146/5.

5th 7. bq. Eng.

ATTESTATION PAPER.

No. 302

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? ..... William Gerrand
2. In what Town, Township or Parish, and in what Country were you born? ..... Edinburgh Scotland
3. What is the name of your next-of-kin? ..... Mrs Jardine
4. What is the address of your next-of-kin? ..... 858 Rutherglen Road Glasgow
5. What is the date of your birth? ..... Dec 29-1875
6. What is your Trade or Calling? ..... mason
7. Are you married? ..... no
8. Are you willing to be vaccinated or re-vaccinated? ..... yes
9. Do you now belong to the Active Militia? ..... 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

Wm Gerrand (Signature of Man).

..... (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Wm Gerrand (Signature of Recruit)

Date Jan 19th 1915 J P G Leclerc (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.

Wm Gerrand (Signature of Recruit)

Date Jan 19th 1915 J P G Leclerc (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 Montreal this 19th day of January 1915.

Robert M Ballum Lt Col (Signature of Justice)

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

Robert M Ballum Lt Col (Approving Officer)

Capt b C

200 M.—8-14.
H.Q. 1772-1-13.

E

Form

Description of William Gerrand on Enlistment.

Apparent Age 40 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 6 3/4 ins.

Chest measurement.
- Girth when fully expanded ..... 40 ins. 37
- Range of expansion ..... 3 ins.

Complexion ..... Fair

Eyes ..... Blue

Hair ..... Light Brown tinged with grey

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

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

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

Weight 181
Head 24
Teeth defective
Wrist 37
Vaccination marks 2 on left arm.

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date JAN 19 1915 1914. R. J. Ross Surg Capt

Place ..... 4th FIELD Co. C.E. Medical Officer.
MONTREAL.

*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.

William Gerrand 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.

W. H. Bruning Lieut C.E.
(Signature of Officer)

Date Jan 19th 1914.

REGIMENTAL DOCUMENTS

31-5-19 E.A.

NAME GERRAND, WILLIAM WILLAND, HUNTER (Pte) REGT. NO. 302 UNIT 5th Fld. Co. R.E. A. Q. FILE NO.

CONTENTS		DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133, or 51)	1	Rh-10-20				DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)	2					Category
TRAINING HISTORY SHEET (M.F.W. 113)						
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				08797	
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)	1					
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)	2					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)	1					Category Demob.
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)						
MEDICAL EXAMINATION (M.F.W. 129)	1					
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)						DESERTION
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)						
LAST PAY CERTIFICATE (M.F.W. 44)	2					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)	1					
PARTICULARS OF CHARACTER (A.F.W. 3226)						
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)	1					
M.F.W. 2571	1					
A.F.B. 179	1					
M.F.W. 192	1					

1R 1 2 2

W. 2539
100M-11-18
1772 39-1377

GERRAND. ORIGINAL.

MEDICAL HISTORY SHEET.

Surname Gerrand *Christian Name* William Hunter

Examined { on 23rd day of January 1915
at Ottawa

Birthplace { City or Town Edinburgh
County Scotland

Apparent age 40.

Trade or occupation Mason.

Height 5 Feet 6½ Inches.

Weight ~~165~~ 185 Lbs.

Chest measurement { Minimum 42 - 46½ inches.
Maximum expansion 4½ inches.

Physical development

Small-Pox Marks Nil

Vaccination Marks { Arm Right. Left. 2.
Number 2.

When Vaccinated last 18/3/15

(a) Marks indicating congenital peculiarities or previous disease

✓

(b) Slight defects but not sufficient to cause rejection

✓

Approved by [signature] Lieut.-Col., A.M.O.
M. O. Divisional Engineers.
Rank 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.
18/3/15		[signature] M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
26/4/15		[signature] M.O.
5/6/15		[signature] M.O.
June 1917	TAB.	6-42-18 M.O.

Enlisted on 29th day of January 1915 at Montreal

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	5th Fd Co. R.E.	302	–	Jan 19th 1915.
Transferred to..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

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.
100M.—1-15.
H. Q. 1772-39-439.

Surname Gerrard Christian Name William Hunter

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.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 302 (Rank) Private

Name (in full) GERRARD William, Hunter. enlisted in

the 5th Field Company, Engineers Canada.

CANADIAN EXPEDITIONARY FORCE at Montreal, Que. on the 19th

day of January 1915.

HE served in 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 43 years 2 months

Height 5 feet 6½ inches

Complexion Fair

Eyes Blue

Hair Light brown

Marks or Scars

Nil.

Wm Gerrard

Signature of Soldier

Lieutenant,
Officer i/c Discharge Section, District Depot No. 4.

Issuing Officer

Rank

Appointment

Date of Discharge February 27th, 1919.

Signed at Montreal, Que. this 27th. day of February 1919.

in Military District No. 4

File Reference No DD4 19-G-537

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. W. 39a
200m.—2-18
H.Q. 1772-39-882

GJ

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

.....

Name of Officer

.....

Rank

.....

Appointment

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

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. 302 Rank Spr. Surname Gerrard (Given name in full) William Hunter

201 Ontario St. Montreal

Unit or Corps D.D.E. Birthplace Edinburgh Scotland

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

1. **GENERAL DESCRIPTION:**

Physique Good Weight 186 lbs. Height 5 ft. 7 in. Colour of Eyes Blue

Nutrition Good

Pulse 80

Condition of arteries Good

Vision Rt. OK Left OK

Hearing (conversational voice) Rt. OK ft.

Left OK ft.

Identification marks, scars, or deformities. (Give cause and date of origin.)

Nil

Opinion as to general health and physical condition Good

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

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

Special Senses No Integumentary System No Respiratory System No

Disturbance of mentality No Muscular System No Digestive System No

Osseous and Joint System No Any other general condition No

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

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

[OVER]

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 Montréal ..... (Canada)

Date ....25-2-19..... 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 ..Wm. Gerrard.....

(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]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-39-1142.

SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103—I.
Part I.

