duplicate
duplicate

C.A.S.C, Horse Transport, CEF, Siberia

ATTESTATION PAPER.

No. 2771378

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS.)
1. What is your surname?	MILLER
1a. What are your Christian names?	Charles Edward
1b. What is your present address?	Kingston, Ont.
2. In what Town, Township or Parish, and in what Country were you born?	Desoronto, Ont.
3. What is the name of your next-of kin?	Mrs. Clara Miller
4. What is the address of your next-of-kin?	122 Stevens St., Kingston, Ont.
4a. What is the relationship of your next-of-kin?	Wife
5. What is the date of your birth?	27th June 1890
6. What is your Trade or Calling?	Riviter
7. Are you married?	married
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9. Do you now belong to the Active Militia?	Yes(CASC MD No 3, 8 months)
10. Have you ever served in any Military Force? If so, state particulars of former Service.	Xxxx see above
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?	No
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?	No
16. If so, what was the reason?	--

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Charles Edward Miller, 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.

C.E. Miller (Signature of Recruit)

Date 10th October, 1918. 191 . W.R. Braithwaite (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Charles Edward Miller, 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.

C.E. Miller (Signature of Recruit)

Date 10th October, 1918. 191 . W.R. Braithwaite (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 Vancouver, B.C. this 10th day of October, 1918. 191 .

W.S. Haynes Capt (Signature of Justice)

M. F. W. 23.
750 M.—1-17.
H. Q. 1772-39-841.

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 Miller Charles Edward on Enlistment.

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

Height ....ft.....ins.

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

Complexion .....

Eyes .....

Hair .....

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).

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date Oct. 10th. 1918.

Place Vancouver BC.

W. G. Kennedy Capt.
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.

Charles Edward Miller 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.

A. Shelgrove Lt
(Signature of Officer)

Date Oct. 10th. 1918

REGIMENTAL DOCUMENTS

PTE NAME MILLER CHARLES E. REGT. NO. 2471378 UNIT 3rd D D H. Q. FILE NO. [illegible]

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
2	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
1	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)		CDS to RHS	15/7/44		
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
1	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					
1	DENTAL HISTORY SHEET (M.F.B. 465)				21119	DISCHARGE
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Category
1	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					Demob.
	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)					37 - 11
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					24 13
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					6 13
1	Misc. Card.					1
2	Misc papers					

Above awde - 18-3-46
6 44 - Sri - 1170

W. 2589
100M-11-16
1772 39-1377

675

E.M.K.
R8

12

Number. 2771378 Rank. Pte.

Surname. MILLER.

Christian Name. Charles Edward.

Units. C.E.F. Theatre of War. Siberia

Date of Service. 26-10-18.

Remarks.

Latest Address. 122 Stephen St.
Kingston Ont.

Roll No. Page 5-5-90

No. Rank Name

T. O. S. Unit

M. D.

Paid From	Paid To	Sig. or Rec't	Promotions, Transfers, Discharges, etc.	
			Particulars	Authority

AUG 11 1921

TRANSFERRED TO C. E. F. (Siberia) O/S Empt to Japan 11-10-18.

H. Q.

M. D. No. X. 3.

Surname Miller

Christian names Charles Edward

Regtl. No. 277137 Rank Pte.

Unit C.A.S.C. Lo. (Siberia) Trans.

T. O. S. Oct. 21st 1918

D. O. Pt. II 21 of 23.10.18.

S. O. S. via 30-6-19 1919

Reason Demob

Auth. DO 1830 of 2-7-19 #3 DD

Next of kin Miller, Mrs. Clara Relationship Wife

Address 122 Stevens St., Kingston, Ont.

Also notify:

BORN—Place Canada Deseronto Ont. Date June 27th, 1890.

ATTESTED—Place Vancouver, B.C. Date Oct 10th, 1918.

O/S

R/C

W. 22—100M-7-18. 1772-39-839.

Reg. No. 2771287 Name Miller C

Rank Pte Corps – Age 19 Service 6 6/12

Ledger No. Serial No.

