Original 33104 433101

ATTESTATION PAPER.

No. 5

Folio. 33104

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?	Thomas Walter Killips
2. In what Town, Township or Parish, and in what Country were you born?	Thornhill Toronto Canada
3. What is the name of your next-of-kin?	(Wife) Nancy Killips
4. What is the address of your next-of-kin?	Box 583 Edmonton P.O.
5. What is the date of your birth?	18/July/1874
6. What is your Trade or Calling?	Builder
7. Are you married?	Yes
8. Are you willing to be vaccinated or re-vaccinated?	yes
9. Do you now belong to the Active Militia?	no
10. Have you ever served in any Military Force? If so, state particulars of former Service.	no
11. Do you understand the nature and terms of your engagement?	yes
12. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force?	yes

T W Killips (Signature of Man).

A Bredon (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Thomas Walter Killips, 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.

T W Killips (Signature of Recruit)

Date 12 April 1915 A Bredon (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Thomas Walter Killips, 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.

T W Killips (Signature of Recruit)

Date 12th April 1915 H C Dawe (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 Edmonton this 12th day of April 1915

H C Dawe (Signature of Justice)

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

H C Dawe (Approving Officer)

M. F. W. 23.
150 M.—12-14.
H.Q. 1772-39-841.

Description of T. W. Killips on Enlistment.

Apparent Age 40 years 8 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 7 ins.

Chest measurement: Girth when fully expanded 37 ins.; Range of expansion 4 ins.

Complexion dark

Eyes hazel.

Hair dark

Religious denominations.
- Church of England
- Presbyterian Yes
- Wesleyan
- 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).

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 April 21 1915

Place Edmonton

L. C. Harris
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.

Thomas Walter Killips having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

(Signature of Officer)

Date April 1915

Lt. Col.

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

Attestation Papers..... X 2.

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet 1

Compulsory Stoppages.....

Casualty Forms..... 1

Proceedings on discharge..... 2

Corps History Sheet.....

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

Parchment Certificate.....

Medical Report for Invalids..... 3

Medical History Sheet..... 2 3 Sent to B.P.C. 9-3-18

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power..... 1

Company Conduct Sheet..... 1

Clothing Transfer Certificate..... 1

Inventory of Kit.....

Last Pay Certificate..... 1

Mix cas card 2-1

Army Form B.122-1

A. F. B. 178-1

M. F. W. 62.
50M.—9-16.
H. Q. 1772—39—935.

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

49

Name Killips, Thomas Walker

Regt. No. 433101 Rank Pte

Corps 49th Bn.

08273

Being Medically unfit for further military service

Deceased - 7-10-46

649 - K-1103

Returned 18.10.1

2-23
21-24
33-24
3

D.M.S. 1800.

Surname	Christian Name or Names	Reg. No.
Killips	J W.	433101

Rank	Unit	Co.	Troop	Batty.
Pte	49/Bn			

Hospital # 2 C.F. Amb — Date of Admission 28-12-15

Transferred 8 Stat. Wimereux — Hosp. 1-7-16

1 Convl. Boulogne — Hosp. 4-7-16

Hosp.

Hosp.

Diagnosis Influenza

(1)

Later Diagnosis (if changed) D A H.

(2)

(3)

Additional Diagnoses: If more than one state present

DISPOSITION — Date

REMARKS

Duty 1.1.16

#77

C/L. 17.1.16

A198.

C.L. 11-7-16

A.M.D.2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

No. 33101 RANK Pte. NAME Killips, Thos. Th.

T. O. S. UNIT 49th Battalion C. E. F.

M. D. 13

PAID FROM	PAID TO	SIG. OR REC'T
1915	1915	
Apr. 12	Apr. 30	✓
	May	✓
	June	✓

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS	AUTHORITY
	UNIT SAILED JUN 4 1915

M&H

Number 433101 Rank Pte

Surname PHILLIPS

Christian Name Thomas Walter

Units #9 Bn Can Inf Theatre of War France

Date of Service 9-10-15

10.15, 9.8.18

Remarks

Latest Address ~~Box 583~~ Edmonton Alta

Roll No. D Page 17951

200m.-2-21.

Next of kin

Address on leave

Address on discharge

Transportation issued Yes / No Date

Character on discharge

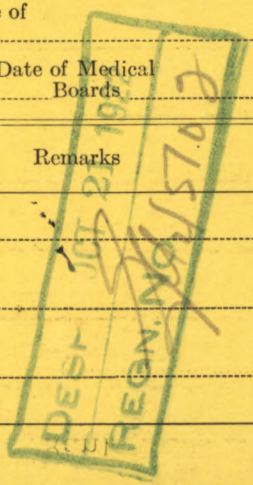
Previous occupation

Date and place of enlistment

Diagnosis

Date of Medical Boards

Date	Remarks



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

Name Killips, T.W. Rank Pte. Reg. No. 433101

Unit 49th Battalion.

Next of Kin Canada.

Date 1915	Movement	Place	Casualty	List No.	Notified N/KO.	W.O. List
28-12	No 2 Can. Field Ambulance		Influenza	77		
1-1-16	Disc'd. to Duty		"	77		
1 7	No 8 Stat'y Hosp.	Minerva	D.A.H.	A198		
4 7	No 1 Conv. Depot.	Boulogne	"			
	Discharged to Base	Details Bit.	"	A198		

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

No. 4 33101 RANK Pte NAME Killips J W

T. O. S. UNIT Casualties

M. D. 13

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Sept 1	Sept 30	"	from 49th Bn	
	Oct	"		
	Nov	"		
	1917			
Dec 1	Jan 7	"	disch'gd 7-1-17	A.O. 306 of 20-12-16

a/c closed by payment £

Reg. No. 433101 Name Killips. T.W

Rank Pte Corps 49th Battn Age Service

Ledger No. Serial No.

