Unit C. A. M. C. Rank Nursing Sister Name Katherine Maud Macdonald

OFFICERS' DECLARATION PAPER

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

Original

COPIED Archives COPIÉ

QUESTIONS TO BE ANSWERED BY OFFICER

(ANSWERS)

1. (a) What is your Surname? Macdonald

   (b) What are your Christian Names? Katherine Maud

2. (a) Where were you born? (State place and country) Brantford Ontario

   (b) What is your present address? 165 Market St. Brantford

3. What is the date of your birth? January 18th 1893.

4. What is (a) the name of your next-of-kin? Maud Mary Macdonald

   (b) the address of your next-of-kin? 165 Market Street Brantford

   (c) the relationship of your next-of-kin? Mother

5. What is your profession or occupation? Nurse

6. What is your religion? C of E.

7. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes.

8. To what Unit of the Active Militia do you belong? C A M C

9. State particulars of any former Military Service None

10. Are you willing to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? Yes.

The undersigned hereby declares that the above answers made by him to the above questions are true.

Katherine Macdonald (*Signature of Officer.*)

CERTIFICATE OF MEDICAL EXAMINATION

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider him* Fit for the CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Date 20. 3. 1917.

Place London Ont Can.

W C Nattress Captain
Medical Officer.

*Insert here "fit" or "unfit"

M. F. W. 51
40m.—12-15.
H. Q. 1772-39-917.

N.S.
SIN/NAS

MAC DONALD
Surname/Nom

KATHERINE MAUD.
Given names/Prénoms

RECORDS CENTRE
CENTRE des DOSSIERS

CANADIAN FORCES
FORCES CANADIENNES

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

AO - 6748

"CONTENTS CONFIDENTIAL"
"CONTENU CONFIDENTIEL"

CF 478 (10/74)
7530-21-870-6931

COMPONENT
ÉLÉMENT 6748

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Original

To be made out in duplicate.

H.Q. 54-21-23-53

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

---

(1) Name of Overseas Unit which ~~Soldier~~ joins Nursing Sister
Canadian Army Medical Corps

(2) Regimental Number ✓

(3) Full Name of ~~Soldier~~ Nursing Sister
Katherine Mana Macdonald

(4) Place of Birth Bradford.
Ontario Canada

(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 ? Not applicable

(8) Have you any children ? Not applicable

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

200M.—3-16.
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 ..... 165. Market Street .....

..... Brantford. Ont .....

(11) If your Mother is a widow ..... yes .....

Are you her sole support, or not? ..... no .....

(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.

....

..... not applicable .....

(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.

..... not applicable .....

(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. Bell Major .....
Officer Commanding.
Toronto, No. 1

Date 13th March 1917

293

MacDONALD, Katherine Maud N/S C.A.M.C.

Not Elig. for 1914-15 Star. For Can Gen Hosp

MEDALS & DECORATIONS — Mrs. Mary M. MacDonald (Mother)
165 Market St., Brantford, Ont.

PLAQUE & SCROLL — Mother - as above.

Ser # 795774 APR 1 - 1921 Scroll Desp. Regn. No 2-32474

CROSS OF SACRIFICE — Mother - as above. JAN 23 1923 Plaque Desp. Regn. No 148521

Resp 24 3/20 C 335-8

Number ..... Rank N/S

Surname MACDONALD

Christian Name KATHERINE MAUD

Units ..... Theatre of War FRANCE

Date of Service 26.1.'18.

Remarks (M.)

Latest Address Mrs. Mary M. MacDonald
165 Market St.,
Brantford, Ont.

Roll No. "B" Page 22300

200m.-6-21.

GRATUITY (IMPERIAL)

CHRISTIAN NAME	SURNAME	REG. NO.
SCHEDULE NO.	LINE NO.	
UNIT RETIRED OR DISCHARGED FROM		
PLACE OF RETIREMENT OR DISCHARGE		
DATE RECEIVED FROM OTTAWA	IMPERIAL DEPOT NO.	
DATE RECEIVED FROM REG. DEPOT.	DATE FORWARDED TO OTTAWA	

DESP. MAR 28 1923
REGN. NO. 1136240

68—D.P.—40M-1-12-19.

Surname. Christian Name.

