

ATTESTATION PAPER.

No. 2887564

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... HUNTER.
- 1a. What are your Christian names?..... WILLIAM HERBERT.
- 1b. What is your present address?..... c/o # 19 Co., C.A.S.C., Vancouver, B.C.
- 2. In what Town, Township or Parish, and in what Country were you born?..... Liverpool, England.
- 3. What is the name of your next-of kin?..... Mrs. Marion Easton Hunter.
- 4. What is the address of your next-of-kin?..... Suite 40 Manhattan Apts, Vancouver B.C.
- 4a. What is the relationship of your next-of-kin?..... Mother.
- 5. What is the date of your birth?..... July 5th 1898. *W. H. Hunter*
- 6. What is your Trade or Calling?..... Draughtsman.
- 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?..... yes
- 10. Have you ever served in any Military Force?..... *W. H.* yes. 19th Co., C.A.S.C., 8 mos.
- 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? .. yes
- 16. If so, what was the reason?..... under age.

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, William Herbert Hunter, 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.

*W. H. Hunter* (Signature of Recruit)

Date April 25th., 1918 *Ed Subbeid* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, William Herbert Hunter, 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.

*W. H. Hunter* (Signature of Recruit)

Date April 25th., 1918 *Ed Subbeid* (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 Vancouver, B.C. this 25th day of April 1918.

*Ed Subbeid* (Signature of Justice)  
Attesting Officer.

M. F. W. 23.  
750 M.-1-17.  
H. Q. 1772-39-841.

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.



Description of WILLIAM HERBERT HUNTER 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.  $\frac{5}{4}$  ins.

Chest measurement { Girth when fully expanded 36 $\frac{1}{2}$  ins.  
 Range of expansion 3 ins.

Complexion dark

Eyes dk. brn.

Hair dk. brn.

Religious denominations { Church of England  
 Presbyterian XX  
 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.)

Vacc. 1 left arm.

Deformity tip of left index finger.

Slight limitation terminal joint - left thumb.

Hearing; Normal. R.L.

VISION: Right 20/20 Left 20/20

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 "A3" for the Canadian Over-Seas Expeditionary Force.

Date APR 16 1918 1918

Place VANCOUVER, B. 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 BOARD

VANCOUVER CENTRE

Spencer President

W. A. Mackay Member

B. Murphy

CERTIFICATE OF OFFICER COMMANDING UNIT.

William Herbert Hunter 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.

[Signature] (Signature of Officer)  
 CAPT. O.C.

Date APR 29 1918 1918

68th O/S Depnt Field Battery C.F.A.



REGIMENTAL DOCUMENTS

(Gnr)

NAME

**HUNTER WILLIAM HERBERT** REGT NO. **2537564**

UNIT **68<sup>th</sup> Bn** H. Q. FILE NO.

**CONTENTS**

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505  
REFERENCE

NON-EFFECTIVE BY

**(S)**

1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)

15-3-19, C.H.

CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

TRAINING HISTORY SHEET (M.F.W. 113)

1 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)

1 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

~~AS 105206 10622-921~~

2 DENTAL HISTORY SHEET (M.F.B. 465)

MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

2 MEDICAL EXAMINATION (M.F.W. 129)

1 TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)

PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)

DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)

1 LAST PAY CERTIFICATE (M.F.W. 44)

1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)

PARTICULARS OF CHARACTER (A.F.W. 3226)