HOSPITALS	DATE	DIAGNOSIS O/S
Red Cross Mil Conv Hospt Ogden	22-9-16	Endocarditis
Red Cross Mil Conv Hospt Ogden	9-10-16	Endocarditis
Dis	11-12-16	OS
Red Cross Mil Conv Hospt Ogden	22 9-16	V. L. To
Trs to Edmonton Mil Hospt	9-10-16	
Dis.	7-1-17	

P. T. O.

HOSPITALS	DATE	DIAGNOSIS

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

H. Q. FILE No. 649-

NAME Killips, Thomas Walton REGT'L No. 433101

RANK AND CORPS Pte. 49th Batt. 3rd. Can. Div.

CABLE		NATURE OF CASUALTY
NO.	DATE	
T. 259		Sailed for Canada on Aug. 9th. 1916. Valvular Disease.

NO. 5-25
FOLL.

L. L. Job 87318—M. & D. 6106.

M. F. W. 42—25m.-10-15.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
77	No. 2 Can. Fld. Amb.	28-12-15	Influenza.
"	" " " " "	1-1-16.	(") Disch. to duty.
A. 198	No. 8 Stat. Wimereux.	1-7-16	D. A. H.
A. 198 A	No. 8 " No. 1 Convt. Dep. Boulogne.	4-7-16	D. A. H.
A. 198	Dischg. to Base Details Fit	4-7-16	D. A. H.

MOORE BARRACKS, CANADIAN HOSPITAL, SHORNCLIFFE.

ADMITTING CARD.

Regt. No. 33101 A. & D. No. 1776

Rank Pte

Name Willops, Thos. W.

Corps 49 Bn - B. Co - Service 3/12.

Religion Presbyterian Age 40

M. H. Rec'd M. H. Requested M. H. Ret'd 5.5.15

Disease Dunsay

Admitted June 30/15

Discharged 7.7.15.

Place in Hospital Ward 14

Transferred

Results

P.T.O

REMARKS:

No. 433101. RANK Pte. NAME Killeps. T. W.

T. O. S. UNIT Discharge. Depot. Quebec

M. D. 5

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PARTICULARS	AUTHORITY
1916 Aug	1916 no dates	✓	9th Bn	

649-R-1103.

CARD NO. ✓

SURNAME. Killips

CHRISTIAN NAMES Thomas, Walton.

S.O.S. Disc. 7-1-17 B

FOLL. P.N.

REGL. NO. 433101 RANK Pte. B. Co.

UNIT 49th Batt.

FORMER CORPS Uil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Killips, Mrs. Nancy

RELATIONSHIP TO SOLDIER

ADDRESS Box 583 Edmonton, P.O.

In case of casualty also notify: Mrs. G. B. Cooper, 22 First Ave., Ottawa.

COUNTRY OF BIRTH Canada, DATE

PLACE OF ATTESTATION Edmonton, DATE 12/4/15.

Sailed from Montreal Per. SS "Metagama" 4-6-15 96/10

L. L. 94504. M. & D. 6512. R/C. 16-8-16. M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

MARRIED Yes, SINGLE WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

CR 94 O. Inf. 41210 33101 BPC 11134

MEDICAL HISTORY SHEET.

Surname Killips *Christian Name* Thomas Walter

Examined on 12 day of April 1915 at Edmonton Alta

Birthplace City or Town Thornhill County Ontario

Apparent age 40

Trade or occupation Builder

Height 5 Feet 6 Inches

Weight 147 Lbs.

Chest measurement Minimum ..... inches. Maximum expansion ..... inches.

Physical development Good

Small-Pox Marks nil

Vaccination Marks Arm Right. Left. Number none.

When Vaccinated last Infancy

(*a*) Marks indicating congenital peculiarities or previous disease nil

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

Approved by L C Harris

Rank Major M.O.

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.
25/4/15	+	L C Harris M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
10/3/15	+	L C Harris M.O.
20/3/15	+	L C Harris M.O.
		M.O.

Enlisted on 12 *day of* April 1915 *at* Edmonton Alta

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	49th Battn	433101		
Transferred to..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

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

M. F. B. 313.

50M—9-14.
H. Q. 1772-39-439.

Surname Kilipo Christian Name Thomas

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	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.
M.B.C.H.						1					
Shorncliffe.		30	6	15	7	7	15	Quinsy.	6	Moderate case. Abscess burst. Good recovery	George J. Shathy

M.F.B. 465.
200M —6-18.
1772-39-950.

DENTAL HISTORY SHEET

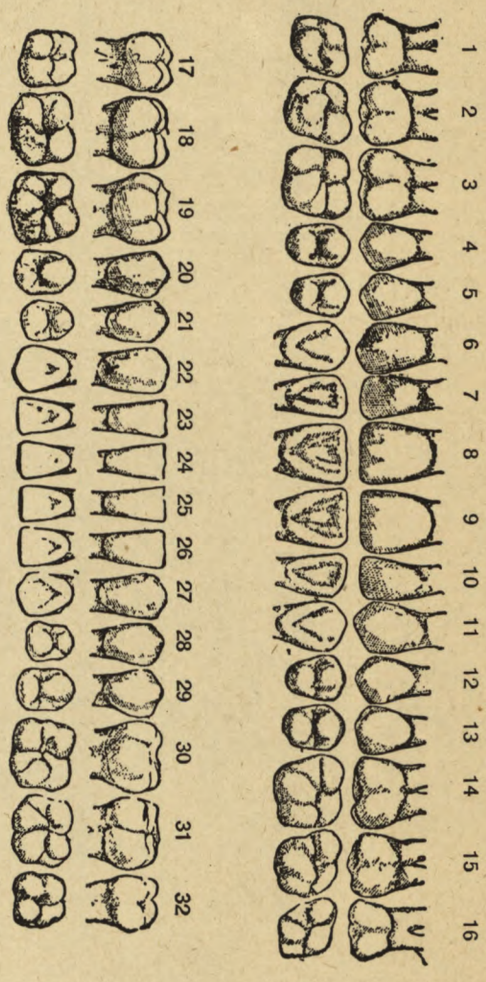
CANADIAN ARMY DENTAL CORPS

DISTRICT 13

NAME OF SOLDIER KILLIPS T. W.

