

AMC TRAIN'G DEPOT
NO 10

TRIPPLICATE

A II

ATTESTATION PAPER.

No. 2476404

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... Hughes
- 1a. What are your Christian names?..... Albert Edward Henry
- 1b. What is your present address?..... 168 Lipton Street, Winnipeg.
- 2. In what Town, Township or Parish, and in what Country were you born?..... Liverpool, Lancashire, England.
- 3. What is the name of your next-of-kin?..... Edward Henry Hughes
- 4. What is the address of your next-of-kin?..... 168 Lipton Street, Winnipeg. Manitoba Canada
- 4a. What is the relationship of your next-of-kin?..... Father
- 5. What is the date of your birth?..... October, 10th, 1897
- 6. What is your Trade or Calling?..... Book-keeper
- 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?..... 90th, Winnipeg Rifles
- 10. Have you ever served in any Military Force?..... St. Margaret Cadets, Winnipeg.
- 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
- 13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? .. No
- 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? .. No
- 16. If so, what was the reason?..... ..

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Albert Edward Henry Hughes, 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.

Albert Edward Henry Hughes (Signature of Recruit)

Date July, 4th. 191 7. Rich. Ashton (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Albert Edward Henry Hughes, 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.

Albert Edward Henry Hughes (Signature of Recruit)

Date July, 4th. 191 7. Rich. Ashton (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 4th. day of July 191 7.

Justice of the Peace. (Signature of Justice)

Description of Albert Edward Henry Hughes on Enlistment.

Apparent Age 19 years 9 months.

(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 9 1/2 ins.

Chest measurement { Girth when fully expanded 36 ins.
Range of expansion 3 ins.

Complexion Fair

Eyes Blue

Hair Fair

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).

Vision R. Eye 20/20
" L. Eye 20/20
Hearing R. Ear 20 Ft.
" L. Ear 20 Ft.

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 July, 4th. 1917.

Place Winnipeg, Manitoba.

Chas B. Stone Capt
.....
Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

Mobilization
Medical Board
Approved Fit

Albert Edward Henry Hughes
.....
Chas B. Stone Capt
.....

CERTIFICATE OF OFFICER COMMANDING UNIT.

Albert Edward Henry Hughes 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.

Chas B. Stone Capt
.....
(Signature of Officer)

Act. Adj. A. M. C. T. D. No. 10. C. E. F.

Date July, 4th. 1917.

