245TH OVERSEAS BATTALION, C.E.F. ORIGINAL

ATTESTATION PAPER.

No. 1057210

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? Gray
1a. What are your Christian names? Charles Elwin
1b. What is your present address? Chesterville Ont
2. In what Town, Township or Parish, and in what Country were you born? Chesterville Ont
3. What is the name of your next-of kin? Grant Gray.
4. What is the address of your next-of-kin? Chesterville Ont
4a. What is the relationship of your next-of-kin? Father 18
5. What is the date of your birth? May 30th 1898
6. What is your Trade or Calling? Scholar 20
7. Are you married? no
8. Are you willing to be vaccinated or re-vaccinated and inoculated? yes
9. Do you now belong to the Active Militia? no
10. Have you ever served in any Military Force? no
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? yes
12. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force? yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Charles Elwin Gray, 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.

Charles Gray (Signature of Recruit)

Date 22/11/16 191 . Wheeler (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Charles Edwin Gray, 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.

Charles Gray (Signature of Recruit)

Date Nov 22 191 6. Ellsworth (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 22nd day of November 191 6

D S Barker (Signature of Justice)

M. F. W. 22
750M—8-16
S. O. 1717-89-341

Description of Charles Elwin Gray on Enlistment.

Apparent Age 18 years 6 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft 7½ ins.

Chest measurement.
- Girth when fully expanded 35½ ins.
- Range of expansion 4½ ins.

Complexion dark

Eyes Gray

Hair Dark

Religious denominations.
- Church of England
- Presbyterian
- Methodist X
- 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).

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 Nov 22 1916 D Campbell

Place Montreal P.Q. 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.

Charles Elwin Gray 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.

Date Nov 25th 1916. (Signature of Officer)

REGIMENTAL DOCUMENTS

NAME Gray, Charles Edwin (Pte) REGT. NO. 1057210 UNIT 245th Bty H. Q. FILE NO. 2-32

	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)					DEATH
	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category 1
	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	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)			24262		DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob.
1	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)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
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)					(21)
2	Disp. Cert.					6.1
1	Q. Ent. Cert.					25.2
1	S. C. R. 132					34-2
4	casualty					2
	M. H. & D.					
	R. 132					
	Page					

W 2589
100M-11-16
1272-39-1377

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.

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(1) Name of Overseas Unit which Soldier joins.....245th O/S Battalion, C.E.F. "Canadian Grenadier Guards"

(2) Regimental Number 1057210

(3) Full Name of Soldier..... GRAY, Charles Elwin

(4) Place of Birth..... CHESTERVILLE, Ont.

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

(6) If married, state,
(a) Full name of your wife..... - - - -

(b) Present Postal Address..... - - - -

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

(8) Have you any children ?..... - - -

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

Also their names and ages..... - - -

M. F. W. 67.

300M.—5-16.
1272-20-854.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes. Grant Gray,

If so, state name and address Chesterville. Ont.

(10) Is your Mother alive? Yes. Ethel Gray,

If so, state name and address Chesterville. Ont.

(11) If your Mother is a widow No.

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.

- - -

(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.

C C Ballantyne
Officer Commanding.

Date NOV 29 1916

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. 105 7210 Rank Pte. Surname GRAY
(Given name in full) Charles Edwin

Unit or Corps 23rd Reserve Birthplace Chesterville Ont.

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

1. GENERAL DESCRIPTION:

Physique good Weight 150 lbs. Height 5 ft. 8 in. Colour of Eyes Gray

Nutrition good

Pulse 72

Condition of arteries normal

Vision Rt. 6/12 Left 6/12

Hearing (conversational voice) Rt. 21 ft.

Left 21 ft.

Identification marks, scars, or deformities. (Give cause and date of origin).
one vaccination mark on L arm

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 n.a.

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.

V.D. G. Nov. 7/18 Mar 18/19

[illegible]

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

[OVER]

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Ripon Yorks (Overseas)

Date 9 April 1917 Signed [illegible] M.O.

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

Signature [illegible]

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

THIS SECTION FOR USE IN CANADA—

Examined at .....(Canada)

Date ..... Signed ..... M.O.

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

Signature .....

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

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

245TH OVERSEAS BATTALION, C.E.F. ORIGINAL ORIGINAL

FC.T 1131

MEDICAL HISTORY SHEET

1057210

Surname Gray V Christian Name Charles Ellwin

Examined { on 22 day of Nov 1916
at Montreal

Birthplace { City or Town Chesterville
County Ont

Apparent age 18

Trade or occupation scholar

Height 5 feet 7½ Inches

Weight 124 lbs.

Chest measurement { Minimum 31 inches
Maximum expansion 35½ inches

Physical development Good

Small-pox Marks 0

Vaccination Marks { Arm Right 0 Left 0
Number 0 0

When Vaccinated last Never Vaccinated

(a) Marks indicating congential peculiarities or previous disease None

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

Approved by D Campbell Capt

Rank Capt M.O.

Date	Fit or Unfit	Examined for Re-Engagement	
18/1/18	07	G. Mundy	M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.

3-OCT 1918

Date	Result	Vaccinations	
3/2/17	Good	A D Irvine	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
20/1/17		A D Irvine	M.O.
27/1/17		A D Irvine	M.O.
3/2/17 26/6/18	TAB	A D Irvine a36 Capt	M.O.

