ORIGINAL 812 931812

ATTESTATION PAPER.

No.

No. 2 CONSTRUCTION, B'n. C.E.F.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Kilpatrick
1a. What are your Christian names?	Admirl
1b. What is your present address?	Chicago, Illinois, U. S. A.
2. In what Town, Township or Parish, and in what Country were you born?	Brighton, Tennessee, U. S. A
3. What is the name of your next-of kin?	Mrs. Mandy Kilpatrick
4. What is the address of your next-of-kin?	Burlison, Tennessee, U S A, R.F.D. Box 169,
4a. What is the relationship of your next-of-kin?	Mother
5. What is the date of your birth?	1898, February 28th
6. What is your Trade or Calling?	Porter
7. Are you married?	No
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9. Do you now belong to the Active Militia?	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

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Admirl Kilpatrick, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the **Canadian Over-Seas Expeditionary Force**, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Admirl Kilpatrick (Signature of Recruit)

Date 14th Feb 191 7 (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Admirl Kilpatrick, 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.

Admirl Kilpatrick (Signature of Recruit)

Date 14th Feb 1917. (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 Windsor, Ont this 14th day of February 191 7

James Chisholm (Signature of Justice)

M. F. W. 23
750M—8-16
H. Q. 1772-39-341

Description of Admirl Kilpatrick on Enlistment.

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

Height ..... 5 ft. 7-1/2 ins.

Chest measurement.
- Girth when fully expanded ..... 34 ins.
- Range of expansion ..... 3 ins.

Complexion ..... Colored

Eyes ..... Brown

Hair ..... Black

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

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

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

Hearing. R.E. normal
L.E. normal

Vision. R.E. 20/20
L.E. 20/20

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date 14th Feb 1917.

Place Windsor, Ont

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.

Admiral Kilpatrick 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.

D.H. Sutherland Lieut-Col
No. 2 Construction Batt'n. C. E. F.
(Signature of Officer)

Date FEB 23 1917 191 .

Card
KR
29/3/17

DUPLICATE

ATTESTATION PAPER.

No. 931814

No. 2 CONSTRUCTION, D'n. C.E.F.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1.	What is your surname?	Kilpatrick
1a.	What are your Christian names?	Admirl
1b.	What is your present address?	Chicago, Illinois, U.S.A.
2.	In what Town, Township or Parish, and in what Country were you born?	Brighton, Tennessee U.S.A.
3.	What is the name of your next-of kin?	Mrs. Mandy Kilpatrick
4.	What is the address of your next-of-kin?	Burlison, Tennessee, U S A
4a.	What is the relationship of your next-of-kin?	Mother
5.	What is the date of your birth?	1898. February 28th
6	What is your Trade or Calling?	Porter
7	Are you married?	No
8	Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9.	Do you now belong to the Active Militia?	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

13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit?

14. If so, what was the nature of the disability?

15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?

16. If so, what was the reason?

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Admirl Kilpatrick, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the **Canadian Over-Seas Expeditionary Force**, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Admirl Kilpatrick (Signature of Recruit)

Date 14th Feb 191 7 (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Admirl Kilpatrick, 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.

Admirl Kilpatrick (Signature of Recruit)

Date 14th Feb 191 7 (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 Windsor, Ont this 14th day of February 191 7.

James G Glazier (Signature of Justice)

M. F. W. 23
750M—3-16
H. Q. 1772-39-341

N.B.—Attention is drawn to the fact that any person making a false answer to any of the above questions is liable to a penalty of six months' imprisonment.

Description of Admirl Kilpatrick on Enlistment:

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

Height ... 5 ft. 7-1/2 ins.

Chest measurement:
- Girth when fully expanded ... 34 ins.
- Range of expansion ... 3 ins.

Complexion ... Colored

Eyes ... Brown

Hair ... Black

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

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

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

Hearing - R.E. normal
L.E. normal

Vision - R.E. 20/20
L.E. 20/20

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date 14th Feb 191 7. ...

Place Windsor, Ont ...

... 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.

Admiral Kilpatrick 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.

D. H. Sutherland Lieut-Col. (Signature of Officer)
No. 2 Construction Batt'n, C. E. F.

Date FEB 2nd 1917 191 .

REGIMENTAL DOCUMENTS

NAME KILPATRICK ADMIRL (Pte) REGT. NO. 93/812 UNIT No 2 Com Bn H. Q. FILE NO.

