230th. FORESTRY BATTALION, C. E. F. DUPLICATE

ATTESTATION PAPER.

No. 1013698

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

230th BN C.F.C.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS.)
1. What is your surname?	McKay.
1a. What are your Christian names?	George
1b. What is your present address?	Port Arthur, Ont.
2. In what Town, Township or Parish, and in what Country were you born?	Brockville, Ont.
3. What is the name of your next-of-kin?	Jennie McKay,
4. What is the address of your next-of-kin?	Kingston, Ontario, Canada.
4a. What is the relationship of your next-of-kin?	Sister.
5. What is the date of your birth?	Oct. 18th, 1870.
6. What is your Trade or Calling?	Laborer.
7. Are you married?	No
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9. Do you now belong to the Active Militia?	No
10. Have you ever served in any Military Force? If so, state particulars of former Service.	No
11. Do you understand the nature and terms of your engagement?	Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?	Yes
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit?	No
14. If so, what was the nature of the disability?	
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?	No
16. If so, what was the reason?	

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, George McKay, 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.

G McKay (Signature of Recruit)

Date June 8th. 1917. W. D. Jones (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, George McKay, 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.

G McKay (Signature of Recruit)

Date June 8th. 1917. W. D. Jones (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 Port Arthur, Ont. this 8th. day of June 1917.

J. T. Huntington (Signature of Justice)

Major.

M. F. W. 23.
750 M.—1-17.
H. Q. 1772-39-841.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT.

230th. Forestry Battalion, C.E.F.

Description of George McKay on Enlistment.

Apparent Age 46 years 7 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft 10 ins.

Chest measurement.
- Girth when fully expanded 39 ins.
- Range of expansion 2 ins.

Complexion Dark

Eyes Grey

Hair Dark Brown

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

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

Tattoo [illegible] girl right forearm
Tattoo woman's head left forearm
Apex beat beyond middle line but no murmurs
Vision R Eye D30 at 20
Vision L Eye D30 at 20

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date JUN 9 1917 191 .

Place PORT ARTHUR, ONT.

Medical Officer.

*Insert here "fit" or "unfit."

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

CLASS B II

CERTIFICATE OF OFFICER COMMANDING UNIT.

George McKay 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)

Date June 12th 191 7

O. C. 230th Bn. C. E. F.

REGIMENTAL DOCUMENTS

NAME McKAY, GEORGE REGT. NO. 1013698 UNIT 32 D. H. Q. FILE NO.

	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 Demob
1	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
1	MEDICAL EXAMINATION (M.F.W. 129)					
1	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)				19642	
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					DESERTION
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					
	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	CALC 50092					
1	20m S 1375					
3	20m S 1394					
1	m & W 192					
3	Miso					
1	Cas card.					
	R 122					
1	W Cd					

W 2589
100M-11-18
1272-39-1377

CARD NO.
3
So Ellis 22-3-19
Demob - # 3001
Do-83 FOLL. 24-3-19

SURNAME. Mc Kay.

CHRISTIAN NAMES George

REGL. No. 1013698 RANK pte.

UNIT 230th. (6th. R.d) Bn.

FORMER COPPS Nil

Also notify ~~NEXT OF KIN.~~

NAMES IN FULL Mc Kay Jennie

RELATIONSHIP TO SOLDIER Sister

ADDRESS Kingston Ont.

~~CHANGE OF ADDRESS~~ next of kin
Mrs Nellie Morrison.
(sister) 84 Lasalle
Road. Verdun
Quebec.
(auth 5-4-21-38-1. 12/12/17

COUNTRY OF BIRTH Canada, Brockville Ont. DATE Oct. 18th. 1870.

PLACE OF ATTESTATION Port Arthur Ont. DATE June 9th. 1917.

O/S 25-6-17 881a/4

R/C 1/3/19 - 276/64 Pte.

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

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

Sailed from Halifax Per SS "Justicia" 25-6-17.

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Labourer. RELIGION Presbyterian

DESCRIPTION.