Enlisted on 22nd day of November 1916 at Montreal P.Q.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	245th Bn. C. E. F., C. G. G. 93RD RESERVE BATTN C.E.F.	1057210 do do		NOV 22 '16 25 AUG 1917
Transferred to				

CANADIAN

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
Montreal	8-1-17	Fit	Passed by Medical Board Montreal Lgt Mtd.

INSPECTING MEDICAL BOARD M. D. No. 4 FIT APR 3 1917 O'R Edwards Pres. Capt CAMC MONTREAL, P. Q.

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

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

J.MC

Surname [illegible] Christian Name [illegible]

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
Berrington War Hosp Shrewsbury		29	9	18	8	11	18	8/1 Shrapnel wd Lt Arm & Rt Thumb Severe.	40.	T+T wd of Arm healing. No bone injury. Gutter wound of Thumb also healing. 22.10.18 Wounds healed. Movements good. 8.11.18 Transferred to Can Mil Hosp - Epsom -	[illegible] Capt RAMC
Can Mil. Epsom		8	11	18	22 NOV		1918	do	15	Wound healed. Left to shrapnel to evidence of disability 07	[illegible] Capt
CANADIAN SPECIAL HOSPITAL WITLEY, SURREY		7	12	18	17	3	19	Gonorrhoea	99	APPARENTLY CURED. IRRIGATIONS, LOCAL TREATMENT AND MEDICINES. STOPPAGES AS PER DATES.	[illegible] CAPT. REGISTRAR.

INSPECTING MEDICAL OFFICER

P. 880.

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

1. Christian names Charles Elmire 2. Surname Gray

3. Rank Private 4. Original Unit 245th Batt. 5. Reg. No. 105210

6. Address, in full, to which future payments of gratuity are to be forwarded S.P.O. Chesterville Ont.

7. Date of enlistment in the C.E.F. November 22nd 1916

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

9. Relationship of such dependent Nil

10. Address, in full, of such dependent Nil

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

12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—

13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States?

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

15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served 245th Batt. 6 months
11 months in England
87th Batt. 13 months in France

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

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

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

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

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

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

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

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

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

(b) If so, was such reversion in consequence of misconduct or inefficiency?

24. Are you now serving in the C.E.F.? If not, give:—(a) Date of discharge (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: Charles Grace

Place of Residence: S.P.O. Chesterville Ont.

Declared before me at: Ripon Yorks

This Fourteenth day of April 1919

QUESTIONS 12, 13, 14, 20, 24, 25, 26, 27 UNANSWERED.

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.

LIEUT.-COL. COMDG. 2ND CDN. RES. BN.

POST DISCHARGE PAY.

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

Certified Correct.

District Paymaster.

Form R 122.
2353—100M—9-1-16

HP Rank — Name GRAY, Charles Elwin — Reg'l No. 1057210

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

245th Bn. to 1st Quebec. Regt.

Place and Date of Enlistment Montreal 22nd Nov. 1916. — Place of Birth Chesterville, Ont.

Name and Address, Next-of-Kin Grant Gray, Chesterville, Ont. — Relationship Father

Assigned Pay Monthly $ — Payable to — Relationship

Separation Allowance $ — Payable to — Relationship

Discharge, Date and Place — Reason — Character

N/E. R.B. No. 2811
File R.L.
Category

H. W. & V., Ld.—9546-16.

Report. Date.	From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
		ARRIVED IN ENGLAND		14 [illegible]	I7. SS. JUSTICIA.
17.5.17.	23rd Res	Taken on strength.	Shorn	15.5.17.	PTII0134.
25.8.17	—"—	S.O.S. to 87th Bn.	"	25.8.17	DO #109 6.9.17 87th Bn. 334
3.10.18	QR	Wounded	Fld	29.9.18	CCA #335
7.3 10.18	QRD.	T.O.S. from 87th.	Base	29.9.18	Do #950 4.10.18 87th Do #243
24-11-18	"	On Command 2nd CCD.	"	22-11-18	PTI 284.
4-1-19	"	Ceased on 2CCD	"	7-12-18	DO 3.
18 3 19	23 Res	T.O.S from Q.R.D.	Pte Ripon	17.3.19	67 & 63 19/3/19 QRD.
28 4 19	4 M.D.C.W.	T.O.S	"	26 4 19	100 & 26/4/19 101 23d
		Canada		11-5-19	65=F-10

A.F.B. 103 CHECKED 30 AUG 1917

ON ACTIVE SERVICE OVERSEAS CANADA

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.
19-5-19	M Dy	S/S to Canada	Ste Rose	11-5-19	Do 117

W.S.B. Class a

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps 245th O/S Bn. C.E.F. "C.G.G."

