ATTESTATION PAPER.

No. 861

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? ..... James Morrison Gray
2. In what Town, Township or Parish, and in what Country were you born? ..... Glasgow N.B.
3. What is the name of your next-of-kin? ..... Jessie Gray
4. What is the address of your next-of-kin? ..... Dick St. Glasgow N.B.
5. What is the date of your birth? 23-7-88
6. What is your Trade or Calling? ..... Chaffeur
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? ..... "
10. Have you ever served in any Military Force? ..... 3 yrs. R.C.G.V
    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.

R.C.G.

Jn Gray ..... (Signature of Man).

J.B.T. Wilson Capt ..... (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, James Morrison Gray, 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.

Jn Gray ..... (Signature of Recruit)

Date Septr 19th 1914. James McCutcheon ..... (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, James Morrison 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.

Jn Gray ..... (Signature of Recruit)

Date Septr 19th 1914. James McCutcheon ..... (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 Valcartier this 24 day of Sept 1914.

J W Edwards Lt ..... (Signature of Justice)

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

J W Edwards Lt ..... (Approving Officer)

100 M.—8-14.
H.Q. 1772-1-13.

50 B. H.
16 Bn.

B

3

Description of Grey James Mc. on Enlistment.

Apparent Age 26 years 2 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height	5 ft. 9 ins.
Chest measurement. Girth when fully expanded	37 ins.
Chest measurement. Range of expansion	3 ins.

Complexion Fair

Eyes Blue

Hair Brown

Religious denominations.
- Church of England
- Presbyterian ✓
- 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).

1 Vaccin marks left arm
1 Mole center of chest

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 7/9 1914. C. Preston

Place Val Cartier Capt.
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.

James Harrison 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.

J H Shurley by
Lt D (Signature of Officer)

Date 24 Sep 1914.

REGIMENTAL DOCUMENTS

Pte. NAME GRAY JAMES MORRISON REGT. NO. 861 UNIT R.C.D. H. 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)					DEATH
1	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
3	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)				24584	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)					
	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)					
1	Dent. Cert.					
1	Disp "					
1	R149					
1	Discard					
1	P 152					
11	Pay Card					

W 2589
100M-11-18
1772-39-1377

DEPARTMENT OF VETERANS AFFAIRS

War Services
AUG - 8 1962
Referred to
Charged to

To ● Copy for H.O. File (VF-452-3)

Ottawa, Ont.
Date August 7, 1962

Attention of

NAME GRAY, James Morrison | SERVICE NUMBER 861 CEF | C.P.C. No. W.V.A. No. | NAVY ARMY XXX R.C.A.F.

The DEPARTMENT has received information from

S.T.M.O. Vancouver, B.C. Tele-Memo d/August 2, 1962

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death July 8, 1962
Cause of Death
Place of Death Shaughnessy Hospital, Vancouver, B.C.

Name and Address of next of kin (if known)

Copies to: W.S.R.
V. I.
~~RAY~~
~~D.G.~~
H.O.

Destroy form if advice of death already received.

for
Chief, Central Registry

DVA 24

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. 861 Rank Pte Surname GRAY
(Given name in full) JAMES MORRISON

Unit or Corps R.E.C.D. Birthplace Glasgow Scot

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

1. GENERAL DESCRIPTION:

Physique Good Weight 11 st lbs. Height 5 ft. 7½ in. Colour of Eyes Blue

Nutrition Good

Pulse 72 Regular

Condition of arteries Soft

Vision Rt. 6/12 Left 6/12

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

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

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 Yes 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.

22-3-19 Erythema Recovered.

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

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Bramshott (Overseas)

Date 10-5-19 Signed [signature] Capt. M.O.

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

Signature [signature]

(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 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.

ORIGINAL 861 RCD

MEDICAL HISTORY SHEET. 180

Surname ~~Grey~~ Gray Christian Name James M.

Examined on 23 day of Sept 1914 at Valcartier

Birthplace City or Town Glasgow County N.B.

Apparent age 26 — 2

Trade or occupation Chauffer

Height 5 Feet 9 Inches.

Weight 148 Lbs.

Chest measurement Minimum 34½ inches. Maximum expansion 3 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks Arm Right. Left. Number 7

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease ~~One~~ mole centre of chest.

(b) Slight defects but not sufficient to cause rejection

Approved by J. H. Todd Capt. A.M.C. M.O.

