ORIGINAL

ATTESTATION PAPER.

No. 901659

~~193rd. BAT.~~

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

C. E. F.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? McIsaac
1a. What are your Christian names? Daniel
1b. What is your present address? Beaconton NB
2. In what Town, Township or Parish, and in what Country were you born? West Post Road Inverness
3. What is the name of your next-of kin? Daniel J McIsaac
4. What is the address of your next-of-kin? Inverness NS
4a. What is the relationship of your next-of-kin? Father Canada
5. What is the date of your birth? May 5th 1892
6. What is your Trade or Calling? Miner
7. Are you married? no
8. Are you willing to be vaccinated or re-vaccinated and inoculated? yes
9. Do you now belong to the Active Militia? no
10. Have you ever served in any Military Force? no
If so, state particulars of former Service.
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

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Daniel McIsaac, 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.

Daniel McIsaac (Signature of Recruit)

Date March 19th 1916. Colin MacDonald (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Daniel McIsaac, 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.

Daniel McIsaac (Signature of Recruit)

Date March 19th 1916. Colin MacDonald (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 Stellarton this 19th day of March 1916

J. Welsford Macdonald (Signature of Justice)

A Justice of the peace in and for the County of Pictou

A Justice of the peace in and for the County of Pictou, N. S.

M. F. W. 22.
600M.—2-16.
H. Q. 1772-89-841.

Description of Mc Isaac Daniel on Enlistment.

Apparent Age 23 years 10 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 6 ins.

Chest measurement: Girth when fully expanded 36½ ins.; Range of expansion 4 ins.

Complexion Clear

Eyes Blue

Hair Brown

Religious denominations:
- Church of England
- Presbyterian
- Methodist
- Baptist or Congregationalist
- Roman Catholic X
- 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).

132 pounds-

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date MAR 24 1916 191 .

Place Stellarton N S

E D McLean Capt
193 Battalion C E F
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.

Mc Isaac Daniel 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.

APR 24 1916

John Stanfield Lieut. Col. (Signature of Officer)
Comd'g. 193rd. Overseas B'n. C. E. F.

Date ~~APR 24 1916~~ 191 .

REGIMENTAL DOCUMENTS

NAME Mc. ISSAC. DANIEL REGT. NO. 901659 UNIT 193rd Bn. H. Q. FILE NO. Hq 2514/79

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category
1	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Dismb.
	MEDICAL EXAMINATION (M.F.W. 129)					
1	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	G.7.W3997.					
1	Mi.7.W. 192					
2	Misc					
1	M.F.W. 67					
1	B. 122					
1	Rayeard					

W 2589
100M-11-16
1772-39-1377

6911

DUPLICATE

To be made out in duplicate.

H.Q. 54-21-23-53

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

INSTRUCTIONS.

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

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

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

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

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

---

(1) Name of Overseas Unit which Soldier joins ..... 193rd. BAT. C E F.

(2) Regimental Number 901659

(3) Full Name of Soldier ..... McIsaac Daniel

(4) Place of Birth ..... Inverness Co. N.S. Canada

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

(6) If married, state,
(a) Full name of your wife ..... —

(b) Present Postal Address ..... —

(7) Are you a widower? ..... —

(8) Have you any children? ..... —

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

Also their names and ages ..... —

M. F. W. 67.

300M.—5-16.
1772 39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ? Yes

If so, state name and address Daniel J McIsaac Inverness

(10) Is your Mother alive ? Yes

If so, state name and address Mrs. Kate McIsaac
Inverness. Cape Breton Can

(11) If your Mother is a widow No

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.

—

—

(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. P. Lawford
J. Stanfield, Lieut. Col. Officer Commanding.
Comd'g. 193rd. Overseas B'n. C. E. F.

AUG 19 1916

Date

No. 90165-9 Rank Pte. Name Mc Isaac Daniel.

T. O. S. 19-3-16 Unit 193rd Battalion
(Ds #24-28-3-16)

M. D. 6

Paid From 1916	Paid To 1916	Sig. or Rec't	Promotions, Transfers, Discharges, etc.	
			Particulars	Authority
Mar 19	Mar 31	V		
Apr		"		
May		"		
June		"		
July		"		
Aug		"		
Sept		"		
Oct		"		

MOM

Number 901659 Rank Pte B

Surname McISAAC

Christian Name Daniel V

Units 42nd Bn Can Inf Theatre of War France.

Date of Service 6-12-16.

Remarks Mc Isaac St.

Latest Address Inverness Town
C. B. N.S.

Roll No

200m.-2-21.M. "B" Page 9989.

Next of kin

Address on leave

Address on discharge

Transportation issued Yes / No Date

Character on discharge

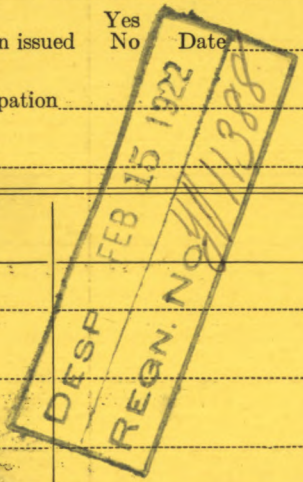
Previous occupation

Date and place of enlistment

Diagnosis

Date of Medical Boards

Date	Remarks



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

*Name MCISAAC, Daniel Rank PTE. Regtl. No. 901659

Fyle Depot 74-Mc-1303

Original unit 193rd. Bn. Present unit #6 D.D. M. or S. Age 26 Religion R.C. Ref. H.Q.

