Triplicate

NO. 1 RAILWAY CONSTRUCTION DRAFT.

ATTESTATION PAPER.

No. 2569338

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Moore
1a. What are your Christian names?	David ~~Louis~~ Lewis
1b. What is your present address?	Windsor, Ont.
2. In what Town, Township or Parish, and in what Country were you born?	Belle River, Ont.
3. What is the name of your next-of kin?	Mrs. Callie Ann Moore
4. What is the address of your next-of-kin?	Florence, Alabama
4a. What is the relationship of your next-of-kin?	Mother
5. What is the date of your birth?	April 3rd. 1897
6. What is your Trade or Calling?	Laborer
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

3 yrs E Mobile Ft Florence Ala USA

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, David Louis Moore, 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.

D. L. Moore (Signature of Recruit)

Date July 7th. 1917. Leigh Cochrane (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, David Louis Moore, 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.

D. L. Moore (Signature of Recruit)

Date July 7th. 1917. Leigh Cochrane (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 7th. day of July 1917.

T. Borden J.P. Co. (Signature of Justice)

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

Description of David Louis Moore on Enlistment.

Apparent Age 20 years 3 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 8 ins.

Chest measurement.
- Girth when fully expanded ..... 35 ins.
- Range of expansion ..... 4 ins.

Complexion ..... Fair

Eyes ..... Brown

Hair ..... Brown

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).

Hearing - R. E. —
L. E. —

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date July 7th. 191 7 .....

Place Windsor, Ont. .....

Medical Officer.

*Insert here "fit" or "unfit."

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

.....

.....

.....

.....

CERTIFICATE OF OFFICER COMMANDING UNIT.

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

..... (Signature of Officer)
Lieut.

Date July 9th. 191 7 O.C. #1 Railway Construction. Draft. C.E.F.

REGIMENTAL DOCUMENTS

10.4.19

Pte NAME MOORE DAVID LEWIS REGT. NO. 2569338 UNIT 3rd CRT. H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
3 X	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)					
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
1	DENTAL HISTORY SHEET (M.F.B. 465)				29185	Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demobilization
1	MEDICAL EXAMINATION (M.F.W. 129)					
	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
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	A F W 67					

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

SURNAME. Moore

CHRISTIAN NAMES David Louis

REGL. No. 2569338 RANK Pte.

UNIT Rly. Troops Coy M.D. No. 1 (1st R.D.)

FORMER CORPS Nil.

CARD NO. 1 Sol/Fis. 1-3-19

Demob. D.O.S. 9 FOLL. 28-2-19 I.L.D.

NEXT OF KIN.

NAMES IN FULL Moore Mrs Callie

RELATIONSHIP TO SOLDIER Mother

ADDRESS Florence, Ala. U.S.A.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada Belle River Ont. DATE Apr. 3rd 1894

PLACE OF ATTESTATION Windsor Ont. DATE July 4th 1914

O.S. 13/8/17.

Ptc 5/2/19 262 64

L. L. 10437. M. & D. 7253.

M. F. W. 22. 100M.—11-16. H. Q. 17 2-30-339.

Sailed from Halifax per S.S. Grampian 13/8/17

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Labourer. RELIGION Presbyterian

DESCRIPTION.

APPARENT AGE 20 YEARS 3 MONTHS

HEIGHT 5 FEET 8 INCHES

CHEST MEASUREMENT 35 INCHES EXPANSION 4 INCHES

COMPLEXION Fair EYES Brown HAIR Brown

DISTINGUISHING MARKS Nil.

MEDICAL EXAMINATIO PLACE Windsor Ont. DATE July 4th 1917

Present Address Windsor Ont.

M&A

Number. . 2569388 . Rank. . Spr. B

Surname. . MOORE . V

Christian Name. . David Lewis

Unit. 3rd Can Rly Tps Theatre of War France

Date of Service. . . . 2-10-17

Remarks.

Latest Address. . Florence

Alabama U.S.A.

Roll No. B. Page 8212.

No. Rank Name

T. O. S. Unit

DES. OCT 4 1923
REGN. NO. 7936 M.D.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY

No. 2569338 RANK Pte NAME Moore D. L.

T. O. S. 7-7-17 UNIT Central Training Depot.
A.O. 33-10-7-17 (M.I. Special Service Co)

M. D. /.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917 July 7	1917 July 31	J		
Aug.		M		

*Name MOORE David Lewis Rank Pte. Regtl. No. 2569338.

