Original

NOVA SCOTIA FORESTRY DEPOT.

ATTESTATION PAPER.

No. 2330445

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Hanes
1a. What are your Christian names?	William Raymond
1b. What is your present address?	Trenton N.S.
2. In what Town, Township or Parish, and in what Country were you born?	South Maitland N.S.
3. What is the name of your next-of kin?	Mrs Robert Royles
4. What is the address of your next-of-kin?	Trenton Pictou Co N.S.
4a. What is the relationship of your next-of-kin?	Sister
5. What is the date of your birth?	1899
6. What is your Trade or Calling?	Labourer
7. Are you married?	No
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9. Do you now belong to the Active Militia?	No
10. Have you ever served in any Military Force? If so, state particulars of former Service.	No
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

13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit?

14. If so, what was the nature of the disability?

15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?

16. If so, what was the reason?

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, William R. Hanes, 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.

William R Hanes (Signature of Recruit)

Date July 9 1917 J.A. Arsenault (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, William Raymond Hanes, 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.

William R Hanes (Signature of Recruit)

Date July 9 1917 J.A. Arsenault (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 Aldershot this 10 day of July 1917.

J.R. Kirpatrick Lieut. (Signature of Justice)

M. F. W. 23
750M—3-16
H. Q. 1773-99-941

N.B.—Attention is drawn to the fact that any person making a false answer to any of the above questions is liable to a penalty of six months' imprisonment.

NOVA SCOTIA FORESTRY DEPOT.

Description of William Raymond Hanes on Enlistment.

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

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).

Nil

Height	5 ft. 5 1/2 ins.	
Chest measurement — Girth when fully expanded	32 1/2 ins.	
Chest measurement — Range of expansion	3 ins.	
Complexion	Dark	
Eyes	Dark	
Hair	Dark	
Religious denominations — Church of England	C of E	
Presbyterian		
Methodist		
Baptist or Congregationalist		
Roman Catholic		
Jewish		
Other denominations (Denomination to be stated.)		

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 10-7-17 191 . E. A. Harris Capt.

Place Aldershot

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:—

W. E. Killam Capt. A.M.C.

J. A. Mosher Capt. A.M.C.

CERTIFICATE OF OFFICER COMMANDING UNIT.

William Raymond Hanes 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.

H. H. Chipman (Signature of Officer)

Date July 10 1917.

NOVA SCOTIA FORESTRY DEPOT.

L DOCUMENTS

NAME HAINES WILL[illegible] 2330443 UNIT 11 NSFC H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	DATE FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
2	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)					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)				C6143	
2	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)					
1	MEDICAL EXAMINATION (M.F.W. 129)					Demobilization
1	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
2	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	MFW 192			4/5/44		
1	DMS 1375					
1	CADC 3009a					
1	M. F. W. 67					
1	R122					

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

A011

*Name Hanes, William Raymond Rank Pte Regtl. No. 2330446

Original unit C.H.C. Present unit D.D.6. M. or S. Age 19 Religion C. of E. Fyle Depot Ref. H.Q.

Port, ship, and date of arrival Halifax, N.S. — Belgic — Ard. 2-3-19

Next of kin Mrs. Robert Royles (Sister)

Address on leave St. Maitland, N.S.

Address on discharge

Transportation issued Yes No Date Character on discharge

Previous occupation Labourer Date and place of enlistment Aldershot 10-7-17

Diagnosis Date of Medical Boards

Date.	Remarks	Pt. 2 Order No.
21/2/19	S.O.S. D.D.6. Posted to Cas. Coy. 2/3/19	D.D. 63
21/3/19	DISCHARGED at Halifax, N. S	78

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

(over)

Date.	Remarks.	Pt. 2 Order No.

M.F.W. 192
150M—6-18.
1772-39-1243.

EK.

Number 2330445. Rank Pte.

Surname HANES.

Christian Name William Raymond.

Units 6.F.C. Theatre of War France.

Date of Service 25-10-17

Remarks

Latest Address South Maitland
Hants Co.
N.S.

Roll No. B
Page 18032.

200m.-2-21.M.

DESP OCT 24 1922
REGN NO. 45555

CARD NO. 7

SURNAME. Hanes

CHRISTIAN NAMES William, R.