Port, ship, and date of arrival Halifax, N.S. "Empress of Britian" 25-2-19

Next of kin Mr. Daniel McIsaac (Father)

Address on leave Inverness, N.S.

Address on discharge

Transportation issued Yes / No Date Character on discharge

Previous occupation Miner Date and place of enlistment 19-3-16 Stellarton, N.S.

Diagnosis Date of Medical Boards

Date.	Remarks	Pt. 2 Order No.
17-2-19	T.O.S. #6 D.D. Posted to Cas. Coy. 25-2-19 D.O.	58
18/3/19	DISCHARGED at Halifax, N. S	74

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

(over)

Date.	Remarks.	Pt. 2 Order [redacted]

M.F.W. 192
150M—6-18.
1772-39-1243.

Eye, Ear, Nose & Throat Clinic,
Witley Camp, Surrey.

JAN 6 1919

.....1918.

UNIT..... R D [illegible]

REG.No. 9016[illegible]9 RANK Pte NAME Mc Isaac D

DIAGNOSIS:- O. M. P. C. R. L.

REMARKS:- Discharge continuous dates back to 10 years ago. Worse[illegible] for considerable period but have been discharging for past year

HEARING:-	Rt.	Lt.		Rt.	Lt.
VOICE.	5	15	RINNE.	—	—
WHISPER.	—	—	WEBER.	—	—
WATCH.			SCHWABACK.	—	
			FORK. 256.	Fairly well	
			FORK. 2048.		
			BONE COND'N.	Fair	

Cat. - W. 3

CATEGORY RECOMMENDED:- B 11

TREATMENT RECOMMENDED:-

RETURN FOR FURTHER EXAMINATION AND TREATMENT ON .....

AND BRING THIS PAPER.

CONDITION WAS — PRESENT BEFORE ENLISTMENT AND HAS not BEEN CAUSED BY SERVICE. HAS ——— BEEN AGGRAVATED BY SERVICE.

V E Holmes

Captain, C.A.M.C.
Eye & Ear Specialist,
Witley Camp, Surrey.

C.A.D.C. 50[illegible]

CANADIAN ARMY DENTAL CORPS, O.M.F.C. M.D. 6

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) McISAAC D.

REGIMENT 42 Bn. RANK Pte No. 901659

Date of Examination in England 17-4-9 | Date of Examination in France

DIRECTIONS TO DENTAL OFFICERS

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

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 19.
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT ?

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

KINMEL PARK NORTH WALES

Signature of Dental Officer W Kennedy Lieut

L. L. Job 4503.—M. & D. 6832.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
50m.—6-16.
H. Q. 1772-39-819.

To Whom Mrs Kate McIsaac,

Address Inverness, C.B.

By Whom Assigned McIsaac, Daniel

Regtl. No. 901659

Rank Pte

Corps 193 Bn.

Rate 2.00

OCT 1 1916

PAYMENTS

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

CONSOLIDATED 6 ACCOUNT

CANADIAN ASSIGNED PAY AUDITED
A K Hawkins
AUDIT CLERK
DATE 11/6/16

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
50m.—6-16.
1772—39—819.

Sheet No. 2.

L. L. Job 4503.—Req. 6332.

Mrs. Kate McIsaac

PAYMENTS.

Name of Soldier McIsaac. Daniel

90165 193 Bn. Pte

OCT 1 1916

Month.	Year.	Cheque No.	Amt. 20 00	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		U28062	20	
Nov.		J29708	20	
Dec.		M35881	20	
Jan.	1917	D40188	20	
Feb.		[illegible]	20	
March		V49205	20	20 B.
April		S3071	20	20 B
May		S.9234	20	20
June		R15592	20	B
July		S23860	20	B
Aug.		F34425	20	
Sept.		C37175	20	C
Oct.		J43936	20	
Nov.		W49772	20	
Dec.		S60076	20	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

20

CANADIAN ASSIGNED PAY AUDITED
OK Hurbellaw
AUDIT CLERK
DATE 11/6/18

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.				

ORIGINAL ORIGINAL 901659.

MEDICAL HISTORY SHEET.

Surname McIsaac Christian Name Daniel

Examined on 24th day of March 1916 at Stellarton N.S.

Approved by E.D. McLean

Birthplace City or Town Inverness N.S. County Inverness

Rank Capt M.O.

Apparent age 23. 10 mos

Trade or occupation Miner

Height 5 Feet 6 Inches.

Weight 152 Lbs.

Chest measurement Minimum 32½ inches. Maximum expansion 4 inches.

Physical development Good

Small-Pox Marks none

Vaccination Marks Arm Right. Left. Number 0 0

When Vaccinated last Never

(a) Marks indicating congenital peculiarities or previous disease none

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

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

Date.	Result.	Vaccinations.
13.7.16	Good	Ed MacLean M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
11.4.16	Good	M.O.
25.4.16	Good	Ed MacLean M.O.
18.11.16	Good	M.O.

Enlisted on 19th day of March 1916 at Stellarton, N.S.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	193rd Bn. C.E.F.	901659		March 19, 1916.
Transferred to	42nd Bn. Can. Inf.	901659		5-12-1916.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

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

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

Surname McIsaac Christian Name Daniel

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.

Copy of Ear Report.