Fyle Depot IDD-10-M-665

Original unit 3rd CRT Present unit 3rd CRT ~~XX~~ or S. Age 21 Religion Pres Ref. H.Q. 1-D-30-M-2094.

Port, ship and date of arrival Halifax Baltic 5-2-19.

Next of kin Mother Mrs. Gallie Ann Moore Florence, Ala. USA

Address on leave

Address on discharge Florence, Alabama, USA.

Transportation issued Yes / No Date Character on discharge

Previous occupation Laborer Date and place of enlistment July 7th 1917. Windsor, Ont.

Diagnosis Date of Medical Boards

Date.	Remarks.	Pt. 2 Order No.
TOS		
29-1-19	No.1. D.D.	
8-2-19	Posted to Cas. Co. and granted furlough with subs. allow. to 27-2-19.	50

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

(over)

Date.	Remarks	Pt. 2 Order No.
1-3-19	Discharged from H. M. S. On Demobilization. (P.D.P.)	59

M. F. W. 192
150m.—5-18
1772-39-1243

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 #1 Railway Construction Draft. C.E.F.

Regimental No. 2569338. Rank Private. Name MOORE, David. Lewis.
C.E.F.

Enlisted (a) 7-7-17. Terms of Service (a) War & Six Months. Service reckons from (a) 7-7-17.

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

Extended — Re-engaged — Qualification (b) Laborer. None.

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. HALIFAX.	Canada.	10-8-17	H.M.T. GRAMPIAN. 10-8-14.
		Disembarked.	England.	23/8/17	H.M.T.
24/8/17	C.R.T.	Taken on Strength.....	Purfleet	24/8/17	D.O. pt II No 225
5/10/17	C.R.T.	S.O.S. this Depot to	Purfleet	2/10/17	Pt. 2, D.O. 235
	Depot.	3rd En., C.R.T. O/S.			L Whitby Lieut. for O.C., C.R.T. Depot
10.10.17	6.G.B.D.	S.O.S. 3rd C.R.T. on arrival in France	Field	3.10.17	D.O. II 125 d/10.10.17.
14.10.17	3 C.R.T.	Joined Unit	"	3.10.17	B.213.
12.10.18	"	Granted 14 days LEAVE to Nice		10.10.18	" D.O. II 111 d/24.10.18
2.11.18	"	Returned from LEAVE		30.10.18	"

CERTIFIED CORRECT. 11 OCT 1917 CASUALTY RECORDS LONDON.

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.

29.1.19 Sailed from Liverp[illegible]l

W. P. Sully CAPT.
ADJUTANT H.M.T. Baltic

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				
5.1.19	CGBD	Transferred to Emgland and posted to CRT Depot, Witley		5.1.19 ~~27-12-18~~. NR 23	Po.1.d/1919.
10-1-19.	3rd C.R.T. Depot.	T.O.S.on reporting from Inf.Base Depot. Etaples	Bordon.	5-1-19 BO. 1.	
15-1-19.	3rd C.R.T. Depot.	On Comm. Rhyl pending trans. to C.E.F.Canada.	Bordon.	15-1-19 BO 6.	

DISCHARGED
DEMOBILIZATION
LONDON ONT
MAR 1 1919

Chas. B Chapwell
Lieut. for Lt.-Col., A. A. G.
Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

J. A. B. Allinson
Lieut.
for O.C. Can. Rly. Troops.

Attached C.C.C. Kinmel Park for return to Canada Part II Orders No._____. Ceases to be attached C.C.C. Kinmel Park on embarking for Canada, Part II Order No._____

24/1/19

A. E. Avery Lt
M.D.1.

Lt Major Commanding [illegible] Wing, Kinmel Park Camp.

29/1/19 from Overseas

Taken on strength No. 1 District Depot London No. 50

Paid Lieut Lt
for O.C. No. 1 DISTRICT DEPOT

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

Form R 122.
2353—100M—9-12-16.

CR. Rank Name MOORE. David Lewis. Reg'l No. 2569338.

Unit Dft.No.1.Rly.Con. Dft. to C.R.T.D. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Windsor,Ont. July 7th,1917. Place of Birth Belle River,Ont., Canada.

