TRIPLICATE 931575

ATTESTATION - PAPER.

No. 931575

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?	Miner
1a. What are your Christian names?	Melvan
1b. What is your present address?	#306 Monroe St. Ypsilanti Mich.
2. In what Town, Township or Parish, and in what Country were you born?	Saline Mich.
3. What is the name of your next-of kin?	Melvina Miner
4. What is the address of your next-of-kin?	~~Mxtkxx~~ #306 Monroe St. Ypsilanti Mich.
4a. What is the relationship of your next-of-kin?	Mother
5. What is the date of your birth?	Dec. 14th. 1892
6. What is your Trade or Calling?	Mechanic
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

TELEGRAPHIC ADDRESS N. or K.
607 Michigan Ave.
Ypsilanti
Mich.
N. S. A.

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Melvan Miner, 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.

x Melvan Miner (Signature of Recruit)

Date Oct. 9th. 1916. W. J. Wright (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Melvan Miner, 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.

x Melvan Miner (Signature of Recruit)

Date Oct. 9th. 1916. (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 10th. day of Oct. 1916.

[signature] (Signature of Justice)

M. F. W. 23.
200 M.—11-15.
H. Q. 1772-39-841.

Description of Melvan Miner on Enlistment.

Apparent Age 24 years ..... months.

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

Height ..... 5 ft. 5 ins.

Chest measurement: Girth when fully expanded ..... 36 ins.

Range of expansion ..... 3 ins.

Complexion Dark

Eyes Dark

Hair Dark

Religious denominations:

- Church of England
- Presbyterian
- Methodist Yes
- 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).

None

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. 9th. 1916. H Larson

Place Windsor Ont. Capt. A.M.C. Medical Officer.

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

Melvin Marvin 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.

C. W. Reis Capt (Signature of Officer)

Date OCT 24 1916 191 .

REGIMENTAL DOCUMENTS

MEH 2-4-19

Pte NAME MINER McIVAN REGT. NO. 931575 UNIT 2nd Const Bn H.Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1-2	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)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	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
1.	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob
1.	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)				24276	
	PROCFEDINGS, 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
1.	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.	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	M F W 192					
1	M F W 67.					
1	R122					

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

Art

Yell

Number 931575 Rank Spr Pt.

Surname MINER

Christian Name ~~Melvin~~ Melvan

Units ~~Con. Cyc. Bn.~~ C. O. R. C. C. Theatre of War France

Date of Service 17-5-17

Remarks

Latest Address 607 Michigan ave.
Ypsilanta
Mich.

Roll No. "B" Page 21380

200m.-6-21.

No. 93155 RANK Pte. NAME Miners Melvan.

T. O. S. 9-10-16
A.D.-52. 16-10-16

UNIT No 2. Construction Battalion.

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Oct 9.	Oct. 31.	M.		
	Nov.	✓		
	Dec.	✓		
1917	Jan 1917	✓		
	Feb.	✓		
	Mar	M		

*Name MINER, Melvan Rank Pte. Regtl. No. 931575

Fyle Depot IDD 10-M-511

Original unit 2nd Con. Bn. Present unit M. or S. S Age 26 Religion Meth Ref. H.Q KD 30-M-

Port, ship and date of arrival Halifax, Olympic, 17-1-19

Next of kin Mother - Mrs. Melvina Miner 306 Monroe St. Ypsilanti, Mich

Address on leave

Address on discharge 607 Michigan Ave. Ypsilanti, Mich. U.S.A.

Transportation issued Yes / No Date Character on discharge

Previous occupation Mechanic Date and place of enlistment Oct. 9th, 1916, Windsor, Ont.

Diagnosis N.A. Date of Medical Boards London, Ont. 4-2-19.

Date T.O.S.	Remarks	Pt. 2 Order No.
10-1-19	No. 1 D.D.	
20-1-19	Posted to Cas. Cpy and granted furlough with subs. to	
	7-2-19	29

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

(over)

Date	Remarks	Pt. 2 Order No
3-2-19	Ceases to draw subs. allce. having returned before expiration of furlough.	34
6-2-19	Discharged from H.M.S. On demobilization, (P.D.P.)	36

M. F. W. 192
150m.—5-18
1772-39-1243

Form R 122.
2353—100M—9-12-16.