Camp Hill Military Hospital.

Consultant's Report.

Ex.Pte. McIsaac.
Regt.No. 901659

Having this date examined the marginally named man, I am of the opinion that:-

Both ear drums destroyed, middle ear filled with spongey granulations -- offensive pus discharging.

R.	EARS	L.
3 ft.	Voice	8 ft."Barny"
Neg.	Rinne	Neg.
Plus	Schwabach	Plus
C2048	Upper Line Limit	C2048
C512g	Lower line limit	C128g

Condition one of chronic purulent Otitis Media (double) with middle ear deafness.

Halifax, N.S.
28-5-19

(Sgd) H.W.Schwartz
Capt. C.A.M.C.
for C.C.

77243

FORM OF WILL P. 85

I, Daniel Mc Isaac, (Name in Full)

Regimental Number 90.16.49 serving in 193rd Battalion, Can. Inf.. 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

.....
.....
.....

Name & Address of person or persons to whom it is to go

absolutely, and my personal estate I bequeath to

Mrs. Kate Mc Isaac
Inverness Cape Breton
Canada

Name & Address of person or persons to receive personal estate. (x)

In Witness whereof I have hereunto set my hand this 30 day of Nov. A.D., 1916

Daniel Mc Isaac Signature.

(x) - 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.

Name of Witness Burt McLeod
Address of Witness 193rd Bn Canada
Occupation of Witness Sergt
Name of Witness G R Saunders
Address of Witness 193rd Can Inf
Occupation of Witness Acting Sgt Major

CHANGE OF ADDRESS.

No. 901659 Rank — Surname Mc Isaac Christian Names Daniel

Address n/k wife Mrs. H. Mc Isaac

Inverness

C. B.

D-19
EBM.

Auth. S.C.R
d/ 1-3-24

Section Doc'o I d/12-3-24

1. 7.2.24
Auth. Se.R.d/ 1-3-24

R—122
8,401—50,000—21-10-16

A.C. Rank Name McISAAC, Daniel. Reg'l No. 901659

Unit 193rd. Bn. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Stellarton, March. 19th.1916. Place of Birth West Port Hood, Inverness, N.S.

Name and Address, Next-of-Kin Daniel J. McIsaac. Relationship Father.

Inverness, N.S. Canada.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

N/E. R.B. No. 6506
File R.L.
Category C.R.Can

Discharge, Date and Place Reason Character

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
		Arrived in England S.S. Olympic,		18/10/16	
5-12-16	193rd Bn.	S.O.S. to 42nd. Bn.	Witley	5-12-16	Pt. II. D.O. 40.
12. Dec, 16	42*BN	Taken on Strength,	Field.	3.12.16	Pt, 2, O-86
26. 4. 17.	O.C. 42nd	Class "B" & attd. for duty C.C. ~~Camp~~ Salvage Corps Cease to be attached to C. Corps Salvage	Ecca	19. 8. 17.	Pt II D.O. 50. C.C. Salv. Co. Pt-II 1/4-6-17.
22-10-17	" "	C.C. & S.O.S. to 8th Can. Ammn. Supply Co.	"	Pte. 27-9-17.	— 120. 8th C.A.E.C. Pt-II 1/24-10-17. 17/8/17
5-8-18.	8th C.A.E.C.	S.O.S. to C. Lab Pool.	— " —	" 25-7-18.	— " — 52. C.E.F. Pt II 9117 D/6-8-18.
23-12-18	Lab. Pool	S.O.S. to Genl. Depot, Witley	Field	Pte 15-12-18	Pt II 0202 Gen. Depot Witley 20/12/18
16-1-19	Gen. Depot	to Canada Sy. Camp & Park Witley		15-1-19	— 13.
~~20-2-19~~	~~Witley~~	~~Attached S.O.S. on proceeding to Canada~~	~~Rhyl~~	~~19-2-19~~	Cancelled by Pt II O 89 d/ 30-3-19 Pt II DO 51.
30.3.19	do	S.O.S. pending return to Canada	Rhyl	Pte 15.1.19	D.O. 89 - 26.4.19

A.F.B. 103 CHECKED 13 DEC. 1916

D.S.C.M.

901659 Mr Isaac. D

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.
30.3.19	6 M D 6 W.	S.O.S. on proceeding to Canada.	R. Park.	17.2.19	D.O. 89.
15-3-19	Gen Dep.	Ceases on com[m]d Seg Comp Rhyl & D.O.S. to C. to 7 in Canada Vol 23 (24)	Witley	17.2.19	D.O. 61.

SERVICE AND CASUALTY FORM (Part I).

Army Form B. 103—I. Part I.

(1)*Substantative rank *Acting rank *[To be entered in pencil to facilitate alteration.]	(2) Regiment or Corps	(3) Regtl. No.
(4) Surname		
(5) Christian Names		
(6) Army Form, number of, Attestation Form or Record of Service paper		
(7) Whether of British or of Alien origin [*vide* A.C.I. 578 of 1918]		
(8) Date of birth as stated on enlistment		
(9) (*a*)		

(10) Enlistment (*b*) (11) Engagement (*c*)

(12) Service reckons from (*date*) (13) Special conditions (if any) of enlistment (*d*)

(14) Any subsequent variations (if any) of conditions of service

Initials and Rank of an Officer.