REGL. No. 2330445 RANK Pte

UNIT Forestry Coy Draft (M.D. 6)

FORMER CORPS Mil

S.O.S. Lhs 21-3-19
Demob ~~FOLL~~ #6.MD.10
S.O. 78 of 19-3-19

NEXT OF KIN.

NAMES IN FULL Royel, Mrs. Robert

RELATIONSHIP TO SOLDIER Sister

ADDRESS Trenton, Pictou Co., N.S.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada South Maitland N.S. DATE 1899

PLACE OF ATTESTATION Aldershot, N.S. DATE July 10th 1917

R/C 1-3-19 276/85-6 Pte

L. L. 10437. M. & D. 7253.

M. F. W. 22. 100M.—11-16. H. Q. 1772-39-339.

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING Labourer RELIGION Church of England

DESCRIPTION.

APPARENT AGE 18 YEARS MONTHS

HEIGHT 5 FEET 5½ INCHES

CHEST MEASUREMENT 30 INCHES EXPANSION 2½ INCHES

COMPLEXION Dark EYES Dark HAIR Dark

DISTINGUISHING MARKS Nil.

MEDICAL EXAMINATION. PLACE Aldershot, N.S. DATE July 10th 1917

Present Address. Trenton, Pictou Co., N.S.

No 233044 St Rank Pte Name Hanes Wm. R.

T. O. S. 9-7-17 Unit Nova Scotia Rif Const. & Forestry Depot
D016-10-7-17.

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917 July 9	1917 July 31	[illegible]	appd. 2 Cpl.	D022-18-7-17
			Proceeded O/S. 31-8-17	D038-5-9-17.

DEPARTMENT OF VETERANS AFFAIRS

WAR VETERANS ALLOWANCE DISTRICT AUTHORITY

Address.....

.....

MARK YOUR REPLY:

For attention of:

Director,
War Service Records,
Department of Veterans Affairs,
Ottawa, Ontario.

Re: HANES William Raymond Service No. 2330445
(SURNAME) (CHRISTIAN NAMES)

Veteran is stated to have served during W WI
(STATE WAR OR WARS)

in the following Units C.F.C.

To enable this WAR VETERANS ALLOWANCE DISTRICT AUTHORITY to determine the eligibility of the above-named, will you kindly furnish the following particulars concerning his services:

CANADA CENTRE
AUG 18 1961
OTTAWA, ONT., CANADA

1. **THEATRES OF SERVICE.**

(1) South African War
Date and port of disembarkation.....

(2) World War I — (If Canada only, state if with territorial limitations).
CANADA - UK - FRANCE

IF CANADA AND U.K. ONLY
- Date(s) disembarked in U.K.....
- Date(s) S.O.S. in U.K. for Canada.....
- Period(s) of desertion in U.K.....

(3) World War II — (If Canada only, state if with territorial limitations).

Date of embarkation.....

(4) Korean War

Date of embarkation.....

2. Date and place of all enlistments. 9 July 1917 - Aldershot, N.S.
3. Date of all discharges and reason. 21 Mar. 1919 - Demob.
4. Date and place of birth as per attestation paper. - - 1899 - South Maitland, N.S.
5. Marital status; if married, name in full of wife. Single
6. Any other military service. Nil
7. Decorations, if any. Nil

Director of War Service Records

WVA 18 Rev. 11-57

M. D. 6.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 2330443 (Rank) Pte

Name (in full) Hanes W.R. enlisted in

the Nova Scotia Forestry Depot

CANADIAN EXPEDITIONARY FORCE at Aldershot NS on the 9th

day of July 1917

HE served in 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 ~~Date~~ 19 yrs

Height 5 ft. 6 in.

Complexion Dark

Eyes Gray

Hair Black

Marks or Scars

Nil.

W R Hanes
Signature of Soldier

Date of Discharge

March 21, 1919

for R L Thistle LIEUT
Issuing Officer
O C. DISCHARGE SECTION NO. 6 DISTRICT DEPOT

Rank

Date March 19. 1919

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

M.F.B. 39A.
1049-D.P.-300M-11-18.
H.Q. 1772-39-882.

DISCHARGE CERTIFICATE

CANADIAN EXPEDITIONARY FORCE

W. S. B Class A

WAR SERVICE BADGE.
CLASS "A" No.....

