ORIGINAL 570

160th O. S. Battalion, C. E. F.

ATTESTATION PAPER.

No. 651326

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ..... Kyte
1a. What are your Christian names? ..... Edward Thomas
1b. What is your present address? ..... Wiarton Ont.
2. In what Town, Township or Parish, and in what Country were you born? ..... Manchester England
3. What is the name of your next-of kin? ..... Edward Kyte
4. What is the address of your next-of-kin? ..... Wiarton, Ont
4a. What is the relationship of your next-of-kin? ..... Father
5. What is the date of your birth? ..... May 24 th. 1878
6. What is your Trade or Calling? ..... Saw Miller
7. Are you married? ..... Yes
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? ..... No.
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? ..... Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? ..... Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Edward Thomas Kyte, 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.

Edward T. Kyte (Signature of Recruit)

Date Jan 12 191 6. Thomas W. Moore (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Edward Thomas Kyte, 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.

Edward T. Kyte (Signature of Recruit)

Date Jan 12. 191 6. Thomas W. Moore (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 Wiarton Ont. this 12 th. day of January 191 6

B B Miller (Signature of Justice)

Police Magistrate

M. F. W. 23.
400M.—1 -15.
H. Q. 1772-39-841.

570

Description of Edward Thomas Kyte on Enlistment.

Apparent Age 37 years 7 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 35 ins.
Range of expansion 4 ins.

Complexion fair

Eyes brown

Hair auburn

Religious denominations:
- Church of England yes
- 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).

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 Jan 12 1916

Place Wiarton. Ont.

R. H. Fisher
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.

Edward Thomas Kyte 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.

J. Weir
Lt. Col
(Signature of Officer)

Date Jany 12th 1916.

Elec 20-5-19

REGIMENTAL DOCUMENTS

NAME Kyte Edward Thomas (PO) REGT. NO. 651 326 UNIT 1st Can Tsy H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
3	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Lund Refit
	MEDICAL EXAMINATION (M.F.W. 129)				14917	
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					1
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	4643					5-4
1	4467					31 4
	Chicoutimi					32-5
	Medal					
1	Pay Book					1
	Id Card					

407195

W 2589
100M-11-18
1772 39 1877

570

D M S. 1300 50M-21-1 17

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
Kyte.	E. J.	651326.

RANK	UNIT	CO.	TROOP	BATTY.
Pr	W. O. 1.			

HOSPITAL	DATE OF ADMISSION
11. 6. 7 a mb.	17. 4. 18
1. 57. C.C.S.	HOSP. 30-4-18
4. Gen. Camiers	2-5-18.
2. 6 Conval. Depot Etaples	HOSP. 6-5-18
3. 15 Conval. Depot Trouville	HOSP. 9-5-18
4.	HOSP.

DIAGNOSIS French Fever. Av.
1. P.U.O.
2.
3.

DISPOSITION

Dis. to. Base details 4. 6. 18 DATE

REMARKS

Eb. 24. 4. 18 a 196'.
7-5-18 a 207
8-5-18 a 26'8.
17-5-18 @ 216-2
11. 6. 18 @ 236

EPITOME OF HOSPITAL TREATMENT

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

es

Number 651326 Rank Pte

Surname KYTE

Christian Name Edward Thomas

Units 1st Bn Cam Inf Theatre of War France

Date of Service 1-3-18

Remarks Many St.

Latest Address ~~G.P.O~~ Wiarton Ont

Roll No. B Page 17117

200m.-2-21.M.

Form R. 149.

570

Name KYTE. Edward Thomas. Rank Pte Reg. No. 651326

Unit 1st Bn.

Next of Kin Canada.

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
17-4	11 C F A	French	fever	A196		17013
30-4	5-7 CCS		do	7207		17616
2-5	4 Gen H. Camiers		do	A208		10911/2
6-5	6 Con Dep Etaples		P.U.O.	A216		12520/8
9-5	15 Con D Trouville		"	A216		1231/4
14-6	Dis to B Details Etaples		do	A232		1842-12

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

NAME Kyte E.T.

REGT'L. No. 65-1326

H. Q. FILE No 649

RANK AND CORPS Pte. 41

FOLLOWS No.

FOLLOWS

CABLE No.	CABLE Date	NATURE OF CASUALTY

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

M. F. W. 42—100M.—23-11-17.
H. Q. 1772-39-893.

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LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
			W. O. Regt.
A196-1	11 Can. Fld. Amb.	17-4-18	Tr. Fever.
A207-1	5th Cas. C. Stat	30-4-18	" " " "
A.208①	H Gen. Camiers	2-5-18	" "
A216-2	6 Conv. Depot Etaples	6-5-18.	P U O.
A216	15 Conv. Depot Trouville	9-5-18	" " "
A236	Rech. to Base Det. Etaples	4-6-18	P. U. O.

No. 651326. RANK Pte. NAME Kyte. R. J.

T.O.S. 12-1-16 (So 14-12-1-16). UNIT 160th Battalion.

M.D. 1.

PAID FROM 1916.	PAID TO 1916.	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
Jan 12.	Jan 31.	✓		
Feb.		✓		
Mar		✓		
Apr.		✓		
May		✓		
June		✓		
July		M.		
Aug.		✓		
Sept.		✓		
Oct.		M.		

UNIT SAILED
OCT 17 1916

K11/. CARD NO.

SURNAME. Kyte

CHRISTIAN NAMES Edward Thomas

REGL. No. 65136 RANK Pte

UNIT 160th

FORMER CORPS Mil

Ss Dis 24-4-19
Demob FOLL.
auth DO 113-25-4-19
1 DD.
Bn.

NEXT OF KIN.