REGIMENTAL DOCUMENTS

NAME HUGHES ALBERT EDWARD HENRY REGT. NO. 2476404 UNIT 607th H. Q. FILE NO. _____

3-7-19

S

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

DEATH

Category

M 37924

DISCHARGE

Category

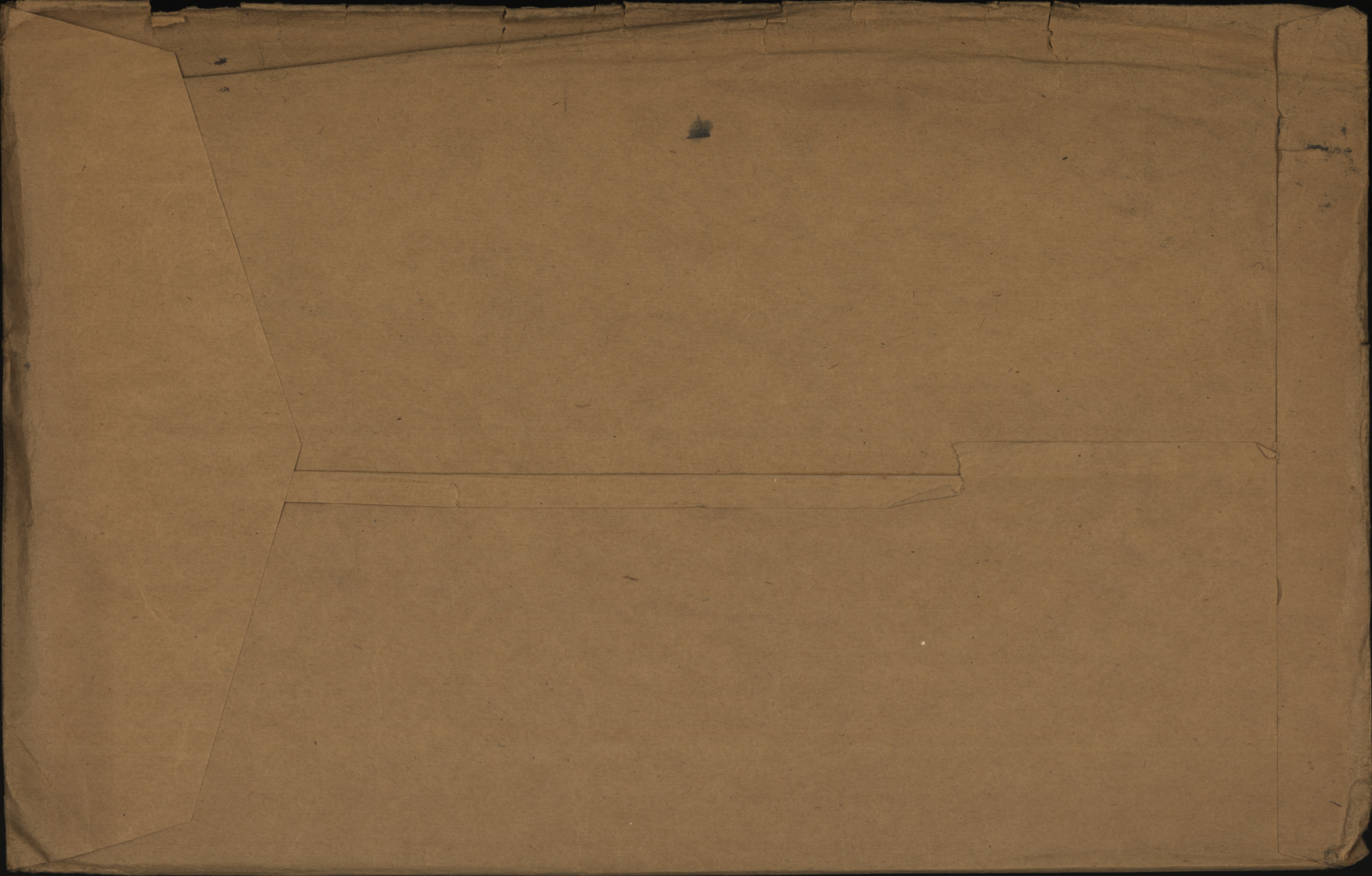
Remob

DESERTION

~~2~~
10-10
23-10
31-10
2

H

- 1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)
- 1 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)
- 1 TRAINING HISTORY SHEET (M.F.W. 113)
- 1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)
- 1 REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)
- 1 COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)
- 1 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)
- 1 DENTAL HISTORY SHEET (M.F.B. 465)
- 1 MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)
- 1 MEDICAL EXAMINATION (M.F.W. 129)
- 1 TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)
- 1 PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)
- 1 DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)
- 1 LAST PAY CERTIFICATE (M.F.W. 44)
- 1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)
- 1 PARTICULARS OF CHARACTER (A.F.W. 3226)
- 1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)
- 1 *sent cert*
- 2 *dup cert*
- 1 *m sw 67*
- 1 *cert*
- 1 *899*
- 1 *R149*
- 1 *P.O.S. 1207*
- 1 *R122*
- 1 *paye*



SURNAME

CHRISTIAN NAME OR NAMES

D.M.S. 1300 50M-21-1

REG. NO.

Hughes

A.E.H.

2476404

RANK

UNIT

Co.

TROOP

BATTY.

etc.
HOSPITAL

(18 B.) *man.*

DATE OF ADMISSION

1.

14 Can Gen Eastbourne

HOSP.

1. 8. 18

2.

HOSP.

3.

HOSP.

4.

HOSP.

DIAGNOSIS

1.

~~Acute Lt. Inj.~~
myalgia

2.

3.

DISPOSITION

DATE

Ch. 6. 8. 18. 6283.1

8. 8. 18. C. 285

21.8-18 6297

REMARKS

Do. 6. 8. 18

note: Re Ch. 6. 283. Diag. changed to Myalgia.

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.

SURNAME.

Hughes

CHRISTIAN NAMES

Albert Edward Henry

REGL. NO.

2478404

RANK.

Pte.

UNIT

C. A. M. C. (J. R. No 10)

FORMER CORPS

Nil.

B. L. CARD NO.

20198 of 947119
5/6/19
S.O.S. Demob. 27/5/19
NO 165 FOLL. 17/6/19
0600

NEXT OF KIN.

NAMES IN FULL

Hughes Edward Henry

RELATIONSHIP TO SOLDIER

Father.

ADDRESS

108 Lynton St. Winnipeg Man.

CHANGE OF ADDRESS

COUNTRY OF BIRTH

England Liverpool Lancs.

DATE

Oct. 10th 1897

PLACE OF ATTESTATION

Winnipeg Man.

DATE

July 4th 1917

0/8 a-5-18-1235-

R1B. 29-5-19. 337. Pte

MARRIED

SINGLE

Yes

WIDOWER

TRADE OR CALLING

Book-keeper

RELIGION

Church of England

DESCRIPTION.

APPARENT AGE

19 YEARS

MONTHS

9

HEIGHT

5 FEET

INCHES

9 3/4

CHEST MEASUREMENT

36 INCHES

EXPANSION

INCHES

3

COMPLEXION

Fair

EYES

Blue

HAIR

Fair

DISTINGUISHING MARKS

Nil.

MEDICAL EXAMINATION.

PLACE

Winnipeg Man.

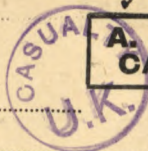
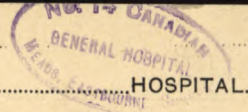
DATE

July 4th 1914

Present Address

108 Lipton St.

Winnipeg Man.



A. & D. CARD

AT.....

A. & D. No. 3574. PL. OF ACTION.....

RANK Pte REG. NO. 2476404 UNIT 18th Can Res. SICK OR WOUNDED.....

NAME Hughes, G. A. Galt AGE 20 RELIGION Pres.

PLACE IN HOSPITAL R

DIAGNOSIS Hernia Ingu L / Myalgia

ADMITTED 21 III 1918 FROM.....

DISCHARGED 6 AUG 1918 A. TO 18 Res.

TRANSFERRED.....

SERVICE AT HOME 13/12- IN FIELD.....

RESULTS.....

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

REMARKS.

A series of horizontal dotted lines for writing, spanning the width of the page below the 'REMARKS.' header. The lines are evenly spaced and extend across the entire width of the page.

No. 2476404 RANK Pte

NAME Hughes, Albert E. H.