APPARENT AGE 46 YEARS 7 MONTHS

HEIGHT 5 FEET 10 INCHES

CHEST MEASUREMENT 39 INCHES EXPANSION 2 INCHES

COMPLEXION Dark EYES Grey HAIR Dk. Brown

DISTINGUISHING MARKS Tattoo girl right forearm.
Tattoo womans head left forearm.

MEDICAL EXAMINATIO PLACE Port Arthur Ont DATE June 9th. 1917.

Present Address: Port Arthur Ont.

Form R. 149.

George

Can.

Name Mc. KAY. Rank Pte Reg. No. 1013698

Unit C. F. C. 56 Coy

Next of Kin

Canada

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
23.12.18	C F C. Hosp La Jour.		42	A404		6558.5
1-1-19	Duck		60	A409		6602.10

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

Number 101698 Rank Pte

Surname McKAY

Christian Name George

Units C.F.C Theatre of War France

Date of Service 21/7/17

Remarks

Latest Address 365 Alfred St
Kingston Ont

Roll No B. Page 9688.

200m.-2-21 M.

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

DESP FEB 7 1922
REGN. NO. 9/9

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

NAME Mc Kay G. REGT. No. 1013698.

RANK AND UNIT Pte. Can. For. Corps.

NEXT OF KIN

CABLE		NATURE OF CASUALTY
NO.	DATE	

M. F. W. 42—100M.—8-18.
H.Q. 1772 39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A. 404 (1)	Can. For. Corps. La Joux Jura	23-12-18	42.
A. 409 (1)	Dersch.	1-1-19.	42.

No. 1013698 RANK Pte NAME Mc Kay Geo.

T. O. S. 7-6-17 UNIT 230th Battalion
D.O.L.L. 13-6-17

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917 June 6	1917 June 30	[illegible]		

*Name McKAY Geo. Rank Pte. Regtl. No. 1013698

Original unit 230th Present unit Fyle Depot 3-MC-509

~~M. or~~ S. Age 49 Religion Pres. Ref. H.Q.

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

Next of kin Sis Jennie McKay Gen Del. Kingston Ont.

Address on leave Same

Address on discharge

Transportation issued Yes / No Date Character on discharge

Previous occupation Labourer. Date and place of enlistment 8-6-17 Port Arthur

Diagnosis Date of Medical Boards

Date.	Remarks	Pt. 2 Order No.
7-3-19	T.O.S. Casualty Company No. 3 District Depot. From O.S.	
	for Disposal, Part Two D.O. 66 Eff 5-3-19.	
	Leave & Qub 6-3-19 to 19-3-19.	
27/3/19	Std. DDH 3 on Draft PO 1420	Hg. 81

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

(over)

Date.	Remarks.	Pt. 2 Order No.

M.F.W. 192
150M—6-18.
1772-39-1243.

Surname	Christian Name or Names	Reg. No.
MC KAY.	G.	1013698.
Rank	Unit	
Pte.	Forr. 56.	

Cas. List.	C.F.C. H. La Joux Jura. 23-12-18.
3-1-19. A404.	V.D.S. 4.
9.1.19 a409 4	Disc. 1.1.19

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

D.M.S.1300. 50M-30-8-18.

Cas. List.

FILE No. 10136 98 VOL.

SUBJECT

McKay: George

CHARGED TO	PER	DATE	CHARGED TO	PER	DATE
Sten		8-2-46			

THIS CHARGE-OUT AND ABSENT CARD **MUST NOT** LEAVE THE REGISTRY

O.S.S. 5—100M—9-45 (8009)
H.Q. 1772-45-8

FILE No. VOL.

SUBJECT

CHARGED TO	PER	DATE	CHARGED TO	PER	DATE

M. F. W. 54. (A. F. B. 103.)
500M.—9-16
H. Q. 1772-39-9-20.

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

W.S.R. Class "A"

Casualty Form—Active Service.

Unit, Regiment or Corps 230th. Forestry Battalion C.E.F.