CONTENTS		DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133, or 51)	1					DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)	2					Category
TRAINING HISTORY SHEET (M.F.W. 113)						
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)	2					
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)						
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)						
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)	2				08303	
DENTAL HISTORY SHEET (M.F.B. 465)						DISCHARGE
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)						Category
MEDICAL EXAMINATION (M.F.W. 129)	1					Demobilization
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)	1					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)						
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)						DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)	1					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)	1					
PARTICULARS OF CHARACTER (A.F.W. 3226)						
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)	1					
M F W 192	1					2
D M S 1375	1					10-22
Dent Cert for demob	1					25-22
casualty	2					27-22
M F W 67	1					
A122	1					
Pay Card	1					

W. 2589
100M-11-18
1772-39-1377

No. 931812. RANK Pte. NAME Kilpatrick. Admiral.

T. O. S. 14-2-17. UNIT No 2. Construction Battalion
D.O. 46. 22-2-17.

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917 Feb. 14	1917. Feb. 28	✓		
Mar		✓		

H. Q.

M. D. No.

Surname Kilpatrick

Christian names Admiral

Regtl. No 93812 Rank Pte

Unit No 2 Construction Bn

T. O. S. 19

D. O. Pt. II of 6

S. O. S Dis 15-2-19 19

Reason Demob

Auth Dre.

Next of kin Kilpatrick Mrs. Mandy Relationship Mother

Address Burlison, Tennessee U.S.A.

Also notify:

BORN—Place U.S.A. Brighton Tenn. Date Feb 28th 1898

ATTESTED—Place Windsor Ont Date Feb 14th 1917

O/S

R/C

W. 22—100M-7-18. 1772-39-839.

MEH

Number 93/812 Rank ~~Pte.~~ Spr.

Surname KILPATRICK

Christian Name Admiral

Units ENGR Theatre of War France

Date of Service 17-5-17

Remarks

Latest Address Glace Bay C.B. N.S.

Roll No. C.E. Page 175 29.

200m.—2—21.M.

Port, ship, and date of arrival

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.

Form R. 149.

Admiral

Name Kilpatrick Rank Pte Reg. No. 931812

Unit 2nd Constr Co

Next of Kin W S A.

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
17 4	No 51 G H Etaples		V D S	A 200		883/14
19-5	" 6 Con Dep "		"	A 225		1411-5
4-7	Discharged 3 Emp Base Dep		"	A 266		2446/19

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

NAME Kilpatrick, A.

RANK AND CORPS Pte. 2 Cons.

REGT'L. No. 931812

H. Q. FILE No. 649

FOLLOWS No.

FOLLOWS

CABLE NO.	DATE	NATURE OF CASUALTY

L. L. 31493. M. & D. 8476.

M. F. W. 42—100M.—28-11-17.
H. Q. 1772-39-893.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
a 200.[2]	#51 Gen. Etaples	17-4-18.	V.D.S.
a 225	No 6 Conv Depot Etaples	19-5-18	V.D.S.
a 266	" " " Div	4-7-18	" " "

D.M.S. 1300-50M-21-11-17.

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
KILPATRICK	A.	931812 ~~831812~~

RANK	UNIT	CO.	TROOP	BATTY
Pte.	NS.2Con.			

HOSPITAL — DATE OF ADMISSION

1. 51 G.H. Etaples. 17-4-18. Hosp.
2. 6 b on. Dep. Etaples Hosp. 19-5-18
3. Hosp.
4. Hosp.

DIAGNOSIS

1. V.D.S. Mo
2.
3.

DISPOSITION — DATE

CL. 30-4-18. A200-2. Mo. 4. 7-18.

REMARKS

29-5-18 @ 225
17-7-18 @ 266 (2)

A.M.D. 2 DEPT.
Bch. of D.G.M.S. O.M.F.C. London.

EPITOME OF HOSPITAL TREATMENT

	HOSPITAL	ADM.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

*Name KILPATRICK. A. Rank PTE. Regtl. No. 931812

Fyle Depot 74-K-239.

Original unit 2 CON. BN Present unit #6 D. D. M. or S. Age 18 Religion Bapt. Ref. H.Q.

Port, ship, and date of arrival Halifax. N. S. "Empress of Bretain" 22-1-19.

Next of kin Mother. Mrs. Mandy Kilpatrick

Address on leave Glace Bay. N. S.

Address on discharge Same.

Transportation issued Yes / No Date Character on discharge

Previous occupation Porter. Date and place of enlistment Windsor. N. S. 14-2-17.

Diagnosis Date of Medical Boards

Date.	Remarks	Pt. 2 Order No.
12-1-19	T. O. S. #6 D. D. and posted to CASY. COY. 22-1-19	D. O. 29
15-2-19	Discharged. H. M. S.	D. O. 44

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

(over)

Date.	Remarks.	Pt. 2 Order No.

M.F.W. 192
150M—6-18.
1772-39-1243.

C.A.D.C. 5009 A

M.D. 6

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) KILPATRICK. A

REGIMENT 2nd Construction Co RANK PTE No. 931812

Date of Examination in England ..... Date of Examination in France 31-12-18

DIRECTIONS TO DENTAL OFFICERS

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

PRESENT DENTAL REQUIREMENTS

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

HAS HE EVER REFUSED DENTAL TREATMENT ?