NAMES IN FULL Kyte, Edward

RELATIONSHIP TO SOLDIER Father

ADDRESS Kiarton, Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH England, Manchester DATE

PLACE OF ATTESTATION Kiarton, Ont. DATE Jan 12th 1916

T/C 21-4-19, 309/201, Pte.

L. L. 94504. M. & D. 6512.

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

570

W. S. B. CLASS. A.

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

M. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 160th O. S. Battalion, C. E. F.

Regimental No. 65132.6 Rank Pte. Name Kyte, Edward Thomas

Enlisted (a) 13-1-16 Terms of Service (a) C. E. F. Duration of War. Service reckons from (a) 13-1-16.

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) Gun Miller

CERTIFIED CORRECT. 7 MAR 1918 RECORDS, LONDON.

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.
		Embarked - Canada	Halifax	17/10/16	
		Arrived - England	Liverpool	28/10/16	
1-3-18	O.C. 160th Bn	Ceased on proceeding O's to 1st Battalion	Witley	28/2/18	G.O. par 42 #31 R.B. Whitehead CAPTAIN. ADJUTANT. FOR O.C. 160th CANADIAN INFANTRY BATTALION
	C. B. D.	ARRIVED C. B. D. V.S.O.S. 1st Bn	FRANCE	1/3/18	N. R. D. 1/3/18 PART II ORDER No 28 D. 9.3.18
	C. B. D.	LEFT C. B. D. FOR	1st Bn.	3/3/18	N. R. D. 3/3/18
	O. C. ..... BN	ARRIVED 1st Bn BN.	FIELD	14/3/18	B 213 D. 9/3/18
17.4.18	1st 6th A.	French fever adm	1st 6th A.	17.4.18	Gas 4 1195
		To	11 6th A.	17.4.18	
18.4.18	11 C F A	do adm	do	17.4.18	E6703
30.4.18	57 C C S	do Rem	57 C C S	30.4.18	E8952
2.5.18	4 Genl	P.U.O. adm	4 Genl	2.5.18	E9248

(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.

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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				
27.4.18.	OC 1st Bn	To Hospital Sick	Field	18.4.18	B213
2.5.18	57 CCS	To No. 1. A.T.		2.5.18.	E9762
1.5.18.	11 CFA.	S/ French Fever. to	42. CCS	30.4.18	E9886
7.5.18.	A Gen.	S.M.O. (M.) to	6 Con Depot	6.5.18	F2410.
8.5.18	6 Con Depot	do. to	15 Con Depot	8.5.18.	F703
8.5.18	6 Con Depot	do. to	6 Con Depot	8.5.18	F703
9.5.18	15 Con Depot	do S. admn	15 Con Depot	9.5.18.	F793
7.6.18.	6 IBD.	Taken on strength A. from	15 Con Depot	7.6.18	NR 348
4.6.18	15 Con Dep.	Class A to	Base.	4.6.18.	F6033
5.8.18.	6 IBD.	Left for CCRC	Field.	5.8.18	NRD 1335
5.8.18	CCRC	Arrived CCRC	"	5.8.18	NRA 1237
2.9.18	CCRC.	Left for Unit	do	2.9.18	NRD 1523
7.9.18	OC 1st Bn	Joined Unit	"	4.9.18	B213
	Emb. Camp	Proceeded to England.		25 MAR 1919	N.R. PT. 2 O. No.

14/4/19 PROCEEDED TO CANADA
OLYMPIC
SOUTHAMPTON
15.4.19

CAPT.
ADJUTANT R.M.T.

E. A. Hewett
LIEUT.
FOR LT COL.
A.A.G.
PT. 2 - O - NO 12 DATE 14/4/19

LIEUT. FOR
LT COL 1ST CAN. BATT.

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ORIGINAL Original 651326

MEDICAL HISTORY SHEET.

Surname Kyte *Christian Name* Edward Thomas

Examined on 12 th. day of Jan 1916 at Wiarton Ont.

Birthplace City or Town Manchester County England

Apparent age 37

Trade or occupation Saw Milling

Height 5 Feet 7 Inches.

Weight 135 Lbs.

Chest measurement Minimum 31 inches. Maximum expansion 35 inches.

Physical development Fair

Small-Pox Marks none

Vaccination Marks Arm Right. Left. 2 Number two

When Vaccinated last in childhood

(a) Marks indicating congenital peculiarities or previous disease none

(b) Slight defects but not sufficient to cause rejection None

Approved by R H Fisher

Rank Capt 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.
1/6/16	Pos	[illegible] M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
22/8/16		[illegible] M.O.
30/8/16		[illegible] M.O.
7/9/16		[illegible] M.O.
30/10/17		Geo. Ford

Enlisted on 12 *day of* January 1916 *at* Wiarton. Ont.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	160 th Bn	651326		
Transferred to	1st Bn			FEB 28 1918

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EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
London Ont	4.X.16.	Med Board	Fit L. J. Schut Capt A.M.C.
Branshott	8-4-19	Chr Otitis Med Supp (oed)	Manualary Capt

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.

200M—11-15.
H. Q. 1772 39-4'39.

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Surname Hyde Christian Name Earl Thomas

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.

Form R 122.
8750—15M—25-4-17.

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Rank | Name KYTE, Edward Thomas | Reg'l No. 651326

Unit 160th Bn. | If in perm. Corps What Unit? | Married or Single Married

Place and Date of Enlistment Wiarton, Ont. 12th Jan. 1916 | Place of Birth Manchester, Eng.

Name and Address, Next-of-Kin Edward Kyte, Wiarton, Ont.

