

ATTESTATION PAPER

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

No. 88317

Folio.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

1. What is your name?
2. In what Town, Township, or Parish, and in what Country were you born?
3. What is the name of your next-of-kin?
4. What is the address of your next-of-kin?
5. What is the date of your birth?
6. What is your trade or calling?
7. Are you married?
8. Are you willing to be vaccinated or re-vaccinated?
9. Do you now belong to the Active Militia?
10. Have you ever served in any Military Force?
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement?
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?

Quintin Kennedy
Scotland
Maggie Kennedy (mother)
16 Kennedy, May 1st Scotland
24 April 1880
Farmer
no
yes
no
no
yes
yes

Quintin Kennedy (Signature of Man.)
J. F. McGinnis (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Quintin Kennedy*, do solemnly declare that the above answers made by me to the above questions 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.

Quintin Kennedy (Signature of Recruit.)
 Date *July 6th* 191*5* *J. F. McGinnis* (Signature of Witness.)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Quintin Kennedy*, 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.

Quintin Kennedy (Signature of Recruit.)
 Date *July 6th* 191*5* *J. F. McGinnis* (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 *Madison St* this *6th* day of *July* 191*5*

J. F. McGinnis (Signature of Justice.)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

J. F. McGinnis (Approving Officer.)

DESCRIPTION OF Quintin Kennedy ON ENLISTMENT.

Apparent Age 25 years 3 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 9 ins.

Chest measurement { Girth when fully expanded 36 ins.
Range of expansion 2 ins.

Complexion Fair

Eyes Greyish-blue

Hair Brown

Religious Denominations { Church of England
Presbyterian Pres.
Methodist
Baptist or Congregationalist
Other Protestants
(Denomination to be stated.)
Roman Catholic
Jewish

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.)

Large vaccination mark left arm.

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 6 1915 Anderson S. W.

Place Medicine Hat, Alta Capt A. M. C. Medical Officer.

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT

Quintin Kennedy 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.

Date July 6 1915 Capt. S. W. C. (Signature of Officer.)

Proceedings of Court of Inquiry or on men
reported Missing on Active Service.....

Anticipation Papers.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms.....

Proceedings on discharge.....

Corps History Sheet.....

Date and No. of Deposit Receipt for
Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

DISCHARGE DOCUMENTS

10 Name Kennedy Quinton

Regt. No 466317 Rank Pte

Corps 63rd O/A Bn C.E.F.
Phy. Unfit

R. O. No.....

H. Q. No.....

05445

12-19
18-19
31 19
3

Name Kennedy Q. *Quentin* Rank Pte.

Reg. No. 466317.

Unit 10th. Bat talion

Next of Kin ~~XXXXX~~.Maggie Kennedy 16 Greenside,
Maybole, Scotland.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
26/6/16.	No. 8. Stationary Hosp.	Wimer	GSW. Scalp.	A400.		M. 9294.
12/8/16.	To Entrenching Battalion	from CBD	A431.			
		G	SW. L. Leg.			
8/9/16.	Rejoined Unit		do	A458.		
21-1-17	No. 4 Gen. Hosp.	Camiers	P.U.O.	A558.		
2-2-17	No. 6 Conv. Depot	Etaples	P.U.O.	A569.		
4-2-17	Dis. to Details	Camp.	do	A569.		
1-3-17	Rej. Unit	Fr. Hosp		A593.		
10-4-17	No. 7 Can. Gen. Hosp.	Etaples	SW. L. Hand	A624		20-4.
14-4-17	New Cross Hosp.	Sherborne	GSW. Hand. Lf.	B349		M2466.
			SW. L. Leg.			

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
8-6-17	CD No. 1	Ontario	Gsw. Lf. Arm.	B414.		B 383
22-7-17	M.H. Orpington	GPI	Rt. Leg			
5-8-17	C.C.H. Bromley		do	B425		
14-8-17	Dis.		do	B438		

Deceased 2 Sep 55

Number 466 317

Rank

Ote

Surname KENNEDY

Christian Name

Quintin

Units

10 Bn Canby

Theatre of War

France

Date of Service

6/6/16

Remarks

Latest Address

Box 436.

Medicine Hat

Roll No.

B Page 15876

Alta

200m.-2-21.M.

DESP. AUG 20 1922

REGN. NO. GA33049

(649-K-1008)

CARD NO.

SURNAME.

Kennedy

CHRISTIAN NAMES

Quintin

REGL. NO.

466317

RANK

Plé

UNIT

63rd

FORMER CORPS

nil.

FOLL.

808 Div 31/12/17 T3

eli.

Batt.

NEXT OF KIN.

NAMES IN FULL

Kennedy, Mrs. Maggie

RELATIONSHIP TO SOLDIER

Mother.

ADDRESS

16 Greenside, Maybole, Scot.

CHANGE OF ADDRESS

COUNTRY OF BIRTH

Scotland.

DATE

Apr. 24th 1890

PLACE OF ATTESTATION

Medicine Hat, Alta.

DATE

July 6th 1915.

Op 22-4-16 391/15

R/C. 28-10-17

Returned to Canada per S S Grampian 18-10-17

MARRIED

SINGLE

yes.

WIDOWER

TRADE OR CALLING

Packer

RELIGION

Presbyterian.

DESCRIPTION.

APPARENT AGE

25

YEARS

3.

MONTHS

HEIGHT

5

FEET

9

INCHES

CHEST MEASUREMENT

36

INCHES

EXPANSION

2.

INCHES

COMPLEXION

Fair

EYES

Greyish Blue

HAIR

Brown.

DISTINGUISHING MARKS

Vaccination mark left arm.

MEDICAL EXAMINATION.

PLACE

Medicine Hat.

DATE

July 6th 1915.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 400	108 Stat. Winereux	8-6-16	G. L. W. Scalp.
A 431	Can. Base Depot To Luthersching Bath alonn	12-8-16	GSW. Leg
A. 458	Reported from Base.	8-9-16	(GSW Scalp.) Rejoined Unit.
A 558	No. 4 Gen. Dannes Camiers	21-1-17.	P. U. O.
A 569	No. 6 "Geno" Depot Etaples	2-2-17	P. U. O.
A 569	Disch to Detach Camp	4-2-17	P. U. O.
A 593	Rejoined Unit from Ho	1-3-17	Wk. Stated
A 624.	No 7 Can. Gen. Etaples	10-4-17	SW. Lf. hand
B. 349.	New Cross. Sherborne	14-4-17.	GSW. hand & lb. of
B 383	C. Div. C. inditer P. Epsom	8-6-17	" " Lt. Hand.
U.A. 133	Ont Mil Orpington	22-7-17	GSW. Lf. ^{arm} Rt. Leg

REG'T'L. No. 466317.