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W1889—PP1150 1M 5/18 G.W.P.Co.(3490)

(1) *Substantive rank *Acting rank *[To be entered in pencil to facilitate alteration.]	(2) Regiment or Corps	(3) Regtl. No.
(4) Surname		
(5) Christian Names		
(6) Army Form, number of, Attestation Form or Record of Service paper		
(7) Whether of British or of Alien origin [*vide* A.C.I. 578 of 1918]		
(8) Date of birth as stated on enlistment		
(9) (*a*)		

(10) Enlistment (*b*)

(11) Engagement (*c*)

(12) Service reckons from (*date*)

(13) Special conditions (if any) of enlistment (*d*)

(14) Any subsequent variations (if any) of conditions of service

Initials and Rank of an Officer.

(Authority) (*date*)

(15) Category	Date	Medical Authority	Initials and Rank of an Officer

(16) (Record of Occupation in Civil life (*vide* Army Order 93 of 1917)

Industrial Group No.

Trade or Calling

Married or Single

Particulars of Trade Test

Occupation Cards despatched on (*date*)

Second Occupation Card despatched on (*date*)

(17) Next of Kin

(18) Demobilizer (*f*) (Place)

(19) Pivotal-man (*f*) (Date)

(20) Qualifications (*g*) *or* (21) Corps trade and rate

(Signature of Posting Officer

(22) Extended

(23) Re-engaged

(24) Miscellaneous entries:—

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [*vide* A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoeing-smith, &c.

(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
			Attached C.C.C. Kinmel Park for repatriation to Canada per Orders No. _____. Ceased to be attached C.C.C. Kinmel Park on embarking for Canada, Part II Order No: _____		10 April 1919	
			Commanding _____ Wing, Kinmel Park Camp.			
29.1.19			Sailed from			
20.1.19			Liverpool			
27-2-19	S.O.S.		Discharged Cat. A. Demob.			D.D. #4 D.O. 62

W. L. Sully Capt.
Adjutant H.M.T. Dublin

H. G. Parker Lieutenant,
Officer i/c Discharge Section, District Depot No. 4.

Nothing to be written in this margin.

(1901)—Wt. W8208—1273.—800,000.—11-14.—K. & K. Forms B. 103/1.

CERTIFIED CORRECT.
Canadian Corps Office,
Westminster House,
7, Millbank, S.W.

Army Form B. 103.

Casualty Form—Active Service.

W.

Regiment or Corps 5 Field Co. Canadian Engineers

Regimental No. 302 446 Rank Sapper Name Gerrard William N.

Enlisted (a) 19/1/15 Terms of Service (a) Duration of war Service reckons from (a) 19/1/15

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				
		Disembarked Harve 15.9.15.			
14/4/16	O.C.	Granted Leave	Field	8/4/16	B.213 = No. 30 = 14/4/16. Part II Order No. 18 = 30/4/16.
17/6/16	O.C.	Rejoined from leave	"	18/4/16	KG 149/15 = Des. 214 = 18/4/16
10-11-16.	46	Attached to #3 Coy 2nd N.W. Coy to Londer	Field	5-11-16	B213. Pt 20 #65. 6-12-16
24-2-17	A.C. 2/2/17	Rejoined Unit	Field.	19-2-17	B213. Pt 2/0/11 = 5-2-17
8/9/17	O.C.	on leave	"	5/9/17	B 213 P/58
22/9/17	"	Off leave	"	18/9/17	B 213 P/61
22/9/17	"	One L.C. Badge	"	14/1/17	B 213 P/61
3/11/17	O.C.	To Hosp	do	24/10/17	B213.
14/11/17	O.C.	Rejd Unit	do	19/11/17	B213.

(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				
26 2/18	C.F.B.D.	a/c Class T. B.	C.F.B.D.	26 2/18.	W.R. 739.
4/3/18	C.F.B.D.	Trans. to Can. Forestry Corps. C.F.B.D. Class B2.		2/3/18	W.R. 1040. W.R. 16276. P/14.
	M.E.F.	T.O.S. Can. Forestry Corps		3-3-18.	W.R. 16276. Pte 34 dd/16-3-18.
8.3.18	do	To No 1 Dist C.F.C.		8.3.18	W.Over 1040
16.3.18	30th Co. C.F.C.	Attached for duty		10.3.18	B 213.
4.3.18	C.F.B.D.	Classified B2.		4-3-18	W3339. 397.
8-3-18	A.A.G.	T.O.S. Can. Lab. Pool No 1 Dist HQ C.F.C.		8 3/18	W.R. 16276. Thi D.O. 55 d/27/18
"	"	T.O.S. of Dist Hqrs from Can. Lab. Pool		9.3.18.	" P.II 24.
21.8.18.	1 Dist Hq.	On 14 days leave U.K.		31.8.18.	B213. P.II/45.
2.-9-18.	Do.	Rejoined.		18-9-18	B213.
28-9-18.	Do.	Transferred to 42 Coy C.F.C.		26-9-18	B213 P/61
"	42 Coy.	Transfd from 1 Dist Hqrs.		27-9-18	" P/61
14/12/18.	C.F.B.D.	Trans to Eng. + posted to C.F.C. Depot Sunningdale		14/12/18.	W.R. 3.

Lieut. for Lt.-Col., A. A. G.
Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

17.12.18. O.C. C.F.C. T.O.S. Base Depot, C.F.C. Sunningdale 15.12.18 Pt. 11. D.O. 300.
From 42 Co France

Lt. & A/Adjt
For O.C. Base Depot, Canadian Forestry Cor

Rank Spr. Name GERRAND. WILLIaM Hunter. Reg'l No. 302.

Unit 5th Field Co. C.E. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Montreal. 19th Jan. 1915. Place of Birth Edinburgh. Scot.

Name and Address, Next-of-Kin Mrs A Jardine. 858. Rutherglen Rd. Glasgow.

