card
10-16

DUPLICATE

159TH BN

ATTESTATION PAPER.

No. 648464

~~159th BATTALION~~

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ..... Kelly.
1a. What are your Christian names? ..... Terrence
1b. What is your present address? ..... North Bay. Ont. Can
2. In what Town, Township or Parish, and in what Country were you born? ..... North Bay. Ont. Can
3. What is the name of your next-of kin? ..... Mat. Kelly.
4. What is the address of your next-of-kin? ..... North Bay Ont. Can
4a. What is the relationship of your next-of-kin? ..... Father.
5. What is the date of your birth? ..... June 20/ 1898
6. What is your Trade or Calling? ..... Student
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 97th Regt
10. Have you ever served in any Military Force? ..... No.
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? ..... Yes.
12. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force? ..... Yes.

Sufficient Address

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Terrence Kelly, 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.

Terrence Kelly (Signature of Recruit)

Date March 6 1916. J. W. Dunn (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Terrence Kelly, 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.

Terrence Kelly (Signature of Recruit)

Date March 6 1916. J. W. Dunn (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 North Bay this 6 day of March 1916

James MacCann (Signature of Justice)

Always present

M. F. W. 23.
200 M.—11-15.
H. Q. 1772-39-841.

Description of Terrence Kelly 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).

Height	5 ft. 8 1/8 ins.
Chest measurement. Girth when fully expanded	36 1/2 ins.
Chest measurement. Range of expansion	3 1/2 ins.
Complexion	fair
Eyes	blue
Hair	brown

Religious denominations

Church of England	
Presbyterian	
Methodist	
Baptist or Congregationalist	
Roman Catholic	X
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 Oct. 2 1916 A. E. Ramsay M.D.

Place North Bay Ont. Lieut.
Medical Officer.

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

Terrence Kelly 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.

C. O. Cameron Lieut. (Signature of Officer)
O. C. 154 Bn. C.E.F.

Date Oct. 10 1916

ORIGINAL

ATTESTATION PAPER.

No. 648464

~~159th BATTALION~~ Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ... Kelly
1a. What are your Christian names? ... Terrance
1b. What is your present address? ... North Bay Ont Can
2. In what Town, Township or Parish, and in what Country were you born? ... North Bay Ont Can
3. What is the name of your next-of kin? ... Mat Kelly
4. What is the address of your next-of-kin? ... North Bay Ont Can
4a. What is the relationship of your next-of-kin? ... Father
5. What is the date of your birth? ... June 20/1898
6. What is your Trade or Calling? ... Student
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 97th Regt
10. Have you ever served in any Military Force? ... No
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? ... Yes
12. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force? ... Yes

Sufficient Address

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Terrance Kelly, 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.

Terrance Kelly (Signature of Recruit)

Date March 6 1916. J.D. Neil (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Terrance Kelly, 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.

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Date March 6 1916. J.D. Neil (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 North Bay this 6 day of March ~~191~~.

James Bay Leary (Signature of Justice)

M. F. W. 23.
200 M.—11-15.
H. Q. 1772-39-841.

PUBLIC LIBRARY ONT

Description of Terrence Kelly on Enlistment.

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

Height ..... 5 ft. 8 1/8 ins.

Chest measurement.
- Girth when fully expanded ..... 36 1/2 ins.
- Range of expansion ..... 3 1/2 ins.

Complexion ..... fair

Eyes ..... blue

Hair ..... brown

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

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

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

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him* fit for the Canadian Over-Seas Expeditionary Force.

Date Oct. 2 1916. A. E. Ramsay, M.D.

Place North Bay Ont. Lt.
Medical Officer.

*Insert here "fit" or "unfit."

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

.....

.....

.....

.....

CERTIFICATE OF OFFICER COMMANDING UNIT.

Terrence Kelly 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.

C. O. Armstrong (Signature of Officer)
A. A. & Q. M. 59th Bn. C. E. F.

Date March 10 1916.

REGIMENTAL DOCUMENTS

NAME KELLY. TERRENCE. (Jos) REGT. NO. 648464 UNIT 1st Bn H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
	ATTESTATION PAPER (M.F.W. 23, 133, or 51)		DK 64-1-20			DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)		R31-1-20			
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)				C3902	
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Unstby
1	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)					DESERTION
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					
	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					31 19
	PARTICULARS OF CHARACTER (A.F.W. 3226)					3/23 19 9.
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
7	4643					1.
2	Was paid — 2447					
1	8473					
1	Pay Card — 3217 — 3497					
						# 406995

W 2589
100M-11-18
1772-39-1579

Number 648464 Rank A/Cpl

Surname KELLY

Christian Name Terrance

Units 4th C.R.T. Theatre of War France

Date of Service 24-2-17

Remarks

Latest Address Box 1309. North Bay. Ont.