NAME

Kennedy, Quintin,

RANK AND COMPS

Pte. 10th Batt. (Form 63rd Bn)

CABLE

NO.

DATE

"S"

NATURE OF CASUALTY

M/9294. 4-7-16.

Adm to No 8 Stat Hosp. Wimereux
June 26th 1916 (G. S. W. Scalp.) ✓

M2466 21-4-17

Adm to #7 Gen Hosp Etaples
April 10th 1917 GSW hand ✓

No. 317
466 317.

RANK *Plt.*

NAME *Kennedy D.*

T.O.S. *6-7-15*
20.978-7-15.

UNIT *63rd Battalion C.E.F.*

M. D. / *3*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915</i> <i>July 6</i>	<i>1915</i> <i>July 31</i>	<i>✓</i>		
<i>Aug</i>		<i>✓</i>		
<i>Sept.</i>		<i>✓</i>		
<i>Oct.</i>		<i>O.S.</i>		
<i>Nov.</i>		<i>✓</i>	<i>Forfeited 2 days pay.</i>	<i>Nov. pay list</i>
<i>Dec.</i>		<i>✓</i>		
<i>1916</i> <i>Jan.</i>		<i>✓</i>		
<i>Feb.</i>		<i>✓</i>	<i>Fined \$2.00</i>	<i>Feb. "</i>
<i>Mar.</i>		<i>✓</i>		
<i>Apr.</i>		<i>21</i>		
				UNIT SAILED MAR 23 1916



NAME

Kennedy, Quintin

REGT'L No.

466317

H. Q. FILE NO. 649.

RANK AND CORPS

Pte. 10th Bn. (7888) 63rd Bn.

FOLLOWS

NO.

CABLE

NO.

DATE

NATURE OF CASUALTY

FOLLOWS

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
B 425-	^{ont.} Ex. trial. Hosp. Orpington Cam. Con. Bromley.	5-8-17	y. S. W. 2 arm. Rt leg. " " " " 4
B 438	Ditch.	148-17	

Surname

Christian Name or Names

Reg. No.

Kennedy. A.

466317.

Rank

Unit

Co.

Troop

Batty.

Pte.

10th Bat.

Hospital

Date of Admission

Transferred

8 Stahy. Winesbury Hosp. 6.6.16.

not G. H. Dannes Camiers Hosp. 21-1-17

6. Con. Dep. Etaples Hosp. 2.2.17.

4 Can. S. Hosp. 10.4.17.

Diagnosis

G. S. W. scalp.

(1)
Later Diagnosis (if changed)

G. S. W. Leg

(2)

P. V. O.

(3)

S. W. L. Hand. eff.

Additional Diagnosis: if more than one state present

DISPOSITION

Date

G. S. W. Dep 12.8.16
Reported Unit 8.9.16
REMARKSG. L. 5.7.16. A400 Reported from Base
19.8.16 A431 To Entrenching Batt.
Ch 2.1.9.16 A458
" 31-1-17 A558
" 13.2.14 A569
14.3.17 A543
21.4.17. A624
25.4.17 B349
15.6.14. B383
26.7.17 B444
- 9-8-17 B425Dis to 13.8.4.2.17
Ry. Unit 1.3.17.
Dis. 14.8.17.

A.M.D. 2 Dept.

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

P. H. G.

Rev. J. P.

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

- | | | |
|----|-------------------------|---------|
| 1. | New Cross H. Sherborne | 14.4.17 |
| | Woodcote. Pk. Epsom. | 8.6.17 |
| 2. | Santerid Mill Oxfington | 22.7.17 |
| 3. | Bromley Can. Convol. | 5.8.17 |
| 4. | | |
| 5. | | |
| 6. | | |
| 7. | | |

25.8.17. B438.

Duty.

C iii

Proceedings of Medical Board at Discharge Depot,
QUEBEC, Que.

No. 466317 Rank *Plt.* Name and Corps of disabled Soldier:— *Kennedy Dunlop 63rd Batta*
Previous civilian occupation:— *Shoemaker.*
Cause of Disability:— *Varicose veins.*

Condition, in detail, which prevents the soldier earning a full livelihood:—

This soldier states that he first noticed enlarged veins in Oct. /16. in calf of right leg. On 8/4/17. He was wounded in left hand and right lower leg. Wounds of hand and leg have healed and cause only slight disability. On calf of right leg there are small varicose veins that do not interfere with the circulation in the leg. He states that on walking half a mile the right leg feels wear. He should be able to walk few miles. Heart and lungs are normal. The enlarged veins are not large enough nor cause sufficient symptoms to warrant surgical interference.

OPINION OF THE BOARD.

Degree of incapacity. (Please state in fractions) *10%*

Probable duration of incapacity:— *6 mos.*

Does it render him permanently unfit for Military Service? *No*

Would operation, Special treatment, or use of appliances, etc., lessen incapacity? *No*

Signature:—

L. Cairns Capt
President.

Station:— *Quebec*

W. P. Craig Capt
R. Martin Buss. Capt Members

Date: *31/10/17.*

APPROVED.

Date: *Oct 31. 1917*

E. A. Robertson Capt
Asst. Director Medical Services.

Date:

Director General Medical Service.

OHS Rank

Name KENNEDY Quintin ✓

Reg'l No. 466317 ✓

Unit 63 Bn

If in perm. Corps,
What Unit? }

Married or Single Single ✓

Place and Date of Enlistment Medicine Hat July 6th. 1915 ✓

Place of Birth Scotland

Name and Address, Next-of-Kin Maggie Kennedy ✓

16 Greenside Maybole Scotland ✓

Relationship Mother ✓

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason

Character

N/E. R.B. No. 5200

File R.L.