T. O. S. 4-7-17⁵⁰ UNIT 1010 Seaming Depot A.M.C.
 127 of 4-7-17

M. D. 10

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917	1917			
July 4	July 31	n		
Aug		n		
Sept		n		
Oct		✓		
Nov		✓		
Dec		n		
1918	1918			
Jan		n		
Feb		✓		
Mar		✓		

(over)

Apr
May 1 May 3

x
x

17th of 8 Oct
" " " Nov 7 3 3 $\frac{5}{18}$

Apr. P. L.
No 124 of 4-5-18

M&H inc
Number 2476404 Rank Pte
Surname HUGHES
Christian Name Albert Edward Sewell
Units 6 AM Co Theatre of War England
Date of Service 24-5-18
Remarks 40 Bauls Ltd
Barnatone & Arthur
Latest Address ~~168 Dipton Street~~
Winnipeg Man.
Roll No. A Page 3760

17
DESP. AUG 2 1923

REGN. NO 495-2

NAME *Hughes A. E. H.*
RANK AND CORPS *Pte. 18 A.*

REG'TL. No. 2476404.

H. Q. FILE No. 649

FOLLOWS

No.

FOLLOWS

CABLE

NO.

DATE

NATURE OF CASUALTY

LIST No.

HOSPITAL

DATE OF
ADMISSION

(*man R*)
REMARKS

6283 ¹	14 Jan Gen Eastbourne	1-8-18	Hernia R Inq
6285	Discharged.	6-8-18	myofascia " " C297-2

REG. NO.

2476404

NAME

Hughes, Albert E.

(SURNAME FIRST)

RANK

OtE

CORPS

C. A. M. C.

AGE

20

SERVICE

✓

NAME OF HOSPITAL

St Boniface

PLACE

Winnipeg

DATE OF ADMISSION

8. 4. 18.

DISEASE

Tonsillitis.

DISCHARGE

15. 4. 18.

OPERATION

DISCHARGED TO DUTY

Yes.

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD

29283.

REMARKS

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

ORIGINAL MEDICAL HISTORY SHEET

Surname Dryden Christian Name Albert Edward Henry

AMC TRAINING REPORT
NO 10

Examined on 4th day of July 1917
at Winnipeg, Man.

Approved by Chas B. Stone
Rank Capt. M.O.

Birthplace { City or Town Liverpool
County England

Apparent age 19 Yrs 9 Mths.

Trade or occupation Bookkeeper

Height 5 feet 9 3/4 Inches

Weight 150 lbs.

Chest measurement { Minimum 33 inches
Maximum expansion 36 inches

Physical development Average

Small-pox Marks None

Vaccination Marks { Arm Right Left
Number 1

When Vaccinated last Childhood

(a) Marks indicating congenital peculiarities or previous disease C

(b) Slight defects but not sufficient to cause rejection

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT
		Mobilization M.O.
		Medical Board M.O.
		Approved Fit M.O.
		<u>Chas B. Stone</u> President M.O.
		Member M.O.
		<u>Heart Capt</u> M.O.
		Member M.O.
		<u>Albert Mathew Capt</u> M.O.
		M.O.

Date	Result	VACCINATIONS
<u>2/11/17</u>	<u>OK</u>	<u>assessed Capt</u> M.O.
<u>10.11.17</u>	<u>OK</u>	<u>Winnipeg Capt</u> M.O.
		M.O.
Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>2/11/17</u>	<u>OK</u>	<u>assessed Capt</u> M.O.
<u>29.10.17</u>	<u>OK</u>	<u>Winnipeg</u> M.O.
<u>3.11.17</u>	<u>OK</u>	<u>Winnipeg</u> M.O.
<u>10.11.17</u>	<u>OK</u>	<u>Winnipeg</u> M.O.

Enlisted on 4th day of July 1917 at Winnipeg, Man.

CORPS	REG'TL NUMBER	HABITS	DATE
<u>A. M. C. T. D. No. 10.</u>	<u>#2476404</u>		<u>July, 4th. 1917.</u>
<u>18th Can Reserve Battalion, 8th Bn</u>			<u>JUN 20 1918 18-11-18</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT

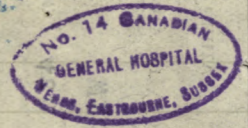
N.B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.
Classification A. 2.

ORIGINAL

A II
1601

Surname Hughes Christian Name Albert Edward Henry



STATION	Date of Arrival at the Station	DATES OF						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
		Admission into Hospital			Discharge from Hospital						
		Day	Month	Year	Day	Month	Year				
		31	7	18	6	8	18	Hernia Right Myalgia	7	Sent to Hospital with diagnosis right inguinal hernia. States that he has never seen any swelling in this area nor is any produced on coughing effort. Feels pain at times in rt. inguinal area Discharged Oct A.	J. C. Fyfe. MAJOR, C.A.M.C. REGISTRAR.

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Pool.

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. *2476404* Rank *Pte* Surname **HUGHES**
(Given name in full)

Unit or Corps *8th Can Inf Batt* Birthplace *Albert Edward Henry*
Liverpool England

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

1. GENERAL DESCRIPTION:

Physique *good* Weight *160* lbs. Height *5* ft. *10* in. Colour of Eyes *Blue*
 Nutrition *good*
 Pulse *68 reg*
 Condition of arteries *soft*
 Vision Rt. *4/10* Left *4/10*
 Hearing (conversational voice) Rt. *20* ft.
 Left *20* ft.

Identification marks, scars, or deformities.
 (Give cause and date of origin.)
none on abdomen

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 *yes*
 Disturbance of mentality *no* Muscular System *yes* 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.

31-7-18 myalgia
Tonsillitis in childhood

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Beirut (Overseas)

Date 10-5-19

Signed McGarrath 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 W.A. August

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

THIS SECTION FOR USE IN CANADA—

Examined at (Canada)

Date

Signed M.O.

