4.21114.

ATTESTATION PAPER

No. 421014

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

1. What is your name? William Moore
2. In what Town, Township, or Parish, and in what Country were you born? County Antrim, Ireland
3. What is the name of your next-of-kin? Mother, Mrs William Moore
4. What is the address of your next-of-kin? Ballyno, Antrim, County Antrim, Ireland.
5. What is the date of your birth? 6th. February, 1893.
6. What is your trade or calling? Night Watchman
7. Are you married? No.
8. Are you willing to be vaccinated or re-vaccinated? 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.

W. Moore (Signature of Man.)

agstall (Signature of Witness.)

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DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, William Moore, do solemnly declare that the above answers made by me to the above questions 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.

W. Moore (Signature of Recruit.)

Date 27th. May, 191 5. agstall (Signature of Witness.)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, William 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.

W. Moore (Signature of Recruit.)

Date 27th. May, 191 5. agstall (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 Winnipeg this 27th. day of May, 191 5.

(Signature of Justice.)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

Lieut. Colone (Approving Officer.)

COMD'G. 43rd. BATT., C. E. F.

M. F. W. 23.
200 M.—3-15.
H.Q. 1772-89-841.

DESCRIPTION OF William Moore ON ENLISTMENT.

Apparent Age 22 years 3 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 10½ ins.

Chest measurement:
- Girth when fully expanded 38 ins.
- Range of expansion 36 ins.

Complexion Fresh

Eyes Brown

Hair Brown

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

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.)

Nil.

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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 27th. May, 1915.

Place Winnipeg, Man.

J. Swan 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

William 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.

Lieut. Colonel (Signature of Officer.)

Date 27th. May, 1915. COMD'G. 43rd. BATT., C. E. F.

REGIMENTAL DOCUMENTS

Sgt. NAME Moore Wm REGT. NO. 42,1014 UNIT Mach. G. B. H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
	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)				30260	
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)				30259	Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
1	MEDICAL EXAMINATION (M.F.W. 129)					Demobn.
1	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	SD3					47 — 21
1	R169					28 21
1	Casualty					7 21
1	A.F.B. 44					3
1	R122					
1	Hospital					
1	Paid					
1	Discharge					

I.D. number No. d'identification	Surname Nom de famille	Given names Prénoms
421 [redacted] 14	MOORE	WM.

NATIONAL PERSONNEL RECORDS CENTRE
CENTRE NATIONAL DES DOCUMENTS DU PERSONNEL

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location
Lieu 6339

"CONTENTS CONFIDENTIAL"
"CONTENU CONFIDENTIEL"

ARC – 1048 (86/06)

Form R. 149.

WILLIAM

Name MOORE Rank CPL. Reg. No. 421114

Unit 3 C M G Bn

Next of Kin MRS WILLIAM MOORE
BALLYNE
ANTRIM CO ANTRIM. IRELAND.

Date 1918		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List
11	5	16 C Hosp Le Treport		Sick	A 215			1258.6
13	6	3 Con Dep. Le Treport		- Rheum. Legs	A 242			1976.7
31	7	Discharged to Duty		"	A 283			2995.4

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

R. 149.

Name MOORE, William *Rank* Pte. *Reg. No.* 421114

Unit 3rd Can. Div, M.G.C. (9)

Next of Kin W. Moore. Ballyni, Antrim, Co. Antrim, Ireland

1916 Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
27-9	7 CFA		Tonsilitis	A105		
30-9	Rejd. Unit		do	A116		

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

NAME Moore William I 3 M M (Over.)

RANK & No. Pte. SOS Dis 28-3-19 2/31 430-3-7-19 Demob DO 940 4-4-19 #2111 4

CORPS 17th 43rd Battalion (M.G.S.) Base Company. #2190

ENLISTMENT, PLACE Winnipeg DATE May 27. 1915 S.

FORMER CORPS Nil.

COUNTRY OF BIRTH Ireland County Antrim.

NEXT OF KIN Moore Mrs William (Mother.)

ADDRESS OF NEXT OF KIN Ballyne, Antrim, Co Antrim Ireland.

DISCHARGE, PLACE DATE

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Sailed from Montreal per S.S Grampian 1-6-15

RIC. 24/3/19 2/70/2 Sqt.

REMARKS:

Shown in Machine Gun Section 17th Batt. transferred from 43rd. Auth. Part II O. No. 1861 Shorncliffe 15/8/15.

NAME Moore W.

H. Q. FILE No. 649-

REGT'L. No. 421114

RANK AND CORPS Pte 43rd

CABLE

No.	DATE

NATURE OF CASUALTY

NO. 1689

FOLL. X

L. L. Job 83225—M. & D. 5842.

M. F. W. 42—50m 7-15.
H. Q. 1772—39-893.

M G Corps.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
46	Lieut. St. Martins. Pl. Shoreditch	18-10-15	Gonorrhoea.
50	Trans. Nol. Eastern Gen Cambridge	26-10-15	Gonorrhoea.
113 (1)	No1 E. Gen., Cambridge	18-11-15	Discharged (V.D.G)
a 105	No 7 Can. Fld Amb.	27-9-16	Tonsilitis (3rd Can. Div. M. G. Co.)
A 116 2	Reported from Base	30-9-16	" (Rej. unit)
a 215 2	16 Gen., Le Treport	11-5-18	Boils
a 242 2	No 3 Com. Dep. Le Treport	13-6-18	Boils Buttock. Legs.
a 283 (1)	Discharged	31-7-18	" " "

B

Number 421114 Rank Sgt.