(Authority) (*date*)

(15) Category	Date	Medical Authority	Initials and Rank of an Officer

(16) (Record of Occupation in Civil life (*vide* Army Order 93 of 1917)

Industrial Group No.
Trade or Calling
Married or Single
Particulars of Trade Test

Occupation Cards despatched on (*date*)
Second Occupation Card despatched on (*date*)

(17) Next of Kin
(18) Demobilizer (*f*) (Place) (Signature of Posting Officer
(19) Pivotal-man (*f*) (Date)
(20) Qualifications (*g*) *or* (21) Corps trade and rate

(22) Extended { (23) Re-engaged {

(24) Miscellaneous entries:—

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [*vide* A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent, &c. [e] It to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoeing-smith, &c.

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W1889—PP1150 1M 5/18 G.W.P.Co (3490)

901659 Pte McIsaac D. II

(A) Report: Date.	(A) Report: From whom received	(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
16-1-19	Can Dep	Do 13.	Dy Com to 66 Camp Rhyl.	Witley	15-1-19	J.N. Keane. LIEUT. OFFICER i/c RECORDS.
29/1/19			S.O.S. — O.M.F.C.-ON-TRANS. — C.E.F. Sailing Do 14 Kinmel Park J R M Hammond			
17 FEB 1919			LIEUT. OFFICER I/c RECORDS M.D. 6			
17 FEB 1919						
			H.M.T. EMPRESS OF BRITAIN.			
17.2.19	O Bear	T.O.L	Fostered to Can Co	Halifax	25-2-19	Do 58. B.C. York Lieut O/C Records
18/3/19			DISCHARGED at Halifax, N.S.		Do 74	C.W. Macaloney CAPTAIN. O.C. DISCHARGE SECTION No. 6 DISTRICT DEPOT.

SCANNED FEB 17 1919 ARRIVED FEB 25 1919

Nothing to be written in this margin.

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

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

WAR SERVICE BADGE. CLASS "A" No .....

Casualty Form—Active Service.

Unit, Regiment or Corps 193rd BAT. C.E.F.

Regimental No. 90165 Rank Private Name Daniel McIsaac

Enlisted (a) 19/3/16 Terms of Service (a) War & 6 months Service reckons from (a) 19/3/16

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

Extended ..... Re-engaged ..... Qualification (b) .....

CERTIFIED CORRECT. 18 DEC 1916 CAN. RECORDS, LONDON.

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	Halifax	12-10-16	
		Disembarked England	Liverpool	19-10-16	
5-12-16	Ob 193rd	Proceeded In Service overseas with 47th Bn 2nd Can Inf	Witley	5-12-16	Part II Ord # 40 P. D. Andrews Lt for CAPTAIN ADJUTANT 193rd BN. (CANADIAN INF.) NOVA SCOTIA HIGHLANDERS
O.C.C.B.D.		Landed in France. Taken on strength 42nd Cdn. Bn.		6/12/16	Nom. Roll d/ 6/12/16. Pt II O. 86 d/ 17/12/16.
— do. —		Left for Unit.		30/12/16	Nom. Roll d/ 30/12/16.
O.C. 42nd Bn.		Arrived Unit for duty		2/1/17	B. 213 d/ 5/1/17 25-3/19/1/17
24/2/17	42nd	Unfit. To C.B.D. By Ault. D. G. M. S. 44-1/1 d 19/1/17.		23/2/17	B 213
28/2/17	C.B.D.	Taken on strength, T. B.	C.B.D.	28/2/17	N. R.
19/3/17	42	Classified P. B. for duty with Can. Corps Salvage Coy.		19/3/17	N. R.
19/3/17	42	Class. P. B. + attached for duty with Can. Corps Salvage Coy.		19/3/17	B 213. Rec. 50 d 26/4/17.

(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 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
		Ceases to be attached to Can. Corps Salvage Coy. & attached to 8th Can. Area Employment Coy. (Authority:- A.G., G.H.Q. A/8-20 (Can. 1.) of 7/1/17. Can. Corps A. 68-4 of 28/9/17 Can. Sect. file KA. 12771/1. O.C. 8th C.A.E. Coy. B 213 of 1/10/17.)		27/9/17	P II o. 120 of 2-2/10/17.
7-10-17	adj. G.H.Q.	Taken On Strength 8th CDN. AREA EMPLOYMENT COY.	Fd.	28-9-17	A/8-20 (Mil) KA12771/1 P II O No 1 d/29-10-17
22/12/17	O/C Unit	Granted 14 days leave	Field	16/12/17	B213. W.E.F. Can. No 1 d/-10/1/18.
12/1/18	"	Returned from LEAVE	"	2-1-18	B213
25-6-18	a.d.o.	Classified B1 Def. Hearing	"	25-6-18	W 3339/583. P II O 49 d/-12-7-18
23-7-18	Lab C & adj	S.O.S 8th Can Area Empl Co on transfer to Can. Labour Pool.	"	25-7-18	Lab Comm P 4-2 d 25/7/18 K.R 25502/5 P II O 52 d 5/8/18
25-7 18	CHRP A.A.G.	assumed from 8th Can Area Emp Coy for S Can Lab Coy Jasper & 4th Can A.F. Coy		25-7 18	K R 311/97 P II 1176 26.7.18
15/12/18.	CGRO	Transfer Engineer posted to Can Cent Dep	Witley	15/12/18	

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

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 901659 (Rank) Private

Name (in full) Daniel Mc Isaac enlisted in

the 193rd Battalion

CANADIAN EXPEDITIONARY FORCE at Stellarton. N.S. on the 19th

day of March 1916

HE served in France

and is now discharged from the service by reason of

Demobilization.