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

Signature

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

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

[OVER]

CANADIAN ARMY DENTAL CORPS, O.M.F.C. DENTAL CERTIFICATE FOR DEMOBILIZATION

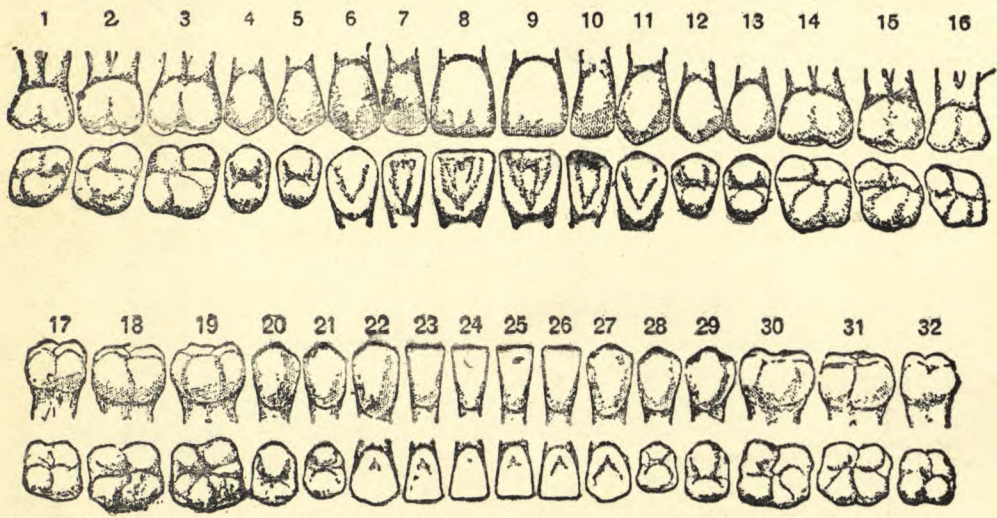
Canadian Printing and Stationery Services, London

DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block Letters) HUGHES, A.E.H.
 REGIMENT 1st D.P. RANK Pvt No. 3476404
 Date of Examination in England 27/7/19 Date of Examination in France _____

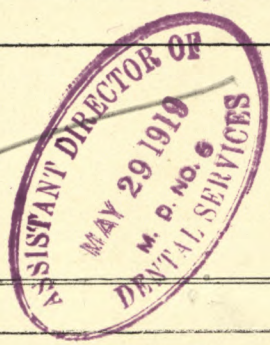
1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated

C.C.P.



PRESENT DENTAL REQUIREMENTS

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



HAS HE EVER REFUSED DENTAL TREATMENT ?

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

- (a) In Canada
- (b) In England
- (c) In France

BRAMSHOTT CAMP
HANTS

Signature of Dental Officer E. J. Bury Capt.

JAMES H. H. H. H.

100



CASE HISTORY SHEET.

St Boniface Hospital. Winnipeg Man Station.
No. 2476404 Rank Ote Name Hughes Albert E. Age 20
Unit 6a m c Completed years of service _____ Where and how long }
Date of admission 8/4/18 Date of discharge 15/4/18
Diagnosis Tonsillitis Place of origin _____

CONDITION ON ADMISSION AND PROGRESS OF CASE

Tonsils enlarged & inflamed 3 days duration
Temp 102 Pulse 120

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT

(Especially any specific or special form.)

Routine

CONDITION ON DISCHARGE

(and disposal made of case.)

Date 8/4/18

J. M. Keefe Lt
Medical Officer i/c case.

C/29283



NEW YORK STATE HISTORICAL ARCHIVES

Faint, illegible text at the top of the page, possibly a header or title area.

Main body of the page containing very faint, illegible text, likely bleed-through from the reverse side of the document.

MEDICAL CASE SHEET.

No. in Admission and Discharge Book. 2847 Year 1918	Regimental No. 2476404	Rank. Pte.	Surname. Hughes,	Christian Name. G.A.	
	Unit. 18th. Can. Res.	<div style="border: 1px solid black; border-radius: 50%; width: 100px; height: 100px; display: flex; align-items: center; justify-content: center; margin: 0 auto;"> 357/H </div>		Age. 20	Service. 12-12
Station and Date. 31-7-18	Disease <u>HERNIA</u> <i>inguinal</i>				
<i>Complaining of pain in right inguinal region.</i>					
<i>Examination.</i>					
<i>He states that he has never seen any swelling in the groin. There is no appearance of any bulging on coughing effort.</i>					
3/8/18.	<i>Recommended for discharge to duty.</i>				
AUG 1918	<i>Discharged to Caterone, A.</i>				
<i>W. J. Syall Capt. Comd.</i>					

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.....**A.M.C.**.....**T.D.**.....**No.10**.....

(2) Regimental Number.....**2476404**.....

(3) Full Name of Soldier.....**Albert Edward Henry Hughes.**.....

(4) Place of Birth.....**Liverpool England.**.....

(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.....

(9) Is your Father alive? **Yes.** **Edward Henry Hughes.**

If so, state name and address **168 Lipton Street, Winnipeg, Manitoba Canada.**

(10) Is your Mother alive? **Yes** **Florence Elizabeth Hughes.**

If so, state name and address **168 Lipton Street Winnipeg, Manitoba 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? **New York Life Insurance Company.**

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. H. Murray
.....
Officer Commanding.

Date **April 16th, 1918.**

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge
Class "A" No. 317563

THIS IS TO CERTIFY that No. 2476404 (Rank) Pte

Name (in full) Albert Edward Henry HUGHES enlisted in
the C.A.M.C.

CANADIAN EXPEDITIONARY FORCE at Winnipeg on the 4th
day of July 1917

HE served in 8th Can Inf Batta 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 21

Height 5' 9 3/4"

Complexion Fair

Eyes Blue

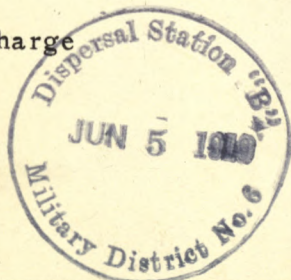
Hair Fair

Albert Hughes
Signature of Soldier.

