61

Original

ORIGINAL

No. 1 Overseas C.A.S.C. Training Depot.

ATTESTATION PAPER.

No. 291375

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? — Gunn.
1a. What are your Christian names? — Donald Battygate
1b. What is your present address? — King Edward Post Office St James Manitoba Canada
2. In what Town, Township or Parish, and in what Country were you born? — St. James Manitoba Canada
3. What is the name of your next-of kin? — Mary Gunn
4. What is the address of your next-of-kin? — King Edward, P.O. St James, Manitoba Can.
4a. What is the relationship of your next-of-kin? — Mother
5. What is the date of your birth? — 3rd February 1896
6. What is your Trade or Calling? — Fireman and Chauffeur
7. Are you married? — Single
8. Are you willing to be vaccinated or re-vaccinated and inoculated? — Yes
9. Do you now belong to the Active Militia? — no
10. Have you ever served in any Military Force? — no
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? — Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? — Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Donald B Gunn, 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.

Donald B Gunn (Signature of Recruit)

Date 8th March 1916. J B Robertson (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Donald B Gunn, 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.

Donald B Gunn (Signature of Recruit)

Date 8th March 1916. J B Robertson (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 Winnipeg this 8th day of March 1916.

(Signature of Justice)

M. F. W. 23.
600M.—2-16.
H. Q. 1772-39-841.

Transferred to
No. 1 Overseas C.A.S.C. Training Depot.
JUN 10-1916

Description of Donald B. Gunn on Enlistment.

Apparent Age 20 years 1 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 8 ins.

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

Complexion Ruddy

Eyes Grey

Hair Dark Brown

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

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

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

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 Mar. 6 1916 L. Tainley

Place Winnipeg, Man. Can. 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:—

MOBILIZATION
MEDICAL BOARD
APPROVED FIT

A. Leeming Col. PRESIDENT

G. Y. McCrae Capt. MEMBER

[illegible] MEMBER

CERTIFICATE OF OFFICER COMMANDING UNIT.

Donald Bathgate Gunn 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. Leckie (Signature of Officer)

LIEUT.-COL.
222nd. OVERSEAS BATTALION, C.E.F.

Date March 9 1916

REGIMENTAL DOCUMENTS

NAME Gunn Donald B. (Pte) REGT. NO. 291375 UNIT 222nd Bn. H. Q. FILE NO. 21641

	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
	TRAINING HISTORY SHEET (M.F.W. 113)					
	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob.
	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)					9-14
	PARTICULARS OF CHARACTER (A.F.W. 3226)					28-14
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					T
1	C.19.19.					
1	Wings. cert.					
1	M. F. W. 67					
1	casualty form					
1	Pay Cert					

W. 2589
100M-11-18
3772-39-1377

NAME Gunn. D. B.

REGT'L No. 291375

RANK AND CORPS Pte. C.A.S.C.

H. Q. FILE No. 649.

FOLLOWS No.

FOLLOWS

CABLE

NO.	DATE

NATURE OF CASUALTY

L. L. 20497—M. & D. 79 8

M. F. W. 42—50M.—5-17.
H. Q. 1772-39-893.

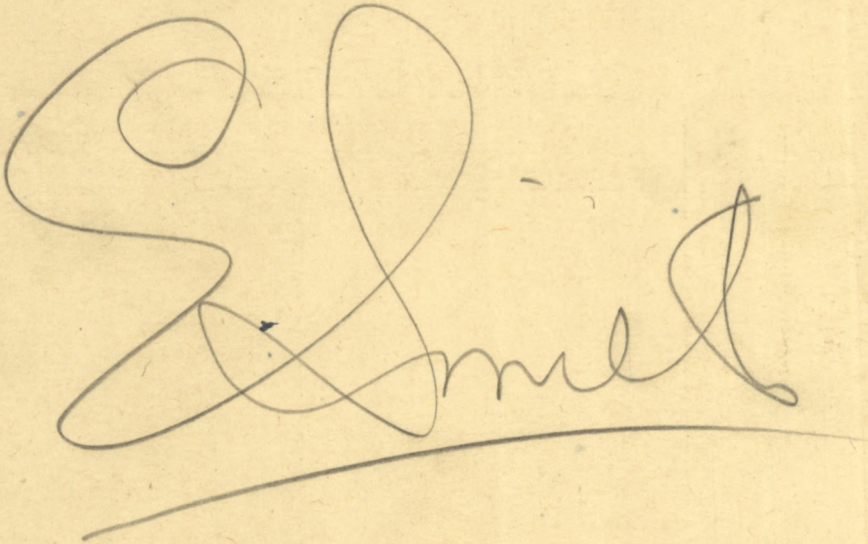
LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
131	Can. Etchinghill		
	Lymington	21-8-17.	V. D. S.
617-2	Discharged	18-9-17	V. D. S.

No. Rank Pte Name Gunn Donald, Bathgate

T.O.S. 8-3-16 Unit 222nd Battalion (St. James)
D.O. 97 of 16-3-16

M.D. 10

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Mar. 8	1916 Mar. 31	V		
Apr.		"		
May		"		
June 1	June 9	"	Trans to C.A.S.C	Mo 7-9-6-16.



No. 291375 RANK Pte. NAME Gunn D. B.

~~T.O.S.~~ Trans. from 222nd Bn. 10-6-16 D.O. 136 of 10-6-16. UNIT Can. Army Service Corps #1 Train Depot

M.D. 10

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
June 10	June 30	✓		
July		✓		
Aug.		✓		
Sept.		✓		
Oct.		✓	Forfeits 1 days pay a.w.l. 1 day C.B. 12-10-16	D.O. 242 of 10-16. Oct. Paylist.
Nov.		✓		
Dec.		✓		
1917	1917			
Jan.		✓	On 8th. Draft	Jan. Paylist.

FORM R. 149.
7106—250m—7/2/17.

Name GUNN, Donald *Rank* Pte. *Reg. No.* 291375

Unit CASC R.D. Bathgate

Next of Kin Canada

Date 1917	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
21-8	Can.H.Etchinghill		VDS	131		
18-9	Discharged		Do	217		Serv. Bo

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

SURNAME. Gunn

CHRISTIAN NAMES Donald Bathgate

REGL. No. 291375 RANK Pte.