MacDONALD K. M.

Rank. Unit.

N/Str. C.A.M.C. 1 C.G.H.

Date of admission.

Hospital.

Transferred ..... Hosp.

..... Hosp.

..... Hosp.

..... Hosp.

Reported by O.C.1 Can.Gen.Hosp.Etaples,

Diagnosis. KILLED in ACTION:-19-5-18.
(Enemy Air Raid.)

Later diagnosis. .....

.....

.....

.....

Disposition. Date.

22-5-18 988.

....

C.L. ..... Remarks.

C.L. .....

C.L. .....

C.L. .....

C.L. .....

C.L. .....

C.L. .....

A.M.D. 2 DEPT.
Bch. of D.G.M.S. O.M.F.C. London.

D. M. S. 1347.

Surname | Christian Name | Reg. No.

Rank | Unit

MEDICAL BOARD held at | Date | Serial No.

(1)

Other Medical Boards at | Date | Serial No.

(2)

(3)

(4)

(5)

Condition found by Board

Disposition Recommended

(1)

(2)

(3)

(4)

(5)

PENSIONS & CLAIMS BOARD held at | Date.....

Disposition

Remarks

Indicate by a P.T.O. if continued on other side.

~~201506~~
26988
19-E

FORM OF WILL.

I, Katherine Maud Macdonald (Name in full)
Regimental Number ..... serving in Nursing Sister C.A.M.C
of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I bequeath all my real estate unto

Wil

Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

Wm A. Macdonald
165 Market Street
Brantford Ont.

Name and Address of person or persons to receive personal estate* *(See note).*

IMPORTANT NOTE
This must be Signed and Dated by THE SOLDIER HIMSELF.

this third day of April A. D. 1917

Katherine Macdonald Signature of Soldier.

*N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

ESTATES BRANCH
SEP 3 1918
MILITIA DEPT.

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness Nellie May Foreman
Address of Witness Lucan Ontario
Occupation of Witness Nursing Sister
Signature of Second Witness Eva Louise Boydell
Address of Witness 363 Central Ave London Ont
Occupation of Witness Nursing Sister

F. W. 82
500M-5-16.
1772-39-983.

The original will was forwarded to Ottawa. E.E.

ESTATES REGISTRY
MAILING
DEPARTMENT
— IN —
MAY 27 1918
133, OXFORD ST.
LONDON, W. 1
O.M.F. OF CANADA.

REGISTRATION
WILLS
28 MAY 1918
ESTATES

Estates. 223-40M.
3556-19-9-17.

RECORD OFFICE
BRANCH
12 AUG. 1918
CANADIAN
EXPEDITIONARY FORCE.

FORM OF WILL.

I, **Katherine Maud Macdonald** (Name in full)

CANADIAN EXPEDITIONARY FORCE

Regimental Number serving in **Nursing Sister C.A.M.C.of the** ~~the Overseas Military Forces of Canada,~~ do hereby revoke all former Wills by me made and declare this to be my last Will.

I bequeath all my real estate unto

RECORDS REGISTRY O.M.F. OF C.
GREEN ARBOUR HOUSE,
OLD BAILEY, LONDON, E.C. 4.
FILE
REF TO Ams
10 AUG. 1918
C/O L/R
FILE CHARGED SINCE

Nil

) Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

Mis A. Macdonald

165 Market Street

Brantford Ont

) Name and Address of person or persons to receive personal estate. (See note).

IMPORTANT NOTE
This must be signed and dated by the Soldier Himself.

this **third** day of **April** A D. 191**7**.

Katherine Macdonald Signature of Soldier.

N.B Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence at his request and in the presence of each other have hereunto subscribed our names as Witnesses.

The Two Witnesses Must Sign Here.

Signature of First Witness **Nellie May Foreman**

Address of Witness **Lucan Ontario**

Occupation of Witness **Nursing Sister**

Signature of Second Witness **Eva Louise Boydue**

Address of Witness **363 Central Ave London.Ont**

Occupation of Witness. **Nursing Sister**

I hereby certify the above to be a true copy of the original Will now on file in Estates Branch, O.M.F.C.

The original will was forwarded to Ottawa.

Date 8th Aug. 1918.

Lieut.
for OFFICER I/C ESTATES, O.M.F.C.