REGIMENT RANK Pte. No. 433101

Condition on first Examination	Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS



INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

Completed
1-10-20
T C Bruce Capt
DDO hon 13

Forms
I. 1237
10

361024

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
17.76.	33101.	Pte.	Killyse.	Thos. Walter.

Year	Unit.	Age.	Service.
1915	49th Bde	40.	3/12

Station and Date.	Disease Quinsy — George Strathy
M.B.C.H. Shorncliffe June 30/15. Moore Barrock	While on guard last Saturday June 26. patient felt his throat getting sore and has gradually been getting worse. Slight headache - on left side. Monday night his throat got so sore he couldn't eat and Thursday the same condition was present. Wednesday was sent to hospital. Exam^n. Left tonsil & peritonsillar tissues reddened & swollen
July 2-15	Abscess burst yesterday. Feels much better.
6.7.15	Discharged

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

(Hse. No.) W 10373-1916. 800M (E) 1/15. Mc. & W.

P.T.O.

Station and Date.	

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps 49th Bn

Military Hospital Moore Barracks.

No. 33101. Rank and Name Pte. Killips Thos. W. Age 40. Service 3/92

Disease Quinsy Date of admission June 30/15 Date of discharge July 7-15 Result Cured.

Dates of Observation	June 30	July 1	2	3	4	5	6	7
Days of Disease		1	2	3	4	5	6	7

Temperature Fahrenheit

Time A.M. P.M.	12	5	9	5	9	9			9																							
107°																																
106°																																
105°																																
104°																																
103°																																
102°																																
101°																																
100°																																
99°																																
98°																																
97°																																

Pulse per Minute	68	80	90	88	72	72																										
Respirations per Minute																																
Motions per 24 hours																																

(2669.) W9043—1195. 800,000. 12/14. C.P., Ltd. Forms/B. 181/3.

Signature Geo. A. Shetty In charge of case.

11

Form to be used instead of blank space on Army Form 179.

Proceedings of Medical Board at Discharge Depot.

Number, Rank, Name and Corps of disabled soldier:-

433101 Pte Killips, Thomas Walter 49th Batt (9th Res)

Previous civilian occupation:- Carpenter

DEPT. MILITIA & DEFENCE AUG 1916 H.O. CANADA

Cause of Disability

649-K-1103

Endocarditis aggravated by service.

Condition: in detail, which prevent the soldier earning a full livelihood.

Pain in precordial region and breathlessness on exertion -

Examination shows aortic regurgitant murmur

Man is very shaky & nervous -

Had Rheumatism when 10 years of age

Opinion of the Board.

Degree of Incapacity, (Please state in fractions). Compensation good.

1/2, of which 50% due to aggravation

Probable duration of incapacity:-

Permanent - 3 months for aggravation

Does it render him permanently unfit for Military Service? Yes

Would operation, special treatment, or the use of appliances, etc., lessen incapacity? Convalescent Home

Signature:- W. M. Carrick Major President

Station Quebec E A Robertson Capt

Members

Date Aug 20 . 1916 M J Coglon Capt

BOARD OF PENSION COMMISSIONERS FOR CANADA
APR 5 1917
CONSIDERED FOR PENSION.

Approved.

Date Aug 20/16 W. M. Carrick Major
Asst. Director Medical Services.

Date 2.9.16 Oscar A. Cannon Capt
Director General Medical Services.

11

R-188

(641)—Wt. W1751-1403.—500,000.—5-15.—C. & G. Forms B. 103/1.

Army Form B. 103.

573

Casualty Form—Active Service.

Regiment or Corps 49th Battn. C.E.F.

Regimental No. 433101 Rank Pte. Name Killips T.W. "R"

Enlisted (a) 12/4/15 Terms of Service (a) Duration of War Service reckons from (a) 12/4/15

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) _____

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.
9.10.15	OC 49th Bn.	DISEMBARKED BOULOGNE 9 10 15			Nom. Roll 101/Inf/49/1
2.1.16	OC No 2 CFA DRS.	Influenza. Adm.	No 2 CFA DRS.	28.12.15	A 36 DCS 68.
do	do	do Dis	To Duty.	1.1.16	A 36 DCS 68.
8.1.16	OC 49th Bn.	Returned to duty.	[illegible]	3.1.16	B 213 DCS 70.
1.7.16	8 Sty Hosp.	D.A.H. Adm.	8 Sty Hosp.	1.7.16	K 3034.
9.7.16	C.B.D.	Taken on strength, class T.B.	C.B.D.	9.7.16	Nom. Roll. D.C.S. 170.
3.7.16	8 Sty. Hosp.	D.A.H. Trans.	1. Conv. Depot	3.7.16	K 3034.
4.7.16	1. Conv. Depot	Unfit Dis	Base Details	4.7.16	K 3034.
3.7.16.	"	Sick Adm.	1. Conv. Depot	3.7.16	K 3034.
13.7.16	C.B.D.	Classified T.B.	C.B.D.	13.7.16	Nom. Roll. D.C.S. 179
16-7-16	c/o C.B.D.	" (V.O.H.) & transferred to England.	Havre.	16-7-16.	A.F. W 3339. Pt II Orders 32 d/14-8-16.

[signature] Lieutenant for Lt. Col. A. A. G.

52 SEP 1916

(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				
		Taken on strength C.C.A.C. Pt. II D.O. No. 276 : 17-4-16			
		~~ATTACHED~~ TRANSFERRED FROM C.C.A.C. TO Can Hure 10-8-16 PART II D.O. No. 455.5-16-10-16			
		for o.c. C.C.A.C.			

CANADIAN CONTINGENT EXPEDITIONARY FORCE

CASUALTIES C. E. F.
"I" UNIT M. H. C. C.

LAST PAY CERTIFICATE

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

Regimental No. 433101 Rank Private Name Killips, T.W.

Corps 49th O.Battn. C.E.F. who was* discharged

On January 7th 1917, to ----------

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from December 1st 1916, to January 7th 1917, the inclusive date of transfer or discharge.