UNIT ~~222nd~~ C.A.S.C. (Train. Depot. No1.) (8th R.D.) ~~Batt~~

FORMER CORPS Nil.

J.H. CARD NO.

S.O.S. Demob. 29/5/19
M00161 ROLL 10/6/19
2/10.

NEXT OF KIN.

NAMES IN FULL Gunn Mrs. Mary.

RELATIONSHIP TO SOLDIER mother

ADDRESS King Edward P.O. St. James, Man.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, St. James, Man. DATE Feb. 3rd 1896.

PLACE OF ATTESTATION Winnipeg, Man. DATE Mar. 8th 1916.

Trans from 222nd Bn. to C.A.S.C. Train Depot. Auth. 222nd Bn. N.R. 9-6-16
R/C. 23-5-19 334 Pte.

L. L. 94504. M. & D. 6512.

M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

MARRIED SINGLE yes WIDOWER

TRADE OR CALLING Fireman and Chauffeur. RELIGION Church of England.

DESCRIPTION.

APPARENT AGE 20 YEARS 1 MONTHS

HEIGHT 5' FEET 8 INCHES

CHEST MEASUREMENT 40 INCHES EXPANSION 3 INCHES

COMPLEXION Ruddy EYES Grey HAIR Dk. Brown

DISTINGUISHING MARKS Nil.

MEDICAL EXAMINATION. PLACE Winnipeg, Man. DATE Mar. 8th 1916.

Present Address:- King Edward P.O., St. James, Man.

Number 291375 Rank Pte

Surname GUNN

Christian Name Donald Baehgale

Units C A S C Theatre of War France

Date of Service 7-3-18

Remarks #1 Fire Hall

Latest Address ~~Ivaen St. S St. James~~
Winnipeg Man

Roll No. B

Page 14842

.-2-21.

DESP. JUL 7 1922
REGN. NO. 35862

FORM D.M.S. 1300.
8137—50m—28/2/17.

Surname	Christian Name or Names	Reg. No.
Gunn.	W. B.	291375.

Rank	Unit	Co.	Troop	Batty.
Pte.	6 A.S.C. Sept.			

Hospital — Date of Admission

Transferred Clotningbill Mil Hosp. ?

Hosp.

Hosp.

Hosp.

Diagnosis V.D.S.

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION — Date

6h 22.9.17. 617(2). — No 18.9.17.

REMARKS

Schultz. 51255. Co.

Cpl. Sept

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.		

L. L. Job 4503.—M. & D. 6332.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
50m.—6-16.
H. Q. 1772-39-819.

To Whom Mrs. Mary Gunn

Address 2 Queens Street South
St. James. Man.

Rate $15.00

FEB 1 1917

By Whom Assigned Gunn, D. B.

Regtl. No. 291375

Rank Pte

Corps C. A. S. C. D. D. # 1 & Dft.

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 2 ACCOUNT

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

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

INSTRUCTIONS.

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

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

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

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

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

---

(1) Name of Overseas Unit which Soldier joins..... No. 1 OVERSEAS C. A. S. C. TRAINING DEPOT.
FORT OSBORNE BARRACKS WINNIPEG, MAN

(2) Regimental Number 291375

(3) Full Name of Soldier.... GUNN, Donald Bathgate.

(4) Place of Birth..... St. James, Manitoba.

(5) Are you married, or not ?..... Not.

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

(b) Present Postal Address.....

(7) Are you a widower ? ..not.

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

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

Also their names and ages.....

M. F. W. 67.

5 M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ? yes. Alexander Gunn,

If so, state name and address St.James, P.O., Man.,Canada.

(10) Is your Mother alive ? Yes.

If so, state name and address Mary Gunn, St.James P.O.,Man.Canada.

(11) If your Mother is a widow.....

Are you her sole support, or not ?.....

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

.....

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

.....

(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 ? yes.

If so, in what Company ? Sovereign Life Ins.Co.

Have you made arrangements for payment of your Insurance premium yes.

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

W. C. Seagram Capt.
O. C. No. 1 Overseas C. A. S. C. Training Depot.
Officer Commanding.

Date JAN 18 1917

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
50m.—6-16.
1772—39—819.

Sheet No. 2. Mrs. Mary Gunn,

L. L. Job 4503.—Req. 6832.

PAYMENTS. Name of Soldier. Gunn D. B.

291375 — Pte — 6. a. S. 6. 5. H.

8 15 00

FEB 1 1917

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.		R41434	15	
March		D50891	15	
April		X 2160.	15	15. E.
May		X 8534	15	
June		E15327	15	15 B.
July		F22266	15	C
Aug.		G. 29470	15	
Sept.		Y35912	15	
Oct.		E 41957	15	
Nov.		N 48513	15	
Dec.		L 58508	15	165 on ad
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

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.				

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

Division 10

Name of Soldier Graves W.B.

Regiment C.A.D.C. Rank Pte No. 291375

Red — Condition of mouth at examination.
Blue — Operations performed.
P. C. — Porcelain (J. C.
R. F. — Root filling
C. C. — Gold crown
P. C. — Porcelain crown
A. A. — Acute abscess
P. — Pyorrhea
X. — Extractions
F. L. — Full Lower
F. U. — Full Upper

DATE	No.	Fillings: Amal.	Phosp.	G. Per.	Cement	Extracted	Anesthetic	Treated	Crowns	Cleaned	As 2° 3	Pulp Removed	Put Pulp	Artificial Teeth	OPERATOR	REMARKS
1917 Jan 16															Brownlee	

M.F.B. 465
100m.—7-16.
1772-39-950

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

a m d 2r

ORIGINAL MEDICAL HISTORY SHEET.

291375

Surname Gunn. Christian Name Donald Bathgate

Examined { on 8th day of March 1916 / at Winnipeg

Approved by L. J. Ainley

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

Birthplace { City or Town St James. / County Manitoba Canada

Apparent age 20 yrs. 1 month.

Trade or occupation Fireman & Chauffeur

Height 5 Feet 8 Inches.

Weight 178 Lbs.

Chest measurement { Minimum 37 inches. / Maximum expansion 40 inches.

Physical development Good.