Regimental No. 1057210 Rank Private Name GRAY, Charles Elwin

Enlisted (a) 22.11.16 Terms of Service (a) D o/s w. C. E. F. Service reckons from (a) 22.11.16

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) Scholar

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 at Halifax, May 3rd, H.M.T. F628, "Justicia" Disembarked at Liverpool, May 14th, 1917.			
22.5.17	23rd. Res Bn.	Taken on Strength	Shoreham	15.5.17.	D.P.11.O. 134
17.5.17	O.C. 245th Bn.	Transferred to 23rd Res, Bn,	Shoreham.	15.5.17.	D.P.11.O.
		95 Stanley Park for O.C. 245th Bn, C.E.F.			
25.8.17	23rd. Can. Res. Battn.	Posted to 87th. Batt'n.	Shoreham	25.8.17.	D.P.11 O.234
		W.H. Chalmers Lieut. A/Adjutant, for O.C. 23rd. Canadian Reserve Battalion			
27.8.17	Hosp	[illegible]		27.8.17	SO #109 d/6.9.17
10.9.17	Ollat	Joined Unit		14.9.17	B213
23.3.18	"	Granted 14 days leave T.		19.3.18	B213 SO #22 d/31.3.18
31.3.18	HCBS	D.O.S. from leave		31.3.18	ZR 280
31.3.18	"	S.O.S. to CCRC		1.4.18	ZR 1109.
6.4.18	Unit	Joined Unit		5.4.18	B213

CERTIFIED CORRECT. 15 SEP. 1917 CAN. RECORDS, LONDON.

(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: 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
28.9.18	18 Gen.	gsw Larm R Hand. Admitted Wounded Posted	Aldin	28.9.18	R 4181
29.9.18	Hmat Kelledehieq	Invalided Wounded Posted to O.R.D. Bramshott.		29.9.18	W3083/6106 D095-1918
					W.B. Bosher Lieut. for Lt Col. A. A. G. Canadian Section, G. H. Q. - 3rd, Ech.
3.10.18	DRD	TOS from 87/Bn	Bshott	29.9.18	Do 243 A.A. Andrew FOR LT. COL. I/C RECORDS, C.O.M.F
27-11-18	2nd C.C.D.	~~attached~~ to 2nd C.C.D.	Bramshott	27-11-18	Pt. II No. 281
3-1-19.	2nd C.C.D.	Ceases to be attached on admission to C.S.H. Witley. 7-12-18.	Bramshott.	7-12-18. Pt. II. D.O. No. 2.	C.D. Ryan Smith for O.C. 2nd Canadian Command Depot.
6-1-19.	Q.R.D.	Admitted to C.S.H. Witley	Bramshaw	7-12-18.	D.O. 3.
19.3.19	06	SOS to 23rd Res Bn	Ripon	17.3.19	D063 R.E. Wheeler Lieut QUEBEC REGT'L DEPOT.
18/3/19	23rd. CAN. RES. BN.	TAKEN ON STRENGTH	Ripon	17/3/19	D.R. II. O. No. 67

Sheet #3

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps. 23 Res. Bn.

Regimental No. 1057210 Rank Pte. Name GRAY C. E.
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				
9-6-19	O.C.S	T.O S D.D.#4 Dis.Sta. "F"	Montreal.	11-5-19	D.O.Pt II-160
9-6-19		S.O.S. ?D.D.#4 Demob.	"	22-5-19	D,O.Pt II-160 R.O 1420

C.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				

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—P21150 1M 5/18 G.W.P.Co (3490)

(1) *Substantative 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		(B)	(C)	(D)	(E)	(F)
Date.	From whom received.	Authority of Part II. of Orders	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.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer
26-4-19	23rd Can Res Bn.		Having proceeded to Rhyl for return to Canada is S.C.S. on transfer to Can.Conc.Cen, Rhyl. MD 4	Ripon	26-4-19	DPII 0-101.

R J Mclahill Capt
for Capt. Adjt
23rd Canadian Reserve Battn.

26/4/19 C.C.C. Kinmel Park for return to
Part II Order No.

4/5/19 C.C.C. Kinmel Park on
Embarking for Canada Part II Order No

Embarked S S Saturnia
Glasgow May 11 /19

ORDERLY ROOM
MAY 11 1919
No. 13 P.C.S.

Officer i/c
No 4 M.D. Concentn.

Nothing to be written in this margin.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 1057210 (Rank) Private

Name (in full) Gray Charles Edwin enlisted in

the 245th Overseas Battalion

CANADIAN EXPEDITIONARY FORCE at Montreal on the 22nd

day of November 1916

HE served in 87th Battalion, 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 21 years

Height 5 ft. 7½ ins.

Complexion Dark

Eyes Grey

Hair Black

Marks or Scars 1 Vacc. left arm.

C E Gray
Signature of Soldier

Date of Discharge MAY 22 1919

Dispersal Station "E" Military District No. 4

Issuing Officer

Officer i/c Discharge Section, Dispersal Station "E" Lieut.

Rank

Date May 22 19 19

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.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. (Rank)

Name (in full) enlisted in

the

CANADIAN EXPEDITIONARY FORCE and on the

day of

HE served in

and is now discharged from the service by reason of Demobilization

THE DESCRIPTION OF THE SOLDIER on the DATE below is as follows

Age

Height Marks or Scars

Complexion

Eyes

Hair

Signature of Soldier

Date of Discharge

Rank

Date 19

N.B.—As mutilation 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.R. 1918
10m-D.P. 2000M-11-18
H.Q. 1173-10-852

C.A.D.C. 5009A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) GRAY C E.