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

Date	Result	Vaccinations.
June 1914	good	M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
Sept 16/14	good 2	M.O.
		M.O.
		M.O.

Enlisted on ~~22~~ 18 day of ~~August~~ Sept. 1914 at Valcartier

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	30th Gordons	861		
Transferred to..	RCD			15/9/14

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.
50M—8-14.
H. Q. 1772—39—439.

Surname ..... Christian Name .....

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.
No 12 CAN. GENERAL HOSPITAL		22	3	19	29	3	19	Erythema	8.	Erythematous rash on arms and legs and buttocks rapidly disappeared on administration of good purge mild fever.	C.V. Grayden Capt

R.R.

Number 861 Rank Pte

Surname GRAY

Christian Names James Morrison

Unit R.C.D. Theatre of War France

Dates of Service 4-5-15

Remarks

Latest Address ~~B.C.E.R.~~ R.D. Vancouver

~~Victoria~~ B.C.

Roll No. B.

Page 1336

38103 Dem
JUL 26 1921
9

Surname	Christian Name or Names	Reg. No.
Gray.	J. M.	861

Rank	Unit	Co.	Troop	Batty.
Spr	R. E.			

Hospital: Depot — Date of Admission

Transferred No 1 Gen Hosp. Hosp. 7-2-15

12. 6 G. H. Branshott. Hosp. 23.3.19

Hosp.

Hosp.

Diagnosis: Contact. Meningitis

(1)
Later Diagnosis (if changed): ~~Ryd "2"~~
(2)
(3) Erythema

Additional Diagnoses: if more than one state present

DISPOSITION

Date Discharged 10-2-15

REMARKS. 29.3.19

D.D. No 1 Gen
4.4.19 C401.
12.4.19. C407.
25.4.19 C474

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

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

Form DMS 1401.

No. 12 CAN. GENERAL HOSPITAL. CARD

A & D. No. 1850 Pl. of Action Ceylon

Rank Pte Reg. No. 861 Unit P.P.C.L.I. Sick or Wounded

Name Gray J.M. Age 30 Religion C of E

Place in Hospital Dept. auy

Diagnosis N.Y.D.

Admitted 3-5-19 From

Discharged 29 MAR 1919 To

Transferred

Service at Home 5 5/12 In Field

Results

(See Document Card for M.H. Sheet and other Documents.)

[P.T.O.

REMARKS.

NAME Gray J. M. REGT. No. 861

RANK AND UNIT Pte. (Dep) Can Cav.

NEXT OF KIN

CABLE	
No.	DATE

NATURE OF CASUALTY

M. F. W. 42—100M.—8-18.
H.Q. 1772 39-393.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
C401	12 Cav Fem. Bramshott	23.3.19	Erythema ~~Multiple~~
C474	Dinah	29-3-19	as per T.L. C401 & Erythema

Form R. 149.

James Morrison

Name GRAY Rank Pte. Reg. No. 861

Unit C.C.R.D.

Next of Kin Mrs. Jessie Gray, 11. Dick St., Glasgow.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
23.3.19	No 12. Can G.H. Bramshott.		N.Y.D.G.	C 401		9002.
	Note Ref. C.H.O.1 D/	4.4.19. chg to				8463
		"Erythema"	C 409			
29.3.19	Discharged		C 474			4767
	S/H. 27/6/19					

GRAY. James Morrison. (Pte) C.C.R.D. 861.

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

No. 861 Rank Pte. Name Gray J. M.

T. O. S. Unit Royal Canadian Dragoons.

M. D. Val.

Paid From	Paid To	Sig. or Rec't	Promotions, Transfers, Discharges, etc.	
			Particulars	Authority
1914 Sept. 18	1914 Sept. 30	✓		
	Oct.	✓		

UNIT SAILED
OCT 3 1914

NAME Gray, James, Morrison,

RANK & NO. Pte. 861.

CORPS "6" Squadron, R. L. D

ENLISTMENT, PLACE. Valcartier. DATE Sept. 19th. 24th. 1914. S

FORMER CORPS. R. L. E. V.

COUNTRY OF BIRTH Glasgow. N.B. Canada.

NEXT OF KIN. Gray. Jessie.

ADDRESS OF NEXT OF KIN 11 Dick St. Glasgow. N. B. canada.

(OH-21-38-1 2/6/17)

DISCHARGE, PLACE DATE

O/S. 7-10-14. 23/11.