Name and Address, Next-of-Kin Mrs. Callie Ann Moore.

Florence, Alabama, U.S.A. Relationship Mother.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

H. W. & V., Ld.—9546-16.

N/E. R.B. No. 190444
File R.L.
Category Cav. O.K.

A.F.W. 3013 CHECKED 1 OCT 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 23-8-17 S/S GRAMPIAN☆				
24.8.17.	Depot ERS.	Taken on Strength	Purfleet	Spr	24.8.17	Rtto 225.
3.10.17	"	SOS to 3rd ERS D'Seas	"	"	2.10.17	" 265.
10.10.17	3rd R.B. ERS.	T O S as reins.	Field	"	3.10.17	" 125
31.12.18	"	Posted to CRTD.	"	"	~~26.12.18~~ 5-1-19	Pt III. 1. 9-1-19 Pt II 130
15-1-19	CRA Comp Bde	On Command to Rhyl	Borden	"	14-1-19	MO 1-570-25 Pt-II 15th DT 29-1-19
10-1-19	-	T.O.S. from France	-		5-1-19	" 10
29-1-19	MO 1	2 SOS Commencing proceeding to Canada	Rhyl	"	29-1-19	" 25

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.					

10 Mar-92

LAST PAY CERTIFICATE

Regt.No. 256938 Rank Spr Name Bessie Davidson

Corps C.A.M.C. who was Rusd to

on 1/3/19 to

ORIGINAL

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

from 1/2/19 to 1/3/19

Bal Dr from mon. of			Bal.Cr. from mon. of	28	54
from L.P.C.			from L.P.C.		
ASSIGNED PAY:			Regt.Pay 29 d:s. @ $1.00	29	
2607			F'ld.All. 29 dys. @ $1.00	29	10.
SEPARATION ALLOWANCE:	1	50	SEPARATION ALLOWANCE:	1	00
OTHER CHARGES:			OTHER CREDITS: Clothing Allowance	35	
PAYMENTS:					
2608	111	94	Subsistence, 8/12 6.37 2/19	16	
Bal.Credit (to be pd.)			Bal.Dr.(to be deducted)		
			(from soldier $)		
	113	34	(from Dependent $)	113	44

SEPARATION ALLOWANCE	ASSIGNED PAY	VICTORY BOND
at $ 20 per month	at $ 30 per month	Subscribed $
has been pd to 1/3/19	has been pd to 1/3/19	Pd.by other Units $
		Pd.by this Unit $

Dependent or Beneficiary: Mrs Estella Moore

Address: Alexandra Hospital

REMARKS: Enlisted 1st Bn 20359.

Date of Enlistment 4-7-17

If married and if Separation Allowance card submitted

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

Date: 1/3/19

London, Ontario.

Captain.

Paymaster No.1 District Depot.

This form must not be used when the Proceedings are for the information of the B.P.C. In such cases, M.F.B.227 is the only form applicable.

FOR ALL RANKS

PROCEEDINGS OF A MEDICAL BOARD (short form).

Place ..... Date .....

Number ..... Rank ..... Name .....

Corps ..... Age ..... Height ..... Weight .....

Religion ..... Has he been Overseas .....

(1) Disease or Injury .....

(2) Cause .....

Where incurred ..... Date .....

(3) Disability .....

(4) Present condition (describe fully) .....

(5) History .....

(6) Probable duration of Disability .....

(7) Is officer or other rank fit for Category, A ..... B ..... C ..... D .....
(answer yes or no).

(8) If for treatment, specify nature of .....

..... President.

..... Member.

Place ..... Date .....

Approved ..... A.D.M.S., M.D.

Place ..... Date .....

M.F.W. 180.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT.....

NAME OF SOLDIER Maj 22 C. Daniel Moore No. 256232

REGIMENT 3rd Bde C.A. RANK Dvr

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 26	1/19																		R B McMillan Capt		Can. 8.14.19.

M.F.B. 465.
200m.—6-18.
1772-39-950.

Original ORIGINAL

MEDICAL HISTORY SHEET 2569338

Surname Moore Christian Name David Louis

Examined on 7th. day of July 191 7 at Windsor, Ont.

Birthplace City or Town Belle River County Ont.

Apparent age 20 Years 3 Months

Trade or occupation Laborer

Height 5 feet 8 Inches

Weight 120 lbs.