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps NOVA SCOTIA FORESTRY [illegible] William Raymond

Regimental No. 233445 Rank Pte. Name Hayes, W. R.

C. E. F.

Enlisted (a) 9-7-17 Terms of Service (a) War ~~4 Months~~ Service reckons from (a) 9-7-17

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) Labourer

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 S.S. Megantic Halifax		5/8/17.	
		Disembarked.	LIVERPOOL	15 SEP 1917	
20-9-17		O.C. C.F.C. T.O.S. Base Depot, C.F.C. Sunningdale	15-9-17	Pt. II D.O. 125	
		W. B. Garnett Capt. Lt. & A/Adjt. C.F.C.			
		25-10-17. O.C. C.F.C. S.O.S. Base Depot, C.F.C. Sunningdale, on posting to 31 Coy, C.F.C. France. J. Lucas Capt. for O.C. C.F.C.		25-10-17	Pt II DO.155.
31st Company CFC		Disembarked HAVRE		28-10-17	
					LR.9214 PRO No 1 of 15-11-1917.
12-7-1918	AG No 10 Draft	With Unit 31 Coy C.F.C	Field	12-7-18	K.,G.] 8-14553
9-11-1918	31 Coy.	Granted 14 days Leave to the UK		4-11-1918	B213 PRO No 38 of 1918
23-11-1918	31 Coy	Rejoins Unit from Leave	Field	20-11-18	B213
11-1-19	75 Coy	S.O.S. No 31 Coy. on transfer to No 75 Coy. C.F.C.	Field	7-1-19	B213 PRO No 2 of 1919
11/1/19	Do	S.O.S. 75 Coy on transfer from 31 Coy		8/1/19	B213. Pt. 3/19

CERTIFIED CORRECT - 2 - NOV. 1917 CAN. RECORDS, LONDON.

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.

Report		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				
14/1/19		O.C.Cdn. S.O.S. for demobilisation to C.F.C. Conc. Cmp. Le Havre	Depot Dunningdale	14/1/19	N/R. Pt.2.O/S. 3/19
					Lieut. for Lt. Col A.A.G. Cdn. Sect. G.H.Q.
		INRD			
21/1/19	O.C. 11th	S.O.S. on reporting from France & posted to C.F.C. Ldg	Seaford	16/1/19	Pt II B.O. 18.
6/2/19	OC 14	SOS on transfer to Kemmil Park for return to Canada.	Seaford	6/2/19	Pt II O — 32

S.O.S. — O.M.F.C.-ON-TRANS. — C.E.F.

A.P. Camp

Lt. Adjt.

LT. For ADJT.

11th RES. BTN. (MAN.)

19 FEB 1919

19 FEB 1919

Rogers Hammond

OFFICER I/c RECORDS M.D. 6

S.L.F. LVPL FEB 23/19

LIEUT. HFX MAR 2 00

H M T ✠ BELGIC ✠

Form R 122.
2353—100M—9-12-16.

LTR

Rank

Name HANES, William Raymond

Reg'l No. 2330445

Unit

If in perm. Corps, What Unit?

Married or Single Single.

Nova Scota Forestry Dft To Base Depot

Place and Date of Enlistment Aldershot, July 9th, 1917.

Place of Birth South Maitland N.S.

Name and Address, Next-of-Kin Mrs Robert Royles

Trenton, Pictou Co. N.S. Canada

Relationship Sister.

Assigned Pay Monthly $

Payable to

Relationship

Separation Allowance $

Payable to

Relationship

N/E. R.C. No. 7636
File R.L.
Category O.R. Can

Discharge, Date and Place

Reason

Character Dte M.D. 6

H. W. V., Ld.—9546-16.

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		15-9-17		S/S Megantic
20-9-17	BD CFC	T.O.S. from Canada	Dte	S'dale	15-9-17	A.F.B. 103 CHECKED 31 OCT 1917 B II 0125
25-10-17	" "	S.O.S to 31 Coy C.E. France	"	"	25-10-17	— 155.
15-11-17	31 Coy "	Landed in France	"	Field	28-10-17	— 1
22-1-19	75 11th Res	T.O.S. from 31 Co. CFC. France	Pte	"	8-1-19	S.O.S 31 Coy C.E. W.F. 02d/18-1-19
21 1 19	CFC Personnel	T.O.S. B.D. CFC. S'ford.	"	S'ford	18-1-19	" 18
26-2-19.	11 Res. CFC. Ber. 6 M.D. C.W.	SOS to C & D Canada	V	Rhyl	22-2-19	— 57

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.					