Marks or Scars

Nil.

Date of Discharge



J. C. Bellman
O. C. Dispersal Station "B"
Issuing Officer.

Rank

MAY 29 1919

Date 19

NB.- 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.

- 1.—That discharge certificate must be carried when wearing uniform.
- 2.—That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing, and
- 3.—That wearing of uniform renders him liable to usual military discipline, as if on the strength of a unit.

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 *A. M. C. I. D. No. 10*

Regimental No. *2476404* Rank *Pte* Name *Bugher Albert Edward*
C. E. F.

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

Date of promotion to } Date of appointment } Numerical position on }
 present rank } to lance rank } 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				
<i>21-5-14</i>					
<i>5-6-14</i>					

T. O. S. No. 6 D. D. from [Signature] and posted [Signature] B. 168

Advt. Co. Breckwys. B. 168

[Signature]
 Officer in Charge, Records No. 6 D. D.

(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.]

Fill in this form with name

Central Postal Directory

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				

AMC TRAILING DEPOT
NO 10

W.S.D. C. "A"

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

M. F. W. 54. (A. F. B. 103.)

250M.—1.16.

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps ^{17. 1918} A. M. C. T. D. No. 10.

Regimental No. #2476404 ✓ Rank Private ✓ Name Hughes, Albert Edward Henry
C. E. F.

Enlisted (a) #2476404 ✓ Terms of Service (a) C. E. F. ✓ Service reckons from (a) July, 4th, 1917.

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) Bookkeeper.

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.
25 MAY 1918	C.A.M.C.	EMBARKED <u>May, 10th, 1918.</u> DISEMBARKED <u>May, 24th, 1918.</u> TAKEN ON STRENGTH <u>from</u> <u>Canada</u> <u>Schiffe 105.18 145</u>		19 JUN 1918	<u>do</u> <u>19 JUN 1918</u> <u>Platoon</u> <u>Adjutant,</u> <u>for O.C., C.A.M.C. Depot.</u>
19 JUN 1918		TAKEN ON STRENGTH.	Seaford.	JUN 19 1918	Part II D.O. 171 ✓ <u>SK</u>
JUN 20 1918		Drafted <u>St. Helena</u>		18.11.18	<u>Platoon</u> <u>DO 322</u> <u>Asst. Adj. 18th. Can. Res. Batt.</u>

CERTIFIED CORRECT.
REMOVED
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, Shoing Smith, etc., etc. also special qualifications in technical Corps duties.

Date	Report	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 218, Army Form A. 38, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 218, Army Form A. 38, or other official documents.
	From whom received				

NOV 18 1918	<i>W. J. Fox</i>			NOV 18 1918	P. II O. No. 146 of 22.11.18
22-12-19	<i>W. J. Fox</i>	To Report Centre, Paris att. for duty.		7.12.19	B 213
15-2-19	<i>W. J. Fox</i>	To 8th Bn on transport to record list.		16.2.19	ad. Instruction Pt II 16.2.19
15.2.19.	<i>A. A. G.</i>	J. O. S. l. edn. Record. list on Trans from 8th l. edn. Bn.		17.2.19.	l. edn. Cert. 3rd Ech. Off. Dist. Pt II O. 14. D. 10 1919
20.2.19	<i>R. R. G.</i>	Taken on strength Seaford.		16.2.19	60140
20/5/19		S. O. S. O. M. F. C. ON PROCEEDING TO CANADA.			

Lt. Hewitt
 Lieut.
 for Lt. Col., A. A. C.
 Canadian Section

Cor. [Signature]
 LIUT.
 FOR LT. COL. I/C RECORDS. C. O. M. F.

Post II orders 20/5/19
 D. H. [Signature]

Embold 1762301 21-5-19

LTR

RH

Rank _____ Name **HUGHES, Albert Edward Henry** ✓ Reg'l No. **2476404** ✓
 Unit **17th Dft C.A.M.C** } If in perm. Corps }
 What Unit? } Married or Single **Single.** ✓
 Place and Date of Enlistment **Winnipeg, July 4th, 1917.** ✓ Place of Birth **Live rpool, ENG.** ✓
 Name and Address, Next-of-Kin **Edward Henry Hughes** ✓
168 Lipton St. Winnipeg Manitoba Canada ✓ Relationship **Father.** ✓

Assigned Pay Monthly \$ _____ Payable to _____ Relationship _____

Separation Allowance \$ _____ Payable to _____ Relationship _____

22639
C.A.M.C.
Category _____

Discharge, Date and Place _____ Reason _____ Character _____

H. V. V. Ld.—9546-16.

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.				
C	Arrived in England			24-5-18	S/D TEIRESIAS
25-5-18	6 AMB	T.O.S on arrival		10-5-18	Pt II D.O. 145
19-6-18	" "	S.O.S. on Transfer to 18th Can Res Bn.		19-6-18	Pt II 170
18-11-18	18 th Res	S.O.S proc of Sean to 8 th Bn	Pt Seafood	16-11-18	---322
16-2-19	8 Bn	S.O.S. to Can Record List	Pt Field	16-2-19	Pt 16x C RE Pt II 14 D/20-2-19
8-5-19	8 th Bn	Tos from 8 th Bn.	Pt Shott.	6-5-19	26
22/5/19.	-	S.O.S. to Canada.	"	21/5/19	DO 38.

To Sean 21-5-19 66-B-11.

man

Muse

man

ASSIGNED RAY	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.
EFFECTIVE DATE:-	1-5-18	EFFECTIVE DATE:-	
AMOUNT:-	15 ⁰⁰	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.	