J.P. Rank Name MINER, ~~Melvan.~~ MELVAN. Reg'l No. 931575.

Unit No2 Const Bn. If in perm. Corps What Unit? Married or Single Single.

Place and Date of Enlistment Windsor.Ont.9th Oct.1916. Place of Birth Saline.Mich.

Name and Address, Next-of-Kin ~~Melvan~~ MELVINA Miner. (MELVINA)

306 Monroe St.Ypsilanti. Mich. Relationship Mother.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship PE

Discharge, Date and Place Reason Character

N/E R.D. 6061
File R.L.
Category OR CAN

H. W. V., Ld.—9546-16.

A.F.B. 103 CHECKED 30 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.
		Arrived in England. S.S. Southland		7-4-17	AWWW
14.6.17	2nd CCC	Landed in France	Field	17.5.17	Pt II O. 115
16.12.18	NSRD.	TOS from 2" CCC	pte Bshott.	14.12.18	DO 305 & 71 D/ 19.12.18 2" CCC
27-12-18	N.S.R.D	O/C to C.D.D Rhyl	"	27.12.18	" 313
19 JAN.1919	NSRD	SOS to CEF in CANADA	Pte Bshott	9 JAN.1919	PT2DO 16

735

931575 Miner Mr.

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.					

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

Awww.

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

Casualty Form—Active Service.

~~Unit, Regiment or Corps~~ No 2 Const. Battn C. E. F.

Regimental No. 931575 Rank Pte Name Melvin Miner
C. E. F.

Enlisted (a) 9-10-16 Terms of Service (a) Duration of War ~~6 Months~~ & 6 months Service reckons from (a) 9-10-16

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)

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 from Canada	Halifax, N.S.	25/3/17	
		Disembarked, England	Liverpool	7/4/17	
	OO#2 Const Bn	Proceeded overseas	Seaford		Pt 2 D.O. #1
21.5.17	OC.	Forfeits 5 days pay for Making away with Iron Rations	Fld.	21.5.17	Bzobg. Part II 119. 25/7/17

Landed fn France 17-5-17 N.R.

Amending as stepbody

CERTIFIED CORRECT. MAY 17 1917 6 JUN 1917 CAN. RECORDS LONDON

MAY 17 1917

(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				
19.6.17	O.C.	Sentenced 10 days F.P. "1 Forfeits 1 day pay absent from Picquet	Hd.	18/6/17.	B2069. Pt 2-0. 122. 4/8/17
4-6-18	OC	Still with unit	Sld	4-6-18	SR K.S. 18/11784
24-8-18	OC Unit	Granted 14 days leave	Uk.	22-8-18	B213 pt 10. 51 of Sept 1918
14-9-18	do	Resumed from leave -	Sold.	8-9-18	B213
11-12-18.	AAG	Trans. to Eng. and posted to N.S. Reg. Depot. Bramshott		14-12-18.	KR 344
					C.A. Hewett Lieut. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.
17.12.18.	N.S.R.D.	T.O.S and attd 2nd C.C.D. for Quarters & Rations	Bramshott.	14.12.18.	D.O. 305
	NSRD	ON COMMAND TO C.D.D. Kimmel Pk Rhyl	BRAMSHOTT		PART II D.O. N.S.R.D. 313 27/12/18
28/12/18	NSRD	T.O.S. MD & Con. Camp	Rhyl		C.A. Knight LIEUT. OFFICER i/c RECORDS, NOVA SCOTIA REGTL. DEPOT.
					P.E. Weiss Lieut For O/C MD & Wing

Embarked for Canada

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.

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(1) Name of Overseas Unit which Soldier joins No 2 Construction Battn, C.E.F.