Roll No. B Page 16248

200m-2-21.M.

DESP SEP 6 1922
REGN. NO. 35366

4"2 CARD NO. V

Postpd. 26-4-19. 2
Pd. 120 FOLL. 30-4-19
Remd. #2 DR.

SURNAME. Kelly

CHRISTIAN NAMES Terrence

REGL. No. 648464 RANK Pte.

UNIT 159th "

FORMER CORPS 94th " Regt.

Dn

NEXT OF KIN.

NAMES IN FULL Kelly, Mat.

RELATIONSHIP TO SOLDIER Father

ADDRESS North Bay, Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, North Bay, Ont. DATE June 20th 1898

PLACE OF ATTESTATION North Bay, Ont. DATE Mar 6th " 1916

P/C. 23-4-19. 3/11 5-2 Spr.

L. L. 6945. M. & D. 6994.

M. F. W. 22. 100M.—8-16. H. Q. 1772-39-338.

V

MARRIED SINGLE yes WIDOWER

TRADE OR CALLING Student RELIGION Roman Catholic

DESCRIPTION.

APPARENT AGE 18 YEARS — MONTHS

HEIGHT 5 FEET 8 1/8 INCHES

CHEST MEASUREMENT 36 1/2 INCHES EXPANSION 3 1/2 INCHES

COMPLEXION Fair EYES Blue HAIR Brown

DISTINGUISHING MARKS not stated

MEDICAL EXAMINATION. PLACE North Bay, Ont. DATE Oct 2nd 1916

Present address, North Bay, Ont.

Form R. 149.

Terrance

Name KELLY Rank Spr. Reg. No. 648464

Unit C.R.T.D.

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1919						
20-2	C.Sp.Stp.battery		20	439		14.55
26-3	Discharged		20	468		2817

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

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
6439 2/2	Can. Spec. Witley	25-2-19	28
6463 2/2	" " "	26-3-19	To Disch

NAME Kelly, T.

REGT. No. 6484464

RANK AND UNIT Spr. 6 P.I.

NEXT OF KIN

CABLE	
No.	DATE

NATURE OF CASUALTY

M. F. W. 42—100M.—8-18.
H.Q. 1772-39-893.

No. 64846 Rank Pte. Name Kelly, Terrance, A.

T. O. S. Unit 159th. Battalion, C.E.F.

M. D. 2.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Dec 1	1915 Dec. 31	V		UNIT SAILED
1916 Jan 1	1916 Jan 31	V		OCT 3 1 1916
Feb		V		
Mar		V		
Apr,		V	Prom. L/Cpl	D.O. North Bay. Mar. 1916.
May		"		
June		"		
July		"		
Aug.		"		
Sept.		"	A.W.L. 9 days.	do 128, Sept. 1916.
Oct		"		
Nov.		"	Prom. to Prov. rank & Cpl. 11/16	D.O. 18 & 3-11-16.

V.D.C. DIVISION. **VENEREAL DISEASE CASE-CARD.** Army Form W. 3497.

CANADIAN SPECIAL HOSPITAL, WITLEY.

Hospital. 48 14 Ward.

Age	Service	Religion	Disease
21	4/2/12.	R.C.	V.D.C. 1

Regiment	Coy.	Reg. No.	Rank	Name
C.R.T.D.		645464	Spr.	Kelly, J.

Date of Admission		Disposal	Date of Discharge
18 FEB 1919	1919	DISCHARGED TO DUTY.	26 MAR 1919

SUMMARY { This space not to be written upon by M. O. i/c case.

Cases of Syphilis. The particulars below must be sufficient to enable the Syphilis Certificate, Army Form I. 1210, to be made up from this Card.

Plus? Yes | Minus? Yes

1st, 2nd, 3rd attack or relapse — / / /

Dates and Places of Three last Exposures { Liverpool Jan 6th

Main points in history

P.T. before and after? — Incubation in days?

Prostitute? + Other social data: nons

If relapse, particulars:

Mental discharge: + Character: Bad

Condition on admission

Scabies — Pediculosis: — Structural Abnormalities:

Complications: (a) Local:

(b) Metastatic:

Nature of any co-existing Venereal disease:

Woman's name and address:

Treatment } Note on suggestions from Officer i/c Treatment.

Date 3 3

[P.T.O.

(9 19 44) W210—P1 200,000 10/17 HWV(P1148) Forms W. 3497/4
1810—P1224 200,000 5/18.

Spr. Kelly J. 48.

Date	Treatment		Progress	Complications and their Treatment
	Local	General		
19/2	Inj 3 Zepp	1.		Smear. 202.19. Gl positive XX
20/2.	"	"	P.O ++.	
24/2.	"	2.	M.P.O+.	
27/2.	"	2.	P.O+.	
2/3.	"	2.	P.O+.	
8/3.	2.		N.D.(sm.)	clear - f. tel.
12/3			N.D.	much.
15/3.			N.D	d. clear.
22/3.			ND.	Smear 16.3. no pus or gc.

