DUPLICATE

ATTESTATION PAPER.

No. ~~181324~~ 709744

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your surname?	Mc Mac Farlane.
1a. What are your Christian names?	William Prescot
1b. What is your present address?	W Pedeceiac N.B.
2. In what Town, Township or Parish, and in what Country were you born?	++ Pedicodiac Petitcodiac Mc
3. What is the name of your next-of-kin?	Mrs John MacFarlane
4. What is the address of your next-of-kin?	Pedicodiac N.B.
4a. What is the relationship of your next-of-kin?	Mother
5. What is the date of your birth?	July 2 1892
6. What is your Trade or Calling?	Clerk
7. Are you married?	No
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	W.B.Smith 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

104TH

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, William Prescot Mc Farlane, 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.

William Prescott McFarlane (Signature of Recruit)

Date Nov 11 191 5 Oscar F. Beckwith (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, William Prescott MacFarlane, 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.

William Prescott Mc Farlane (Signature of Recruit)

Date Nov 11 191 5 Oscar F. Beckwith (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 Sussex N.B. this 11 day of Nov 1915 191 .

(Signature of Justice)

J. P. IN AND FOR THE COUNTY OF KINGS, N.B.

M. F. W. 23
200 M—9-15
H. Q. 1772-39-841

Description of William Prescot MacFarlena on Enlistment.

Apparent Age 23 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft 9½ ins.

Chest measurement:
- Girth when fully expanded ..... 37 ins.
- Range of expansion ..... 3½ ins.

Complexion ..... Dark

Eyes ..... Hazel

Hair ..... Black

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

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer.)

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 declares that he is not subject to fits of any description.

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

Date ..... Nov II ..... 1915. J. H. Burnett

Place ..... Sussex NBb ..... 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.

..... Willian Prescot MacFarlane ..... 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.-COLONEL
COMMDG. 104th O. S. BATTN. C. E. F.

Date ..... Nov II 1915

REGIMENTAL DOCUMENTS

NAME Pte McFARLANE, WILLIAM PRESCOTT REGT. NO. 709744 UNIT 104th Bn. H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)				
3	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)				
	TRAINING HISTORY SHEET (M.F.W. 113)				
2	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)				
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)				
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)				
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)				
1	DENTAL HISTORY SHEET (M.F.B. 465)				
1	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)				
1	MEDICAL EXAMINATION (M.F.W. 129)				14180
	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)				
	LAST PAY CERTIFICATE (M.F.W. 44)				
2	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)				
4	Misc				
+	Can card				
+	Proof				
+	Ind card				

NON-EFFECTIVE BY

DEATH

Category Deceased 28-3-39

DISCHARGE

Category Dismiss

DESERTION

8 — 3
21 — 3
27 — 3
1

W 2589
100M-11-18
17-2 49-1277

AD
Gmt

Number 109744 Rank A/L/Cpl

Surname McFARLANE

Christian Name William Prescott

Units 26th Bn Can Inf Theatre of War France

Date of Service 24-11-17

Remarks Box 41

Latest Address St. John Petitcodiac N.B. N.B.

Roll No. B Page 8653

DESP. NOV. 4 1921
REGN. NO. 47222

Dental Examination on Discharge

File No.....

Rank Pte. Name McFarlane. W.P. 709744 Regt. No.....

Date of enlistment 11-11-15 Service, where France.

If any dental treatment in army, where England.

Discharge examination at St John. N.B. Date 17-3-19.

Treatment to be received Fillings. 9-10-20-21.

P.U. 1-2-3-4-6-7-8-10-11-12-13-14-15
P.L. 17-18-19-30-31.32.

At..... Examined by J. Harrington Lieut

Above treatment completed by..... Date.....

Completed History Sheet File No.....

M. F. W. 2572
100m-8-18
1772-39-1359

OTHER SIDE FOR REMARKS

REGT'L No. 709744

H. Q. FILE No. 649.

NAME Mac Farlane William Prescott

RANK AND CORPS Pte 26th Bn from 104th Bn.

FOLLOWS No.

FOLLOWS

CABLE NO.	CABLE DATE	NATURE OF CASUALTY
9 of	K	Mrs. John. Mac Farlane
1056.		Pediodiac N. B.
Q 500	4-9-18	Adm. 4 Gen. H. Camiers Aug.
Also H L	A 298 (12)	29th 1918. Gsw. Left. Leg

L. L. 26438. M. & D. 8207.

M. F. W. 42—50M.—8-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A.298 (4)	12 Stat. St. Pol.	27-8-18.	GSW. L. Leg.
A.301 (2)	6 Cons. Hpn Staples	30-8-18	" " "
A.304.	12 Cons. Hps. Auberque	1-9-18.	" " "
A. 311.	10 Cons. Hpn Ecault	9-9-18	" " "
A. 313	Discha	12-9-18	" " "

Form R. 149.

William Prescott.

Name Mc FARLANE Rank Pte Reg. No. 709744

Unit 26 Bn

Next of Kin Canada.

Date 1918		Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
27-8		12 Sty Hpe St Rol		Wd Leg L	A29	4 O	3656-8
29	8	4 Cen St Camiers	SSS	Wd L Leg	A298	17,500	3675/4
30-8		6 Com Dep Etaples		do	A301	4 A	3795-1
1-9		12 Com Dep Aubengue		do	A304	4 A	3848-2
9-9		10 Com Dep Ecault		do	A311	4 A	4098-20
12-9		6 Rest Camp		do	A313	4 A	4099-11

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

C.

7. S.o.S. 18/8/19 Demob.
D.O. 79 of 20/3/19 # 7 WD

NAME Mac Farlane, William, Prescott.

RANK & No. Pte. 709744

CORPS 104th. Batt.

ENLISTMENT, PLACE Sussex. N.B., DATE Nov. 11th 1915.

FORMER CORPS Nil.

COUNTRY OF BIRTH Canada. Pedicodiac, N.B.,

NEXT OF KIN Mac. Farlane. Mrs. John. (mother)

ADDRESS OF NEXT OF KIN Pedicodiac. N.B.,

DISCHARGE, PLACE DATE

R/C. 1/3/19 273/49 Pte.

Sailed from Halifax Per S.S. Olympic

M. F. W. 22. 100 m.—9-15.

L. L. 85779—M. & D.—6011 28/6/16 470/32

H. Q. 1772 39 839.

MARRIED SINGLE yes. WIDOWER

TRADE OR CALLING Clerk. RELIGION Methodist

DESCRIPTION.

APPARENT AGE 23 YEARS MONTHS

HEIGHT 5 FEET 11½ INCHES

CHEST MEASUREMENT 34 INCHES EXPANSION 3½ INCHES

COMPLEXION Dark. EYES Hazel. HAIR Black.

DISTINGUISHING MARKS Nil.