(2) Regimental Number 931575

(3) Full Name of Soldier Melvin Minier

(4) Place of Birth Michigan 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 x

(10) Is your Mother alive? Yes.

If so, state name and address Mrs ~~[illegible]~~ Minor

Saline, Michigan, U.S.A.

(11) If your Mother is a widow Yes.

Are you her sole support, or not? Yes.

(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.

$15. Have brother but goes to school yet

(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.

x

(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? 7

Have you made arrangements for payment of your Insurance premium x

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

[illegible] Capt

for L'T. COL.

O. Comd'g No. 2 Construction Battalion C.E.F.

Officer Commanding.

Date 21 March 1916

ORIGINAL 931575

MEDICAL HISTORY SHEET.

Surname Miner Christian Name Melvin

Examined { on 3 day of April 1917 / on Board Southland

Approved by Dan Murray

Rank Capt. A.M.C.

Birthplace { City or Town Sulina / County Mich.

Apparent age 25 Yrs

Trade or occupation Mechanic

Height 5 Feet 6 Inches.

Weight 154 Lbs.

Chest measurement { Minimum 31 inches. / Maximum expansion 34 inches.

Physical development good.

Small-Pox Marks None

Vaccination Marks { Arm Right. Left. / Number None

When Vaccinated last never

(a) Marks indicating congenital peculiarities or previous disease None

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

Date.	Fit or Unfit.	Examined for Re-engagement.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
23/2/17		Dan Murray M.O.
3/4/17		Dan Murray M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
26/2/17	1st R	Dan Murray M.O.
3/3/17	2nd R	Dan Murray M.O.
23/3/17	3rd R	Dan Murray M.O.

Enlisted on 9th day of Oct. 1916 at Windsor Ont.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	76 Z Construction Bn	931575		Oct 9th 1916
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

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

M. F. B. 313.
400M.—1-16.
H. Q. 1772-39-439.

Surname Muir Christian Name Alex

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				

COPY ONLY

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 931575 (Rank) PRIVATE

Name (in full) MINER, Melvan, enlisted in

the 2nd Construction Battalion, C.O.M.F.

CANADIAN EXPEDITIONARY FORCE at WINDSOR, ONT. on the NINTH

day of OCTOBER 1916

HE served in FRANCE (With 2nd Construction Battalion)

and is now discharged from the service by reason of ON DEMOBILIZATION.

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

Age 26 Years

Height 5' 5"

Complexion DARK

Eyes DARK

Hair DARK

Marks or Scars SCAR ON NOSE.

Signature of Soldier

H. C. MacKendrick

Issuing Officer

for Lind CAPT.

Rank

O. C. Discharge Section, No. 1 D. D.

Appointment

DISCHARGE SECTION
FEB 6 1919
No. 1 District Depot

Date of Discharge

Signed at LONDON, ONT. this SIXTH day of FEBRUARY 1919

in Military District No. ONE

File Reference No. IDD 10-M-511

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.
250m —6-18.
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

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

..... Name of Officer

..... Rank

..... Appointment

LAST PAY CERTIFICATE

Regt.No. 931575 Rank pte Name Miner Melvon

Corps 2 C C Co who was Discharged

on 6 2/19 to

The following is a statement of the account of the above named

from 1 2/19 to 6 2/19

Bal Dr from mon. of / from L.P.C.			Bal.Cr. from mon. of / from L.P.C. Jan	25	00
ASSIGNED PAY:			Regt.Pay 6 dys. @ $ 1.00	6	00
S0356	3	00	F'ld.All. 6 dys. @ $ 10		60
SEPARATION ALLOWANCE:			SEPARATION ALLOWANCE:		
OTHER CHARGES:			OTHER CREDITS: Clothing Allowance	35	00
PAYMENTS:	63	60	Subsistence,		
S0357 Bal.Credit (to be pd.)			Bal.Dr.(to be deducted) (from soldier $) (from Dependent $)	66	60
Overseas PDP	66	60			

SEPARATION ALLOWANCE	ASSIGNED PAY	VICTORY BOND
at $ per month has been Nil to	at $ 15 per month has been pd to 6 2/19 and Closed	Subscribed $ Pd.by other Units $ Pd.by this Unit $ Nil

Dependent or Beneficiary: Mrs Melvina Miner

Address: 102 South Hamilton Rd. Ypsilanti Mich

REMARKS: Discharged 6 2/19 DO 86 Demobilization

Date of Enlistment 9-10-96

If married and if Separation Allowance card submitted No No.