HOSPITALS	DATE	DIAGNOSIS
Esquimalt Mil Victoria	18-10-18	Influenza
Dis to Duty	19-11-18	

P. T. O.

HOSPITALS	DATE	DIAGNOSIS

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

For Expeditionary Force Cases only. Army Form W 3248a.

No. 11. Stanley. Hospital.

State from which Force / Serial No. in A. & D. Book } 1217.

Regt. (state if T.F.) C.A.S.C.

Trp., Batty. or Coy. - Regtl. No. 2771378.

Rank Pte.

Name Miller. Edward.

Age 21. Total Service 5/12 6. 4/12 S.

(a) Date of Arrival at Hospital as an admission 13-3-19

(b) As a transfer (state where from)

Date of discharge to duty 21. 3. 19

" " " by change of disease

" " " as an invalid

" " death

" " transfer (state where to)
(Name of Hospital to be given)

No. of days under treatment 9

To be filled in by the Medical Officer in charge of case in accordance with para. 14, A.C.I. 462 of 1917.

Date of onset of disease or injury

Disease or injury Tonsillitis.

Operations

Result of operation

Brief notes on case with complications in order of occurrence :—

Signature of Medical Officer

Further notes may be written on back of card.

One of these Red cards is to be completed for every Expeditionary Force patient received into hospital. Black cards for U.K. troops.

370 Wt.4248 1,750,000. 10.8.18 Wh P E.3639
Army Form W 3243a.

Name Charles Edward Hillier Rank Pte Regtl. No 2771378

Original unit CASC Present unit CASC M. or S Age 29 Religion C. E. Fyle Depot Ref. H.Q.

Port, ship, and date of arrival Monteagle : Vancouver 21-4-19

Next of kin Wife : Mrs Clara Miller 122 Stevens St. Kingston

Address on leave Same

Address on discharge Same

Transportation issued Yes No Date Character on discharge

Previous occupation Riveter Date and place of enlistment Kingston 10-10-18

Diagnosis Date of Medical Boards 27-6-19

Date.	Remarks	Pt. 2 Order No.
28-6-19	T.O.S. from Hospital Section 26-6-19	C.C. 179
30-6-19	S.O.S. Fos R.O. Deban	R.O. 183
	1894	

*—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.

2771378

MEDICAL HISTORY SHEET

Surname Miller Christian Name Clarence E.

Examined { on ..... day of ..... 191 ..... / at .....

Birthplace { City or Town ..... / County .....

Apparent age .....

Trade or occupation .....

Height ..... feet ..... Inches

Weight ..... lbs.

Chest measurement { Minimum ..... inches / Maximum expansion ..... inches

Physical development .....

Small-pox Marks .....

Vaccination Marks { Arm Right Left / Number .....

When Vaccinated last .....

(a) Marks indicating congential peculiarities or previous disease .....

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

Approved by .....

Rank ..... 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
		M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
		M.O.
		M.O.
		M.O.

Enlisted on ..... day of ..... 191 ..... at .....

	Corps	Regt'l Number	Habits	Date
Joined on enlistment		2771378		
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
Barnsford	29/6/19	Sick H.M.	Con. Pulmonary Tb

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

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

Surname..... Christian Name.....

STATION	Date of Arrival at the Station	DATES OF Admission into Hospital			DATES OF Discharge from Hospital			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
		Day	Month	Year	Day	Month	Year				

172 ~~Robert~~ St Stephen St
Kingston, Ont.

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. 477378 Rank Pte Surname Miller
(Give name in full) Charles Edward
Unit or Corps Proceed Birthplace Desmond Ont

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

1. GENERAL DESCRIPTION:

Physique Good Weight 165 lbs. Height 5' ft. 4 in. Colour of Eyes Brown.

Nutrition Good

Pulse Good

Condition of arteries Good

Vision Rt. D.V. Left D.V.

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

Identification marks, scars, or deformities. (Give cause and date of origin.)
Scar Lateral Surface left lower leg

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. Yes 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.

