143rd O/S BATT. C. E. F.

TRIPLICATE

ATTESTATION PAPER.

No. 826775

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? EDWARDS
1a. What are your Christian names? Lawrence James
1b. What is your present address? 922 Cloverdale Avenue, Victoria BC
2. In what Town, Township or Parish, and in what Country were you born? Tumbridge Wells, Kent, England.
3. What is the name of your next-of kin? Mrs Edith Edwards
4. What is the address of your next-of-kin? 922 Cloverdale Avenue, Victoria, BC
4a. What is the relationship of your next-of-kin? Wife
5. What is the date of your birth? August 21st 1873
6. What is your Trade or Calling? Insurance Clerke
7. Are you married? Yes two Children 8 yrs 2½ yrs
8. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes
9. Do you now belong to the Active Militia? Yes 50th Gordon Highlanders
10. Have you ever served in any Military Force? If so, state particulars of former Service. Yes 50th Gordon Highlanders 6 mts
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, ..., 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.

Lawrence James Edwards (Signature of Recruit)

Date July 17th 1916. J Gordon Smith Capt (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, ..., 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.

Lawrence James Edwards (Signature of Recruit)

Date July 17 1916. J Gordon Smith Capt (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 Victoria BC this 17th day of July 1916.

A Shotbolt (Signature of Justice)

M. F. W. 23
750M—8-16
H. Q. 1772-89-841

Description of Edwards. Lawrence James on Enlistment.

Apparent Age 43 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 8½ ins.

Chest measurement: Girth when fully expanded ..... 34 ins.
Range of expansion ..... 3 ins.

Complexion Fresh

Eyes Hazel

Hair Black

Religious denominations:
- Church of England yes
- Presbyterian
- Methodist
- 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).

One large two small burn scars between shoulder blades.

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 July 17 1916. M V Baynor

Place Victoria BC Capt AMC
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.

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

[signature] Lt. Col. (Signature of Officer)
O. C. 143rd Battalion, C. E. F.

Date July 17th, 1916.

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers.....2.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet ....1.....

Compulsory Stoppages.....

Casualty Forms.....1.....

Proceedings on discharge.....1.....

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....2.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....1.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....1.....

9 Pays.

M. F. W. 62.
25m.—11-15.
H. Q. 1772-39—935.

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name Edwards, Lawrence James.

Regt. No. 826775 Rank Pte.

Corps 143rd. O.S.Bn. C.E.F.

Poor physique.

~~29/8/19~~

C

02706

H

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F.,1916).

Regimental No. 826775 Rank Private Name L. J. Edwards.

Corps 143rd O/S Battalion CEF who was* discharged

On October 4th 1916. 191..., to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from October 1st 1916 191..., to October 4th 1916 191..., the inclusive date of ~~transfer or~~ discharge.

Dr.	$	c	Cr.	$	c
Bal. Dr. from prev. month			Bal. Cr. from prev. month		
Advances by Cheques } No.			Regt'l Pay 4 days at $ 1 c 00	4	00
Advances by Cheques } No.			Field Allow. 4 days at $ c 10		40
Assigned Pay No.			Other Allowances*		
Other Charges*			Other Credits* Clothing Stpge	10	00
Payment on ~~transfer or~~ discharge No. 9206	14	40			
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	$14	40	Total	$14	40

*Give Particulars.

A monthly stoppage of $ Nil (†) has - - - - - - (‡) been paid on account of Assigned Pay for the month of October 191 6 to (Assignee) Edith. E. Edwards

(Address) 922 Cloverdale Avenue

Victoria B. C.

(†) 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 July 21st 1916.

(2) if married and if a Separation Allowance Card has been submitted Married. Yes

(3) cause of discharge and authority "M.U" H.Q. 11 MD. 34-W-60. (Sep.26.1916)

If discharged from the Contingent, state if Stop Payment advice for Assigned Pay has been forwarded, and date Stop payment advice wired Octbr 5th 1916 and weekly report Octbr 7th 1916

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date October 12th 1916.

Place Sidney Camp. B. C.

W. A. Smith

Paymaster

N.B.—For purposes of transfer this form is to be made out in quadruplicate. One copy to Paymaster of new unit; one to District Paymaster; one to accompany the pay-list at the end of the month, and; one for retention as a record.

For purposes of discharge it is to be made out in triplicate. One copy to accompany discharge papers; one copy to accompany pay-list at the end of the month, and; one for retention as a record.

M. F. W. 44.

200M.—6-16.
H. Q. 1772-39-903

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 180 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. ..... Rank ..... Name .....