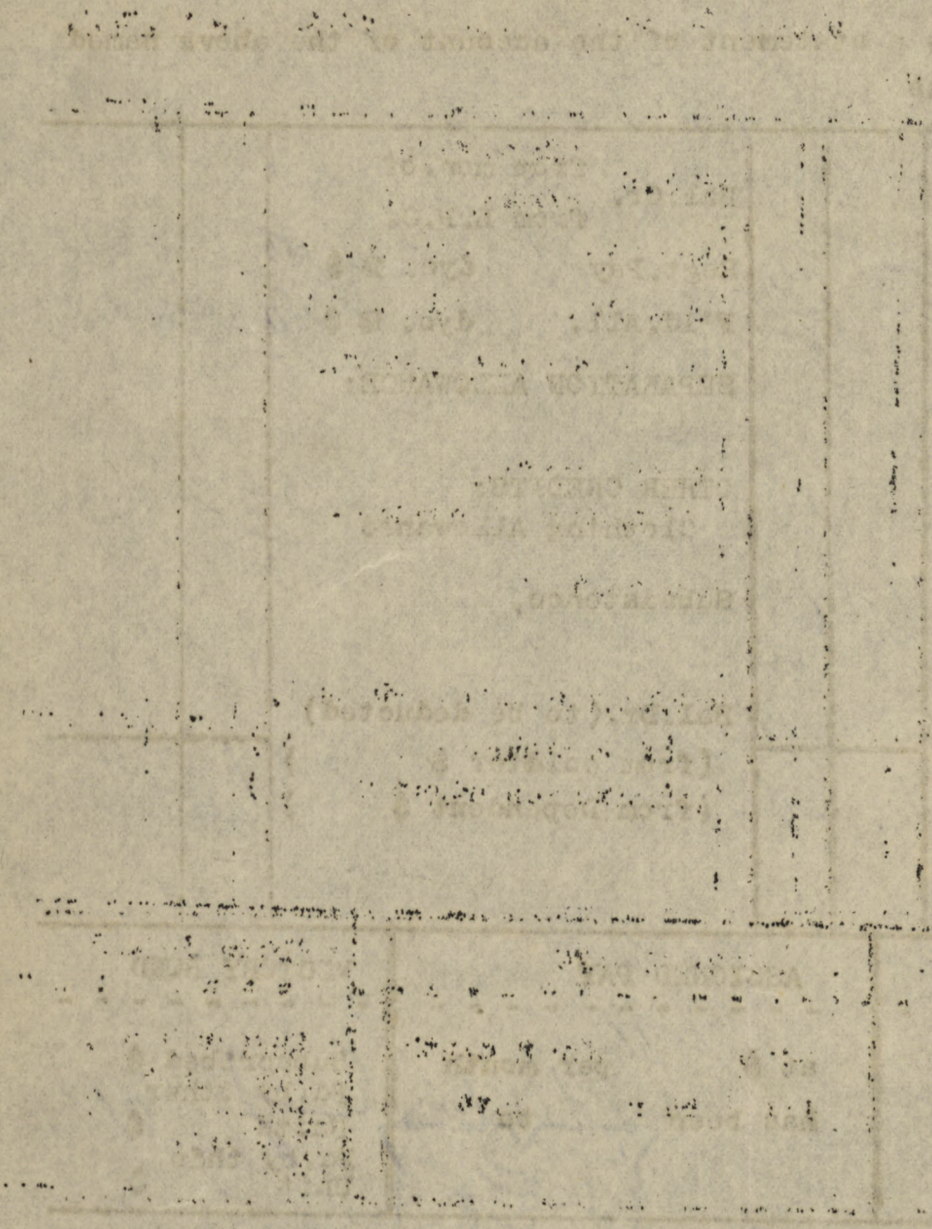
I have carefully examined this statement of account and find it to be a correct extract from the Paylist of this Unit.