Discharged

Surname	Christian Name or Names	Reg. No.
KELLY.	T.	648464.
Rank 1 Spr.	Unit 1. C.R.T.Dp.	
2.	2.	
3.	3.	
4.	4.	

Cas List.	Hospital and Diagnosis.	Date
25-2-19.C439/2	C.S. Witley.	20-2-19.
	V.D.G.6.	
21. 3.19 C468/2	Disc.	26. 3.19

A.M.D. 2 DEPT.

Bch. of D.G.M.S. O.M.F.C. London

Cas. List.	Hospital and Diagnosis.	Date

Veterans Affairs | Affaires des anciens combattants

NIC

DEATH NOTIFICATION — *AVIS DE DÉCÈS*

FILE NO — *DOSSIER N°*: 0420950

NAME — *NOM*: Kelly Terrance A

SERVICE NO — *MATRICULE*: 648464 army WW1

DATE OF DEATH — *DATE DU DÉCÈS*: 14/6/79

CPC NO — *CCP N°*:

WVA — *AAC. N°*: 6322648

PLACE OF DEATH — *ENDROIT DU DÉCÈS*: North york, Ont

INFORMATION RECEIVED FROM — *INFORMATION RECUE DE*

DVA 93 Willowdale, Ont.

ayron Lapointe
FOR RECORDS MANAGER — *POUR LE GESTIONNAIRE DE POSSIERS*

6/11/79
DATE

DVA 24 (6-79)
7530-21-036-5730

2 — CFRC — *DAFC*

War Service Badge. Class A 281493 No. - Issued.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 648464 (Rank) Spr

Name (in full) Terrence KELLY enlisted in

the 159th Bn

CANADIAN EXPEDITIONARY FORCE at North Bay, Ont on the 2nd

day of Oct. 19 15.

HE served in Canada, England, France and Belgium

and is now discharged from the service by reason of Demobilization

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

Age 21 yrs.	Marks or Scars Nil
Height 5' 8 1/8"	
Complexion Fair	
Eyes Blue	
Hair Brown	

T Kelly
Signature of Soldier

Bruce Thompson Lieut
Issuing Officer
For
O.C. No. 2 District Depot.
Rank
Appointment

Date of Discharge April 26, 1919

Signed at Toronto this 26th day of April 19 19.

in Military District No. 2

File Reference No.

Dispersal Station No. 2 APR 26 1919 Military District No. 2

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. W. 39a.
250m —6-18.
H. Q. 1772-39-882.

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 .....

.....

On demobilization the particulars called for on the back of this certificate will not be completed.

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

.....
Name of Officer

.....
Rank

.....
Appointment

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

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

INSTRUCTIONS.

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

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

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

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

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

---

(1) Name of Overseas Unit which Soldier joins 159th Battalion 1st Algonquins

(2) Regimental Number 648404

(3) Full Name of Soldier Terrence Kelly

(4) Place of Birth North Bay Ont

(5) Are you married, or not ? no

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

(b) Present Postal Address North Bay Ont

(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.

300M.—5-16.
1273-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes

If so, state name and address Mathew Kelly

(10) Is your Mother alive? Yes

If so, state name and address Mrs M Kelly
North Bay Ont

(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? Metropolitan Life Co.

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.

[signature] Lt.
Commanding 139th Battalion, C.E.F.
Officer Commanding.

Date SEP 30 1910

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

KNOTTY ASH CAMP,
LIVERPOOL.

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. 64464 Rank Spr. Surname KELLY
(Given name in full)
TERRANCE

Unit or Corps C.R.T.D. Birthplace NORTH BAY ONT.

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

1. **GENERAL DESCRIPTION:**

Physique Good Weight 145 lbs. Height 5 ft. 10 in. Colour of Eyes Grey

Nutrition Good

Pulse Sd

Condition of arteries Nor

Vision Rt. 6/6 Left 6/6

Hearing (conversational voice) Rt. 9/ ft.

Left 9/ ft.

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

Nil.

Opinion as to general health and physical condition Nor

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 ~~Syp~~ 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.

V.D.G. witley 19/2/19 to 26/3/19.
no disability.

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

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

RAGTTY ASH CAMP, LIVERPOOL.

Examined at ..... (Overseas)

Date 11-2-19 Signed W. M. Stattock Lt. 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 ..... (Canada)

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

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

Signature .....

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

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

[OVER]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-39-1142.

C.A.D.C. 5009A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) KELLY. T.