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

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

KINMEL PARK, NORTH WALES.

Signature of Dental Officer W. Kennedy Capt.

ORIGINAL 931812

MEDICAL HISTORY SHEET.

Surname Kilpatrick *Christian Name* Admirl

Examined on 14th day of February 1917 at Windsor, Ont

Approved by Dan Murray Capt A.M.C.

Birthplace City or Town Brighton County Tennessee

Rank M.O.

Apparent age 20yrs

Trade or occupation Porter

Height 5 Feet 7-1/2 Inches.

Weight 135 Lbs.

Chest measurement Minimum 34 inches. Maximum expansion 3 inches.

Physical development

Small-Pox Marks

Vaccination Marks Arm Right. Left. Number

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Both Eyes 20/20

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.
3/3/17	[illegible]	[illegible] M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
24/4/17	[illegible]	[illegible] Sheplee M.O.
2/4/17	[illegible]	Dan Murray M.O.
29/4/17	[illegible]	Dan Murray M.O.

Enlisted on 14th *day of* February 1917 *at* Windsorm Ont.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	#2 Construction Battalion, C.E.F.	931812		14th February 1917
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Windsor, Ont.	FEB 16 1917 Major, A. M. C.	on enlistment Capt., A. M. C.	Fit Sheplee Capt. C Corps

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

M. F. B. 313.

400M.—1-16.
H. Q. 1772-39-439.

Surname Kilpatrick Christian Name Admiral

STATION.	Date of Arrival at the Station.	DATES OF Admission into Hospital. Day	Month	Year	DATES OF Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of Inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.

Awards

M. F. W. 54. (A. F. B. 103.)
350M.—5-16
H. Q. 1772-39-920.

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

Casualty Form—Active Service.

Unit, Regiment or Corps #2 Construction Battalion C.E.F.

Regimental No. 931812 Rank Pte. Name Kilpatrick, Admiral

C. E. F.

Enlisted (a) 14/2/17 Terms of Service (a) Duration of war + 6 months Service reckons from (a) 14/2/17

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

Extended ..... Re-engaged ..... Qualification (b) .....

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		Embarked from Canada	Halifax, NS	25/3/17	
		Disembarked, England	Liverpool	7/4/17	
17/5/17	O. C. 2nd. Const. Battn.	Proceeded Overseas	Seaford	17/5/17	Pt. 2 D.O #
		Landed in France 17-5-17 N.R.			
21.5.17	OC	Forfeits 5 days pay for Making away with Iron Rations	Fld.	31.5.17	13269 Pte 2 120 26/7/17

CERTIFIED A TRUE COPY
6 JUN 1939
CAN. RECORDS, LONDON.

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g. Signaller, 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				
17.7.17.	O.C.	~~Irregular conduct on Church Parade~~ Hesitating to obey an order 10 days F.P. No 1.	Fld.	16/7/17.	B2069. P.E. II. O 122. 1/9/17
23.7.17	O.C.	20 Days F.P. No 2 for Malingering	Field	23.7.17	B2069 P. 131 13/10/17
18-10-17	O.C.	15 days F.P. No 2 for (1) When on active Service neglecting to obey an order (To Work) when ordered to do so by an officer) (2) Breaking arrest	11/10/17.	B2069 dy 18/10/17. 29/5/36 dy 25/10/17	
17/11/17	O.C.	att to 37th Coy C.T.C.	13/11/17	B213.	
30/10/17.	O.C.	Forfeit 2d allce of 50 Cents per day		P29/No 8 dy 13/3/18	
	Just hosp.	from 3-9-17 to 22/9/17 (20 days) (V.D.)		A.F.O. 1643.	
16.4.18	20 Fld amb.	42 Syphilis. adm. To 51 Gen.	16.4.18 / 17.4.18	E 4446. a. 110.	
16.4.18	O.C. 37 C.	Ceases to be attd. to 37 Co. C.T.C. on adm. to Hospital.	16.4.18	B213.	
17.4.18	51 Gen.	V. D. S. Adm.	17.4.18	E 5725. W. 8309.	
19.5.18	51 G. Hos.	Forfeits Fld. allow. & placed on Stop. of pay at 50 d per day whilst in Hosp. from 17.4.18 to 19.5.18. 33 Days.		A.F.O. 1643 No. 4338. D/19.5.18. O/31 D/28.5.18.	
19.5.18	51 Gen. H.	V. D. S. To 6 Con. Depot TB. 1906.	19.5.18	F 2962. W 1554.	
19.5.18	6 Con. Dep.	V. D. S. adm.	19.5.18	F 3226. W 1599.	
22-6-1918	6 " "	Mtt a patient	Field	22-6-18	Letter file KG. 17. 797

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

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

INSTRUCTIONS.