MEDICAL EXAMINATION. PLACE Sussex N.B., DATE Nov. 11th 1916

REMARKS:

No. 181324 RANK Pte L/Corpl NAME McFarlane Wm P.
709744 Apr. paylist

T. O. S. 11-11-15 UNIT 104th Battalion. C. E. F.
(W.O. 33. 18-11-15)

M. D. 6

PAID FROM 1915	PAID TO 1915	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PARTICULARS	AUTHORITY
Nov 11	Nov 30	✓		
Dec		✓		
1916				
Jan		n		
Feb		✓		
Mar		✓		
Apr		✓		
May		✓		
June		n	Prom. L/Corpl (Prov)	W.O. 125 of 27-5-16
July		n		

UNIT SAILED
JUN 28 1916

D.M.S. 1300 50M-21-11 17.

SURNAME | CHRISTIAN NAME OR NAMES | REG. NO.

Mc Farlane W. P. 709744.

RANK | UNIT | CO. | TROOP | BATTY.

Pte.

HOSPITAL 26 Bn. N. B. | DATE OF ADMISSION

1. 4 Gen. Camiers HOSP. 29.8.18

2. 12 Stat. St. Pol HOSP. 27.8.18

6. Conv. D. Etaples. 30.8.18.

3. 12 Conval. Aubergne HOSP. 1-9-18

10 " Ecault 9.9.18.

4. HOSP.

DIAGNOSIS

1. G.S.W. Lt. Leg

2.

3.

DISPOSITION | DATE

Cl 2.9.18 @ 298 (2 & 4) Dis - 12-9-18.

6.9.18 @ 301. (2)

10-9-18 @ 304

18.9.18 @ 311

20-9-18 @ 313.

REMARKS

A.M.D. 2 DEPT.

Bch. of D.G.M.S. O.M.F.C. London.

EPITOME OF HOSPITAL TREATMENT

	HOSPITAL	ADM.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

Local

*Name McFarlane Wm Prescott Rank Pte Regtl. No. 709744

Fyle Depot

Original unit 104 Bn Present unit D S C D D 7 M. or S. Age 23 Religion Meth Ref. H.Q.

Port, ship and date of arrival Halifax Lapland 2-3-19

Next of kin Mother Mrs John McFarlane Petticodiac N B.

Address on leave as above.

Address on discharge St John N B.

Transportation issued Yes No Date Character on discharge

Previous occupation Clerk Date and place of enlistment Sussex 11-11-~~14~~ 15

Diagnosis Date of Medical Boards

Date.	Remarks.	Pt. 2 Order No.
LOS.		
20-2-19	Dispersal Station 1-3-19 Leave from 2-3-19 to 16-3-19	# 67
18-3-19	Discharged H. M. S.	# 79

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

(over)

Date.	Remarks	Pt. 2 Order No.

M. F. W. 192
150m.—5-18
1772-39-1243

R—122

LTR

Rank Name McFARLANE, William Prescott / Reg'l No. 709744 /

Unit 104th, Bn. / If in perm. Corps, What Unit? Married or Single Single. /

Place and Date of Enlistment Sussex, N.B. 11th, November, 1915, Place of Birth Petitcodiac, /

Name and Address, Next-of-Kin Mrs John McFarlane. /

P.O. Petitcodiac, N.B. Canada. / Relationship Mother. /

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No. 18601
File R.L.
Category CPC

H. W. & V., Ld.—7165-16.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
		Arrived in England. S.S.Olympic. 6th July 1916			
27 I 17	104 Bn.	S O S. 10 13RES Bn.	witley	26 I 17	Pt.11-Do-~~25~~ 2
30,1,17	13th RES	T.O.S. FROm 104th Bn	27,1,17	PT 2	-D O 13 AFB103 ckd 27-1-17
3-5-17	"	To be a/ L/ Cpl with pay	Shoreham	2-5-17	Pt-II Do 89
23-11-17	"	Reverts to Pte	Seaford	23-11-17	-271
24-11-17	"	SOS to 26 Bn	Pte "	23-11-17	-272 T122-26 Bn 11 12/17
3-9-18	26 Bn	Wounded	" Field	29 8/18	CLA 298
8 10 18	-"-	Sofs to Can Lab Pool	Pte -"-	2 10 18	P II O 99 & Lab Pool Pt II O. 166 29/10/18
23-12-18	Lab Pool	S.O.S. to C.F.C. Depot, Sunningdale	Pte Field	16-12-18	Pt II O 202. TOS BDCFC pt II O 304. 21/12/18
31.1.19	BDCFC	SOS on transfer to MD 7 to CC Camp Rhyl	Pte Sdale	30.1.19	Obs 9 7/19 -31 / T.O.S. 9.11.0 31+51 31/1/19

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.				
20.2.19	THD	505 to Can	Rhyl	20.2.19	D051

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

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-9:0.

Casualty Form—Active Service.

Unit, Regiment or Corps 104# Bn

Regimental No. 709744 Rank P.D. Name Mc. Farlane, Wm. Prescott.

Enlisted (a) 11-11-~~16~~ 15 Terms of Service (a) C.E.F. D of War Service reckons from (a) 11-11-~~16~~ 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) Clerk.

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
20-2-19	O.M.F.C	TAKEN ON STRENGTH District Depot No. 7. PART II. ORDER No. 67 Flon NB.			R M Kesarch Lieut. & Asst. Adjt. For O. C. District Depot No. 7.
18-3-19		STRUCK OFF STRENGTH District Depot No. 7. PART II. ORDER No. 79 Flon NB			

(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				

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. 709744 Rank Pte. Surname McFARLANE
(Given name in full)
WILLIAM. P.

Unit or Corps DSC. D.D. #7 Birthplace Petitcodiac N.B.

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

1. GENERAL DESCRIPTION:

Physique good Weight 158 lbs. Height 5 ft. 9½ in. Colour of Eyes Br.

Nutrition good

Pulse 76

Condition of arteries good

Vision Rt. Blind Left D20

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

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

nil

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 no Cardio-Vascular System no

Special Senses yes 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.

Specialist Report. R. Blind
L. 6/6.
Right eye injured in 1914. Pupil eccentric iris flat and tremulous. No details of funkus. Sight destroyed at time of injury. Left eye normal condition neither caused by nor aggravated by 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 St John N.B. (Canada)

Date 17/3/19 ..... Signed G.E. Coffee Capt Canada 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 W.P. McFarlane

(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.

Army Form B. 103. Sheet 2. Regimental Number 709744

Casualty Form—Active Service.

Regiment or Corps 104th Bn C.E.F.

Rank Pte Surname McFarlane Christian Name William Prescott

Religion ..... Age on Enlistment ..... years ..... months

Enlisted (a) 11.11.15 Terms of Service (a) D of W. Service reckons from (a) 11.11.15

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 ...			
2/10/18	A.I.D., Cdns.	Classified B1 & transferred to Cdn Labour Pool (Denture & Defective Vision)	26 Bn	2/10/18	W3339-749 P.20.99 8/10/18
	A.A.G.	Ton E Can Lab Pool from 26th Can Inf Bn		3.10.18	Pcll 166 9/10/18
3/10/18	C.I.B.D.	To Lab. Pool		3/10/18	NR 506
26-10-18	28 Ca C.F.C.	attached for duty		19-10-18	B 213.
22-10-18	C.G.B.D.	To No 6 Dist C.F.C.		23-10-18	N R 1436
16.12.18	C.G.B.D.	Trans to Eng & posted to C.F.C. Depot	Sunningdale	16/12/18	NR 4.