Relationship Sister.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

N/E. R.B No 6062
File R.L.
Category Can DR

Discharge, Date and Place Reason Character

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
2	6.C.C.E.	Attd 1st N.K. Sqs. Northland		29.4.15	Information Form.
23/6/15.	0C C.E.	10 dys C.B. + 4 dys pay for "Absence" Embarked for France.	Dibgate	16/6/15.	F.A.O. # 114.
				16-9-15	N.R.
30.4.16	2 Div Eng.	Granted leave of Absence.	Field	8.4.16	Part II Orders no. 18
6.12.16	5th F.C. 2nd Div Eng.	Att. to 2nd Div Trn as loader.	"	6.11.16	P II O. 65 also P II 55 2nd Div T. & 7-12-16
3.3.17	"	Cases to be att. to 2nd D. T. on return to unit.	"	19.2.17	" " 18
5.3.17	2nd D Trn	" " "	Spr	"	" " 20
2/10/17	5th F.C. 2 DE	Awarded 1 G.C. badge	Field	19/1/17	P II O 61
19-3-18	-"-	S.D.S. to Com. Lab. Pool.	Spr.	2-3-18	-"- 1 Lab Pool P to O 34 715 378
27-4-18.	R.C.L.P.	S.P.S. to 1 Div H.Q. R.E.	"	8-3-18	-"- 55 Pte. 21.4.18 Vth Gp. Div 1. T.C.

Lab

302 Gerrand W.H.

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
					T.O.S. 42607 C.F.C. pte P.U.O. 61. 12-10-18
1 Dist HQ C.F.C.	12.10.18	S.O.S. 42607 676 pte	Field	26.9.18	P.U.O. 51
17.12.18	B.D.C.F.C.	T.O.S. from 42607 F.C.	S'dale	15.12.18	300 (S.O.S. 42607 676 P.U.O. 5 4/27/19.
15-1-19	"	Invalided D.D.R.L.	"	15-1-19	15
10.2.19	"	Ceases on Com. & S.O.S. to C.E.F. Can.	S'dale	29.1.19	41

Form P. 812A.
7777 15m. 12/12/18 D509

(Gerrard) E.F. 6849-W-2D C.R. FILE NO. 2053

ASSIGNED PAY and/or SEPARATION ALLOWANCE

Payable to Mrs A. Jardine

Address 858 Rutherglen Rd. Glasgow

Name GERRARD W.H.

From Canada: No. 302 Rank Spr. Unit 6.F.C.

Rank	Authority	Unit

ASSIGNED PAY

Authority ..... Dol. ..... Effect .....

ASSIGNED PAY — SEPARATION ALLOWANCE

" ..... " .....

20

" ..... " .....

1.2.19

" ..... " .....

ASSIGNED PAY AND SEPARATION ALLOWANCE BEING PAID IN ENGLAND UNTIL ADVICE FROM OTTAWA OF DISCHARGE OF SOLDIER NAMED HEREIN.

Noted on L.P.O.

Month	Cheque No.	Assigned Pay	Amount Separation Allce.	Total A.P. and S.A.	REMARKS
DEC. 191					DISCHARGED TO CANADA.
JAN.					
FEB.	352669	20			SR 683 11.1.19
MARCH	~~G.32611~~	~~20~~			Cancelled
APRIL					Stop Cheque Feb 27. 1919
MAY					Auth Cable 1009. 14.3.19
JUNE					
JULY					
AUG.					
SEPT.					
OCT.					
NOV.					
DEC.					
JAN.					
FEB.					
MAR.					
APRIL					
MAY					
JUNE					
JULY					
AUG.					

Rank

Name GERRAND. WILLIAM Hunter.

Reg'l No. 302.

Unit 5th Field Co. C.E.

If in perm. Corps, What Unit?

Married or Single Single.

Place and Date of Enlistment Montreal. 19th Jan. 1915.

Place of Birth Edinburgh. Scot.

Name and Address, Next-of-Kin Mrs A Jardine. 858. Rutherglen Rd. Glasgow.

Relationship Sister.

Assigned Pay Monthly $ 20.00 Oct 1 St

Payable to N. Kin

Relationship

Separation Allowance $

Payable to

Relationship

Discharge, Date and Place

Reason

Character

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						
May 1	31	31	1.00	31	31	.10	3.10		34.10			30			30	4.10	
June 1	20	30	"	30	30	"	3	4.10	37.10			25		4.40	29.40	7.70	Forfeit 4 days pay #114
July 1	31	31	"	31	31	"	3.10	7.70	44.80			30			30	11.80	
								11.80									
								2.27				85			Diff. in Exchange July 31		
Aug 1	31	31	"	31	31	"	3.10	14.07	48.17			29.20			29.20	18.97	
Sep 1	30	30	"	30	30	"	3	18.97	51.97							51.97	
Oct 1	31	31	"	31	31	"	3.10	51.97	86.07			18.58.20			28.58	47.49	
Nov 1	30	30	"	30	30	"	3	47.49	80.49			5.23.20			25.23	55.26	
Dec 1	31	31	"	31	31	"	3.10	55.26	89.36			16.83.20			36.83	52.53	
Jan 1	31	31	"	31	31	"	3.10	52.53	86.63			5.23.20			25.23	61.40	
Feb 1	29	29	"	29	29	"	2.90	61.40	93.30			5.23.20			25.23	68.07	
March 1	31	31	"	31	31	"	3.10	68.07	102.17			5.23.20			25.23	76.94	
		336		336	336		33.60	2.27	371.87			170.53.20		4.40	294.93	76.94	

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

*Name GERRAND, William Hunter Rank Pte. Regtl. No. 302

Fyle Depot 19-G-537

Original unit C.E. Present unit D.D.No.4 M or S. Age 43 Religion Pres. Ref. H.Q.

Port, ship, and date of arrival Halifax, N.S. "BALTIC" 6-2-19.

Next of kin (S) Mrs.A. Jardine, 858 Rutherglen Rd., Glasgow, Scotland

Address on leave G.P.O. Montreal, Que.