R/6. 29-5-19 337/5-2 Pte

L. L. 68592—M. & D. 8666—6-10-14—50m.

§2 S.O.S. Demob 31/5/19 D.Q.163 of 12/6/19 2 D.D.

REMARKS :

CANADIAN EXPEDITIONARY FORCE

199356

DISCHARGE CERTIFICATE

War Service Badge
Class "A" No.

THIS IS TO CERTIFY that No. 861 (Rank) Pte

Name (in full) GRAY James Morrison enlisted in the RCD

CANADIAN EXPEDITIONARY FORCE at Valcartier on the 7th day of September 1914

HE served in RCD England & 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 30

Height 5ft. 9in

Complexion Fair

Eyes Blue

Hair Brown

J. M. Gray

Signature of Soldier.

Marks or Scars

Mole centre of chest.

No. 2 DISTRICT DEPOT
MAY 31 1919
TORONTO

Date of Discharge

A. E. Ragan

Issuing Officer.

For

O.C. No. 2 District Depot

Rank

MAY 31 1919

Date 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.

7806

Rank and Name	GRAY, James Morrison
Regimental No.	861
Unit	R.C.Ds.
Date of enlistment	Sept 19th 1914
Place of birth	Glasgow N.B.
Married (Yes or No)	No
If in Permanent Force	
Promotions or appointments	

Name and Address of Next-of-kin
Mrs. Jessie Gray, (mother)
11. Dick St.,
Glasgow, ~~Scot.~~ N.B.

R.C.D/N.R/N.S/K/11/4/17.

Date and place of discharge
Reason for discharge
Character on discharge

N/E. R.B. No. 3939
File R.L.
Category CAN.OR

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
	6	Embarked		4/5/15	
21/2/16		"C" R.E.D. Granted 8 days leave			
3/5/16		R.C.D. Proceeded to Course of Instr. in Hotchkiss Gun, Striping, Grenades & Pioneering	1st Trancourt Chateau	10/2/16 to 24/4/16	P20 #9 P VII O #22
3/5/16	"	Ret.d to Duty	Field	1/5/16	- - -
31/7/16	"	Attached to Can Cav. Bde Signal Troop	"	28/6/16	P120 #30 & Sig T. P VII O #30
8 3 19	"	S O S to 66 RD	"	23 2 19	P VII O 19 + 17d/25/9 6th Wing 66th
26 5 19	6th Wing 66th	S O S to Canada	"	21 5 19	P VII O 20

66.I.38
21.5.19

Report		Record of promotions, reductions, transfers, casualties, etc, during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
Date	From whom received				

(1601)—Wt. W8203—1273.—800,000.—11-14.—K. & K. Forms B. 103/1.

Verification file
KG 102/287

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps R. C. Dragoons

Regimental No. 861 Rank Private Name James Morrison Gray

Enlisted (*a*)_____ Terms of Service (*a*) For War Service reckons from (*a*) 24 9 14

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

W. S. B. CLASS A

Extended_____ Re-engaged_____ Qualification (*b*)_____

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Landed in France	Boulogne	4-5-15	
12-2-16	O.C. Unit	Granted 8 days leave from		10-2-16.	B 213. D/12-2-16
26 2/16	do.	Rejoined from leave	Unit	23/2/16	B213. D.Cs 207. 5 3/16.
28-4-16	do	To course of Instn	Imperial Chateau	28-4-16	B213 P.O 30 d/14-5-16
5-5-16	do.	Returned to duty	Unit	1-5-16	
30-6-16	do	attached to Bde Sig Troop A.H.	Field	28.6.16	B213 P.O 30 d/31/7
25-8-17	do	Granted 10 days leave from		16-8-17	B213 P.O 71 d/31-8-17
7-9-17	"	Rejoined Unit	Field	1-9-17.	" " 74 d/-
26-10-18	do	Granted 14 days leave	Fld.	26-10-18	" " 133 d/14-11-18
12/11/18	C.C.B. Sig Troop	Returned from leave to att C.C.B. Signal Troop.	Fld.	11-11-18	B213
23-2-19	Hqrs. C.C.B.	Having proceeded to England with Officers charges is struck off strength of C.C.R.D. Kinmel	England	23-2-19	B-213 Com Sect. G.H.Q. No 2-2-1. D/ 1-8-3-19 for Major, Actg. A.A.G. for Lieut.-Col., D.A.A.G., G.H.Q.

Capt.