Had V.D.G. & V.D.S. Queen Vic. Hosp
11 - 5 - 19 — 26/6/19. Wasserman
negative 26/6/19. No Evidence of
V.D. at present. F.D.G.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 C. E. Miller

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

THIS SECTION FOR USE IN CANADA—

Examined at Brantford (Canada)

Date 27/6/19 Signed D.S.O. Lieut-Col Carey 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 C. E. Miller

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

(This space to be used, if necessary, in connection with Section 8, overleaf, only.)

APPROVED

A. M. Tilson

Major ~~Lieut.~~ A. M. C.

For A.D.M.S. No. 3

27-6-19

[OVER]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-89-1142.

M. F. W. 145
10m.—3-18
1772-39-1174

MEDICAL CASE SHEET

SYPHILIS

When Contracted ..... April 1919

Where " ..... Siberia

Register Serial Number 626

Placed on ..... 11-5-19 ..... Struck off 26-6-19

Number of months under treatment ..... 7 Weeks

Primary sore ..... Small sore on penis

Lymphatic Glands ..... Nil

Skin ..... "

Mucous Membrane ..... "

Other Symptoms ..... Sore throat

DATE	TREATMENT		DOSE			REMARKS
May 16th.	Diarsenol	Gms .3	HgS	Grs 1		
" 20th	"	" .3	~~xxx~~			
" 23rd	"	" .3	HgS	Grs	1	
" 30th	"	" .4	"	"	1	
June 6th	"	" .6	"	"	1	
" 13th	"	" .6	"	"	1	
" 20th	"	" .6	"	"	1	Wasserman June 21st Negative

Geo. L. Stewart Lt Adjt

Regimental No. 2771378 Rank Pte Name Miller, Edward Unit 3.C.C.C.D.D. Station Barrierfield Case No. 624

CASE HISTORY SHEET.

Barriefield Field Hospital. Barriefield Station.

No. 2771378 Rank Pte Name Miller, Edward C. Age 31

Unit #3.C.C.D.D. Completed years of service (Where and how long) C. 9/12 O.S. 7/12

Date of admission 11-5-19 Date of discharge 26-6-19

Diagnosis Gonnorrhoea & Syphilis Place of origin Siberia

CONDITION ON ADMISSION AND PROGRESS OF CASE. Patient noticed small sore on penis on April 27th, About same time noticed watery discharge from urethra. Reported for treatment immediately. On admission to this Hospital still had a watery discharge which cleared up June 5th/19. Smears taken were negative. Sore on penis healed on admission. Wasserman taken was (Positive XXX). Routine treatment for Syphilis was commenced. At beginning of treatment patient had secondary throat, which disappeared after 3rd diarsenol

FAMILY HISTORY. Negative

(Tuberculosis, mental or nervous diseases.)

TREATMENT. For Gonnorrhoea-~~Exact~~-rest in bed, Liquid diet. Alkaline diuretic Mx

(Especially any specific or special form.) Argyrol irrigations, Pot. Permanganate irrigations.

For Syphilis,-Full course of diarsenol & Mercury salicylate intia-muscularly 7 Diarsenol & 7 Mercury.

Urinalysis,- S.G. 1016 React, Acid Alb, Nil. Sugar, Nil.

CONDITION ON DISCHARGE. Wasserman Negative. Urethral smear negative.

(and disposal made of case.) Throat normal

Date June 26/19

Leo. R. Stewart Lt. A.M.C.

Medical Officer i/c case.