REGIMENT C.R.T. RANK Spr. No. 648464

Date of Examination in England 31/1/19 | Date of Examination in France

DIRECTIONS TO DENTAL OFFICERS

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

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 4. 8. 15.
2. EXTRACTIONS 3. 5. 13
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 Yes.

KNOTTY ASH CAMP, LIVERPOOL

Signature of Dental Officer W. Kennedy Lt.

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Kelly *Christian Name* Terence

Examined { on 2 day of Oct 1915
at North Bay Ont

Approved by
A E Parry MD
Rank Lieut M.O.

Birthplace { City or Town North Bay
County Nipissing

Apparent age 18

Trade or occupation Student

Height 5 Feet 8 7/8 Inches.

Weight 130 Lbs.

Chest measurement { Minimum 33 inches.
Maximum expansion 36½ inches.

Physical development good

Small-Pox Marks none

Vaccination Marks { Arm Right. Left.
Number 0 0

When Vaccinated last never

(a) Marks indicating congenital peculiarities or previous disease nil

(b) Slight defects but not sufficient to cause rejection nil

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

Date.	Result.	Vaccinations.
Sept.	13-16	A Gushue M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
March 3/16		Dr. H. J. Stephens M.O.
Aug. 2/16		Dr. H. J. Stephens M.O.
		M.O.

Enlisted on 2nd *day of* October 1916 *at* North Bay, Ont Canada

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	159th BATTALION	648464		
Transferred to	8th Res. Bn.			30/1/17
	Railway Construction Corps			7/2/17
	4th Bn. C.R.T.			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
KNOTTY ASH CAMP, LIVERPOOL.	11-2-19	Sil. A.	M Stattick Lt
do	1/4/19		

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

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

Surname Kelly Christian Name Veronica

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
CANADIAN SPECIAL HOSPITAL WITLEY, SURREY		19	2	19	26	3	19	Gonorrhoea	36	APPARENTLY CURED. INJECTIONS AND MEDICINES. STOPPAGES AS PER DATES.	T. O'Neil capt. CAPT. REGISTRAR.

R—122
8,401—50,000—21-10-16.

JM.

Rank A/Corpl Name KELLY, Terrance. Reg'l No. 648464

Unit 159th Bn. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment North Bay. 6th March 1916. Place of Birth North Bay, Ont, Can.

Name and Address, Next-of-Kin Mat. Kelly.

North Bay, Ont, Canada. Relationship Father.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

M.E. R.B. No 9690.
File R.L.
Category Can C R

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
		Arrived in ENGLAND S.S. Empress of Britain		11-11-16.	
27/11/16.	159th Bn	Appd A/Corpl	Seaford	11/11/16	Pt II D.O. 172,
		30.1.17 159th Bn SOS to 8th. Res-Bn	Seaford.	30.1.17	D.O. 30
		7.2.17 8th Res. Bn T.O.S FROM 159th Bn	Shoreham	30-1-17	D.O. 38
		7.2.17 8th Res. Bn SOS to Can. Ry. Troops	Shoreham	7-2-17	DO38
		8-2-17 Depot, CRT T.O.S From 8th Res. Bn	Purfleet	8.2.17.	Pt. 11 DO 28
		8-2-17 Depot CRT S.O.S To 8th C.R.T.	Purfleet	9.2.17.	Pt. 11. DO 28 4th ERY Pt 30. 10 4.2.17
1-3-17	Depot C.R.T.	Reverts to Rank, own request	"	10.2.17	— 49
		Embarked for France			
23.3.17	4th C.R.T.	Arrived in France	Field	24.2.17	Pt 40. 27

A.F.B. 103 CHECKED 11 APR 1917

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.
24.1.19	4th C.R.I.	Posted to C.R.I.D.	Field: Spr	15.1.19	P.I. D.O.3.
29.1.19	C.R.D.	TOS from 4th C.R.I.	Spr Knotty Ash	26.1.19	Nom. 24
4.4.19	" "	SOS to MD2	" "	3.4.19	" " 89 MD3 Do 8/2 d/2.4.19
		H4 - 1 - 138.		16.4.19	
17-4-19	MD.C.W2	S.O.S. to Canada	Pte. Rhyl	16.4.19	——→

J213

Fill in Only.—U[illegible] 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 159th BATTALION

Regimental No. 648464. Rank Pte. Name Kelly, Terrance.