Small-Pox Marks none

Vaccination Marks { Arm Right. Left. / Number none

When Vaccinated last Childhood

(a) Marks indicating congenital peculiarities or previous disease none

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

Date.	Fit or Unfit.	Examined for Re-engagement.
		MOBILIZATION MEDICAL BOARD APPROVED FIT — A. C. Reeve Capt. PRESIDENT — M.O.
		W. H. Macgregor Capt. MEMBER — M.O.
		Duncan Capt. MEMBER — M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
OCT 14 1916		M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
26-2-18	J. Bennett	M.O.
AUG 3 1916		M.O.
AUG 15 1916		M.O.
AUG 26 1916		M.O.

Enlisted on 8th day of March 1916 at Winnipeg Man

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	222nd. Overseas Batt. C.E.F.	291375		8/3/16
Transferred to	No. 1 Overseas C.A.S.C. Training Depot. CASC			JUN 10 1916

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Napier Brks. Whitley.	7/8/1917 9-5-19	V.D.S.	A. H. Saunders Capt. "A" Lt-Col.

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

M. F. B. 313.
400M.—1-16.
H. Q. 1772-39-439.

Surname Lynn Christian Name Donald Ballagh

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.
										Wass. Pos+++ on admission	
										Full course Hg + 606	
CANADIAN HOSPITAL, ETCHINGHILL, LYMINGE.		20	8	17.	16	9	17.	Primary Syphilis.	28	Discharged to Unit as Out Patient. No open Lesions	C.D. Lunn Capt. C.A.M.C.

Army Form B. 103. Regimental Number 29137.5.

Casualty Form—Active Service.

Regiment or Corps .....

Rank Pte Surname Gunn Christian Name Donald Battgate

Religion ..... Age on Enlistment ..... years ..... months

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

Date of promotion to present rank ..... Date of appointment to lance rank .....

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

W.S.B. class "A" or Corps Trade and rate .....

Occupation ..... Signature of Officer

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked			
		Disembarked			
3.2.19	C.W.B.D.	classified "A"		3.2.19	R&R 879
27.2.19	—	To 2nd T Coy		27.2.19	nR 1516
8-3-19	2nd C.D.M.T.Coy	Rated to 2nd C.D.M.T.Coy		1-3-19	B213 P.M.44 d 1919
8-3-19	Do	T.O.S. of 2nd C.D. M.T. Coy		2-3-19	" B4 a 022 d 1919
		Proceeded to England		29 APR 1919	Invalided leave

(*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*) Signaller, Shoeing-Smith, &c.

W 3635—M2733 20,000m 9/17 (35611) C. P. & S., Ltd., Form B./103 E/1807. P.T.O.

Date	From whom received	Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.33, or other official documents.
1/5/19	R" Wing	T.O.S.	Willey	30/4/19	Pte 208
	R" Wing	161 of D.M.F.C. to C.E.F. in Canada.	Willey	18/5/19	

OFFICER i/c RECORDS
R. WING C.C.C.
WITLEY.

S S AQUITANIA Sig. No-77
EMB S, FMFTON 18-5-19
Disemb HLFX 25-5-19

MAY 18 1919 O.S. T. O. S. No. 2 DISTRICT DEPOT, TORONTO 1919 PART II D. 161

MAY 29 1919 S. O. S. (DISCHARGED FROM H. M. S.) No. 2 DIS. DEPOT, PART II D. 161

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

Transferred to No. 1 Overseas C.A.S.C. Training Depot JUN 10 1916

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

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

W.S.B. class "A"

Casualty Form—Active Service.

Unit, Regiment or Corps 8th Reinforcements No 1 CASC to 22nd Overseas Battalion

Regimental No. 291375 Rank Pte Name Gunn, Donald Bathgate

Enlisted (a) 8/3/16 Terms of Service (a) ~~C.E.F.~~ Duration of War + 6 months after C.E.F. Service reckons from (a) 8/3/16

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) Chauffeur CBM

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Embarked	Canada	24.1.17	
		arrived	England	7.2.17	43 12.2.17
9.2.17	O.C. C.A.S.C.	Taken on ~~Strength~~	Shoford	7.2.17	Part 2 do ~~60 9.2.17~~
17/2/17	case.	TRANSFERRED. case to	~~Seaford~~ Seaford	17/2/17	Part II Order. 48 17/2/17
					Chas. Jarvis Lt Col. Major. O.C. Can: A.S.C.
FEB 19 1917	O.C., C.A.S.C.T.D.	Taken on strength of C.A.S.C.T.D.	Shornecliffe	FEB 17 1917	- P II 50
14/5/17	O/C case 20	SOS of C.A.S.C. 20 ow posting to C.A.S.C. R.D.	Shorncliffe	14/5/17	P II Orders 134

(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.
15/5/17	C.A.S.C. R.D.	To 1st from C.A.S.C.D.D. ✓	Shorncliffe	14/5/17	P.II Orders 13/17a
AUG 24 1917	O.C., C.A.S.C.R.D.	Tsfrd. to Casc Duty Depot. ✓	Shorncliffe AUG 24 1917		PART II ORDER No. 102. for O.C., C.A.S.C.R.D.
25 AUG 1917	O.C., C.A.S.C.D.D.	Taken on strength of C,A,S,C,D,D, from C.A.S.C.R.D. ✓	Shorncliffe. 24 AUG 1917		PART II. ORDER No. 103
MAR 7 1918	O.C., C.A.S.C. R. & DD.	On draft overseas to C,A,S,C, ✓	Shorncliffe, MAR 7 1918		PART II. ORDER No. 56 for O.C., C.A.S.C. R. & DD.
7.3.18	OC. 66BD	Having arrived from Eng. as Reinforcement is taken on the strength of Casc Pool.	Field	7.3.18	NR559 Pt II 029 d/ 12.3.18
8.3.18	"	To 1st Base M.T. Depot	"	8.3.18	NR. 1040
9.3.18	OC. 1st Base M.T. Dep.	Arrived	"	9.3.18	NR231
17.3.18	"	To Cdn Corps R. Camp	"	16.3.18	NR243
20.3.18	OC. 66RC	Arrived	66RC	20.3.18	NR70
23.3.18	"	To 6dn Corps S. Col.	Field.	23.3.18	NR98 KR868
11.4.18	AAG.	Attached as in W.E. to 2nd. Tramways Coy. 66.	"	24.3.18	Letter KN 18/8002 KR868. Pt II 045 d/ 18.4.18
29-1-19	66 B.D.	Ceases to be attd as in W.E. to 2nd Tramway to 66 on Arrival at 66BD 29-1-19			NR2010 Pt 088 d/ 1919

CERTIFIED CORRECT. 14 MAR 1918 CAN. REGT. LONDON.