1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

1 M.F.W. 192

1 M.F.W. 25-71

DEATH

Category

40834

DISCHARGE

Category

*Demb.*

DESERTION

5-15

19-15

32-15

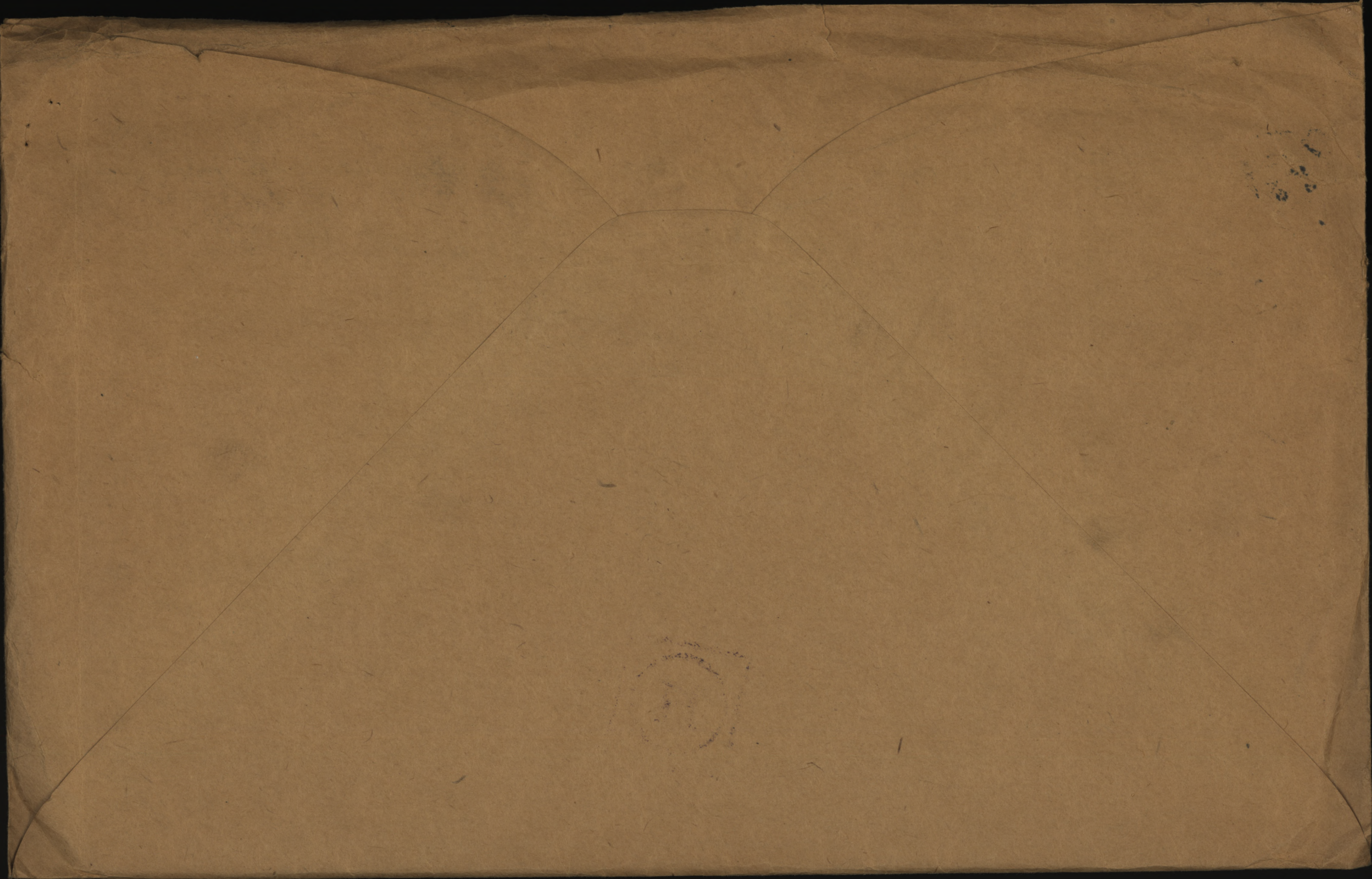
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PUBLIC ARCHIVES  
RECORDS CENTRE

**(H)**







DEPARTMENT OF VETERANS AFFAIRS

Copy for H.O. FILE

Ottawa Ont  
Date Nov 14/62

Attention of

NAME HUNTER, Wm H.

SERVICE 2557564 WW1  
NUMBER

C.P.C. No. 203699  
W.V.A. No.

NAVY  
ARMY X  
R.C.A.F.

The DEPARTMENT has received information from

J.R. Peacock, 3836 West 21st Ave., Vancouver 8, B.C. Nov 6/62

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death Oct 24/62  
Cause of Death  
Place of Death Not stated

Name and Address of next of kin (if known)

Copies to: W.S.R.  
V. I.  
~~NAVY~~  
D.O. VANCOUVER  
H.O.

} Destroy form if advice of death already received.

for  
Chief, Central Registry



DEPARTMENT OF VETERANS AFFAIRS

Date: Nov 1952

File No. 100-100000

Service Number: 357504  
Date of Birth: 11-15-1892

Death Date: 11-15-1952

The Department has received information from J. J. Leacock, 3120 Reno St., San Francisco, California, that on 11-15-1952, there occurred an injury and death of a veteran.

Details of the death of the above mentioned veteran are as follows:

Date of Death: 11-15-1952  
Cause of Death: ...  
Place of Death: ...

Copy to: ...  
Copy to: ...  
Copy to: ...

Chief, Control System



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. 68th Depot Battery, CFA, CEF.

Regimental No. 2557564. Rank Gunner. Name William Herbert Hunter.

C. E. F.

Enlisted (a) 25/4/18. Terms of Service (a) ~~Two years.~~ Service reckons from (a) 25/4/18.

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

Civil occupation: -Draughtsman.

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				
		Embarked Canada	Quebec	4/10/18	
		Arrived England	Avonmouth	18/10/18	A.M. 5 - "Victoria"
		Embarked England		22-11-18	
		Disembarked Canada		29-11-18	
9.12.18	Overseas	T. D. C. District Depot XI.	Victoria, B. C.	23.11.18	REG # 236/2271. 1918.
Discharged		On demobilization	Vancouver B.C.	7.2.19	D.O. 41/217. 2 of 10/2/19
		R.O. 1420 of 12/12/18			W.A. MacBeath Capt O.C. District Depot, XI

(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.



Casualty Form - Active Service

Report		Record of promotions; reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
9-8-19	cmds. & S.C.	S.O.S. of the om. Re. to Canada	—	21-11-18	a.o.i. Personnel <del>J. P. Langman</del> For DofR.



1486

MILITARY SERVICE ACT, 1917.