M. F. B. 313a.
200M.—5-18.
1772-39-139.

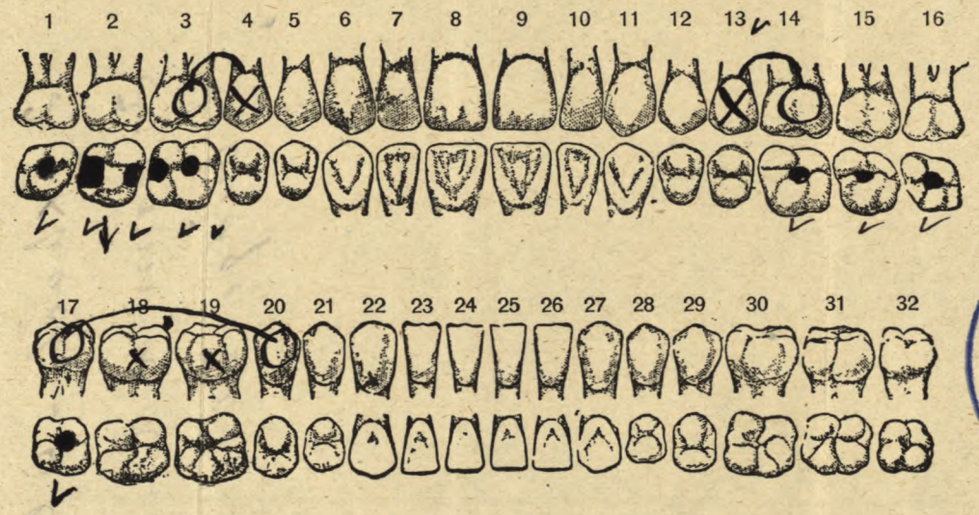
DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 3

NAME OF SOLDIER Miller C.E. 122 Stephen St., Kingston, Ont.

REGIMENT C.A.S.C. RANK Pte. No. 2771378



Office of D.D.O. NOV 5 1920 AUG 9 - Recd M.D. NO. 3

INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.
3. Only such entries to be made on this sheet as will show:
   1. Condition on examination (in red).
   2. Condition on leaving Canada.
   3. Condition on discharge.

	Date	Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination	1920 Aug 9	9 1.2.3. 14.15.16. 17				1/2		1/2			2/ 4.13.			.					3/ 3-4. 13-14 17-18	L.H. Simpson 258 Bagot St.		Completed Nov 1920 H.A. Stewart CAPTAIN DISTRICT DENTAL OFFICER, M.D. NO. 3

I hereby acknowledge having received the above treatment.

(SIGNATURE) Ed. Miller

M.F.B. 465. 200m—6-18. 1772-39-950.

Examination	2.00
Cleaning	1.50
9 amalgam fill (3 cmpd 6 simple)	15.00
2 Extractions w. local.	2.00
2 crowns w dummies	30.00
1 Bridge 2 abutments 2 dummies	36.00
	$86.50

16

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

M. F. W. 54. (A. F. B. 103.)
350M.—5-16
H. Q. 1772-39-9?0.

Casualty Form—Active Service.

Unit, Regiment or Corps C.A.S.C. C.E.F. (Siberia)

Regimental No. 277378 Rank ~~Gnr.~~ Pte. C. E. F. Name MILLER E

Enlisted (a) 10-10-18 Terms of Service (a) D. of W. and 6 months Service reckons from (a) 10-10-18

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 Canada 11-10-18			
		Arrived Siberia	26/10/18		with No. 1 Divisional Train C.A.S.C.
18-3-19	#1 Cy Div Train	Admd #11 State Hospl (Lousiltis)	Vladivostok	13-3-19	No. 1st III # 14.
25.3.19	"	Discharged Hosp (do)	"	21.3.19	" # 15
1-4-19	Base Depot	attached for R to Q	"	22.3.19	" # 16

T.C. HAS BEEN CHECKED WITH ATTESTATION PAPERS

Embarked Siberia
S/S Monteagle
April 21st 1919

E Evans MAJOR
D. A. A. G. BASE RECORDS
CAN. EXPED. FORCE (SIBERIA)

(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				
14-5-19.	#3DD.	T.O.S. #3D.D.	Kingston	21-4-19	H.Q. 134.
28-6-19.		T.O.S. Casualty Company No. 3 District Depot. for Disposal, Part Two D.O. 179		26-6-19.	
30-6-19	T.O.S. Dis (P.O. 1894)		Ddbn. Kingston	30/6/19	H.Q. 183

J. Cullinan LIEUT.
for O.C. Casualty Co., No. 3 District Depot

Lieutenant
For O.C. No. 3 District Depot.

C.E.F. (SIBERIA) RECORD SHEET

Next -of- Kin	Mrs. Clara Miller, (Wife) 122 Stevens St., Kingston, Ont.
Also Notify	
Subsequent changes in Next-of-Kin	

Country of Birth	Married or Single on Enlistment	Subsequent Marriage Date
Desoronto, Ont.	Married.	