(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) Signaller, Shoeing-Smith, &c.

W. 8635—M2733 2000m 9/17 (35011) C. P. & S., Ltd., Form B/103 E/1807. P.T.O.

O.A. Hewett

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

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.
21. 12. 18		O.C. C.F.C. T.O.S. Base Depot, C.F.C. Sunningdale 19.12.18 Pt. 11. D.O. 304			
		from 28 Coy. France		G. O. Gowler Lt. & A/Adjt. For O.C. Base Depot, Canadian Forestry Corps.	
30. 1. 19	B.D.C.F.C.	S.O.S. BASE DEPOT C.F.C. on ~~posting~~ tours to CC Rhyl MD 7	SUNNINGDALE	30. 1. 19	Pt. II D.O. 30.
				Lt. for O.C. B.D.C.F.C.	
31-1-19	6 F 6	Attached C.C.C. [illegible] return to Canada [illegible] No. 31 [illegible] C.C.C. Kinmel Park on [illegible] ing for Canada Part [illegible] Order No. 31.			
20-2-19	MD 7				
		For O/ Commanding MD 7 Wing, Kinmel Park Camp.			
5' 3' 19	OVERSEAS	T O S D. D. NO 7 . F'TON N. B	FEB 20 1919		
		S O S D. D. NO 7 ST JOHN N. B.			
				DISPERSAL STATION, ST. JOHN, N. B. FOR O. C., DISTRICT DEPOT No. 7	

Sheet 1

McFarlane W. P.

Name of Ship LAPLAND

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

Embarked FEB 20 1919

M. F. W. 54.
150M. 10-15.
H.Q. 1772-39-920.

Disembarked

Casualty Form—Active Service.

Unit, Regiment or Corps 104th Bn. C.E.F.

Regimental No. 709744 Rank Pte Name McFarlane—William Prescott

Enlisted (a) 11-11-15 Terms of Service (a) D of War Service reckons from (a) 11-11-15

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) (a) Civil Clerk.

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	28-6-16	S S Olympic.
		Disembarked	Liverpool	5-7-16	
27-1-17	OC.104th.	Transferred to 13th. Res.Bn.	Witley.	26-1-17	Pt II D.O. 2.
					H. A. Clarke Capt Adjutant 104th. O.S. Bn. C.E.F.
30-1-17.	Oc.104th.	T.O.S. 3th Res.Bn.	Bramshott.	27-1-17.	BO. 3. Pt.11. 30-1-17
3 5/14	Ob. 13th Res Bn	App. a/L. Corpl. with pay.	Shoreham	3 5/14	B.O. 89 d. 3 5/14
23-11-17	OC 13th Reserve	Reverts to Rank of Private on proceeding o/s	Seaford	23-11-17	B.O. 271 Pt 2.
24-11-17	OC 13th Reserve	S.O.S. on proceeding o/s to 26th Battalion	Seaford	23-11-17	B.O. 272 Pt 2.

H C Cathbourne Lt

Adjutant, 13th Canadian Reserve Bn.

W. S. Badge Class A No

CERTIFIED CORRECT. 29 NOV 1917 CAN. RECORDS

(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 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.
25.11.17	2 C. B. D.	ARRIVED C. B. D.	FRANCE	24.11.17	N. R. 387 PART II ORDERS No 122 D 17
28.11.17	2 C. B. D.	LEFT C. B. D. FOR	CCRC.	28.11.17	N. R. 764
28.11.17	CCRC	arrived	"	28.11.17	" 46
	O. C.....BN	ARRIVED _____ BN.	FIELD		B. 213 D
16.3.18	CCRC2	To unit.	"	16.3.18	N.R. 133.
23.3.18	26 Bn.	Joined Bn.	"	17.3.18	B213
31.7.18	" "	Wounded	"	27.8.18	K.I.17-1164
27.8.18	5 C.F.A.	SW, leg h. adm.		27.8.18	a 8112
		to C.C.S.		27.8.18	
28.8.18	12 Staty	" " " to	29 A.S.	28.8.18	W 2047
27.8.18	" "	" " " adm		27.8.18	W.1783.
29.8.18	4 Gen.	GSW Leg h adm		29.8.18	H 5305.
1.9.18	12 Con. Dep.	" " " adm.		1.9.18	H 6180
30.8.18	6 Con Dep	" " " adm		30.8.18	H. 5601
30.8.18	4 Gen	" " " to	6 Con. Dep.	30.8.18	H. 5661
1.9.18	6 Con. Dep.	" " " to	12 Con Dep.	1.9.18	H. 5350
7.9.18	42 C.C.S.	" " " adm.		27.8.18	H. 6563.
12.9.18	10 Con. Dep.	" " " to	12 Staty.	27.8.18	
		→ to	5 Rest Camp	12.9.18	K 188.
15.9.18	C.I.B.D.	T.O.S. "A" x 10 Con Dep.		15.9.18	447.
18.9.18	" "	Classified "TB." Denture		18.9.18	W 3339-721.
9.9.18	10 Con. Dep.	GSW Leg. h. adm.		9.9.18	K. 424.
9.9.18	12 Con. Dep.	" " " to	10 Con. Dep.	9.9.18	K 816
25.9.18	A.I.D. Edns.	Denture Def. Visions & B.	C.I.B. Dep.	25.9.18	W 3339-741

ORIGINAL

MEDICAL HISTORY SHEET.

ORIGINAL

Surname Mac Farlane Christian Name William Prescot

Examined on 11th day of Nov 1915 at Sussex

Birthplace City or Town Petitcodiac County N.B.

Apparent age 23 yrs

Trade or occupation Clerk

Height 5 Feet 9½ Inches.

Weight Lbs.

Chest measurement Minimum 37 inches. Maximum expansion 3½ inches.

Physical development

Small-Pox Marks

Vaccination Marks Arm Right. Left. Number

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Approved by [signature]

Rank Capt M.O.

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

Date	Result	Vaccinations.
14/8/16		J C E. M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
20-1-16		[signature] M.O.
1-3-16		[signature] M.O.
29/11/16	TAB	[signature] M.O.
20/11/17	TAB 2	[signature]

15/11/17 TAB 2

Enlisted on 11 day of 11 1915 at Sussex N.B

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	104th Batt.	~~181324~~		
Transferred to	26th Bn:	709744		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Sunnydale Berks	10-1-19	Def vision Bii	J G Munroe Capt Camp

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.—5-15.
H. Q. 1772-39-439.

J. Mc

Surname McFarland Christian Name Wm

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.

To be made out in duplicate.

H.Q. 54-21-23-53

ORIGINAL

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 104th O. S. Bn. C. E. F.

(2) Regimental Number 709744.

(3) Full Name of Soldier McFarlane, William Prescot, (Private)

(4) Place of Birth Petitcodiac, N. B.

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

(6) If married, state,
(a) Full name of your wife No.

(b) Present Postal Address

(7) Are you a widower ? No.

(8) Have you any children ?

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

200M.—3-16.
I772-29-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes.

If so, state name and address John McFarlane, Petitcodiac, N. B.