NOTE ~~--Died---~~ K. IN A. 19-5-18.

Transferred 8-8-18.
Nursing Sister.Macdonald.K.M. 1st.CGH*CAMC.
(BAC.) 26988

HQ 395-13-193

MILITIA SERVICE

MES June 11th, 1937.

RECORD OF SERVICE

CANADIAN EXPEDITIONARY FORCE

Nursing-Sister Katherine Maude MACDONALD.

1. Date and place of birth:- 18-1-93, Brantford, Ontario.

2. Names of parents:- Mr. Angus McDonald, (father), Died October 16th, 1906.

Mrs. M. McDonald, (mother), 165, Market Street, Brantford, Ontario.

3. Home town:- Brantford, Ontario.

4. Hospital from which graduated:- Victoria Hospital, London, Ontario, May 15th, 1915.

5. Appointed Nursing-Sister, C.A.M.C., C.E.F. and employed in Military Hospital, Military District No.1, 9-11-16.

6. Embarked for England with a C.A.M.C. Draft, 6-4-17.

7. Taken on strength D.M.S. and posted to C.A.M.C. Depot, 6-4-17.

8. Posted to No.10 Canadian Stationary Hospital, 18-4-17.

9. Posted to No.14 Canadian General Hospital, Eastbourne, 17-10-17.

10. Posted to No.10 Canadian Stationary Hospital, 29-11-17.

11. Attached No.14 Canadian General Hospital from No.10 C.S.H. on Unit proceeding to France, 4-12-17.

12. Ceases to be attached No.14 C.G.H. and proceeded to France, 26-1-18.

13. Arrived in France 26-1-18 and joined No.10 Canadian Stationary Hospital, 28-1-18.

14. Struck off strength No.10 C.S.H. on reposting to No.1 Canadian General Hospital, 8-3-18.

15. Killed in Action, (Enemy Air Raid), 19-5-18.

16. Buried in Etaples Military Cemetery, France. Plot 28, Row "L", Grave 8.

A headstone suitably inscribed has been erected over this grave by the Canadian Government and it's permanent maintenance arranged for.

CERTIFIED CORRECT
FROM RECORDS

(W.E.L. Coleman), Major,
Officer i/c Records,
for Adjutant-General.

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

Army Form B. 103.

CERTIFIED CORRECT
CANADIAN MILITARY OFFICE

Casualty Form—Active Service.

Regiment or Corps C.A.M.C. Depot,

Regimental No. _____ Rank N/S Name Macdonald, Katherine Maude

Enlisted (*a*) _____ Terms of Service (*a*) Period of War 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*) Trained Nurse

COPIED Archives COPIE

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Embarked Canada		6.4.17	
		Disembarked England		16.4.17	
24.4.17	C.A.M.C.	TAKEN ON STRENGTH	Westcliff-on-Sea	16.4.17	S.R. III D.O. 114
25.4.17	"	Posted to No. 10 Can. Stat. Hosp. Hastings	"	18.4.17	S.R. III D.O. 114 A. MacLaren CAPT. ASST. ADJUTANT FOR O.C. C.A.M.C. TRAINING SCHOOL
20/4/17	Corps O. #509.	Attached to #10 Can. Stat. Hospl. on posting from C.A.M.C. Depot.	Eastbourne.	18/4/17	Part II D/O #113 d/23/4/17. Edwin Seaborn Lt. Colonel. Comd'g No. 10 Stationary Hospital, C. E. F.
17-10-17	A.W.S.	Posted from No. 10 Canadian Stationary Hpl. to No. 14 Canadian Gen. Hpl.	Eastbourne	17-10-17	A.P.T.O. 361 - 23-10-17