Surname	Miller
Christian Names	Charles Edward
Regimental No.	2771378
Rank	Cpl.
Unit	A.S.C. Train
Place and Date of Enlistment	Vancouver, 10-10-18 M.D. 11
NON-EFFECTIVE: (1) Place (1)	M.D. 3
(2) Date (2)	30-6-19
(3) Reason (3)	Demobilization
H.Qs. File No.	

M.F.W. 2581 (25M-9-18).
1772-39-1368.
L.L. Job 48477.

Record of Promotions, Reductions, Transfers, Casualties, Reports, &c.	Place	Rank Shewn	Effective Date	Unit	Authority: Part II D.O. No., Cas. List. &c.	Authority: Dated
		Cpl.				
Embarked for Overseas. Emp. of Japan	Vancouver		OCT 11 1918	A.S.C. Train	Sailing list.	
Leaves to be att. to N.F.	Vlad.	Pte.	7-3-19	#1 Roy. Dvr. Tp.	#14 page 1	18-3-19
Adm. to N°11 S. Hosp. (Tonsilitis.)	"	"	13-3-19	" "	#14 " 2	18-3-19
Disch. fr. " " " "	"	"	21-3-19	" "	#15 " 1	25-3-19
Returned to Canada per "S.S. Montagli"	"	"	21-4-19	" "	#19	22-4-19
S.D.S. #1 Co. Dvr. Tp. R.C. on Evac. to Can.	"	"	21-4-19	" "	#19	22-4-19
S.O.S. Dis. on Demobilization	M.D. 3	"	30-6-19	" "	D.O. 183	2-7-19

Record of Promotions, Reductions, Transfers, Casualties, Reports, &c.	Place	Rank Shewn	Effective Date	Unit	Authority	
					Part II D.O. No., Cas. List &c.	Dated

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 2771378 (Rank) Private

Name (in full) MILLER, Charles Edward. enlisted in

the Canadian Army Service Corps.

CANADIAN EXPEDITIONARY FORCE at Vancouver, B.C. on the 10th

day of October 19 18.

HE served in Canada and Siberia.

and is now discharged from the service by reason of "On Demobilization R.O. 1894."

Authority 3DD-3-M-695 D/28-6-19

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

Age 29 years.	Marks or Scars
Height 5 ft. 5 ins.	Scald Surface left lower leg.
Complexion Fair	
Eyes Brown	
Hair Brown	

C. E. Miller
Signature of Soldier

Captain
Issuing Officer
O. C. Discharge Section
No. 3 District Depot
Rank

Date of Discharge 30-6-19

Appointment

Signed at Kingston, Ont. this 30th day of June 19 19

in Military District No. 3

File Reference No. 3DD-3-M-695

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

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.

Train

Paymaster

Auditor

M. or S. M

Name and Address of Next of Kin Mrs Clara Miller (wife) 122 Stephen St Kingston Ontario

Separation Allowance $ 25.00 Effective Date 1/10/18

By Whom Paid Ottawa

Payable to Mrs Clara Miller Relationship Wife.

Address 122 Stephen St Kingston Ontario

CASUALTIES, AFFECTING PAY AND ALLOWANCES

PARTICULARS	EFFECTIVE DATE	AUTHORITY

Regimental No. 371378 Rank Pte Name Miller Charles E. Cook.

If in P.F. What Unit — P.F. Allowances — Original Unit C.E.F.

Place of Attestation Kingston

Date of Attestation 19/9/18

Assigned Pay $ 30.00

Payable to Mrs Clara Miller

Address 122 Stephen St Kingston Ont

Stop-Payment Form (Assigned Pay) Rendered (Date)

Discharged. Date and Place

Transferred to — Date 1/10/18 Authority

Transferred to — Date — Authority

Date Effective 1/10/18 Authority M7W 2583

Relationship Wife.