Regimental No. 1013698 Rank Pte Name McKay George

Enlisted (a) 8-6-17 Terms of Service (a) Dur. of War Service reckons from (a) 8-6-17

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

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

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 June 23rd 1917. On H.M.T. F 8261			
		DISEMBARKED LIVERPOOL JULY 4TH 1917			
6.7.17	BD.CFC	T.O.S., Base Depot, CFC	Sunningdale	4.7.17	D.O.Pt.II., No.60. R.R.Allen Lt.& A/Adjt, Base Depot, CFC.
27-7-17	B.D.C.F.C.	T.O.S. On posting to 56. Coy.	BASE DEPOT C.F.C. SUNNINGDALE	31-7-17	PT. II. DO. NO. 75. R.R.Allen LT. & A/ADJ. C.F.C.
		France. Landed.	Havre.	22.7.17	L.R. # 8721 D.O. # 31817
6/12/17	56	5 dys. F.F. No 2. 4-12-17 fm. 1 am 5 from Midnight until 11 am Nov 3.17. Forfeit 1 dy. Pay & All.	Field.	3.12.17	B 2064 D.O. # 18 d/1917.

(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

CERTIFIED CORRECT. 6 AUG. 1917 CAN. RECORDS, LONDON.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
9-2-18	C/56	Granted 14 days leave to	Mk	8-2-18	B213 proc 9 d. Feb 1918
23.3.18	do.	Reported from leave	Field	21-2-18	B213
5/4/18	do	Admitted to District Hosp	"	29-3-18	B213
5/4/18	do	Discharged	"	1/5/18	B213
24-10-18	77 Coy	5 days F.P. No 2. 22-10-18 For. Wks L from 10 pm 20-10-18 to 7.20 am 22-10-18. Forfeits 2 days pay by R.S.			B213 proc 49 g Dec 1918
23-12-18	Ja-Jour Jura	V. D. S.		23-12-18	W 3034/ab54
1-1-19	C.F.C. Jura	Discharged to Duty		1-1-19	W 3034/W 6694
25.1.19	O.C. Cdn. S.O.S. Conc. Cmp. Le Havre	for demobilisation to C.F.C. Depot Sunningdale		N/R. Pt. 2. O/S. 25.1.19	14-1 4/1919 Lieut. for Lt. Col A.A.G. Cdn. Sect. G.H.Q.
30-1-19		O.C. C.F.C. T.O.S. Base Depot, C.F.C. Sunningdale from C.F.C. France.		26-1-19	Pt. II D.O. 30
13-2-19	C.	S.O.S. BASE DEPOT C.F.C. on ~~posting~~ leave to Wyd. Can. Camp.	SUNNINGDALE	13-2-19	Pt. II D.O. 44 Lt. for O.C. B.D.C.F.C.

GP

Form R 122
2353—100M—9-12-16.

Rank | Name McKAY George. | Reg'l No. 1013698.

Unit | If in perm. Corps, What Unit? | Married or Single Single.

Dft. 230th Bn to Base Depot Forestry Corps

Place and Date of Enlistment Port Arthur. June 8th/17. Place of Birth Brockville. Ont.

Name and Address, Next-of-Kin ~~Jennie. McKay~~, Mrs Nellie Morrison
84 Lasalle Rd, Verdun, Que, Canada.
~~Gen. Del. Kingston Ont. Canada.~~ (RL29-T 26-11-17) Relationship Sister

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No. 8352
File R.L.
Category Can OR

MD 3

H. W. V., Ld.—9546-16.

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 5-7-17. S/S JUSTICIA			
6.7.17	C.F.C.B.E.	T.O.S.	SUNDALE	4.7.17	Pt II. 060
24-7-17	"	S.O.S. to #56 Coy France	Sundale	21-7-17	P.R.II #29 56 Coy C.F.C. P.R.II 1.31-8-17.
30-1-19	56 Coy C.F.C.	S.C. to 686 R.D. S. Dale	Ptc Field	24-1-19	" 5 T.O.S. B.O.C.F.C. pt II p. 30. 30-1-19
13-2-19	3 M.D.C.W.	T.O.S. from Base Dept C.F.C.	" Rhyl	13-2-19	" 40 S.O.S. D.A.A.G. P.11.0 44 15/2/19
26-2-19	3 " "	S.O.S. to 686 F. Can. Daily 43	" "	22-2-19	" 49 Left Lwo

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.					

Form D.M.S. 1394.
7004.—100M.—5/2/17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at 11-7- 1917.