(*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				
25/11/17.	D.M.S.	Posted to No. 10 Can. Stationary Hospital.	Eastbourne.	29/11/17.	P.T.O.260,d.29/11/17.
30/11/17.	H.Q. E. Com.	Proceeded Overseas with No. 10 Can. Stat. Hpl.	Eastbourne.	5/12/17.	P.T.O.264,d.4/12/17. Cancelled. Major, CAMC for O.C. 10th Can. Stat. Hpl.
5/12/17.	D.M.S.	Remained in England for temporary duty when unit proceeded overseas 5/12/17.	Eastbourne.	5/12/17.	P.T.O. 264, d. 4/12/17. Major, C.A.M.C. for O.C. 10th Can. Stat. Hpl.
14-12-17.	#10. Can. Mil. Hosp.	Attached from #10 Can. Mil Hosp. to #14. Can. Gen. Hosp. with effect from 4-12-17.	Eastbourne	4-12-17.	Pt.# D.O. 279. 14-12-17.
8-1-17	#14 C.G.H. Eastbourne	Ceases to be attached to #14 C.G.H. on being attached to #4 C.G.H. Basingstoke	Eastbourne	8-1-17	Pt II D.O. #2 d/9-1-17 Capt for Lt. Col, O.C. No 14 Canadian Gen. Hospital, Eastbourne, Sussex.
10.1.18.	No.4 C.G.H.	Att. for Stns. Rations and Temporary Duty.	Basingstoke	9.1.18.	Pt. II D.O. No. 2. d/10.1.18.
31.1.18.	No4 C.G.H.	Cease to be attached on proceeding overseas.	Basingstoke	26.1.18.	Pt. II D.O. No. 5. d/31.1.18. [illegible] Capt & Adj.
3-2-18	10 C.A.M.C.	Arrived in France Joined Unit.		26-1-18 fr. K.R. 23816. 28-1-18 B213.	Pt II 4

Army Form B. 103. Regimental Number .....

Casualty Form—Active Service.

Regiment or Corps 10 Can Sloly Hpl.

Rank M/S Surname Macdonald Christian Name K. M.

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: Date	Report: From whom received	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.
		Embarked ...			
		Disembarked ...			
10·3·18	OC 10 C.S.H.	SOS on reposting to 1 Can Gen Hpl. Auth DGMS B/1523/18 d/8/3/18		8·3·18	B213 dated 7 d. file 12104
9/3/18.	OC. 16 G. H.	TOS on Reposting from 10 C.S. Hosp Authy. DGMS. B/1523/18 d/8-3-18		9/3/18	B213. file 12104 p. 15 d/14-3-18
20·5·18.	16 G Hp.	Killed in Action. Enemy Aircraft Ref A.G.'s Cas. Sect. G.H.Q 5th L. List W 1527.	19.5.18		Promo 33. d/22.5.18.

H Christie
Capt. for Lt.-Col., A. A. G.
Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

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

W. 8685—M2733 2000m 9/17 (35611) C. P. & S., Ltd.; Form B./103 E/1807. P.T.O.

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				

Arrears of Pay.

L. L. Job 4503.—M. & D. 6832

MILITIA AND DEFENCE

M. F. W. 11.
50m.—6-16.
H. Q. 1774-39-818.

SEPARATION ALLOWANCE

Name Mrs. M. MacDonald

Address 165 Market St
Brantford Ont

Name of Soldier MacDonald K. M

Regtl. No.

Rank Nur. Sis.

Corps A. M. C.

~~Relation to Soldier~~
~~wife, child or mother~~ } Rate $30.00 50.00 Oct 1/16

To what Corps belonging when called out

APR 1- 1917

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			Ozm 16/10/17 Ext 5 19/10/17.
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

CONSOLIDATED 6 ACCOUNT

Pensions Notified Date ... 5. June /16.
Killed in Action
~~Died of Wounds~~ } Date 19. May /16.
~~Missing~~
C. 1972, 23. May/16 J. LeClair.
Date Noted ..... 5. June 1916

ORIGINAL

Original

MEDICAL HISTORY SHEET.

Surname Macdonald. Christian Name Katharine Maude

Examined { on 13th day of Nov 1916
at London Can

Approved by W C Nash

Rank Capt Can M.O.

Birthplace { City or Town Brantford, Can
County Brant

Apparent age 24

Trade or occupation Nurse

Height 5- Feet 2 Inches.

Weight 125- Lbs.

Chest measurement { Minimum 30 inches.
Maximum expansion 32½ inches.

Physical development Good

Small-Pox Marks none

Vaccination Marks { Arm Right. 0 Left. 2
Number Two

When Vaccinated last 1915-

(a) Marks indicating congenital peculiarities or previous disease none

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

R. Eye 20/20 Left 20/20 Vision

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.
13.3.17	Cos.	W C Nash Capt Can M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
1.2.17		W C Nash M.O.
7.2.17		W C Nash M.O.
14.2.17		W C Nash M.O.