REGIMENT 23rd Res BN RANK PTE. No. 105 7210

Date of Examination in England 15-4-19 | 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 Dentures the numbers of teeth thereon will be stated

DENTAL BOARD 15 APR 1919 RIPON

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 5. 6. 14. 19. 30.
2. EXTRACTIONS —
3. CROWNS —
4. DENTURES
   - (a) Full Upper —
   - (b) Part Upper —
   - (c) Full Lower —
   - (d) Part Lower —

Fred W Bradley Lt Col.
A. D. D. S. M. D. No. 4

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 yes

Signature of Dental Officer R. Ross Capt.

V.D.C. DIVISION.

4229.

VENEREAL DISEASE CASE-CARD.

Army Form W. 3497.

CANADIAN SPECIAL (MILITARY) Hospital. 39th Ward.

Age	Service	Religion	Disease
20	24/c.	Meth.	V.D.C.

Regiment	Coy.	Reg. No.	Rank	Name
87th Bn. 2nd C.C.D.		1057210	Pte.	Gray, C.

Date of Admission	Disposal	Date of Discharge
7, 12, 18.		17 MAR 1919

DISCHARGED TO DUTY.

This space not to be written upon by M. O. i/c case.

SUMMARY

In cases of Syphilis the particulars below must be sufficient to enable the Syphilis Case Sheet (Army Form I, 1238) to be made up from this Card.

'plus' = "yes" 'minus' = "no"

1st, ~~2nd, 3rd~~ attack ~~or relapse~~

Dates and Places of Three last Exposures: Soon 2/18 – Dec 18 Frequently every night Glasgow & Paisley. Married woman.

Main points in history: W.R. before and after? — Incubation in days? 9

Prostitute? ~~Pvt~~ Other social data: Paid on army. Has venereal

If relapse, particulars:

Condition on admission: Foetal discharge? ? Character: PPD

Scabies? — Pediculosis? — Structural abnormalities? —

Complications: (a) Local:

(b) Metastatic:

Nature of any co-existing venereal disease:

Woman's name and address:

TREATMENT) Note or suggestions from Officer i/c Treatment [P.T.O.

DAYS: 96)

(1) W210—P1 200,000 10/17 HWV(P1148) Forms W. 3497/4
1810—P1224 200,000 5/18

X

Gray. C — 40.

Date	Treatment: Local	Treatment: General	Progress	Complications and their Treatment
9.12.	Hg.	T	P.P.D.	numerous pus cells
Zm	Plumbg.			QC. present XX
				10-12-18
10.12.	"	T	P.M.D.	
11/12	"	T	S P D	Lt Axilla
14/12	"	T	S P D	" "
18/12	"	T	S P D	Balanitis
21/12	"	T	S P D	"
24/12	"	T	S P D	Smear
28/12	"	T	S P D	Pus Cells Plenty (XXX)
31/12	"	T	S M D	G.C. (XX)
4/1	"	T	S M D	
8/1	"	T	S M D Am	Smear 4/1/19
10/1	"	T	S M D Am	many pus cells
13/1	Transfer to Service	T	S M D Am	G.C. Not found
			D.H.Q.R.	

Gray. C. 39

Date	Treatment		Progress	Complications and their Treatment
	Local	General		
15-1.	Posterior Urethritis			
	P. P. Syr. Lig. V	24		
	"	24	S. P. D. am.	
17/1/19	"	24	S P D am.	U ÷ few pus cells 2 ++ clear pus
20/1/	"	24	S P D. am.	U. D U 1/2 11 clear 18-1-19 Num. pus cells Gb. present + 21-1-19 Few shrunken pus cells Gb not found 12-14
23/1/	"	24	Morningtea	U 1/2 11 clear 3/4
25-1.	"	24	1. S P. D am.	U 1. Prost. clear. 3 2. Clear, p. m.
27/1/	"	24	S. P. D. am.	U 1/2 1, clear
29/1	"	24	S M D Hm	2 1/2 3 Sparse clear

VENEREAL DISEASE CASE-CARD.

Army Form W. 3497.

Hospital. Ward.

Age	Service	Religion	Disease

Regiment	Coy.	Reg. No.	Rank	Name
		105210	Pte	Gray. C.

Date of Admission	Disposal	Date of Discharge
4-12-18		

SUMMARY { This space not to be written upon by M. O. i/c case.

In cases of Syphilis the particulars below must be sufficient to enable the Syphilis Case Sheet (Army Form I. 1238) to be made up from this Card.

1st, 2nd, 3rd attack or relapse

Dates and Places of Three last Exposures {

Main points in history

Condition on admission

[P.T.O.

(9 19 24) W210—P1 200,000 10/17 HWV(P1148) Forms W. 3497/4
1810—P1274 200,000 5/18

Gray Ward 39

Date	Treatment		Progress	Complications and their Treatment
	Local	General		
12.3	V.P. Inj. to L.	2 ex v 3	1 w. D. am. (?)	W. 1 | 1. 2. > clean

7 or discharge — Glad to do.

VENEREAL DISEASE CASE CARD.

Army Form W. 3497.

_____ Hospital. _____ Ward.

Age	Service	Religion	Disease

Regiment	Coy.	Reg. No.	Rank	Name

Date of Admission	Disposal	Date of Discharge

SUMMARY { This space not to be written upon by M. O. i/c case.

In cases of Syphilis the particulars below must be sufficient to enable the Syphilis Case Sheet (Army Form I. 1238) to be made up from this Card.