Surname MOORE

Christian Name William

Units 43rd Bn. Lond. Inf. Theatre of War France

Date of Service 20.2.16

Remarks

Latest Address 4.7.6 Simcoe St. Winnipeg Man.

Roll No. B. Page 7750

DESP OCT 20 1921
REGN. NO. YA 49938

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
Moore	W.	Y 21114

Rank	Unit	Co.	Troop	Batty.
~~Lt~~ Cpl.	Y 3rd Bn	3 M. Gun Co.		

Hospital — Date of Admission

Transferred to York Ab Mortimer, Hosp. 18.10.15.
No 1 Eastern Gen Cambridge Hosp. 26.10.15
Hosp. 16.11.15.
Tran Z amb. Hosp. 27.9.16.

Diagnosis: Gonorrhoea

Later Diagnosis (if changed) (1) Tonsilitis.
(2)
(3) Boils. on Buttock. Leg S. Row.

Additional Diagnoses: if more than one state present

DISPOSITION

Dis — Date 18.11.16.
Rej. Unit — 30.9.16

REMARKS: Rep. from Base D.to. 31-7-18

L. 30.10.15.
L. 8.11.15 80
" 13.3.16 B113.
21.10.16. A105.
8.11.16 A116
17.5.18 @ 215 (2)
18.6.18 a 242.2
6-8-18 a 283

A.M.D. 2 Dept.
Boh. of D.G.M.S. O.M.F.C. London

RW.

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	16. Y. Le Treport.	11-5-18.
	3 Can. Depot. Le Treport.	13-6-18
2.		
3.		
4		
5.		
6.		
7.		

DEPARTMENT OF VETERANS AFFAIRS

TO CHIEF CENTRAL REGISTRY,
HEAD OFFICE.
Attention of

Date 26-3-70.

NAME
MOORE, William

SERVICE NUMBER 421114

C.P.C. No. NIL
W.V.A. No. NIL

NAVY
ARMY 4
R.C.A.F.

The DEPARTMENT has received information from

WINNIPEG CITY POLICE

(State authority and source of information of death)

RECEIVED MAR 31 1970 Central Registry HEAD OFFICE OTTAWA

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death 23-3-70.
Cause of Death N/K
Place of Death WINNIPEG, MANITOBA.

Name and Address of next of kin (if known) N/K

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

Destroy form if advice of death already received.

K.A. Fowell.
for
Chief, Central Registry

DVA 24

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps .....

Regimental No. 421114 Rank Sgt C. E. F. Name MOORE William

Enlisted (*a*) ..... Terms of Service (*a*) ..... 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				
9-8-19	3rd C.M.R.D.	Awarded M.M. Auth. L.G. 31430	Witley	3-7-19	A.O. # 8

(*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				

CANADIAN EXPEDITIONARY FORCE

War Service Badge Class "A" No. 151786

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 42104 (Rank) Sgt.

Name (in full) Moore William enlisted in

the 43rd Batt.

CANADIAN EXPEDITIONARY FORCE at Winnipeg on the 27th

day of May 1916

HE served in 2nd Canadian Machine Gun Corps.

and is now discharged from the service by reason of Demobilization.
~~Medical Unfitness.~~

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

Age 26 Yrs.

Height 5 ft 10½ ins

Complexion Fresh.

Eyes Brown

Hair Brown

Marks or Scars

2 vacc marks
left arm

W Moore
Signature of Soldier

Date of Discharge

No. 2 DISTRICT DEPOT
MAR 29 1919
TORONTO

[signature]
Issuing Officer
For
O.C. No. 2 District Depot.
Rank

Date MAR 29 1919 19

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

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

DISCHARGE CERTIFICATE

CANADIAN EXPEDITIONARY FORCE

THIS IS TO CERTIFY that No. (Rank)

Name (in full) enlisted in

the on the

CANADIAN EXPEDITIONARY FORCE at

Age 21 on

He served in

and is now discharged from the service by reason of Medical Inspector

Demobilization

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

Age	Marks or Scars
Height	
Complexion	
Eyes	
Hair	

Signature of Soldier

Date of Discharge

Date

Rank

Name Officer

To

A.F.C. No. 3 District Depot.

TORONTO

MAR 3 0 1919

DISTRICT DEPOT

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.

SHEET N2.

Army Form B. 103. Regimental Number 42114

War Service Badge
Class "A" No.

Casualty Form—Active Service.