C. E. F.

Enlisted (a) 6/3/16 Terms of Service (a) C.E.F. Service reckons from (a) 6/3/16

Date of promotion to present rank. 11.11.16 Date of appointment to lance rank [illegible] Numerical position on roll of N. C. Os. #69

Extended [illegible] Re-engaged [illegible] Qualification (b) Student

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.
	O.C.	Embarkation Canada Oct. 31/16. Arrival England Nov. 11/16.			
27.11.16	159th Bn	Appointed A/cpl.	Seaford	11.11.16	Pt. 2 Orders No. 172
30/1/17	159th Bn.	Trans. to 8th Res. Bn.	Shoreham	~~1~~/2/17 30.1.	D.O. Pt. II ~~32~~ 30
~~30/1/17~~ 7.2.	8th Res. Bn.	Taken on strength 8th Res. Bn.	"	~~7~~/2/17 30.1.	Rio Kerr " Capt Adjt 8th Res
7/2/17	"	Trans. to Rly. Constr. Corps	Purfleet	" 7.2.17	Rio Kerr " 38 Capt Adjt 8th Res
8-2-17	Depot C.R.T.	Taken on strength Depot C.R.T.	Purfleet 8-2-17		D.O. 28 Pt. II of 8-2-17
"	Depot C.R.T.	Trans. to 4th Bn. C.R.T.	"	"	[illegible] ADJUTANT, DEPOT CAN. RLY. TROOPS.
8/2/17	4th Bn. C.R.T.	Taken on strength	Purfleet	8/2/17	D.O. Part II No 10
24/2/17	4th Bn C.R.T.	Proceeded overseas	Purfleet	24/2/17	D.O. Part II No 44 [illegible] ADJUTANT, DEPOT CAN. RLY. TROOPS.

(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.

CERTIFIED CORRECT
25 APR. 1917
(W. REGDS. LDN.)

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.
1.2.17	Depot 6th B	Reverts to ranks own request.	Purfleet.	10.2.17.	Pt 20 # 49
					Dillontheconte LIEUT. FOR LT: COL: I/C RECORDS, C.O.M.F.
		Landed in France	Boulogne	24.2.17	L.R. 4658. pt II O.N. 24 9/23 3/19.
9.2.18	Obelisk	Granted 14 days LEAVE	Calais	11.2.18	AFB 213 Pt. II
					DO 8 17-2-18
23.2.18	do	Returned from LEAVE		28.2.18	
		~~Granted — days LEAVE~~			
16.1.19	62nd D.	Trans. to Eng. for demob. to CRD. Witley	Embarked	17 19	AFB Do 3 3d/1919
					Thos. S. Rafwell. Lieut. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.
29 JAN 1919	CRTD	Taken On Strength s.o.s. to Kinmel	Knotty Ash	26/1/19	pt II 24
~~6/2/14~~	CRTD	Part II Attached C.C.C. Kinmel Park for return to Canada. Part II Orders No _____. Ceases to be attached C.C.C. Kinmel Park on embarking for Canada, Part II Order No: 2-7/1/19	KNOTTY ASH		PART 2
4 APR 1919		Commandant _____ Wing, Kinmel Park Camp.			Canadian Railway Troops.

Embarked Liverpool SS BELGIC April 18th 1919
Disembarked Halifax April 23/19
Capt & Adj.
89
2C

2/

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

M. F. W. 54. (A. F. B. [redacted]
350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps .....

Regimental No. 648464 Rank Pte C. E. F. Name Kelly Terrance

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				
APR 16 1919	O. S.	T. O. S. No. 2 DISTRICT DEPOT, TORONTO 1919 PART II D. O. 120			
APR 26 1919	S. O. S.	(DISCHARGED FROM H. M. S.) No. 2 DIS. DEPOT, PART II D. O. 120			

W C Kouth Lieut.
For O. C. No. 2 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				

L. L. Job 4503.—M. & D. 6332.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

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

To Whom Mrs M. Kelly

Address Box 1309 - North - Bay
Ont -

Rate 15 00

NOV 1 1916

By Whom Assigned Kelly J

Regtl. No. 648464

Rank L/C.

Corps 134th Bn. C E F

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

CONSOLIDATED 6 ACCOUNT

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—6-16.
1772—39—819.

Sheet No. 2. Mrs M. Kelly

L. L. Job 4503. - Req. 6832.

Name of Soldier. Kelly J.

648464 - L/C. 154th Bn. CEF

15-00

NOV 1 1916

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.		L 30639	15	
Dec.		N 36382	15	
Jan.	1917	H 38177	15	
Feb.		H 41135	15	
March		B 51031	15	15 P.
April		Y 2531	15	15 Ca
May		Y 9308	15	
June		W 17491	15	
July		Y 22535	15	Ba
Aug.		Y 30054	15	
Sept.		Y 36787	15	
Oct.		J 43037	15	
Nov.		M 49373	15	
Dec.		P 56482	15	210 00
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

P. 559
MARRIED OR SINGLE: S.

PLACE OF BIRTH: North Bay Ont. Canada

NAME AND ADDRESS OF NEXT OF KIN: Mrs M. Kelly
Box 1309 North Bay Ont.