R—122
8,401—50,000—21-10-16.

E.T.

Rank | Name GUNN, Donald Bathgate. | Reg'l No. 291375.

Unit 8th Rein Dft.No.1. C.A.S.C. T.D. | If in perm. Corps, What Unit? | Married or Single Single.

Place and Date of Enlistment Winnipeg. March. 8th.1916. | Place of Birth St.James. Manitoba. Canada

Name and Address, Next-of-Kin Mrs Mary Gunn. King Edward P.O. St.James. Manitoba. Canada. | Relationship Mother,

Assigned Pay Monthly $ | Payable to | Relationship

Separation Allowance $ | Payable to | Relationship

Discharge, Date and Place | Reason | Character

N/E. R.B. 6463
File O.R CANADA
Category

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.
		Arrived in England	S.S. Canada	6.2.17	
12-2-17	C.A.S.C.	T.O.S. on Arrival	Seaford	7.2.17	Pte 11.D.O.43
17.2.17	"	S.O.S. to C.A.S.C.T.D.	"	17.2.17	" " 48
19.2.17	303 (etc?)	TOS from CASC Seaford 1 cl/lc		17.2.17	—.— 50
14-5-17	"	SOS. to C.A.S.C. Res Pk	"	14-5-17	—"— 134 & PtII DO 1 C.A.S.C. Res Pk
24.8.17	C.H. Eng.	Adm. Can. Mil. Hosp. Etchinghill, Lyminge	Pte	21.8.17	C.H.131 "VDS"
25.8.17	C.A.S.C. D.D	T.O.S. from C.A.S.C.R.D.	S'Cliffe	24.8.17	Pte II 103. {C.A.S.C.R.D Pte II 102.d.24.8.17}
21.9.17	C.H. CASC	Disch'd. Can. Mil. Hosp. Etchinghill, Lyminge		18.9.17	Pte C.H. C.17.
7.3.18	O.C. S.C. R.D.	P.O.S. to overseas	S'Cliffe	7.3.18	Pte DO 56 & CASC Pool Pte DO 29d/12.3.18
18.4.18.	Pool.	attd in W.E. to 2 Tran. Coy. C.E.	Field	Pte 24.3.18	DO 45.

Gunn D.B. 291375

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.
5.2.19	Casebook	Can att 2 Tramways.	Tidi	29.1.19	DO 23
16.3.19	"	SOS to 2 C.R. MT Coy	Rouen	1.3.19	DO 44
18-3-19	2nd C.M.R.	T.O.S. from C.A.S. pool	"	2-3-19	DO 22
3-5-19	"	Proceeded to England	Hare	28.3-19	DO 33
		To Canada		18-5-19	77-9-90
1-5-19	R Wing	T.O.S. pending R.T.C.	Witley	" 30 H 19	S.O. 18
23.5.19	"	SOS of the OMFC to the CEF in Canada	"	18.5.19	DO 37.

MARRIED OR SINGLE Single.

PLACE OF BIRTH St. James, Man.

NAME AND ADDRESS OF NEXT OF KIN Mary Comm.
St. James. Man. (King Edward PO)

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

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
1917 Balance from Canada.																							
Feb. 28	1	10	30	80											30 80								
Mar 31	"		34	10											34 10 64 90			4155	15/3	Case Byl			
Apl 30	"		33	00											33 00			127	15/4				
May 31	"		34	10											34 10								
June 30	"		33	00											33 00								
July 31	"		34	10											34 10								
Aug 31	"		34	10											34 10			26	14.6				
Sept 30	"		33	00											33 00			300	15/6				

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR 3	DR 4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
							524	303			
							407	15.5			
							272				
							211	27/4			

OMOTIONS, &c.

Effective Date	Authority

HOSPITAL, &c.

Name of Hospital

Reg'l No. 291375 Rank Ste Name Gunn. Donald Bathgate

If in Permt. Corps What Unit — Unit B.A.S.B.D.D. Transferred to Case. R.W. Date 1-8-17 Authority D.O. 134 a 14.5.17

Permanent Force Allowances — Transferred to — Date — Authority

Place of Attestation Winnipeg Man. — Transferred to — Date — Authority

Date of Attestation 8-3-16 — Transferred to — Date — Authority

Assigned Pay Monthly $15.00 Date Effective 1-2-17

Payable to Mary Gunn. Queens St. 8th. St. James. Winnipeg Man. Relationship

Assigned Pay Monthly $ Date Effective

Payable to Relationship

Stop-Payment Form (Assigned Pay) Rendered (Date) Effective Reason

Discharge Date and Place Reason and Authority

Account Transferred to Non-Effective Branch (Date)

Account Transferred to Officers' Pay Branch (Date)

Acquittance Rolls 2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
														Nil			
										15		15		1580			
4455	15/3		Case. Bylon				486										
9487	28/2	261	13/2			973	487	487		15	416	43 49 58 49		641			Q4005. 484. 19/2/17
127	15/4						487			15		1947		1954			
						487				15		1947		3377			
										15		1500		5177			
						973				15		3473		6114			
						973											
28	14.6					487	486			15		3446		6078			
						974											
300	15/6					487	973			15		3934		5444			

BALANCE DEFERRED PAY — SEP. ALLCE. ENG.