Dr.	$	c	Cr.	$	c
Bal. Dr. from prev. month	-	-	Bal. Cr. from prev. month	-	-
Advances by Cheques No	5	00	Regt'l Pay 38 days at $ 1 c 00	38	00
Advances by Cheques No.	-	-	Field Allow. 38 days at $ c 10	3	80
Assigned Pay No. Sepn. Allce.	39	62	Other Allowances* Clothing Allce	13	00
Other Charges*	-	-	Sepn. Allce. December	20	00
			" " Jan. 7 days	4	62
Payment on transfer or discharge No. 2872	49	20	Other Credits*		
			Subs. 24 days, Dec. 1 to 4 &		
Balance Cr. (to be paid by the new unit).	-	-	" 19 to J.7		
			Bal. Dr. (to be deducted by new unit)	14	40
Total	$ 93	82	Total	$ 93	82

*Give Particulars.

A monthly stoppage of $ 15.00 (†) has ..... (‡) been paid on account of Assigned Pay for the month of December 1916 to (Assignee) Mrs. M. Killips

(Address) Box. 583, Edmonton. Alta.

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

On Transfer of an Officer.

Outfit Allowance of $ ----- has been paid by Paymaster, Military District No. .....

REMARKS:—

State (1) date of enlistment April 12th 1915

(2) if married and if a Separation Allowance Card has been submitted Married

(3) cause of discharge and authority O.C."I"Unit,M.H.C.C.

If discharged from the Contingent, state if Stop Payment advice for Assigned Pay has been forwarded, and date Yes, stopped in this office.

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

Date December 19th 1916.

Place C A L G A R Y. ALTA.

Capt.
Paymaster Comp. Unit, M. H. C. C.
Paymaster

N.B.—For purposes of transfer this form is to be made out in quadruplicate. One copy to Paymaster of new unit; one to District Paymaster; one to accompany the pay-list at the end of the month, and; one for retention as a record.
For purposes of discharge it is to be made out in triplicate. One copy to accompany discharge papers; one copy to accompany pay-list at the end of the month, and; one for retention as a record.

M. F. W. 44.

200M.—6-16.
H. Q. 1772-39-903

Rank Pte Name KILLIPS, Thomas Walter Pres Reg'l No. 4 ~~A~~.33101 Bus

Unit 49th Bn. If in perm. Corps, What Unit? Married or Single Married

Place and Date of Enlistment Edmonton Alta 12th April.1915 Place of Birth Toronto. Can.

Name and Address, Next-of-Kin Nancy Killips,

Box 583 Edmonton, P.O. Relationship Wife.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship ✓

Discharge, Date and Place Reason Character

ceae

N/E. R.B. No. 4067

File R.L.

Category Can. M.U.

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	Mil. Can. Ely. REMARKS Taken from Official Documents
		Arrived England		14/6/15.	
		Embarked for France.		9 OCT 1915	
1st 1/16	W.O.	No 2 Canadian Fd Amb	In the Field	28-12-15.	Cas Rpt 77 (Influenza)
Do	Do	Discharged to Duty	Do	1-1-16	Do Do
11.7.16	O.C. 49th	No 8 Stat. Hosp. Wimereux	Wimereux	1.7.16	C.L.A 198 D.A.H.
11.7.16	Do.	No 1 Convalescent Depot	Boulogne	4.7.16	C.L.A 198. Do.
11.7.16	Do.	Discharged to Base Details	France	4.7.16	Do. D.A.H.
14.8.16	—	Tfd to CCAC	Folkestone	16.7.16	Pt II O 32 Classified RB
9-8-16	C.D.D.	Ceases to be attached - discharge Canada	Bath	9-8-16	Pt II O 151

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				
	Dis. Depot	To Conval, Home	Mil. Dist. No. 13	16.8.16.	Nom. Roll No. 24
16.10.16	CCAC.	S.O.S. to Canada for Dis. Ceases to be att. to CDD Bath	F'stone	10.8.16.	Pt. II. O. 455.

CHECKED. 5th Dec, 1916.

433101

Name Killips J. W. Pte. KILLIPS T. W.

356

M. F. W. 41
1 0M—7-16
1772-39 889.

Regimental No. 433101.

Unit 49 Th

Date of enlistment

Place of "

Married (yes or no) Yes

Amount of pay assigned monthly $ 20.00 15.00

To whom payable

Name and address of next-of-kin 3

Date and place discharged Jan 7.17

Reason for discharge

Character on discharge

L[illegible]b 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	Amount			No.	Date					
								10 60		15222		10 60				
Sept 1	30	30	1 00	30 00	30	10	3 00	41 00	84 60	16 71		39 00	35 00		84 60	7.
Oct 1	31	31	1 00	31 00	31	10	3 10	38 60	72 70			31 00	35 00		35 00	4
										2685		5 00				
Nov 1	30	30	1 00	30 00	30	10	3 00	38 00	71 00	2444		37 70	35 00		108 70	4
										2856		5 00				
Dec 1	Jan 7	38	1 00	38 00	38	10	3 80	52 02	93 82	2872		49 20	39 62		93 82	5
									$322 12						$322 12	
Sep	7-17								53 00						53 00	Bonus
Oct	4-14								53 00						53 00	"
Nov	7-14								54 10						54 10	"
									160 10						160 10	PR-21

M. F. W 41
1 0M—7.16
1772-39 889

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

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	Amount			No.	Date					

L. L. Job 88773—M. & D. 6195.

Special remittance

M. F. W. 12.
20m.—11-15.
H. Q. 1772-39-8.9.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

To Whom Mrs N. Killips.

Address P.O. Box 583 -
Edmonton.
Alta.

By Whom Assigned Killips T. W.

Regtl. No. 433101.

Rank Pte -

Corps 49th Battn

Rate $25.00 (£5.2.9)
Sched #12. 10 2/6

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
Marc'				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March		D18968	25.	

CONSOLIDATED 1 ACCOUNT

M. F. V/. 41.
10m.—4-16.
1772-39-889.

159.

Name Killips (Pte) Thos Walter

Regimental No. 433101

Unit 49th Bn.

Date of enlistment

Place of "

Married (yes or no) Yes

Amount of pay assigned monthly $ 15.00 31/7/16

To whom payable 20.00 31/8/16

Olympic 16/8/16

Home.