(10) Is your Mother alive? Yes.

If so, state name and address Mrs. May E. McFarlane,

petitcodiac, N. B.

(11) If your Mother is a widow

Are you her sole support, or not?

(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.

(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.

(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.

(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.

A. J. Brooks Maj
Officer Commanding.
104th "OVERSEAS" BATTALION, C.E.F.

Date JUN 2 1916

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 709744 (Rank) PRIVATE

Name (in full) MacFARLANE WILLIAM PRESCOTT enlisted in

the 104th Battalion

CANADIAN EXPEDITIONARY FORCE at Sussex, N.B. on the 11th

day of November 19 15

HE served in CANADA ENGLAND FRANCE

and is now discharged from the service by reason of DEMOBILIZATION Authority

Routine Order 1420.

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

Age 26 years 7 months

Height 5 feet 9½ inches

Complexion DARK

Eyes HAZEL

Hair BLACK

Marks or Scars NIL.

W. S. MacFarlane
Signature of Soldier

Ramsay Capt. O. C.
Issuing Officer DISPERSAL STATION, ST. JOHN, N. B. FOR
O. C. DISTRICT DEPOT #7
Rank

Appointment

Date of Discharge 18-3-19

Signed at St. John, N.B. this 18th day of March 19 19.

in Military District No. 7

File Reference No.

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

M. F. W. 39a.
250m.—6-18.
H. Q. 1772-39-882.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. ..... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

.....

Medals and Decorations .....

.....

Remarks .....

.....

Signed at ..... this ..... day of 19

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

1.—That discharge certificate must be carried when wearing uniform.

2.—That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing, and

3.—That wearing of uniform renders him liable to usual military discipline, as if on the strength of a unit.

.....
Name of Officer

.....
Rank

.....
Appointment

CLASS A
WAR SERVICE BADGE
NO. 72578 Issued

L. L. Job 310—M. & D. 6574.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
50m.—4-16.
H. Q. 1772-39-819.

To Whom Mrs. Mary McFarlane

Address Petitcodiac N. B.

Rate $15

JUL - 1916

By Whom Assigned McFarlane, Wm. P.

Regtl. No. 709744.

Rank Pte.

Corps "A" Co. 104th Batt.

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			CONSOLIDATED 2 ACCOUNT
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
50m.—4-16.
1772—39—819.

Sheet No. 2. Mrs Mary. McFarlane. PAYMENTS. Name of Soldier McFarlane, Wm. P.

L. L. Job 310.—Req. 6574.

#709744, "A" Co. Pte, 104th Batt.

JUL - 1916

$15—

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July		Z 12502	15	
Aug.		B 13941	15	
Sept.		M. 17292	15	
Oct.		M 22802	15	
Nov.		K 27292	15	
Dec.		K 35323	15	
Jan.	1917	Z 40690	15	
Feb.		Z 46031	15	
March		P 51258	15	15 60
April		A 32540	15	15-15.
May		O 96556	15	15
June		M 16071	15	2
July		O 23750	15	2
Aug.		Z 32462	15	
Sept.		V 36610	15	2
Oct.		F 43384	15	
Nov.		X 49945	15	
Dec.		M 59194	15	270
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.				

P. 552

MARRIED OR SINGLE Single

PLACE OF BIRTH Petitcodiac, N.B.

NAME AND ADDRESS OF NEXT OF KIN Mrs. Mary McFarlane
Petitcodiac, N.B.

RELATIONSHIP OF NEXT OF KIN Mother.

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ Nil. EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES. PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Pro. Lance Corporal	2-5-17	Bo 89 3/5/17
Revd to Private for Overseas own request	23.11.17	Bo. 271 23/11/17

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 109744 ~~1/Cpl~~ RANK Pte. NAME McFarlane, William Prescott.

IF IN PERMT. CORPS / WHAT UNIT — UNIT 104th Bn — TRANSFERRED TO 13th Res Bn DATE 28/2/17. AUTHORITY Bo 2. 27/1/17.

PERMANENT FORCE ALLOWANCES — TRANSFERRED TO 26 Bn DATE 1.1.18 AUTHORITY 122. 11/5/17

PLACE OF ATTESTATION Sussex. N.B. — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 11 – 11 – 15 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY MONTHLY $ 15.00 DATE EFFECTIVE July 1/1916

PAYABLE TO Mrs. Mary McFarlane. Petitcodiac, N.B. RELATIONSHIP Mother.

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

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

DISCHARGE DATE AND PLACE to Canada 1-2-19 REASON AND AUTHORITY N.R. 2155 27/1/19. S'dal to S'dal M.D.7. C.D.

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE 1916	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
July 1st.														11	11 00									Balance from Canada							11 00				
July	31	1 00	31	00	31	1 0	31	0							34 10	16	8/7/16	63	17/7/16			1 10	3 7/16	9 73	487		730	15 00		36 90	8 20				
Aug	31	1 00	31	00	31	1 0	31	0							34 10	102	14 8/16							487				15 00		19 87	22 43				
Sept	30	1 00	30	00	30	1 0	30	0							33 00	229	31/8/16	271	15/9/16					9 73	730			15 00		32 03	23 40				
Oct	31	.	31	..	31	.	31	0							34 10.	321	30/9/16	364	15/10/16					730	9 73			15 ..		32 03	25 47				
Nov.	30	1 00	30	..	30	1 0	30	0							33 .	407	30/10/16							9 73				15 ..		24 73	33 74		33 74		
Dec/16	31	1 00	31		31	1 0	31	0							34 10	495	18/11/16							7 30											
			18 40													540	30/11/16							9 73				15 ..		32 03	35 81				
1917																583	15/12/16							2 43											
Jan	31	1 00 10	34	10											34 10	631	31/12/16							17 03				15 ..		34 46 31 2	35 45 03				
Feb	27	1 00 10	29	70											29 70	701	15/1/17							9 73				15 ..		24 73 22 6	40 42 18				Transf to 13th Res Bn 28/2/17 Bo 2 27/1/17
	1		1	10											1 10															41 52				
Mch	31		34	10											34 10	67	6/2/17							9 73		2 44		15		34 47 27 1	41 15 25				
															3 12 40	67	15/2/17			1317	27/3	25th Res		7 30											
Apl	30		33												33 .			56	14/4						24 33			15		39 33 31 0	34 82 58				
															3 45 40																				
May	29	1 00 10	34	50											35 60	140	28/4							19 47				15		34 47	35 95		75	35 20	Pro. Dp. 89 - 3/5.
			1	10																														
			370	00										11	381 00									1248	4623	244	730	165		345 05	3595				