Regiment or Corps C M G C

Rank CORPORAL Surname MOORE Christian Name WILLIAM

Religion Age on Enlistment years months

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

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

Extended Re-engaged Qualification (b)

or Corps Trade and Rate

Occupation Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		War Service Badge Class "A" No. Embarked ... Disembarked...			
13-6-18	16 Gen Hosp	Boils Buttocks trans	3 Con depot	13-6-18	WS 3034 - F 7387
31-7-18	3 Con depot	Boils Buttocks & legs trans	Base depot	31-7-18	WS 3034 - G 6004
4-8-18	M G C Bs	arrives from Con depot	M G C Bs	31-7-18	NR 304.
11-8-18	Do	left Base for unit	(3 miles)	11-8-18	NR 306
17-8-18	Offc unit	Reports unit from Base	✓	17-8-18	B 213.
11-9-18	offc unit	Promoted Sergeant & Completes 8st	(3 miles)	1-5-18	NR 18/17703 B.C.O. 106/1918.
16-11-18	do	Granted leave of absence	16.11.18 to	29.11.18	B213 Pte D.J 431/1918
7-12-18	do	Rejoined unit from leave	Field	2.12.18	B213
15-2-19	Clearing	Proceeded To England		15-2-19	8/16/1919

Lieut for Canadian

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) Signaller, Shoeing-Smith, &c.

(6356) Wt. W1 89 300,000 5/18 M&A & W Ltd. Form B/103 (E. 3109)

P.T.O.

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Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks. Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
15-3-19		S.O.S. on Proceeding to Canada A Lieut			
		M/FXEDI SIE OLYMPIC SOUTHAMPTON 17-3-19			
		R. Blandford Capt. Staff Adjutant, No. 8 Trans-Atlantic Conducting			
MAR 1 7 1919	O. S.	T. O. S. No. 2 DISTRICT DEPOT, TORONTO	1919	PART II D. O. 94	
MAR 19 1919	S. O. S.	(DISCHARGED FROM H. M. S.) No. 2 DIS. DEPOT, PART II D. O. 94			
29		R W Hind Lieut For O. C. No. 2 District Depot			

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 43rd Bn.

Regimental No. 421114 Rank Sgt. C. E. F. Name Moore William

Enlisted (*a*) ..... Terms of Service (*a*) ..... 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				
9.8.19.	3 Cm Gc.	Awd. M. M. Auth. L.G. 31430 d. 13.7.19.			G.O.8.

For D. of R.

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(*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				

(9178)—Wt. W12165—2146.—1,250,000.—2-15.—C. & G. Forms B. 103/1.

Army Form B. 103.

CERTIFIED CORRECT.
Canadian Record Office,
Westminster House,
7, Millbank, S.W.

Casualty Form—Active Service.

War Service Badge
Class "A" No. ____ Regiment or Corps 43rd Battn. C.E.F.

Regimental No. 22114 Rank Pte. Name Moore W.

Enlisted (*a*) 26/5/15 Terms of Service (*a*) Mobilization Service reckons from (*a*) 26.5.15.

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 for Overseas Service with 43rd Battn. 20/2/16.			Ajt. 43rd. Bn. C.E.F., C.H. of C.
			EMBARKED FOR FRANCE.	20 2 16	13144 Cy. 1844 g.m.42
13-7-16	G.O.C. 9th.C.I.B.	Transferred to 9th.Cdn.Bde Machine Gun Coy.		15-4-16	4/37, Cdn.Sec.3rd.Ech.ref. C.R.5592, Pt.II 20 d/21-7-16.

(*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.

42111 Pte. Moore. W.

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.
13.7.16.	A.A.G. C. section	Taken on strength of 9th Bde Sig. Coy.	Field.	16.4.16	File 5592. P.C.O 14.21.7.16.
30.9.16	7 C.C.S.	Tonsilitis adm	7 C.C.S.	27.9.16	A36 DCS 63 d/17.9.16
2-10-16	Army Res R.S.	Tonsilitis Adm	Army Res R.S.	27-9-16	A 36 DCS. 68 d/3-11-16
		Do	Duty	30-9-16	
6-11-16	Yeomanry	Rejoined Unit	Field	2-10-16	Letter. Kg m/s/807 DCS. 73 d/13 11/16
22-7-17	Ob unit	Proc. to 1st army R. camp	Field	18-7-17	B213 Bde A 18 s/30-7-17
5-8-17	Do	Rejoined unit from R. camp		1-8-17	B213 Bde A 18 s/18-8-17
24.11.17	Do	Granted leave of absence	from 24.11.17 to 8.12.17		B.213 Pt I s/188 d/6-12-17
15-12-17	Do	Rejoined unit from Leave	Field	11-12-17	B213 P.C.O. 196 d/24.12.17
2-2-18	Do	Att'd 6th Corps Gas School	✓	27-1-18	B213
9-2-18	Do	Rejoined unit from Commons	Field	2-2-18	B213
16-4-17	A.G. 4th Army	Ordered to leave Mg Corps and posted to 9th Bde Sig Coy	—	1-3-18	A/G 8 Kw K24 s/3 P.C.O. 31 d/15-3-18.
14-3-18	A.G. 4th Army Rear Corps	Absorbed into 3rd Batt'n Can Mach Gun Corps	Field	14-3-18	B213 90-86 P.C.O. 40 d/13 4/18.
20-4-18	Ob unit-	Promoted Corporal to complete Est	✓	14-3-18	B213 P.C.O. 48 d/20 5/18
11-5-18	Do	Adm to Hosp (SICK)	—	6-5-18	B213.
7-5-18	8 6 7 W	Furunculosis Thighs Buttocks from unit	8 6 7 W	6-5-18	A36 - F. 1458
11-5-18	4 20 6 S	Furunculosis Buttocks Thighs from unit	4 20 6 S T.F. 37	6-5-18 10-5-18	A36 - F. 1453.
11-5-18	16 Gen Hosp	Boils from	16 Gen Hosp	14-5-18	W3034 - F. 1434.
13-6-18	3 Gen Hosp	Boils Butt Thighs from	3 Gen Hosp	13-6-18	W3034 - F 6955

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R—122.