Category *ban. R.*

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS.	
Date.	From whom received.				Taken from Official Documents.	
		<i>Arrived in England.</i>	<i>S.S. Metagama</i>	<i>5-5-16</i>		
<i>7-6-16</i>	<i>6663 Bn</i>	<i>Struck off to 11th Bn</i>	<i>Lydd</i>	<i>4-6-16</i>	<i>P.H. 8. 135</i>	
<i>6-6-16</i>	<i>6611 Bn</i>	<i>Taken on strength</i>	<i>Schiffa</i>	<i>4-6-16</i>	<i>134</i>	
<i>6-6-16</i>	<i>" "</i>	<i>Struck off to 10th Bn</i>	<i>Loresscas</i>	<i>6-6-16</i>	<i>134</i>	<i>AFB. Chd 5-7-16</i>
<i>21-6-16</i>	<i>10</i>	<i>Taken on strength</i>	<i>"</i>	<i>8-6-16</i>	<i>" "</i>	<i>25</i>
<i>3-7-16</i>	<i>OC 10</i>	<i># 8 Stat. Hosp.</i>	<i>Wimereux</i>	<i>24-6-16</i>	<i>b.d. #. 400. G. S. W. Scalp.</i>	
<i>19-8-16</i>	<i>OC 10</i>	<i>Can. Bn. Depot. to Entrenching</i>	<i>Amiens</i>	<i>12-8-16</i>	<i>" 431</i>	<i>" Leg</i>
<i>21-9-16</i>	<i>" "</i>	<i>Rejoined Unit</i>	<i>"</i>	<i>8-9-16</i>	<i>B.L. 1, 458</i>	<i>" "</i>
<i>31-1-17</i>	<i>" "</i>	<i>No 4 Gen Hosp</i>	<i>Dannes Camiers</i>	<i>21-1-17</i>	<i>B.L. 1558</i>	<i>P.M. 0</i>
<i>13-2-17</i>	<i>" "</i>	<i>No 6 Gen Depot</i>	<i>Etaples</i>	<i>2-2-17</i>	<i>Chd 569</i>	<i>"</i>

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.				
13-2-17	10 th Batt.	Discharged to details Camp.		4-2-17	LDN. 569. P. u. o.
14-3-17	" "	Rejoined Unit	Field	1-3-17	LDN 593 "
18. 4. 17.	" "	Invalided, W. Posted to.			
21. 4. 17.	"	alt. Reg. Depot. B' Shott.	Field.	11. 4. 17	alt. D.O. 491/27 th H. E 7640.
25. 4. 17.	"	N ^o 7 Can Gen. H. H. H.	Elap. Co.	10. 4. 17	EX A 264
	"	New. Cross H. H.	Shorthorn.	14. 4. 17.	CL B 349. & SW Hand. Sci
15. 6. 17	"	H. Can Div C. H. Wood's co. of Epsom.		8. 6. 17.	CL B 383. & SW Lt. Hd.
26. 7. 17	-	Ch. T. P. Ont. Mil. Hoop.	Oxington	22. 7. 17	Ch. B. 414 ✓
9. 8. 17	-	T. P. Can. Gen. Hoop.	Bramley	5. 8. 17	Ch. B. 425 ✓
25. 8. 17	-	Discharged from Hoop.	"	14. 8. 17	Ch. B. 438 ✓
16. 8. 17	alt. R.D.	Access to be patient in Hoop. Posted to Rep. Ho.	B' Shott	14. 8. 17	D.O. 160
15. 10. 17	"	Off. C. D. O. Buxton pending return to Canada for disposal by A. G. Ottawa.	"	15. 10. 17	D.O. 220
23. 10. 17	"	Access Off. to C. D. O. Buxton & S. O. I. having sailed to Can. and S. 25. P. 392 K. R. & O. 1912	"	18. 10. 17	D.O. 228
	Dech. Dep.	Fit for duty	Ind. 13 Calgary	28. 11. 17	NK 388.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS.

466317 P/L Kennedy L.

Date of Payment.	No of Acq. Roll	A M O U N T					Place of Payment.	Name of Paymaster.	Remarks.
		Francs	£	S.	¢	¢			
8/7/17	1290				4	75	Spem	A. R. Duck	✓
10/7/17	1843				4	87	Spem	R. Kane	✓
21/7/17	674				4	86	Spem	A. R. Duck	✓
10/6/17	179				4	86	Spem	A. R. Duck	✓
13/9/17	108				4	86	Spem	A. R. Duck	✓
5/8/17	127				4	87	Spem	A. R. Duck	✓
15/10/17	127				4	87	Spem	A. R. Duck	✓
					124	10	✓		

NUMBER OF RATIONS REQUIRED ...

HEAVY DRAFT HORSES.

TOTAL RATIONS AUTHORIZED AS ABOVE ...

DEDUCT: NUMBER OF RATIONS ON HAND ...

NUMBER OF RATIONS REQUIRED ...

HAY	STRAW	OATS	MAIZE	* BRAN	* LINSEED	* CORN	* ROCK

LIGHT DRAFT, RIDING HORSES AND MULES.

TOTAL RATIONS AUTHORIZED AS ABOVE ...

DEDUCT: NUMBER OF RATIONS ON HAND ...

NUMBER OF RATIONS REQUIRED ...

HAY	STRAW	OATS	MAIZE	* BRAN	* LINSEED	* CORN	* ROCK

* These Issues are only Equivalents in lieu of Oats if demanded by Units.

PLEASE DELIVER THE ABOVE RATIONS ON DAY, THE DAY OF

CERTIFIED CORRECT

APPROVED

QUARTER MASTER.

NOTE.—THIS INDENT MUST BE DELIVERED TO THE O. I/C. SUPPLIES, ACCOMPANIED BY DAILY PARADE STATE, NOT LATER THAN 10 A.M. DAILY FOR DELIVERIES TO

Ward 12 Hospital. 6 No. of Bed 6 Date July 23/17

Regl. No.	Rank and Name	Corps	Part to be X-Rayed
466317	Pte Kennedy	10th Can	Rt Leg. & L Hand.

SHORT HISTORY OF CASE.

(To be completed by M.O. i/c case)

2 Rde
S.W. 10th Can
Rt Leg.

Apr 8/17. VR.

L Hand

Apr 8/17

Rde 2 Rev. 1

Scotch

R.F. 6.6.5

B. G. Gilchrist

Signature of M.O.

Date

REPORT ON RESULT OF X-RAY EXAMINATION.

(To be completed by Radiographer.)

No. of Plate

L C 179 8 1/2 x 6 1/2 PA L Hand

R C 180 8 1/2 x 6 1/2 R Leg

L C 179 L Hand. Fracture of the third metacarpal close to the articulation with the os magnum. Position good.

R C 180 R Leg No apparent foreign body or injury to bone

Signature of Radiographer

Date

L Gilchrist
Capt

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

4816-97.