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

Age 26 yrs. 10 mos.

Height 5 ft. 7 inches

Complexion Clear

Eyes Blue

Hair Brown

Marks or Scars 2 Vaccination marks left arm.

D Mc Isaac

Signature of Soldier

C W Macaloney CAPTAIN.

Issuing Officer

O. C. DISCHARGE SECTION No. 6 DISTRICT DEPOT.

Rank

Appointment

Date of Discharge 18/3/19

Signed at Halifax. N.S. this 14th day of March 1919

in, Military District No. Sig.

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
200m.—2-18.
H.Q. 1772-39-882

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

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

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

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

.....

Medals and Decorations .....

.....

Remarks .....

.....

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

.....
Name of Officer

.....
Rank

.....
Appointment

demobilization the
ulars called for on
o back of this cer-
ificate will not be com-
pleted.

Uniform not to be worn after
Date of Discharge, unless author
ity has first been obtained from
G.O.C. District.

Temporary

Army Form B. 178.

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname McIsaac. *Christian Name* D.

TABLE I.—General Table.

Birthplace { Parish Port Hood. / County N.S.

Examined { on 19 day of March 1916, / at Stellington NS

Declared Age 24 years — days.

Trade or Occupation Miner

Height 5 feet 7 inches.

Weight ..... lbs.

Chest Measurement { Girth when fully Expanded 38 inches. / Range of Expansion 3 inches.

Physical Development .....

Vaccination Marks { Arm ..... RIGHT ..... LEFT / Number ....

When Vaccinated .....

Vision { R.E.—V= ..... / L.E.—V= .....

(a) Marks indicating congenital peculiarities or previous disease—

.....

.....

(b) Slight defects but not sufficient to cause rejection—

.....

.....

Approved by .....

Rank .....

Medical Officer.

Enlisted { at Stellington N.S / on 19 day of March 1916

	Corps	Regtl. No.
Joined on enlistment	193rd Bn.	901659.
Transferred to		

Became non-effective by .....

.....

on ..... day of ..... 191....

(*Signature*) .....

(*Rank*) .....

TABLE III.—Boards; Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and Signature
[illegible]	[illegible]

TABLE IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C.
[1273] W15368/M1384 500m 2/17R 45 59

TABLE II.—Only for admissions to Hospital or to the Sick List in case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				

P. 559.

MARRIED OR SINGLE: S.

PLACE OF BIRTH: West Port Hood, Inverness Co., N.S.

NAME AND ADDRESS OF NEXT OF KIN: Dan J. Mc. Isaac, Inverness, C.B., Nova Scotia

RELATIONSHIP OF NEXT OF KIN: Father

NAME AND ADDRESS OF NEXT OF KIN:

RELATIONSHIP OF NEXT OF KIN:

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No. 901659 RANK Pte NAME Mc. Isaac, Dan

IF IN PERMT. CORPS WHAT UNIT } UNIT 193rd Bn. TRANSFERRED TO 42 B/Bn DATE 5/12/16 AUTHORITY P.O. 40

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION Stellarton, N.S. TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION Mch. 19/16 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 20.00 DATE EFFECTIVE Oct. 1/16

PAYABLE TO Mrs. Kate Mc. Isaac, Inverness, C.B., Nova Scotia RELATIONSHIP Mother

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

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

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

C C/L

DATE	PAY NO. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE NO. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY NO. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
3/10/16														10 37	10 37																10 37				Bal. from Canada
30/11/16	30	1.00	30		30	.10	3								33	4 126 10/16	89 15 11/16	142	30 11/16					9 73	4 87	4 87		20		39 47	3 90		3 90		
5/12/16	5	1.00	5		5	.10	50								5 50													20	71	20 71		11 31			Trans. to 42 B/Bn. 5/12/16 P.O. # 40
Dec 6.21	26		26		26		2 60								28 60															17 29			14 29	Repay. voucher # 117. .71 ¢
1917			6 10				6 10																											
Jan 1.31	31	1.00	31 10												31 10													20		24 36	27 03				
Feb 28		"	30 80												30 80	1538	19/1	1578	8/2	10309 12002	B.B. "	27/2 25/2		5 23	2 62	4 36 6 98		20		32 21	25 62				
Mar 31		"	34 10												34 10	1632	21/2			12369 2218	8886	17/3 21/3		2 62		4 36 2 69		20		36 57	23 15				
April 30		1.00	33 —												33					10 T. 58	1/4					2 61		20.-		22 61	33 54				
May 31		"	34 10												34 10													20		20	47 64				
June 30			33												33					630 937	5666 6666	12/5 28/5				2 68 2 68		20		25 36	55 28				
July 31		"	34 10												34 10													20		20	69 38				
Aug 31			34 10												34 10													20		20	83 48				
			334 40											10 37	344 77									22 45	7 49	30 64		200	71	261 29					

CANADIAN ASSIGNED PAY AUDITED

AUDIT CLERK

DATE 11/6/19

901659 Pte. McIsaac. Dan.

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
Aug	Fwd.		334	40										10 37	344 77									22 48	7 49	30 64		200 00	71 26	129	83 48				
Sep	30		33												33	1323	21/6									2 67								
																127	11/12									3 49								
																1024	20/7									2 67								
																1654	11/8									2 68								
																DEFER-RED. PAY	SER.? ALLCE. ENG.																	