Rank

Name MOORE William

Reg'l No. ~~A~~421114

Unit 43rd BN.

If in perm. Corps, What Unit?

Married or Single Single.

Place and Date of Enlistment Winnipeg.Man.27th May.1915

Place of Birth Antrim.Ireland.

Name and Address, Next-of-Kin Mrs William Moore, Ballyne, Antrim,Co.Antrim.Ireland.

Relationship Mother

Assigned Pay Monthly $

Payable to

Relationship

Separation Allowance $

Payable to

Relationship

Sgt.

60142

File H.L.

Dategor OR CAN

Discharge, Date and Place

Reason

Character

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		10.6.15	
18.10.15	O.C. 43rd	Admtd. Temp. Tent Hosp.	Shorncliffe	18.10.15	Pt II 6 # 34 Tas Lt 46
8.11.15	O.C. 43rd	Trans to 1 E.G. Hospt	Cambridge	26.10.15	C L # 50
19.11.15	O.C. 43rd	Discha from Hospt	"	18.11.15	C L B 113. Pt II 6 # 58
20.12.15	Do	Hqrs Pay 4 Days	Shorncliffe	20.12.15	Gt II 081
		Embarked for France.		20.2.16.	H.R.
21.7.16	D°	Trans to 9th Can Bde M G C°	Field.	15.4.16	Pt II 020.
21.7.16	O/C Depot 9th C	Taken on Strength 9th C	"	16.4.16	" 14
21.10.16	"	Admn 7 Can Field Amb	"	-	CL.A105- Jonsellis
8.11.16	"	Rep: from base rejoined unit	"	-	A 116. "

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#21114. Moore W.

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
		On Strength 3rd Bn. C M G Corps 19-3-1918			
2-5-18.	3rd Bn. C.M.G.C.	Promoted Corpl.	Pte Field,	19-3-18	Pte to Cpl.
15-3-18	3rd Div. M.G. Coys.	27 Jol. to M.G. Cps.	" do.	1-3-18	Pte to 31.
16-4-18	3rd Bn C.M.G.C.	Promoted Sergeant	Cpl. do	1-5-18	— 106
9.8.19.	3 " "	Awd. M. M. Auth.	Lond. 31430	8-1-19	d/ 3.7.19. a.d. 8. Pte 2.19
		3Bn-CMGC Proc To England			
		Saiſing No.41, date 17.3.19 dispersal area I			
17-3-19	30 M.G.C.	S.O.L. to Capt. disp Dft 10031 S.S. Olympic	Sgt B'Shott	17-3-19	Pte to 24

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C.A.D.C. 5009 A

No 3 Dep.

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) MOORE, W.

REGIMENT 3rd Bn. R.G.C. RANK Sgt. No. 431114

Date of Examination in England _____ Date of Examination in France 16/1/19.

DIRECTIONS TO DENTAL OFFICERS

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

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 31.
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? no

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

(*a*) In Canada
(*b*) In England } no
(*c*) In France

Signature of Dental Officer J.S.T. Marlatt
Capt.

ORIGINAL.

A 21114

MEDICAL HISTORY SHEET.

Surname Moore Christian Name William

Examined on 27th day of May 1915 at Winnipeg

Birthplace City or Town County Aubrin County Ireland.

Apparent age 22 3/12

Trade or occupation Night Watchman

Height 5 Feet 10½ Inches.

Weight 175 Lbs.

Chest measurement Minimum 36 inches. Maximum expansion 2 inches.

Physical development Medium

Small-Pox Marks None

Vaccination Marks Arm Right. — Left. 2. Number 2

When Vaccinated last Infancy

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection Small birthmark on left shoulder blade

Approved by

A Griffin

Rank Capt Can. A.M.C.

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.
2/7/15	Pos	M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
11/7/15	Pos.	M.O.
15/7/15		M.O.
		M.O.

Enlisted on 27th day of May 1915 at Winn

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	43rd Batt C.E.F.	A 21114		
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.

100M.—1-15.
H. Q. 1772-39-439.

Surname Moore Christian Name William

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
Cent Hospital Rochdale Shoreclife		18	10	15	26	10	15	Gonorrhoea	8	Trans to Cambridge	Swaebtw Capt
		26	10	15	18	11	15	G on 20	24	apparently cured.	A Cookson Capt
7th C.F.A.		27	9	16	30	9	16	Tonsilitis	4	Rejoined unit	A105-116 WW

Duplicate Medical History Sheet posted to here. Medical History Sheet posted to hosp. Medical Register Record Office.