Relationship Father

Assigned Pay Monthly $ | Payable to

Relationship

Separation Allowance $ | Payable to

Relationship

Discharge, Date and Place | Reason | Character

Report. Date.	From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date.	REMARKS Taken from Official Documents.
		Arrived in England	S.S. "Metagama"	28-10-1916	
1.3.18	160thBN	S.O.S. TO 1st. BN, O/S	WITLEY	28.2.18	PTII 31&1stBN 25d/9 3/18
1.4.19.	BWCCC	S.O.S from 1st Bn	Bishott Pk	26.3.19	" 10.
		49-Vc-		14.4.19	
17.4.19	B, Wg CCC	SOS to CAN	Bmshott	14.4.19	DO.12

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.				

100 (a). CANADIAN CORPS CAMP, BRAMSHOTT.

To:- Officer Commanding, ... 1st Bttn . . . . .

The following is an special EAR report on the undermentioned. your M.O's attention should be called to it, and the case should now be paraded with this report in triplicate, the Medical History Sheet and the Casualty Form to

~~the~~ LONG [redacted] Board as there IS [redacted] a disability of the EAR.

Name KYTE. E.T. . . Number 65-1326 . . . . Rank Pte . . . .

Unit 1st Bttn . . . . Former Occupation Saw Miller . . . . .

Original Disease or Injury Ch. Otitis Media Supp. . . . . .

Date of Origin Childhood . . Place of Origin England . . . . . .

Cause Unknown . . . . . .

Present Disability Deafness . . . . . .

History of present condition . . . . . .

In Childhood discharge both Ears - discharge not noticed for several years . . . . . .

Did the disabling condition have origin before enlistment? Yes . . . .

If so, has it been aggravated by Service? . . . . . Yes . . . .

Has the disability been caused or aggravated by Intemperance ~~or Improper~~ Conduct or unreasonable refusal to accept treatment? . . . . . No . . . . . .

What is the probable duration (in months) of the disability? Progressive

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

NOSE. Fractured Nose in 1913 -
Chronic Rhinitis now.

EAR.

RT.	20 ft	2"	=	—	10"/17"	Normal	perforated, sclerosed, retracted
LT.	20 ft	2"	=	—	10"/17"	Extremely	perforated, sclerosed, retracted

VOICE: 6ft. WATCH : WEBER - RINNIE : SEHWABACH : MEATUS - DRUMHEAD

Chronic Otitis Media (Suppurative) now quiescent

Category recommended B1 . . . . . .

Date . . . . . 8/4/19 . . . . . .

. . . . . Major, C.A.M.C.,
Officer i/c. Eye & Ear Dept.,
Medical Boards, C.C.C., Bramshott.
Walter Graham Capt

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

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-9-0.

Casualty Form—Active Service.

Unit, Regiment or Corps .....

Regimental No. 651326 Rank Pte. Name Kyte Edward Thomas

Enlisted (a) 12. 1. 16 Terms of Service (a) C. E. F. Duration of war Service reckons from (a) 21. 1. 16

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) Saw Miller

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				

TOS No 1 Dist. Depot
Displ. Stn. K. 15-4-19
SOS Dispersal
24,4,19 D.O, No, 115

for O.C. Dispersal Area Stn. K.

(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				

C.A.D.C. 5009A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

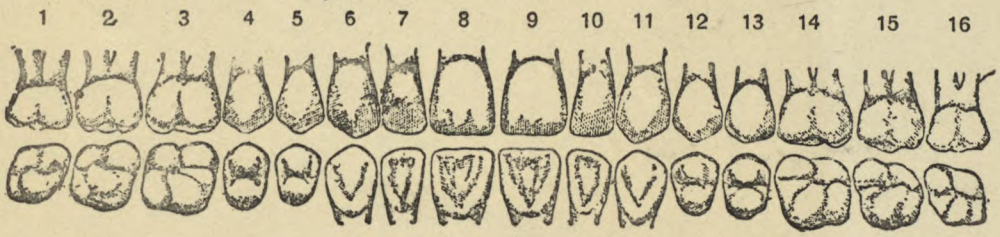
DIRECTIONS TO DENTAL OFFICERS

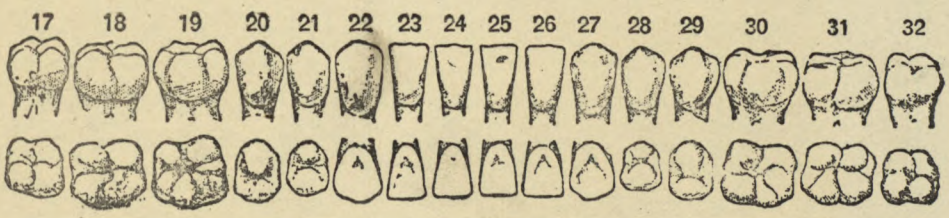
1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated

NAME OF SOLDIER (Block Letters) KYTE. E.T.

REGIMENT 1st Bn RANK Pte No. 651326

Date of Examination in England 27/3/19 | Date of Examination in France





21 R

PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS
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

Signature of Dental Officer A. G. Haig Capt

Duplicate

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: 160th Bruce Battalion

(2) Regimental Number: 651326

(3) Full Name of Soldier: KYTE, Edward Thomas

(4) Place of Birth: Manchester, England

(5) Are you married, or not? Yes

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

(b) Present Postal Address: Wiarton, Ont.

(7) Are you a widower?

(8) Have you any children? Yes

If so, give number of boys and girls: 3 Boys 3 Girls

Also their names and ages: Albert Edward, age 12, Cecil David, 10
Lorne Elgin, age 3, Ellen Francis, age 8,
Doris Jackson, age 5, Infant, not named

M. F. W. 67.

200M.—3-16.
I772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes

If so, state name and address Edward Kyte, Wiarton, Ont.

(10) Is your Mother alive? No

If so, state name and address

(11) If your Mother is a widow No.

Are you her sole support, or not?

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

Nil.

(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.

Nil.