~~Name~~ and address of next-of-kin Box 583. Edmonton Alta.

20/8/16 Med Bd rec Can Home 3 mos

Date and place discharged D D Quebec

Reason for discharge

Character on discharge Class II H.Q. 649-1K-1103

L. L. Job 502 M. & D. 6578.

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
	2/8/16							4086								L.P.C. Eng.
3/8/16	31/8/16	29	100	2900	29	10	290		7276			5000		2243 / 973	6216	* D D Quebec Paid.
												Cr Bal.			1060	° Edwin Eng
									7276						7276	Paid on Board

Pensioned

S.F.C. 111344 Fr 8/1/17 192.00

P.D.P. 9/8/17 W.D.A.

Transferred to M.D. 13 Fr 1/9/16 with Cr Bal.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

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	Amount			No.	Date					

POST DISCHARGE PAY OFFICE

21035/419

Three months pay and allowances after discharge.

10039- T-1

Name Killips, Thomas Walter
Surname Christian Name

Regimental Number 433101 Rank Pte.

Address (in full) Box 583,
Edmonton, Alta.

Unit 49th Bn.

Original Unit

District where paid M.D.13

Date of Discharge 7-1-17

P. D. P. Filing Number 3 -22-13

Rates:—Regimental pay $ 1.00 per diem: Field Allowance $.10 per diem. Separation Allowance $ 20.00 per month.

L. L. 22573—M. & D. 8009.

Total Credits 91 days	FIRST PAYMENT Cheque No. A	Date	Amount 30 days	SECOND PAYMENT Cheque No. B	Date	Amount 30 days	FINAL PAYMENT Cheque No. C	Date	Amount 31 days	Balance Over-payments to be Recovered	Total Amount Paid
160 10	272	7-9-17	53 00	272	7-10-17	53 00	274	7-11-17	54 10		160 10
161 2 1st	G.305 18	7.3.19	70 00								
" "	G.305 19	7.3.19	30 00								
140 2 4th	G2/9315	11/3/19	49 90								

M. F. W. 127.
20M—6 17.
1779 39-1140.

Remarks:

Dec'n No 21035/419 W. S. G. File No 10049-7-6

Award ..... days at $ ... per day $

S. A. 4 ... months at $ 30.00 per mo. $ 120.00 $ 400.00

Less P. D. P. Credited $ 160.10

$ 239.90

Less further debit balance $ .....

Net due paid as below 239.90

TO SOLDIER DEPENDENT

O	Ag. No	Ch No	Amount		Ch No	Amount
1	1612	30578	70 —	1612	30519	30 —
	14029	79315	49.90	2220 a	42338	30 —
				2324 b	440213	30 —
				1333 c	465416	30 —
	Total			Total		

7/3/19.
11/3/19.

9/4/19
19.4.19
23.5.19

P. O. Box 583
Edmonton
Alta.
Dep. Dame address.

GEN'L AUDITOR
Posting checked by
Date 25/19

Rank Ste. Name KILLIPS, Thomas Walter Reg'l No. 4 X.33101

Unit C.C.A.C. ~~49th Bn.~~ If in perm. Corps, What Unit? Married or Single Married

Place and Date of Enlistment Edmonton Alta 12th April.1915 Place of Birth Toronto. Can.

Name and Address, Next-of-Kin Nancy Killips,

Box 583 Edmonton, P.O. Relationship "ife.

Assigned Pay Monthly $ 16. Payable to Mrs Nancy Killips

Relationship Wife

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

OFFICE, N.E. BRANCH OCT 18 1916 CANADIAN CONTINGENTS

Date From 1915	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
June 1	30	30	1.	30	30	10	3.	5	38		1	7 50	16		23 50	4 50 / 10	Blce June 30 $5
July 1	31	31	1	31	31	10	3 10		34 10		1	15	16		31.	17 60	
		Adjustment of Exchange						60				22 50				18 20	
Aug 1	31	31	1	31	31	10	3 10		34 10		1	14 60	16		30 60	21 70	
Sept 1	30	30	1	30	30	10	3		33.		1	17 03	16.		33 03.	21 67.	
Oct 1	31	31	1	31	31	10	3 10	21 67.	55 77.		1	5 04	16.		21 04.	34 73	
Nov. 1	30	30	1.	30	30	.10	3.	34 73	67 73		1	5 29	16		21 29	46 44	
Dec. 1	31	31	1.	31	31	.10	3 10	46 44	80 54		1	14 01	16		30 01	50 53	
Jan 1 1916	31	31	1.	31	31	.10	3 10	50 53	84 63		1	32 86	16		48 86	35 77	
Feb. 1	29	29	1.	29.	29	.10	2 90	35 77	67 67	954	1	5 24	16		21 24	46 43	
Mch 1	31	31	1	31	31	10	3 10		34 10	1015		2 62 / 2 61	16		21 23	59 30	
				305			30 50	560	341 10			127 80	160		281 80	59 30	

BALANCE TRANSFERRED TO NEW LEDGER.

Checked: WRW

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
60m.—12-15.
1772—39—818.

Sheet No. 2. Mary Killips

L. L. Job 89002.—Req. 6213.

Name of Soldier Killips Thos. W.

Month.	Year.	Cheque No.	Amt.	Remarks.
~~April~~		~~L2166~~	~~20~~	
April	1916	L2166	20	20 L2166 Cancelled
May		M6227	20	20
June		Y40491	20	20
July		P10412	20	20
Aug.		B12687	20	20
Sept.			232	
Oct.				
Nov.				332 Acct closed rctd on Olympic 16-8-16.
Dec.				
Jan.	1917		332 00	PDPJ 30/1/17
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

ACCOUNT CLOSED
DATE..... PER W.

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

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.				

41560 THE MORTIMER SYSTEMS
OTTAWA, CANADA

210

12/4/15.

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

Name Mrs. Mary Kellys

Address Box 583
Edmonton
Alta

Relation to Soldier wife, child or mother: Wife

Name of Soldier Kellys, Thos. W.