(*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				
	S.O.S.	PROCEEDED TO CANADA	Part II	No. 20	20/5/19.
		Lieut. [illegible] CAPTAIN. ADJUTANT "O" WING, D.O.D.			
		Embkd LIVERPOOL 21-5-19			
MAY 21 1919 O. S.		T. O. S. No. 2 DISTRICT DEPOT, TORONTO 1919		PART II D. O 163	
MAY 31 1919 S. O. S.		(DISCHARGED FROM H. M. S.)	No. 2 DIS. DEPOT,	PART II D. O 163	

W. C. Roberts
Lieut.
For O. C. No. 2 District Depot.

C.A.D.C. [redacted]

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) GRAY, J. M.

REGIMENT R.C.D. RANK Pte. No. 861

Date of Examination in England 10/5/44 | 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

R.C.D.

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 3, 7, 8, 9, 10, 13,
2. EXTRACTIONS 29,
3. CROWNS
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower

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
- (c) In France

BRAMSHOTT CAMP
PANTS.

Signature of Dental Officer E. L. Berry Capt.

NAME GRAY, James Morrison

Regimental No.	861	Name and address of next-of-kin	Mrs. Jessie Gray,
Unit	R.C.D.		Dick St.,
Date of enlistment	Sept. 19th, 1914		Glasgow, Scotland.
Place of birth	Glasgow, N.B.		
Married (yes or no)	No	Date and place discharged	
Amount of pay assigned monthly $		Reason for discharge	
To whom payable		Character on discharge	

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
1/10/14	31/10/14	31	1.00	31.	31	10	3 10	12 85	46 95			30.			30.	
1/11/14	30/11/14	30	1.00	30.	30	10	3.	16 95	49 95			47 50			47 50	
1/12/14	31/12/14	31	1.00	31.	31	10	3 10	2 45	36 55			35 25			35 25	
1/1/15	31/1/15	31	1.00	31.	31	10	3 10	1 30	35 40			35.			35.	
1/2/15	28/2/15	28	1.00	28 -	28	10	2 80	- 40	31 20			30 -			30 -	
1/3/15	31/3/15	31	1.00	31.	31	10	3 10	1 20	35 30			25.			25.	
1/4/15	30/4/15	30	1.00	30.	30	10	3.	10 30	43 30			25			25.	
1/5/15	31/5/15	31	1.00	31.	31	10	3 10	18 30	52 40			.			.	
1/6/15	30/6/15	30	1.00	30.	30	10	3.	52 40	85 40			3.			3.	
1/7/15	31/7/15	31	1.00	31.	31	10	3 10	82 40	116 50			6.			6.	
								110 50								
								6 31				236 15				
1.8.15	31.8.15	31	1.00	31.	31	10	3 10	116 81	150 91			54 02			54 02	
1.9.15	30.9.15	30	1.	30.	30	10	3.	96 89	129 89			2 68			2 68	
1.10.15	31.10.15	31.	1.	31.	31	10	3 10	127 21	161 31			51 43			51 43	109 88
1.11.15	30.11.15	30	1.	30.	30	10	3.		33.			5 36			5 36	137 52
1.12.15	31.12.15	31	1.	31.	31	10	3 10		34 10			11 34			11 34	160 28
1.1.16	31.1.16	31	1.	31.	31	10	3 10		34 10			2 61			2 61	191 74
1.2.16	29.2.16	29	1.	29.	29	10	2 90		31 90			106 93			106 93	116 74
				517			51 70	19 16	584 86			471 12			116 74	

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					
1/3/16	31/3/16	31	1.00	517 31	31	.10	51 70 3 10	19 16	34 10			471 12 6 98	- -	- -	6 98	143.86
				548.			54 80	19 16	621 96			478 10	.	.	478 10 143 86	

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY * ENGLAND OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:–	EFFECTIVE DATE:–
AMOUNT:–	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.

NAME:– GRAY, J.M.

NUMBER:– 861.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte.

UNIT AND TRANSFERS

ORIGINAL UNIT:– R.C.D.