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

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps ..... D.D.C.

Regimental No. 2330445 Rank Pte. C. E. F. Name Hanes, Raymond

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

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

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

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
2/12/19	Sea	TAKEN ON STRENGTH No. 6 DISTRICT DEPOT posted D.C.O.	Hfx	2/3/19	D.S.C. Leave B.C. Record D.D.C.
21/3/19		DISCHARGED at Halifax, N.S.	D	78	for CAPTAIN O. C. DISCHARGE SECTION No. 6 DISTRICT DEPOT

(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				

NOVA SCOTIA FORESTRY DEPOT.

2330445

FORM OF WILL.

I, Pte William R. Hanes (Name in full)

Regimental Number 2330445 serving in NOVA SCOTIA FORESTRY DEPOT.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I bequeath all my real estate unto

Mrs Robert Royles
Trenton
Pictou N.S.

Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

Mrs Robert Royles
Trenton
Pictou Co N.S.

Name and Address of person or persons to receive personal estate* *(See note).*

IMPORTANT NOTE
This must be Signed and Dated by THE SOLDIER HIMSELF.

this 16 day of July A. D. 191 7

W R. Hanes Signature of Soldier.

*N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness Capl. G. Kelly

Address of Witness ~~N.S. Forestry Depot~~ 24 Fabrucke Rd Halifax

Occupation of Witness Clerk Soldier

Signature of Second Witness James R Wharton

Address of Witness Lansdowne

Occupation of Witness Soldier

Pte Undelivered
Nova Scotia

H-792

F. W. 82
00M-5-16.
1772-39-983.

FORM OF WILL.

NOVA SCOTIA FORESTRY DEPOT. 2330445

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

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

INSTRUCTIONS.

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

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

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

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

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

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(1) Name of Overseas Unit which Soldier joins NOVA SCOTIA FORESTRY DEPOT.

(2) Regimental Number 2330445

(3) Full Name of Soldier William Raymond Hanes

(4) Place of Birth South Maitland Nova Scotia

(5) Are you married, or not ? No

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

(b) Present Postal Address

(7) Are you a widower ?

(8) Have you any children ?

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

200M.—3-16.
I772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes

If so, state name and address John Hanes South Waitband

(10) Is your Mother alive? No

If so, state name and address

(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.

Mrs Robert Royles
Trenton
Pictou Co N.S.

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

(15) Are you insured? No

If so, in what Company?

Have you made arrangements for payment of your Insurance premium

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

M Chapman U
Officer Commanding.

Date July 16/17

NOVA SCOTIA FORESTRY DEPOT.

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. 2333445 Rank Pte Surname Hanes
(Give name in full)
William Raymond

Unit or Corps D.D. 6 Birthplace Hants Co., Nfld

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

1. GENERAL DESCRIPTION:

Physique good Weight 130 lbs. Height 5 ft. 6 in. Colour of Eyes Gray

Nutrition good

Pulse 72

Condition of arteries N

Vision Rt. N Left N

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

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

Nil

Opinion as to general health and physical condition good

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

Nervous System no Genito Urinary System no Cardio-Vascular System no

Special Senses no Integumentary System no Respiratory System no

Disturbance of mentality no Muscular System no Digestive System no

Osseous and Joint System no Any other general condition no

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

nil

South Maitland, Hants Co. N.S.

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

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at.....(Overseas)

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

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

Signature .....

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

THIS SECTION FOR USE IN CANADA—

Examined at.....Halifax.....(Canada)

Date ...18.3.19..... Signed .....P. Travers 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 .H. Jones. W.C.R.....

(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.

D.M.S. 1375.

Medical Examination upon leaving the Service

of an Officer fit for general service or a Soldier fit for duty.

☛ *Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.*

Rank PTE. Name WILLIAM R. Surname HAINES.