Enlisted on day of 191 at

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment				
Transferred to	#14 Can. Gen. Hosp. Stationary Hospital	n/str		17/10/17 29 NOV 1917

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
London Ont. Can	20. 3. 17.	Medical board	Fit W C Nash Capt Can President

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

M. F. B. 313.

200M—11-15.
H. Q. 1772 39-4-9.

Surname MACDONALD Christian Name KATHARINE MAUDE

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.
19/11/17	T. A. B. 1							26/11/17	T. A. B. 2.		

Register No. D.M.C. 770

WAR SERVICE GRATUITY
TO
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. 012276-F-26

Regt'l No. ——— Name Katherine Maud (Christian Name) Mac Donald (Surname)

Unit C.A.M.C. 16 G.H. Etaples Rank Nursing Sister Date of enlistment .....

Date of casualty 19-5-18 B.P.C. File No. 39922

Was service performed overseas ? yes.

DEPENDENT

Name Mrs Mary Maud Mac Donald Relationship W. Mother

Address 165 market street
Brantford
Ontario

Amount of Special Pension Bonus $ Nil Abstracted by E. L. Lapensée.

Eligible for Gratuity Not Eligible $ ———

Less amount of Special Pension Bonus paid $ .....

Less Debit Balance of S. A. or A.P. $ .....

Total deductions $ .....

Balance due $ ———

Cheque No. ..... Date issued .....

REMARKS : No. S.A. paid

Clerk A. Hamel

Audited by

.....

Date .....

M.F.W. 2652
25M—6-20.
H.Q. 1772—30-1473

"Noted" D.G.I 26/8/20.

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname Christian Name

Regimental Number Rank

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Address (in full)

Rates:—Regimental pay $ per diem; Field Allowance $ per diem. Separation Allowance $ per month.

L.L. 53961—M. & D. 9721

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

M. F. W. 127
300M-1-19
1772-39-1140

Remarks:

FORM P. 15.
5986—25M—19/1/17

ASSIGNED PAY.

UNIT. NAME OF — DATE — AUTHORITY

RANK. — DATE — AUTHORITY

NAME. Sheet 1

Beneficiary — C.A.M.C.D — Pay. $2.00 Pd — Mess. 1.00 " — N/S — 16/5/17 — Fr Canada Dmo Co 510 a/20/4/17

Address — Canada

Amount. $ ~~28~~ 00. 50 1/10/17

Separation Allowance issued. Yes or No.....

Name Macdonald
Initials Katherine Maud
Bank of Montreal
Trafalgar Square 1/18

DATE 1917	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
May 1917.	Pay a/c Pr. 1 to 30-4-17 (30 days at 2-60 = 78-00) Mess Pr. 16 to 30-4-17. (15 days @ 7.00 assigned pay. 2.30.00. Bank	4006.		63 ..				
May 10	Pay a/c N/S rate Mess: Pr. 16 4/17. D.M.C.O. 510. a/20 4/17. Eff. 1 4/17.		93			30		
" 15	Voc. 3952. May Pay (R)		111 60					
" 17	A. P. Canada (2 mths)				60	81 60		
22.	Bank	6003		81 60		0		
June. 14	June Pay (R)		108					
"	A.P. Canada.				30	78		
21	Bank	7998		78				
July. 19	July Pay (R)		111 60					
" 17.	A.P. Canada.				30	81 60		
18	Travalle 19/3 - 68/17.	17115				0		f 8-11-4
24	Bank.	13059		81 60				
Aug 18	August Pay (R)		111 60					
14	A P. Canada				30	81 60		
21	Bank	17080		81 60		0		
Sep 14	Sept Pay (R)		108					
11	A P. Can.				30	78		
20	Bank	21813		78				
Oct 15	October Pay (R)		111 60					
11	A P. Can a2m eff 1/10/17.				50			
19	Bank	26291		61 60				
Nov 14	November Pay (R)		108					
13	A P. Can.				50			
19	Bank	30681		58				
Dec 4	A P. Can.				50			
6	Dec: Pay R.		111 60			61 60		

Statement of a/c rendered 12/10/18. Cr Balance 3 5 7 xx

FORM P. 15.
5986—25M—19/1/17

ASSIGNED PAY. | UNIT. NAME OF | DATE | AUTHORITY | RANK. DATE | AUTHORITY | NAME.