(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.

Yes

(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.

Lt-Col.
Officer Commanding.
160th Os. Battalion. C. E. F.

Date 6th June, 1916.

570

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 651326 (Rank) Pte

Name (in full) KYTE Edward Thomas enlisted in

the ~~XX~~ 160th Can Inf Bn

CANADIAN EXPEDITIONARY FORCE at Wiarton ONT on the 12th

day of January 19 16.

HE served in 1st Can Inf Battn

and is now discharged from the service by reason of ~~Demobilization~~. On demobilization medically unfit for general service. ~~Medical Unfitness.~~

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

Age 40 ~~30~~ years

Height 5 ft 7 ins

Complexion Fair

Eyes Brown

Hair Auburn

Marks or Scars

Signature of Soldier

Issuing Officer

Date of Discharge

DISCHARGE SECTION
APR 24 1919
No. 1 District Depot

Rank

O.C. Dispersal Area Sta. K.

Date 19

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.B. 39A.
1049-D.P.-300M-11-18.
H.Q. 1772-39-882.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. _____ (Rank) _____

Name (in full) _____ enlisted in the

CANADIAN EXPEDITIONARY FORCE at _____ on the _____ day of _____ 19_____ and was struck off strength on the _____ day of _____ 19_____ and is now discharged from the service by reason of _____

Authority _____

Medical Officer _____

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

Age	Marks or Scars
Height	
Complexion	
Eyes	
Hair	

Signature of Soldier

Date of Discharge

Issuing Officer

Rank

Date _____ 19_____

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.

B.C.R. 2021
No. O.P. 8604-11-18
H.Q. 1175-29-283

L. Job 5470—M. & D. 6888

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H.Q. 1772-39-819

Wife

To Whom Mrs. Margaret Kyle

Address Atlinston, Ont.

Rate 15.00

OCT 1 - 1916

By Whom Assigned Kyle E.J.

Regtl. No. 651326

Rank Pte

Corps 160 Bn C.E.F.

PAYMENTS

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

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2. Mrs M Kyte (Assignee)

Name of Soldier Kyte E.J. Pte 651326 160 Bn 66

L. L. Job 5470—Req. 6888.

15.00

Remarks. OCT 1 - 1916

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		X26567	15	
Nov.		N29174	15	
Dec.		T34785	15	
Jan.	1917	Q39480	15	
Feb.		O45487	15	
March		S51480	15	15 R
April		G3017	15	15 W.
May		G9532	15	
June		E15703	15	B.
July		G22809	15	W.
Aug.		Q30019	15	
Sept.		37286	15	D
Oct.		Q42521	15	
Nov.		S50629	15	
Dec.		Y56087	15	
Jan.	1918		225.00	AL
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. Job 95618—M. & D. 6555.

1-3-16

MILITIA AND DEFENCE

M. F. W. 11.
15m.—3-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Margaret Kyle

Address Wiarton
Ont.

Relation to Soldier wife, child or mother } wife

Name of Soldier Kyle Edw. Thos.

Regtl. No. 651936

Rank Pte.

Corps 160th Batt.

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				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

CONSOLIDATED ACCOUNT 6

Names & pell wrong

Separation

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
15m.—3-16.
H. Q. 1772-39-819.

Sheet No. 2. Margaret Kyle wife

Name of Soldier Kyle Edw. Thos.

L. L. Job 95618—M. & D. 6555.

Month.	Year.	Cheque No.	Amt.		Remarks.
April	1916	B 24775	40		40
May		X 20500	20		20
June		U 46399	20		20
July		Q 16174	20		20
Aug.		6 12716	20		20
Sept.		S 17012	20		20
Oct.		H 19447	20		20
Nov.		O 23187	20		20
Dec.		O 26021	20	0	20
Jan.	1917	T 29133	20	192	20
Feb.		T 32316	20		20
March		T 35500	20		20
April		U R 1448	20		20
May		T 4671	20		20
June		U 7807	20		20
July		T 11476	20		20
Aug.		A 16019	20		R
Sept.		H 18153	20		Ro
Oct.		~~O 20354~~	~~20~~ 20		B O 20354 Cancelled pth. RE-WRITE
Nov.		B 25148	20		B
Dec.		~~O 26803~~	~~20~~ 20		B Cancelled E.M.S. RE-WRITE
Jan.	1918		440		
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.					

DEPARTMENT OF VETERANS AFFAIRS

To ● Copy for H.O. FILE

Ottawa Ont

Date March 21/62

Attention of

NAME KYTE, Edward Thomas.

SERVICE NUMBER 651326 CEF

C.P.C. No. 133228
W.V.A. No. 3624

NAVY
ARMY x
R.C.A.F.

The DEPARTMENT has received information from

P.M.E. TEL MEMO. London, Ont. March 20/62

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death March 2/62
Cause of Death
Place of Death Not stated

Name and Address of next of kin (if known)

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

Destroy form if advice of death already received.

for
Chief, Central Registry

M J Wyell

DVA 24

Department of Veterans Affairs

Ottawa 4, 19

TO Supervisor,
War Service Records, Ottawa.

Mark Your Reply:

For attention of

For attention of

SUBJECT

File No.

(1)

The Department is authorized to place a memorial on the grave of the above named. Therefore, will you kindly insert the particulars requested on this form and return it to this office.

Departmental Secretary.

(1) Service number CEF 651326

(2) Surname KYTE

(3) Christian names Edward Thomas.

(4) Date of Birth 24 May - 1878.

(5) Religion C of C.

(6) Unit of enlistment 160 Bn.

(6a) Highest corresp. rank Pte

(7) Units overseas 1 Bn.

(7a) Highest corresp. ranks Pte.