709744 ~~L Sept~~ 1/2 McFarlane W.P. A.P. $15.00

Date 1917	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.	Acquittance Rolls 1 Date	Acquittance Rolls 2 No.	Acquittance Rolls 2 Date	Acquittance Rolls 3 No.	Acquittance Rolls 3 Date	Acquittance Rolls 4 No.	Acquittance Rolls 4 Date	Cash Payments 1	Cash Payments 2	Cash Payments 3	Cash Payments 4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
			370											11	381									124 08	46 23	2 44	7 30	165		345 05	35 95		75	35 20	
June	30	1 05/10	34	50											34 50	371 / 780	30/5 / 15/5							9 73 / 9 73				15	2 58	37 04	33 41		1 50	31 91	
July	31		35	65											35 65	463 / 549	15/6 / 29/6							7 30 / 9 73				15		32 03	37 03		1 75		
Aug	31		35	65											35 65													15		15	57 68		2		
Sep	30		34	50											34 50	643 / 734	6/7 / 30/7	904 / 831	30 / 16/8					9 74 / 12 17	9 73 / 9 74			15		56 38	35 80		2 25		
			510	30										11	521 30									175 45	65 70	2 44	7 30	225	2 58	485 50					

Month	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Deferred Pay	Sep. Ave. Eng.
Sept bal		AS ~~35 80~~							35 80	2 25	
Oct	L/C Pay	35 65		Can. Ass. Pay				15			
"				AR 967 15/9 13 Res Bn	9 73						
				AR 1003 29/9 " " "	12 17				34 55		
		35 65			21 90			15			
Nov:	22 days L/C Pay	25 30		Can. A. Pay Nov				15			
	8 " P. Pay	8 80		AR 1101 31/10 13 Res Bn.	9 73						
Dec	P. Pay	34 10		AR 1056 15/10 " " "	9 73						
				" 1145 15/11 " "	9 73						
				AR 1175 23/11 " "	4 87						
				Can. Ass. Pay Dec				15	38 69	5 25 / 2 75	
1917 Jany	P. Pay	68 20 / 34 10		Can. A. Pay	34 06			30 / 15			
				AR 542 2nd Div. Wing C.C.R.C. 7.12.17	4 46						
				✓ 751 ✓ 24-12-17	12 49				40 84	5 25	
		34 10			16 95			15			
Feby	P. Pay	30 80		Can. Ass. Pay				15			
				AR 901 C.C.R.C 12-1-18	4 46						
				✓ 1009 ✓ 27-1-18	3 57						
				✓ 4587 C.C.S.C 6-2-18	4 46				44 15	5 25	
		30 80			12 49			15			
Mar	P. Pay	34 10		Can. Ass. Pay				15			
				AR 1038 4th C.F.A 18-2-18	3 57						
				✓ 1091 ✓ 2-3-18	4 46						
				✓ 1152 ✓ 20-3-18	3 57				51 65	5 25	
		34 10			11 60			15			

Month	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Deferred Pay	Sep. Ave. Eng.

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY * ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1st July 1916 Stop.	EFFECTIVE DATE:-
AMOUNT:- ~~1.6.00~~ 1-2-19.	AMOUNT:-

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. Mary McFarlane, (Mother)
Petitcodiac N.B.

NAME:- McFARLANE, William Prescott
NUMBER:- 709744

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private

UNIT AND TRANSFERS

ORIGINAL UNIT:- 104th Battalion
DATE ACCOUNT FIRST OPENED:- 1st July 1916

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T.S.F.-O	UNIT TRANSFERRED TO
			26th Bn
166 9/10/18	1/11/18	26/11/18	Labour Pool 44

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
15-1-19	639	Base Depot b.f.t.	£2.0.0 9/73				
"		London	£20.0.0 97/33				
19-1			£3.6.0 14/60				
21-1-19	Q4005 377		£1- 1/95				
22-1	668	Base Depot b.f.t.	£2.0.0 9/73	L.P. b. 31/1/19		br. Rat 11 44 24/1/19	

PARTICULARS OF RENDERING NON-EFFECTIVE:- Transferred to Canada 1-2-19. A.R 2155 22/1/19 S'dale to S'dale M.D.7.

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBSISTENCE ALLOWANCE
	1 00	10		

MONTH 1918	PARTICULARS	CR 1	CR 2.	PARTICULARS	DR 1	DR 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mar	Balance forward								51 65	525	
April	P. Pay	33 ✓		Can. Ass. Pay				15			
				AR 27 26th Bn 4-4-18	4 4 6						
				✓ 87 ✓ 25-4-18	3 5 7				61 62		
		33			8 03			15			
May	P. Pay	34 10 ✓		Can. Ass. Pay				15 ✓			
				AR 149 26th Bn 10-5-18	4 4 6						
				✓ 204 ✓ 28-5-18	3 5 7				72 69		
					8 03			15			
June	P. Pay	34 10		Can. Ass. Pay				15 ✓			
		33 ✓		AR 257 26th Bn 15/6	3 5 7						
				✓ 295 ✓ 24/6	4 4 6				82 66		
		33 ✓			8 03			15			
July	P. Pay			Can. Ass. Pay				15 ✓			
		34 10 ✓		AR 329 26th Bn 2/7	4 4 6						
				✓ 397 ✓ 18/7	3 5 7				93 73	525	
					8 03			15			
Augt.	P. Pay	34 10 ✓		Can. Ass. Pay				15 ✓			
		34 10 ✓		AR 206 5th C.D. Bde 25/8	3 5 7						
				✓ 9003 C.G.B.D. 31/8	5 3 5				103 91		
					8 92			15			
Sept.	✓	34 10 ✓		C. A. P.				15 ✓	121 91		
		33 ✓		AR 1926 C.D.B.D. 19/9	4 4 6				117 45	525	
					4 4 6			15			
Oct.	✓	33 ✓		C. A. P.				15 ✓	136 55		
		34 10 ✓		AR 2183 C.D.B.D. 2/10/18	4 6 6				131 89	525	
				DNAR 1335 C.G.B.D. 30/10	4 6 6			15	127 23		
		~~34 10~~			~~9 32~~						
Nov		33 ✓		C A P				15 ✓	145 23		
				DN AR. 1776 31/10/18 ~~6~~ 4 Days	5 6 0						
				AR 7455 14/12/18 64 BD	4 6 6						
				DN AR 15/11/18 15/11/18 6 676	13 0 6						
				DN AR. 1952 30/11/18 ✓	5 6 0						
				DN AR 24/12/18 24/12/18 BD ✓	9 7 3				106 58		

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
		33		Fwd.	38 65			15	106 58		
Dec		34 10		C A P				15	125 68		
Jan.		34 10		C A P				15	144 78		
		101 20			38 65			45			
				C P 7515 13/1/19.	97 33						
				C P 10211 19/1/19 End	14 60						
				14 AR 926. 13-27 9. Kummel	48 7						
				19 Dn AR 6669 22/1/19 BD 676 19	9 73						
				23 Dn AR 6376 15/1/19 C 776 23	9 73				8 52		
					136 26						
Mch				Quots. Jo R. #377. 21/1/19		195			677		

S. O. S. to Canada 20/2/19

CANADIAN
ASSIGNED PAY AUDITED
to 31/1/19
E. H. Bradley
AUDIT CLERK
DATE 13/6/19

W.S. Badge - Class A. No.

23-9-40.

CLASS A
WAR SERVICE BADGE
NO. 79518 Issued

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 709744 Cat. B2

2 Rank. Pte.

3. Name. Mac FARLANE William Prescot

4. Unit. 104th Bn. C.F.C.

5 Date of Discharge 18-3-19 Place St John NB

6 Reason for Discharge Demob

service in France 13/12

next of kin — mother.