Beneficiary
Address
Canada
Amount. $ 50
Separation Allowance issued. Yes or No.....

Pay. 42 00 pd.
F.A. 60 "
Mess. 1. 00 "

Name Macdonald.
Initials H. M.
Bank of Montreal
Trafalgar Square

DATE 1917.	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS	
Dec:	Balance Fwd		111 60	50		61 60			
1918 1/3	Bank.	35096		61 60		"			
Jan 15	A.P. Can				50				
" 11	Jan Pay. (R.)		111 60			0			
" 21	Bank.	39501		61 60					
Feb 15	Feb Pay. (R.)		100 80						
" 11	A. Pay. Can				50				
" 22	Bank.	40996		50 80		0			
Mch	March Pay. (R.)		111 60						Transferred to Ledg 28
" 11	A. Pay Can.				50				From Ledg 9 5/18
22	Bank			61 60		0			

FORM P. 15
5986–25M–19/1/17

ASSIGNED PAY.

UNIT. NAME OF ~~DATE AUTHORITY~~ Rates

RANK. DATE AUTHORITY

NAME. 21 9/11 Sheet 2

Beneficiary
Address

C.A.M.C.D. Pay 2.00 / F.A. .60 / Mess. 1.00 / 3.60

N.I.S. 16 4/17 Fr Can. D.M.S.C.O.510 d/20 4/17

Name Macdonald.
Initials Katherine Maud.
Bank of Montreal Trafalgar Square

Amount. $ 50 00 Can

Separation Allowance issued. Yes or No.....

Killed in Action 19 5/18 (Enemy Air Raid) L.L. 988 d/22 5/18

DATE 1918.	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
April 15	A. Pay. Can.				50			
"	April Pay. (R.)		108					
26	Bank.	1187		58		0		
May.	A Pay. Can.				50			
16	May Pay (R)		111 60					
27.	Bank.	2683.		61 60		"		
July 1919	C.I.C. — List 15 — No 324		357			357	Cancelled 12-10-18 Post. to Ledger 28	
Jan 31	Cr Balances to Ottawa L125 Jan No 2-76			357		0	From Ledger 9 to Ledger 28 5/18	
							Dist to Accts Bch 9/12/18	

Statement of a/c Rendered 12/10/18
C. Balce 43 57/xx

FORM P. 15
5986—25M—19/1/17

ASSIGNED PAY.

UNIT.

NAME OF	DATE	AUTHORITY

RANK.

DATE	AUTHORITY

NAME.

Beneficiary

Address

Amount. $

Separation Allowance issued. Yes or No.....

Name

Initials

Bank

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS

DEPARTMENT OF THE INTERIOR.

OTTAWA, CANADA.

LETTER OF IDENTIFICATION.

Signature Katherine Macdonald

The bearer of this letter, Miss Katherine Macdonald, *whose signature and photograph appear in the margin hereof, has produced satisfactory evidence that* she (he or she) *is a British-born subject, and, as the said person will apply for entry to the United Kingdom, the present letter is issued for identification purposes only.*

O. D. Scott

Superintendent of Immigration.

Countersigned A Reginald

Office Dominion Immigration Agent,

Address Montreal, Canada.

Date April 2nd 1917.

(Canadian Army Medical Corps)

DOMINION IMMIGRATION APR 2 1917 Montreal, P.Q. AGENCY

A Reginald

N.B.—This **LETTER OF IDENTIFICATION** will enable the holder to enter, but not to leave, the United Kingdom: a regular British passport will be required to leave any port in the United Kingdom. This letter will readmit the bearer to Canada if presented within one year.

Forms R. 150
3232. 15 M.

E.T.

Surname MACDONALD **Christian Names** Katherine Maud 28.4.17. 103/H

Rank Nursing Sister **Name and Address of Next-of-Kin** Mother.

Promotion Maud Mary Macdonald.
165, Market Street. Brantford
Ontario. Canada.