RELATIONSHIP OF NEXT OF KIN: Mother

NAME AND ADDRESS OF NEXT OF KIN:

RELATIONSHIP OF NEXT OF KIN:

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO:

RELATIONSHIP OF DEPENDANT:

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Promoted to rank Corpl	1/11/16	D.0154 3/11/16

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 648464 RANK ~~Pte~~ Corpl NAME Kelly Terrance

IF IN PERMT. CORPS WHAT UNIT | UNIT 15 9th Bn TRANSFERRED TO 8 Res. Bn. DATE 1-2-17 AUTHORITY M.O. 69

PERMANENT FORCE ALLOWANCES TRANSFERRED TO 4th Bn D.R.D. DATE 11/3/17 AUTHORITY M.O. 22-1-17 & 10-8-17

PLACE OF ATTESTATION North Bay Ont. TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 2/10/15 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 15 00 DATE EFFECTIVE Nov 1-1916

PAYABLE TO Mrs M. Kelly Box 1309 North Bay Ont. RELATIONSHIP Mother

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE 1916	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
														6 10	6 10															6 10				Bal from Canada
Nov 1-30	30	1 10	33 -		30 10		3 -								36			19	17/11/16					14 60			15	29 60	12 50					
Dec 1-31	31	1 10	34 10		31 10		3 10								37 20			46	8/12/16					2 43			15	17 43	32 27					
1917 Jan 1/16	15	1 10/20	6 10												18									14 60			15	29 60	20 67					
Jan 16/31	16	1 10	17 60												17 60															38 27		4 50		2/8 Ka Fm 1-2-17 K.O.69 22-1-17 Posted as Private pay in error.
Feb 1-28	28	1 10	30 80											1 60	32 20												15	15 91 63	58 47		6 -	57 47		1.60 other books to rejoin Army error in Army
Mch 1-10	10	1 10	11 -												11 - 167 10												15	15 106 13	55 47					Trans K 4th Bn C.R.D.
"	21	"	25 20												25 20	64	16/2	95	14/3					4 87	2 62				19 84	60 83		7 50			
																43	9/2	168	17/3					9 74	2 61									
Apl	30		36												36		39 3/4							2 61			15	17 61	79 22		9			
May	31		34 20												37 20		97 22/4							2 62			15	17 62	98 80		10 50			
June	30		36												36		154 75							5 36			15	20 36	114 44		12			
July	31		37 20												37 20												15	15	136 64					
Aug	31		34 20												37 20		210 4/6							5 36			15	20 36	153 48					
Sept	30		36												36		324 17/7	425	27/8					2 67	2 68									
																	321 17/7	376	2/8					2 67	2 68				28 37	161 11		16 50		
																	266 7/7																	

C # 648464 Kelly. J. 8/15.00

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
MONTH 1917	PARTICULARS		CR. 1	CR. 2	PARTICULARS									DR. 1	DR. 2	CR3	CR4	BALANCE	DEFERRED PAY	SER ALLCE ENG.	MONTH	PARTICULARS						DR. 1	DR. 2	DR3	DR4	BALANCE	DEFER SER ALL PAY ENG
Sept.	Bal for.		~~61 11~~																														161 11	
					4RT.																													
Oct.	Cpl. P.		37 20		453	2-9-17.								8 92				15																
"					aR. 545	15/9	4RT.							2 67																				
"					2N. aR. 199	29/1	159 Bde							14 60																				
"					" " 152	13/7	"							7 30				14982	18.00															
			37 20											33 49				15																
Nov																		15															
"	Cpl P.		36		aR. 599.	4/10.	4RT.							268																			
"					" 656	15/10	"							3 57																				
Dec	Cpl P		37 20		" 711	2/11	"							3 54				15	183	20.														
			73 20											9 82				30																
Jan 1918	Cpl P		37 20															15															
					aR. 768.	18/11.	4RT.							3 54					201	83.														
			37 20											3 54				15																
Jan	"		33 60		aR. 819.	5/12	"							1249																				
					" 874	17/12	"							3 54																				
					Feb aR.													15																
					aR. 921	18/1	4RT							7 14																				
					" 975	1/2.	"							7 14				15	190	09														
			33 60											60 34					37 20														
Feb.	"		~~34~~ 20		" 3338	3/2	"							97 33					227 29														
						aR.								17 33					124 87														
					aR. 1044.	1/3	"							3 57				15	102	47	25 cr														
														100 90																				
			37 20		" 1098	30/3	"							8 92																				
														109 82				15																

P 820
12474—375H—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1. 11. 16.	EFFECTIVE DATE:-
AMOUNT:- 15.00	AMOUNT:-

NAME:- KELLY, Terrance

NUMBER:- 648464

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.