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. 42 1114 Rank Sgt. Surname MOORE
(Given name in full) William
Unit or Corps 3rd. Batt'n. Canadian Machine Gun Corps. Birthplace Ireland

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

1. GENERAL DESCRIPTION: Est Est

Physique Good Weight 175 lbs. Height 5 ft. 11 in. Colour of Eyes Blue

Nutrition Good

Pulse 96 Regular

Condition of arteries Soft

Vision Rt. 6/12+ Left. 6/12+

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

Identification marks, scars, or deformities. (Give cause and date of origin.)
2 vaccination marks left arm

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 Yes. Respiratory System No.

Disturbance of mentality No. Muscular System No. Digestive System No.

Osseous and Joint System No. Any other general condition Yes.

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.

Gonorrhea 18-10-15 to 26-10-15
Tonsilitis 27-9-16 to 30-9-16
Pneumonia 11-5-18 to 31-7-18

No disability

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

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Brauxholt (Overseas)

Date 23-2-19 Signed J. P. Dickson 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 .....

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

THIS SECTION FOR USE IN CANADA—

Examined at ..... (Canada)

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 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.

4 27 1) W 11878—2111 25,000 2/15 H W V(R 72/5) Forms/I. 1244/4
5607—2n20 35,000 7/15

BARNWELL MILITARY HOSPITAL
Ref. No. C.361.
Cambridge
CAMBS.

Army Form I. 1244.

GONORRHŒA CASE-SHEET.

Regtl. No. 421114. Rank and Name Pte. Moore. W.m Corps 43rd Battn.

Whether a fresh infection or relapse } Fresh: Date of last discharge from hospital for Gonorrhœa, if previously admitted } —

Probable date of infection Oct. 7th. Folkestone. Date of admission 26-10-15. I.P. 7-8 days: Date of discharge Nov 18

STATE ON ADMISSION.

Discharge (character of) V. scanty discharge.

Gonococci (present or absent, numerous or otherwise) —

Urine (character of) —

Whether Anterior or Posterior urethritis ant.

Complications nil

first attack of Gon. 20

PROGRESS.

Date	Discharge	Gonococci	Urine	Complications	Treatment
Oct. 27th	scant	—	—	—	{ ant. irrigations:- mist. alb:-
Nov. 1st	by 4 days	—	—	—	
Nov. 4th	by.				
" 8th	by				Urine test-ed
" 11	by	—	—	—	
	Nov. 11th.	by 14 days: No G.C.'s Rec: absolutely clear:- Discharged			Discharge. Nov. 15th. 1915.

A Cookson.

PROGRESS—continued.

Date	Discharge	Gonococci	Urine	Complications	Treatment

A—305

6.

MILITIA AND DEFENCE

9776. A89

17763

ASSIGNED PAY.

To whom Mrs. Annie Moore.,

Address Ballynoe,

Antrim,

Ireland.

Rate $15.00 per month.

Date to Commence 1st March 1916.

By whom assigned Moore., W.

Regtl. No. 421114.

Rank Private.

Corps, &c. 43rd Battalion.

PAYMENTS.

Month		Year	Cheque No.	Amt.		REMARKS
Aug.	Jan.	1916				
Sept.	Feb.					
Oct.	March		143381	15		
Nov.	Apl.		136356	15		
Dec.	May		39211	15		
Jan.	June	~~1916~~	415245	15		
Feb.	July		105245	15		
March	Aug.		137279	15		
Apl.	Sept.		170485	15		
May	Oct.		208925	15		
June	Nov.	1352	246161	15		
July	Dec.		286764	15		
Aug.	Jan.	1917	331450	15		
Sept.	Feb.		370483	15		
Oct.	March		416311	15		Asst Pay Checked Found Correct W Anderson
Nov.	Apl.			195		
Dec.	May					
Jan.	June	1917				
Feb.	July					
March	Aug.					

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Rank Pte Name MOORE William Reg'l No. 4/21114

Unit 43rd Bn. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Winnipeg. Man. 27th May. 1915 Place of Birth Antrim. Ireland.

Name and Address, Next-of-Kin Mrs William Moore, Ballyne, Antrim, Co. Antrim. Ireland.

Relationship Mother

Assigned Pay Monthly $ ~~20~~ 15.00 off 1/3/16 Payable to Mrs Annie Moore, above address

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
July 1	July 31	31	1-	31	31	.10	3 10	10 87	44 97			32 50			32 50	12 47	$10.87 Cr June
		Adjustment of Exchange						87	87							13 34	
																13 34	
Aug 1	31	31	1	31	31	.10	3 10		34 10			29 20			29 20	18 24	
Sept 1	30	30	"	30	30	"	3 .		33 .			46 24			46 24	5 .	
Oct 1	31	31	"	31	31	"	3 10		~~34~~ 33 10			14 60			14 60	24 50	
Nov 1	30	30	"	30	30	"	3		~~57~~ 33 60			34 07			34 07	23 43	
Dec 1	31	31	"	31	31	"	3 10		34 10			31 63		4 40	36 03	21 50	
1916 Jan 1	31	31	"	31	31	"	3 10		34 10			19 47			19 47	36 13	
Feb 1	29	29	"	29	29	"	2 90		31 90			12 35			12 35	55 68	
Mar 1	31	31	"	31	31		3 10		34 10			5 23	15		20 23	69 55	a/c Effect 1/3/16
																	Trans To 9th Bdge
				275			27 50	11 74	314 24			225 29	15	4 40	244 69	69 55	M.G. Coy. 3/7/16

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						

MARRIED OR SINGLE S.