Chest measurement Minimum 31 inches Maximum expansion 35 inches

Physical development

Small-pox Marks

Vaccination Marks Arm Right Yes Left Number 3

When Vaccinated last 1916

(a) Marks indicating congential peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

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

Bad tonsils

Approved by G Kyle Lt-Col. Rank M.O.

Date	Cat. or Unfit	Examined for Re-Engagement	
7/7/17	A	J.B. Lewis Capt. A.M.C.	M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.

Date	Result	Vaccinations	
7/7/17		JABell	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
11-7-17		G Kyle Lt-Col.	M.O.
7/7/17		JABell	M.O.
21/7/17		G Kyle Lt-Col.	M.O.

Enlisted on 7th. day of July 191 7 at Windsor, Ont.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	#1 Rly Constr Draft C.E.F.	2569338		7-7-17
Transferred to	9th C R T			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
Windsor, Ont. Major, C.A.M.C.	JUL 7 1917	on enlistment Major, C. A. M. C.	Fit A-1 Immunized Overseas Capt., C. A. M. C.
London Ont.	7/20/17	Nil Examined by me	Category A J.B. Lewis Capt. A.M.C.

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.

300M.—1-17.

H. Q. 1772-39-439.

J.MC

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 of surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer
		Day	Month	Year	Day	Month	Year				

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

S.A.L.

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. 2569338 Rank Pte. Surname M O O R E
(Given name in full) David Lewis

Unit or Corps I.D.D. Birthplace Belle River Ont.

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

1. **GENERAL DESCRIPTION:**

Physique fair Weight 129 lbs. Height 5 ft. 8½ in. Colour of Eyes brown

Nutrition fair

Pulse 76

Condition of arteries normal

Vision Rt. 20/20 Left. 20/20

Hearing (conversational voice) Rt. 21 ft.

Left. 21 ft.

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

Opinion as to general health and physical condition Good condition Cat. A

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 disability due to service.

(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 .....26-2-19..... Signed A.E. Arnett 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 D.L. Moore

(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.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 2569338 (Rank) PRIVATE

Name (in full) MOORE, David Lewis enlisted in

the 3rd CANADIAN RAILWAY TROOPS, C.O.M.F.

CANADIAN EXPEDITIONARY FORCE at WINDSOR, ONT. on the SEVENTH

day of JULY, 1917

HE served in FRANCE (With 3rd CANADIAN RAILWAY TROOPS)

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	21	Marks or Scars	
Height	5 - 8		
Complexion	FAIR		NIL
Eyes	BROWN		
Hair	BROWN		

Signature of Soldier

DISCHARGE SECTION
MAR 1 1919
No. 1 District Depot

Date of Discharge

J. Speyer.
Issuing Officer

Capt.
Rank

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

Signed at LONDON, ONT this FIRST day of MARCH 19

in Military District No. ONE

File Reference No. IDD-10-H-665
ID-30-H-2094

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

Duplicate

To be made out in duplicate. H.Q. 54-21-23-51

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...#1 Railway Construction Draft, #1

(2) Regimental Number 2569338

(3) Full Name of Soldier..... David Lewis MOORE

(4) Place of Birth..... Belle River, Ontario.

(5) Are you married, or not ? ..... No

(6) If married, state,
(a) Full name of your wife..... Not applicable

(b) Present Postal Address.....

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

(8) Have you any children ? ..... Not applicable

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

Also their names and ages.....

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ?..... No. .....

If so, state name and address .....

(10) Is your Mother alive ?..... Yes .....

If so, state name and address... Mrs. Callie Ann Moore, Florence, ~~Mx~~ Ala. 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.

..... $45.00 per month .....

.....

(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.

..... Not applicable .....

.....

.....

(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.

C. C. Pauch Lieut.
Officer Commanding.

Date..... July 21.1917. ..... O.C. #1 Railway Construction Draft, C.E.F.

2569338

157377

D. L. Moore

20

Perforated sheet for Will from Pay Book of Reg.

No. 2569338

Name David Lewis Moore

Unit 3rd C.R.T.

Military Will

In the event of my death I give the whole of my property and effects to my mother

Mrs. C. A. Moore

Florence, Alabama

Rsa

Signature D. L. Moore

Rank and Regt. Private 3rd C.R.T.

Date Oct 1st 1917

Witness A.H. Battle
Pvt.