1st, 2nd, 3rd attack or relapse _____

Dates and Places of Three last Exposures { _____ _____

Main points in history _____

Condition on admission _____

[P.T.O.

(9 19 24) W210—P1 200,000 10/17 HWV(P1148) Forms W. 3497/4
1810—P1224 200,000 5/18

Gray 6 39

Date	Treatment		Progress	Complications and their Treatment
	Local	General		
				Removed from cells
22/2	Trinq	2+3	Swd am?	Fo G found
25/2	"	2+3	Coa am?	M + specks
27/2	"	2+3	smsD.	M + few coarse
				M + speck
1/3	"	2+3	Sm D A.M.	3 / Sp^ks clear
4/3	"	"	Coa am?	M + few fine
6/3	"	"	" "	M + clear
8/3	"	"	" "	M + clear
11/3	"	"	" "	M + clear
				M + clear
				2/6 Silver Nitrate

VENEREAL DISEASE CASE-CARD.

Army Form W. 3497.

_____ Hospital. _____ Ward.

Age	Service	Religion	Disease

Regiment	Coy.	Reg. No.	Rank	Name

Date of Admission	Disposal	Date of Discharge

SUMMARY

This space not to be written upon by M. O. i/c case.

In cases of Syphilis the particulars below must be sufficient to enable the Syphilis Case Sheet (Army Form I. 1238) to be made up from this Card.

1st, 2nd, 3rd attack or relapse _____

Dates and Places of Three last Exposures _____

Main points in history _____

Condition on admission _____

[P.T.O.

(9 19 24) W210—P1 200,000 10/17 HWV(P1148) Forms W. 3497/4
1810—P1224 200,000 5/18

Gray C. 39

Date 1919	Treatment: Local	Treatment: General	Progress	Complications and their Treatment
31/1	Sing PP	2 4 + 3	S M D (Smear)	clear S/24
				1-2-19. Few sperm + shrunken pus cells. Gl. not found
3/2/	"	2 4 + 3	Sig	4/11 fine clear pus
5/2	"	2 4 + 3	S W D Am	3 Epith clear Am
7/2	"	2 4 + 3	S M D Am	3 clear S/22
12/2	"	2 4 + 3	S M D Am	½ clear S/12/16
13/2/19	"	2 4 + 3	S M D	½ fine ½ " clear pus
15/2/19	"	2 4 + 3	S M D	½ sperm ½ " clear pus
18/2/19	"	2 4 + 3	S M D	½ " clear 3
	Left for Parade.			
20-2-19	" DI Smear "		S M D	2 clear (P.D.)

VENEREAL DISEASE CASE-CARD.

Army Form W. 3497.

_____ Hospital. _____ Ward.

Age	Service	Religion	Disease

Regiment	Coy.	Reg. No.	Rank	Name

Date of Admission	Disposal	Date of Discharge

SUMMARY { This space not to be written upon by M. O. i/c case.

In cases of Syphilis the particulars below must be sufficient to enable the Syphilis Case Sheet (Army Form I. 1238) to be made up from this Card.

1st, 2nd, 3rd attack or relapse _____

Dates and Places of Three last Exposures { _____

Main points in history _____

Condition on admission _____

[P.T.O.

(9 19 24) W210—P1 200,000 10/17 HWV(P1148) Forms W. 3497/4
1810—P1224 200,000 5/18

Surname	Christian Name or Names	Reg. No.
Gray	C. E.	1057210
Rank	**Unit**	
Pte.	Q. (87)	

Cas. List.	
3.10.18 B335/2	Brimington War. 29.9.18
15-11-18 B342	G.S.W. L. Arm R. Hand. &
26-11-18 B381	Fnc. Con. Woodcote Pk 10.11.18
	④ Disc — 22-11-18
14 IV. 18. B395	C.S.P. with 8. IV. 18
	V.D.G.R.
21-3-19 C474	① Disc. — 17-3-19

A.M.D. 2 DEPT.
Brh. of D.G.M.S. O.M.F.C. London.

D.M.S. 1300. 50M-30-8-18.

Cas. List.

NAME Gray Charles Elmer

RANK AND CORPS Pte 87th Bn

REGT'L. No. 105 7210

H.Q.-FILE No. 649

FOLLOWS NO.

FOLLOWS

CABLE NO.	DATE	NATURE OF CASUALTY
13 4		C
4368	5-10-18	Edm Errington War H nr.
		Shrewsbury Sept 29th 1918
		G.S.W. L Arm & Hand.
		Nok Grant Gray Father Clintonville Ont.

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
B335	Berrington War Shrewsbury	29-9-18	G.S.W. L. Arm. R. hand.
B342. (3)	" to Mil. Conv. Woodcote Pk. Epsom	10-11-18	" " " " "
B381. (4)	Lize. " "	22-11-18.	" " " " "
C395 (1)	Can. Spec. Witley.	8-12-18	20.
C444 1	Dusk	17-3-19	"

Can. Home

Number 105-7210 Rank Pte.

Surname GRAY

Christian Name Charles Edwin

Units 87th Bn. Can. Inf. Theatre of War France

Date of Service 25-8-17

Remarks

Latest Address Gen. P. O. Chesterville Ont.

Roll No. B Cage 13517

200m.-2-21.M.

DESP. MAY 19 1922
REGN. No 9/16395

36

No. 1057210 RANK Pte. NAME Gray, C. E.