ORIGINAL

MEDICAL HISTORY SHEET.

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar.

- 1. Surname HUNTER, Christian name WILLIAM HERBERT.
- 2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule.....
- 3. Consecutive number on schedule of men reporting for service (if he appears on it).....
- 4. Address (including street and number, if any)..... No. 19 Co. C.A.S.C., Vancouver, B.C.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the APR 16 1918 day of 1917, by the undersigned medical board sitting at VANCOUVER, B.C.

- 5. Age as stated 19 Years 9 Months.
- 6. Apparent age 20 Years ✓ Months
- 7. Height 5 Feet 5 1/4 Inches.
- 8. Weight 125 Pounds.
- 9. Chest measurement { Minimum 33 1/2 Ins. Maximum 38 1/2 Ins.
- 10. Complexion dark { Eyes dk. brn. Hair dk. brn.
- 11. Physical development good { Good Fair Poor
- 12. Smallpox marks 0

- 13. Number of vaccination marks { Right arm 0 Left arm 1
- 14. When vaccinated last 1915.

15. Distinctive marks and marks indicating congenital peculiarities or previous disease Deformity tip of left index finger. Slight limitation terminal joint left thumb.

16. Slight defects but not sufficient to cause rejection nil.  
The man denies having had { Rheumatism Tuberculosis Syphilis We find no evidence of past { Rheumatism Tuberculosis Syphilis

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category

A2

History of Asthma Operated on by Specialist 3 mos ago. no return of attack.  
VISION: Right 20/20 Left 20/20  
Hearing: Normal. R.L.

W. F. Mackay Capt. Member. W. J. Buller Capt. President. W. J. Murphy Capt. Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
MAY 23 1918	<u>Blank</u>	M.O.	15-6-18	<u>E. J. Coulson</u>	M.O.
		M.O.	29-6-18	<u>E. J. Coulson</u>	M.O.
		M.O.	6/7/18	<u>E. J. Coulson</u>	M.O.

Joined 25<sup>th</sup> day of April 1918 at Vancouver BC

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>68th Depot Battery, C.E.F.</u>	<u>2557564</u>		<u>25-4-18</u>
Transferred to.....	<u>2nd Artillery Tanks Bn</u>	<u>Autby Petawawa C.O.</u>	<u>1264</u>	<u>20/9/18.</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT
<u>VANCOUVER,</u>	<u>MAY 20 1918</u>	<u>nil</u>	<u>A2 Buller Capt</u>
<u>Petawawa</u>	<u>10/9/18</u>	<u>nil</u>	<u>A2 Buller Capt</u>

N. B.—This sheet is 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.

Signature of Man W. J. Buller







*He Lean*

*4427*

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

XI.C.C.

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. 2557564 Rank Gunner Surname Hunter.  
(Give name in full)

William Herbert

Unit or Corps 68th B. ty. Birthplace Liverpool, England.

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

### 1. GENERAL DESCRIPTION:

Physique Medium Weight 132 lbs. Height 5 ft. 5 1/2 in. Colour of Eyes Brown

Nutrition Good

Pulse 80

Condition of arteries Good

Vision Rt. 20/20 Left 20/20

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

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

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.

(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....Westminster(Canada)

Date .....Jan..9,..1919..... Signed *B. E. Langton*.....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. B. Hunter*.....

(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]



**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 Gunner Name Hunter Surname William Herbert  
 Unit or Corps 2nd Can. Tank Battalion (If a soldier) Regtl. No. 2557564  
 Born at England Liverpool on, date 5/7/98  
 Signature (for identification) William Herbert Hunter

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

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

Weight 138 lbs. ↳  
 Height 5 ft. 5 1/2 in.

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? no  
 Abnormal Size? no  
 Pulse Rate? 84 Intermittence or Irregularity? no

6. ARTERIES---Any hardening?

no

7. DIGESTIVE SYSTEM?

good

8. GENITO-URINARY SYSTEM?

normal

Urinalysis---s.g.? 1022 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.