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

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

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

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

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

---

(1) Name of Overseas Unit which Soldier joins.....

.....

(2) Regimental Number 931812

(3) Full Name of Soldier..... Admit Kilpatrick

.....

(4) Place of Birt ..... Tennessee, U.S.A.

.....

(5) Are you married, or not ? ..... Single

(6) If married, state,

(a) Full name of your wife..... x

.....

(b) Present Postal Address..... x

.....

(7) Are you a widower ? ..... No

(8) Have you any children ?..... x

If so, give number of boys and girls..... x

Also their names and ages..... x

.....

.....

.....

.....

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? No

If so, state name and address ?

(10) Is your Mother alive? Yes: Mrs Mary Kilpatrick

If so, state name and address Burleson, Tennessee, U.S.A.

(11) If your Mother is a widow Yes

Are you her sole support, or not? No

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

?

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

?

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

?

(15) Are you insured? No.

If so, in what Company? ?

Have you made arrangements for payment of your Insurance premium

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

F. Davie Capt for Lieut-Col.
No. 2 Construction Batt'n. C. E. F.
Officer Commanding.

No. 2 CONSTRUCTION BATTALION C.E.F. ORDERLY ROOM MAR 17 1917

Date

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

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 931812 Rank Pte. Surname Kilpatrick
(Given name in full) Admiral Kilpatrick

Unit or Corps D.D. 6 Birthplace Elfreeport Ill. U.S.A

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

1. GENERAL DESCRIPTION:

Physique Good Weight 150 lbs. Height 5 ft. 9 in. Colour of Eyes Brown.

Nutrition Good

Pulse 82

Condition of arteries Good

Vision Rt. 20 Left 20

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

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

Nil.

Opinion as to general health and physical condition Good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No") (Subjective evidence may be sufficient in certain cases.)

Nervous System No Genito Urinary System No Cardio-Vascular System No

Special Senses No Integumentary System No Respiratory System No

Disturbance of mentality No Muscular System No Digestive System No

Osseous and Joint System No Any other general condition No

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

Glace Bay. N.S.

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

[OVER]

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at ....(Overseas)

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

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

Signature .....

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

THIS SECTION FOR USE IN CANADA—

Examined at Hamax (Canada)

Date Feb 11/19 Signed .....M.O.

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

Signature .....

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

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

[OVER]

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

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 931812 (Rank) Private

Name (in full) Admiral Kilpatrick enlisted in

the No. 2 Construction Battalion

CANADIAN EXPEDITIONARY FORCE at Windsor Ont. on the 14th

day of February 1917

HE served in France

and is now discharged from the service by reason of Demobilization

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

Age 21 years

Height 5 feet 9 inches

Complexion Dark

Eyes Coloured Brown

Hair Black

Marks or Scars Nil.

Admiral Kilpatrick
Signature of Soldier

C W Macaloney CAPTAIN.
Signature and Rank of Officer
O. C. DISCHARGE SECTION No. 6 DISTRICT DEPOT.

Date of Discharge February 15, 1919

Signed at Halifax N.S. this 13th day of February 1919

in Military District No. Six

File Reference No.

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

M. F. W. 39a
200m.—2-18.
H.Q. 1772-39-882

2

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

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

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

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

.....

Medals and Decorations .....

.....

Remarks .....

.....

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

.....

Name of Officer

.....

Rank

.....

Appointment

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

Uniform not to be worn after Date of Discharge, unless authority has first been obtained from G.O.C. District.

FORM OF WILL

I, Admiral Kilpatrick (Name in full)

Regimental Number 931812 serving in No. 2 CONSTRUCTION, B'n. C.E.F.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I devise all my real estate unto My Mother

Mrs Mandy Kilpatrick
R.F.D. Box 169
Burleson, Tenn. U.S.A.

Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to My Mother

Mrs Mandy Kilpatrick

Name and Address of person or persons to receive personal estate* (*See note*).

NOTE

This space for the appointment of Executor if necessary.

IMPORTANT NOTE

This must be signed and Dated by THE SOLDIER HIMSELF.

this 16th day of March A.D. 1917

admiral Kilpatrick Signature of Soldier.

*N.B. Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness J. Young

Address of Witness 145 Creighton St Hfx. N.S.

Occupation of Witness Soldier

Signature of Second Witness Lloyd Byer

Address of Witness Hants Co Waterford

Occupation of Witness Harnessmaker

M. F. W. 82.
300M.-12-16.
1772-39-983.

Reld. undelivered from Ball 95

DISTRICT DEPOT
K-239

Form R 122.
2353—100M—9-1-16

JM

Rank | Name KILPATRICK, Admiral.. | Reg'l No. 931812

Unit No. 2 Const. Bn. | If in perm. Corps, What Unit? | Married or Single Single.