Corps ..... who was* .....

On ..... 191 , to .....

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from ..... 191 , to ..... 191 , the inclusive date of transfer or discharge.

Dr.	$	c	Cr.	$	c
Bal. Dr. from prev. month			Bal. Cr. from prev. month		
Advances by Cheques No.			Regt'l Pay ..... days at $ c		
Advances by Cheques No.			Field Allow. ..... days at $ c		
Assigned Pay No.			Other Allowances*		
Other Charges*			Other Credits*		
Payment on transfer or discharge No.			Bal. Dr. (to be deducted by new unit)		
Balance Cr. (to be paid by the new unit)					
Total			Total		

*Give Particulars.

A monthly stoppage of $ ..... (†) has ..... (‡) been paid on account of Assigned Pay for the month of ..... 191 to (Assignee) .....

(Address) .....

(†) 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 .....

(2) if married and if a Separation Allowance Card has been submitted .....

(3) cause of discharge and authority .....

If discharged from the Contingent, state if Stop Payment advice for Assigned Pay has been forwarded, and date .....

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date .....

Place .....

Paymaster

N.B.—For purposes of transfer this form is to be made out in quadruplicate. One copy to Paymaster of new unit; one to District Paymaster; one to accompany the pay-list at the end of the month, and; one for retention as a record.
For purposes of discharge it is to be made out in triplicate. One copy to accompany discharge papers; one copy to accompany pay-list at the end of the month, and; one for retention as a record.

M. F. W. 44.

200M.—6-16.
H. Q. 1772-39-903

143rd O/S BATT. C. E. F. ORIGINAL

MEDICAL HISTORY SHEET. 826775

Surname: Edwards Christian Name: Lawrence James.

Examined on 17 day of July 1916 at Victoria BC

Birthplace: City or Town Sunbridge Wells; County Kent England

Apparent age 43

Trade or occupation Insurance agent

Height 5 Feet 8 1/2 Inches.

Weight 126 Lbs.

Chest measurement: Minimum 31 inches. Maximum expansion 34 inches.

Physical development Fair

Small-Pox Marks —

Vaccination Marks: Arm Right. Left. Number 3

When Vaccinated last Birth

(a) Marks indicating congenital peculiarities or previous disease —

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

JUL 28 1916

AUG 1 1916

AUG 18 1916

Approved by W Rayner

Rank Captain 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.
		WR M.O.
		M.O.
		M.O.

Enlisted on 17th day of July 1916 at Victoria, B. C.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment				
Transferred to	143rd Batt, C. E. F.	826775		17-7-16

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Lanyre	8/9/16	Poor Physique	Discharged

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.

400M.—1-16.
H. Q. 1772-39-439.

Surname Edwards Christian Name Lawrence James

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				

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name Edwards - Lawrence James
Surname Christian Name

Regimental Number 826775 Rank Pte

Unit

Original Unit 43rd.

District where paid

Date of Discharge

P. D. P. Filing Number

Address (in full)

Rates:—Regimental pay $ per diem; Field Allowance $ per diem. Separation Allowance $ per month.

L.L. 53961—M. & D. 9721

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

Remarks:

M. F. W. 127
300M-1-19
1772-39-1140

File No. 5317 L 15

WAR SERVICE GRATUITY.

Register No. E 720

Pte

27/7/19 Passed to W 10/10/19

Reg. No. 826775

Name Edwards Lawrence J.

Address 1010 Fairfield Rd.
Victoria BC.

Dependent Mrs Edith E. Edwards. (Wife)

Address Same add.

Pay Soldier $ 70.00

J. L. Foley.
W. C. Haydon.

Clerk B Wills

Pay Dependent $ 30.00

Days 31 Rate 100 Due 100.00

Less P.D.P. credited Nil

Less further Dr. Bal. or overpayment. –

Net 100.00

R
W 131
31/10/19

	Date	Ck. Order	Ck. No.	Amount	Remarks.		Date	Ck. Order	Ck. No.	Amount.
1	24.10/19	38176	27-10-19 535733	70.00		1	24.10/19	38177	535734	30.00
2						2				
3						3				
4						4				
5						5				
6						6				

495-D.P.-100M-6-19 (10248).

GEN'L AUDITOR
Posting checked by
Lopve
Date 24/10/19

L. L. Job 310—M. & D. 6574.

21 4/16.

MILITIA AND DEFENCE

M. F. W. 11. 951
50m.—4-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Edith. E. Edwards

Address 922 Cloverdale Ave
Victoria
B.C.