(8) Rank on day of discharge Pte

(8a) Corresp. unit —

(9) Military honours nil

---

(2)

Departmental Secretary,
OTTAWA.

The particulars have been added to this form and it is returned as requested.

Date .....

for Supervisor, War Service Records.

DVA 1001 (Rev. 2-61)

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

211

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Bramshott DATE 8-4-19

1. 1 (a) Unit 1st Battn (b) Regimental No. 651326 (c) Rank Private

(d) Surname KYTE (e) Christian name EDWARD THOS.

(f) Home address Wiarton Ontario

(g) Next of Kin Mrs Marguerite Kyte (h) Relationship Wife

(i) Address of Next of Kin Wiarton Ontario

2. Age last birthday 41 years Date of birth 24-5-1877

3. Enlistment, or Appointment (if an Officer) (a) Place Wiarton (b) Date 12-1-16

4. Personal description:

(a) Height 5' 7" Estimated (b) Weight 135 (stripped) (c) Complexion Fresh

(d) Colour of hair Auburn (e) Colour of eyes Hazel (f) Identification marks, Scars, etc. Scar on back

5. Former trade or occupation Saw Grinder

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	3	90

	Periods From	Periods To
Canada	12-1-16	17-10-16
England	17-10-16	1-3-18
France or other theatres of War	1-3-18	25-3-19

7. Original disease, or injury ~~CHRONIC~~ Acute OTITIS MEDIA SUPP.

(a) Date of origin Child hood (b) Place of origin England

(c) Cause unknown

M. F. B. 227.

400M.—11-18.
1772-89-117.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (*a*) Weakness—slight, moderate, marked, etc; (*b*) Loss, complete or partial, of an organ or member, or of its functions; (*c*) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (*d*) Any other restrictions in choice of occupation.)

Def. Hearing — (Chronic Otitis Media, Left) Hach.

9. Present condition—(*a*) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Spec Report 8-4-19

Ear Rt. 20ft 2" = — 10/17 Normal. Pinnaks Scleroot. Meatus Drumhead.

voice 6ft. Watch Weber Rinne Smwabach Meatus Drumhead.

Lt. 20ft 2" = — 10/17 Cerumen. Pinnaks Scleroot Meatus

Chronic Otitis Media Suppurative

Non quiescent.

Signs Walter Drapner Capt

Jr. Maj.

Eye & Ear Dep. Medical Board. CCC

Brooklyn

(*b*) Has the invalid now any affection of the following systems, not described in Section 9 (*a*) above?
(Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System: No — Cardio-Vascular System: No (If pulse rate is abnormal, B. P. will be taken.) — Genito-Urinary System: No (Albumen and Sugar will be excluded.)

Special Senses: No — Respiratory System: No — Integumentary System: No

Disturbances of Mentality: No — Digestive System: No — Muscular System: No

Osseous and Joint Systems: No — Any other general condition: No

10. (*a*) History (of the condition referred to in Section 9 (*a*).)

in Childhood. Discharge from Rt Ears. discharge not noticed for several years.

10.—(*b*) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (*a*).)

17-4-18. Trench Fever (P.A.O.

(*c*) (Here give a description of wounds, scars and deformities.

Scars on nose from fracture 1913

11.—(*a*) Did the disabling condition have its origin before enlistment? Yes

(*b*) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

Yes.

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? a/ No b/ No

The regimental documents will be referred to.

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

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

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

Routine dressings

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? No

(If the answer is "yes" state nature of treatment required and probable duration)

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

(If not, briefly state why)

17. Recommendations None

[illegible]

Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned Kyle. E. T. have heard the description of my disability and present condition read, and am satisfied (~~or not satisfied~~) with it. (If dissatisfied, statement should follow.)

I complain in addition of

E. S. Kyles Rank. Pte

Signature of invalid examined.

agm

OPINION OF THE MEDICAL BOARD

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

yes

19. Is the invalid fit for

(*a*) ~~General service~~,	(Category A)	(~~Yes or No.~~)
(*b*) Service abroad, not general service,	(" B)	(Yes ~~or No.~~) yes B1
(*c*) ~~Home service (Canada only)~~,	(" C)	(~~Yes or No.~~)
(*d*) Temporarily unfit.	(" D)	(~~Yes or No.~~)
(*e*) Unfit for ~~service in Categories A, B~~ and C	(" E)	(~~Yes or No.~~)

20. It is certified that the invalid

(*a*) Does require treatment. (Give the nature of the condition and of the treatment required and its probable duration.)

(*b*) Does not require treatment.
(*c*) ~~Should pass under his own control.~~
(*d*) ~~Should not pass under his own control.~~
(Strike out condition not applicable.)

21. ~~It is recommended that the invalid be discharged.~~ (When not for discharge add special recommendation.)

Boarded under authy Tel ag 9083 of 11-11-18

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

C. J. Jones Capt — *President.*

PLACE Brauschett — Macdonald Capt

DATE 8-A-19 — } Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

Witness..... Signed.....

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

President

PLACE..... } Members

DATE.....

APPROVED BY — APPROVED BY

H. McKenzie Capt for *Assistant Director of Medical Services.* — *Director-General of Medical Services.*

DATE 8/4/19 — DATE.....

570

14-4-31

War Service Badge Class "A" No. 260074

DISP. AREA 6
OCC. GROUP 7

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

M

I

1. No. 651326

2. Rank. Rte

3. Name. KYTE Edward Thomas

4. Unit. 1st Can Bn

5. Date of Discharge APR 24 1919 Place London

6. Reason for Discharge On demobilization medically unfit for general service.

~~DEMOBILIZATION~~

7. Authority.

8. Proposed Residence after Discharge

P.O. Wiarton Ont

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W.?

~~651326~~ E. T. Kyte

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place London

Date APR 24 1919

Signature J. Glynn Lt (O. C. Discharging Unit.)