Place and Date of Enlistment Windsor Ont. 14th Feb 1917. | Place of Birth Brighton, Tennessee, U.S.A.

Name and Address, Next-of-Kin Mrs Mandy Kilpatrick.

Burlison, Tennessee, U.S.A. (R.F.D. Box 169) Relationship Mother.

Assigned Pay Monthly $ | Payable to | Relationship

Separation Allowance $ | Payable to | Relationship

6690
File R.L.
Category OR CAN

Discharge, Date and Place | Reason | Character

H. W. & V., Ld.—9546-16.

A.F.B. 103 CHECKED
29 MAY 1917

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
6		Arrived in England ss "Southland"		7-4-17	Awow.
14.6.17	2nd CCC	Proceed in France	Field	17-5-17	Rtg. 115.
16.12.18	NSRD.	TOS from 2nd CCC	Pte Bisset	14.12.18	DO 308-471 D/ 19.12.18 2nd CCC.
27-12-18	N.S.R.D	O/C to C.D.D Rhyl	"	27-12-18	313
25.1.19	N.S.R.D.	Ceases O/C to Rhyl, TOS to C.C.C. Canada.	"	Repon. 12.1.19-18.	
31.1.19	2.C.C.C.Clg	Sentenced 28 Days F.P. No 1 for Refusing to work — Insubordination	Pte	Field	8.12.8 TH & T.O. 1

931812 Kilpatrick a.

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.				

P. 550

MARRIED OR SINGLE: S.

PLACE OF BIRTH: Brighton Tennessee U.S.A.

NAME AND ADDRESS OF NEXT OF KIN: Mrs. Maudy Kilpatrick Burlison Tenn. U.S.A.

RELATIONSHIP OF NEXT OF KIN: Mother.

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ — EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL
3/9/17.	27/9/17	V	Jura 1/3/18

REG'L NO. 931812 RANK — NAME Kilpatrick, Admiral

IF IN PERMT. CORPS } WHAT UNIT — UNIT 2nd Can Bn — TRANSFERRED TO — DATE — AUTHORITY

PERMANENT FORCE ALLOWANCES — TRANSFERRED TO — DATE — AUTHORITY

PLACE OF ATTESTATION Windsor Ont. — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 14th Feb. 1917 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY MONTHLY $ — DATE EFFECTIVE

PAYABLE TO — RELATIONSHIP

ASSIGNED PAY MONTHLY $ — DATE EFFECTIVE

PAYABLE TO — RELATIONSHIP

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

DISCHARGE DATE AND PLACE — REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE	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
														22 23	22 23																22 23				Bal from Canada
apr/30	30	1/10	33	00											33 00															53 23		15 -	38 23	
MAY 1-31	31	-	34	10											34 10	52 26	4/5 19/4							9 74 4 87						7 70	22 31	67 02		30 -	67 02	Forfeit 7 ds Pay. DO. 111. 10-5-17
June 1-30	30	-	33	00											33 00	60	14/5							4 87							4 87	95 15		45 -	50 15	
July 1-31	31	-	34	10											34 10															5 50	5 50	123 75		60 —	63 75	Forfeit 5 ds pay. 21-5-17 DO. 126. 26-7-17.
Aug -	-	-	34	10											34 10															11 00	11 00	146 85		75 -	71 85	Si: 10 ds. FP 1. 16-7-17. DO 122. 7-8-17
Sep 1-20	20	-	33	-											33													130 1/6 102 2/6 273 1/7								
			201	30										22 23	223 53									19 48				356 357 357			10 70	169 15			

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR 3	DR 4	BALANCE	DEFER. SER. ALLOE. PAY ENTS.
Sep	Bal	~~169 15~~ 34 10							169 15.	
Oct	P.P.			Std 20 ds. FP 2. 23/7 Do 131. 13-10-17.		22 -	-	-		
				AR. 575. 27/7 2 Comfort Mo Allt C.F.C.	3 57					
				" 464. 13/7 - - - -	3 56					
				Std 15 ds. FP 3 11/11 Do 136 25/10/17		16 50			157 62	
		34 10			7 13	38 50	.	.		

Pte 931812 Kilpatrick. A.