09938-Q-1

Name **KENNEDY, Quinton**
Surname Christian Name

Regimental Number **466317** Rank **Pte.**

Address (in full) **Box 436.**

Unit **63rd Bn. C.E.F.**

Medicine Hat, Alta.

Original Unit

District where paid **M.D. 13.**

Date of Discharge **31-12-17.**

P. D. P. Filing Number **10-68-13.**

Rates:—Regimental pay \$ **1.00** per diem: Field Allowance \$ **.10** per diem. Separation Allowance \$ per month.

L. L. 22573—M. & D. 8008.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over- payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
7500 10010	1033	24-1-18	25 00 33 00	1029	24-2-18	58 00	1030	24-3-18	59 10		175 10
100	93385	8/2/19	70 00								
9990 2nd	925883	27/2/19	70.00								

Remarks:

M. F. W. 127.
60M-6 17.
1772 39-1140.

Pte. Kennedy, Quentin

M. F. W. 41
1 OM-7-16
1772-39 889.

775

Regimental No. 466 317

Unit 63 Bn

Date of enlistment 6-7-15

Place of "Med. Stat

Married (yes or no) No (wid Mother)

Amount of pay assigned monthly \$15.00 Eng to 30/9/17

To whom payable Mrs M Kennedy

16 Greenside Mayfield
Grampian 28/10/17 ayswre Dist.

Name and address of next of kin Home Box 436 Medicine Hat, Alta

MD 3/10/17 Duty

SFA \$30.00 Eng to 30/9/17 - \$536.00
O/a emtd by C. P. R. closed 31/12/17

Date and place discharged Reason for discharge closed 31/12/17.

Character on discharge Dischd 31/12/17.

Cat III HQ. 649-K-1008

D. Job 5351-M. & D. 6880.

Date		PAY		Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate			No.	Date					
1 ¹⁶ / ₁₇	30 ⁹ / ₁₇	61	1-	61-	61	10	610	74 32							E. R. P. b.
													9 73		Post
									141 42				70.		b. D. Que
												30.			R. Det. Nov 17
															109 73 R. P. b. read 2 1/2
															3169 showing etc to 30/17
															141 42 Total to M. D. X III

Pensioned.

B. P. C. 20498 En. 1-1-18 \$60.00

hand.
27/11/17

Eng R. b. h. 1-5-16-30-9-17-255.00

M. F. W 41
1 0M—7.16
1772.39 889.

Name and address of next-of-kin

Date of enlistment

Place of “

Married (yes or no)

Date and place discharged

Amount of pay assigned monthly \$

Reason for discharge

To whom payable

Character on discharge

[illegible]

2nd. Contingent
MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12.
50m.—4-16.
H. Q. 1772-39-819.

443

To Whom *Mrs Maggie Kennedy*
Address *16 Grumside Maybole*
Ayrshire. Scotland

By Whom Assigned *Kennedy. S. R.*

Regtl. No. *466317*

Rank *Pte*

Corps *63rd Battn* *2nd Coy*

Rate *15* MAY 1 1916

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			ENGLISH
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				 A/c Closed Ret'd per <i>Grampian</i> Date <i>18-10-17</i> X <i>2.11.17</i> Clerk <i>E. H. H. H.</i> <i>Duplicate sent to England</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

6/2/15

MILITIA AND DEFENCE

362

SEPARATION ALLOWANCE

Name *Maggie Kennedy*Name of Soldier *Kennedy Quinton*Address *16 Greenside*Regtl. No. *A. 66314**Maypole*Rank *Pte**Ayrshire Scotland*Corps *63rd Battⁿ*

Relation to Soldier

Widowed

To what Corps belonging

wife, child or mother

Mother

when called out

PAYMENTS

ENGLISH

REMARKS

42229 M. CO.

Month

Year

Cheque
No.

Amt.

Aug.

1914

Sept.

Oct.

Nov.

Dec.

Jan.

1915

Feb.

March

Apl.

May

June

July

Aug.

Sept.

Oct.

Nov.

Dec.

Jan.

1916

Feb.

March

*Duplicate sent to England
for payment**Rec 31/2/17 A & L 3/1/18**7/1/18 Loney.**London notified 7/1/18 Loney.**A/c Closed**Ret'd per. Grampian.**Date 18-10-17. F. X 21-11-17**Clerk. E. Gauthier.*

MILITIA AND DEFENCE ASSIGNED PAY.

Kennedy. L.

To whom *Mr Maggie Kennedy*
Address *16 Greenside Maybole*
Dumfriesshire, Scot.

By whom assigned

Kennedy Linton

Regtl. No.

466217

Rank

P/1

Corps, &c.

60rd Bn

Rate

P. 15-00 Sep 2000
1.10.17

Date to Commence

*W mother.*

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Pay Sheet Deduction.	REMARKS.
Jan.	<i>1917</i> 1916		ASSIGNED PAY	SEPARATION ALL WANCE	<i>Disbanded 30/9/17</i>
Feb.					<i>C.B. B. Shott 26/9/17</i>
Mar.					
April					<i>Wrote on L.P.C.</i>
May					
June					
July					
Aug.					
Sept					
Oct.		<i>B1315A</i>	<i>10</i>	<i>20</i>	
Nov.		<i>B23099</i>	<i>15</i>	<i>20</i>	
Dec.		<i>B69733</i>	<i>15</i>	<i>25</i>	
Jan.	<i>1918</i> 1917		<i>Discharged 31/12/17</i>		
Feb.					
Mar.					
April					
May					
June					
July					
Aug.					

ASSIGNED PAY.

By whom assigned

Regtl. No.

Month.	Year.	Cheque No.	ASSIGNED Amount PAY	Pay Sheet. SEPARATION ALLOWANCE	REMARKS.
Sept.	1918 - 1917				
Oct.					
Nov.					
Dec.					
Jan.	1919 1918				
Feb.					
March					
April					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1920 1919				
Feb.					
March					

6/4/15
MILITIA AND DEFENCE

Solis 9110
Duplicate

SEPARATION ALLOWANCE

6494

Name *Maggie Kennedy*
Address *16 Greengate*

Name of Soldier *Kennedy Quinton*
Regtl. No. *466314*

Maybole
Maybole
Ayrshire Scot.