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER-RED. PAY	SER. ALLCE. ENG.
Oct		~~8 97~~ D.							84 97 Cr		
	P. Pay	34 10						20			
				Dr C.C. Sig bo. A.R. 1611. 21/5/17.	2 68				96 39 "		
		34 10			2 68			20			
Nov	P Pay	33		A P. Nov.				20			
Dec	"	34 10		" Dec.				20	123 49		
		67 10						40			
Jan.	"	34 10		"				20			
				A.R. 2073 (Fance) L.L. bb Bo 15/12/17.	58 40						
				C.P. 43710 - 22/12/17.	14 60						
				C.P. 45686 - 28/12/17.	2 43						
				A.R. 612 L.L. bb H.Q. 15/1/17.	4 46						
				D.N. 2259 bb Sig bo 4/9/17.	268						
				" 2011 bb bo 8/8/17.	267						
				" 1000 1st D.J. 15/10.	357						
				2718 - C.C. Sig bo. 3/10/17.	4 46						
				" 3604 - " 3-12-17.	4 46						
				2518 " 19-9-17.	2 68						
		34 10			100 41			20	37 18 "		
Feb	"	30 80		A.P. Can.				20			
				D.N. 1317. Town Major Heron 11/11/17.	357						
				" 1605. bb bb H.Q. 7/7/17.	268						
				" 3379. bb Sig bo. 21/11/17.	133 8				2835 "		
		30 80			19 63			20			
Mar				A.P. Can.				20			
				D.N. 16 A.R. 2518 Emp bo 31/10/17.	446				3 89		
	P Pay.	34 10							37 99		
				D.N. 4023 bb bb 17/1/18.	357				34 42		
				D.N. 3830 " 4/1/18.	446				29 96		
				D.N. 4885 " 16/2	357				26 39		
				D.N. 5239 " 3/3/18.	446				21 93		
				D.N. 5628 " 17/3	357				18 36		
		34 10			240 19			20			

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.* ~~ENGLAND OR~~ * CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1-10-16.	EFFECTIVE DATE:-
AMOUNT:- $20.00/100	AMOUNT:-

NAME:- Mc ISAAC. Dan.

NUMBER:- 902659.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte.

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 Kate Mc Isaac. (Mother)
Inverness. CB. Nova Scotia.
Stopped Eff 1.2.19

UNIT AND TRANSFERS

ORIGINAL UNIT:- 193rd Bn.

DATE ACCOUNT FIRST OPENED:- 1-11-16.

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			42nd Bn
B.O. 117. 6/8/18	1/8/18	21/8/18	Lab Pool.

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
2/1/19	143/97	~~Debtg £1 4.86~~					

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE

Dis to Can 31/1/19 NR 1943. 18/1/19 Witley MO 6

PARTICULARS OF RENDERING NON-EFFECTIVE:- Cr Bde $ 10.35 Dfd Pay Nil Ledger $ 15.25

MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mar 31/18	Bal Fwd.								18 36	Nil.	
Apr.				Can A.P.				20	1 64		
	P. Pay.	33 00							31 36		
				23 DN. 180. 6.6 Sigbo. 6/4/18	4 46						
				" 314 " 18/4	3 57				23 33		
		33		Can AP.	8 03			20 20	3 33		
May									37 43		
	P Pay.	34 10									
				16 DN. 295. 5th Div Ambol. 15/5/18	3 57						
				" 570 - 6.6 Sig Co. 1/5/18	4 46				29 40		
		34 10			8 03			20			
June				Can A.P.				20	9 40		
	"	33 -							42 40		
				20 DN. 1331. 6.6 Sig Co. 1/6/18	3 57				38 83		
				27 DN. 634 54th Bn. 18/6/18	4 46				34 37		
		33			8 03			20			
July				Can A.P.				20	14 37 ~~38~~	W	
				26 DN 758. 54th Bn. 1/7/18	4 46				9 91		
		34 10							44 01		
				33 DN. 219 3rd B.T. Bde. 21/7/18	3 57				40 44		
				33 " 4524 7th Emp Co 2/2/18	4 46				35 98		
		34 10			12 49			20			
Aug		34 10		Can AP.				20	50 08		
				37 Draft 3884 Skeena 7/8/18	3 57				46 51		
				33 - 2494 Ces. Co. 15/8/18	3 57				42 94		
		34 10			7 14			20			

COMPILED BY J Mcbean
CHECKED BY R Arnold.