Regtl. No.

Rank Pte

Corps 2 9th Battn.

To what Corps belonging when called out

PAYMENTS

Month	Year	Cheque No.	Amt.		REMARKS
Aug.	1914				
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1915				
Feb.					
March					
Apl.					
May		N.5733	32	32	
June		~~F~~ 9408	20 —	20	
July		G12284	20	20	
Aug.		M3129	20	20	
Sept.		N5474	20	20	
Oct.		L5836	20	20	
Nov.		D16208	20	20	
Dec.		F23746	20	20	
Jan.	1916	H23352	20	20	Acct. closed
Feb.		M11660	20 —	20	
March		G28711	20	20	

COPIED FOR 3 CASUALTIES.

ACCOUNT CLOSED
DATE ..... PER .....

m 3130 Cancelled

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a. 201
60m.—12-15.
1772—39—819.

Sheet No. 2. Mrs Nancy Killips Wife.

Name of Soldier Killips T. W.
B Coy. 49th Batt.

L. L. Job 89002.—Req. 6213.

Month.	Year.	Cheque No.	Amt.	$15.00 Remarks.
April	1916	X 844	15	Pension granted 8/17
May		Y 3899	15	AE 19/4/17
June		Z 7503	15	Retd Olympic 16-8-16 FX SHS
July		P 10564	15	210.00
Aug.	Cancelled	~~Y 14244~~	~~15~~	Discharged to Canada 3rd aug 2nd/16
Sept.				
Oct.				
Nov.				P.D.P. 10/6/17 A.K
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
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.				

L. L. Job 80137—M. & D. 5683.

M. F. W. 12.
20m.—5-15.
H. Q. 1772-39-819

200

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Gen Gov

(Wife)

To Whom Nancy Killips

Address Box 583
Edmonton Alta

Rate $ 15.00 JUN 1 1915

By Whom Assigned Killips T. W.

Regtl. No. 433101

Rank Pte.

Corps 49th. Batt. B Coy

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June		M3485	15 —	
July		R3238	15 —	
Aug.		T2597	15 —	
Sept.		W508	15 —	
Oct.		X1954	15 —	
Nov.		K3209	15	
Dec.		K7621	15	
Jan.	1916	L8792	15	
Feb.		M 13613	15	
March		Q16600	15 —	

COPIED FOR 2 CASUALTIES.

MARRIED OR SINGLE M

PLACE OF BIRTH Toronto.

NAME AND ADDRESS OF NEXT OF KIN Nancy Killips
Box 583 Edmonton. Alta.

RELATIONSHIP OF NEXT OF KIN Wife

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No. 433101 RANK Pte NAME Killips. Thomas Walter

IF IN PERMT. CORPS WHAT UNIT | UNIT 49 Bn. | TRANSFERRED TO CCAC DATE 1-7-16 AUTHORITY CC 3/102 30-7-16

PERMANENT FORCE ALLOWANCES | TRANSFERRED TO | DATE | AUTHORITY

PLACE OF ATTESTATION Edmonton. | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 12.4.15 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY MONTHLY $ ~~1.10~~ 15.00 DATE EFFECTIVE A.S.P. 50205 d/29/7/16. 4/CEF. Effect 1-6-15.

PAYABLE TO Mrs Nancy Killips. Box. 583 Edmonton. Alta. RELATIONSHIP Wife.

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) 1/8/16. EFFECTIVE 1/8/16. REASON Discharged

DISCHARGE DATE AND PLACE 1/8/16. Canada. REASON AND AUTHORITY C.R.O. 1. L. 102. - 30/7/16.

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) 3/8/16

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

OFFICE OF THE PAY MASTER CANADIAN CONTINGENT

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
															341 10															281 80	59 30			
Apr 1-30	30	1.	30		30	.10	3								33	1074		1121					26	26			16.			21 24	7 06			
May	31		31		31		3.10								34.10	1198	6/6/16	1324	25/7/16	C.C. 730	27/7/16			25	17	0	72 -	16.			93 26	11 90			
June	30		30		30		3								46 -			1333	16/6/16	Imprest	24.6.16				3 41		2.55					19 41	38 49			
																					5065	5.7.16					14.36							
																					Hawe	12.7.16					14.36							
July 1-31	31.		31		31		3.10								34.10			3344	26.7.16	"	15.9.16				7.43		5.22	15.			33 93	38 66			
July 1-2	2		2.		2		.20								.2 20																40 86			
																															40.86			
																														243	38 43			
																												38 43	38 43	Nil				

Checked A.V.Ruland

Checked H.S.Stokes

Balance on hand forwarded to P.M.'s Belt.

Nov 1916
Jan 1917

Cr $13.- adjt. Asst Pay Dept in error June/15 to June 30/16. C.A.S.F. 50205. 22/7/16. 4/CEF

Daybook verified.

RFC To Bath. Discharged to Canada.
Trans 2/8/16 M.C.
107 adv by P.M. Bath Dft No 2-19 8/16

Transf to "Canada" Discharge a/c 13

1

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
	NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.				1 NO.	1 DATE	2 NO.	2 DATE	3 NO.	3 DATE	4 NO.	4 DATE	1	2	3	4				CREDIT	DEBIT		

This space to be for numbers.

Proceedings on Discharge.

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

No.	433101
Rank	Private
Name	Thomas Walker Killips
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	49th Batt C.E.F.
Date of Discharge	January 7th 1917
Place of Discharge	Calgary Alberta

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 43 years months.
Height 5 feet 7 inches.
Complexion Ruddy
Eyes Grey
Hair D Brown
Trade Carpenter
Intended place of residence (To be given as fully as practicable.)

Descriptive Marks
Scar on Right wrist

Accused - 7-10-46
6/9 - 4 - 1103

2. The above-named man is discharged in consequence of being medically unfit for further military service

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

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

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

Good — JHW

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

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

M. F. B. 218.
100m.—6-16.
H. Q. 1772-39-113

wsy comfs.
20/2/19
AB

KCH
3-2-20 LM

(OVER)

Star SC
13-11-19

Noted
4-11-17
M.M.