Unit or Corps C.F.C. (If a soldier) Regtl. No. 2330445

Born at MAPLE GROVE N. S. on, date 19/10/1899

Signature (for identification) W R Haines

The examination is to be made jointly by two Medical Officers.

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe.

Weight 140 lbs. (est)

Height 5 ft. 6 ins.

2. NUTRITION AND DIATHESIS? Good

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. NERVOUS SYSTEM? normal

4. RESPIRATORY SYSTEM. normal

5. HEART?

Abnormal Sounds? Murmur over pulmonary area.

Abnormal Size? No

Pulse Rate? 72 Intermittence or irregularity? No

6. ARTERIES.—Any hardening? No

7. DIGESTIVE SYSTEM? normal

8. GENITO-URINARY SYSTEM?

Urinalysis—s.g.? 10-10 Reaction? Acid Albumen? Nil Sugar? Nil

9. SKIN, MIDDLE EAR, EYE or any other part? normal

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe. No

11. Opinion as to the health and physical condition of the one examined? Good.

Examined at Sussex

Date 3-2-19

Signed J. W. Machell Capt M.O.

Signed J. McNichol Capt M.O

☛ *If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.*

Original ORIGINAL NOVA SCOTIA FORESTRY DEPOT.

MEDICAL HISTORY SHEET. 2330445

Surname Hanes Christian Name William Raymond

Examined { on 10 day of July 1917 / at Aldershot }

Approved by R. L. Blanchard Major

Birthplace { City or Town / County }

Rank M.O.

Apparent age 18

Trade or occupation farmer

Height 5 Feet 5' 1/2 Inches.

Weight 135 Lbs.

Chest measurement { Minimum 30 inches. / Maximum expansion 32½ inches. }

Physical development fair

Small-Pox Marks none

Vaccination Marks { Arm Right. Left. / Number none }

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Date.	Fit or Unfit.	Examined for Re-engagement.
22/9/17	A	R. L. Blanchard M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
17.7.17	G.	K G M M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
14.7.17	G	K G M M.O.
23.7.17		M.O.
2/8/17		M.O.

Enlisted on 9 day of July 1917 at Aldershot

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	Nova Scotia Forestry Depot Details C F C	~~445~~ 2330445		July 10/17
Transferred to				

NOVA SCOTIA FORESTRY DEPOT.

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.

J.M.C

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

Surname Agnew Christian Name Hubert Raymond

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital			Dates of Discharge from Hospital			DISEASE.	Number of days in Hospital	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Day	Month	Year	Day	Month	Year				

C.A.D.C. 5009 A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

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.

NAME OF SOLDIER (Block Letters) HANES W. R.

REGIMENT 11th. RES RANK PTE No. 2330445

Date of Examination in England 4 FEB 1919 Date of Examination in France

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 14 23
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? NO

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "*Yes*" where applicable to any or all of *a*, *b* or *c*.)

(*a*) In Canada YES

(*b*) In England

(*c*) In France

Signature of Dental Officer

P. 559

MARRIED OR SINGLE Single

PLACE OF BIRTH South Maitland N.S.

NAME AND ADDRESS OF NEXT OF KIN Mrs Robert Royden

Trenton Pictou co. N.S.

RELATIONSHIP OF NEXT OF KIN Sister

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

Sept 1 Balance from Canada 10 - 10 -

Sept 30 1 10 33 - 33 -

33 43 -

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 D
														10 -	43 -								

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SER. ALLCE. ENG.
Sept 30	Balance	~~43~~							43 -	15.00	
Oct.	P. Pay	34 10							77 10		
		34 10									
Nov & Dec.	P. Pay	67 10		A.R. 34/14 25/9/17 B. D.	973	✓					
				A.R. B42 13/10/17 B. D.	973	✓					
				A.R. B169 24/10/17 B D	487	✓			1198 7	45.00	
1918		67 10			2433						
Jan	✓	34 10		A.R. 22/11/17 31 Coy	357	✓					
				I.O.R. 142 5/10/17. 79 Coy	22	✓					
				A.R. 18 28/11/17 31 Coy	357	✓					

IONS, &c.

EFFECTIVE DATE	AUTHORITY

ITAL, &c.