Date:

London, Ontario.

A E MacGregor Captain.

for Paymaster No.1 District Depot.



DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT.....

NAME OF SOLDIER MINER

RANK Pte

REGIMENT 4th Cons. Bn.

No. 931515

INSTRUCTIONS

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

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

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

	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	1919 Feb.	3.	X 14									X 14.30						X 7			EXAMINED BY A.B. McMillan Capt.		Complete on Discharge

M.F.B. 465.
200m—6-18.
1772-39-950.

B. B. Category A2.

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. 931575 Rank Pte. Surname Miner
(Given name in full) Melvan

Unit or Corps 1. D. D. Birthplace Saline, Mich. U.S.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 128 lbs. Height 5 ft. 5½ in. Colour of Eyes Dark.

Nutrition Good

Pulse 72

Condition of arteries Normal

Vision Rt 20x20 Left 20x20

Hearing (conversational voice) Rt 21x21 ft.

Left 21x21 ft.

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

Scar on nose.

Opinion as to general health and physical condition Good, Category A2.

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.

No service disability.

(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 London, Ont. (Canada)

Date Feb. 4/19. Signed Alex McKay Capt. 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 Wm Evans Private.

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

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

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 2nd Cons. Bn.

Regimental No. 931575 Rank Pte. Name Minor. M.

Enlisted (a) ..... Terms of Service (a) C. E. F. D of W Service reckons from (a) .....

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				
10-1-19	From O/S	Taken on strength No. 1 District Depot London D.O. 29.			

F. A. Herman Lieut

For O/C No. 1 DISTRICT DEPOT

LONDON, ONT. DISCHARGED FEB - 6 1919 ON DEMOBILIZATION

H. C. MacKindrick Lieut

for O. C. Discharge Section, No. 1 D.D.

(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				

L-L.Job 5470— & D. 6888

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

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

To Whom Mrs. Melvina Miner
Address 102 South Hamilton St
Ypsilanti Mich.
U. S. A.

By Whom Assigned Miner Melvin
Regtl. No. 931575
Rank Pte
Corps 202 const Bn.

Rate 15-00

APR 1917

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				

CONSOLIDATED 5 ACCOUNT

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. Mrs. Melvina Miner
(Assignee)

L. L. Job 5470—Req. 6888.

Name of Soldier Miner Melvin

No 931575 Pte No. 2 const Bn

15-00

APR 1917

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		Z 4996	15.	
May		Z 10362	15.	15 Bn
June		Y 16655	15.	
July		Z 26313	15.	Bn
Aug.		N 31240	15.	L.
Sept.		N 37493	15	L
Oct.		D. 45022	15	
Nov.		O 57371	15	135.00
Dec.		N 60040	15	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

Home

CANADIAN
ASSIGNED PAY AUDITED

AUDIT CLERK

DATE 13 Feb 19 E. Lane

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.				

9—10—16

L. L. Job 4503.—M[illegible] D. 6832.

MILITIA AND DEFENCE

M. F. W. 11.
50m.—6-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Melvina Minier

Address 306 Monroe St
Ypsilanti
Mich

Relation to Soldier wife, child or mother } Usa Mother

Name of Soldier Minier Melvan

Regtl. No. 931575

Rank Pte

Corps No 2 Con Bn

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 7 ACCOUNT

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

M. F. W. 11a.
50m.—4-16.
1772—39—818.

Sheet No. 2. Melvina Miner Mother PAYMENTS. Name of Soldier Miner Melvan Pte

931575

L. L. Job 310.—Req. 6574.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.		25.3.45	54	54
Jan.	1917	V 2915H	20	20
Feb.		V 33325	20	20
March		V 35219	20	20
April		V 1717	20	20
May		V 4940	20	20
June		V 8184	20	20
July		V 14457	20	
Aug.		E 15618	20	
Sept.		L 18240	20	
Oct.		T 20593	20	
Nov.		B 25308	20	
Dec.		S26387	20	294.00
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

P. 559

MARRIED OR SINGLE S.