L.L. 19226—M. & D. 7814.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
25m—4-17.
H. Q. 1772-39-819.

To Whom Mrs Callie A. Moore

Address Florence.
Alabama.
U.S.A.

Rate $1.00

AUG 1 1917

By Whom Assigned Moore D L.

Regtl. No. 2569338

Rank Pte

Corps Ry. Con. Opt. No 1.

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 6 ACCOUNT

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
50m.—6-16.
1772—39—819.

Sheet No. 2. Mrs Callie A. Moore

L. L. Job 4503. – Req. 6332.

PAYMENTS. Name of Soldier. Moore D L.

Pte, 2569338. Ryl Can, Dft. No 1.

AUG 1 1917

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.		B39352	15	2
Sept.		X41744	15	2
Oct.		4U216	15	
Nov.		T5/073	15	
Dec.		R 59902	15	75.00 N.D.
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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

O.K. B of R. 7-7-17

L. L. Job 23216—M. & D. 8049.

MILITIA AND DEFENCE

M. F. W. 11.
15m.—6-17.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Mrs Callie a Moore

Address Florence
Alabama
U.S.A.

Relation to Soldier wife, child or mother } Mother

Name of Soldier Moore. David Lewis

Regtl. No. 2569338

Rank Pte

Corps #1 Ry Const Draft.

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

OK BofR 7-2-17

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
5 m. 6-16.
1772—39—818.

Sheet No. 2.

L. L. Job 4503. Req. 6832.

Name of Soldier Moore - David Lewis

Mrs Callie A Moore — Mother — Pte — 2569338. — #1 R. Forest Rgt.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.		A 11484	56	56 R mailed 29/9/17
Oct.		C 23165	20	R
Nov.	24830	~~24809~~	20	B 24829 Cancelled
Dec.		L 29177	20	N 116th H.D.
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: Single

PLACE OF BIRTH: Belle River, Ontario

NAME AND ADDRESS OF NEXT OF KIN: Mrs Callie A. Moore,
Florence, Ala. U.S.A.

RELATIONSHIP OF NEXT OF KIN: Mother

NAME AND ADDRESS OF NEXT OF KIN:

RELATIONSHIP OF NEXT OF KIN:

SEPARATION ALLOWANCE MONTHLY $ 20.00 EFFECTIVE (DATE) 7-7-17

PAYABLE TO: Mrs Callie A. Moore
Florence, Alabama, U.S.A.

RELATIONSHIP OF DEPENDANT: Mother

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 2569338 RANK: Sapper NAME: Moore — David Ferris

IF IN PERMT. CORPS WHAT UNIT: UNIT: Draft #1 C.R.T.

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION: Windsor, Ont.

DATE OF ATTESTATION: 7-7-17

TRANSFERRED TO	CRTD	DATE	1/9/17	AUTHORITY
TRANSFERRED TO	3 CRT	DATE	1/11/17	AUTHORITY Nom Roll
TRANSFERRED TO		DATE		AUTHORITY
TRANSFERRED TO		DATE		AUTHORITY

ASSIGNED PAY MONTHLY $ 15.00 DATE EFFECTIVE ~~Aug~~ Sept. 1-17

PAYABLE TO: Mrs Callie A. Moore, Florence, Ala. 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)

C

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
																															24 10				Bal from Canada
																													12 70				
Sept 30	1 10		33 —												33 —												15		15	42 10				

MONTH 1917	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER-RED. PAY	SEP. ALLCE. ENG.
	Bal. ~~42 10~~			AR 750 CRTD 10/9/17	1947			15	42 10		
Oct	P.P.	34 10			1947			15	41 73		
		34 10									
Nov.	"	33		AR 1360 20/10/17 3 CRT.	803						
Dec	"	34 10		DN AR 686 29/8/17 CRTD	243						
								15			
				AR 1507 15/11/17 3 CRT.	1695						
				DN AR 854 - 29/8/17 CRTD	487						
		67 10			3228			15 30	46 55		
Mar											

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER-RED. PAY	SEP. ALLCE. ENG.
	Bal.			Bal Forw. from 31/12/17					46 55		
Jan	P.P.	34 10				~~75~~		15			
				AR 1636 20/12/17 3 CRT	803				57 62		
		34 10			803			15			
Feb	P.P.	30 80						15	7342		
		30 80						15			
Mar	P.P.	34 10		— 2100 20/2/18 —	803						
				C.A.P.				15			
				AR 2345 20/3/18 3 CRT	803				7646		
		34 10			1606			15			