PLACE OF BIRTH Antrim Ireland

NAME AND ADDRESS OF NEXT OF KIN Mrs William. Moore.
Ballyne, Antrim, Co Antrim Ireland,

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

Cost Pay checked and found correct
W Anderson

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL
26.10.16	18.11.16	V	K 485

REG'L NO. 421114 RANK Pte NAME Moore. William. E

IF IN PERMT. CORPS WHAT UNIT — UNIT 43rd — TRANSFERRED TO 9th Bgde M.G.C. 3rd. DATE 6/7/16 AUTHORITY W020 21/9/16

PERMANENT FORCE ALLOWANCES — TRANSFERRED TO — DATE — AUTHORITY

PLACE OF ATTESTATION Winnipeg — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION May 27th 1915 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY MONTHLY $ 15 DATE EFFECTIVE Mar. 1/1916.

PAYABLE TO Mrs Annie Moore, Ballyne, Antrim, Co Antrim, Ireland, RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

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

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE	PAY NO. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT C.	FIELD ALLOWANCE NO. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT C.	WORKING OR SPECIAL PAY NO. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT C.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 NO	1 DATE	2 NO.	2 DATE	3 NO.	3 DATE	4 NO.	4 DATE	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
			275				27	50						11 74	314 24									225 29				15	4 40	244 69	69 55				E J
April																																			
1-30	30	1.00	30		30	10	3								33	164	13/4/16							261				15		17 61	84 94				
May																	m.g.c.																		
1-31	31		31		31		3 10								34 10	4							4 25				15		19 25	99 79				
June																																			
1-30	30		30		30		3								33													15		15	117 79				
July																																			
1-5	5		5		5		50								5 50													15		15	108 29				
June 6																23	22/6							6 81											
30	26		26		26		2 60								28 60	28	22/6							2 55						9 36	127 53				
Aug 31	31		31		31		3 10								34 10	41								2 62				15		17 62	144 01				
																60	3.9																		
Sept 1	30		30		30		3								33	54	19.8	69	16.9	520	6.8	60R		2 62	2 62	2 62		15	13 80	39 28	137 73				
Oct	31		31		31		3 10								33 10			96	18/10						5 23			15 00		20 23	151 60				
Nov	30		30		30		3								33					692	1/11					2 61		15		17 61	166 99		30 00		
																130	1/12							10 46											
Dec	31		31		31		3 10								34 10	104	14/11							2 62				15		28 08	173 01				
1917			55 00																																
Jan	31	1.00	34 10												34 10	167	4:1			ICR	7.12			2 61				15		118 43	88 68				
		10														154	20.12			755				3 49		97 33									
Feb	28		30 80												30 80	191	21-1			43rd Bn 891	20.1			2 61		2 62		15		20 23	99 25				
			669 90											11 74	681 64									271 16	7 85	105 18		180	18 20	582 39					

P.D. Oct 26 M.O. Nov 18. 1916.
Q KH 485.

421114 Pte Moore Wm Asst Pay 15.00 Eff. Nov. 1st 1916 Payable to Mrs Annie Moore Ballyne Antrim Co Antrim Ireland.

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
Jan			669	90										11 74	681 64									271 16	7 85	105 18		180	18 20	582 39	99 25				
Mar	31	1.10	34	10											34 10	200	17-2			1089 28-3 985 2-3				3 48 3 49				15		25 46	107 89		30 00		
Apr.	30	"	33	00											33 00							461600						15		15 00	125 89				
May	31	"	34	10											34 10							A12715						15		15 00	144 99				
June	30	"	33	00											33 00					209 29-5 185 12-5 117 21-4		27617				2 68 2 68 3 49		15		23 85	154 14		30 00		52 and 73 Bn. 52 and Bn 52 and Bn.
July	31		34	10											34 10							109982						15		15 00	173 24				
Aug	31		34	10											34 10					465 22-7		134306				17 84		15		15 00	192 34				
Sept	30		33	00											33 00	4	29-8			459 12-7 327 12-6		A205723		268		2 68 1 68		15		40 88	184 46				52 Bn. 73 Bn. 52 Bn.
			005	30										11 74	917 04									277 33	7 85	144 20		285	18 20	732 58	184 46				