PLACE OF BIRTH Saline Mich. U.S.A.

NAME AND ADDRESS OF NEXT OF KIN McDoan Miner.
306 Monroe St. Ypsilanti Mich. 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

REG'L NO. 931575 RANK NAME Miner McDoan, X E V

IF IN PERMT. CORPS } WHAT UNIT UNIT TRANSFERRED TO DATE AUTHORITY

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION Windsor Ont, TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION February 16th 1916 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 15.00 DATE EFFECTIVE 1.4.17.

PAYABLE TO Mrs. Melvina Miner, 102 South Hamilton St. Ypsilanti, Mich. U.S.A. RELATIONSHIP Mother

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
							Separation.							22 60	22 60														22 60		22 60				Bal from Camp[illegible]
Apr. 1/30	20	1.10	33	00											33 00															15 -		15 00	40 60		40 60	
MAY 1-31	31	1.10	34	10											34 10	47	5/11							9 74							15 -		29 61	45 09		45 09	
June 1-30	30	-	33	00											33 00	21	19/4							4 87							15 -		15 -	63 09		63 09	
July 1-31	31	-	34	10											34 10															15 -	5 50	20 50	76 69		76 69	Forfeits 5 do 21.5.17 D.O. 119. 25.5.17.
Aug -	-	-	34	[illegible]											34 10											3 56					15 -	11 00	29 56	81 23		81 23	10 do FPI. 18/8/17. D.O. 122. 7.8.17.
Sept 1-30	30	-	33	-											33 -											3 57					15 -		25 71	88 52		88 52	
			201	30										22 60	223 90									14 61		14 27					90 -	16 50	135 38	88 52			

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
Sept	Bal	~~88 52~~ Dec							88 52		
Oct	P.P	34 10		AR. 577. 27/7 Rbounkham Cart Capt	3 57			- 15			
				" 466 13/9/17 - - - -	3 57						
				" 626 11/9/17 - - - -	3 57				96 91		
		34 10			10 71			15			

931575. Miner. Mc. I 15.00

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		2		PARTICULARS					DR. 1	DR. 2	DR. 3	DR. 4	BALANCE		DEFER-RED. PAY	SEP. ALLCE. ENG.													
	Oct Bal																	96	91															
Nov	P.P.				33	-											15																	
									AR. 827. 28 9/17 C.F.C.					3	57																			
									" 850. 12 10/17 "					3	59																			
									" 973. 25 10/17 "					3	57																			
DEC	- -				34	10			" 1091. 10 11/17 "					3	57		15	119	73															
					67	10								14	28		30																	
JAN 1918		P.P.			34	10								14	28		15																	
									" 1259. 23 11/17 2 Counts					12	49																			
									" 1433. 21 12/17 " "					7	14			119	20															
					34	10	-	-						19	63	- -	- 15																	
FEB		"			30	80			Assigned Pay								- 15																	
									" 1855. 24 1/18 C.F.C.					3	57																			
									" 1598. 4/1/18 " Jura					3	57			127	86															
					30	80								7	14		15																	
MAR 1918					34	10			Ass Pay								15																	
									AR 2013. 14 2/18 C.F.C. Jura					7	14																			
									" 2321. 18 3/18 "					7	14			132	68															
					34	10								14	28		15																	

CANADIAN
ASSIGNED PAY AUDITED
AUDIT CLERK
DATE 13/5/19 F. Lane

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY * ~~ENGLAND OR~~ CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1 APR 1917	EFFECTIVE DATE:-
AMOUNT:- 15⁰⁰	AMOUNT:-

NAME:- Miner McIvan E

NUMBER:- 931575

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.

Mrs Melvina Miner - mother
102 South Hamilton Street.
Ypsilanti Mich U.S.A.