Mrs. A. Kelly
Box 1309
North Bay, Ont
(mother)

Stopped Eff 1-3-19

L 2659
W.B. 2
Knotty Ashes
Park

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Corp.
D.O. 44 1/3/17 CR TD	10/2/17.	Spr.

UNIT AND TRANSFERS

ORIGINAL UNIT:- 159th Bn

DATE ACCOUNT FIRST OPENED:- 1. 11. 16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			4th C.M.T.

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
30/12/18	1652	Field	13 06				
1/1/19	1684	"	3 33				
~~1/2/19~~	5173	~~C.A.F.D.~~	97 33				
			114 12				

DAILY RATES OF PAY AND ALLOWANCES

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

Ledger Bal 202.53
L.F.A. " 88 41
Effs 114 12

PARTICULARS OF RENDERING NON-EFFECTIVE: Dis to Can 28-2-19 HR 2659 H. Cash 6-2-19 K. Cash M. D 2

MONTH 1918.	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									102 47	25.	
April	Bag for C.P.	36.		26. 2/4/18. 4 CRT.	3 57						
				115 15/4/18. "	3 57						
				Ca Pay.				15 -			
				10/2/17. 3/4/18. 4 HS dy @ 10d		44 50			71 83	25	
		36.			7 14	44 50		15 -			
May	CP	~~37 20~~		Ca Pay.				15.			
	Ord. 17 6-6-18 P.P.	34 10		225 1/5/18. 4 CRT	3 57						
				327. 15/5/18 do	3 57				83 79	25.	
		34 10			7 14			15.			
June	P.P.	33.		Ca Pay				15.			
				426. 1/6/18. 4 CRT	8 92						
				581 15/6/18 do.	3 57				89 30		
		33.		12.49	12 49			15.			
July	P.P	34 10		C & P				15			
				630 2/7/18. 4 CRT.	3 57						
				731 16/7/18. do.	3 57				101 26		
		34 10		7.14	7 14			15.			
Aug	P.P.	34 10		Ca Pay				15.			
				816. 1/8/18. 4 CRT	3 57				116 79		
				911 18/8/18 do.	7 14				109 65		
		34 10		10.71	10 71			15.			
Sept	P.P.	33.		Ca Pay.				15.			
				1033 1-9-18. 4 CRT	3 57						
				1125 15-9-18 do.	3 57				120 51		
		33.		7.14	7 14			15.			

COMPILED BY A.S. Stewart
CHECKED BY J.P. Ryckman

NUMBER 648464 RANK NAME KELLY. Terrance.

MONTH	PARTICULARS	Cr. 1.	Cr. 2.	PARTICULARS	Dr. 1	Dr. 2	Dr. 3.	Dr. 4.	BALANCE	DEFERRED	SEPARATION
				Sept Bal Forward					120 51	25	
Oct	P P	34 10							154 61		
				On Pay				15 -	139 61		
				1268 3/10/18 4 CRT ⊙	3 73				135 88		
		34 10			3 73			15			
Nov	P. P	33							168 88		
				C of P				15	153 88		
				1386 1/11/18 4 CRT "	7 46				146 42		
Dec	P.P.	34 10							180 52		
				C & S				15	165 52		
Jan.	P. P.	34 10		C. of P.				15	184 62		
		101 20			7 46			45 -			
Feb	P. P.	30 80						15			
	Int on Off Pay to 28-2-19	2 11		1652 39.12 7 CRT	13 06				202 53	25	
				1684 1/1 4 CRT	3 73						
				5173 - 1-2-19 C.R.T.D.	97 33						
				V.D. stoppages 19-2-19-26-3-19		21 60					
				36 days. D/o 27/3/19. C.R.T.D.					66 81		
		32 91			114 12	21 60		15			
				8723 26 1/3/19 C.R.T.D. (6)	- 16				66 65		
				146 1/4/19 C.R.T.D. Endo L.P.C. (15)	9 73				56 92		
				1219 8 1/4/19 4 CRT " " (32)	9 73				47 19		
					19 62						
				D.O.S. 16-4-19 $16.44 CRT MD. 2.							

Report No. A1

Army Form W. 3212.
(In books of 100.)

Regtl. No., Rank and Name 648464 Kelly T. Age 21 Corps C.R.T.

Disease V.D.9 Hospital CANADIAN SPECIAL, WITLEY, SURREY.

To Officer i/c Laboratory. Ward 48

Please carry out an examination of the accompanying specimen of Urethral D.

with special regard to Gon. and G.C.

Nos. of previous Reports (if any)

In Pathological Reports a résumé of clinical history, treatment or progress since last report should be given.

Date 15/3/19

O. i/c Ward.

LABORATORY REPORT.

8

No Tubercle Bacilli found.

Canadian General Laboratory
17 MAR 1919
WITLEY

Date of Examination

O. i/c Laboratory.

(8690) W. 1369/P1107. 6,000 Bks. 8/5/18.—R. & J., Gy. (E 3123.)