Rank *Pte.*
Corps *63rd Battn*

Relation to Soldier *Widowed*
wife, child or mother *Mother*
High St.
Maybole

To what Corps belonging
when called out

PAYMENTS

42229 M. CO.

Month	Year	Cheque No.	Amt.
Aug.	1914		
Sept.			
Oct.			
Nov.			
Dec.			
Jan.	1915		
Feb.			
March			
Apl.			
May			
June			
July			
Aug.			
Sept.		<i>L. 11435</i>	<i>56</i>
Oct.			
Nov.			
Dec.			<i>60</i>
Jan.	1916		
Feb.			
March			<i>60</i>

REMARKS

Marriage Certificate Produced

OCT 12 1915

Widowhood & sole support verified by Wm Shaw, Maybole, Ayrshire.

Widowhood & sole support verified by S. D. 10.1.17. B.M.

FILE

cc 158640/65-2

cc 7243894/06 60

Duplicate 2nd. Contingent
MILITIA AND DEFENCE

M. F. W. 12.

50m.—4-16.

H. Q. 1772-39-819.

14584

ASSIGNED PAY
OVERSEAS CONTINGENTS

To Whom

Address

Mrs Maggie Kennedy
16. Grunside, Maybole
Ayrshire Scotland.

By Whom Assigned

Regtl. No.

Rank

Corps

*Kennedy. S. Q.**466317.**Pte.**63rd Battrn**D.C.*Rate *1/5*, MAY 1 1916

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			RECEIVED FROM JUN 24 1916. OTTAWA.
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			RECEIVING SEPARATION ALLOWANCE \$ 70 EFFECTIVE July 1915 RELATIONSHIP wth Mother
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

ASSIGNED PAY. X

By whom assigned

G. Kennedy.

Regtl. No.

466317.

Co 63rd

Battⁿ

D. Coy.

Month	Year	Cheque No.	ASSIGNED PAY	Pay Sheet SEPARATION ALLOWANCE	REMARKS.
Jan.	1916				
Feb.					
March					
Apl.					
May.					
June	46937	46937	30		} May & June \$30
July		100229	15		
Aug.		133844	15		
Sept.		169363	15		
Oct.		201927	15		
Nov.	1105	247515	15		
Dec.		283852	15		
Jan.	1917	322296	15	370	Total amt Sep Dec to Jan 31/1917
Feb.		365291	15	20	
March		411305	15	20	Apr 1st checked & found correct E. B. McE. 10 th Apr
Apl.			165	416	
May			90	120	
June			255	536	
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					

WAR SERVICE GRATUITY and SEPARATION ALLOWANCE

Payable to *KENNEDY Mrs Alex,*

Dependent *466317 Kennedy L.*

Address *16 Greenside, Maybole, Ayrshire,
Scot.*

Address

Date	Cheque No.	Gratuity			Payments			Balance Due.			Remarks
<i>1919</i>		<i>30</i>	<i>16</i>	<i>5</i>							
<i>May 31</i>	<i>24007</i>				<i>6</i>	<i>3</i>	<i>3</i>	<i>24</i>	<i>13</i>	<i>2</i>	<i>Scot.</i>
<i>July 1.</i>	<i>40571.</i>				<i>6</i>	<i>3</i>	<i>3</i>	<i>18</i>	<i>9</i>	<i>11</i>	
<i>Aug 1.</i>	<i>60139.</i>				<i>6</i>	<i>3</i>	<i>3</i>	<i>12</i>	<i>6</i>	<i>8</i>	
<i>Aug 21</i>	<i>69439.</i>				<i>6</i>	<i>3</i>	<i>3</i>	<i>6</i>	<i>3</i>	<i>5</i>	
<i>Oct 16</i>	<i>121438</i>				<i>6</i>	<i>3</i>	<i>5</i>				
		<i>30</i>	<i>16</i>	<i>5</i>	<i>30</i>	<i>16</i>	<i>5</i>				

WAR SERVICE GRATUITY and SEPARATION ALLOWANCE

3

2

1

1

EDWARD

1

Remarks

Balance Due

Payments

Debts

Check No.

Date

MARRIED OR SINGLE
PLACE OF BIRTH Scotland
NAME AND ADDRESS OF NEXT OF KIN Maggie Kennedy
16 Greenside, Maybole, Ayrshire, Scot.
RELATIONSHIP OF NEXT OF KIN Mother
NAME AND ADDRESS OF NEXT OF KIN
RELATIONSHIP OF NEXT OF KIN
SEPARATION ALLOWANCE MONTHLY \$ 20 EFFECTIVE (DATE) 1-7-15
PAYABLE TO Maggie Kennedy
16 Greenside, Maybole, Ayrshire, Scot.
RELATIONSHIP OF DEPENDANT Widow

CASUALTIES, PROMOTIONS, &c.		
PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.			
DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L. No. 466317 RANK Private NAME Kennedy, Linton
IF IN PERM. CORPS } UNIT 63rd Bn TRANSFERRED TO 11th Bn DATE June 30 AUTHORITY B. 225/103
WHAT UNIT }
PERMANENT FORCE ALLOWANCES TRANSFERRED TO 10th DATE 16/7/16 AUTHORITY B. 225/103
PLACE OF ATTESTATION Medicine Hat, Alta TRANSFERRED TO A. B. D. DATE 21-8-17 AUTHORITY 349 34
DATE OF ATTESTATION 6th July 1915 TRANSFERRED TO Spt. R. (Kisican) DATE 1/10/17 AUTHORITY 249/17
ASSIGNED PAY MONTHLY \$ 15 DATE EFFECTIVE 1st May 1916
PAYABLE TO Mr. Maggie Kennedy, 16 Greenside, Maybole, Scotland RELATIONSHIP Mother 18 SEP 1918
ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE
PAYABLE TO B RELATIONSHIP
STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) Stopped EFFECTIVE 1.10.17 REASON Discharge
DISCHARGE DATE AND PLACE 10/10/17 REASON AND AUTHORITY C/A B. 225/103 26/9/17
ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) For Disposal
ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE) P. 305/B

Land checked and found correct. E. H. M. G. 10th Bn 20/3/17

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																											
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M/L 48 18/10/17 or 7432

Kennedy Quintin

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Kennedy Christian Name Quintin

Examined { on 6th day of July 1915 at Medicine Hat

Approved by

Birthplace { City or Town Scotland Rank Capt M.O.

Apparent age 25 yrs 3 mos

Trade or occupation Packer

Height 5 Feet 9 Inches M.O.

Weight _____ Lbs. M.O.

Chest measurement { Minimum 34 inches M.O.

{ Maximum expansion 36 inches M.O.

Physical development _____ M.O.

Small-Pox Marks _____ M.O.

Vaccination Marks { Arm _____ Right _____ Left _____
Number 1

When Vaccinated last 1900 28-10-15 C. J. McInnon M.O.