291375 Pte Gunn A. B.

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
MONTH	PARTICULARS				CR. 2				PARTICULARS					DR. 1	DR. 2	DR 3	DR 4	BALANCE									
OCT 1917	Bal 75 ~~54 04~~																							54 04			
									Can AP. V.S. 29 days @ 60 28-5-17 to 17-9-17 Do 28 2-10-17						17 40											
Oct 31	PrAP		34 10																					56 14			
									A.R. 718 30.9.17 DA.					487										51 27			
			34 10											487	17 40	15								64 10			
Nov.	P.P.		33						Clear. a/c Pay							15								118 37			
																								76 24			
									A.R. 834 Etchingfield 28.8.17					1 22													
									633 Case. 21.9.17					4 86													
									954 . 28.10.17					4 84													
Dec.	P.P.		34 10						820 . 15.10.17					19 47													
									1156 . 30.11.17					9 43													
									1025 . 13.11.17					4 84													
									D.A.R. 893 Etchingfield 13.9.17					1 22													
														46 24													
			67 10						Clear. a/c P.							15		42 13									
1918 Jan	P.P.		34 10						Le. A.P.							30		34 10									
																15		76 23									
																		49 07									
									A.R. 1342 Case. 28.12.17					29 20													
									1214 . 13.12.17					4 87													
			34 10											34 07		15		27 16	nil								
Feb	"		30 80						A.R. 1542, 25/1, Case 7					9 73													
														9 73													
									Dw. 1402. 13/1 " 25.					4 87.													
									CAP					14 60													
			30 80											14 60		15		28 36									
Mar.	"		34 10						A.R. 1840. 12/2. Case (4)					4 87.		15		34 10									
									D.H.005. B386. 20/2. (7)					10				62 43									
														4 97				37 73									
									CAP.							15.											
									A.R. 2072. 24/2. Case (15)					9 73													
														14 70													
									" 3792. 13/3 3 Tch. (24)					3 57.													
									D.A.R. 8708. 9/3 GBP (31)					4 46.											24 78	3		
														22 73													
			34 10											22 73		15											

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

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	~~ENGLAND or~~ * CANADA.	SEPARATION ALLOWANCE.
EFFECTIVE DATE:-	1.2.17	EFFECTIVE DATE:-
AMOUNT:-	15 00	AMOUNT:-

NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME WORD "SAME" ONLY TO BE WRITTEN

Mary Gunn.
Queens St. S.
St. James, Winnipeg
Man. Can.
Stopped Effect 1/6/19

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, BY INSERTION OF DATE CHARGED

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT P
~~4/4~~	~~376~~	20 Fus	~~2 14~~			
~~27/4~~	~~4166~~	20	~~2 14~~			
~~8/5~~	~~2130~~	R. Wing 19	~~13 80~~			Ledbal
			50 78			LPC ✓

PARTICULARS OF RENDERING NON-EFFECTIVE 2 Jan 1/14

1918 MONTH	PARTICULARS	CR. 1	CR. 2.	
Mar 31				
Apl.				oap.
	PP.	33		
				AR 136
				Dr. 225
		33		
May	PP.	34 10		
				oap.
				AR 233.
				✓ 316
		34 10		
June	✓	33		
				bal
				5/531
				8/431
		33		
July	✓	34 10		
				bal
				1/636
				4 DTU.
				4 816
		34 10		
Aug	✓	34 10		
				bal
				1/955
				8/1062.
		34 10		
		✓		

COMPILED BY H. Hoop
CHECKED BY Duncan

~~AND OR~~ DA.

SEPARATION ALLOWANCE.

ENGLAND OR CANADA.

EFFECTIVE DATE:-

AMOUNT:-

NAME:- GUNN Donald B.

NUMBER:- 291375.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.	AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
beg				
1/6/19	-			

UNIT AND TRANSFERS

ORIGINAL UNIT:- case T.D.

DATE ACCOUNT FIRST OPENED:- 1.2.17.

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
	1-8-19		Can Sect

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

	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
~~Jn~~	~~3 49~~				
	~~3 47~~				
	~~$3 30~~			Lea Bal	52 89
	~~$0 79~~			LPC ✓	2 11

DAILY RATES OF PAY AND ALLOWANCES

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

N-EFFECTIVE S. Can 1 5/4 PR. S 8673 B/Sh'l. 1 3/8 B/Sh't- and 10

	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
								24 73	✓	
			bal.				15			
	33							42 73		
			AR 136. 1/4 case 5.	3 57				39 16		
			Dr. 225. 3/4 ✓ 18	4 46				34 70		
	33			8 03			15			
	34 10									
			bal.				15	53 80		
			AR 233. 2/5. case 1.	4 46				49 34		
			✓ 316 2/5 ✓ 6	3 57				45 77		
	34 10			8 03			15			
	33									
			bal.				15	63 77		
			5/531 ✓ Transmyo bo bbl ✓ 18 6	2 68				61 09		
			8/431 ✓ ✓ 5. 6	5 35				55 74		
	33			8 03			15			
	34 10									
			bal				15	74 84		
			1/636 ✓ 1-7	3 57						
			4/Dm. 1344, bal. Singp 11-12	14 60				56 67		
			4/816 ✓ 16. 1 66, 16.7	4 46				52 21		
	34 10			22 63 / 22 63			15			
	34 10									
			bal				15	71 31		
			4/955 - L. Eng - 2-8	3 57						
			8/1062 - ✓ 18. 8	3 57				64 17		
	34 10 ✓			7 14 ✓			15			

NUMBER 291-375 RANK Pte NAME GUNN - D. B

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2
Sept						
	P.P	33				
				bal		
				1/49 - 2 2 ramways & Co 4-9	3 5 4	
				6/89 ✓ 18-4	3 5 7	
		33			7 11 4	
Oct	✓	34 10				
				bal		
				3/43509 London Amor 3547 7-10	~~13 6 83~~	
				8/127 2 Co 7-10	3 7 3	
				29/193 ✓ 19-10	3 7 3	
		34 10			7 4 6	
Nov	✓	33				
				bal		
				1774 ✓ 2011	16 7 9 ✓	
Dec	✓	34 10		bal		
				1885 ✓ 11-12	3 7 3	
				20/293 ✓ 11 12	9 3 3	
					29 1 85	
Jan	✓	34 10		CAP		
		101 20			29 85	
Feb	✓	3080		CAP		
				15/367 2 C C 5/4/19	3 7 3 ✓	
				18/412 2 Tramway 10/4/19	9 3 3 ✓	
				26/2367 2 — 16/4/19	18 6 6 ✓	
				32/2721 C D Paris 19/4/19	18 6 6 ✓	
				70/3856 C.A.S.C. 6 2/19	4 6 6	
				83/6619 ✓ 12 2/19	4 6 6	
				86/2061 Paris 14 1/19	27 9 9	
				86/1702 ✓ 12 1/19	27 9 9	
				166/8420 G.B.D. 24 2/19	4 6 6	
Mch	✓	34 10		CAP		
				140/4111 2 M.T.C. 3 3/19	3 6 5	
				160/4560 ✓ 18 3/19	3 6 5	
		64 90			12 7 6 4	
Apl	—	33		CAP		
				1/52 ✓ 2 4/19	3 4 9	
May		34 10		C.A.C.		
				2/346 16 4/19	3 4 9	
				5/4166 27 4/19	3 6 5	
				6/2130 10 5/19	43 80	
		67 10			54 43	
				18 5/19 SOS hist 77		