none

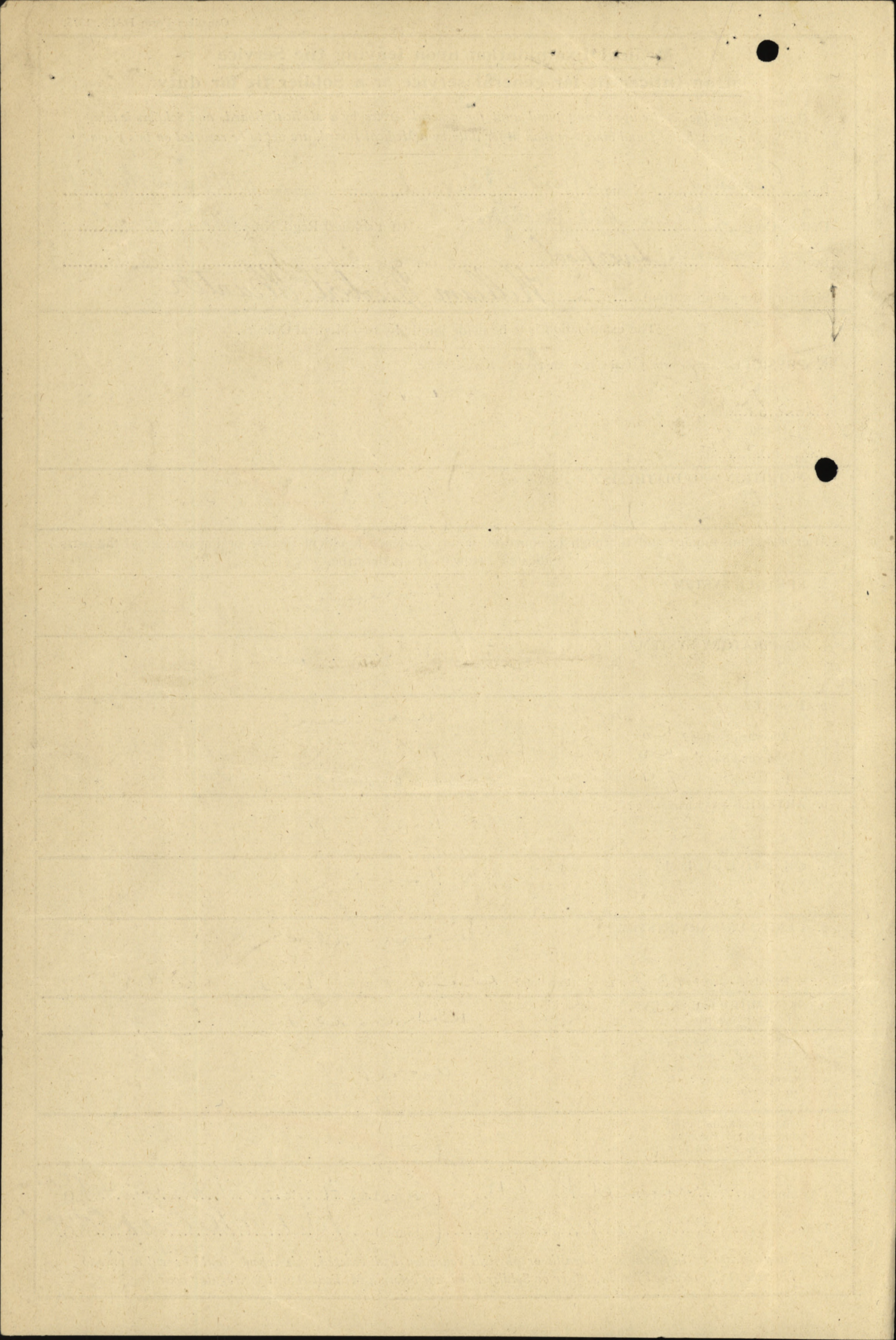
11. Opinion as to the health and physical condition of the one examined?

good

Examined at Kimber Park Signed J. J. [Signature] M.O.  
 Date Nov 19/18 Signed J. L. [Signature] 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.







2587564

Sgt Hunter W H

## DENTAL CERTIFICATE.

M D 11

The following Certificates will

be attached to the Medical History Sheets of all

*2nd Cav. Tank Bn.*

Other Ranks being returned to Canada for disposal.

Date of Examination.	Present Dental Condition.	In case of loss or decay of teeth. Is the loss due to wounds, injury or disease directly attributed to Active Service?	Has he ever declined Dental Treatment.	Recommendation.
18/11/18.	Fit		W Clarke Capt. C. G. D. B.	



# DENTAL CERTIFICATE

The following Certificate is issued by the  
Dental Surgeon of the United States Army  
General Hospital, Fort Belknap, Montana

Name of Patient	Rank and Grade	Regiment, Post, or Station	Branch of Service	Date of Examination

*Handwritten signature*











This space to be for numbers.

26-4-94

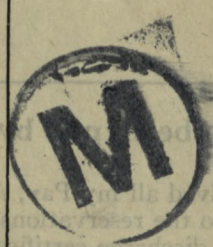


# Proceedings on Discharge.

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

No.	2557564
Rank	Gnr
Surname	Hunter
Christian name	William Herbert
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	68 <sup>th</sup> Bat. C.F.A.
Date of discharge	7.2.19.
Place of discharge	Vancouver

## 1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age.....	21	years.....	months.	Descriptive marks 	
Height.....	5	feet.....	5		inches.
Complexion	Dk. Brown				
Eyes	Brown				
Hair	Brown				
Trade	Ornithologist				
Intended place of residence	1815 Alberni St. Vancouver B.C.				
(To be given as fully as practicable.)					

2. The above-named man is discharged in consequence of *Simulation*  
*under R.O. 120(1) of 12-12-8.*

Authority for discharge.....

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.

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)

22

SD.  
3163.

Order 14-3-19  
E.P.  
E.A.



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).....

(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).....

*W. H. Hunter* (Signature of Soldier.)

(Date).....

*J. B. Bowers* (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.