Address on discharge

Transportation issued Yes / No Date Character on discharge

Previous occupation Mason Date and place of enlistment 23-1-15 Ottawa, Ont.

Diagnosis Date of Medical Boards

Date.	Remarks	Pt. 2 Order No.
13-2-19	T.O.S. from O/S 29-1-19. Posted to Cas. Coy 8-2-19.	
	Fur W/S to 22-2-19.	44.

*—Name will be given in full; surname first.

(over)

Date.	Remarks.	Pt. 2 Order No.
3-3-19	SOS Discharged RO 1420 Para C Demob- Eff.27-2-19 Cat A	#62

M.F.W. 192
150M—6-18.
1772-39-1243.

Rank Spr.

Number 302

Surname GERRARD

Christian Names William Hunter

Theatre of War France

Unit C.E.

Dates of Service 15-9-15

Remarks

Latest Address 201 Ontario St Montreal P.Q.

Roll No. B

Page 1967

DEC 13 1921
REGN NO 4Cb4549

NAME Gerrand, William Hunter 2/ 302

S.O.S 27-2-19
D.O.B 23-3-19
demob ~~4476~~ 4DD

RANK & No. Sapper

CORPS No. 5 Co. Engineers, 2nd Div. Nx.

ENLISTMENT, PLACE Montreal. DATE Jan. 19, 1915. S.

FORMER CORPS Nil.

COUNTRY OF BIRTH Scotland (Edinburg)

NEXT OF KIN Jardine, Mrs. A. (Sister)

ADDRESS OF NEXT OF KIN 858 Rutherglen Rd. Glasgow, Scotland.

DISCHARGE, PLACE DATE

O/S 18-4-15 5/6

R/C 8-2-19 262/32 - 2 Pte

M. F. W. 22. 50 m.—1-15.

L. L. 72591—M. & D.—5342.

H. Q. 1772 39-839.

REMARKS:

MARRIED OR SINGLE S.

PLACE OF BIRTH Edinburgh Scotland

NAME AND ADDRESS OF NEXT OF KIN Mrs. A. Jardine

858 Rutherglen Rd. Glasgow

RELATIONSHIP OF NEXT OF KIN Sister

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

A/c checked & found correct

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No. 302 RANK Sapper NAME Gerrand William Hunter

IF IN PERMT. CORPS WHAT UNIT UNIT 5th Coy C. E. TRANSFERRED TO DATE AUTHORITY

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION Montreal TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 19th Jany 1915 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 20 00 DATE EFFECTIVE Oct. 1st 1915

PAYABLE TO Next of Kin Mrs A. Jardine 858 Rutherglen Rd. Glasgow 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)

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	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
March 31			336				33 60							227	371 87									170 53				120	440	294 93	76 94				
1/4/16 to 30/4/16	30	1 00	30 00		30	10	300								33 00													20		20	89 94				
April 31	31	"	31	-	31	"	3 10								34 10	665	30/4/16	712	27/10/16	398	7/3/16	291	7/4/16	256	256	174 867		20		20	75 73	148 57				
June 30	30	"	30	-	30	"	300								33 00	766	4/6/16							243				20		20	22 33	58 96				
July 1-31	31	"	31	-	31	"	3 10								34 10	811	19/7/16	864	15/9/16					256	262			20		20	25 18	67 88				
Aug 31	31	"	31	-	31	"	3 10								34 10	924	24/8/16	976	8/10/16					261	323			20		20	27 84	74 14				
Sept 30	30	"	30	-	30	"	300								33 00	1134	18/8/16							262				20		20	22 62	84 52				
Oct 31	31	"	31	-	31	"	3 10								34 10	1104	23/9/16	1144	28/10/16					323	323			20		20	30 46	88 16				
Nov 30	30	"	30	-	30	"	300								38 80							2 A/F. 1678	10/11/16			2 61		20		20	22 61	98 55				
Dec 31	31	"	31	-	31	"	3 10								34 10							2 A/F. 1842	23/12/16			11 34		20		20	31 34	101 91				
			61 40																																
Jan 31	31	100 10	34 10												34 10							1930 Q 24/1/17 2 A/F. 1778 12/1/17 1854 29/12/16		R10 278	31/1/17		262 262	4867	20		20	68 67	66 74				
Feby 28	28	"	30 80												30 80											262		20		20	30 47	67 07				
			737											227	739 27									191 27	15 64	72 22	4867	340	440	672 20					
Carried forward			737											227	739 27									191 27	15 64	72 22	4867	340	440	672 20	67 07				

303 Gerrard Wm Hunter

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	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
Bt Fwd			737											2 27	739 27									191 27	15 64	72 22	48 67	340	440	672 20	67 07				
March 21	21	1/10	34	10											34 10	1041	2/3/17	1706 1648	24/3/17 2/3/17	207	24/3/17			26 2	2 62 26 2	26 2		20		30 48	70 69				
April 30	30	-	33												33							460 58					20		20	83 69				
May 31	31	-	34	10											84 10	6	19/4/17					495 59	3 23				20		25 23	92 56				
June 30	30	-	33	00											33 00	112 62	4/5/17 14/6/17					H 38 061	2 67 2 68				20		25 35	100 21				
June 31	31	-	34	10											34 10							H 61 90					20		20	114 31				
Aug 31	31		34	10											34 10	207 165	23/6 12/5	267	10/7			H 157 53	2 67	5 36			20		30 70	117 71				
Sep 30	30		33	-											33	348 340	21/8 19/8	463 446	4/9 "			H 183 45	2 68 2 68	1 79 2 67			20		29 82	120 89				
			992	10										2 27	994 67								215 17	30 70	74 84	48 67	480	4 40	883 78					