No 1013698 Rank Pte Name McKAY. S.

Local Unit C.A.M.C.D Overseas Unit 230th for Base Age 47

Examination held at Hennigdale Camp.

DISABILITY. ~~Overseas~~—Local (scratch one out). Arteriosclerosis

PRESENT CONDITION.

General arterial thickening. Age 47
General condition Good—

BOARD RECOMMENDS:—

1. Fit for Duty.....
2. Fit for duty after.....weeks' physical training.
3. Fit for Temporary Base Duty .....weeks. B II
4. Fit for Permanent Base Duty.....
5. Discharge .....

Signatures:—

Members { .....President.
E. Moffatt Capt Canr.
R. P. Borden Capt. C.A.M.C.

APPROVED

Dated 18 JUL 1917 1917. W. Macdonell

For A.D.M.S.
Captain C.A.M.C.,
for A.D.M.S., Canadians, London Area.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at ..... 19[illegible]

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

Local Units ..... Overseas Units ..... Age .....

Examination held at .....

DISABILITY.
Overseas—Local
(Strike out one)

PRESENT CONDITION.

BOARD RECOMMENDS:—

1. Fit for Duty .....

2. Fit for duty after ..... weeks physical training

3. Fit for Temporary Base Duty ..... weeks

4. Fit for Permanent Base Duty .....

5. Discharge .....

Signatures:—

President .....

Members .....

.....

APPROVED

Dated ..... 19[illegible]

For A.D.M.S.

FORM OF WILL

I, George McKay .....(Name in full)

Regimental Number ..... serving in 260th. Forestry Battalion C.F. .....

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I devise all my real estate unto

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

absolutely, and my personal estate I bequeath to

Miss Jennie McKay	Name and Address of person or persons to receive personal estate* (*See note*).
Kingston	
Ontario	

NOTE

This space for the appointment of Executor if necessary.

.....

.....

.....

IMPORTANT NOTE

This must be signed and Dated by THE SOLDIER HIMSELF.

this 14th day of June A.D. 191 7

Geo McKay .....Signature of Soldier.

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

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

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness ~~Geo McKay~~ J. McDaniel

Address of Witness Vancouver BC

Occupation of Witness Salesman

Signature of Second Witness C Gibbons

Address of Witness Victoria BC.

Occupation of Witness Journalist

M. F. W. 82.
300M.-12-16.
1772-39-983.

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.

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(1) Name of Overseas Unit which Soldier joins 230th. Forestry Battalion C.E.F.

(2) Regimental Number 101698

(3) Full Name of Soldier McKay R. George

(4) Place of Birth Brockville Ontario

(5) Are you married, or not ? NM

(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.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? No

If so, state name and address —

(10) Is your Mother alive? No

If so, state name and address —

(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.

Miss Jennie McKay

" " Kingston

Sister Ontario

(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.

L. L. Howard Major
Officer Commanding

Date 14/6/17

O. C. 230th B'n. C. E. F.

Form R.2./124.

For attaching to Original & Triplicate A.P.

No: 1013698 Rank. Pte Name & Initials Mc Kay, G. Unit. C.F.C.

Next of Kin changed from:-

To:- Mrs Nellie Morrison (Sister)
84 Lasalle Rd,
Verdun Que, Canada

Authority R.L. 29/Td/26-11-17 Clerks Initials. L.G.

Telegram & Cable Addres:
"CANRECORDS," LONDON.
Please address all communications to:
"OFFICER i/c RECORDS."
and quote.

No.

CANADIAN RECORD OFFICE,
GREEN ARBOUR HOUSE,
OLD BAILEY,
LONDON, E.C.

From:-
Officer i/c Records,
Canadian Overseas Military Forces.

To:-

Will you please have the marginally noted examined by your Specialist to-day, after which he will report to this Office for duty.

Docs.

CHANGE OF ADDRESS.

H.Q. File 14/12/21

3.D.

No. 1013698 Rank _____ Surname McKay. Christian Name George

Address 8229 John R. St.
Detroit, Mich.
U.S.A.

D-19.
EBM.

Section Awds.