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
	No. OF DAYS	RATE	AMOUNT $	AMOUNT C.	No. OF DAYS	RATE	AMOUNT $	AMOUNT C.	No. OF DAYS	RATE	AMOUNT $	AMOUNT C.				1 No.	1 DATE	2 No.	2 DATE	3 No.	3 DATE	4 No.	4 DATE	1	2	3	4				CREDIT	DEBIT			
MONTH PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER RED PAY																									
MONTH PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER RED PAY																									

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:- 1-9-17		EFFECTIVE DATE:-	
AMOUNT:- 15[00]		AMOUNT:-	

NAME:- MOORE David Lewis
NUMBER:- 256338

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Sapper

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.

Mother
Mrs Callie A Moore
Florence Ala USA
Stopped off 1/2/19

Boston 1828 14/1
MD 1 Rhyl

UNIT AND TRANSFERS

ORIGINAL UNIT:- Draft #1 CRT
DATE ACCOUNT FIRST OPENED:- 1-9-17

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			3 CRT

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
~~12/1/19~~ 2/58		BRA	~~£87~~				

DAILY RATES OF PAY AND ALLOWANCES

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

£1 1 9.01

PARTICULARS OF RENDERING NON-EFFECTIVE: Trans Lobanada. WR 1828 Boston 16/1/19 Rhyl MD 1 Ledg Bal £1 0 Rel 11 4 14

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
March	Balance Fwd								76 46		
Apl	P P.	33		AR 219 20/4/18 3 CRT.	8 03						
				cap				15	86 43		
		33			8 03			15			
May		34 10		cap				15			
				HH 6. 20/5/18 r (9)	8 03				97 50		
		34 10			8 03			15			
June	PP	33		cap				15	115 50		
		33						15			
July	r	34 16		CHP				15	134 60		
		34 10						15			
Aug	r	34 10		cap				15			
				1198 15/8/18 r 9	8 03				145 67		
		34 10			8 03			10			
Sept	✓	33		CAP.				15			
				1391 20/9 ✓ 10	8 03				155 64		Discharged
		33			8 03			15			
Oct	✓	34 10		CAP.				15	144 34		
				1526 9/10 ✓ 2	111 93				62 81		
		34 10			111 93			15			
Nov	✓	33		CAP.				15	80 81		
Dec	✓	34 10		CAP				15	99 91		
Jan	✓	34 10		"				15	119 01		
		101 20						45			
				2458 17/1 BRA 28	4 87						
				133 27/1 K Clark 43	9 73				104 41		
					14 60						

Transferred to Ledger
Dranaan

S.O.S. 29/1/19 Rhyl 6d

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION

6 6

War Service Badge
Class A No. 245052 Issued

This space to be for numbers

Proceedings on Discharge.

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

No.	2569338
Rank	PRIVATE
Surname	MOORE, David Lewis
Christian Name	
Corps (Squadron, Battery or Company)	3rd CANADIAN RAILWAY TROOPS, C.O.M.F.
Date of Discharge	MAR 1 1919 D059 28/2/19
Place of Discharge	LONDON, ONT.

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

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age	21 years ..... months.
Height	5 feet 8 inches.
Complexion	FAIR
Eyes	BROWN
Hair	BROWN
Trade	Laborer
Intended place of residence (To be given as fully as practicable.)	Florence, Alabama, U.S.A.

Descriptive Marks

NIL

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.)

M. F. B. 218.

100M.—1-17.
H. Q. 1772-39-113.

(OVER)

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

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

6. Medals and Decorations.....

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

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

(Place).....

(Date).....

.....

Commanding .....

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

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

(Place) LONDON, ONT. ..... *(Signature of Soldier.)*

(Date) MAR 1 1919 ..... *(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) MAR 1 1919

(Signature) .....

for 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.)

H. Moore

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263.	Attestation Paper, Militia Form B. 235.
Squadron / Battery / Company } Conduct Sheet, " B. 263a.	Proceedings on Discharge " B. 218.
Copies of Convictions, by C. P. in MS.	In the case of recruits who are rejected on final approval, the discharge documents will consist of
Med. Hist. Sheet, Militia Form B. 313	*(a)* Proceedings on Discharge.
Medical Report for Invalid* " B. 227.	*(b)* Attestation.
Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.	*(c)* Medical History Sheet (in the event of such having been prepared.)
*Only if discharged "Medically unfit."	