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.	BALANCE	DEDN. REQ. PAY	SER. ALLCE. ENG.
Sep 30									120 89		
Oct 31	@ Pay.	34 10		a 24265			20		134 99		
		34 10					20				
Nov				B.58864			20				
	" "	33 -		840 2 Dr. 3-10-17 (C.C.)		97 33					
				566 2 Dr. 3-10-17		4 46					
				B.59670							
Dec							20				
	" "	34 10		634 2 Dr. 20-11-17		3 57			56 73		
1918		67 10				105 36	40				
Jan				6 19661			20				
				731 2 Dr. 29-11-17		16 95					
				469 " 13-12-17		4 46					
	" "	34 10		814 " 24-12-17		3 57			45 85		
		34 10				24 98	20				
Feb	" "	30 80		6 91662			20				
				909 2nd D.C. 27.1.18		3 57					
				17180 " ARF 9-1-18		89					
				849 2nd D.C. 10-1-18		4 46					
				965 " " 10-2-18		4 46			43 27		
		30 80				13 38	20				
March	" "	34 10		D 22264			20				
				833 4 CGBD 28-2-18		4 46					
				8560 " " 9-3-18		4 46			48 45		
		34 10				8 92	20				

P 820
12474—373M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ENGLAND OR ~~CANADA.~~	SEPARATION ALLOWANCE.	* ENGLAND OR * CANADA.
EFFECTIVE DATE:-	1-10-1915	EFFECTIVE DATE:-	
AMOUNT:-	30 00	AMOUNT:-	

NAME:- GERRAND. William Hunter.

NUMBER:- 302.

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. A. Jardine
858 Rutherglen Rd. Glasgow

Stopped 1-7-19.

ASSIGNED PAY AND ~~SEPARATION ALLOWANCE~~ BEING PAID IN ENGLAND UNTIL ADVICE FROM OTTAWA OF DISCHARGE OF SOLDIER NAMED HEREIN

P 850 Bal agreed at. 30-9-18

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Sapper

UNIT AND TRANSFERS

ORIGINAL UNIT:- 2nd Div. Engineers

DATE ACCOUNT FIRST OPENED:-

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
3H.	1-4-18		Can Lab. Fde.
21.	9.3.18	1.5.18	B.E.F. France

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1.00	.10		

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
31/19	5848	R.D.C.T.C.	~~4 87~~				
10/19		Ottoos - 167.	~~40~~				
11/19	6175	R.D.C.T.C.	~~9 13~~				
			15				

a/c R 3184 endorsed on T.P.C. here T.P.C. bal 7-9-57

PARTICULARS OF RENDERING NON-EFFECTIVE:- 31/19 Ufa to Can. Nk. *683 - 11/19. M.D.#2. Cr. h/b. Ret. 12-52 Ledger bal 27-52

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
March	31st 1918 Bal Forward.								48.45		
	Pay	33		O.R. Chq / 429505 £4-2-2			20		61 45		
				OR 103 - "1 Div. HQ - 6/4/18	3 57				57 88		
				Dm OR 3026. 1 Div. HQ - 19.3.18	3 57				54 31		
				OR 285 - " 20.4.18	3 57				50 74		
		33			10 7 1		20				
May	P.P.	34 10		A.P. B 13262 £4-2-2.			20.				
				AR. 607 22.5.18 No 1 Dist.	4 46				60 38		
June	P.P.	34 10		A.P. B 56068 £4-2-2.	4 46		20				
		33					20				
				AR. 837. 7-6-18 No 1. Dist.	3 57						
				Dm/AR. 482 7-5-18 "	2 68						
				AR. 984. 22.6.18 "	3 57				63 56		
July.	AP.	33 34 10		A.P. B 93068 £4-2-2.	9 82		20 20				
				AR. 1180 6.7.18. No 1. Dist	3 57						
				" 1403. 22.7.18 "	3 57				7052		
Aug	PP	34 10		AP. B. 69876. £4-2-2	7 14		20				
		34 10					20				
				AR 7852. 11.8.18 Can/Bd.	5 35						
				AR 1590 6-8-18 No 1 Dist	3 57						
				" 7019. 28-8-18 "	1 78						
				" 1838. 22-8-18 "	3 57						
				" 7885 11-8-18 C.B.S.Coy.	5 35				65 00		
Sept	do	34 10			19 62		20 -				
		33		69344 £4-2-2			20				
				AR 3547 1 D.I.S 29/8/18	68 13						
				" 2395. " 23/9/18.	3 57				630		
		33			71 70		20				
Oct	"	34 10		D 67807 £4-2-2.			20				
				A.R. 2635 7-10-18 1 Div	3 73						
				2845 23-10-18 "	3 73				1294		
		34 10		P.T.O	7 46		20				

CHECKED BY: Hubbard Lieut

NUMBER 302 RANK NAME GERRAND William Hunter

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									12 94		
Nov	Ptes Pay	33		C27714 £4.2.2.			20				
				a.R.3012 8-11-18 1Dist	3 73						
Dec	" "	34 10		E83100 £4.2.2			20				
				a.R.3234 25-11-18 1Dist	13 06						
				6396 9-12-18 C.F.C.	4 66						
				5540 23-12-18 B.D.	4 87						
Jan.	Ptes Pay.	34 10		F34504 £4-2-2			20		27 82		
		101 20			26 32		60				
				a.R.5848 4-1-19 B.D.	4 87						
				6175 11-1-19 "	9 73						
				3184 26-1-19 Kunmel PR Regt.	4 87				8 36		
		✓			19 47		-				
Apr				Jan R 167. 10/19 C.R.	41				794		
					41						

L.O.S. 29/1/19. SL 8

This space to be for numbers.

WAR SERVICE BADGE
Class "A" No. 94207 ISSUED

Proceedings on Discharge.

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

No.	302
Rank	Pte.
Surname	GERRAND
Christian name	William Hunter

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

Corps (Squadron, Battery or Company)	5th Field Company, Engineers Canada.
Date of discharge	Feb. 27, 1919.
Place of discharge	Montreal, Que.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

		Descriptive marks
Age	43 years 2 months.	Nil.
Height	5 feet 6½ inches.	
Complexion	Fair	
Eyes	Blue	
Hair	Light brown	
Trade	Mason	
Intended place of residence (To be given as fully as practicable.)	201 Ontario St. East Montreal	

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

R.O.1420 Para (C) Category A. Demob.