DATE	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 DATE	2 No.	2 DATE	3 No.	3 DATE	4 No.	4 DATE	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
MONTH	PARTICULARS				CR.1				CR.2				PARTICULARS			DR.1		DR.2		DR.3		DR.4		BALANCE	DEFERRED PAY	SER. ALLOC. ENG.									
	Overseas																							157 62											
Nov.	PP.				33	–			AR.826.28 9/17. C.F.C.					3 57																					
									"980.25 10/17					3 57																					
DEC	"	"			34	10			"1089. 10 11/17					3 57										214 01											
					67	10								10 7																					
JAN	1918	PP.			34	10																												
									"128.25 11/17					7 14										240 97 150											
					34	10	–	–						7 14	– –									– –											
FEB		–			30	80			"171. 13/18. Aboukir Co.					2 68										–											
									"196 26 1/18 "				J7 C.F.C.	2 68																					
									VD. 3/19 23/9/17				90	5 7½	12 00																				
														8 13/3/18																				
									aR 143 16/1/17. 37 C.F.C.					4 46										214 99											
					30	80								9 82	12																				
MAR 1918	"				34	10			aR.253 16 3/18. 37. C.F.C.					2 68										145											
									"305 78 3/18 "					3 68																					
									Jn "159 30 12/17 "					5 35																					
									aR 357. 18 3/18. "					5 35										26 99											
					34	10								16 06																				

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ENGLAND OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:-	EFFECTIVE DATE:-
AMOUNT:-	AMOUNT:-

NAME, ADDRESS, RELATIONSHIP & AUTHORITY | WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

NAME:- KILPATRICK Admiral

NUMBER:- 931812

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte.

UNIT AND TRANSFERS

ORIGINAL UNIT:- 2 Construction Bn

DATE ACCOUNT FIRST OPENED:- 1 APR 1917

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
		3/3/19	Canada

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
4/12/18	786	37 Co CFC	~~t 53~~				
						Dsch to Canada 2AR 16	17/12/18 N.S.R.

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE:- 31/12/18 Cr Bal Rec'd for Sheet 477.01 Def Pay 285.00
31/12/18 - - 2 BC 482.55

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
MAR	Balford								26 7 99	150 ~~445~~	
Apl	P. Pay	33 -		AR 33 - 10/4/18 - 37 Co CFC	5 35				29 5 64	160	
		33 .			5 35						
May	P.P.	34 10		Hospital 11/4/18 to 19/5/18 - 33 Days @ 6/-							
				Bo 31. 28/5/18. 2 Cons Bn.	. .	19 80					
				Dwar 3237. 26/5. CRT Staples.	4 46				305 48	175	
		34 10			4 46	19 80				190	
June	P.P.	33 -		Dwar 3819 9/6 CRT Staples	4 46					190	B
				AR 5123 30/6 6 4 B2.	4 46				329 56	181 75	
		33			8 92						
				5 days FR x 18/6/18 Not complying with an order Bo 39 2 Con 6/7/18		5 50					
July	PP.	34 10		AR 279 12/7 37 Co CFC	4 46					194 25	
	Do 131 13/10/17 Conc with Bo 132 2/8/17. 3 days	3 30		AR 328 27/7 ✓	4 46				352 54		
		37 40			8 92	5 50					
Aug	PP.	34 10		AR 385 15/8 37 Coy CFC	4 46						
				AR 434 31/8 ✓	4 46				377 72	209	
		34 10			8 92						
Sep	PP.	33		AR 479 13/9 37 Co CFC	7 14						
				AR 542 27/9 ✓	4 46				399 12	224	
		33		398 11/10 37 Coy 6/6.	11 60						
					4 66						
Oct	✓	34 6							428 56		
		34 10			4 66						
Nov	✓	33		786 Nfld 3 6 6/6.	12 99						
	← Dec	34 10		~~Dr~~ 686 20/10 " "	4 66				477 01	285 -	
	Interest on Def Pay	11 87			8 65				488 88		
		78 97			18 65						
					Balance.						

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
				Over					48898		
				4/1 27/12 27 C 26.	653				42245		
				11 10/1 Kpt. Wages	973				41272		
					1626						
				Lost par 1/1/19 Do 18 1/1/19							
				nil							

Army Form 3078

Army Form B. 103. Regimental Number 931812

Casualty Form—Active Service.

Regiment or Corps No 2 Edn Construction Coy

Rank Spr Surname Kilpatrick Christian Name Admiral

Religion ..... Age on Enlistment ..... years ..... months

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

Date of promotion to present rank ..... Date of appointment to lance rank .....

Extended { ..... / ..... } Re-engaged { ..... / ..... } Qualification (b) .....

or Corps Trade and rate .....

Occupation ..... Signature of Officer .....