(a) Marks indicating congenital peculiarities or previous disease _____ M.O.

(b) Slight defects but not sufficient to cause rejection _____ M.O.

21-8-15 Reaction C. J. McInnon M.O.

2-9-15 Reaction C. J. McInnon M.O.

_____ M.O.

Enlisted on 6th day of July 1915 at Medicine Hat

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>63rd Batt</u>	<u>466317</u>		<u>6/7/15</u>
Transferred to.. ..	<u>10th Bn.</u>			<u>4-6-16</u>
	<u>ARD.</u>			<u>11-4-17.</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Calgary.</u>	<u>Nov 21/17</u>	<u>Varicose veins</u>	<u>"E" E. Whinn</u> <u>Capt AMB</u>

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.

Surname *Kennedy*
 Christian Name *Lambert*

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				
8. Sh. Hosp. Wimsen		8	6	16	12	8	16	G.S.W. Scap.	4		A400. A431.
Can : Base Depot.		12	8	16	8	9	16	do	27	Reg. Unit.	A458
No.4. Gen Hosp. Samiers		21	1	17	2	2	17	P.U.O.			A558
No.6. Con Depot Etaples		2	2	17	4	2	17	do		Dis to Details camp.	A569-569 CP.
										Duplicate Medical History Sheet posted to here. /M	
Castle Hosp-Sherborne		13	4	17	7	6	17	G.S.W. L Hand-(Severe)	56		W. J. M. J. J.
HERBORNE GROUP, CROSS HOSPITALS.											
m.b. H Epsom		7	6	17	21	7	17	Sw L. Hand	45	Wound still continues to discharge. Has had daily dressings here. Transferred to Charington for receipt T.T. Wound on rt leg healed but slightly tender. Discharged to convalescent home Bromley	W. J. M. J. J.
ONTARIO MILITARY HOSPITAL ORPINGTON, KENT.		4	7	17	4	8	17		31	Improvement. Class C iii	W. J. M. J. J.
CANADIAN CONVALESCENT HOSPITAL BROMLEY, KENT.		4	8	17	14	8	17	G.S.W. L Hand to Rt Leg	11		W. J. M. J. J.

(Medical Officers will please read this Form carefully before using it. See instructions, page 4.)

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O.'S, AND MEN

MEDICAL HISTORY OF AN INVALID

STATION Calgary, Alberta DATE November 20, 1917

1. (a) Unit 63rd Battalion. (b) Regimental No. 466317 (c) Rank Pte.

(d) Surname Kennedy (e) Christian name Quinton

2. Age last birthday 27 Date of birth 24 April 1890

3. Enlisted at Medicine Hat on 6 July, 1915.

4. Personal description :—

(a) Height 5'9" (b) Weight 175 (c) Complexion Fair

(stripped)

(d) Colour of hair Lt. Brown (e) Colour of eyes Blue (f) Identification marks

Three longitudinal scars on back of left hand.

5. Address after discharge (for the use of the Board of Pension Commissioners.)

P.O. Box 436 - Medicine Hat, Alberta.

6. Former trade or occupation

7. (a) Service

Years

Days

PERIODS

From

To

63rd Battalion.

6 July, 1915

6 June 1916

10th Battalion

6 June 1916

date.

(b) Has he been Overseas? Yes

8. Present disease or disability (use authorized nomenclature if possible). Varicose Veins

(a) Date of origin 1916 October (b) Place of origin France

(c) Cause* Heavy Marching.

*(Here include original disease or injury)

9. Present condition. (Important, to be a full description of the present disabling condition or conditions).

Well developed man, eats and sleeps well. Has well marked varicose veins on back of calf of right leg. Leg feels weak and aches after marching half a mile. Heart and lungs normal. Other systems normal.

[After describing all abnormalities, anatomical and functional, contributing to present incapacity (see section 11) state whether such incapacity is directly due to (a) weakness, (b) loss (complete or partial) of an organ or member or of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

M. F. B. 227.

150M-6-17.
1772-39-117.

10. History:

Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination

Three longitudinal scars, parallel to each other and about one and a half inches long, on back of left hand where hand has been lanced following inflicted shrapnel wound. Hand feels somewhat weak and gets cold easily. Wounds well healed. Scar from Shrapnel on center of left leg, no loss of tissue, no trouble.

11. To what extent, state in percentages, is capacity to earn a livelihood in the untrained labour market reduced? If there is more than one disabling condition, estimate the incapacity due to each, and that due to all combined.

Ten percent.

12. Did the disability arise on or off duty? On duty

13. Was a Court of Inquiry held? No.

14. If the disabling condition had its origin before enlistment, has it been aggravated on service?

Yes. N.A. No. N.A.

(If the answer is in the affirmative, state in percentages, to what extent the soldier is incapacitated by that aggravation.)

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? No.

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

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

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

France.

18. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

No.

19. Can the former trade or occupation be resumed? Yes.

20. Recommendations Classification.

[Signature] Lieut. C.A.M.C.
Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier.)

I, the undersigned soldier. have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of

[Signature]
Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

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

Yes

22. Is the soldier fit for

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

23. It is certified that the soldier

- (a) ~~Does require treatment.~~
(b) Does not require treatment.
(c) Should pass under his own control.
(d) ~~Should not pass under his own control.~~

(Strike out condition not applicable).

24. It is recommended that the soldier be discharged. (When not for discharge add special recommendation).

Class "E".

Board recommends above classification. No further treatment indicated.

STATION. Calgary, Alberta.

DATE 21 November 1917.

APPROVED BY

DATE _____

APPROVED BY

DATE _____

Director-General of Medical Services.

OPINION OF THE MEDICAL BOARD

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

Witness.....

Signed.....

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

INSTRUCTIONS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
3. In answering the questions, Medical Officers will carefully obtain and record the soldier's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the soldier concerned, from witnesses, or from documents.
4. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space on this page.
5. The nomenclature of diseases to be followed is that described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London, (1915), by Messrs. Harrison and Sons.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Bromley, Kent, August 11th 1917. 1916.

No. 465317 Rank Private Name Kennedy Q.

Local Unit..... Overseas Unit 10th Battalion Age 27

Examination held at Bromley, Kent.

DISABILITY.
Overseas—~~Local~~.
(scratch one out)

G.S.W. RIGHT LEG.

VARICOSE VEINS RIGHT LEG.

PRESENT CONDITION.