Authority for discharge.....

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.

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.)

M. F. B. 218.
200M.—5-18.
H. Q. 1772-39-113.

L.R. 18-3-19.

(OVER)

Stan SR 18-11-19.

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) Montreal, Que. Wm Gerrard *(Signature of Soldier.)*

(Date) Feb. 27, 1919. H. H. Kelley, B/master *(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) Montreal, Que.

(Signature) J. Fisher Lieutenant,
Officer i/c Discharge Section, District Depot No. 4.

(Date) Feb. 27, 1919.

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.)

NO RESERVATIONS

Wm Gerrard

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form	B. 263
Squadron / Battery / Company } Conduct Sheet,	"	B. 263a
or		
Field Conduct Sheet	"	W. 178
Copies of Convictions, by C. P.		in MS.
Med. Hist. Sheet,	Militia form	B. 313
Casualty Form	"	W. 54
Medical Report for Invalid§	"	B. 227
Dental History Sheet	"	B. 465
Last Pay Certificate	"	W. 44
Duplicate Discharge Certificate	"	W. 39A
‡Form of Will	"	W. 82

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

Attestation Paper	Militia Form	W. 23
or		
Particulars of Recruit	"	W. 133
Proceedings on Discharge	"	B. 218

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(a) Proceedings on Discharge

(b) Attestation.

(c) Medical History Sheet.

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.

AB

LAST PAY CERTIFICATE.

No. 302 Rank Pte Name Gerrand William H.

C.E. Who was Discharged

27-2-19 191., to

The following is a statement of the account of the above named from

1-2-19 to 27-2-19 191.

the inclusive date on transfer or discharge.

Dr. LPC.		Dr.		Cr.	
Bal. Dr. or Cr. from prev. month		41	92		
Regt'l Pay 27 days at 1.00				27	00
Field Allce 27 days at 10				2	70
Sep'n Allce					
Clothing Allowance				35	00
Post Discharge Pay				70	00
Other Credits	Subs DO. 48			12	00
Advances					
Sep'n Allce and Assigned Pay Cheque No.					
Other Charges					
	23551	104	78		
Bal. on trans or on disc. cheque No. ~~23551~~		146	70	146	70
Total					

A monthly stoppage of $ 20.00 has been paid on account of

Assigned Pay for the month of Feb. 1919 to Assignee Mrs. A. Jardin

Sep'n Allce for the month Nil 191. 858 Ruthergler Rd.

(Address) Feb. Ap. Charged on LPC. Pd by England. Glasgow Scotland.

REMARKS:-

State (1) date of enlistment 19-1-15

(2) Sep'n Allce entitled or not Nil

(3) Reason for discharge P.D.4 19-C-537

(4) Authority for discharged or 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

Place

Paymaster.

M.F.W.44.

Rank ..... Name .....

Dr. Cr.

Bal. Dr. or Cr. from prev. month .....

Dept'l Pay ..... days at $ .....

Sold Allce ..... days at $ .....

Sep'n Allce .....

Clothing Allowance .....

Post Discharge Pay .....

Other Credits .....

.....

Advances .....

Sep'n Allce and Assigned Pay Onsite Mos. .....

Other Charges .....

Bal. on this or an Allce. Cheque No. .....

Total .....

A monthly stoppage of $ ..... has been paid on account of

Assigned Pay for the month of ..... 19..

Sep'n Allce for the month .....

(Address) .....

REMARKS:-

Status (1) date of enlistment .....

(2) Sep'n Allce entitled or not .....

(3) Reason for discharge .....

(4) Authority for discharge .....

I have carefully examined this statement of account and find it to be correct.

Date .....

Please .....

Paymaster.

C.A.D.C. 5009 A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

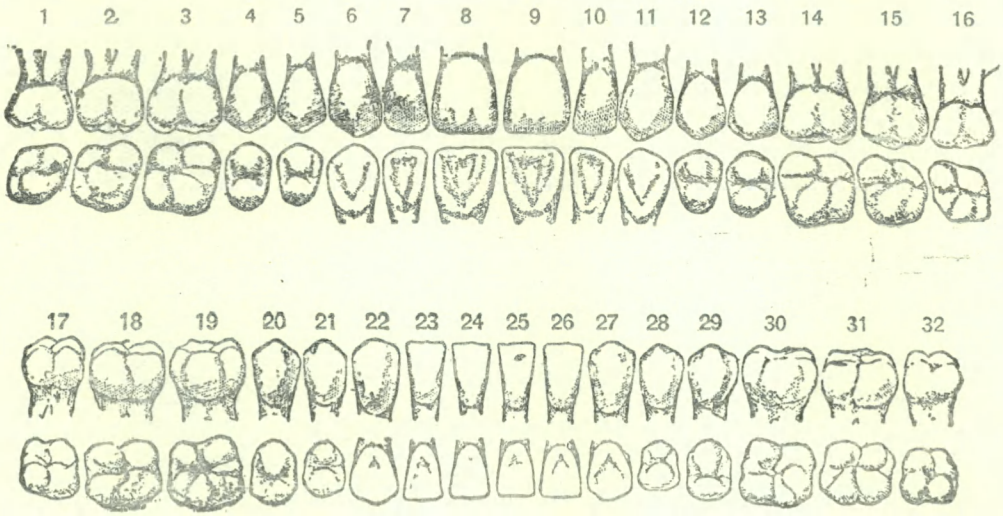
Canadian Printing and Stationery Services, London

M.D.2.

NAME OF SOLDIER (Block Letters) GERRAND-W.

REGIMENT C.F.C. RANK Sp.S. No. 302

Date of Examination in England 16/1/19 | 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 Denturos the numbers of teeth thereon will be stated.

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 14 # 18.
2. EXTRACTIONS 1 — 9 11 12 14 19 20 29 30
3. CROWNS
4. DENTURES
   - (a) Full Upper Required
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower 18. 19 20 29 — 31.