CANADIAN ASSIGNED PAY ACCTS
AUDIT CLERK
DATE 11/6/15

NUMBER 901659 RANK pte NAME Inf Isaac D. Canada Am pay $20.00

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
	Balance fwd								4 19 9		
Sep	P P	33		C&P.				20	55 9		
				AR 5111 ESCNG 17/9/18.	3 5				5 3		
				" " " 1918	3 5				48 8		agreement 2/6/18
		33			7 04			20			
Oct	P P	34 10		C a P				20	62 90		
				DN. AR 5413 3/10/18 C&EHQ	3 73	✓			59 17		
				AR 3164 31/10/18 C.C.L.R.P.	3 73	✓			55 44		
		34 10			7 46			20			
Nov	P P	33		C a P				20	68 44		
				AR. 7029. 3/11/18 C&EHQ	3 73	✓					
				C P 64730. 16/11/18	58 40	✓					
				C P 69272 24/11/18	48 7	✓			1 44		
				AR 12694 20/12/18 Gen Dep	9 73	✓			829		
				DN AR 5651 8/12/18 C&EBD	4 66	✓			1295		
Dec	P P	34 10		C a P				20	1 15		
Jan	P P	34 10		C a P				20	15 25		
		101 20		£12-0-0	81 39			60			
				AR 14394 2/1/19 Gen Dep LPC endorsed	4 87						
				AR 155 24/1/19 9 Kimmel	9 73						
				13 AR 1308 - 10-2-19. Endr. Kimmel	9 73				908		
					24 33						
				S.O.S. to Canada 17/2/19							

Empress of Britain

AUDITOR | PAYMASTER

M. OR S.

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

REGT. No. 901659. RANK Pte. NAME (IN FULL) Joe Isaac, Dan.

(BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS nil

English — Bal

PARTICULARS	EFFECTIVE DATE	AUTHORITY
T.O.S.		Do 58

ORIGINAL UNIT C.E.F. 1st Pool. — IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ $0.00 — DATE EFFECTIVE 1-3-19.

PAYABLE TO Mrs Kate Joe Isaac. — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Inverness, Cape Breton, N.S.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE A.F.W.S. — DATE 18-3-19 — REASON Demob — AUTHORITY Do 64 — IF ENTITLED TO POST DISCHARGE PAY

E.P.C. ACCRUED TO	PAY AND F.A. NO. OF DAYS	PAY AND F.A. RATE	PAY AND F.A. AMOUNT $	PAY AND F.A. AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	E.P.C. $	E.P.C. C.	TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	ACQUITTANCE ROLLS COL. NO. 1 DATE	ACQUITTANCE ROLLS COL. NO. 2 NO.	ACQUITTANCE ROLLS COL. NO. 2 DATE	ACQUITTANCE ROLLS COL. NO. 3 NO.	ACQUITTANCE ROLLS COL. NO. 3 DATE	CASH PAYMENTS COL. NO. 1 $	CASH PAYMENTS COL. NO. 1 C.	CASH PAYMENTS COL. NO. 2 $	CASH PAYMENTS COL. NO. 2 C.	CASH PAYMENTS COL. NO. 3 $	CASH PAYMENTS COL. NO. 3 C.	ASSIGNED PAY $	ASSIGNED PAY C.	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C.	OTHER CHARGES $	OTHER CHARGES C.		TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					
31-1-19		1.10					10	38																			19	46							Bal. E.P.C.
																											49	87							Kinmel Park.
																											20	00							Ulm Board.
																																			A.P. Pay for Feb.
COMPILED BY																																			
CHECKED BY																																			
PASSED BY							10	38																							89	33	78	95	
																	19573																		
1/2 19/3	46	1.10	50	60	11	20			96	80							19574				35						48	95	113	95	17	15	256		Subs Do 58.
					53												52	85									17	15	70		70		256		Clothing Allnce
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		W.S.G.	Sa				War Service Gratuity				W.S.G.	Se																					Soldiers Defendant		
183 days	420	00					420	00	256								7000																350	00	—	35
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																	70	00													420	00	Nil.			111 8852 13-8-19
																	Completed.																			
	420	00					420	00									420	00													420	00				

Certified that all payments due on this acct. have been paid.

Capt.

For Senior Officer Pay Services, M.D. 6

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

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

m 6129

Date of Assignment

Oct 1 — 16

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

20			

PARTICULARS OF SEPARATION ALLOWANCE

No. 901659

Rank Pte Promoted Reverted Discharge

Soldier's Name Daniel Mc Isaac

Battalion 193 1/2 Batt'n

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs Kate Mc Isaac

Address Inverness C. B.

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	
1917					M.O. 67441 to D.O.S. 3/19 REMARKS 12403-D-2C
Dec 31	—		300	300	
Jan 18	S 67024		20	20	X
Feb ..	D 75509		20	20	
Mar	M 90520		20	20	
Apr	E 4158		20	20	✓
May	N 19081		20	20	✓
June	J 23565		20	20	✓
July	L 30304		20	20	✓
Aug	L 41040		20	20	✓
Sept	L 45946		20	20	✓
Oct-	T 53223		20	20	✓
Nov	T 58695		20	20	✓
Dec	S 68059		20	20	✓
Jan	S 75012		20	20	✓
Feb	L 79598		20	20	✓
			580	580	

26-2-19 A/c Closed

Ret'd per Empress of Britain

Date 25/2/19 EX 3/2/19

Clerk A.P. Staples

CANADIAN ASSIGNED PAY AUDITED
OK Hawkellows
AUDIT CLERK
DATE 11/6/19

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

M. F. W. 128
400M.—6-17—172-39-1141
L. L. 22320—M. & D. 7993.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS

M. F. W. 128
400M.—6-17—177-39-1141
L. L. 22520—M. & D. 1933.

This space to be for numbers.

War Service Badge Issued
Class A ... No. 233733

Proceedings on Discharge.