Was wounded at Vimy 8-4-17 by shrapnel in lower third of right leg. There is very extensive varicosity of the veins in the right leg and the nutrition is impaired so that healing of the wounds is not complete and will readily break down again. He is a shoemaker and should be useful at his trade. He will not again be fit for full duty within six months.

BOARD RECOMMENDS:—

1. Fit for Duty..... No.
2. Fit for duty after..... No...... weeks' physical training.
3. Fit for Temporary Base Duty..... Yes, C.III...... three months ~~xxxx~~ weeks.
4. Fit for Permanent Base Duty
5. Discharge

Signatures:—

Members

J. T. Hill, Major, C.A.M.C...... President.

M.S. Inglis, Captain, C.A.M.C......

Thos. Coleman, Captain, C.A.M.C......

APPROVED

Dated at Bromley, Kent, 11-8-17 1916.

J. T. Hill, Major, C.A.M.C.
For A.D.M.S.

Casualty Form—Active Service.

Regiment or Corps

10th Battalion

Rank 466317

Surname

Pte Kennedy

Christian Name

Q

Religion

Presbyterian

Age on Enlistment

25 3/4

years

months

Enlisted (a)

6-7-15

Terms of Service (a)

2 of 10

Service reckons from (a)

6-7-15

Date of promotion to present rank

Date of appointment to lance rank

Extended

Re-engaged

Qualification (b)

Packer

or Corps Trade and Rate

Signature of Officer.

Date	Report From whom received	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
28/12/16	oc. #2 Can. T. M. Bly	Embarked ... Disembarked ... Sentenced to 14 days T.P. No 1. 23/12/16 for when on active service absent from Roll Call (3) Absent from Billings without permission from 8.45 pm. 23/12/16 to 8 pm. 24/12/16 until apprehended by picquet. Freed. Forfeits 3 days Pay R.W. for pay			B. 2069 Part 2. Order # 8/1917
28/11/17	H Bent	P.U.O. rear	adm H Bent	21.1.17	W3034
2/2/17	do	do	To #6 Camp Depot	2/2/17	"
2/2/17	#6 Camp Depot	do	adm #6 Camp Depot	2/2/17	"
18/2/17	#6 Camp Depot	A.H. Clouston	To Detach. Camp	4/2/17	7. 3391
20/1/17	23 pbs.	P.U.O.	To 12 Train	20/1/17	A96 568 408
10/2/17	C.B.D.	Taken on strength	6 B.D.	10/2/17	NR 41.

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

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

[P.T.O.]

46637 Kennedy Pte

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
23/2/17	OC 6th Bn.	Left to join 10th Bn.		23/2/17	MR 197
3/3/17	OC 10th Bn	Joined unit from 6th Bn		1/3/17	B213 56844
11/4/17	H/S. Australia	Shrap. L. Hand Is England and posted to Alberta Regt Depot. Bramshott		11/4/17	W2083/1796. Part C. 40. 18/4/17
Chas. R. Hatwell Lieut. for Major, D.O. 49 Canadian Section					
27.4.17	alt. R.D.	O.O.S. from 10th Bn.	Bshott	11.4.17	O.O. 49 Lieut. for Lieut. Col i/c Records, C.E.F.
14-10-17	alt. R. Depot	on Command to C.D.D. Buxton pending Discharge to Canada.	Bshott.	14/10/17	P.T. D.D. 2209 of 15-10-17 1st Lt. of 1st alt. Regt Depot
15 OCT 1917	TAKEN ON STRENGTH C.D.D. BUXTON Pt. II ORDER No. 244		Commanding		Blaine Lt. Col. Canadian Discharge Depot.
18 OCT 1917	EMBARKED FOR CANADA FROM LIVERPOOL				Blaine Lt. Col. Canadian Discharge Depot.
Transferred to No. 13 Casualty Unit 7-11-17			Commanding		
Auth. District Order No. 258			Officer Commanding No. 13 Casualty Unit		
Discharged from the Service by No. 13					
Casualty Unit 31/12/17					
Auth. 40649 K 1008					
40620498 17/12/17					

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

Casualty Form—Active Service.

CERTIFIED CORRECT
Canadian Record Office,
Westminster House,
7, Millbank, S.W.

Unit, Regiment or Corps 68th. C. Batt. C. E. F.

Regimental No. 466317 Rank Private Name Quintan Kennedy
C. E. F.

Enlisted (a) 6-7-15 Terms of Service (a) Duration of War Service reckons from (a) 6-7-15

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) Packer

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, 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. 213, Army Form A. 38, or other official documents.
Date	From whom received				
		Embarked Canada April 22 nd 1916 Arrived England May 5 th 16 Transferred to 11 th Batt to reinforce 10 th Batt Overseas Authority Camp Commandant Telegram Lt. G. 16 Lydd 4.6.16			<i>[Signature]</i> 68th. C. Batt. C. E. F.

(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				
9/6/16.	Can Base Depot	Arrived in France for 10 th Canadian Batin.	Acad.	8/6/16.	N.R. Pt. II. Ord. 25. 1916.
9/6/16		Left for Unit.	"	9/6/16.	N.R. - 323.
17/6/16.	10 th Bn.	Joined Unit.	"	10/6/16.	B213 - 323.
24/6/16	8. Staty	Gen. Scaep	adm.	8. Staty	24/6/16 W3034
23/6/16	17. CCS	do	adm.	17. CCS	23/6/16 } A36 - 330
26/6/16	8. Staty	do	Transp	Train	24/6/16 }
25/6/16	5. C. Fa	do	Transp	Base Details	26/6/16 W3034
24/6/16	CAD.	From Boulogne T.B.	adm.	5. C. Fa.	23/6/16 } A36 - 336
		Left to join Entrenching Bn.	Transp	17. CCS.	"
12/8/16	CB2.	Left to join Entrenching Bn.	Can Base	24/6/16	NR - 340
14/8/16	1 st Can Enty. Batin	Joined 1 st Enty. Bn.	1 st Can - Field	12/8/16	NR - 348
9/9/16	10 th Bn	Joined Unit	do	14/8/16	NR. 352
15.12.16	2 nd Can T. M. B.	Sentenced to 7 days F.P. No 1 for "When on Active Service Conduct to the prejudice of good Order & Military discipline"	Field	25.11.16	B2069 Pt II Orders no 1917
15/12/16	OC. 2 nd C. T. M. B.	Reported in Part 2. order No. 1 Sub. 4. dt 3/1/17 is cancelled in so far as it concerns this man and the following substituted. "Sentenced to 7. days F.P. no. 1. 13/12/16. for when on active Service Conduct to the prejudice of good order & military discipline in that he obtained food from an Estaminet on 25/11/16 for which he refused to pay. -			B2069. Part 2 Orders no. 4 / 1917

213

This space to be left blank
for the Chelsea Number.