Florence Hughes (mother)
168 Lipton St. Winnipeg.
Stopped eff 1-6-19

Comp 9/5/19 *Ind 10*
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
11-9-18	1852	Lead	9.93				
8/5/19	3615	going	£5 24.33				

PARTICULARS OF RENDERING NON-EFFECTIVE:- *Red line 31/5/19 NRE: 8558*

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS
May 3	Balance from Canada		10.30	
May 4 - June 30	P.P.	63.80		
7-18	✓	63.80		as
		34.10		Q. 1292. 14.6.18.
				1087. 12.6.18. C.A.D.
				792. 22.6.18. 18 P.
				1128. 29.7.18. B.A.R.
				384. 9.7.18. --
8-18		74.10		E.A.P.
		34.10		AR 1304. 12.8.18.
				" 1420. 27.8.18
Sept		34.10		
		33		Cap
				AR 1552 11/9.
				" 1644 25/9
				✓ 1692 26/9
		33		
Oct		34.10		C.A.D.
				AR 2025 18 P.
		34.10		
Nov	✓	33		C.A.D.
				AR 2208 ✓
				✓ 2294 12.11.18. B.A.R.
Dec	✓	34.10		✓ 2477 ✓
Jan	✓	34.10		✓ 9140 Paris
		101.20		

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

NAME: **HUGHES, Albert Edward**
Henry NUMBER: **24764.04** *507*

RELATIONSHIP & AUTHORITY: **Hughes (mother)**
St-Winnipeg
red eff 1-6-19

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
<i>LPC from Canada</i>		<i>Pte</i>

UNIT AND TRANSFERS
 ORIGINAL UNIT: *C.W.C.D. No 10*
 DATE ACCOUNT FIRST OPENED: *4-5-18*

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S P'D	UNIT TRANSFERRED TO
<i>DO 145</i>	<i>10-5-18</i>		<i>C.W.C.D.</i>
<i>171 3/19.6.18</i>	<i>1-9-18</i>	<i>21.8.18</i>	<i>P.R.S. (E)</i>

UNIT PAID BY AMOUNT DATE OF PAYMENT NUMBER OF A.R. UNIT PAID BY AMOUNT

	<i>7.93</i>				
	<i>24.33</i>				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBSCE ALL'CE
<i>Ledger Bal 30.39</i>	<i>1</i>	<i>10</i>		
<i>LPC .. 6.06</i>				

RENDERING NON-EFFECTIVE: *Dis con 31/5/19 NRE 8558 8/5/19 Bshott*

PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
<i>from Canada</i>		<i>1030</i>						<i>1030</i>		
<i>P.P.</i>	<i>6380</i>		<i>bal</i>				<i>30</i>	<i>4410</i>		
	<i>6380</i>						<i>30</i>	<i>6320</i>		
	<i>3410</i>		<i>AR</i>				<i>15</i>	<i>6288</i>		
			<i>91292.14.6.18</i>	<i>-7</i>	<i>32</i>			<i>5787</i>		
			<i>1087.12.6.18</i>	<i>10</i>	<i>501</i>			<i>4814</i>		
			<i>792.22.6.18</i>	<i>10</i>	<i>973</i>			<i>3841</i>		
			<i>1128.29.7.18</i>	<i>13</i>	<i>973</i>			<i>1894</i>		
			<i>384.9.7.18</i>	<i>14</i>	<i>1947</i>					
	<i>3410</i>		<i>C.A.P.</i>				<i>15</i>			
	<i>3410</i>		<i>AR 1304.12.8.18</i>	<i>12</i>	<i>973</i>					
			<i>1420.27.8.18</i>		<i>1277</i>			<i>1614</i>		
	<i>3410</i>			<i>2190</i>			<i>15</i>			
	<i>33</i>		<i>Cap</i>				<i>15</i>			
			<i>AR 1552 11/9</i>		<i>973</i>					
			<i>1644 25/9</i>		<i>730</i>					
			<i>1692 26/9</i>		<i>973</i>			<i>738</i>		<i>agreed</i>
	<i>33</i>				<i>2679</i>		<i>15</i>			
	<i>3410</i>		<i>C.A.P.</i>				<i>15</i>			
			<i>AR 2025 18 Res. 28.10.18</i>	<i>973</i>				<i>1675</i>		
	<i>3410</i>			<i>973</i>			<i>15</i>			
	<i>33</i>		<i>C.A.P.</i>				<i>15</i>			
			<i>AR 2208 11.11.18</i>	<i>487</i>						
			<i>2294 18.11.18</i>	<i>1306</i>						
	<i>3410</i>		<i>2477 7.12.18</i>	<i>373</i>			<i>15</i>			
	<i>3410</i>		<i>9140 Paris 21.12.18</i>	<i>933</i>			<i>15</i>	<i>4196</i>		
	<i>10120</i>			<i>3099</i>			<i>45</i>			

NUMBER

2476404

RANK

lt

NAME

HUGHES

A.E.H.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BAL
1919	Forward								4
Feb	T. Day	3080		C. A. G.				15	6
Mchs		3410		AR 9600 Paris 26.12.18	933			15	10
				✓ 1455 ✓ 10.1.19	933				9
				✓ 2890 ✓ 21.1.19	933				1
				✓ 4620 ✓ 10.2.19	933				
				✓ 5243 ✓ 21.2.19	933				
				✓ 6456 ✓ 11.3.19	933				
				✓ 7152 ✓ 21.3.19	933				1
		6490			6531			30	6
Apr	✓	22		CAP				12	7
				10/4/19 450 ✓	913				4
				19/4 683 ✓	913				3
				CAP	1826			15	2
				8/5 3615 glWing 62	2433				
May	✓	3410			4259				
		6710			4259			30	6