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

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

6. Medals and Decorations .....

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

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

(Place) CALGARY

H E Daniel Major
Commanding Officer "I" Unit
Military Hospitals Commission Command

(Date) DEC 18 1916

Commanding .....

8. **Certificate to be signed by the Soldier on Discharge**

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

(Place) CALGARY W. W. Phillips (*Signature of Soldier.*)

(Date) DEC 19 1916 H. S. Tomm Capt.
Paymaster "I" Unit, M. H. C. C. (*Signature of Witness.*)

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

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

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

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

10. **Statement of Service.**

Service toward Engagement to.....(the date to which the Record of Service is completed)../...years 272 days.

Total./...years 272 days.

11. **Confirmation of Discharge.**

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

(Place) CALGARY

H E Daniel Major
Commanding Officer "I" Unit
Military Hospitals Commission Command

(*Signature*) .....

(Date) DEC 18 1916

Reservations referred to at Para. 8.

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

None

F. W. Phillips

(OVER)

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	Attestation Paper,	Militia Form B. 233.
Squadron / Battery / Company } Conduct Sheet,	" B. 263a.	Proceedings on Discharge	" B. 218.
Copies of Convictions, by C. P.	in MS.		
Med. Hist. Sheet,	Militia Form B. 313		
Medical Report for Invalid*	" B. 227.		
Statement of Man's Account on Transfer and Last Pay Certificate,	" D. 877.		

*Only if discharged "Medically unfit."

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

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet (in the event of such having been prepared.)

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

D.M.S. 1312.
Army Form B. 179.
Canada.

OFFICE OF THE STANDING MEDICAL BOARD SHORNCLIFFE

Medical Report on an Invalid.

Station C.C.A.C. Folkestone

Date July 24th. 1916

1. Unit. 49th Batt. (9th Res B)
2. Regimental No. 433101
3. Rank Pte.
4. Name Killips, T.
5. Age last birthday 43
6. Enlisted { on 12th April 1915 / at Edmonton, Alta.
7. Former Trade or Occupation { Carpenter

DEPT MILITIA & DEFENCE AUG [illegible] 1916 H.Q. CANADA

8. Disability.

Valvular Disease of Heart

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. 1st March 1916 (Probably an old condition

10. Place of origin of disability. a) Canada b) France.

BOARD OF PENSION COMMISSIONERS FOR CANADA. APR 5 1917 CONSIDERED BY PENSION

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

Had a severe attack of Rheumatic Fever when a child ten years of age. He went to France Oct. 1915 as a transport driver. During last week of Dec. 1915 he was in hospital with Bronchitis. After being discharged he carried on as transport driver until June 27th. 16 March 1st. while loading ammunition had a spell of choking and dizziness, did no more that day, but next day went to work as usual, he was careful and did no lifting so was able to carry on as driver until June 26th. 16. when he was admitted to hospital with pain and irregular action of heart. First admitted 8th Field Ambulance, and from there No 10 Convalescent Rest Station, and from there 2 C.C.S. then to No 18 Stationary Hospital Boulogne, then Havre and from there to C.C.A.C. Folkestone - July 16th. 1916

12. (*a*) Give your opinion as to the causation of the disability.

(*b*) If you consider it to have been caused by wounds received or illness contracted (1) in the presence of the enemy (2) on active service, explain the specific conditions to which you attribute it. (*See notes on page 3*).

Had Rheumatic Fever when a child of ten, Attack was severe lasted two months.

(1) No

(2) It may have been an old condition aggravated by strain.

9

13 What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

He has an Aortic Diastolic murmur. The action is fairly regular at present time. He complains of a pain in left chest a great part of time. Compensation is good, no swelling of lower limbs. Complains of shortness of breath upon least exertion. He says he weighed 148 upon enlistment, he now weighs 158 lbs.

Wasserman negative

14. If the disability is an injury, was caused

(*a*) In action?

(*b*) On field service? not applicable

(*c*) On duty?

(*d*) Off duty?

15. Was a Court of Inquiry held on the injury?

If so—(*a*) When?

(*b*) Where? not applicable

(*c*) Opinion?

16. Was an operation performed? If so, what? not applicable

17. If not, was an operation advised and declined? not applicable

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service? not applicable

19. Do you recommend

(*a*) Fit for duty? no

(*b*) Fit for light duty? no

(*c*) Invalided to Canada? no

(*d*) Discharge as permanently unfit? yes

R. R. Graham, Capt. A.M.C.

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, *except*†

Station _____

_____

Officer in charge of Hospital.

Date _____

* Loss of teeth on, or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as it is essential that the Members of the Pensions and Claims Board should be in possession of the most reliable information to **enable them to decide upon the man's claim to pension.**

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. It is therefore essential when assigning the cause of the disability to differentiate between them (*see* Article 591 to 598 of the Canadian Pay and Allowance Regulations as amended G.O., 57, May 1st, 1915).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

20. (*a*) State whether the disability is the result of injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. I Yes 4 Yes.

(*b*) If due to one of these causes, to what specific condition do the Board attribute it? Strain aggravating a previous disability

21. Has the disability been aggravated by

(*a*) Intemperance? No

(*b*) Misconduct? No

22. Is the disability permanent? Yes

23. If not permanent, what is its probable minimum duration? Not applicable

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present? ½ for first six months + ¼ for balance of year. Then none compared with capacity on enlistment

In defining the extent of his inability to earn a livelihood, estimate it at ¼, ½, ¾, or total incapacity.

25. If an operation was advised and declined, was the refusal unreasonable? Not applicable

26. Do the Board recommend

(*a*) Fit for duty? No

(*b*) Fit for light duty? No

(*c*) Invalided to Canada? No

(*d*) Discharge as permanently unfit Yes

APPROVED
CAPTAIN A.D.M.S. FOR D. OF R. & O. FOR BRIGADIER GENERAL COMMANDING
CANADIAN TRAINING DIVISION, SHORNCLIFFE.

Signatures :—

Station SHORNCLIFFE—C.C.A.C. (19, Westbourne Gardens, Folkestone.)