Effective

Authority

L. L. Job 48205 M. & D. 20-9-18-12M

MONTH	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT C	OTHER CREDITS $	OTHER CREDITS C	ASSIGNED PAY CREDITS $	ASSIGNED PAY CREDITS C	TOTAL CREDITS $	TOTAL CREDITS C	ACQUITTANCE ROLLS COL. No. 1 No.	COL. No. 1 DATE	COL. No. 2 No.	COL. No. 2 DATE	COL. No. 3 No.	COL. No. 3 DATE	COL. No. 4 No.	COL. No. 4 DATE	CASH PAYMENTS COL. No. 1 $	COL. No. 1 C	COL. No. 2 $	COL. No. 2 C	COL. No. 3 $	COL. No. 3 C	COL. No. 4 $	COL. No. 4 C	ASSIGNED PAY CANADA	ASSIGNED PAY OTHER COUNTRIES	OTHER CHARGES $	OTHER CHARGES C	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C	TOTAL DEBITS $	TOTAL DEBITS C	BALANCE DEBIT $	BALANCE DEBIT C	BALANCE CREDIT $	BALANCE CREDIT C	DEFERRED PAY $	DEFERRED PAY C	PAY AVAILABLE FOR ISSUE $	PAY AVAILABLE FOR ISSUE C	SEP. ALL'CE	REMARKS
1918 Oct	31	1.10	34	10					34	10	6	21/10/18	41	31/10/18					5		8	21					20	00					33	21				89			89		25.00	
Nov.	30	1.10	33	00					33	00	87	1/11/18	113	30/11/18					8	21	4	82					20	-					33	03		03					86		25.00	
Dec.	31	1.10	34	10					34	10	26	21							14	11							20	-					34	11		01					85			
1919 Jan.	31	1.10	34	10					34	10	160	31							14	81							4	00					34	51		41					44			
Feb.	28	1.10	30	80					30	80	169	15	984	28					6	19	3	92					20	00					30	11				69			113			
Mar.	31	1.10	34	10	7	40			41	50	211	31							4	49							20	00					24	49				17	01		18	14		
Apr.	30	1.10	33	00					33	00																	20	00					20	00				13	00		31	14		
			233	20	7	40			240	60									52	51	16	95					140	00					209	46				31	14		31	14		
												Boat Expark 15/4/19							10	00																								

Ex "Montcalm" 21/4/19

Carried Forward

Cr. Bal 30/9/18 D.A.C. Ottawa M.

Regimental No.....Rank.....Name.....

MONTH	PAY			OTHER CREDITS	ASSIGNED PAY CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS				ASSIGNED PAY CANADA	ASSIGNED PAY OTHER COUNTRIES	OTHER CHARGES	REGIMENTAL CHARGES	TOTAL DEBITS	BALANCE		DEFERRED PAY	PAY AVAILABLE FOR ISSUE	SEP. ALL'CE	REMARKS
	No. OF DAYS	RATE	AMOUNT				COL. No. 1		COL. No. 2		COL. No. 3		COL. No. 4		COL. No. 1		COL. No. 2		COL. No 3		COL. No. 4					DEBIT	CREDIT				
			$ C	$ C	$ C	$ C	No.	DATE	No.	DATE	No.	DATE	No.	DATE	$ C		$ C		$ C		$ C		$ C	$ C	$ C	$ C	$ C	$ C	$ C		

Carried Forward

AUDITOR | PAYMASTER

M. OR S. 1

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

REGT. No 477378 RANK Pte. NAME (IN FULL) MILLER C.F. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN Mrs. Clara Miller, RELATIONSHIP Wife

ADDRESS 122 Stephen St., Kingston Ont.

IS SEPARATION ALLOWANCE PAID? yes DATE EFFECTIVE 1-6-19

TO WHOM PAID RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Pte C. E. Miller 122 Stephen St. Kingston Ont.		