7. Authority. RO 1420 (C)

8. Proposed Residence after Discharge St John

Occupation — Clerk

LAPLAND
Name of Ship
Embarked FEB 20 1919
Disembarked 3

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.?

Signature of Soldier.

Released 28-8-39
649-M-56281

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

Date

Signature (O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

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

This space to be for numbers.

CLASS A
WAR SERVICE BADGE
NO. 29518 Issued

Proceedings on Discharge.

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

No. 709744

Rank PRIVATE

Surname MacFARLANE

Christian name WILLIAM PRESCOT

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

Corps (Squadron, Battery or Company) DISTRICT DEPOT No.7

Date of discharge 19/3/19

Place of discharge St. John, N.B.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

		Descriptive marks
Age	26 years 7 months.	
Height	5 feet 9½ inches.	
Complexion	DARK	
Eyes	HAZEL	
Hair	BLACK	NIL.
Trade	Clerk	
Intended place of residence (To be given as fully as practicable.)	St. John, N.B.	

2. The above-named man is discharged in consequence of DEMOBILIZATION Authority Routine Order 1420

Authority for discharge.....

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.

200M.—5-18.
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, and that I have received my permanent discharge certificate.

(Place) St. John, N.B. Wm. Mac Farlaine *(Signature of Soldier.)*

(Date) 18-3-19 *(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) St. John, N.B.

(Signature) R.A. Major Capt. O. C.

(Date) 18.3.19

DISPERSAL STATION ST. JOHN, N. B. FOR O. C. DISTRICT DEPOT #7

Reservations referred to at Para. 8.

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

none

W P MacFarlane

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form	B. 263
Squadron / Battery / Company } Conduct Sheet,	"	B. 263a
or		
Field Conduct Sheet	"	W. 178
Copies of Convictions, by C. P.		in MS.
Med. Hist. Sheet,	Militia form	B. 313
Casualty Form	"	W. 54
Medical Report for Invalid§	"	B. 227
Dental History Sheet	"	B. 465
Last Pay Certificate	"	W. 44
Duplicate Discharge Certificate	"	W. 39A
‡Form of Will	"	W. 82

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

Attestation Paper	Militia Form	W. 23
or		
Particulars of Recruit	"	W. 133
Proceedings on Discharge	"	B. 218

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(a) Proceedings on Discharge

(b) Attestation.

(c) Medical History Sheet.

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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.

C.A.D.C. 5009A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

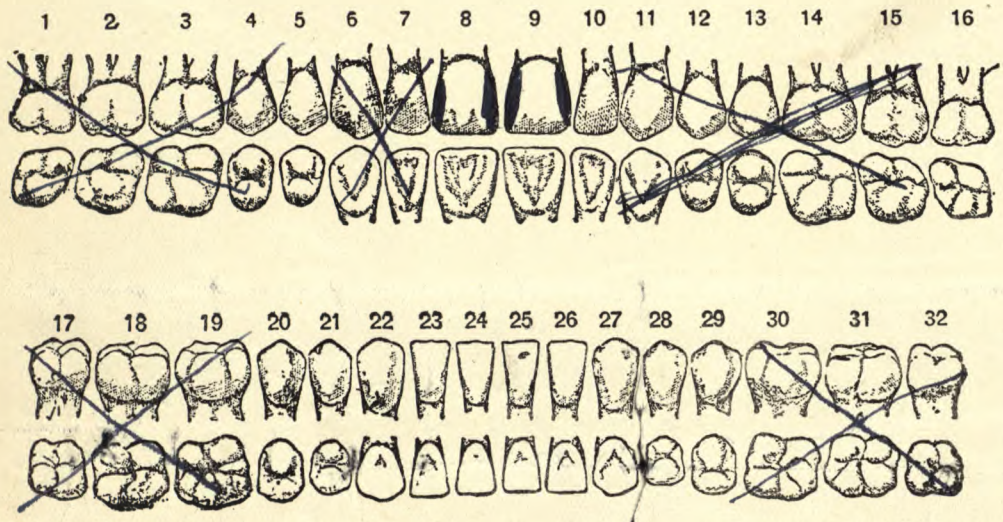
DIRECTIONS TO DENTAL OFFICERS

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.

NAME OF SOLDIER (Block Letters) McFARLANE W.P.

REGIMENT C F C. RANK Pt No. 709744

Date of Examination in England 24.1.19 | Date of Examination in France



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 9. 10. 2021 Examined for Discharge. 17-3-19. Incomplete.
2. EXTRACTIONS None
3. CROWNS None
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper 1. 2. 3. 4. 6. 7. 8. 10. 11. 12. 13. 14. 15.
   - (c) Full Lower
   - (d) Part Lower 17. 18. 19. 30. 31. 32

HAS HE EVER REFUSED DENTAL TREATMENT? No

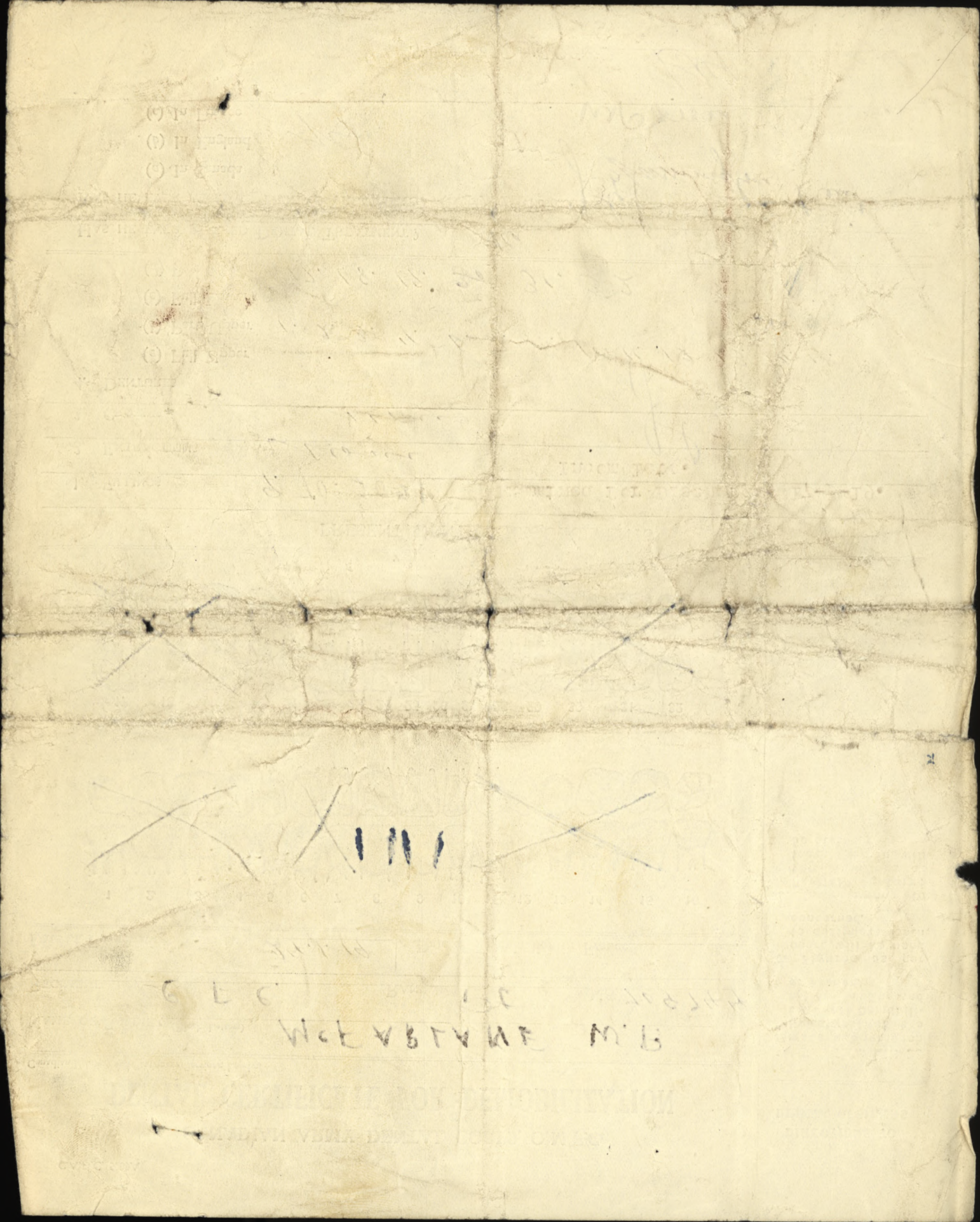
HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)