Stollanada 21/5/19 R 66 M D

NAME **HUGHES A.E.H.**

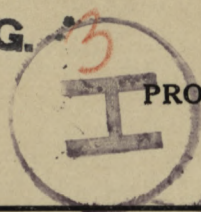
PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
					41 96	-	
C.A.G.				15	64 90		
AR 9600 Paris 26.12.18	9 33			15	106 86		
✓ 1455 ✓ 10.1.19	9 33				95 31		
✓ 2890 ✓ 21.1.19	9 33				11 55		
✓ 4620 ✓ 10.2.19	9 33						
✓ 5243 ✓ 21.2.19	9 33						
✓ 6456 ✓ 11.3.19	9 33						
✓ 7152 ✓ 21.3.19	9 33				11 55		
	65 31			30	67 10		
cap				12	78 65		
10/4/19 450 ✓	9 13				48 26		
19/4 683 ✓	9 13				30 39		
cap	18 26			15	24 33		
8/5 3615 gWing 62	24 33				6 da L.P.C.		
	42 59						
	42 59			30	6 06		

Stollanada 21/5/19 266 M.D.

L. A. ^B
O. G. ³

War Service Badge
Class "A" No. 317563

SHORT FORM.



PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No.	9276207	
2. Rank.	Pte	
3. Name.	Hughes Albert Edward Henry	
4. Unit.	8th Batt.	
5. Date of Discharge	5/4/19	Place Halifax
6. Reason for Discharge	Demobilization	
 R.O. 1420		
7. Authority.		
8. Proposed Residence after Discharge	168 Lipton St Winnipeg Man	

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.?

A. E. Hughes
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place..... HALIFAX, N.S. MAY 29 1919

Date.....

Signature..... *A. C. Dispersal*
O. C. Dispersal (O. C. Discharging Unit.)

PROCEEDINGS ON DISCHARGE

Description

1. No.
2. Rank
3. Name
4. Unit
5. Date of Discharge
6. Reason for Discharge
7. Authority
8. Proposed Reinstatement



CERTIFICATE TO BE SIGNED BY SOLDIER

I hereby acknowledge that at the time of my discharge and that I received my discharge papers

11. 11. 11

Signature of Soldier

CONFIRMATION

The details of the above named soldier's history contained

Date

Date

(X) V. The following (X)

Signature

MEDICAL DISSERTATION DOCUMENTS

.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....

[Faint handwritten text or signature]

LIST OF DISCHARGE DOCUMENTS.

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

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133) or
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). *duplicate*
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W, 2595).
15. Sundry Documents.

Group..... *B*

Checked by No..... *18* *gsp*

Date..... *20/5/19*

Pennsylvania 29.5.19
 PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING
 DAILY RATE OF PAY AND ALLOWANCES

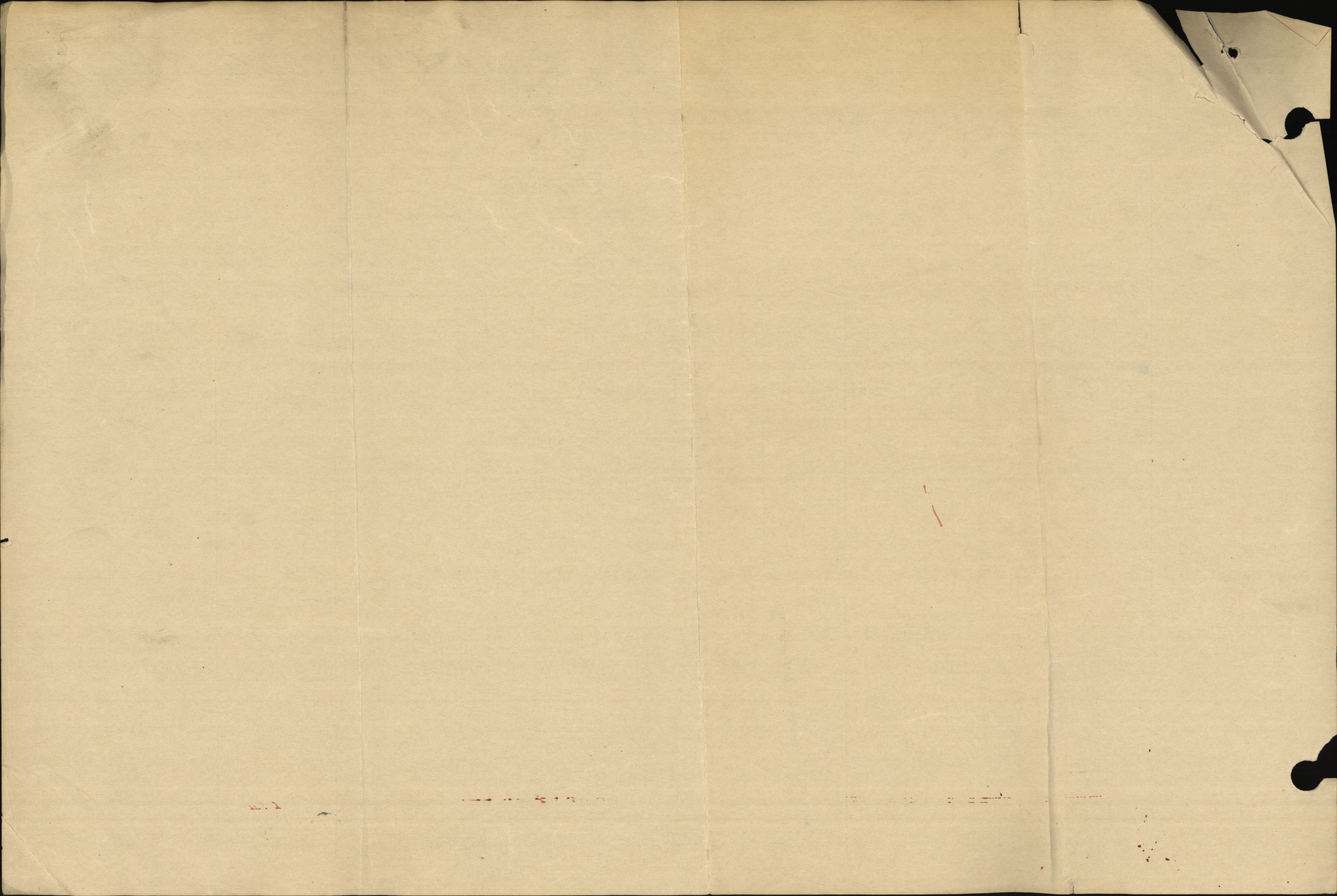
REGT. No. *2476404* RANK *Pvt* NAME (IN FULL) *Bugher A.E.B.*
 IF IN P.R. WHAT UNIT? (BLOCK LETTERS SURNAME FIRST) *115*