T.O.S. 22-11-16. UNIT 245th Battalion, C.E.F.
(D.O.# 790 of 23-11-16)

M.D. 4

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916		on pass with pay until	D.O.# 790 of 23-11-16.
Nov 22	Nov 30	N	4-12-16	
Dec		C		
1917	1917			
Jan		C		
Feb		C		
Mar		C		
Apr.		N.		

CHARLES, ELWIN.

Form R. 149.

Name GRAY. Rank Pte Reg. No. 1054210.

Unit ~~84 Can~~. G.R.D.

Next of Kin Canada.

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
28 9.	18 G. H.	Camiers.	Gsw Arm L. & hand R.			4463.10
~~29 9.~~	~~G/S Bermuda Wan~~	~~Shrewsbury~~	~~do~~	~~B335~~	~~11368~~	~~24745.~~
29. 9.	Bermuda War H.	Shrewsbury	do.	B335	11368	24745.
10. 11.	mil. (Con) Dn.	Chatham.	do.	B373		873.
22. 11.	discharged	do	do	B373		9414.
2-12	2nd Command depot	Blackdown				2-2016
8-12	Can Spec Hosp	Witley	do	C995		2823.
17-3-1919	discharged	do	do	C995		2619.

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

L.L. 19226—M. & D. 7814.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
25m—4-17.
H. Q. 1772-39-819.

To Whom ~~Mrs.~~ Grant Gray.

Address Chesterville. Ont.

By Whom Assigned Gray. C.E.

Regtl. No. 105-7210.

Rank Pte.

Corps 245 - Bn.

Rate $ 15.00

MAY 1 1917

PAYMENTS

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

CONSOLIDATED 4 ACCOUNT

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
18m.—4-17.
1772—39—819.

Sheet No. 2. Mrs. Grant Gray
(Assignee)

Name of Soldier Gray. C. E.
Pte. 105210 - 245-Bn.

L. L. Job 19227—M. & D. 7814.

$15.00

MAY 1- 1917

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May		Z 13864	15	
June		X 18280	15	90 C
July		Z 24336	15	Bn
Aug.		Z 30962	15	
Sept.		K 35911	15	6
Oct.		T 42215	15	
Nov.		S 49417	15	
Dec.		056835	15	120
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

JER

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

P. 559

MARRIED OR SINGLE: Single

PLACE OF BIRTH:

NAME AND ADDRESS OF NEXT OF KIN: Mr. Grant Gray. Chesterville. Ontario.

RELATIONSHIP OF NEXT OF KIN: Father.

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

REG'L NO. 1057210 RANK Private. NAME Gray. Charles Edwin.

IF IN PERMT. CORPS } WHAT UNIT — UNIT 245th Bn. TRANSFERRED TO 23rd Res. Bn DATE 15-5-17. AUTHORITY Shoreham O.R.O. 2182

PERMANENT FORCE ALLOWANCES — TRANSFERRED TO 87th Bn DATE 1.11.17 AUTHORITY Nom Roll

PLACE OF ATTESTATION Montreal, P.Q. — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION November 22nd 1916. — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY MONTHLY $ 15 DATE EFFECTIVE May 1st 1917.

PAYABLE TO Mrs. Grant Gray, Chesterville, Ontario. RELATIONSHIP Mother

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	C	REMARKS
1917														20 95	20 95																20 95					69. Balance from Canada
May	31	1st	34	10											34 10												15		15	40 05					
June	30		33												33									34 07				15		49 07	23 98					
July	31		34	10											34 10									4 87				15		15	43 08					
Aug	31		34	10											34 10									4 87				15		24 74	52 44					
Sep.	30		33												33	846	24/8.							243	973										
																718	31/7.							730	973			15		44 19	41 05					

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER-RED PAY	SER. ALLCE. ENG.
		~~41 25~~ b/w							41 25		
Oct.	By pay 1st	34 10 / 34 00						15	60 35		Nil
				a/c. 924 - 87 Bn 2/10	4 46				55 89		
				A.R. 892 - do 17/9/17	2 67				53 22		
				a/c. 989 - 15/10	3 57				49 65		
				A.P. Nov				15	34 65		
					10 70			15			

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER-RED PAY	SER. ALLCE. ENG.
	Fwd				10 70			15	34 65		
				A.R. 1052. 87 Bn. 6/11/17.	4 46				30 19		
				A.R. 913 - do. 8/9/17	3 57				26 62		
	Nov P. Pay	33							59 62		
	Dec ---	34 10 / 67 10		A.P. Dec.	18 73			15 / 30	78 72		Nil

105718 10. Pte Gray. Charles. Edwin.