DATE ACCOUNT FIRST OPENED.–

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO

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
15.4	392	CCC	~~1-4~~ 19 46				
25.4	776	"	~~1-14-4~~ 7 30				
1/5/19	1021	"	~~1-10~~ 48 67				

DAILY RATES OF PAY AND ALLOWANCES

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

Compiled 10.5.19

PARTICULARS OF RENDERING NON-EFFECTIVE:– Transfer to Canada 16/19 Ref K 8632 dd 9/5/19 MO 11 To Bram. Hdqrs. & Bal 595 07/xx

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
Mar 31	Balance forward								45763	405–	
April	P.P.	33–		ar 62 L.S.H. 22-4-18.	357						
				ar 21 L.S.H. 17-4-18.	357						
		33–			714				48349		
May	P.P.	3410		ar 111 L.S.H. 11.5.18.	357				2696		
				ar 132 L.S.H. 22.5.18.	357						
		3410			714				51045		
June	P.P.	33–		ar 176 L.S.H. 11.6.18.	357				2566		
				" 221 L.S.H. 22/6/18.	357						
		33–			714				~~53631~~ 53631	450	
July	P.P.	3410		ar 376 L.S.H. 21.7.18.	714				2339		
				284 " 9.7.18.	357				55970	465–	
		3410			1071				55970	465–	
Aug	" "	34 10		407. 7/8. LSH.	357						
				308 7/8 FGH	357						
				~~476~~ 476 ~~26/8~~ 26/8 ~~LSH.~~ LSH	~~357~~ 357				58309	480	
		3410			1071						
Sept	" "	33		~~506~~ 506 10/9. LSH.	357				Acquitted 6/11/18		
				578 7/9 "	357				60895	WP 20/2/19	
		33			714						
	" "	34 10		655 L S H. 16/10/18	560						
OCT 1918				736 " 24/10/18	560						
				6570 " 24/10/18	9733				53452		
		34 10			10853						
Nov	" "	33		59294 to London 6/11/18	2920						
Dec	" "	34 10		752 RCD 27/11/18	746						
				930 LSH 15/12/18	933						
	Forw'd	671 0		Forw'd	4590						

NUMBER 861 RANK Pte NAME Gray, J M.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1918					99				534 52	510	
	Forwd	67 10		Forwd	45 73						
1919				~~930~~ ~~LSH~~ (see over leaf) Lst P. ~~5/11/18~~	~~9 33~~					~~585~~	
Jan	C P	34 10		1093 LSH 12/12/18	3 73				586 00		
		101 20			49 72						
Feby	"	30 80		1219 " 26/12/18	3 73						
Mar	"	34 10		1339 " 16/1/19	3 73						
				1400 " 26/1/19	18 66						
				1438 " 30/1/19	3 73						
				1350 R C D 14/2/19	3 73						
				43385 69. Léon 3/3/19	48 67						
				1657 LSH 21/3/19	9 33					585	
				1596 666 Bram 18/3/19	9 73				549 59		
		64 90			101 31						
Apl	"	33		775 Dekalb Bram 25/4/19	7 30						
May		34 10		1021 " " 1/5/19	48 67						
	Int on def pay	5381		2566 666 Enfield 13/5/19	9 73						
				4026 " Enfield 16/5/19	24 33						
				292 " 15/4/19	19 47				561		
		120 91			189 50						

Packing Lyst 66 666 Bram
Dup. to Canada 21/5/19

585
30

MARRIED OR SINGLE S.

PLACE OF BIRTH Glasgow. N.B.

Authy. 12-2-29 12-12-29

NAME AND ADDRESS OF NEXT OF KIN Mrs Jessie Gray

11. Dick St Glasgow. Scotland

RELATIONSHIP OF NEXT OF KIN Mother.

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. 861 RANK Pte. NAME Gray James Morrison

IF IN PERMT. CORPS WHAT UNIT — UNIT R.C.D.