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

1. Triplicate Attestation Paper (M.F.W. 23), or
   Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
   (Enclosed in special envelope (C60M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (.D 3)
11. Equipment and Clothing Statement Q.M.G. Form (D.O.S. 2).
12. ~~Last Pay Certificate (P.851).~~
13. ~~Pay Book (A.F.61).~~
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group B

Checked by No. 9

Date 11-4-19

Date of Enlistment 1-3-16

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

K 4219

Date of Assignment Oct 1-16

RATE OF SEPARATION ALLOWANCE

~~20~~	~~25 1-9-17~~ PC 3257	30 1-9-18 PC 2753 M.O. 28635	

RATE OF ASSIGNMENT

15			

PARTICULARS OF SEPARATION ALLOWANCE

No. 65 1326

Rank Pte Promoted Reverted Discharge

Soldier's Name E. T. Kyte

Battalion "C" Co 160th Battn

Beneficiary Margaret Kyte.

Relationship Wife.

Address

PARTICULARS OF ASSIGNMENT

Name Mrs Margaret Kyte wife

Address Wiarton, Ont.

Change of Address

1

2

3

4

M.F.W. 25524, 7/8/18

10473 E.5

	Date 1917	Cheque No.		Amount S/A		Amount A/P		Total		REMARKS
	Dec 31	—		440	✓	225	✓	665	✓	
1918	Jan	68874	T	30		15		45	✓	
	Feb	73978	T	25		15		40	✓	
	Mar	94611	K	25		15		40	✓	
	Apr	12140	K	25		15		40	✓	
	May	12279	L	25		15		40	✓	
	June	18002	F	25		15		40	✓	
	July	29164	P	25		15		40	✓	
	Aug	41016	H	25		15		40	✓	
	Sept	43679	K	25		15		40	✓	
	Oct	54722	N	25		15		40	✓	
	Nov	59313	G	25		15		40	✓	
	Dec	62601	L	45		15		60	✓	
	Jany	74891	K	30		15		45	✓	
	Feb	77581	K	30		15		45	✓	
	Mar	89532	G	30		15		45	✓	
	April	3697	H	30		15		45	✓	
	May			~~30~~		~~15~~		~~45~~		

A/c Closed 30/4/19

Ret'd per olympic

Date 21/4/19 F.X. 29/4/19

Clerk Lusamar

M.O. 1

MRO 94477 dest O'Ele.

AUDITED

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7993.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7993.

1 P.M. 44-17-4-23

244

AUDITOR	PAYMASTER

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

M. OR S. M. | REGT. No. 651326 | RANK Pte | NAME (IN FULL) Kyte Edward Thomas (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN: Mrs Margt Kyte Wife
ADDRESS: Wiarton Ont
IS SEPARATION ALLOWANCE PAID? 30.00 DATE EFFECTIVE Adhy Oct 30/17
TO WHOM PAID: Mrs Margt Kyte RELATIONSHIP: Wife
ADDRESS: Wiarton Ont

ORIGINAL UNIT C.E.F.: 160 Bn | IF IN P.F. WHAT UNIT? Wiarton Ont
PLACE OF ATTESTATION | TRANSFERRED TO: Tor Do #1 | DATE: 15/4/19 | AUTHORITY: Do 115
DATE OF ATTESTATION: 12-1-16 | TRANSFERRED TO | DATE | AUTHORITY
ASSIGNED PAY $ 15.00 | DATE EFFECTIVE: 30/4/19
PAYABLE TO: Mrs Margt Kyte | RELATIONSHIP: Wife | ANY CHANGE IN ASSIGNEE OR ADDRESS
ADDRESS: Wiarton Ont
STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE
DISCHARGED: PLACE London | DATE 24/4/19 | REASON Dem | AUTHORITY Do 115 | IF ENTITLED TO POST DISCHARGE PAY

Paid and Closed by Ottawa

PARTICULARS	EFFECTIVE DATE	AUTHORITY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	$	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. No. 1 NO.	DATE	COL. No. 2 NO.	DATE	COL. No. 3 NO.	DATE	CASH PAYMENTS COL. No. 1 $	C.	COL. No. 2 $	C.	COL. No. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.
BALANCE FROM PREVIOUS ACCOUNT																																				
31-3-19							44	97	44	97																										
1-4-19					35																															
29-4-19	29	1.00	31	90	70				136	90					37	98	4	87	5	—	15	—	15	—									18	87			Q
					NSG.		Sa.														NSG.		Sa.													
183 days.					420	00	180	00	600	00											70												350	00	180	00
																													6	—					174	00
																							24	00											150	00
																													55	0			34	50		
																					64	50	30	00									280	00	120	00
																					70		30										210		90	
																					70		30								411		140		60	
																					70	00	30	00									70	00	30	00
																					70	00	30	00												
					420	—	180	—	600	—											414	50	174	—					11	50			600	—			

PARTICULARS OR REMARKS

Rtd per Olympic 21/4/19
BAL. ENG. L.P.C. 30-13-7-19
PAY TO ESTIMATED DATE OF DISCHARGE 29-4-19
CLG. ALLCE 1ST. PAYMENT OF W.S.G.
BOAT MONY TRAIN MONEY
A R Mortimore Capt.
Soldier Dependent
Vol. payment NSG. as above
Sa overpaid by Ott for April
MAY 14 1919 80297
Elgible to adjust to date of discharge
5 days @ 1.25
23/5/19 G84076-7
24/6/19 G955778
JUL 16 1919 1684578
22/8/19 121519-20
SEP 20 1919 117012-78

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1890.