Unit C.A.M.C.

Place of birth Brantford. Ontario.

Married (Yes or No)

Appointments

Date of leaving Canada

Date and Cause of Resignation

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
		T.O.S. on arr. from Canada			
20/4/17	DMS	Posted to Can C. Depot.		6.4.17	Co. 510
20/4/17	DMS.	Posted to 10 C. Stat. Hosp.		18/4/17.	Co. 509
22.10.17	No 14 CGH	Posted to No 14 Can Gen Hp	Eastbourne	17.10.17	Pt 9261 CO. 1406
17.10.17	– do –	Granted leave from 20.10.17 to		5.11.17	Pt 9260
4.12.17	DMS.	Posted to No 10 Can Stat Hosp.		29.11.17	CO. 1579.
4.12.17	10 C St Hp	~~S.O.S~~ remaining in Eng for temp duty pt about to proc o/seas		5.12.17	Pt 9264 Amended by Pt 9/4 4/23.2.18
14.12.17	14 CGHp	Att from No 10 C St Hp.	ceases to be attd	4.12.17 8-1-18	Pt 9279 " 9/2.
10-1-18	4. C.G. Hp	att. for temp duty	ceases to be attd	9-1-18 26-1-18	Pt 9/2 9/2 " 9/5
29-1-18	DMS	Proc o/seas		26-1-18	C.O. 130
23-2-18	10 C.St. Hp	Arr in France 26-1-18 Joined 10. C St. Hp		28-1-18	Pt 9/4
16.3.18	do	Ros on reposting to 1. C.G.Hp.		8.3.18	Pt 9/7.
22-5-18	A.M.S.	Killed in action (Enemy Air Raid) Reported by O.C. 1 Can Gen Hp Etaples		19-5-18	C/988 (A.F.B. 103 93. 20/5/18 estate 10.6.18)
		1527			

A.F.B. 103. 8-6-918

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				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—6-16.
1772—39—819.

Sheet No. 2. Mrs. M. MacDonald

Name of Soldier. MacDonald K. M
Nur. Sis.

L. L. Job 4503. - Req. 6832.

Month.	Year.	Cheque No.	Amt.	Remarks.
			$30.00	APR 1- 1917 A. M. C.
			60.00 Oct 1/17.	
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		Y. 6184	30	
May		Y 10638	30	30 W.
June		Y 17162	30	C
July		Y 23146	30	B.
Aug.		S 30933	30	
Sept.		Q 37325	30	C3
Oct.		L 43748	30	
Nov.		T 50349	70	70.00 Nov to adjust
Dec.		S 60251	50	50.00 future
Jan.	1918			33.0 Pay
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.				

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

Oct. 1/17

~~April 17~~

RATE OF SEPARATION ALLOWANCE

261

RATE OF ASSIGNMENT

~~30~~	50		

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Nursing Sister Promoted W Reverted Discharge

Soldier's Name K. MacDonald.

Battalion A. M. C.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs M. McDonald

Address 165 Market St., Brantford Ont.

Change of Address

1

2

3

4

Date	Cheque No.		Amount S/A	Amount A/P	Total		REMARKS
1917							Fyle 012276-K-26
Dec 31				330	330		A/P opened at the rate of 30 pr. Apr. 1/17
Jan 18	H	61003		50	50	F	increased to 50 pr. Oct. 1/17 per 2 Dn 16/10/17
Feb	V	74374		50	50		C. F. K. to 580 to 31 May/18
Mar	L	93851		50	50		acct. closed 31 May/18
Apl	E	1511		50	50		
May	V	16387		50	50		
				580	580		

Pensions Notified Date ... 5 June/18.

Killed in Action / ~~Died of Wounds~~ / ~~Missing~~ Date 19 May/18.

C. [illegible] 5, 22 May/18 Clerk J. LeClair

Date Noted ... 5 June 1918

Pension Granted JUNE-1-18

B.P.C. to Recover $ ...

Clerk J. P. L. Date July 22/18

B.L. July 25/18

MRO 2 Dn 6/6/18

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

M. F. W. 128
400m.—6-17—177-39-1141
L. L. 22320—M. & D. 7933.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

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—1772-49-1141
L. L. 22920—M. & D. 1893.