Date July 25th 16

[signature] President.

R M Fergusson Capt } Members.

Approved.

Station Shorncliffe

Date 25 JUL 1916

S. L. Walker
Administrative Medical Officer.

CAPT.
FOR A.D.M.S. CANADIANS, SHORNCLIFFE.

AUG 31 1916 20/8/16

PENSIONS AND CLAIMS BOARD, Canadian Expeditionary Force, assembled at Folkestone, Kent, England, on the 28th day of July 1916.

Prior Park, Bath.

Members of Board.

LIEUT.-COL. SIR H. MONTAGU ALLAN, C.V.O., *President.*

LIEUT.-COL. W. GRANT MORDEN.

Major R. Raikes. C.A.M.C.

Legal Adviser.

Major Hume Blake.

Proceedings.

The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked

No.433101.
Pte. T. W. Killips.
49th Battn. 9th Res.

Recommends:-

1. That this Man's discharge be not carried out until he is in receipt of the first payment of the following Pension:-

2. That he be granted a Pension for the period of Six Months under Class 3, at the rate of 60 per cent, Two Hundred and Eighty Eight Dollars per annum, under the Pay and Allowance Regulations 1914 as amended by P.C. 1334 of June 3rd 1916.

3. That his three daughters - Gertie, aged 15 years; Mabel aged 13 years; Rose aged 11 years, and his three sons - Harry, aged 9 years, Roy aged 7 years and Gordon aged 5 years, each be granted a Pension for the period of Six Months at the rate of Six Dollars per month, under the Pay and Allowance Regulations 1914, as amended by P.C. 1334 of June 3rd 1916.

Signed at Prior Park, Bath, this 28th day of July 1916.

H. Montagu Allan — *President.*
Lt.-Col.

R Raikes
Major.
C.A.M.C.

Lt.-Col.

Major.

Form R. & O. 6051.
4282. 25 M. 2/1/17.

REFER TO FILE O. Inf 21210.

CANADIAN CASUALTY ASSEMBLY CENTRE,

Hastings
1-3-17

From:--O.C., Canadian Casualty Assembly Centre.

To:--O.C., T/C Records.
London

No. 433101
Killip. T.

The marginally named soldier was sent to ~~you on~~ Canada 27-7-16.
for Discharge

Since then the following documents relating to this soldier have come to hand, and are being forwarded herewith for your files:--
medical History Sheet
Field Conduct "
Casualty form
attestation paper

RECORDS REGISTRY
CANADIAN EXPED'Y FORCE.
R.L. 6 44 95
REFD TO R2
5 - MAR 1917
ACTED ON
C/O 6 L/R B9108
GREEN ARBOUR HOUSE
HOLBORN VIADUCT LONDON E.C.

Kindly acknowledge receipt of same on duplicate copy of letter attached.

G. C. Edridge.
for Officer Commanding
Canadian Casualty
Assembly Centre.

CANADIAN RECORD OFFICE,
GREEN ARBOUR HOUSE,
OLD BAILEY. E.C. 4.

ACKNOWLEDGED. 12th March 1917.

Documents sent to Ottawa
12/3/17
TW RIIC G/26

REFER TO FILE

CANADIAN CASUALTY ASSEMBLY CENTRE.

From:- O.C., Canadian Casualty Assembly Centre.

To:- O.C.,

No:

The marginally named soldier was sent to

you on

for

Since then the following documents relating

to this soldier have come to hand, and are being

forwarded herewith for your files.-

Kindly acknowledge receipt of same on

duplicate copy of letter attached.

Officer Commanding
Canadian Casualty
Assembly Centre.

H.Q. 649-K-1103.
ADMS M 7X43

MEDICAL HISTORY OF AN INVALID.

1. Station. EDMONTON, Alta.

2. Regiment or Corps. 49th Battalion

3. Regimental No. and Rank. 433101 Pte.

4. Name. Thos. W. Killips

5. Age last Birthday. 43

6. Enlisted on 12th April 1915

at EDMONTON

7. Former trade or occupation. Carpenter

8. General remarks on his:—

(a) Conduct.

(b) Habits.

(c) Temperance.

(For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)

DEPT MILITIA & DEFENCE MAR 21 1917 H.Q. 649-K-1103 CANADA

Date 6th December 1916

9. Service.

	Years.	Days.	PERIODS From	PERIODS To
49th Battalion			12-4-15	6-8-16
C.C.A.C.			6-8-16	Date

10. (a) Disease or disability. Valvular disease of the heart.

(b) Date of origin. 4th June 1916

(c) Place of origin. Ypres

(d) Cause. Active Service.

BOARD OF PENSION COMMISSIONERS FOR CANADA. APR 5 1917 CONSIDERED FOR PENSION.

11. Present condition. (Most Important.)

(To include full description of present disabling condition or conditions, and of the immediate and direct cause of incapacity, *i.e.*, debility, breathlessness on exertion, necessity of treatment by rest, etc.)

Heart slightly enlarged. Beat just inside and below the nipple line. Has mitral regurgitatant murmur, sounds slightly transmitted to the axilla region. Compensation seems adequate, except under exertion. Action is free and regular, rhythm perfect.

Subjective - complains of shortness of breath on exertion. Unable to do any heavy work. Other systems normal.

Gives history of recurring attacks of lumbago, probably rheumatic.

12. (a) Is the disability the result of service or climate? Service.

(b) Has it been aggravated by intemperance, vice or misconduct? No

M. F. B. 227.

200M. 8 16.
1772-39-117.

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.)

Scar on right wrist.

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action, was a Court of Inquiry held ?

N.A.

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

Not exceptional in active service

14. Treatment.

Hospital

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent ?

N.A.

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes ?

Permanent, should improve.

17. To what extent will it prevent his earning a full livelihood in the general labour market ? Please state in fractions. When more than one disabling condition is present, the extent of the disability due to each should be stated.

Three-fifths for six months.

18. State if for discharge on account of unfitness for Service.

UNFIT for service

MAJOR, C.A.M.C.

Medical Officer by whom the case is brought forward.