TRANSFERRED TO — DATE — AUTHORITY

PERMANENT FORCE ALLOWANCES — TRANSFERRED TO — DATE — AUTHORITY

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION September 19th 1914. — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO 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	Cd	REMARKS
1916.			548				54	80						19 16.	621 96.												478 10		478 10	143 86					
April.	30	30 1.00	30	00	30	.10	3	00							33 00	771	15/4/16	791	24-4-16					3 49	3 48					6 97	169 89				
May	31	1.00	31	00	31	10	3	10							34 10	827								3 41						3 41	200 58				
June	30	1.00	30	00	30	10	3	00							33 00			900 / 876							3 41 / 3 40					6 81	226 77				
July	31	1.00	31	00	31	10	3	10							34 10															—	260 87				
Aug.	31	1.00	31	00	31	10	3	10							34 10	997								3 49		3 41	48 67			59 06	235 91		122 —	113 91	
Sept.	30	1.00	30	00	30	10	3	00							33 00			1093	15/9/16						3 49	3 49					10 44	258 44				
Oct.	31	1.00	31	00	31	10	3	10							34 10	1180	28/9/16.							3 48		3 49				6 97	285 57				
Nov.	30	1.00	30	00	30	10	3	00							33 00											3 49				6 98	311 59		167 50	144 09	
Dec.	31	1.00	31	00	31	10	3	10							34 10											3 48				12 20	333 49		183 00	150 49	
Jan.	31	1.00 / .10	82	30			8	30																												
	31		34	10											34 10											3 49				6 97	360 62		178 50		
Feb.	28	1.00 / .10	30	80											30 80											3 48				6 97	384 45		212 50		
March	31	1.00 / .10	34	10											34 10			1495	30/3							3 49	48 67			62 63	385 92		228 00		
			1004	30										19 16	1023 46									13 87	14 24	60 96	545 44			664 54					

861. Pte. Gray J. M.

DATE 1917	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
Brought fwd			1004.30											19 16	1023.46									13 87 17 27 60 96	575 44			667 54	355 92		228 -		
April 30	100/10		33 -												33 -																	243 -		
May 31	100/10		34 10												34 10																	258 50		
June 30	100/10		33 00												33 00										3 49									
July 31	100/10		34 10												34 10										3 18				6 97	449 05		273 50		
Aug. 31	100/10		34 10												34 10														48 66	434 49		289 00		
Sept 30	100/10		33 -												33 -									3 57						3 57	465 02		304 50		
																									3 57				14 38	483 74		319 50		
																									3 57									

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR 3	DR 4	BALANCE	DEFER. PAY	SEP. RED.	ALLOE. ENE.
Oct 1917.		~~483 74~~							483 74	319 50		
"	31 days. 100/10	3410		242. 39.17. c.c. Bdge H.Q.	357							
				382 98.17 Do.	356							
				1185. 18.8.17. Do.	973							
				1185. 18.8.17 Do.	8760							
				162 25.5.17. Do.	357				40981	335.00		
	3410				10803							
Nov. P.P.	33 -			a.R. 566 L.S.H. 11.10.17.	357							
Dec. P.P.	3410			a.R. 546. L.S.H. 25.9.17.	357							
				R. 8870. 22.10.17 Lon.	4867							
				a.R. 490 L.S.H. 8.9.17.	357				41753			
1918 Jany. P.P.	6710				5938							
	3410			a.R. 690 L.S.H. 17.11.17.	357							
				a.R. 795 L.S.H. 20.12.17	714							
				a.R. 755 L.S.H. 9.12.17.	892							
				a.R. 734 L.S.H. 4.12.17.	357							
				D/N. a.R. 633 L.S.H. 24.10.17.	357							
				~~a.R.~~ a.R. 398 L.S.H. 18.8.17.	2677 714				41772	375.00		
	3410				3391							
Feb. P.P.	3080			a.R. 850 L.S.H. 5.1.18.	357							
				a.R. 900 L.S.H. 24.1.18.	357				44138	390.00		
	3080				714				44138	390		
Mar. P.P.	3410			a.R. 553. R.C.D. 11.2.18.	357							
				a.R. 934 L.S.H. 28.2.18.	357							
	3410				714				44138	390.00		

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR 3	DR 4	BALANCE	DEFER. PAY	SEP. RED.	ALLOE. ENE.
1918.		3410		Brought Forward	714				44138	390.00		
				a.R. 986. L.S.H. 8.3.18.	357							
				a.R. 774. R.C.D. 20.3.18.	714							
		3410			1785				45763	1405.00		
									45763			

Rem. 48.67. 23.11.17

441.38
34.10
47548
1785
45763

Regional No. _____ **MEDICAL HISTORY of—** A.F. B.178

Regimental No. 861 Region _____

Surname Gray Christian Names J. M.

TABLE I.—General Table.

Birthplace { Parish _____ / County _____

Examined { on _____ day of _____ 191 , / at _____

Declared Age _____ years _____ days.

Trade or Occupation _____

Height _____ feet _____ inches. Weight _____ lbs.

Colour of Hair _____ Complexion _____

„ Eyes _____

Chest Measurement { Girth when fully expanded _____ inches. / Range of expansion _____ inches.