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

MEDICAL DOCUMENTS FORWARDED TO
~~S. C. R.~~
B. P. C.
ON 14-4-19

No.	981659.
Rank	Pte.
Surname	Mc Isaac
Christian name	Daniel

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

Corps (Squadron, Battery or Company)	193rd Bn
Date of discharge	18th March 1919
Place of discharge	Halifax. N.S.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age	26 years 10 months.
Height	5 feet 7 inches.
Complexion	Fair
Eyes	Blue
Hair	Brown
Trade	Miner
Intended place of residence (To be given as fully as practicable.)	Inverness Town Cape Breton

Descriptive marks: Scar. middle left arm.

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

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) Halifax N.S. D McIsaac *(Signature of Soldier.)*

(Date) March 14th 1919 H. Wren *(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) Halifax N.S.

(Date) March 18, 1919

(Signature) .....

.....LIEUT, COL.

No. 6 DISTRICT DEPOT.

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.)

Nil

D McIsaac

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.

A.F.B. 179 Canada (Revised 1918). 4182 100m. 16/11/18 D.495

Reserved for M.H.C.

Regt. No. 401659 Rank PTE. Surname Mc ISAAC Christian Name DANIEL

Unit or Corps—(a) Overseas from United Kingdom L. POOL. (b) in United Kingdom GEN. DEPOT.

Born at—Town PORT HOOD. County or Province INVERNESS "NS" Country CANADA.

Date of Birth—Day 5 Month MAY Year 1892 Age 26 yrs. 7 months.

Joined at STELLARTON. "N.S" Date 19 MARCH. 1916.

Former trade or occupation MINER.

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

2 face marks on left arm:

Loss - terminal phalanx. Left middle finger

Height—feet 5 inches 7 Colour of eyes BLUE.

Signature of Soldier (*for identification purposes*) D. Mc Isaac

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*): A.M. P.C. L + R. "Chronic purulent Otitis media" (Left + Right)

Disabilities Group (*b*): (MYALGIA)

Disabilities Group (*c*): NIL

2. CAUSE OF DISABILITY

		Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	Unable to State.	Canada.	1908.
(*ii.*) As to Group (*b*) above.	General Service	France.	Aug 1918.
(*iii.*) As to Group (*c*) above.	N. A	n a	ne

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 ? no If yes, has Active Service aggravated it ? n a

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

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 ? yes

(*iii.*) As to Group (*c*) above ? no.

PART I. (*continued*).

5. MEDICAL HISTORY. Previous illness :- nil
Enlisted 19 Mar 1916. Came to England 9/10/16. Went to France
6 Dec 1916 24/2/17. Wounded. To CBD. Evacuated to England. Dec 17/18
Documentary. AFB 103. 24/2/17. Wnd't To CBD. by enemy
G.S.W.

6. PRESENT CONDITION. General condition Good.
Subjective: Wounds have well. Complains of pain in shoulder and
calves legs especially after marching and in damp weather
Wounds heard but can walk 5 miles in one time
Objective:- Heart & lungs normal. Legs muscles negative
Legs & muscles normal. Wounds well cicatrised painful.
Documentary:- Gas Specialist report Witley Jan 6 1919.
Diagnosis: D.M.P.C. R. & L. Discharge continues
date back 10 years ago. Were dry for considerable period
but have been discharging for last year
Hearing Voice. R. 5' L. 15"
Rinne —
Schwabach —
Fork. Bone Fair
Pardy well
Signed V.C. Falines Capt

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

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? yes
(*ii.*) If so, describe. One extraction

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

Date of Report Jan 7 1919
Station Witley Surrey
Signed E. M. Frank Capt
Officer in medical charge of case.

I have satisfied myself of the general accuracy of the above Report,
and concur therein *except NOT IN HOSPITAL
{Officer i/c Hospital / S.M.O. / Brigade} Strike out one of these

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

*Delete if inapplicable.

PART II.

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? } Nil. (b) Misconduct of the Soldier { Caused? / Aggravated? } Nil.

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.*) Nil.

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.*) Nil.

15. Permanency of the Disability due to Service estimated next above in (14).
(i.) Is it permanent? Nil.
(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? Nil.

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

18. REMARKS:— Authority A. G. 1 - (9083) d. 11-11-18
C.M.P.C. has not been caused but has been aggravated by service

CONDITION UNCHANGED
G. McNally ..... Major.
Halifax 12/3/19 for A. D. M. S. M. D. No. 6

19. RECOMMENDATION:—
(a) Fit for duty? (*state category*) B 11
(b) Invalid to Canada?
(c) Discharge from Service as permanently unfit? Yes

Date of Board 4-1-19.

Station Kitley.

Signatures of the Board { Lieut-Colonel President. / Captain. }

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

Dated at ..... Station 191

For A.D.M.S. CANADIAN TROOPS, WITLEY.

HEADQUARTERS A. D. M. S. 7 JAN. 1919 File ..... CANADIAN T. C. ENG. WITLEY.

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.....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 :—

.....
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.

CAMP HILL MILITARY HOSPITAL.

CONSULTANT'S REPORT.

Pte. McIsaac

No 901609

Having this date examined the marginally named man. I am of the opinion that:

Both ear drums distroyed, middle ear filled with spongy granulations — offensive pus discharging!

R. — Ear — L.

3 ft. Voice 8 ft. "Barry"

Deaf Rinné Deaf

+ Schwabach +

C2048 upper limit C2048

C6725 lower limit C1285

Condition one of chronic purulent Otitis Media (double) with middle ear deafness.

J. S. Schwartz Captain M.C.

Date 28/6/19

Halifax, N.S.