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				
		Embarked ...			
		Disembarked ...			B2069
22-6-1918	OC No 6 Con Dep	5 days FP No 8. 18-6-1918 for not Complying with an Order	Etaples.	17-6-18	W.T.O. 39 dated 6-7-1918
4-7-18	6 Con depot.	V.D.S. to No 3 Employ Coy	depot Sailed.	4/7/18	W 607 22/1848
5-7-1918	Etaples.	Arrived at Etaples depot	Sailed.	4-7-18	Inf. Rft 966.
9-7-18	do	Left for No 37 Coy C.E.	Lines	9-7-18	Inf. Rft 2/1501
13-7-18	OC 37 Coy C.E.	Rejoined from Hospital	Sailed.	9-7-18	B213
3-8-18	do	Admonished 2/8/18 for W.O.A.S. leaving work without permission			B2069
11/12/18.	A.A.G	Transf to England & posted to U.K. Reg Depot	Bramshott	11/12/18	K.R. 3484

(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.

W. 8625—M2733 2000m 9/17 (35611) C. P. & S., Ltd., Form B.103 E/1807. P.T.O.

Casualty Section, G.H.Q. 3rd Echelon, B.E.F.

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				
17.12.18.	N.S.R.D.	T.O.S and attd 2nd C.C.D. for Quarters & Rations	Bexhill	12.14.18	D.O. 305
	W.S.R.D.	ON COMMAND TO C.C.D. Kinmel Park Rhyl SOS DM'S C. on Trans. to C.E.F. Discharge Canada Sailing No 4	BRAMSHOTT	12-1-19	PART II D.O. N.S.R.D 313 24.12.18 W.A. Knight LIEUT, OFFICER i/c RECORDS, NOVA SCOTIA REGTL. DEPOT. Roy. M. Hammond Lieut
12.1.19 O'seas	T/O/S. No 6 D.D. Hfx.	Kinmel Park Coy Co.	23.1.19	Do 29.	A.M. Ferguson Lieut ASST. ADJT. No. 6 DISTRICT DEPOT
15.2.19	DISCHARGED at Halifax, N.S.		Do #44 for.		R.L. Christie LIEUT O.C. DISCHARGE SECTION No. 6 DISTRICT DEPOT

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

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

Regimental No. 931812 Rank Pte Name Kilpatrick A

Corps 2nd Can Bn who was* Discharged

On 15-2-19 191..., to .....

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-1-19 191....,

to 15-2-19 191...., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Balance Cr. from prev. month Jan	11	15
Advances by Cheques No. AR 708 1394	100	—	Regt'l. Pay 46 days at $ 1 c. —	46	—
No. 13774	10	—	Field Allow. 46 days at $ 10 c.	4	60
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges Reg Fund		05	Other Allowances* Ch Army allow	35	—
Payment on transfer or discharge No. 13946	419	45	Other Credits* L P C	432	75
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)	70	—
Total	599	50	Total	599	50

*Give particulars.

A monthly stoppage of $..... (†) has ..... (‡) been paid on account of Assigned

Pay for the month of .....191...
and Sep'n Allce. for month of .....191... } (to) Assignee .....

(Address) .....

(†) Insert amount to be assigned, whether it has been paid or not.
(‡) Insert "not" if amount has not been paid for period of account. July 6/19

On Transfer of an Officer.

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

REMARKS:—

State (1) date of enlistment .....

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

(3) cause of discharge Demob authority D044

(4) authority for transfer .....

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

M.D. No. 6

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

Date 17-2-19

Place Halifax NS .....

.....CAPT.
Paymaster.

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

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.

H.Q. 1772-39-903.
100M-9-18. D.P. 874.

Pay Office Depot
FEB
HALIFAX N.S.

War Service Badge
Class "A" # 76972
issued

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. 931812

Rank Private

Surname Kilpatrick

Christian Name Admiral

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) No. 2 Construction Battalion

Date of Discharge February 15, 1919

Place of Discharge Halifax N.S.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 21 years ____ months.

Height 5 feet 9 inches.

Complexion, Eyes, Hair } Coloured

Trade Porter

Intended place of residence (To be given as fully as practicable.) Glace Bay C.B.

Descriptive Marks

Nil.

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

Demobilization

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.

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

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

M. F. B. 218.

100M.—1-17.
H. Q. 1772-39-113.

(OVER)

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

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

6. Medals and Decorations.....

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

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

(Place).....

(Date).....

.....

Commanding .....

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

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

(Place) Halifax N.S. A. Kilpatrick .....(*Signature of Soldier.*)

(Date) February 15th 1919 W. R. Smith .....(*Signature of Witness.*)

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

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

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

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

10. **Statement of Service.**

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

Total.....years.....days.

11. **Confirmation of Discharge.**

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

(Place) Halifax N.S.

(Date) 15.2.19

(*Signature*) J.S. Davie Major

LIEUT, COL.

No. 6 DISTRICT DEPOT.

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.)

Nil

A. Kilpatrick

(OVER)

List of Discharge Documents.

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

Attestation Paper,	Militia Form B. 235.
Proceedings on Discharge	" B. 218.

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

(*a*) Proceedings on Discharge.

(*b*) Attestation.

(*c*) Medical History Sheet (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. 1375.