NAME OF HOSPITAL

REG'L NO. 3330445 RANK Private NAME HANES William Raymond

IF IN PERMT. CORPS WHAT UNIT } UNIT N.S. Forestry Draft TRANSFERRED TO ~~C.F.C. France~~ DATE ~~7-1-18~~ AUTHORITY

PERMANENT FORCE ALLOWANCES TRANSFERRED TO C.F.C. France DATE 1-1-18 AUTHORITY D.O.C. 15/1/17 3160

PLACE OF ATTESTATION Aldershott N.S. TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION July 10th 1917 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)

ITTANCE ROLLS 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
												10				
												43 -		15 -		

ANCE	DEFER-RED. PAY	SER. ALLCE. ENG.	MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER-RED. PAY	SER. ALLCE. ENG.
			1918.											
-	15.02		Jan		34 10			7 36				11987		
10							AR. 35 13/12/17 31Co.	8 92						
							" 55 27/12/17 ✓	357				13412	15.02	
					34 10			1985						
			Feby.	P.P. Pay	30 80		" 78 12/1/18 ✓	357						
							" 106 26/1/18 ✓	357				15778		
					30 80			715						
87	45.00		Mch	✓	34 10		" 376 11/2/18. ✓	446						
			✓				✓ 496 25.2.18 ✓	257						
			✓				✓ 628 13.3 ✓	446						
			✓				✓ 876 22.3 ✓	257				17582	105.02	
					34 10			1606						

CANADIAN ASSIGNED PAY AUDITED
Nil
AUDIT CLERK
DATE 3-6-19

~~88~~
89

9330885 Pfc. Hanes, William Raymond

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS			
			AMOUNT				AMOUNT				AMOUNT					1		2		3		4					
	NO. OF DAYS	RATE	$	C.	NO. OF DAYS	RATE	$	C.	NO. OF DAYS	RATE	$	C.				NO.	DATE	NO.	DATE	NO.	DATE	NO.	DATE	1	2	3	4

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. * 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.	

2 NAM NUM ORI DAT

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
28/9/17	D.O.132 28/9/17	7 dappay C&C C.F.C. Base Depot	7 70	17/12		O.M. Chgs.	32
				8/19	2963	Fine Clothing Feby 1919	3 93
				22/4/19	31497	11th Res. Bn do	29 70
				P850 Verified 9/11/18			33 25
							7 70
							40 95

PARTICULARS OF RENDERING NON-EFFECTIVE:– 31/19 Hd to Bn. H.R. 2369 Leafford 29/1

1918 MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS
Mch	Bal fwd			
April	P. P.	33 –		AR 44. 12.4.18 31 Coy
				" 171 25-4-18 "
May	P. P.	38 – 34 10		AR. 330. 13-5-18. 10 Dis
				" 545. 28-5-18. " "
June	P. P.	34 10 33		" 651. 14-6-18 " "
				" 767. 21-6-18. " "
July	P. P.	33 34 10		" 941. 9-7-18. " "
				" 1088. 29-7-18 " "
Aug.	" "	34 10 34 10		" 1306. 15-8-18. " "
				" 1457. 30-8-18. " "
Sept.	P. P.	34 10 33 –		AR 1601 16-9-18 31 Coy
				" 1786 26-9-18 —"
Oct.	Ptes. Pay	33 – 34 10		AR 1939 15-10-18 —"
				" 2177 30-10-18 —"
Nov.	✓	34 10 33 –		AR 6927 4-11-18 —"
				CS. 60371 8-11-18 London
				AR 2214 2-11-18 10 Dis
				CS. 63293 14-11-18 London
				AR 2543 28-11-18 10 Dis
Dec	✓	34 10		" 2800 14-12-18 —"
1919 Jany	✓	34 10		
		101 20		
	Cut on Def Pay.	8 50		AR 2963 8-1-19 10 Dis
	Total	8 50		Total

COMPILED BY W.E. Haddard
CHECKED BY [illegible]

215

H

NAME:- HANES. Wm Raymond

NUMBER:- 2232445

* ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
	EFFECTIVE DATE:-	
	AMOUNT:-	

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

S. 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.

2369 Desford 4 MDS

UNIT AND TRANSFERS

ORIGINAL UNIT:- R. S. Dorsets.