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
MONTH	PARTICULARS			CR. 1	CR. 2				PARTICULARS					DR. 1 (873)	DR. 2	DR 3	DR 4	BALANCE	DEFER-RED. PAY	SER. ALLCE. ENG.	MONTH	PARTICULARS			CR. 1	CR. 2			PARTICULARS			DR. 1	DR. 2	DR 3	DR 4	BALANCE	DEFER-RED. PAY	SER. ALLCE. ENG.	
Ford 1918 Jan																																	78	72	
									Loan A.P.																									15	63	72	
									Q 4005.				31/8/17	#th 6362	-	57	-																	63	15	
									AR 1161.				87 Bn		18/11/17	-	12	49	-																	50	66	
									- 1242				"		4/12/17	-	4	46	-																	46	20	
									- 1300				-		16/12/17	-	3	57	-																	42	63	
	P Pay			1/34	10												21	09		15															76	73	Nil
Feb									A.P. Loan							15																			61	73	
									AR 1362				87 Bn		2/1/18	+	4	46	-																	57	27	
									- 1423				-		14/1/18	+	3	57	-																	53	70	
									- 1476				-		2/2/18	+	4	46																		49	24	
	P Pay			30	80												12	49		15															80	04	Nil
MAR 1918				30	80																																
									A.P. Loan							15																			65	04	
	P Pay			34	10																														99	14	
									AR 1523.				87 Bn		16/2/18	+	3	57	-																	95	57	
									- 1587				-		2/2/18	+	4	46	-																	91	11	
									- 25025				Loan Det Bn.		20/3/18	+	26	77	-																	64	34	
									- 26013				-	-	27/2/18	+	26	77	-																	37	57	
									- 1644				87 Bn		18/3/18	+	8	92	-																	28	65	
									- 27558				-		27/2/18	+	22	31	-																	6	34	Nil
				34	10												92	80		15																	

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY	* ~~ENGLAND OR~~ CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:-	1/5/17	EFFECTIVE DATE:-	
AMOUNT:-	~~1* 5**~~ stopped 1/5/19.	AMOUNT:-	

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 Grant Gray, (Mother)
Chesterville, Ont.

NAME:- GRAY, Charles E.
NUMBER:- 1057210

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte.

UNIT AND TRANSFERS

ORIGINAL UNIT:- 245th Bn

DATE ACCOUNT FIRST OPENED:- 1/5/17

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			87th Bn
			Canada Accts

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
~~24/3~~	~~3209~~	~~23 Reg~~	~~2 43~~				
~~8/4~~	~~80~~	~~"~~	~~4 73~~				
			~~12 16~~				
L P C Bal 30/4/19 Cr. #			6439				

PARTICULARS OF RENDERING NON-EFFECTIVE:- Dis. to Can 1/5/19 Ref D 4934 - 15/4/19 Ripon Mtd. 4 - Comp 16/4

MONTH 1918	PARTICULARS	CR 1	CR 2.	PARTICULARS	DR. 1	DR 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
31 March	Bal Fwd								6 34	Nil	
				Can Acct				15	8 66		
	PR	33							24 34		
				AR 22 87 Bn 3 4 18	3 57				20 77		
				173 20 4 18	4 46				16 31		
		33			8 03			15			
May				128 3-5-18	3 57				12 34		
		34 10							46 84		
				180 18 5 18	4 46						
				BAR				15	27 38		
		34 10			8 03			15			
June		33 -		BAR				15	45 38		
				AR 537 4th W GBRG 4 6 18	3 57				41 81		
				278 87 Bn 17 6 18	4 46				37 35		
		33			8 03			15			
JUL	-	34 10		Disb.				15	56 45		
				~~AR 348 87 Bn 7~~	~~3 57~~				52 88		
				- 375 - 1-7	3 57				~~49 31~~		
				- 374 - 15-7	4 46				48 42		
		34 10			8 03			15		NIL	
AUG	-	34 10		Disb.				15	67 52		
				AR 423 - 6/8	3 57				63 95		
				- 467 11 C 18 18/8	3 57				60 38		
		34 10			7 14			15		NIL	
SEP		33		Disb.				15	78 38		
				AR 524 - 8/9	3 57				74 81		
				- 577 - 30/9	3 57				71 24		
		33			7 14			15		NIL	

Fwd

New A of P/B # 95080 issued 18/10/18 AA

NUMBER 1057210 RANK Pte NAME GRAY C.E.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
30.9.18									71 24	nil	
Oct	pp.	34 10		ap.				15			
				HR 44925 21/10	9 73				80 61		
		34 10			9 73			15			
Nov.	"	33		ap				15			
				AR 3539 CCH Eps 11/11	487				93 74		
	129 S.F 22/11 – 4/12/18. DD. 281-2 CCD 27/11/18 (HR Epsom 27/11/18)	8 76		" 6069 " 22/11	48 67						
Dec	P.P	34 10		ap.				15	72 93		
	"	34 10		ap				15	92 03		
		109 96			53 54			45			
	—			AR 4728 " 19/12	2 56				89 47		
				~~" 4541~~ —							
				" 5400 CSH Wit. 23/1	2 43				87 04		
	"	30 80		ap				15	102 84		
				ap 6614 " 19/2	2 43				100 41		
	"	34 10		ap				15	119 51		
				H/S. "Y" 7.12.18 to 17.3.19 – 101 Days @ 6/-			60 60		58 91		
				~~DD~~ 69 – 23 Res. 20.3.19							
				AR 7951 CSH. Wit. 17/3	36	2 78			58 55		
		64 90			7 78	60 60		30			
Apl	"	33		ap				15	76 55		
				AR 3289 23 Res 24/3	2 43				74 12		
				– 80 " 10/4	9 73				64 39		
				– 307 " 26/4/19	9 73	Ens & PC			54 66		
				– 7981 5/5/19	9 73	✓			44 93		
		33			31 62			15			

A. o. s. Canada 11/5/19 MD4
R65 O.R.D

L Pc

Cat. A.
S.G. 28
O.G. 1

26-4-19

F

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 105 7210
2. Rank. Private
3. Name. Gray Charles Elwin
4. Unit. 23rd Res. 245th Bn.
5. Date of Discharge 22-5-19 Place MONTREAL
6. Reason for Discharge Demob.