LABORATORY REPORT

WAR SERVICE BADGE CLASS

281493

SERVICE GROUP 26

OCCUPATIONAL GROUP 19

M.D.2

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

Toronto
Mother
Student

1. No. 648464

2. Rank. Spr.

3. Name. Kelly Terence

4. Unit. CRTD 159 Bn

5. Date of Discharge APR 26 1919 Place TORONTO, ONT.

6. Reason for Discharge DEMOBILIZATION

7. Authority. No. 2. D.D., Part II, D.O.No. 120

8. Proposed Residence after Discharge Box 1309 North Bay Ont

Embarked Liverpool SS RELGIC April 16th 1919
Disembarked Halifax Apl 23/19
Capt & Adj.

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.?

T Kelly
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place No. 2 DISTRICT DEPOT

Date APR 26 1919 TORONTO

For O.C. No. 2 District Depot

Signature (O. C. Discharging Unit.)

E.R.J.

M.F.B. 218a—300M.-11-18—1772-39-113.

LIST OF DISCHARGE DOCUMENTS.

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

Group.....

Checked by No. .....

.....

Date.....

M.1167

DISPERSAL "I"

AUDITOR | PAYMASTER

"BELGIC" 23.4.19

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

M. OR S. | REGT. No. 648464 | RANK Spr. | NAME (IN FULL) KELLY, T. | (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? No | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 4 C.R.T. | IF IN P.F. WHAT UNIT? Same.

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 2.10.15 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ 15.00 allowed 30.4.19 by Ottawa | DATE EFFECTIVE

PAYABLE TO Mrs M Kelly | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Box 1209. North Bay, Ont.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE Toronto | DATE 26.4.19 | REASON Demob. | AUTHORITY D.O. 120 | IF ENTITLED TO POST DISCHARGE PAY yes

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.		$	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.		$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT								88	41	88	41																										88	41	
28.2.19																																							
1.5.19	63	1/10	68	20																41	06																		
					25	00																																	
					70	—																																	
																										45	—											
																				4	87	5	—															
								173	20											165	68													361	61				
																								26/4/19	70	—												
																														5	50								
		Wdy	15	00																																		
183 days			420	00				435	00																									755	00	359	50		
												May	27	63699	79	50																		155	00	280	00		
												June	13	70357	70	—																		225	—	210	—		
												July	18	70697	70	—																		295	—	140	—		
												Aug	21	71027	70	—																		365	—	70	—		
												Sept	20	71437	70	—																		435	—				
			420	—	15	—		435	—																		429	50			5	50			435	—			

16/4/19 120

T.O.S. ..... D. ..... SUB ..... D. ..... D.O. .....

PARTICULARS OR REMARKS

Bal brot fwd

1.3 to 1.5 Pd

Clothing allce

1st W.S.Q.

Apl, May & Jun

Boat & train

allowance

W.S.Q. paid as above

5 days Pay & allce

May, June, Pay

and Allce.

CR Jul 7.5.19

CR Aug 7.6.19 T.O.D.

CR Sept 7.7.19 T.O.D.

CR To

W.S.Q. PAID IN FULL

CAPTAIN

FOR PAYMASTER WAR SERVICE GRATUITY

160M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1390.

825 K 4 29

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

1071

Date of Assignment Nov 1/16

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15.			

PARTICULARS OF SEPARATION ALLOWANCE

No. 648464.

Rank L/Cpl Promoted Reverted Discharge

Soldier's Name L. Kelly

Battalion 159th Battn

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs M. Kelly

Address Box 1309 - North Bay Ont

Change of Address

1

2

3

4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
Dec. 31			210	210	✓	
Jany 1918	P 69542		15	15	✓	
Feby	H 71395		15	15	-	
Mar	K 91722		15	15	-	
Apr	K 9217		15	15	-	
May	L 17117		15	15	-	
June	F. 15137		15	15	-	
July	R 32744		15	15	-	
Aug.	H 38028		15	15	-	
Sept-	J 47311		15	15	-	
Oct-	N 51586		15	15	✓	
Nov	E 56193		15	15	✓	
Dec.	K 68051		15	15	-	
Jan	K 72030		15	15	✓	
Feb	G 80731		15	15	✓	
Mar	G 8707		15	15	-	
Apr	H 1757		15	15	✓	

A/c Closed 30-4-19

AP Ret'd per Belgrade

S 450 Date 23-4-19 M.F.W.187 1-5-19

Closed J. Mahon

AUDITED.

M.O.2. MRO 98236

M. F. W. 128
400M—6-17—1772-39-1141
L. L. 22320—M. & D. 1393.

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

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—177-39-1141
L. L. 22320—M. & D. 7393.