Medical Examination upon leaving the Service

of an Officer fit for general service or a Soldier fit for duty.

☛ *Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.*

Rank Pte. Name Kilpatrick Surname Admiral

Unit or Corps 17th Reserve (If a soldier) Regtl. No. 931812

Born at Freeport, Ill. on, date Feb. 28th 1898

Signature (for identification) A Kilpatrick

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

1. **PHYSIQUE**—Any deformity, maiming or lameness? If so, describe. no

Weight 168 lbs.

Height 5 ft. 9 ins.

2. **NUTRITION AND DIATHESIS?** good

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. **NERVOUS SYSTEM?** no

4. **RESPIRATORY SYSTEM.** no

5. **HEART?**

Abnormal Sounds? no

Abnormal Size? no

Pulse Rate? 64 Intermittence or irregularity? no

6. **ARTERIES.**—Any hardening? no

7. **DIGESTIVE SYSTEM?** no

8. **GENITO-URINARY SYSTEM?** no

Urinalysis—s.g.? 1020 Reaction? acd Albumen? no Sugar? no

9. **SKIN, MIDDLE EAR, EYE** or any other part? no

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe. no

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

Examined at Kinmel Park.

Date 2 / 19

Signed W. Stephens Capt. M.O.

Signed [illegible] M.O

☛ *If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.*

No. 931812 Name Kelpatrick A. | Sqn., Batty., or Company | 4 Platn. Corps 12 Can. Bn C.E. | Date of enlistment | 14/2/17. | G.C. Badges | | Service or Proficiency Pay |

Date of last entry in Company Conduct Sheet | 9/5/17 | No. and date of last drunk | — | Period not reckoning towards freedom from extra fine | | Sheet No. | | Signature O.C. Company, etc. | D H Sutherland Major | Character

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
Buford	9/5/17	Pte		Refusing to obey an order	Sgt Courtney Sgt Almond	Forfeiture 7 days Pay 10 days C.B.	10/5/17	Lt Col D.H.S.	Remarks
on Troop Train	19-5-17	Pte		Making away with Iron Ration	L/C D. Baily	Forfeits 5 day Pay	21-5-17	Major D H Sutherland	
La Jour	19-6-17	Pte		Damaging Government Property (Burning Seat)	L/C J M Love	Pay damages when assessed	19-6-17	Mgr D H Sutherland	
La Jour	15/7/17	Pte		Irregular Conduct on Church Parade. Hesitating to obey an order	L/C. Byers, L #1	10 days F.P.	16/7/17	D H Sutherland	Major
La Jour	20/7/17	Pte		Malingering	L/C. Love	20 days F.P. #2	23/7/17	Lt Col Wood adj	

Army Form B. 122

[P.T.O.

W. 16575/M. 237. 2,000M. J. P. & Co., Ltd. (C 1309). Forms/B122/4.

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
Le Jonx	11/10/17	Pte		When on active Service (1) Refusing to obey an order (To work when ordered to do so by an Officer (2) Breaking arrest	Capt Le Blair Sgt C.H. Joyce	15 days F.P. #2	11/10/17	D.A. Sutherland Major	

Taken on Strength 12-1-19 ... B.O. 29

AUDITOR | PAYMASTER

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

M. OR S. | REGT. No. 931812 | RANK Pte | NAME (IN FULL) Kilpatrick A. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
	1/10	

ORIGINAL UNIT C.E.F. 2nd Can Bn | IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ | DATE EFFECTIVE

PAYABLE TO | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Argyle St. Glace Bay N.S.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE | DATE 15-2-19 | REASON Demob. | AUTHORITY D044 | IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.			TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.			TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																				Documents # 95
Jan					11	30			11	20																05					05			11	11	Feb 20 29
1-1-19					11	15																														
Stet 15-2-19	46	110	50	60	432	75					13/70	8/2/19					100	—	137 10 00	139 46																Ca. L. P. C.
					35	=			529	50										419 45						05							529	50			
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	153	350							350								War Gratuity																		
																			70										70						210		
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																			70	—															70	—	May 6/19 CK # 155915
																			70	00													350		Bal		CK 593909 June 6/1919
		350							350										350	00									70				350				

Certified that all payments due on this acct. have been paid.

..... CAPT.
For Senior Officer Pay Services, M. D. 6

30M-11-18.—L.L. 50877-M. & D. 9553.

MONTH	PAY AND F.A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGIMENTAL CHARGES		OTHER CHARGES				TOTAL DEBITS		BALANCE				PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT								COL. No. 1		COL. No. 2		COL. No. 3		COL. No. 1		COL. No. 2		COL. No. 3										DEBIT		CREDIT		
			$	C.	$	C.	$	C.	$	C.	No.	DATE	No.	DATE	No.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	