DATE ACCOUNT FIRST OPENED:- 1.9.17

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			R.A.M.C. Trans

OM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
~~Lappay~~ C.F.S. C & C Base Depot	7 70	12/12		O.M. Chas.	32
		8/19	2963	Fin. Clgs. Clear Feby 1919	~~3 93~~
		22/9	31497	11th Res. Rmdo	~~29 20~~
				P850 Verified 8/11/18	33 25
					2 70
					40 45

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	10		

OF RENDERING NON-EFFECTIVE:- 31/19 Hd to Lan. R.R. 2369 Desford 29/19 Desford MDS. L.L.C. Rel. A.H.P. 2.22.

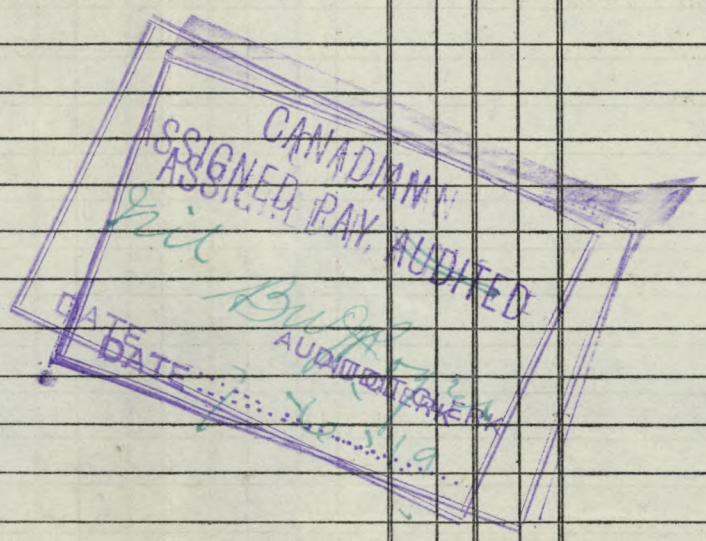
Dr. 4. Balance 283.17.

PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
d Ford								175 82	105 00	
P. P.	33 -		AR 44. 12.4.18 31 Coy				4 46			
			" 171 25-4-18 "				2 68		201 68	120 -
P. P.	38 - 34 10		AR. 330, 13-5-18. 10 Dis.				7 14 2 68			
			" 545, 28-5-18. " "				2 68		230 42	135 -
P. P.	34 10 33		" 651. 14-6-18 " "				5 36 2 68			
			" 767, 21-6-18, " "				2 68		258 06	150 -
P. P.	33 34 10		" 941, 9-7-18, " "				5 36 3 57			
			" 1088, 29-7-18 " "				3 57		285 02	
" "	34 10 34 10		" 1306, 15-8-18, " "				7 14 3 57			
			" 1457, 30-8-18, " "				3 57		311 98	180
P. P	34 10 33 -		AR 1601 16-9-18 31 Coy				7 14 3 57			
			" 1786 26-9-18 "				3 57		337 84	195 -
Ptes. Pay	33 - 34 10		AR 1939 15-10-18 "				7 14 3 73			
			" 2177 30-10-18 "				3 73		364 48	
✓	34 10 33 -		AR 6927 4-11-18 "				7 46 97 33			
			CR. 60371 8-11-18 London				58 40			
			AR 2214 2-11-18 10 Dist				7 46			
			CR. 63293 14-11-18 London				7 30			
			AR 2543 28-11-18 10 Dist				13 06			
✓	34 10		" 2800 14-12-18 "				7 46			
✓	34 10								274 67	
	101 20						191 01			
on Def Pay.	8 50		AR 2963 8-1-19 10 Dist				3 73		283 11	240 -
Ford	8 50						Void 3 73			

NUMBER 2330HH5 RANK Pte NAME HANES W.R

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE
	B. Ford	8 50		B. Ford	3 73				27H 67
				AR 3497 22-1-19 11 Regs	29 20				
				" 1564 10-2-19 C.F.C	9 73				2H0 51
		8 50			H2 66				
Mch/19				M.O. 132 7 days Pay 28.9.17		7 70			
				2.4005 17.12.18		32			232 49
						802			
				So S. Canada 22-2-19 S.L. 23 H D6					

1 P.C. Cr Bal 2H2 22/-
AR 1564 endorsed 1 P.C. - do - 232 49/xx



NAME HANES W.R.

CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
8 50		B. Fwd.	3 73				27H 67		
		GR 3H97 22-1-19 11 Rec.	29 20						
		" 136H 10-2-19 C.F.C.	9 73				2H0 51		
8 50			H2 66						
		NO.132 7 dys Pay 28.9.17		7 70					
		2.4005 17.12.18		32			232 49		
				8 02					

This space to be for numbers.

War Service Badge Issued.
Class. A ...No. 233905

Proceedings on Discharge.

AW

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

No. 2330445

Rank Pte.

Surname Hanes

Christian name William Raymond

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

Corps (Squadron, Battery or Company) N. S. Forestry Depot

Date of discharge March 21. 1919.

Place of discharge Halifax N.S.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 19 years — months.	Descriptive marks
Height 5 feet 6 inches.	
Complexion Dark	Nil
Eyes Gray	
Hair Dark	
Trade Labourer	
Intended place of residence (To be given as fully as practicable.)	So. Maitland Hants Co. N.S.

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

Authority for discharge Demobilization

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

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

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

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

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

M. F. B. 218.

200M.—5-18.
H. Q. 1772-39-113.

(OVER)

A.M.K. 2-4-19

5. He is in possession of the following number of G. C. Badges:

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company, *(Squadron or Battery,* and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place) 1 .....

(Date).....

.....

Commanding.....

8. Certificate to be signed by the Soldier on Discharge

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page, and that I have received my permanent discharge certificate.

(Place) Halifax N.S. W.R. Hagner *(Signature of Soldier.)*

(Date) Mar. 19/19 W.S. King *(Signature of Witness.)*

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

.....*(Signature of Soldier.)*

10. Statement of Service.

Service toward Engagement to.....(the date to which the Record of Service is completed).....years.....days.

Total.....years.....days.

11. Confirmation of Discharge.

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

(Place) Halifax N.S

(Date) March 21, 1919

(Signature) [signature] LIEUT. COL.

No. 6 DISTRICT DEPOT.

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

Nil.

W. R. Bauer

List of Discharge Documents.

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

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

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

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

(a) Proceedings on Discharge

(b) Attestation.

(c) Medical History Sheet.

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

N.B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

Zone 5. 21-2-19 Lo 63

Belgic 1.3.19

AUDITOR | PAYMASTER

M. OR S.

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

REGT. No. 333045 RANK Pte NAME (IN FULL) Hanes W.R. 33/

(BLOCK LETTERS, SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Nil — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 6.4.6 — IF IN P. F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY, $ Nil — DATE EFFECTIVE

PAYABLE TO — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS South Kirkland Hants Co N.S.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED PLACE Halifax, N.S. DATE 21-3-19 REASON Demob AUTHORITY Clo 378 IF ENTITLED TO POST DISCHARGE PAY

English L.P.B.

MONTH adjusted to	PAY AND F. A. NO. OF DAYS	RATE	AMOUNT $ C.	OTHER CREDITS $ C.	TOTAL CREDITS $ C.	ACQUITTANCE ROLLS COL. NO. 1 NO. / DATE	COL. NO. 2 NO. / DATE	COL. NO. 3 NO. / DATE	CASH PAYMENTS COL. NO. 1 $ C.	COL. NO. 2 $ C.	COL. NO. 3 $ C.	ASSIGNED PAY $ C.	REGIMENTAL CHARGES $ C.	OTHER CHARGES $ C.	TOTAL DEBITS $ C.	BALANCE DEBIT $ C.	BALANCE CREDIT $ C.	PARTICULARS OR REMARKS
Balance from previous account				Special $2.1.6														
31.1.19	1.10				24 22									9 73				Kimmel DR boat
														39 84				
															4960		19362	
1-2-19 to 21-3-19	49	110	5 39	11 20										35 —				Lo 63
				19362	29342				20633 29342						29342			
									70 —						70 —			
	122		Mar											Soldiers				
			280		280 —									210				
				Mar Gratuity										140				
														70				
														70 —				
									Completed									
			280 00	280 00					280 00						280 00			

Apl 18/19 Ck No 151766
May 9/19 155443
June 15/19 600006

I Certify that all payments due on account have been paid.
CAPT.
Pay Senior Officer Pay Services, M. D. 6

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

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