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
			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
~~9.12.18~~	~~6742~~		~~4 66~~				
~~16.12.18~~	~~3582~~	~~B.R.D.L.~~	~~9 73~~				

NR 161—17-12-18—2 CCCo. Ledger Balce 48.16

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE: Transferred to Canada 31.12.18. ^ LPC. Ca .. 33.77

1918 MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
MAR	Bal Ford								132 68		
Apl	P. Pay	33 -		6.a.P.				15 -			
				aR 7. 9th. C.F.C Jura.	3 57						
				aR 269 28/4 — " —	3 57				143 54		
May	P.P.	33 34 10		6.a.P.	7 14			15 15 =			
				aR 411 9/5 C.F.C Jura	3 57						
				aR 1025 20/5 — " —	3 57						
		34 10			7 14			15	155 50		
June	P. P.	33 -		Ass't Pay				15 =			
				aR 712. 7/6 CFC 5.	3 57						
				✓ 874 27/6 ~	3 57				166 36		
		33			7 14			15			
July	PP	34 10		Ass't Pay				15			
				aR 954 10/7 CFC 5.	3 57						
				aR 1096 25/7 ✓	3 57				178 32		
		34 10			7 14			15			
Aug.	PP	34 10		Can AP				15			
				aR 1259 10/8 CFC 5	3 57						
				CP. 27455. 27/8 L/N	73 00						
				aR 1673 25/8 CFC 5.	7 14						
				aR 3031 21/8 ✓.	97 33						
				CP 29125 31/8 L/N	14 60				1 78		
		34 10			195 64			15			
Sep	PP.	33		Can AP				15			
				aR 1879 24/9 CFC 5	3 57.				16 21		a/c Agreed
		33			3 57			15			

Over

COMPILED BY J.P. Smith

CHECKED BY

NUMBER 931575 RANK Pte NAME Mercer H

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									16 21		
6 M	BB	34 10		Cap				15	34 10 50 31		
				an 2156 12/10 SCFC	3 73.				22 46		
		34 10		✓ 2324 26/10 ✓	3 73.				27 85		
June	C.G.	33-		Cap	7 46.			15 15	67 0 94 95		
				✓ 2691 11/11 ✓	3 73.				61 18		
				- 2909 26/11 ✓	13 06.						
Dec.	B.B.	34 10		Cap.	16 79			15-	48 16		
				AR 6742 10/12 CQBD	4 66						
				✓ 3582 15/12 BBDG	9 73				33 77		
		6/10			31 18			30			

JOS to Canada 9/1/19 DO 16 19/1/19 nSRD

CANADIAN
ASSIGNED PAY AUDITED

AUDIT CLERK

DATE 13.5.19. F. Lane.

59 10-Mi-59

AUDITOR | PAYMASTER

M. OR S. S

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

REGT. No. 931575 RANK Pte NAME (IN FULL) MINER Melvan

59

(BLOCK LETTERS. SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

Nil

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 2-6660.

IF IN P. F. WHAT UNIT? 607 Michigan Ave.

PLACE OF ATTESTATION

TRANSFERRED TO — DATE 10-1-19 — AUTHORITY Ypsilanti 100 Mich

DATE OF ATTESTATION 9-10-16

TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $15

DATE EFFECTIVE Pa. to 31-1-19.

PAYABLE TO Mrs Melvina Miner

RELATIONSHIP mother

ADDRESS 102 South Hamilton Rd Ypsilanti Mich.