8157
28/1/33
3-4-46
Subty.
Army Form B. 268.

Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 466317 Army Rank Pte.

Name

Kennedy L.
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps

Battalion, Battery, Company, Depot, &c.

63 Bn
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge

Place of discharge

1.

Description at the time of discharge.

Age 27 years months

Height 5 feet 9 inches

Chest { girth when fully expanded ins.
measure- {
ment { range of expansion ins.

Complexion

Eyes

Hair

Trade

Intended place of
residence
(To be given as fully
as practicable)

Shoemaker
Medicine
salt

Descriptive marks.

Shrap. 1 hand
R leg.

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

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

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

3. Military character:—

4. Character awarded in accordance with King's Regulations:—

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

* Strike out if not applicable.

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... .. Class

6. Campaigns, Medals and Decorations

12 mos France

Certificate of education

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me in accordance with Regulations.

(Place)

(Date) Commanding Battn. Regiment.

8. *Certificate to be signed by the soldier on discharge.*

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(Place) (Signature of Soldier.)

(Date) (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 at 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 towards engagement to (the date to which the record of service is completed) years days.

Further service " " (the date of confirmation of discharge) "

Total "

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for (date) 2

(Place)

Signature

(Date)

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

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.)

LIST OF DISCHARGE DOCUMENTS.

1. Proceedings on discharge.
(Army Form B. 268.)
2. Proceedings on transfer to reserve (if any).
(Army Form B. 2056.)
3. Duplicate attestation.
4. Army Form B. 97 (if any).
5. Declaration of change of name (if any).
6. Re-engagement paper (if any).
Army Form B. 136.
7. Authority for continuance, or extension, of service (if any).
Army Form B. 221.)
8. Court of Inquiry on an injury (if any).
(Army Form A 2.)
9. Regimental conduct sheet.
(Army Form B. 120).
10. Company conduct sheet.
(Army Form B. 121.)
11. Copies of convictions by Civil Power (if any).
12. Medical history sheet.
(Army Form B. 178).
13. Medical report on invalid (if any).
(Army Form B. 179).
14. Copy of receipt for purchase money (if any).
15. Attestation of fraudulently enlisted man for corps in which he has not been held to serve (if any).
16. Detailed statement of former service allowed to reckon towards pension (if any).
17. Copy of 3rd page attestation (in the case of men from abroad entitled to deferred pay who go to Netley or the discharge depot for discharge).
18. Descriptive return (Army Form D. 400), where required.
See section 11 on second page.
19. Active service casualty form.
(Army Form B. 103).
20. Employment sheet.
(Army Form B. 2066).

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

1. Duplicate attestation.
(On third page the date and cause of discharge will be entered and signed by the competent military authority).
2. Medical history sheet (if any).
(Army Form B. 178).

Instructions as to the preparation, dispatch, and custody, of discharge documents.

1. When a soldier is to be discharged, the documents retained with the duplicate attestation will be placed inside this form. Should any of the documents be missing, an explanation of the deficiency, signed by the commanding officer, must be substituted for the missing document. The officer in charge of records will then extract from the original attestation, any documents required to complete the list of discharge documents enumerated in the margin, which will then be placed in this form in the sequence given.

2. When men are discharged from the colours at home as medically unfit, or with claims to pension, Army Form B. 268 will be sent confirmed, together with the duplicate attestation and documents retained therein to the officer in charge of records 10 days in advance of the date for discharge in the case of invalids, and 14 days in other cases. This officer will then extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them in this form, and after carefully checking the duplicate attestation with the original forward the whole to the Secretary, Royal Hospital, Chelsea. When such men are discharged abroad, the same procedure will be adopted as above, with the exception that the discharge documents will be sent to the officer in charge of records immediately after discharge takes place (except in the case of men who are granted gratuities on discharge from local battalions or companies, Royal Artillery).

3. When soldiers are sent home from abroad for discharge, the documents retained with the duplicate attestation will be placed inside this form and sent home with the men for transmission to the officer who carries out the discharge, together with the following additional forms :—

- (a) Discharge certificate (Army Form B. 2079 or Army Form B. 204).
- (b) Character Certificate (Army Form B. 2067) if entitled.
- (c) Copy company conduct sheet (Army Form B. 121) when required under King's Regulations.

The duplicate attestation and documents retained therein will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin and place them in this form.

4. The discharge documents of re-enlisted pensioners, on re-discharge, will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them inside this form, and forward the whole to the Secretary, Royal Hospital, Chelsea, irrespective of the cause of discharge.

5. The original and duplicate attestations of recruits who are rejected before, or on, final approval will be retained by the approving officer for one year, when they will be destroyed.

6. In all other cases the discharge documents will be sent, directly the discharge is carried out, to the officer in charge of records of the unit concerned.

7. Postage need not be paid, and receipts are not required, in the case of documents sent to Chelsea or to the War Office,

8. When the discharge documents of men not entitled to pension are sent to the officer who will have final charge of them, they are to be accompanied by Army Form B. 279, and that officer will, if they are found to be correct, sign and return Army Form B. 279. Should any document be missing, he must at once apply for it.

9. The officers having final charge of the discharge documents will arrange them according to regimental numbers, and enter the names in the alphabetical index, Army Book No. 129.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
2072447	466317	Pt	Kennedy	Q
Year	Unit.		Age.	Service.
1917	104 Can's		27	22/12
Station and Date.	Disease			
21-7-17	S.S.W. Lt Hand R & L			
	Examination shows - General condition good. Wound 1" x 1/2" over in skin of rt leg about its middle anteriorly - No thickening of bone apparent. Wound healing nicely. Lt Hand completely healed - movements good.			
27/7/17	Improving. Wound healing nicely.			
28/7/17	Discharged to convalescent home Bromley			
	C S Macdonnell Lieut			
	CANADIAN CONVALESCENT HOSPITAL, BROMLEY, KENT.			
14/8/17	Discharged to Hospital Representative C III			
	B Lyon Lieut CAPTAIN C.A.M.C. ADJUTANT & REGISTRAR, CANADIAN CONVALESCENT HOSPITAL, BROMLEY, KENT.			

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

Station
and Date.