ORIGINAL UNIT C.E.F. No. 1 Coy. Div. Train. IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 22-6-18. TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY $ 20.00 DATE EFFECTIVE 1-6-19

PAYABLE TO RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Mrs. Clara Miller, Wife, 122 Stephen St., Kingston, Ont. M. 1140

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE Kingston DATE 30/6/19 REASON AUTHORITY 3-M-695 IF ENTITLED TO POST DISCHARGE PAY

1035

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	C.	TOTAL CREDITS $	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.	BALANCE CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					DD134 T.S. Sydenham
April		1.10					31	14	31	14																									31	14	
																	10	00	5	00			30	50							35	00	3	86			Deduct Hosp. stoppage from 29-4-19
May	31	"	34	10	✓				34	10	✓						5	00													5	-	✓		25	24	#235417
June	30	"	33	-	✓	-	30	-	63	-	✓						25	24			13	-	50	-							88	24					272790. 274808-274532.
					35	-	30	-	135	-	✓						105	-					30	-							135	-	✓				274916. 274987.
					500				500		✓										500										500		✓				1335 #99
									263	24																					263	24					
			W&A														War Service Gratuity												W&A		S/A						M.7W2595 Rec
122 days mine JUL 28 1919			280	00	120	00	400	00																					70	✓	30	-	100	-			
Aug 19																	9557134												40	✓	30	✓	200	✓	140	✓	60 ✓	
Sept																	1294300												40	✓	-		240		40	✓	60 ✓	
																	1306138												-		30	✓	300	✓	40	✓	30 ✓	
			Sept 25														1313#48-9												40	✓	30	✓	400	✓				

200M-3-19.—L. ... 5878-... & D. 9985.
M. F. W. 2596.
1772-39-1390.

Date of Enlistment 19-9-18

Oct 1, 1918

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

M-27682

Date of Assignment Oct 1, 1918

RATE OF SEPARATION ALLOWANCE

25 00	30.00		

19-9-18
Pte. 2753
M.039742

RATE OF ASSIGNMENT

20 00			

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion Siberian Draft.

Beneficiary Mrs Clara Miller

Relationship Wife

Address 122 Stephen St. Kingston, Ont.

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2 MRS.CLARA MILLER,
122 STEPHEN ST.,
KINGSTON,ONT. 20 25 45.00

3 % 2771378 CPL CHAS.EDW.MILLER
FORTY FIVE DOLLARS

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	
Oct.	M 51793	25	20	45	✓
Nov.	T 58983	25	20	45	✓
Dec.	P 67036	45	20	65	✓
19 Jany	U 69150	30	20	50	✓
Feby	W 73706	30	20	50	✓
Mar	K 91359	30	20	50	✓
April	P 1387	30	20	50	✓
May	Q 6286	30	20	50	✓
		245	160		

012842-6-71 REMARKS M.D.3

A/c Closed 31-5-19
Rec'd per Montcalm
6-6-19 - M/10197-19-5-19
Date
M.F.O.
Name
Deputy
Deputy-L.P.M.R.O. 84770 MAY 1919 C
19-5-19

AUTHORITY FOR NEW ACC'T. K-012842-6-71
30-10-18

M. F. W. 128
400M.—6-17—1772-39-141
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.—-17—1772 39-1141
L. L. 22320—M. & D. 7993.

War Service Badge Class..A.....

No..213294.....Issued

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 2771378

2. Rank Private

3. Name MILLER, Charles Edward.

4. Unit No. 3 District Depot.

5. Date of Discharge 30-6-19 | Place Kingston, Ont.

6. Reason for Discharge "On Demobilization R.O. 1894"

7. Authority 3DD-3-M-695 D/ 28-6-19

8. Proposed Residence after Discharge 122 Stephen St., Kingston, Ont.

Abroad 18-3-48
6-4-M-4-12-47

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. ? 39.

x C. E. Miller

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Kingston, Ont.

Date 30-6-19

Signature ..... Captain

(O.C. Discharging Unit.)

O. C. Discharging Section
No. 3 District Depot

M.F.B. 218a—150M-3-19—1772-39-113.

ZZP.

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 2771 [illegible]

2. Rank Private

3. Name [illegible]

4. Unit [illegible]

5. Date of Discharge 10-6-19 Place [illegible]

6. Reason for Discharge [illegible]

7. Authority [illegible]

8. Proposed Residence after Discharge [illegible]

CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the above-mentioned place and date I received my discharge Certificate No. [illegible]

C. E. Miller

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place [illegible]

Date [illegible]

Signature

[illegible]

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