NN - D.B

PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
					64 17	✓	
				15	82 17		
wayb & Co 4-9	3 54						
18-9	3 57				75 03		
	7 11			15			
				15			
London [error 35427] 7-10	~~26 63~~				94 13		
& Co 7-10	3 73						
✓ 19-10	3 73				86 67		
	7 46			15			
				15	104 67		
✓ 2011	16 79 ✓				87 88		
				15	106 98		
✓ 11-12	3 73				103 25		
✓ 21 12	9 33				93 92		
	29 85			15	112 02		
				15			
				15	187 82	*	
2 C.S. 5/4/19.	3 73 ✓				184 09		
2 Framby 10/4/19	9 33 ✓				94 76		
2 — 4 16/1/19	8 66 ✓				76 10		
C.D. Paris 19/4/19	18 66 ✓				57 44		
C.A.S.C. 6 2/19	4 66				52 78		
✓ 12 2/19	4 66				48 12		
Paris 4 1/19	27 99				20 13		
✓ 12 1/19	27 99				7 86		
G.B.D. 24 2/19	4 66				12 52		
				15	6 58		
2 M.T.C. 3 3/19	3 65				2 93		
✓ 18 3/19	3 65				~~12~~		
	127 64			30	19 28	*	
				15	37 28		
✓ 2 4/19	3 49				33 79		
				15	52 89		
16 4/19	3 49				49 40		
27 4/19	3 65				45 75		
10 5/19	43 80				1 95		
	~~54 43~~			30			
SOS List 77							

14-7-18

O.G. 13
S.G. 27
D.C.I.

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

WAR SERVICE BADGE
CERTIFICATE No 202024

1. No. 291375
2. Rank. Pte
3. Name. Gunn. Donald Bathgate.
4. Unit. 2nd M. G. Coy.
5. Date of Discharge MAY 29 1919 Place Toronto, Ont.
6. Reason for Discharge DEMOBILIZATION
7. Authority. No. 2, D.D., Part II, D.O.No. 161
8. Proposed Residence after Discharge Queen St. & St. James Winnipeg, Manit.

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.?

D B Gunn
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

Date

TORONTO
MAY 29 1919
No. 2 DISTRICT DEPOT

Signature
(O. C. Discharging Unit.)

For
O.C. No. 2 District Depot

M.F.B. 218a—300M.-11-18—1772-39-113.

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

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 and Clothing Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851). + Dup.
13. Pay Book (A.B.64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group B

Checked by No. 10

Date 17-3-19

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

WAR SERVICE BADGE
CLASS "A" No. 202024

THIS IS TO CERTIFY that No. 291375 (Rank) Pte

Name (in full) GUNN Donald Bathgate enlisted in

the 222nd Batt'n.

CANADIAN EXPEDITIONARY FORCE at Winnipeg on the 8th

day of March 1916

HE served in France with 2nd Div. M.T. Co

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 23 yrs 3 months
Height 5' 8"
Complexion Ruddy
Eyes Grey
Hair Dk Brown

D B Gunn
Signature of Soldier.

Marks or Scars Scar Rt ear
" " wrist.

Date of Discharge

TORONTO
MAY 29 1919
No. 2 DISTRICT DEPOT

A. E. Rayner
Issuing Officer.
For
O.C. No. 2 ~~District~~ Depot.
Rank

Date MAY 29 1919 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.

C.A.D.C. 9069

MT

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) GUNN D.B

REGIMENT 2nd MTC RANK Pte No. 291375

Date of Examination in England 2/5/19 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

PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS 17. 32.
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 yes.
- (b) In England
- (c) In France

Signature of Dental Officer [illegible] Capt

Army Form I. 1238.

SYPHILIS CASE-SHEET.

Regtl. No. 291375 Rank and Name Pte Gunn D.P. Corps C.A.S.C.R.D.

Placed on Syphilis Register at CANADIAN HOSPITAL, ETCHINGHILL, LYMINGE. on 20-8-17 No. in Register

Disease contracted at Folkstone. Primary sore appeared on (date) 11-7-17

CONDITION WHEN PLACED ON REGISTER.

Primary sore—character and site Papulo erosive sore on glans penis

Lymphatic glands All glands shotty.

Skin (nature and distribution of rash Acne over shoulders.

Mucous membranes Patches on pillars. Tonsils & Buccal mucosa

Other symptoms Negative

Examination of exudate from sore—Spirochaeta Pallida (present or absent)

Examination of blood serum—Method employed (original or modification) Original

Wassermann reaction—Result (positive or negative) +++

Station CANADIAN HOSPITAL, ETCHINGHILL, LYMINGE Date 20-8-17 Signature of M.O. J Hookhart Capt

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Struck off Syphilis Register at on

Cause of being struck off Register { (a) Recovered / (b) Transferred to Army Reserve / (c) Discharged from Army }

Station Date Signature of M.O.

(2187) Wt. W6391—2665. 250000. 7/15. Sir J. C. & S.

N.B.—On completion of a course of treatment a red line to be drawn across the page, and the date when the next blood test is due to be entered in red ink below the line, *e.g.*, "Blood test due 15.5.14."
The date and result of the blood test to be entered; and if negative, the date on which the next blood test is due to be also entered.