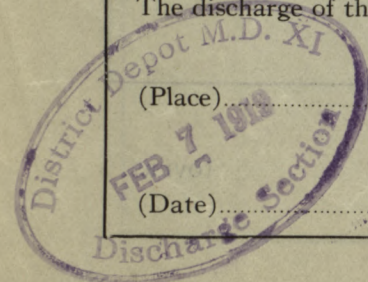
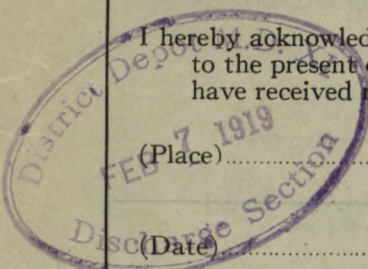
The discharge of the above-named man is hereby confirmed.

(Place).....

(Signature).....

*H. B. Andrews* Capt.  
for G. C. District Depot, XI

(Date).....





**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.)

*None*  
*W. P. Hunter*

Reg. Contact Sheet	Minuta form B. 263	Attestation Paper	Minuta Form W. 33
Squadron Battery Company	Minuta form B. 263	Particulars of Return	W. 133
Field Contact Sheet	W. 178	Proceedings on Discharge	H. 213
Copies of Convictions, by C. P. in MS.		In the case of recruits who are rejected on final approval, the discharge documents will consist of	
Medical Hist. Sheet	Minuta form B. 313		
Casualty Form	W. 24		
Medical Report for Invalidity	W. 1327	(a) Proceedings on Discharge	
Dental History Sheet	B. 465		
Last Pay Certificate	W. 44	(b) Attestation	
Duplicate Discharge Certificate	W. 304		
Form of WTI	W. 81	(c) Medical History Sheet	

I hereby certify that the following documents are unobtainable:

Documents not accompanying this form should be crossed out.

Officer Commanding

V.R. In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of return is to be noted hereon.



Reservations referred to at Part 8.  
(To be signed by the soldier when there are none, it is to be so stated, and signed by the soldier.)

## List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263 Squadron } Battery } Conduct Sheet, " B. 263a Company } 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.*

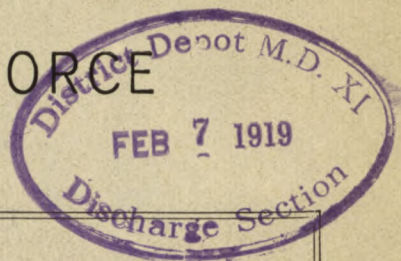
*Officer Commanding.*

*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.*



# CANADIAN EXPEDITIONARY FORCE

## Discharge Certificate



This is to Certify that No. 2557564 (Rank) Private

Name (in full) William Herbert Hunter enlisted in  
the 68th T.W. Bty. C.F.A.

CANADIAN EXPEDITIONARY FORCE at Vancouver B.C. on the 25  
day of April 19 18.

HE served in England

and is now discharged from the service by reason of Demobilization  
under B.O. 14200 of 12.12.18.

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows:—

Age 21  
Height 5' 5"  
Complexion W.B.  
Eyes Brown  
Hair " "

Marks or Scars

W. H. Hunter  
Signature of Soldier

H. H. Andrews  
Issuing Officer  
Capt.

Date of Discharge February 7, 1919 for O.C. District Depot XI  
Rank Capt.  
Appointment

Signed at Vancouver this 7 day of February 19 19.

in Military District No. XI

File Reference No. D.S.H. 4527

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.



CANADIAN EXPEDITIONARY FORCE  
Discharge Certificate

No. .... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

Medals and Decorations .....

Remarks .....

Signed at ..... this ..... day of ..... 19 .....

.....  
Name of Officer

.....  
Rank

.....  
Appointment

demobilization the  
particulars called for on  
the back of this cer-  
tificate will not be com-  
pleted.



CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 2557564 Rank Private Name W. H. Hunter  
Corps No 11. D.D. who was\* Discharged.  
On 7-2-19 191... to 191...  
\*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-1-19 191... to 7-2-19 191... the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month			Balance Cr. from prev. month		
Advances by Cheques } No. <u>Wyanus</u>	<u>30</u>	<u>00</u>	Reg'tl. Pay <u>38</u> days at \$ <u>1.00</u>	<u>38</u>	<u>00</u>
Assigned Pay and Sep'n Allice. No. <u>1st W.P. 19</u>	<u>70</u>		Field Allow. <u>38</u> days at \$ <u>10</u>	<u>380</u>	
Other charges <u>Ad for Tan</u>	<u>15</u>	<u>00</u>	Separation Allowances* (Monthly)		
Payment on transfer or discharge No. <u>blooming</u>	<u>35</u>		Other Allowances* <u>blooming</u>	<u>35</u>	<u>00</u>
Balance Cr. (to be paid by the new unit)			Other Credits* <u>P.D.P</u>	<u>73</u>	<u>20</u>
Total	<u>150</u>		Bal. Dr. (to be deducted by new unit)		
			Total	<u>150</u>	<u>00</u>

\*Give particulars.