P. 559.

MARRIED OR SINGLE M

PLACE OF BIRTH Manchester Eng

NAME AND ADDRESS OF NEXT OF KIN Margaret Kyte
Wiarton Ont

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	AUTHO

ADMISSIONS TO HOSPITAL, &c.

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

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS					
																		1		2		3	
	NO. OF DAYS	RATE	AMOUNT $	AMOUNT c.	NO. OF DAYS	RATE	AMOUNT $	AMOUNT c.	NO. OF DAYS	RATE	AMOUNT $	AMOUNT c.						NO	DATE	NO.	DATE	NO.	DATE
														14	10	14	10						
Nov 1-30-16	30	1.00	30		30	10	3									33		38	8-11-16	69	30-11-16		
Dec 1-31-16	31	1.00	31		31	10	3	10								34	10	92	15-12-16	133	20-12-16		
1917 Jan	31	1.00	31		31	10	3	10								34	10			231	31-1-17		
Fla Fwd Feb	28	1.10	9 30	20 80												30	80	271	16/2/17	311	28/2/17		
Mch	31	1.10	132 34	60 10										14	10	146 34	10 10			413 361	26/3/17 16/3/17		
Apl	30		33													33							
May	31		34	10												34	10	26 70 116	18/4 30/4 16/5				
June	30		33													33		158	31/5				
July	31		34	10												34	10	227	17/6				
Aug	31		34	10												34	10	296	30/6				
Sept	30		33	—												33	—	377	19/7				

OTIONS, &c.

Effective Date	Authority

SPITAL, &c.

Name of Hospital

Reg'l. No. 651326 Rank Private Name Kyte Edward Thomas ✓

If in Permt. Corps What Unit } Unit 160th Bn Transferred to ~~1st Bn~~ Date Authority B031 1/1/18

Permanent Force Allowances Transferred to Date Authority

Place of Attestation Wiarton Ont Transferred to Date Authority

Date of Attestation 12/1/16 Transferred to Date Authority

Assigned Pay Monthly $ 15.00 Date Effective 1-10-16

Payable to Margaret Kyte Wiarton Ont Relationship wife

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) C. C J

Acquittance Rolls 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
																	Asd Pay per Dept Branch for Oct and received on Oct Pay list (Canada)
													14 10				Balance from Canada
9 30-11-16						1947	486			15		39 33	7 77		7 50	27	
33 20-12-16						2 44	7 30			15		24 74	17 13		15 50	1 63	
31 31-1-17							19 47			15		34 47	16 76		16 00	76	
11 28/2/17						4 87	12 16			15		32 03	15 53		15 53		
13 26/3/17						26 78	4 32 14	7 60				40 57					
61 16/3/17							4	86		15		34 46	15 17		Nil	15 17	
										15		15	33 17				
						4 86											
						12 17				15	36	32 39	34 88				626 94005 #161 - 22/4/17.
						4 87											
						14 60				15		34 47	33 41				
										15		15	52 51				
						7 30											
						9 73				15		32 03	54 58				
						7 30				15		22 30	65 28				

65132 6. Pte Kyte C Thos.

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
MONTH	PARTICULARS					CR. 1				CR. 2				PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE			DEFER-RED PAY	SER. ALLCE. ENG.				
Sept	Bal Fwd					~~65 28~~													65 28								
Oct	31 dys Pt Pay @1/10					34 10								loan a/c			15										
														HH3. 5 div 2m. 17/9/17.	7 30												
														ah493 5 div 2m. 28/9/17	14 60				62 48								
						34 10									21 90		15										
Nov	30	P.P.				33 –											15										
														ah5bn. 5 bD 2m. 160 Bu 31/10/17.	- 14 60												
														ah581. 5 bD. 2m. 160 Bu 31/10/17.	- 4 87												
														ah530. 5 bD 2m 160 Bu 17/10/17.	- 7 30												
														ah346. 5 bD 2m 160 Bu 15/8/17.	14 60												
														ah395. 5 bD 2m 160 Bu 31/8/17.	7 30												
														ah622 5 bD 2m 160 B 13/11/17.	4 87												
														" 668 do " 28/11.	7 30												
														" 274 do 30/7/17.	7 30												
Dec	31					34 10								loan a/c Pay			15										
														Eblack. 5 Div 2 train. Awl. 4 dy Pl 2. 2 dy Pl 10. S.O. 266. 29/10/17.	68 14	6 60			24 84									
						67 10										6 60	30										
1918																											
Jan.		PP				34 10								6 A P.			15								45		
														aR 543 5 bt in 2m. 7/12	7 30				36 64						56		
						34 10									7 30		15								8		
Feb	28	PP				30 80								6 A P			15								36		
														855 30/1/18 5 Div Train (2)	7 30										76		
														631 17/12 " (4)	12 17										16 5		
														754 9/1/18 " (6)	7 30												
															26 77												
														1277 17/2 160 Bu (19)	7 30				18 37								
						30 80									34 07		15										
Mch	31					34 10								C a P			15										
														1304 28/2 160 Bu (10)	4 87												
														1748 5/3 1 Bu (25)	5 35												
															10 22												
														1864 17/3 "	4 46				22 79								
						34 10									14 68		15										

H PAYMENTS			Assigned Pay	Other Charges	Total Debits	Balance		Pay Withheld or Deferred	Pay Available for Issue	Remarks
2	3	4				Credit	Debit			

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:– 1-10-16		EFFECTIVE DATE:–	
AMOUNT:– $15.00		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.

Margaret Kyte (Wife)
Wiarton Ont.

Stopped effective 1-4-19.

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	
29 3/19	1330	B'shott. £15.0.0	73	–					

PARTICULARS OF RENDERING NON-EFFECTIVE: Trans to Canada 1 4/19. B'shott N.P.