Station	Date	Symptoms and progress (Date of admission to hospital, and date of discharge from hospital, to be entered in red ink.)	Weight clothed, without boots—lbs.	Urine: Normal (N.) Albumen (Alb.)	Wassermann Reaction: Method {Original (O.) / Modification (M.)}	Wassermann Reaction: Result {Positive (+) / Negative (—)}	Treatment: Arsenical: Intravenous Injection. Dose in grammes: ~~Arsenobillon~~ Salvarsan	Treatment: Arsenical: Intravenous Injection. Dose in grammes: ~~Novarsenobillon~~ Neo-Salvarsan	Treatment: Mercurial: Intramuscular injection. Dose of Metallic Mercury in grains	Treatment: Mercurial: Inunctions or Oral (Preparation and dose)	Treatment: Other Methods	Signature of M.O. (Each M.O. will sign his name in full on the first occasion; subsequent entries may be initialled)
CANADIAN HOSPITAL, ETCHINGHILL, LYMINGE.	20-8-17.	Admitted to Hospital. Full Course Treatment (W.O.)										
	21-8-17.			N			·3					J H Rockhart Capt
	22-8-17.								T.			
	25-8-17.			N			·3					
	29-8-17.			N			·3		T.			
	5-9-17.								T.			
	12-9-17.			N			·4		T.			
	14-9-17	DISCHARGED HOSPITAL.		~~N~~			~~·5~~		~~T.~~			RA
	19-9-17			N.			·5	~~·75~~	T.			RA
	3-10-17			N				·75	T.			
	10-10-17			N.				·75	T.			
	22-10-17.	Wassermann Positive Recurrence Course Treatment			O	+						
	31-10-17			N				·6	T.			
	7-11-17			N				·6	T.			
	14-11-17			N				·7	T.			
	21-11-17			N				·8	T.			

Station	Date	Symptoms and progress (Date of admission to hospital, and date of discharge from hospital, to be entered in red ink.)	Weight clothed, without boots—lbs.	Urine	Wasser-mann Reaction		Treatment					Signature of M.O. (Each M.O. will sign his name in full on the first occasion; subsequent entries may be initialled)
							Arsenical		Mercurial		Other Methods	
							Intravenous Injection. Dose in grammes					
				Normal (N.) Albumen (Alb.)	Method {Original (O.) Modification (M.)	Result {Positive (+) Negative (—)	Salvarsan	Neo-Salvarsan	Intramuscular injection. Dose of Metallic Mercury in grains	Inunctions or Oral (Preparation and dose)		

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

R

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Witley Camp DATE 9.5.19

1. 1 (a) Unit 2nd Div. M.T. Coy (b) Regimental No. 291375 (c) Rank Pte.

(d) Surname GUNN, (e) Christian name Donald Bathgate

(f) Home address Queen St. S. St. James, Winnipeg, Man.

(g) Next of Kin Mary Gunn (h) Relationship Mother

(i) Address of Next of Kin King Edward P.O., St. James, Man. Can.

2. Age last birthday 23 Date of birth 3.2.1896

3. Enlistment, or Appointment (if an Officer) (a) Place Winnipeg, Man. (b) Date 8-3-16

4. Personal description:

(a) Height 5' 8" (b) Weight 183 (stripped) (c) Complexion Dark

(d) Colour of hair Dark (e) Colour of eyes Grey (f) Identification marks, Scars, etc. Scar on Right ear — anchor on right wrist

5. Former trade or occupation Fireman & Chauffeur

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	3	52.

	Periods	
	From	To
Canada	8.3.16	6-2-17
England	6.2.17	7-3-18
France or other theatres of War	7-3-18	29-4-19

7. Original disease, or injury V.D.S.

(a) Date of origin Aug. 1917. (b) Place of origin England

(c) Cause Infection

M. F. B. 227.

400M.—11-18.
1772-20-117.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

No disability

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Wasserman Oct. May 7. 1919
Positive ++
D- Malone Cap Calle
no lesions - Infections -
no subjective findings

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above?
(Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System No — Cardio-Vascular System (If pulse rate is abnormal, B. P. will be taken.) No — Genito-Urinary System (Albumen and Sugar will be excluded.) No

Special Senses No — Respiratory System No — Integumentary System No

Disturbances of Mentality No — Digestive System No — Muscular System No

Osseous and Joint Systems No — Any other general condition No

10. (a) History (of the condition referred to in Section 9 (a).)

developed sore on penis in Aug. 1917. Took 8 Arsenical and 8 mercureal injections - Had two negative wassermans following treatment

10.—(*b*) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid has suffered either prior to or since enlistment, and not included in Section 10 (*a*).)

Nil

(*c*) (Here give a description of wounds, scars and deformities.

Nil

11.—(*a*) Did the disabling condition have its origin before enlistment? No

(*b*) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

N.A.

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? (a) Yes (b) No

The regimental documents will be referred to.
(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 6 months

14. Treatment (Case reports, general or special, should be secured and attached where possible.)

Usual Hospital treatment

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?
(If the answer is "yes" state nature of treatment required and probable duration)

It is suggested that on arrival in Canada patient be treated with under P.C. 47 under Regs 20-1-19.

16. Can the former trade or occupation be resumed? yes
(If not, briefly state why)

17. Recommendations

None

R B Harris Capt
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "~~not satisfied~~" struck out).

I, the undersigned Donald Bathgate Gunn have heard the description of my disability and present condition read, and am satisfied (~~or not satisfied~~) with it. (If dissatisfied, statement should follow.)

I complain in addition of

Pte D B Gunn Rank.
Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticised.

Concur.

19. Is the invalid fit for

(*a*) General service,	(Category A)	(Yes ~~or No.~~) Yes 'A'
(*b*) Service abroad, not general service,	" B)	~~(Yes or No.)~~
(*c*) Home service (Canada only),	" C)	~~(Yes or No.)~~
(*d*) Temporarily unfit.	" D)	~~(Yes or No.)~~
(*e*) Unfit for service in Categories A, B and C	" E)	~~(Yes or No.)~~

20. It is certified that the invalid

(*a*) Does require treatment. (Give the nature of the condition and of the treatment required and its probable duration.) It is suggested that he be dealt with on arrival in Canada in accordance with instructions under P.C. 47 of 20-1-19.

(*b*) Does not require treatment.
(*c*) ~~Should pass under his own control.~~
(*d*) ~~Should not pass under his own control.~~
(Strike out condition not applicable.)

21. It is recommended that the invalid ~~be discharged~~. (When not for discharge add special recommendation.)

R.T.C. under Auth: A.G. Tel. 9083 of 11-11-18.