Relation to Soldier wife, child or mother: Wife

Name of Soldier Edwards Lawrence J.

Regtl. No. 826445

Rank Pte.

Corps 143rd Batt.

To what Corps belonging when called out

PAYMENTS

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

ACCOUNT CLOSED
DATE..... PER..... W

MILITIA AND DEFENCE

M. F. W. 11a.
50m.—4-16.
1772—39—818.

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2. E. E. Edwards. Wife

PAYMENTS.

Name of Soldier Edwards L. J. Pte.

L. L. Job 310.—Req. 6574.

Month.	Year.	Cheque No.	Amt.		Remarks.
April	1916				
May					
June					
July					
Aug.		X13987	26	26	
Sept.		C15691	20	20	B18752 cancelled
Oct.		~~B18752~~	~~20~~	20	
Nov.		K19060	2		Discharged 4/10/16 (per Cottingham 5/10/16)
Dec.					
Jan.	1917				~~$2 to date~~
Feb.					
March					
April					
May					ACCOUNT CLOSED
June					DATE..... PER..... W
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

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.					

649-E-1292

SURNAME. Edwards

CARD NO. X

CHRISTIAN NAMES Lawrence James

FOLL. S.O.S. Dis 4/10/16 IV

REGL. No. 826775 RANK Pte

UNIT 143rd Bn

FORMER CORPS 6me 50th Gordon Highlanders

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Edwards Mrs Edith

RELATIONSHIP TO SOLDIER Wife

ADDRESS 922 Caledonia Ave
Victoria B.C.

COUNTRY OF BIRTH England Tunbridge Wells KENT DATE Aug 21st 1873

PLACE OF ATTESTATION Victoria B.C. DATE July 17 1916

L. L. 94504. M. & D. 6512. M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

MARRIED Yes SINGLE WIDOWER

TRADE OR CALLING Insurance Clerk RELIGION Church of England

DESCRIPTION.

APPARENT AGE 43 YEARS MONTHS

HEIGHT 5 FEET 8½ INCHES

CHEST MEASUREMENT 34 INCHES EXPANSION 3 INCHES

COMPLEXION Fresh EYES Hazel HAIR Black

DISTINGUISHING MARKS 1 large, 2 small burn scars between shoulder blades.

MEDICAL EXAMINATION. PLACE Victoria B.C. DATE July 17th 1916

Present address. 922 Caledonia Ave
Victoria B.C.

No. S 26775 Rank Pte Name Edwards L. J.

T. O. S. 21-7-16 Unit 143rd. Battalion (C & F)
00.134 of 22.7.16 Railway Construction Battalion.
M. D. 11

Paid From	Paid To	Sig. or Rec't	Promotions, Transfers, Discharges, etc. Particulars	Authority
1916	1916			
July 21.	July 31.	✓		
Aug.		✓		
Sept.		✓		
Oct 1.	Oct 4.	✓	Discharged 4-10-16 M.U.	B.O. 195.
				UNIT SAILED FEB 17 1917
			a/c closed by payment S.	

No. 2062. RANK Pte. NAME Edwards, L. J.

T. O. S. 4-1-16. UNIT 50th Regt (Highlanders)
D.O. 2 of 4-1-16.

M. D. 11.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916.	1916.			
Jan. 4.	Jan. 31.	✓		
Feb.		✓		
Mar.		✓		
Apr		✓		
May		✓		
June		✓		
July 1	July 20	✓	Transd to 1/43rd Bn.	DO 103 of 20-7-16

Present address: 922 Cloverdale Ave. Victoria. B.C
Next of Kin: Mrs. P. Edwards (Wife) 922 Cloverdale Ave. Victoria. BC

MEDICAL HISTORY OF AN INVALID.

143rd O/S BATT. C. E. F.

1. Station. Sidney. B.C
2. Regiment or Corps. 143rd O/S Batt. C.E.F.
3. Regimental No. and Rank. 826775 Private
4. Name. Edwards Lawrence James.
5. Age last Birthday. 43
6. Enlisted on July 20/1916 at Victoria. B.C.
7. Former Trade or Occupation. Insurance Clerk

Date. 30/9/16

8. General remarks on his :—
(a) Conduct. Good
(b) Habits. Good
(c) Temperance. Good

(For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)

DEPT. MILITIA & DEFENCE
NOV 14 1916
CANADA

9. Service. 143rd O/S BATT. C. E. F. Years. Days. 70

	PERIODS.	
	FROM.	TO.
143rd O/S BATT. C. E. F.	21-7-16	4/10/16.