EMBARKED 11 5 19
CALIFORNIA GLASGOW

WAR SERVICE BADGE. CLASS "A" No. 14858

7. Authority. D.D.#4 R.O. 1420 D.O. PT. II #160
8. Proposed Residence after Discharge Chesterville Ont. G.P.O

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.? 1/ 839

Montreal
May 22 — 1919
C C Gray
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Montreal
Date May 22 — 1919

Signature [signature] Lieutenant
Officer i/c Discharge Section, Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-89-113.

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).
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. 5009a).
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. Dispersal Certificate (C.D.3).
11. Equipment (Statement Q.M.G. Form (D.O.S.,
    and Clothing)
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B.64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group 2

Checked by NO. ..... EE

Date 2/5/19

Date of Enlistment

82.4.5.17 DM

MILITIA AND DEFENCE

Separation and Assigned Pay Branch G

OVERSEAS CONTINGENTS

6609

Date of Assignment May 1 17

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15-			

PARTICULARS OF SEPARATION ALLOWANCE

No. 105-7210

Rank Pte. Promoted Reverted Discharge

Soldier's Name C E. Gray.

Battalion 245th Battn

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Grant Gray.

Address Chesterville. Ont.

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
1917 Dec 31			120-	120-		07332-C 45
Jan	D 65730		15	15	5	
Feb.	G 92936		15	15		
March	A 93581		15	15		
Apr.	A. 12690		15	15	J.	
May	S 20292		15	15	J.	
June	O 22687.		15	15	B.	
July	C 31336		15	15	B	
Augt.	O 38776		15	15	B.	
Sept.	T 49293		15	15	B	
Oct.	W 50990		15	15		
Nov.	V 60015		15	15		
Dec.	X 64704		15	15		
1918 Jan.	T 76258		15	15		
Feb	Y 79895		15	15	C.	
Mar	M 82092		15	15	C	
Apr.	S 626		15	15		
MAY	P. 6845		15	15	C	
			375	375		

A/c Closed 31-5-19

Ret'd per. Saturnia

Date 22.5.19 M.F.W.187 Resd

Clerk C.J.B. 27-5-19

M.R.O. 112308 M.D. 4

AUDITED.

CONSOLIDATED ACCOUNT

M. F. W. 128
400M.—6-17—1772-39-141
L. L. 22320—M. & D. 7933.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7493.

AUDITOR | PAYMASTER

M. OR S. — PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES — REGT. No. 105721 — RANK Pte — NAME (IN FULL) GRAY Chas. E.

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? no. — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

MILITARY DIST. No. 4 — JUN 19 — DEMOBILIZATION — PAY DIVISION

PARTICULARS	EFFECTIVE DATE	AUTHORITY
T.O.S.	11-5-19	D.O.16.0 P.7.B. MR 56 Suppt

ORIGINAL UNIT C. E. F. G.R.D. — IF IN P. F. WHAT UNIT? — (BLOCK LETTERS, SURNAME FIRST)

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 22-11-16 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY, $ 15 00 — DATE EFFECTIVE 1/6/19

PAYABLE TO Grant Gray — RELATIONSHIP N.S. — ANY CHANGE IN ASSIGNEE OR ADDRESS N.S.G. G.P.O.

ADDRESS Chesterville Ont — Chesterville Ont

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE Montreal — DATE 22-5-19 — REASON Demob. — AUTHORITY D.O.16.0 P.7.B. MR 56 Suppt 2 — IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F. A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	COL. NO. 1 DATE	COL. NO. 2 NO.	COL. NO. 2 DATE	COL. NO. 3 NO.	COL. NO. 3 DATE	CASH PAYMENTS COL. NO. 1 $	COL. NO. 1 C.	COL. NO. 2 $	COL. NO. 2 C.	COL. NO. 3 $	COL. NO. 3 C.	ASSIGNED PAY $	ASSIGNED PAY C.	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C.	OTHER CHARGES $	OTHER CHARGES C.	TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
Balance from previous account																															44 93		Saturn'd Bal G.R.P.C.
1/5/1916					35 00		44 93																								44 93		Cr Clo 35 00 W.S.G. 9 72
26/3/19	76	1c	38	60	70 00		133 60		Boat	Train	183630				4 87		5 00		153 66		15 00				4 40		182 93		4 40		T.B.R.		opt for May 15 00
							178 53																										Pd a opa 4 40 23/5/1916 26/3/19

Other Credits — W. S. C. S. A. — Total: 350 / 350

War Service Gratuity

Other Charges — W. S. G. — S. A. — Total — Balance Soldier Dependant

	70	70	280	
440	—	440	27560	
	70	70	20560	
	70	70	13560	
	70	70	6560	
	6560	6560	—	
		350	—	

23-6-19
20/7/19
22.8.19.
23.9.19

917927 2
1076785 3
1285782 4
1536014 5

Journal

60m.-11-18 L. L. 51777. M. & D. 9585.

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.	