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.

Date of Enlistment

7-7-17

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

M1 18549

Date of Assignment

Aug 1-17

RATE OF SEPARATION ALLOWANCE

20		30.00	

$25.00 1-12-17 P.O. 3267

4/9/18 Pe2753 M040674

RATE OF ASSIGNMENT

15			

PARTICULARS OF SEPARATION ALLOWANCE

No. 2569338

Rank Pte Promoted Reverted Discharge

Soldier's Name David Lewis Moore

Battalion No 1 Pay Const Dft

Beneficiary Mrs Callie A Moore

Relationship Mother M.S.W. 2-5-4-24 2/18 OK

Address Florence, Alabama. U. S. A

PARTICULARS OF ASSIGNMENT

Name Mrs Callie A. Moore

Address Florence Ala USA

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	+	013053-D-7	REMARKS
1917 Dec. 31	—	116	75	191			
Jan	H6 3231	30	15	45	✓		
Feb	V75195	25	15	40	✓		
Mar	N 91089	25	15	40	✓		
Apr	N 9083	25	15	40	✓		
May	R 16275	25	15	40	✓		
June	Z 13686	25	15	40	✓		
July	Z 24985	25	15	40	✓		
Aug	Z 37489	25	15	40	✓		
Sept	Z 51332	25	15	40	✓		
Oct	Z 66145	25	15	40	✓		
Nov	Z 80723	25	15	40	✓		
Dec	Z 90903	45	15	60	✓		
1919 Jan	Z 111354	30	15	45	✓		
Feb	Z 124596	30	15	45	✓		
		501	285				

A/c Closed 28-2-19

Ret'd per ..... Baltic

Date 6/2/19 M.F.W. 187 11/2/19

Clerk ..... Collins

M. D. #1

Clearing # 5-8999 J.U.D.

M. F. W. 128.
4'Om. 6-17—1772-38-1144.
L. L. 22320—M. & D. 1893.

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

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.

2557

10-Mo-93

102

AUDITOR | PAYMASTER

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

M. OR S. S. | REGT. No. 2569338 | RANK Spr | NAME (IN FULL) MOORE, David Lewis (BLOCK LETTERS, SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Yes 30.00 | DATE EFFECTIVE Paid to 28-2-19

TO WHOM PAID Mrs Eaille A. Moore | RELATIONSHIP Mother

ADDRESS Florence Ala. U.S.A.

1.00 .10

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. C.R.D. | IF IN P.F. WHAT UNIT? Florence, Ont.

PLACE OF ATTESTATION | TRANSFERRED TO D.D.A. | DATE 29/4/19 | AUTHORITY D050

DATE OF ATTESTATION 7-7-17 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ 15.00 | DATE EFFECTIVE Paid to 28-2-19

PAYABLE TO ~~15~~ | RELATIONSHIP Mother | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Same as S.A.

STOP PAYMENT FORM ASSIGNED PAY RENDERED. DATE | EFFECTIVE

DISCHARGED PLACE London | DATE 1/3/19 | REASON Dem | AUTHORITY D059 | IF ENTITLED TO POST DISCHARGE PAY Yes

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.	PARTICULARS OR REMARKS
Balance from previous account																																				
E.&O.E.	31-1-19						114	14															15	00			9 73									Rimmel
																											4 87								Boat.
																											5 00								Yoce
1-2-19	1 3/19	29	10	3	90	35 00																	26	07			50 00								Subs 8 3/19 - 27 3/19 D050
						16	29	54	112	44			2608	1/3/19			111	94	50												172	44				
						1			1														1								1					
122 days	1-3-19		280		120		400										70		30				100		210		90								#3092-3
	1-4/19		210		90		300										70		30						140		60								1/4/19 - 6675-6
																	70		30						70		30								1/5/19 - 75919-20
																	70		30						0		0								2-6-19 D87010-1
							400	00									280		120				400	00											

WAR SERVICE GRATUITY

R. Gibson Capt.

Major

60m.-11-18. L. L. 51777. M. & D. 9585.

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.	