A monthly stoppage of \$..... (†) has..... (‡) been paid on account of Assigned  
{ Pay for the month of ..... 191... }  
{ and Sep'n Allice. for month of ..... 191... } (to) Assignee .....

(Address) .....

(†) Insert amount to be assigned, whether it has been paid or not.  
(‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer.

Out Allowance of \$..... has been paid by Paymaster, Military District No. ....

REMARKS:—

- State (1) date of enlistment .....
- (2) if married and if a Separation Allowance Card has been submitted .....
- (3) cause of discharge ..... authority .....
- (4) authority for transfer .....

NOTE.—Separation Allowance and Assigned Pay Card and Index Card (M.F.W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay List of the Unit.

Date 7-2-19  
Place Vancouver B.C.

*[Signature]*  
Demobilization Paymaster. **Captain**  
M.D. No. 11

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay list at the end of the month, and quadruplicate for retention as a record.  
For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay list at the end of the month, and triplicate for retention as a record.  
If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.





*[Faint, illegible handwriting]*



M 84  
Number

2557564

Rank

Pte

Surname

HUNTER.

Christian Name

William Herbert.

Units

2 Can Tank Bn Theatre of War England

Date of Service

18-10-18

Remarks

60 E 17<sup>th</sup> Ave

Latest Address

~~18/5 Albernie St~~  
Vancouver B C

Roll No.

A Page 3346



DESP. MAY 26 1936

REGN. NO. 355-



V

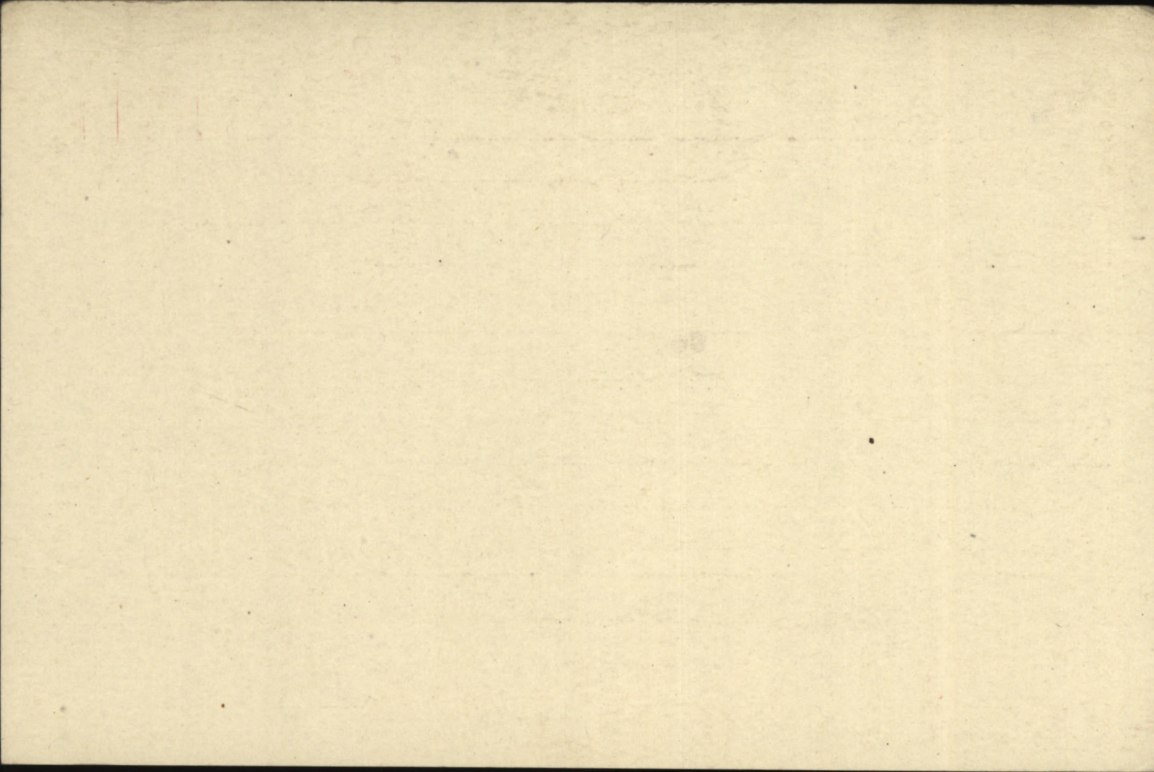
Surname Hunter  
Christian names William Herbert  
Regtl. No. 2554564 Rank Inv.  
Unit ~~68th Depo Bty~~ ~~2nd Arty Tank Bn. A.C.~~ # 11 L.C. 20

H. Q. ....  
M. D. No. 11  
T. O. S. Apr. 25th 1918  
D. O. Pt. II 123 of .....  
S. O. S. Dis 4 2 19 1911  
Reason demob.  
Auth. 20.0.410/10-2-19

Next of kin Hunter, Mrs. Marion Easton Relationship Mother  
Address Suite 40, Manhattan Apts. Also notify: .....  
1095 Robson St. Vancouver,  
B. C.