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

C.E. Ryan Capt Can — *President.*

PLACE Witley — Geo Hooper Capt — Members

DATE 9-5-19

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned.....understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....

Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

.....*President*

PLACE..... — Members

DATE.....

APPROVED BY

for *Assistant Director of Medical Services.*

DATE 9/9/19

APPROVED BY

Director-General of Medical Services.

DATE.....

"AQUITANIA" 25.5.19

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

AUDITOR | PAYMASTER

M. OR S. | REGT. No. 291375 | RANK Pte | NAME (IN FULL) GUNN, D.B.

G2748 DISPERSAL "I"

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. Cash | IF IN P.F. WHAT UNIT? | (BLOCK LETTERS SURNAME FIRST)

PLACE OF ATTESTATION | TRANSFERRED TO Bank of Montreal, Winnipeg Man | DATE | AUTHORITY

DATE OF ATTESTATION 8/3/16 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ 15.00 | DATE EFFECTIVE 31/5/19 | Closed by Ottawa

PAYABLE TO Mrs Mary Gunn | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Queen St South, St James Man

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE Toronto | DATE 29.5.19 | REASON Demob. | AUTHORITY D.O.161 | IF ENTITLED TO POST DISCHARGE PAY yes

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.		$	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.		$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT								2	11	2	11																										2	11	T. O. S. 1.6.19 D.O.161 SUBS. 10. D. O.
31/5/19																																						Cr. bala. to 1/6
2.6.19	2	1/10	2	20																																		1.6.19 to 2.6.19
					35	00																																	Clothing
					70	00																						1500											Kit & Bty
																		48	5 00																			Pay
								107	20									84	44 chq															109	31				Boot & trades
				W.S.G.																												W.S.C.						
																													29/5/19	70	00								W & S as above
																															44	0						4 days @ 10 paid
				15	00																												Due Estate						a/c Estate Expenses
183 days				43	0			43	5																									74	40	36	0	60	
														AR 76	June 30	689937										80	60							155	-	280	-		1st W. S. G. Paid by #2
														AR 93	Jul 22	947856										70	-							225	-	210	-		
														AR 121	Aug 25	1377673										70	-							295	-	140	-		
														AR 170	Oct 27	1798344										70	-							365	-	70	-		
														AR 197	Nov 24	1918065										70	-							435	-	0			
				435	-			435	00																	360	60		74	40				435	-	WRT			W. S. C. PAID IN FULL
Subsl. W.P. on M. Discharged 1.1.19 to 29.5.19				74	5-0			74	5-0																					74	5-0			74	5-0				Subsl. W.P. & M.P. Drawn 1.6.19 to 29.5.19 with V.C. 279 8/249 149 for £5-0-0 & No. 628813 dy 2.6.19 for £74.50

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

DISPERSAL "T"

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

~~9572~~ 8 Feb. 1/17

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15.			

PARTICULARS OF SEPARATION ALLOWANCE

No. 291375

Rank Pte. Promoted Reverted Discharge

Soldier's Name D. B. Gunn

Battalion C. A. D. C. T. D. #1-8 Draft

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Mary Gunn

Address Queens St. South St. James Man.

Change of Address

1

2

3

4

07603-0-15

Date		Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917.						
	Dec 31			165	165	
1918	Jany	H 68807		15	15	B
	Feby	H 91745		15	15	
	March	H 95400		15	15	
	Apr.	H 14531		15	15	H
	May	S 22192		15	15	H
	June	O 24516		15	15	H
	July	K 33197		15	15	H
	Aug	O 40672.		15	15	H
O.K. N.P.U.	Sept.	V 42122		15	15	H
	Oct	W 52990		15	15	H
	Nov	V 61995		15	15	H
	Dec	X. 66079		15	15	H
	Jan	R. 75525		15	15	B.
	Feb	Y. 81545.		15	15.	H
	Mar	M. 83630		15	15	C
	Apr	S 1850		15	15	H
	May	P 7891		15	15	
				420	420	

A/c Closed 31-5-19

Ret'd per ..... Aquitania

Date 25/5/19 M.F.W.187 M.D. 2

Clerk 1/6/19 Williams Lby

M R O Ltr 115666 dtd 7 May

AUDITED

M. F. W. 128
400m.—6-17—1772-39-1141
L. L. 22930—M. & D. 1493.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No. 42

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.

Supplementary Ledgersheet

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

AUDITOR | PAYMASTER

REGT. No. 29/378 RANK Pte NAME (IN FULL) Gunn D B. (BLOCK LETTERS SURNAME FIRST)

M. OR S.

NEXT OF KIN

ADDRESS

IS SEPARATION ALLOWANCE PAID?

TO WHOM PAID

ADDRESS

RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY
DATE EFFECTIVE			
RELATIONSHIP			

ORIGINAL UNIT C.E.F. — IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION — 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 — DATE — REASON — AUTHORITY — IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	PAY AND F.A. RATE	PAY AND F.A. AMOUNT $	PAY AND F.A. AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	C.	TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	ACQUITTANCE ROLLS COL. NO. 1 DATE	ACQUITTANCE ROLLS COL. NO. 2 NO.	ACQUITTANCE ROLLS COL. NO. 2 DATE	ACQUITTANCE ROLLS COL. NO. 3 NO.	ACQUITTANCE ROLLS COL. NO. 3 DATE	CASH PAYMENTS COL. NO. 1 $	CASH PAYMENTS COL. NO. 1 C.	CASH PAYMENTS COL. NO. 2 $	CASH PAYMENTS COL. NO. 2 C.	CASH PAYMENTS COL. NO. 3 $	CASH PAYMENTS COL. NO. 3 C.	ASSIGNED PAY $	ASSIGNED PAY C.	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C.	OTHER CHARGES $	OTHER CHARGES C.	$	C.	TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT W.P. 1-1-19																																				Diffrence between 2nd & 1st Class W.P. 149 days @ 50c Pc 279 M.T. Drivers Cheque No. B 7/31666 d/20/8/20 £4.2.6
29-5-19	149	50			74	50		74	50	1										74	50	✓								74	50	✓				

200M-3-19.—L. L. 58786-M. & D. 9985.
M. F. W. 2596.
1773-20-1298.