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR3	DR.4	BALANCE	DEFER RED. PAY	SEP. ALLCE. ENG.
Jan		~~184 46~~							184 46		
Oct				a 222022			15				
Oct	9 Pay	34 10		528 15/8/17 - 4th mar	5 35						
				23 - 13/9/17 - 9th m.G.Co	2 67				195 54		
		34 10			8 02		15				
Nov.	1 Pay	33 00		B 61290 £3 - 1 - 8			15				
				B 85977			15				
				ak 39 9th M.G.C. 27/8/17	H H6						
				ak 57 " 13/10/17	3 87						
				ak 69 " 2/11/17	H H6						
				L & P 77494	24 33						
				ak 82 9 C.M.G.C. 21/11/17	13 H9				183 33		
Dec	P.P.	34 10			H9 31		30				
1918		67 10									
Jany	"	34 10		621518			15				
				ak 74 3rd Bde M.G.C. 18/12/17	H H6						
				ak FC 1478 9 M.G.C. 23/11/17	87 60						
				ak FC 1478 " 23/11/17	9 73						
				ak 395 52nd Bn	2 68						
		34 10			10H 47		15		97 96		
Feby	P.P.	30 80		L 89503			15				
				ak 78 3 Lab M.G. Bn	5/1/18 ✓ H H6						
				ak 169 "	26/1/18 ✓ 5 35						
				ak 737 "	5/2/18 ✓ 5 35				98 66		
		30 80			15 16		15				

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR3	DR.4	BALANCE	DEFER RED. PAY	SEP. ALLCE. ENG.
Mch.	P P	34 10		D 20288			15				
				ak 317 18/3/18 3 M G Bn	5 35						
				ak 399 10/3/18 "	5 35						
				ak 439 21/3/18 "	5 35				101 65	30	
		34 10			16 05		15				

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY * ENGLAND OR ~~CANADA~~.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.	NAME:- MOORE William K
EFFECTIVE DATE:- 1.3.16	EFFECTIVE DATE:-	NUMBER:- 421114
AMOUNT:- 15 00	AMOUNT:-	PARTICULARS OF RANK OR APPOINTMENT

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 Annie Moore	
Ballyne Antrim	
Co Antrim Ireland	
Stopped & Eff 1/4/19	

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private
DO 48 2.5.18	19.3.18	Corporal
DO 106. 16.9.18 3 Mg Bn	1.5.18	Sgt.

3537
Bram
Mch 10

UNIT AND TRANSFERS

ORIGINAL UNIT:- 43 Bn

DATE ACCOUNT FIRST OPENED.-

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			3 D m g Bn

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
10/2	1495	Gcec £5	~~24~~ 23				
						Leave 10948	
						LRC 8295 ✓	

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
DO. 106	1 70/35	15 10		

PARTICULARS OF RENDERING NON-EFFECTIVE: Canada NK 3537 14/3 Bram to Bram Mch. 10.

MONTH 1918	PARTICULARS	CR 1	CR 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mch 31	Balance Forward								101 65	30	
Apr	P Pay	33 -		C 21885			15				
				AR 40 14/4/18 3 m g Bn	4 46						
				" 95 19/4/18 "	4 46				110 93		
		33 -			8 92		15 -				
May	under Cr as Cpl 43 days @ 10°	4 30		C 85910			15				
	Cpls. Pay.	37 20		A.R. 460. 7.5.18. 3 M. G. Bn.	7 14 ✓				130 09		
		41 50			7 14		15				
June	Cpls Pay.	36.		B 40554			15				
				~~212. + Mmg Bn~~	~~111 49~~						
				3941 3 Bon Depot. 17/6	3 57				147 52 ~~162 52~~	30	
		36.			3 57		15		184 72		
July	" "	37 20		C 15957			15		169 72		
		37 20			- -		15		169 72		
Aug	Cpl Pay	37 20		C 55154			15				
				AR 7561 - 11/8/18 - C Bn	13 38						
				" 1849 - 24/8/18 - C m G Bn	8 92				169 62		
		37 20			22 30		15				
Sept	Cpl Pay	26 -		C 93311			15				
	D.O. 106 d/16.9.18. from Sgt. eff 15/1/18 Underrd. ~~£9~~ £5 1/5 to 30/9 153 days @ 30°	45 90		" 1993 - 15/9/18 - 3 m G Bn	16 95				219 57	a/c agreed	
		81 90			16 95		15				
Oct	Sgt Pay	46 50		D 50114			15				
				AR 2293 - 13/10/18 - 3 m G Bn	5 60						
				" 2410 - 22/10/18 ✓	5 60				239 87		
		46 50			11 20		15				
Nov	Sg Pay	45		E 16314			15				
Dec		46 50		AR 2606 3 m G Bn 11/11 C	5 60						
		91 50			5 60		15		239 87		

COMPILED BY M Lyons

CHECKED BY [illegible]

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS		DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
		91 50				5 60		15-		23987		
June	Q.R.	46 50		C.P. 65323 18/11	7	97 33				138		
				Ey 4351 3-1-8				15-		37787 26019		
				AR 26WG 3 mgs. 15/11	8	9 33						
				" 114 " 13/11	10	97 33						
				" 3115 " 12/12	15	5 60						
				Yf. 29892 3-1-8				13-				
		138 00				215 19		45		11768		
Feby		42		AR 3225 / 19/12	2	5 60				112		
				" 3452 " 8/1	6	5 60				159 68		
				" 3622 " 20/1	12	5 60				86 44		
				Yf. 17885- 3-1-8		16 80		15-				
				AR 3819 3mg. 6/2	15-	5 60						
				Ey 6363 3-1-8 mch.		22 40		15-		10748		
				AR. 475 cel. 20/2	14	24 33				2443		
				" 1487 " 8/3	23	9 73				8295		
		42				56 46		30		73 22		