BORN—Place England, Liverpool Date July 5th 1898  
ATTESTED—Place Vancouver, B. C. Date April 25th 1918  
O/S 6-10-18 1468  
2 R/C 28-11-18 231  
148











HOSPITALS

DATE

DIAGNOSIS

M. F. W. 2553.  
75M.—9-19.  
1772-39-1332.



No. 255 7564 RANK *Ev.*NAME *Hunter W.* *H.*

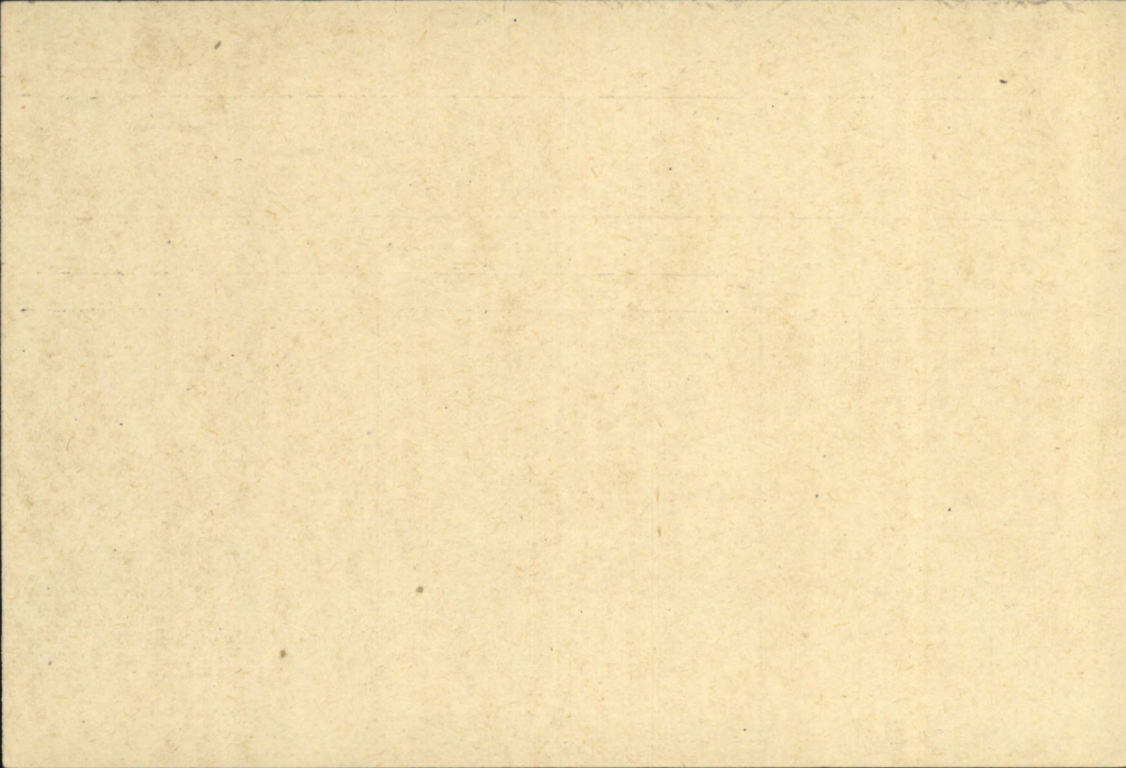
T. O. S. 25-4-18

UNIT *68th Depot Field Battery**00.12373-5-18*

M. D. //

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1918</i>	<i>1918</i>			
<i>April 25</i>	<i>May 31</i>	<i>n</i>		
<i>June</i>		<i>n</i>		







Name Hunter Jm Herbert Rank Gnr Regtl. No. 2557564

Original unit 68 Bty Present unit 2nd Lark M. or S. 20 Age 20 Religion Pres Ref. H.Q.

Port, ship and date of arrival Quebec Acpatania 28/11/18

Next of kin mother Suite 40 Manhattan Apts Vancouver B.C.

Address on leave

Address on discharge 1815 Alberni St. Vancouver B.C.

Transportation issued  Yes  No Date  Character on discharge

Previous occupation Daughtman Date and place of enlistment 25/4/18 Vancouver

Diagnosis Fit Date of Medical Boards 9/1/19.

Date.	Remarks.	Pt. 2 Order No.
Dec 9/18	T.O.S. J.S. 23/11/18 Postea CC 8/12/18 Leave 22/12/18	236/254/C
	Posted to Discharge Sec. Feb 7th 1919	39/208A

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



Date.

Remarks

Pl. 2 Order No.

