | RANK Lce | NAME (IN FULL) DUNCAN JOHN. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS N/V

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Ret	16-4-19	D.O. 138 Par 13 Lce pay
Sailed for California	20-4-19	" "

ORIGINAL UNIT C.E.F. C.D.G. | IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 13-10-16. | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ 15.00 | DATE EFFECTIVE 1/5/19

PAYABLE TO Mrs Susan Allina | RELATIONSHIP

ADDRESS Winnipeg Manitoba

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

ANY CHANGE IN ASSIGNEE OR ADDRESS W.S.S. BANK of MONTREAL MONTREAL

DISCHARGED | PLACE Montreal | DATE 25-4-19. | REASON Demob. | AUTHORITY D.O. 138 Par 13 Lce pay | ENTITLED TO POST DISCHARGE

MILITARY DIST. NO. 2 AUG 26 1919 D. DEMOBILIZATION

B 10038

D1043

BALANCE FROM PREVIOUS ACCOUNT

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	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.		TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
							136	96	136	96																									BETGIC.
1/4/19																																	126	96	Pte Lce Emp 2 P.L.
1/5/19	31	11	34	10	35	00		139	10	Brot Forw				Chq 124847		48	50	266	19							5	50			281	56	5	50			C.E. 25 00 1-5-19 10 00 ✓
								276	06																									Lce Pay 25 00 26/4/19 to 1/5/19
																														240	00	240	00			240 00 Opd on Emp 21 C Rc
																																				Allots 1/6 deducted from
																														240	00	240	00			Made from 1.1.19 to 30.4.19 @
																																			1 00 per Mont. Separ Allowance
																																				Remitted by Ottawa ✓
			Other Credits		W. S. C.		S. A.	Total				War Service Gratuity														Other Charges		W. S. G.		S. A.	Total		Soldier Dependant			
					350	00		350	00																	5	50									
																										240	00	70	00		315	50	34	50		
25-3-19																												33	40							
																										1	10	33	50		34	50				1289913 ✓
																																350	00			
																																				a/c W. 2nd
30-10-19																										67						67				67 Q 4005, 798, 14-2-18 not Prev. taken into Consideration.
																																				A.P. 05106-J-103, 28-10-19 ad.
					350	00		350	00																	247	27	103	40		350	67	0	67		
			67						67																											Passed to Suspense Account
			67		350	00		350	67																	247	27	103	40		350	67				14/11/19
																																				Certified 1st Jan 20 D.S.C.

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1390.