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 Nil
- (c) In France

KINMEL PARK, NORTH WALES.

Signature of Dental Officer H.W. Reid Capt.

PART I. 4 A.F.B. 179 Canada (Revised 1918). 100m. 16/11/18 D.495

Reserved for M.H.C.

Regt. No. 302 Rank PTE Surname GERRAND Christian Name WILLIAM HUNTER

Unit or Corps—(a) Overseas from United Kingdom 5 F. C. — C. E. (b) in United Kingdom C. F. C.

Born at—Town EDINBURGH County or Province Midlothian Country SCOT.

Date of Birth—Day 29 Month DEC. Year 1870 Age 48 yrs. — months.

Joined at MONTREAL Date JAN. 19. 1915

Former trade or occupation MASON

Permanent Marks or any peculiarity that will serve for future identification :—

VACC. MARKS — L ARM

Height—feet 5 inches 6 1/2 Colour of eyes BLUE

Signature of Soldier (*for identification purposes*) Wm Gerrand

Medical Report

☞ *Read carefully the instructions on last page of this form.*

1. DISABILITY.

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (a) SENILITY

Disabilities Group (b)

Disabilities Group (c)

2. CAUSE OF DISABILITY

		Place of origin.	Date of origin.
(i.) As to Group (a) above.	Conditions of Civil life Generally		Prior to Enlistment
(ii.) As to Group (b) above.			
(iii.) As to Group (c) above.			

3. Is the disability due to disease contracted or injuries received prior to Active Service ?

(i.) As to Group (a) above ? yes If yes, has Active Service aggravated it ? yes

(ii.) As to Group (b) above ? N A If yes, has Active Service aggravated it ? N A

(iii.) As to Group (c) above ? N A If yes, has Active Service aggravated it ? N A

4. Is the disability due to disease contracted or injuries received while on Active Service ?

(i.) As to Group (a) above ? N A

(ii.) As to Group (b) above ? N A

(iii.) As to Group (c) above ? N A

PART I. (continued).

5. MEDICAL HISTORY. Does not remember being Gassed France
Enlisted 19.1.15 England 29.3.15. Sept 15. 1915
Carried on in 5th C.M.R.E. paraded with right foot disabled from too much marching. and was sent to Etaples & drafted into ~~C.M.R.~~ C.M.C. Carried on in police duties.
M.H.S. no Entries.
Civil life. Mason & Stone Cutter -
Boarded at Etaples 4th March 18. Bll Over age -
Aged 48.
Can walk 5 miles -
Urinalysis Nef -

6. PRESENT CONDITION.

Subjective - Does not complain of any disability. Except that after heavy marching right foot felt very sore across the top of instep.

Objective. Well preserved man looks younger than given age. No Evidence of disease in other Systems -

7. OPERATION. (i.) Was one performed? no (ii.) If so, state what. N A
(iii.) Was one advised and declined? N A

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto, unless there is evidence to the contrary.

8. (i.) Is there loss or decay of teeth attributable to Active Service? no
(ii.) If so, describe. no

9. DO YOU RECOMMEND:—
(a) Fit for duty? (*state category*) B1.
(b) Invalid to Canada?
(c) Discharge from the Service as permanently unfit?

Date of Report 30-12-1918
Station Cunningdale
Signed [signature]
Officer in medical charge of case.
Capt C A M C

I have satisfied myself of the general accuracy of the above Report, and concur therein *except Not in hospital
{Officer i/c Hospital / S.M.O. Brigade} Strike out one of these

Dated at .....Station, on.....191.....

*Delete if inapplicable.

PART II.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

10. Is the disability fully described in Part I. (1)?
If not, describe it.

yes

11. Is the cause of the disability fully described in Part I. (2)? yes
If not, describe it.

12. From the medical information now adduced, was the disability caused or aggravated by:—
(a) Negligence of the Soldier { Caused? / Aggravated? } no
(b) Misconduct of the Soldier { Caused? / Aggravated? } no

13. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(Estimate at none, 5%, 10%, 15%, 20%, etc.)

h. a.

14. THE DISABILITY DUE TO SERVICE.—*(See Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in this estimate.)*
What part of the entire disability estimated next above (13) is due to causes arising during Active Service?
(Estimate at none, 1/10, 2/10, 3/10, etc., or all.)

h. a.

15. Permanency of the Disability due to Service estimated next above in (14).
(i.) Is it permanent?
(ii.) If not permanent, what is its probable minimum duration *(in months)*? h. a.

16. If an operation was advised and declined, do you consider the refusal to have been unreasonable? h. a.

17. Can the former trade or occupation be resumed?

yes

18. REMARKS:—

No aggravation due to service.

Qual. A.F. Sec. 9083 — 11-11-18.

19. RECOMMENDATION:—
(a) Fit for duty? *(state category)* B1
(b) Invalid to Canada? no
(c) Discharge from Service as permanently unfit? no

Date of Board 31. 12. 18.

Station Sunningdale.

Signatures of the Board
F. Swaebrick Capt. C.A.M.C. President.
J. G. Munro Capt. C.A.M.C.

Approved J. J. Donovan Major A.D.M.S.

Dated at ..... Station Major, C.A.M.C. for A.D.M.S., Canadians, London Area. 191

ASSISTANT DIRECTOR OF MEDICAL SERVICES, CANADIANS, LONDON AREA. JAN 2 1919 13. BERNERS ST. LONDON, W.1

Statement of the Soldier

(This is to be completed only in the case of the Soldier taking his Discharge in ~~England.)~~
(Sections 1, 2, 5, and 6 are to be read to the Soldier.)

I, the undersigned 302, W. H. Gerrand ..... have heard the description of my disability read, and am ~~(or not satisfied)~~ with it ~~(If dissatisfied, statement should follow)~~, I complain in addition of :—

Wm Gerrand
Signature of Soldier examined.