- (a) In Canada
- (b) In England Yes
- (c) In France

J. E. Harrington Lieut

W P McFarlane

Signature of Dental Officer J. H. Reid Capt.



McFarlane

Vision R. blind L. 6/6.

R. Eye injured in 1914. Pupil Eccentric. Re
Iris flab. & tremulous. No details of fundus.
Sight destroyed at time of injury
L. Eye. Normal.

The Condition neither Caused & nor aggravated
by Service

Cat B. 2

Capt

Form D.M.S. 1394
10M

PROCEEDINGS OF A MEDICAL BOARD.

Dated at 191

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

Local Unit ..... Overseas Unit ..... Age .....

Examination held at .....

DISABILITY.
Overseas - Local
(scratch one out)

PRESENT CONDITION.

.....

.....

.....

.....

.....

PART I. A.F.B. 179 Canada (Revised 1918). [100m. 16/11/18 D.495

Reserved for M.H.C.

Regt. No. 709744 Rank PTE. Surname McFARLANE Christian Name WILLIAM PRESCOT

Unit or Corps—(a) Overseas from United Kingdom 26TH BAT. (b) in United Kingdom

Born at—Town PETITCODIAC County or Province N.B Country CANADA

Date of Birth—Day 2 Month JULY Year 1893 Age 25 yrs. 6 months.

Joined at SUSSEX N.B Date 11. 11. 15

Former trade or occupation CLERK

Permanent Marks or any peculiarity that will serve for future identification :—

VAC MARK LEFT. ARM.

Height—feet 5 inches 9½ Colour of eyes BROWN

Signature of Soldier (*for identification purposes*) W. P. McFarlane

Medical Report

☞ *Read carefully the instructions on last page of this form.*

1. DISABILITY.

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (a): DEFECTIVE VISION

Disabilities Group (b): NA

Disabilities Group (c): NA

2. CAUSE OF DISABILITY

		Place of origin.	Date of origin.
(i.) As to Group (a) above.	FOLLOWING INJURY	CANADA	MAY 1914
(ii.) As to Group (b) above.	NA	NA	NA
(iii.) As to Group (c) above.	NA	NA	NA

3. Is the disability due to disease contracted or injuries received prior to Active Service ?

(i.) As to Group (a) above ? YES If yes, has Active Service aggravated it ? NO

(ii.) As to Group (b) above ? NA If yes, has Active Service aggravated it ? NA

(iii.) As to Group (c) above ? NA If yes, has Active Service aggravated it ? NA

4. Is the disability due to disease contracted or injuries received while on Active Service ?

(i.) As to Group (a) above ? NO

(ii.) As to Group (b) above ? NA

(iii.) As to Group (c) above ? NA

PART I. (continued).

5. MEDICAL HISTORY. No Past Illnesses Clerk
Enlisted 11/11/15 arrived England July 1916
In France Nov 1917 to Dec 19/18
was in Hospital in France in
aug 1918 with slight wound left
knee. No disability joined Infantry
in Canada Transferred in France
to C.F.C. on account of eyes.
No documentation

6. PRESENT CONDITION. Complaints Defective
eye sight.
Exam Specialists Report
Vision R. Blind
L 6/6
Right eye injured in 1914 Pupil Eccentric
Iris Flat & Tremulous no details of
fundus sight destroyed at time of
injury. L. Eye normal condition
neither caused by nor aggravated by
service B II
Heart normal in size rate & response
to effort lungs normal
Other Systems normal

7. OPERATION. (i.) Was one performed? no (ii.) If so, state what. na
(iii.) Was one advised and declined? na

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto, unless there is evidence to the contrary.

8. (i.) Is there loss or decay of teeth attributable to Active Service? no
(ii.) If so, describe. na

9. DO YOU RECOMMEND:—
(a) Fit for duty? (state category) B II
(b) Invalid to Canada? no
(c) Discharge from the Service as permanently unfit? no

Date of Report Jan 10 1919
Signed E C Risebrough Lt
Officer in medical charge of case.
Station Cunningdale

I have satisfied myself of the general accuracy of the above Report,
and concur therein *except
..... {Officer i/c Hospital / S.M.O. Brigade} Strike out one of these

Dated at ..... Station, on ..... 191.....

*Delete if inapplicable.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

10. Is the disability fully described in Part I. (1)?
If not, describe it.

yes

11. Is the cause of the disability fully described in Part I. (2)?
If not, describe it.

yes

12. From the medical information now adduced, was the disability caused or aggravated by:—

(a) Negligence of the Soldier { Caused? / Aggravated? } no

(b) Misconduct of the Soldier { Caused? / Aggravated? } no

13. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(Estimate at none, 5%, 10%, 15%, 20%, etc.)

14. THE DISABILITY DUE TO SERVICE.—*(See Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in this estimate.)*
What part of the entire disability estimated next above (13) is due to causes arising during Active Service?
(Estimate at none, 1/10, 2/10, 3/10, etc., or all.)

Na

15. Permanency of the Disability due to Service estimated next above in (14).
(i.) Is it permanent?
(ii.) If not permanent, what is its probable minimum duration (*in months*)?

16. If an operation was advised and declined, do you consider the refusal to have been unreasonable?

17. Can the former trade or occupation be resumed? yes.

18. REMARKS:—

Condition as described in part one.

Auth AS Tel 9083 11-11-18

19. RECOMMENDATION:—

(a) Fit for duty? (*state category*) B ii

(b) Invalid to Canada? no

(c) Discharge from Service as permanently unfit? no

Date of Board 10-1-19

Signatures of the Board: J E Munroe, President. Capt Camm; T Rowland Capt Camm

Station Sunnydale Bath

Approved T. J. Donovan Major A.D.M.S.