Physical Development _____

Vaccination Marks { Arm, Right. _____ Left. _____ / Number _____ _____

When Vaccinated _____

Vision { R.E.—V= _____ / L.E.—V= _____ } With Glasses { R. _____ / L. _____

Identification Marks, such as Tattoo, Moles, Scars, etc. :—

_____

_____

Defects or Ailments :—

_____

_____

Examined and found—

Fit for Grade { I. / II. / III. / IV.

(Strike out those which do not apply.)

Signature _____

Chairman of Medical Board.

Re-examined for posting at _____

On _____ day of _____ 191__

Enlisted { at _____ / on _____ day of _____ 191__

	Corps.	Regtl. No.
Joined on enlistment		
Transferred to		

TABLE III.—Boards, Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service; Extension, Re-engagement, or Prolongation of Service, Issue of Surgical Appliances, Particulars of Dental Treatment, etc.

Date	Brief details and Signature

Special Remarks : state if a discharged Soldier

_____

_____

_____

_____

TABLE IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

Became non-effective by _____

on _____ day of _____ 191__

(*Signature*) _____

(*Rank*) _____

7480 2998/403 250m (4) 4/18 J.P. Gp. 125
8045/9152/666 250m (5) 6/18

TABLE II.—Only for admissions to Hospital or to the Sick List in Case of Warrant Officers treated in quarters

Name of Hospital	Admitted to Hospital. Day	Month	Year	Discharged from Hospital Day	Month	Year	Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
12 Bramshott Military Hospital	22	3	19	29	3	19.	Erythema	8	Raised red blotches on arms and legs and buttocks, slightly itchy on Leaving Listed. cleared up on administration of food purge.	W. Brampton Capt. RAMC

Forms I. 1237 12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	861	Pte.	Gray.	J M
Year	Unit.		Age.	Service.
1919	Royal Can Dragoons		30	5 5/12

Station and Date. Bramshott Military Hospital

Disease N Y D.

22-3-19 Compit:— Rash on arms and legs and buttocks antiseptalin.

Past Ill - Nil.

Pres. Ill - Commenced on sick ops with slight rash on left elbow and gradually broke out on both arms and legs. Admitted 22-3-19 and sent here. temp N.

Present:- Red blotches slightly raised about the size of five cent pieces all over arms legs and on buttocks There are indurated papules on surface of red blotches. Pt is itchy very when he is hot & after he scratches it. no glands enlarged. no history of venereal disease.

Heart - Normal

Chest - Normal.

Other organs - Normal.

24/3/19 - Rash fading rapidly. Bowels regular

26-3-19. Rash completely disappeared. Ft for discharge.

W.G.

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

(44502) Wt.W 11203—M 1150. 1,450,000. 6/12 16. C.F.& S. Forms/I. 1237/12. (E239)

P.T.O.

Station and Date.	

Army Form B. 181.

CLINICAL CHART.

(To be attached to Case Sheet.)

Bramshott Military Hospital.

Corps Royal Can Dragoons. Military Hospital

No. 861. Rank and Name Pte Gray. J M Age 30 Service 5 5/12

Disease N.Y.D. Date of admission 22-3-19. Date of discharge 29-3-19. Result Recovered

Dates of Observation			
Days of Disease	2	3	24
Temperature Fahrenheit — Time A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.
107°			
106°			
105°			
104°			
103°	Dr. Edmond.		
102°			
101°			
100°			
99°			
98°			
97°			
Pulse per Minute	76	72	
Respirations per Minute	20	18	
Motions per 24 hours			

(6378) Wt. W4612/P566 2,000,000 2/18 McA & W Ltd A.F.B. 181/5 (E. 2565)

Signature Wlfraydon Capt. In charge of case.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps _____ Military Hospital _____

No. _____ Rank and Name _____ Age _____ Service _____

Disease _____ Date of admission _____ Date of discharge _____ Result _____

Dates of Observation																															
Days of Disease																															
Temperature Fahrenheit	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.
107°	8 6 4 2																														
106°	8 6 4 2																														
105°	8 6 4 2																														
104°	8 6 4 2																														
103°	8 6 4 2																														
102°	8 6 4 2																														
101°	8 6 4 2																														
100°	8 6 4 2																														
99°	8 6 4 2																														
98°	8 6 4 2																														
97°	8 6 4 2																														
	8 6																														
Pulse per Minute																															
Respirations per Minute																															
Motions per 24 hours																															

(6378) Wt. W4612/P566 2,000,000 2/18 McA & W Ltd A.F.B. 181/5 (E. 2565)

Signature _____ In charge of case.