Instructions to Medical Officers

Question 1.—State the disability in terms of a diagnosis, that is, a diagnosis of the existing condition as distinguished from the disease or injury which caused it. It should be noted that in medical cases the disability may be the actual disease; for example, Tubercle of Lung, Chronic Bronchitis, Myalgia, Gastric conditions and so forth. (Follow the nomenclature as laid down in the "List of Diseases" of 1915, and amended by A. C. I. No. 1587 of 1917.)

Question 2.—The cause of the disability when known should be stated and care should be taken to establish as correctly as possible the place and date of origin. This is important in view of the relationship of Questions 3 and 4 to Question 5.

Questions 3 and 4.—*NOTE*—By Active Service is meant Service with the Colours in Canada, the United Kingdom or elsewhere during the present war, (since the 4th August, 1914.)

Question 5.—MEDICAL HISTORY.—State concisely the essential points of the history of the case as supported by documentary evidence. If further evidence is considered necessary to complete the Medical History, the same not being supported by documents, this should be obtained by questioning the soldier, but should be distinctly shown as "Patient's Statement." It is considered advisable that these latter statements be grouped apart from the evidence supported by documents available to the Medical Officer.

Extracts should be made from all entries on the Medical History Sheet.

If answers to Nos. 2, 3 or 4 show that the Soldier is suffering from some condition which pre-existed enlistment, it is advisable that these answers be substantiated as far as possible by statements obtained from the Soldier showing history of previous illness or injury.

Question 6.—PRESENT CONDITION.—As this question is primarily intended for the Medical Officer's report, in answering show clearly the condition of the Soldier at the time of examination.

It is directed that the objective and subjective matter be arranged in separate groups. The objective matter is considered to be the more important, in that it consists of a statement of the Medical Officer's actual finding.

Specialists' reports bearing on the PRESENT CONDITION should be attached.

In addition to description of the disability, a report on "all systems" is required in order that the whole when completed may be a true pen portrait of the Soldier's condition.

The Medical Officer in charge of the case will fill out pages 1 and 2 of this Form. The original must be wholly in the handwriting of the Medical Officer. The copies may be typewritten but must be signed by the Medical Officer who must be responsible that these are true copies of the original.

Finally the O. C. Hospital or S. M. O. or an Officer delegated for such duty by the A. D. M. S., is required to sign a certificate at the bottom of page 2, which reads as follows :—

"I have satisfied myself of the general accuracy of this report and concur therewith, except....."

This is a most important part of the paper and one to which the attention of the Officers concerned should be frequently drawn as it is by such strict supervision that the accuracy and good results of Medical Board work can be assured.

ENTRIES OF RECATEGORIZATION

Date	Station	Category	Signature of M. O.	Date	Station	Category	Signature of M. O.

AUDITOR | PAYMASTER

M. OR S.

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

REGT. No. 302 RANK Pte NAME (IN FULL) GERRAND Wm Hunter (BLOCK LETTERS, SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE — Nil

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
A.05	29/1/19	D.O. 48-2
Can. Co	9/2/19	D.O. 48-2

ORIGINAL UNIT C.E.F. C. C.

IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION Montreal

DATE OF ATTESTATION 19-1-15.

TRANSFERRED TO — DATE — AUTHORITY

TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY Contd — By England 20-00 — DATE EFFECTIVE 1-3-19

PAYABLE TO ~~Mrs. A. Jardine~~ Mrs Jardine — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS ~~858 Rutherglen Rd Glasgow Scotland~~ 858 Rutherglen Rd Glasgow Scotland — 201 ~~Ontario East~~ Montreal Que

STOP PAYMENT FOR ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE Montreal — DATE 27-2-19 — REASON D.D. 4-19-4537 — AUTHORITY — IF ENTITLED TO POST DISCHARGE PAY

MONTH 1919	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
Balance from previous account																																				
1-2-19 Feb.	27	1.10	29	70	12	00			76	70	23551	26-2-19					104	78											41	92					L.W/S 9/2/19 to 23/2/1920. 42
					35	00																							104	78	30				41-92 DBI LPC on 31-1-19
																													146	70					
																																			N S 4
	the credit was. 8th																												the debit was. 8th						
			H30	00	H30	00																							Mar Service Gratuity						soldiers Dept.
7.4.19																													70	00	70	00	850	00	pd DD 4
27.5.19																													70	00	70	00	280	00	228758 2
27/6/19																													70		70		210		293521 3
27.7.19.																													70		70		140		312025 4 5
																													70		70		70		[illegible] 6
																													70		70				1082537
																															420	00			Dom Journal

MONTH	PAY AND F. A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGIMENTAL CHARGES		OTHER CHARGES				TOTAL DEBITS		BALANCE				PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT								COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3										DEBIT		CREDIT		
			$	C.	$	C.	$	C.	$	C.	NO.	DATE	NO.	DATE	NO.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	

MILITIA AND DEFENCE

ASSIGNED PAY

9707

To whom Mrs G. Jardine

Address 858. Rutherglen Rd.
Glasgow.
Scotland.

By whom assigned Gerrand, William Hunter

Regtl. No. 302.

Rank Sapper

Corps, &c. Div Engineers

Rate 20 00

Date to Commence 1st Oct. 1915

PAYMENTS.

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.		49628	20 ✓	
Nov.		69131	20 ✓	
Dec.		86980	20 ✓	
Jan.	1916			
Feb.			60	Carried forward,
March				

ASSIGNED PAY.

By whom assigned Gerrand. W. H.

Regtl. No. 302 Sap. D.E.

Month	Year	Cheque No.	Amt. 60	Pay Sheet	REMARKS.
Jan.	1916	107052	20		
Feb.		128722	20		
March		149571	20		
Apl.		8226	20		
May.		33838	20		
June		61322	20		
July		93842	20		
Aug.		127367	20		
Sept.		161412	20		
Oct.		196957	20		
Nov.	280	233949	20		
Dec.		276446	20		
Jan.	1917	323592	20		
Feb.		360525	20		
March		403412	20		A.P. checked & found Correct J Keaton
Apl.			360		
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					