Dated at ..... Major, C.A.M.C. Station
for A.D.M.S., Canadians, London Area.

ASSISTANT DIRECTOR OF MEDICAL SERVICES, CANADIANS. LONDON AREA. JAN 13 1919 13. BERNERS ST. LONDON, W.1

191

PART III.

Statement of the Soldier

(This is to be completed only in the case of the Soldier taking his Discharge in England.)

(Sections 1, 2, 5, and 6 are to be read to the Soldier.)

I, the undersigned W. P. MacFarlane have heard the description of my disability read, and am satisfied ~~(or not satisfied) with it.~~ (If dissatisfied, statement should follow.) I complain in addition of :—

W. P. MacFarlane

Signature of Soldier examined

Instructions to Medical Officers

Question 1.—State the disability in terms of a diagnosis, that is, a diagnosis of the existing condition as distinguished from the disease or injury which caused it. It should be noted that in medical cases the disability may be the actual disease; for example, Tubercle of Lung, Chronic Bronchitis, Myalgia, Gastric conditions and so forth. (Follow the nomenclature as laid down in the "List of Diseases" of 1915, and amended by A. C. I. No. 1587 of 1917.)

Question 2.—The cause of the disability when known should be stated and care should be taken to establish as correctly as possible the place and date of origin. This is important in view of the relationship of Questions 3 and 4 to Question 5.

Questions 3 and 4.—*NOTE*—By Active Service is meant Service with the Colours in Canada, the United Kingdom or elsewhere during the present war, (since the 4th August, 1914.)

Question 5.—MEDICAL HISTORY.—State concisely the essential points of the history of the case as supported by documentary evidence. If further evidence is considered necessary to complete the Medical History, the same not being supported by documents, this should be obtained by questioning the soldier, but should be distinctly shown as "Patient's Statement." It is considered advisable that these latter statements be grouped apart from the evidence supported by documents available to the Medical Officer.

Extracts should be made from all entries on the Medical History Sheet.

If answers to Nos. 2, 3 or 4 show that the Soldier is suffering from some condition which pre-existed enlistment, it is advisable that these answers be substantiated as far as possible by statements obtained from the Soldier showing history of previous illness or injury.

Question 6.—PRESENT CONDITION.—As this question is primarily intended for the Medical Officer's report, in answering show clearly the condition of the Soldier at the time of examination.

It is directed that the objective and subjective matter be arranged in separate groups. The objective matter is considered to be the more important, in that it consists of a statement of the Medical Officer's actual finding.

Specialists' reports bearing on the PRESENT CONDITION should be attached.

In addition to description of the disability, a report on "all systems" is required in order that the whole when completed may be a true pen portrait of the Soldier's condition.

The Medical Officer in charge of the case will fill out pages 1 and 2 of this Form. The original must be wholly in the handwriting of the Medical Officer. The copies may be typewritten but must be signed by the Medical Officer who must be responsible that these are true copies of the original.

Finally the O. C. Hospital or S. M. O. or an Officer delegated for such duty by the A. D. M. S., is required to sign a certificate at the bottom of page 2, which reads as follows :—

"I have satisfied myself of the general accuracy of this report and concur therewith, except....."

This is a most important part of the paper and one to which the attention of the Officers concerned should be frequently drawn as it is by such strict supervision that the accuracy and good results of Medical Board work can be assured.

ENTRIES OF RECATEGORIZATION

Date	Station	Category	Signature of M. O.	Date	Station	Category	Signature of M. O.

Petitcodiac, N. B.

AUDITOR | PAYMASTER

M.D.No.7

M. OR S.

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

REGT. No. 709744 RANK Pte. NAME (IN FULL) McFARLANE W. P. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Nil. DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. — IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

Lapland 1-319

DATE OF ATTESTATION 11/4/15 — TRANSFERRED TO — DATE — AUTHORITY

2595

ASSIGNED PAY $ 15-00 DATE EFFECTIVE Nov. DD. 1-4-19.

PAYABLE TO Mrs. M. McFarlane RELATIONSHIP Mother

ADDRESS Petitcodiac, N.B.

ANY CHANGE IN ASSIGNEE OR ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED PLACE St. John DATE 18-3-19 REASON Demob. AUTHORITY D.O. 79 IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	C.	TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	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.	$	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. 20.67
Jan.							11	44	11	44																								11	44		Bal Brot Dwg 1-P.6. 31-1-19
Feb.	28	1.10	30	80					30	80	K	P	6	S	6	S	4	87	5	87	20	00					15	00			59	74	17	50			A.P.pd. by Ottawa
Mar.	18	1.10	19	80	35	00	11	20	66	00	43	19					105	00									15	00			120	00	71	50			A.P.pd. by Ottawa Allts. 2-6/3/19 T.O.S. 20.67
					Allts																												Soldiers				
183 days @ $2.30			420				420										71	50													71	50	348	50			cst payt as above
																	68	50													68	50	280				CR 4 393456 19/4/19
																	70														70		210				CR 4 400018 00546 19/5/19
																	70														70		140	00			AR.73 CR. 848467 19/6/19
																	70														70		70				CR. 12596 28 19/7/19
																	70														70						18/8/19
																																					From effective
B.			420				420										420	00													420	00					

WAR SERVICE GRATUITY

MONTH	PAY AND F.A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGI-MENTAL CHARGES		OTHER CHARGES				TOTAL DEBITS		BALANCE				PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT								COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3												DEBIT		CREDIT		
			$	C.	$	C.	$	C.	$	C.	NO.	DATE	NO.	DATE	NO.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

4612

Date of Assignment July 1/16

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15-			

PARTICULARS OF SEPARATION ALLOWANCE

No. 709744

Rank Pte Promoted Reverted Discharge

Soldier's Name Wm. P. McFarlane.

Battalion "A" Co - 104th Battn.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Mary McFarlane.

Address Petitcodiac, N.B.

Change of Address

1

2

3

4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total	
Dec 31	—		270	270	
Jan 18	C 61486		15	15	
Feb.	G 72370		15	15	✓
Mar.	L 95039		15	15	✓
Apr.	E 2706		15	15	✓
May	N 17617		15	15	✓
June	F 22149		15	15	✓
July.	K 28862		15.	15.	✓
Aug.	L 39563		15	15	✓
Sept.	Q 44392		15	15	✓
Oct	T 51685		15	15	✓
Nov	P 57150		15	15	✓
Dec	S 66914		15	15	✓
Jan 19	S 73588		15	15	✓
Feb	2 78285		15	15	✓
Mar	D 90982		15	15	✓
				495	

012329-W-5-2 REMARKS

A/c Closed 31-3-19

Ret'd per Lapland

Date 1-3-19 F.X. 6-3-19

M.D. # 7

Clerk E. Reade

M.R.O. Des. 67463. 6 3/19

CANADIAN
ASSIGNED PAY AUDITED
to 31/3/19 W. Binks
AUDIT CLERK
DATE 12/6/19

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

M. F. W. 128
400m.—6-17—1772-39-1141
L. L. 22320—M. & D. 7693.

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.