M. F. W. 192

150m.—5-18

4772-39-1243



Rank **A Co I77 Dft** Name *HUNTER, WILLIAM, HERBERT,* Reg'l No. *2557564.*  
 Unit **2nd TANK BN** If in perm. Corps, }  
 What Unit? } Married or Single *Single.*

Place and Date of Enlistment *Vancouver, 25<sup>th</sup> Apr. 1918,* Place of Birth *Liverpool, Eng.*

Name and Address, Next-of-Kin *Mrs. Marion Easton Hunter,*  
*Suite 40, Manhattan Apts., Vancouver,* Relationship *Mother.*  
*Can.*

Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

Discharge, Date and Place Reason Character

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.				
		<i>Arrived in England.</i>		<i>13 10 18 S S VICTORIA</i>	
<i>28 19</i>	<i>CTDC</i>	<i>TOS FM 2nd TANK</i>	<i>BOVTON</i>	<i>18-1-19</i>	<i>pl 28</i>
<i>9/8/19</i>	<i>MST.P.</i>	<i>LOS to Canada</i>	<i>Pl London</i>	<i>22.11.18</i>	<i>a.d. 1.</i>
			<i>Sailing List 90</i>		







Date of Enlistment 25-4-18

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch H. 15286.

1 Oct 18

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

15.00			
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## PARTICULARS OF SEPARATION ALLOWANCE

## PARTICULARS OF ASSIGNMENT

No.				
Rank	Promoted	Reverted	Discharge	
Soldier's Name				
Battalion 2 <sup>nd</sup> Tank Bn				
Beneficiary				
Relationship				
Address				

Name	
Address	
Change of Address	
1	
2	MRS. MARION EASTEN HUNTER
3	STE. 40 MANHATTAN APTS.
4	VANCOUVER B.C. 15 15.00
	% 2557564 GNR. WILLIAM H. HUNTER
	FIFTEEN DOLLARS

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

Nov.	M. 596		30.	30.	
Dec.	K 63351		15.	15.	
			45.	45.	
			A/c Closed 31-12-18		
			Ret'd per. Aquitania		
			Date 28-11-18 F.X. 3-12-18		
			Clerk N.E. Howe		

9199-W-76

**CANADIAN  
ASSIGNED PAY AUDITED**

*OK [Signature]*  
AUDIT CLERK

DATE 9-6-19

M. F. W. 128.  
400M. 6-17-1772 39-1141  
L. L. 22220-M & D. 7883.

AUTHORITY FOR NEW ACCT }  
 P.M. 3 B. 11 }  
 P. Lagne 23-11-18 }



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

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## PARTICULARS OF SEPARATION ALLOWANCE

No. \_\_\_\_\_

Rank \_\_\_\_\_ Promoted \_\_\_\_\_ Reverted \_\_\_\_\_ Discharge \_\_\_\_\_

Soldier's Name \_\_\_\_\_

Battalion \_\_\_\_\_

Beneficiary \_\_\_\_\_

Relationship \_\_\_\_\_

Address \_\_\_\_\_

## PARTICULARS OF ASSIGNMENT

Name \_\_\_\_\_

Address \_\_\_\_\_

Change of Address \_\_\_\_\_

1 \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_

4 \_\_\_\_\_

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

M. F. W. 128  
 400M-6-17-1772-89-141  
 L. L. 22220-M. & D. 1993.

AUTHORITY }  
 FOR }  
 NEW ACC'T. }











KINMEL PARK

AUTHORITY  
A.P. NOM. ROLL

ASSIGNED PAY. EFFECTIVE DATE:- 1-10-18 AMOUNT:- \$15 <sup>00</sup>	ENGLAND or CANADA.	SEPARATION ALLOWANCE. EFFECTIVE DATE:- AMOUNT:-	ENGLAND or CANADA.	NAME:- HUNTER, William Herbert. NUMBER:- 2557564.																										
NAME, ADDRESS, RELATIONSHIP & AUTHORITY M <sup>rs</sup> Marion Easton, Hunter. (Mother) Suite 40, Manhattan, Apt. Vancouver B.C.				<table border="1"> <tr> <th>AUTHORITY</th> <th>DATE EFFECTIVE</th> <th>RANK OR APPOINTMENT</th> </tr> <tr> <td>L.P.C. from Canada</td> <td>1-10-18</td> <td>Cvt</td> </tr> </table>	AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT	L.P.C. from Canada	1-10-18	Cvt																				
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EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS				<table border="1"> <tr> <th>AUTHORITY</th> <th>DATE EFFECTIVE</th> <th>DATE LEDGER SHEET T'S'D</th> <th>UNIT TRANSFERRED TO</th> </tr> <tr> <td>L.P.C. from Canada</td> <td>1-10-18</td> <td></td> <td></td> </tr> </table>	AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO	L.P.C. from Canada	1-10-18																				
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L.P.C. from Canada	1-10-18																													
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AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE																										
L.P.C. from Canada	1	10																												

PARTICULARS OF RENDERING NON-EFFECTIVE: *Transferred Canada eff 1-10-18. Auth nom. roll. L.P.C. B.C. Cr. 23.37/10*

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
1918											
30/9/18	Bal. from Canada								1061		
Oct	Ple	34/10		b.a.p.				15			
				1510 J.B. 29/10	487				2488		
		<del>3100</del>			<del>487</del>			<del>15</del>			
Nov.	"	33		b.a.p.				15	4284		
		<del>6710</del>			<del>487</del>			<del>30</del>			
				4087 2TB. 16/10/18	1947				2337		
					<del>1947</del>						

CANADIAN  
ASSIGNED PAY AUDITED

AUDIT CLERK

DATE .....