10. (a) Disease or disability. Poor physique
(b) Date of origin. —
(c) Place of origin. —
(d) Cause. —

11. Present Condition. (Most Important)
(To include full description of present disabling condition or conditions.)
Poor physique

12. (a) Is the disability the result of service or climate? no
(b) Has it been aggravated by intemperance, vice or misconduct? no

M. F. B. 227.

100 M—2-16.
1772-39-117.

noted GL 9-11-16

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.) scars on back from burn

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action, was a Court of Inquiry held? none

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise. none

14. Treatment none

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent? no

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes? life

17. To what extent will it prevent his earning a full livelihood in the general labour market? Please state in fractions. none

18. State if for discharge on account of unfitness for Service. yes

Medical Board

Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

Does the Board concur with the preceding report? If not, give differing opinion.

10.

11.

12.

15.

16.

17.

19. Is he unfit for Military Service. yes

20. Recommendations: That he be discharged

Signatures :—

The Bryant Capt Cam President.

J Miller Capt Ams.

Station.

Date.

Members.

APPROVED.

Date. Sept. 22nd 1916

Jno A B Hall Major. A.M.C.

Asst. Director of Medical Services.

MILITARY DISTRICT NO. XI.

Approved.

Date. 18/11/16

D. J McKay Capt

for a/c Director-General of Medical Services.

(At Station or Hospital where finally disposed of.)

Station and Hospital } ..... Arrived from } .....

Date .....

If admitted.	If under treatment.		Disease.	How fully disposed of.	Date of Discharge, &c.
Index No.	From	From			
Date					
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....

Summary of Causes of invaliding, or remarks as to remand to Regiment, Station or Depôt.

Date of final Medical Board or decision. } .....

Administrative Medical Officer.

Militia Form B. 227.
100 m-2-16.
H. G. 1772—39—117.

DETAILED MEDICAL HISTORY OF INVALID.

Station Sidney B.C

Corps 143rd O./S. Bat. C.E.F.

Regimental No. 826775 Rank Private

Name Lawrence James Edwards

Disability Poor Physique

Date Sept 8/16.

Hospital or Station transferred to for final disposal. } Sidney BC

Date of final disposal } Oct 3/16

How finally disposed of } Discharged

The original Report is invariably to accompany the discharge documents of invalids.

143rd O/S BATT. C. E. F.

This space to be for numbers.

H

Proceedings on Discharge.

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

No. 826775

Rank Private

Name Lawrence James Edwards

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) 143rd O/S BATT. C. E. F.

Date of Discharge Oct-4/1916

Place of Discharge Lidney BC

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 43 years 1 months.
Height 5 feet 8½ inches.
Complexion Fresh
Eyes Hazel
Hair Black
Trade Insurance Clerk
Intended place of residence (To be given as fully as practicable.)

Descriptive Marks

One large & two small burn scars between Shoulder Blade

2. The above-named man is discharged in consequence of having "poor physique"

Letter. 11 M. D. 34-W-68. date 26/9/16

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.

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

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

Good

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

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

Insurance Clerk

M. F. B. 218.
25m.—11-15.
H. Q. 1772-39-113.

WLG
29-8-19
BY

Entered
11 M.D.

(OVER)

Noted G.C.
9-11-16

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) Lidney B.C.

(Date) Oct-4/1906

Lieut-Col

O Commanding 143rd O/S Batt. C.E.F.

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.

(Place) Lidney B.C. Lawrence James Edwards (*Signature of Soldier.*)

(Date) Oct-4/1906 F. Dodsworth (*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 70 days.

Total.....years 70 days.

11. **Confirmation of Discharge.**

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

(Place) Lidney B.C.

(Date) Oct-4/1906

(*Signature*)

Lieut-Col

O.C. 143rd O/S BATT. C. E. F.

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.)

None

Lawrence James Edwards.

(OVER)

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263.	Attestation Paper, Militia Form B. 235.
Squadron / Battery / Company Conduct Sheet, " B. 263a.	Proceedings on Discharge " B. 218.
Copies of Convictions, by C. P. in MS.	In the case of recruits who are rejected on final approval, the discharge documents will consist of
Med. Hist. Sheet, Militia Form B. 313	*(a)* Proceedings on Discharge.
Medical Report for Invalid* " B. 227.	*(b)* Attestation.
Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.	*(c)* Medical History Sheet (in the event of such having been prepared.)
*Only if discharged "Medically unfit."	

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.