A.F.B. 122

.F.B. 103

A.F.B. 178

or A.F.A. 45

S. 1375

W. A. C.
C. E. F. 13

War Service Badge
Class "A" No. 197356

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 861

2 Rank. Pte

3. Name. GRAY James Morrison

4. Unit. RCD

5 Date of Discharge MAY 31 1919 Place Toronto

6 Reason for Discharge ~~Invalided~~ DEMOBILIZATION

7. Authority. No.2 District Depot, Part II. D.O.No. 163

8. Proposed Residence after Discharge Box 80 Duncan B. C.

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.?

Jno Gray
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

No. 2 DISTRICT DEPOT

Place TORONTO

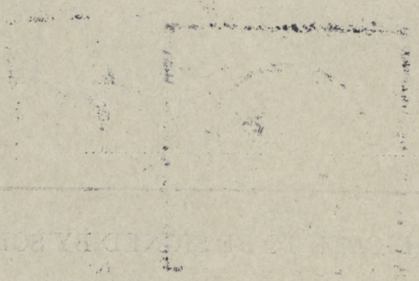
Date MAY 31 1919

AS
16-12-52

Signature R. Rayner Lt
(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

For
O.C. No. 2 District Depot.



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 Duplicate Attestation Paper (M.F.W. 23), or
2 Particulars of Recruit (M.F.W. 133).
3 Casualty Form (A.F.B. 103),
4 Medical History Sheet (M.F.B. 313 or A.F.B. 178).
5 Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
6 Dental Certificate (C.A.D.C. 5009a).
7. Field Conduct Sheet (A.F.B. 122.)
8. Proceedings on Discharge (M.F.B. 218a)
9. Discharge Certificate (M.F.W. 39)
(Enclosed in special envelope (260M)).
10. Copy of Discharge Certificate (M.F.W. 39a).
11 Dispersal Certificate (C.D. 3).
12 Equipment and Clothing } Statement Q.M.G. Form (D.O.S. 2).
13 Last Pay Certificate (P. 851). + Dup
14 Pay Book (A.B. 64).
15 War Service Gratuity (Form M.F.W. 2695)
16 Casualty Documents.

Group B
Checked by No. 18
Date 19-5-19

1. No.	
2 Rank.	
3. Name.	
4. Unit.	
5 Date of	
6 Reason	
7. Authori	
8. Propose	
9.	
I here	
M. F. W	
10.	
The	
Place	
Date	
AS 16-12-5	

"CARMANIA" 29-5-19

G 2881

DISPERSAL I

AUDITOR | PAYMASTER

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

M. OR S. | REGT. NO. 861 | RANK Pte. | NAME (IN FULL) G R A Y, J.M.

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. — IF IN P.F. WHAT UNIT? Bat 50 — (BLOCK LETTERS SURNAME FIRST) Victoria B.C.

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 16-9-14 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ — DATE EFFECTIVE

PAYABLE TO — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE Toronto — DATE 31-5-19 — REASON Demob — AUTHORITY Do 163 — IF ENTITLED TO POST DISCHARGE PAY Yes

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 $	CASH PAYMENTS 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																																					T.O.S. 21-5-19 D.O. 163 SUBS TO D.O.
31-5-19									59	50																							59	50		Mob. Ent. L.R.C.
5-6-19	5	1/10	5	50													24	66	Embarked																Rgn. to Emb. 5-6-19
					35	cts																															Clothing all
					70	cts																															1st pay 71.55
																																				Beads, trading cards
									110	50			Cheque	66164			4	9.7	15	cts											705	57					
		W.S.G.																									W.S.G.										AMOUNT DUE SOLDIER-DEPENDENT
																											70	cts									
																											5	50									
183 days		420							420								31/5/19														75	50	345	50			
																	aR 7H	June 27					64	50							140	-	280	-			
																	aR 9H	July 23	99834				70	-							210	-	210	-			
																	aR 11H	Aug 22	137045				70	-							280	-	140	-			
																	aR 14H	Sep 24	158427				70								350	-	70	-			
																	aR 17H	Oct 28	179513				70	-							420	-	0				
									420	-													345	50			75	50			420	-	345	50			W.S.G. PAID IN FULL

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

FOR PAYMASTER WAR SERVICE GRATUITY — CAPTAIN

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-59-1300.

DISPERSAL "F"