ANY CHANGE IN ASSIGNEE OR ADDRESS

STOP PAYMENT FROM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED PLACE London — DATE 6-2-19 — REASON demob — AUTHORITY 100 36 — IF ENTITLED TO POST DISCHARGE PAY Yes

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 1-12-18 31							33	77													13				30 4 87 5		54	87	21	10			Cheque. 1st issue
31-1-19	31	1/10	34	10	12	00																			21	10	21	10			25		To 6660 2019 10029
1/19 - 6/19	6	1/10	660		35	00	25	00	66	60											1D0356				63	60	66	60					Subs 2019 to 7/19 10029 Amended Ceases 3 1/19 10034
															WAR SERVICE GRATUITY						D0357	6/2			3	00			80				C R Mortimore Major W S G. Up 2 years 3/0
6/2/19			70						70		486 6/19														80		80		80				Overcredited 1 day Subs does not draw subs for 3 1/19.
			NAA.																													
6/3/19			280						280																80		70		210				3743
6/4/19			210						210																		70		140				68039
6/5/19			140						140																		70		70				77547
6/6/19			70						70																		70						F6-19 G88830
									350						349	20									80	350							A. Grant Capt.

MONTH	PAY AND F. A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE RCLLS						CASH PAYMENTS						ASSIGNED PAY		REGI-MENTAL 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.	

Date of Enlistment 9-10-16

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

American Acc.

Date of Assignment 5 463

M 17150 April 1-17

RATE OF SEPARATION ALLOWANCE

20	$ 25.00 1-12-17 RR 3257		

canceled

RATE OF ASSIGNMENT

15			

PARTICULARS OF SEPARATION ALLOWANCE

No. 931575

Rank Rte Promoted Reverted Discharge

Soldier's Name Melvin Miner

Battalion 2 Const. Battle.

Beneficiary Mrs. Melvina Miner

Relationship Mother

Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Melvina Miner

Address 102 South Hamilton St.

Change of Address Ypsilanti Mich U.S.A.

1

2

3

4

Date 1917		Cheque No.	Amount S/A	Amount A/P	Total	
Dec 31			294	135	429	
Jan 1918	W	67939	30	15	45	✓
Feb	S	73863	25	15	40	✓
Mar	O	95810	25	15	40	✓
April	M	11007	XX	15	15	✓
May	R	14917		15	15	✓
June	Z	13598		15	15	✓
July	Z	24893		15	15	✓
Aug.	Z	41914		15	15	
Sept.	Z	51218		15	15	✓
Oct	Z	66029		15	15	✓
Nov	Z	80607		15	15	✓
Dec	Z	95344		15	15	✓
Jan	Z	111245		15	15	✓
			374 =	330 =		

see file 12887-M-3.

REMARKS

~~See SA for another address~~

~~Mr. Cox investigating~~

S.A. acct closed 31/3/18

Close S.A Husband not incapacitated rulings S.B 8 3/18 W.Y. ring 9 3/18

req. 12 8/18. mailed 15 8/18 JCB. canc. on matrix

A/c Closed 31-1-19

Ret'd per Olympic

Date 17/1/19 M.F.W. 187 23/1/19

Closed Collins

M.D. #1

Destroy # 58874 JUD

CANADIAN ASSIGNED PAY AUDITED

AUDIT CLERK

DATE 13/5/19 F. Lane

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

M.R.O 1B rendered 9-3-18

MRO 2A rendered # 14-5-18 W.Y. 5

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.—5-17—1772 39-1141
L. L. 22320—M. & D. 7993.

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. 931575

Rank PRIVATE

Surname MINER,

Christian Name Melvan,

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

Corps (Squadron, Battery or Company) 2nd Construction Bn. C.O.M.F.

Date of Discharge FEB - 6 1919

Place of Discharge LONDON, ONT.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

		Descriptive Marks
Age	26 years ..... months.	
Height	5 feet 5" inches.	
Complexion	DARK	
Eyes	DARK	SCAR ON NOSE.
Hair	DARK	
Trade	MECHANIC.	
Intended place of residence (To be given as fully as practicable.)	607 Michigan Ave., Ypsilanta, Mich	

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

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) LONDON, ONT. M miner .....(*Signature of Soldier.*)

(Date) FEB - 6 1919 G. Redden Esq .....(*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) LONDON, ONT.

(Date) FEB - 6 1919

(*Signature*) for H. C. MacKendrick Lt.
O. C. Discharge Section, No. 1 D.D.

Reservations referred to at Para. 8.

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

None

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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.