M. OR S.	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	PLACE OF ATTESTATION	TRANSFERRED TO	DATE	AUTHORITY
ADDRESS		<i>J.O.S.</i>	<i>11-5-19</i>	<i>20-108</i>					
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				ASSIGNED PAY \$	DATE EFFECTIVE			
TO WHOM PAID	RELATIONSHIP				<i>15.00</i>	<i>1.6.19</i>			
ADDRESS					PAYABLE TO	RELATIONSHIP	ANY CHANGE IN ASSIGNEE OR ADDRESS		
					<i>Mr. S. Bugher</i>				
					ADDRESS				
					<i>168 Ripton St</i>				
					<i>Minneapolis Minn July 14/19</i>				
					STOP PAYMENT FORM RENDERED, DATE	EFFECTIVE			
					DISCHARGED	PLACE	DATE	REASON	AUTHORITY
					<i>Yes</i>		<i>5-6-19</i>	<i>Disch</i>	<i>80-190</i>

BALANCE FROM PREVIOUS ACCOUNT	PAY AND F.A.		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY		REGI-MENTAL CHARGES		OTHER CHARGES		TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS
	MONTH	NO. OF DAYS	AMOUNT		\$	C.	NO.	DATE	NO.	DATE	NO.	DATE	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	
			\$	C.																			
	<i>31.5.19</i>			<i>6.06</i>																			<i>By Bal Chatter</i>
	<i>5.6.19</i>	<i>5</i>	<i>10</i>	<i>3.50</i>																			<i>By Mr. S. Bugher</i>
				<i>70.00</i>																			<i>By Bal Chatter</i>
				<i>35.00</i>																			<i>By Bal Chatter</i>
				<i>116.56</i>																			<i>By Bal Chatter</i>
				<i>250.00</i>																			<i>WAR SERVICE GRATUITY, W.S.G. S.A.</i>
	<i>182 days</i>			<i>280.00</i>																			<i>1st Payment of</i>
	<i>122 days</i>			<i>280.00</i>																			<i>July 19 886.095</i>
				<i>280</i>																			<i>2/19 890.306</i>
				<i>280</i>																			<i>1/33763 5/4/19</i>
				<i>280</i>																			<i>280</i>

Certified that all payments due on this acct. have been paid.
[Signature] CAPT.
 For Senior Officer Pay Services, M. D. 6

JUL 11 1919



Date of Enlistment

July 4-1917

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

H 10622

May 1/18

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

# <i>15.00</i>			
----------------	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. *2476404*

Rank *Pte.* Promoted Reverted Discharge

Soldier's Name *Albert Edward H. Hughes*

Battalion *A.M.C.T.D. #10 1917*

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1 MRS. FLORENCE HUGHES,
168 LIPTON ST.,

2 WINNIPEG, MAN. 15 15.00

3 A-C 2476404 PTE. ALBERT EDWARD H. HUGHES

4 FIFTEEN DOLLARS

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>1918</i>					<i>09121-a-52</i>
<i>May</i>	<i>X 25828</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>June</i>	<i>C 15754</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>July</i>	<i>U 31956</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Aug</i>	<i>F 31013</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Sept.</i>	<i>G 46324</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Oct.</i>	<i>J 51875</i>		<i>15</i>	<i>15</i>	
<i>Nov.</i>	<i>C 61060</i>		<i>15</i>	<i>15</i>	
<i>Dec</i>	<i>K 62806</i>		<i>15</i>	<i>15</i>	
<i>JAN</i>	<i>F 72299</i>		<i>15</i>	<i>15</i>	
<i>FEB</i>	<i>E 80108</i>		<i>15</i>	<i>15</i>	
<i>MAR</i>	<i>F 90975</i>		<i>15</i>	<i>15</i>	
<i>APR</i>	<i>F 2085</i>		<i>15</i>	<i>15</i>	
<i>May</i>	<i>N 5748</i>		<i>15</i>	<i>15</i>	
			<i>195</i>	<i>195</i>	<i>M.R.O. 117396 'Decey' 6.6.19</i>

M. F. W. 128,
4096, 6-7-172-39-1161
L. L. 2220-M. & D. 7891.

A/c Closed *31.5.19*

Ret'd per... *Cornwall*

Date *29.5.19 M.R.W 187 6.6.19*

Closed by... *S. Chambers* *M.D.6*

AUDITED

AUTHORITY FOR NEW ACC'T. *M. R. O. 110135*
Of Gagne 16-5-18

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 126
 4100 M. 6-17-1172-55-1141
 L. L. 23220-M. & D. 7563.