1918 MONTH	PARTICULARS	CR. 1		CR. 2.		PARTICULARS
31 Mch	Bal. Fwd					
apl	30 P.P.	33	–			Can a/c.
						Dy 41. 8.4.18. 1st Bn.
May	31 P.P.	33 34	– 10			Can a/c.
						aR 2411. 12.5.18. 6 G B D
June	30. P.P.	34 33	10 –			Can a/c.
						aR 799 6/6/18 6 S S D.
						✓ 988. 21.6.18 ✓
						Dy 4352. 16.5.18. O S B.
July	31 P.P.	33 34	– 10			Can a/c.
						aR 6900 31-5.18 15 Con D
						✓ 1178. 6-7-18 6 G B D
						✓ 1271. 20.7.18 ✓
Aug.	31 P.P.	34 34	10 10			Can a/c.
						aR 1459. 5-8-18 ✓
						✓ 1043. 31-8-18 C C H Q
Sept	✓	34 33	10 .			Can a/c.
						✓ 593 14.9.18 1st
						✓ 1234 2.9.18 1st C.
		33				
Oct.	✓	34	10			Can P.
						aR 760 3/10/18. 1 B
						✓ 949. 25/10/18. •
		34	10			
Nov.	✓	33	–			✓ 1079 3/11 ✓
						✓ 1260 16/11/18 ✓
Dec	✓	34	10			C. a/c (Nov. Dec)
1919 Jan	✓	34	10			aR 535. 3/1/18 ✓
		101	70			C. a/c. Forward

* ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.	NAME:- KYTE, Edward Thos
	EFFECTIVE DATE:-	NUMBER:- 651326
	AMOUNT:-	PARTICULARS OF RANK OR APPOINTMENT

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.

yte (Wife)
n Ont.

ffective 1-4-19.

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:- 160th Bn

DATE ACCOUNT FIRST OPENED:- 1-11-16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
NR	30/2/18	22/4/18	1 Bn
	1/6/19		Can Lee

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

UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
hott. £15.0.0	73 -				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	10		

RENDERING NON-EFFECTIVE: Trans to Canada 1 4/19. B'shott NR. 5718. 31 3/19. B'shott. Mp. 1. LPB 44.97

PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR. 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
ward								22 79		
P.	33 -		Can AP.				15			
			DN 41. 8.4.18. 1st Bn.	4 46				36 33		
P.	33 - / 34 10		Can AP.	4 46			15 / 15			
			AR 2411. 12.5.18. C&BD.	8 92				46 51		
P.	34 10 / 33 -		Can AP.	8 92			15 / 15			
			AR 799 6/6/18 C&S.D.	4 46						
			988. 21.6.18	4 46						
			DN 4352. 16.5.18. OSB.	5 35				50 24		
P.	33 / 34 10		Can AP.	14 27			15 / 15			
			AR 6900 31-5.18 156 Con Depot	5 35						
			1178. 6-7-18 C&BD.	4 46						
			1271. 20.7.18	4 46				55 07		
P.	34 10 / 34 10		Can AP.	14 27			15 / 15			
			AR 1459. 5-8-18	4 46						
			1043. 31-8-18 CCH&Det	3 57				66 14		
	34 10 / 33 -		~~C.A.P.~~	8 03			15 / 15	84 14		
			593 14.9.18 1st Bn	3 57						
			1234 2.9.18 1st C.C.R.C	3 57				77 00		
	33			7 14			15			
	34 10		C.A.P.				15			
			AR 760 3/10/18. 1 Bn	3 73						
			949. 25/10/18. "	5 60						
	34 10			9 33			15	86 77		
	33 -		1079 3/11 "	5 60						
			1260 16/11/18 "	3 73						
	34 10		C.AP (nos. dec)				30			
	34 10		AR 1535. 3/7/18	14 93			15	118 71		
	101 70		C.AP. Forward	14 26			45			

NUMBER 651326. RANK NAME KYTE. E.T.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE
1919									11871
Feb	pp	70 80		AR 1778. 21-12-18 Pm	1 3 89				60 20
				✓ 2078 - 7-1-19 ✓	3 3 77				183 61
				Cap				15	117 97
March	✓	34 10		✓ 2255 - 22-1-19 ✓	4 3 73				
				✓ 2572. 6/2/19 ✓	11 9 33				
				✓ 2588 5/2/19 ✓	11 3 73				
				Cap				15	
				AR 3017 19/2/19 ✓	17 3 73				
				✓ 3333 4/3/19 ✓	20 3 73				
				✓ 3448. 11/3/19 ✓	24 3 73				117 97
		64 90			35 64			30 —	
April				AR 1330 29/3/19 Bking 1.	7 300				44 97
					73 —				
				Sold to Canada 14/4/19 Sh 49 / 20 Pie					

NAME Kyte. E. T.

Cr. 1.	Cr. 2.	Particulars	Dr. 1	Dr. 2	Dr. 3.	Dr. 4.	Balance	Deferred	Separation
							11871		
20 80		CR. 1778. 21.12.18 Pm	1 3 89				60 90		
		✓ 2078 - 7-1-19 ✓	3 3 77				183 61		
		Cap					65 64		
						15	117 97		
34 10		✓ 2255 - 22-1-19 ✓	4 3 72						
		✓ 2572. 6/2/19 ✓	11 9 33						
		✓ 2588 5/2/19 ✓	11 3 73						
		Cap				15			
		CR3017 19/2/19 ✓	17 3 73						
		✓ 3333 4/3/19 ✓	20 3 73						
		✓ 3448 11/3/19 ✓	24 3 73				117 97		
64 90			35 64			30 —			
		CR1320 29/3/19 Billing 1.	73 00				44 97		
			73 —						
		Sold to Canada 14/4/19 Ah 49 120 Rio							

Transfer from 31-3-19