S.C.S. 14.3.19 6mgs. Leit 41

11768
42.00
15968
5240
10728

War Service Badge Class "A" No. 04. 1 1 D.A. I 151786

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 421614

2 Rank. Sgt.

3. Name. Moore William

4. Unit. 3rd. Batt'n. Canadian Machine Gun Corps.

5 Date of Discharge | MAR 29 1919 | Place ~~Winnipeg Man.~~ Toronto

6 Reason for Discharge Demobilization

7. Authority. ~~A.G.~~ No.2, D.D., Part II, D.O.No. 94

8. Proposed Residence after Discharge Winnipeg Manitoba.

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.? W Moore

476 Simcoe St

Winnipeg Man

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Toronto

Date March 29/19

Signature For O.C. No. 2 District Depot.

(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

M.M. 5-11-19 A.G.

LIST OF DISCHARGE DOCUMENTS.

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

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122,)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
   (Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment Statement Q.M.G. Form (D.G.S. 2) and Clothing
12. Last Pay Certificate (P. 851). & Duplicate
13. Pay Book (.B 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group B

Checked by No. 1 [illegible]

Date 13/3/19

If this Case has already been examined, please quote number of Report.

BARNWELL MILITARY HOSPITAL,

CAMBRIDGE.

1836

453

REQUEST FOR REPORT FROM PATHOLOGIST.

Date 6 – 11 – 1915

Laboratory No.

Name of Patient Pte Moore W.

Age 22 Puscells

No. 421114. No 8 C. Seen

Ward 7

Under care of Capt. Cookson

Origin of Specimen Urine.

Diagnosis required G. C.

Signed H W Duke

L/Cpl

BARNWELL MILITARY HOSPITAL

CAMBRIDGE

1864

Patient has Report from Pathologist

If this Case has already been examined, please write number and date of Report

Date 187

Pathologist's No. .....

Name of Patient

Age

No.

Ward

Variety and site of

Origin of Specimen

Diagnosis required

Result

"OLYMPIC" 26-3-19

DISPERSAL "I"

M 3445 | AUDITOR | PAYMASTER ✓

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

M. OR S. | REGT. No. 421014 | RANK Sgt | NAME (IN FULL) MOORE, W.

29

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE

TO WHOM PAID Wife — RELATIONSHIP

ADDRESS Nil.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. D. M. G. D. — IF IN P.F. WHAT UNIT? — (BLOCK LETTERS SURNAME FIRST)

PLACE OF ATTESTATION — TRANSFERRED TO 476 Simcoe St, Winnipeg Man. — DATE — AUTHORITY

DATE OF ATTESTATION 27-5-15. — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 15.00 — DATE EFFECTIVE closed 31-3-19 by Ottawa

PAYABLE TO Mrs Anne Moore. — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Baldoyne, Antrim. Co. Antrim, Ireland.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE Toronto — DATE 28-3-19 — REASON Demob — AUTHORITY Do 94 — IF ENTITLED TO POST DISCHARGE PAY Yes.

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER 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	CASH PAYMENTS COL. NO. 1 $	COL. NO. 1 C.	COL. NO. 2 $	COL. NO. 2 C.	COL. NO. 3 $	COL. NO. 3 C.	ASSIGNED PAY $	ASSIGNED PAY C.	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C.	OTHER CHARGES $	OTHER CHARGES C.			TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					T.O.S. 17/3/19 D.O. 94
28-2-19								82	95	82	95																								82	95	Bal. Brought Forward
31-3-19	31	1.50	46	50																	97	3	Endorsed on L.P.6													1-3-19 to 31-3-19 P&A
					35	00																															Clothing allce.
					70	00																															1st Payt. W.S.G.
																	4	87	5	00																Boat & Train Money
																	214	85																		
								151	50																									234	45	—	0	—	0	
																							70	00													due
	W.S.G.																											4	50								Soldier
183 days	420	00						420	—																									74	50	345	50	
																	Apr 28																		140		280		
			1	50				421	50								May 23	365	075				71	50											211	50	210		
																	June 30	708	073	AR	76		70	00											281	50	140		
																	July 23	1009	702	AR	94		70	00											351	50	70	00	
																	Aug 23	1401	561	AR	119		70												421	50	—	0	
	420		1	50				421	50														417	00					4	50					421	50			W.S.G. PAID IN FULL

W.S.G. Calculation.
3 days P&A Overcredited
1st W.S.G. Paid by #2 D.D.
1.5.19
Discharged 29-3-19 Do 100 made 31-3-19
28-5-19 Knot Rec'd. 6/Days Pay.

CAPTAIN
FOR PAYMASTER WAR SERVICE GRATUITY

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1390.