18

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) McKAY. G.

REGIMENT 67th RANK Pte. No. 1013698

Date of Examination in England 3-2-19 | Date of Examination in France

PRESENT DENTAL REQUIREMENTS

1. FILLINGS None
2. EXTRACTIONS 29.
3. CROWNS None
4. DENTURES
   - (a) Full Upper None
   - (b) Part Upper 1. 3. 13. 14. 15.
   - (c) Full Lower None
   - (d) Part Lower 17. 20. 29. 30. 31.

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 Yes
- (b) In England No
- (c) In France No,

Signature of Dental Officer W. A. Sangster Capt. A.D.C.

CLASS B II

ORIGINAL

MEDICAL HISTORY SHEET

1013698

Surname Mc Kay Christian Name George

Examined { on 9 day of June 191 7
at PORT ARTHUR, ONT.

Approved by G.S. Brown Major and
J.A. Cooper Major
Rank J.D. Grant Lt. M.C. M.O.

Birthplace { City or Town Brockville
County Ontario Can

Apparent age 46 yrs 7 mos

Trade or occupation Labourer

Height 5 feet 10 Inches

Weight 134 lbs.

Chest measurement { Minimum 37 inches
Maximum expansion 2 inches

Physical development Good

Small-pox Marks none

Vaccination Marks { Arm Right ✓ Left ✓
Number one one

When Vaccinated last Childhood

(a) Marks indicating congential peculiarities or previous disease ~~scar~~ tattoo girl right forearm
woman head left forearm

(b) Slight defects but not sufficient to cause rejection apex beat beyond nipple line but no murmurs

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
June 12-17	ok	W.L. Grant M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
June 12-17	ok	W.L. Grant M.O.
19/6/17	OK	W.L. Grant M.O.
23/6/17	ok	Alburnyce M.O.

Enlisted on 8 day of June 1917 at Port Arthur Ont.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	230th Forestry Battalion	1013698	Good.	June 8th 1917
Transferred to	C. F. C.			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
Seaforth Sanatorium	11-7-17	Ant. Sclerosis	Class B II R.P. Bordeu Capt.
A.D.M.S. CANADIANS, LONDON AREA, LONDON.	Approved: W Macdonell Captain C.A.M.C., for A.D.M.S. Canadians, London Area.	18 JUL 1917	J.M.C.

Seaforth 3 Feb 19 Ant. Sclerosis B II Grant Capt

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

Bayfield M.D. 19/2/19. Ret. B II W Wright Capt

E.R. Bunnell Capt

M. F. B. 313.
500M.—3-18.
H. Q. 1772-39-439.

Surname Mc Kay Christian Name George

STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer
		Day	Month	Year	Day	Month	Year				
	1										

RK

D.M.S. 1375.

Medical Examination upon leaving the Service

of an Officer fit for general service or a Soldier fit for duty.

☛ *Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.*

Rank PTE Name GEORGE Surname McKAY.

Unit or Corps C.F.C. (If a soldier) Regtl. No. 1013.698

Born at BROCKVILLE ONT. on, date 13th Oct. 1890

Signature (for identification) G McKay

The examination is to be made jointly by two Medical Officers.

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe.

Weight 170 lbs.

Height 5 ft. 11 ins.

2. NUTRITION AND DIATHESIS?

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. NERVOUS SYSTEM?

4. RESPIRATORY SYSTEM.

5. HEART?

Abnormal Sounds?

Abnormal Size?

Pulse Rate? Intermittence or irregularity?

6. ARTERIES.—Any hardening?

7. DIGESTIVE SYSTEM?

8. GENITO-URINARY SYSTEM?

Urinalysis—S.G.?..... Reaction?..... Albumen?..... Sugar?.....

9. SKIN, MIDDLE EAR, EYE or any other part?

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe.

11. Opinion as to the health and physical condition of the one examined?

1918

Examined at..... Signed..... M.O.

Date..... Signed..... M.O

☛ *If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.*

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

365 Alfred St
Kingston

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. 101698 Rank Pte Surname MC KAY
(Given name in full) George

Unit or Corps 32d CCDD Birthplace Brockville

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

1. GENERAL DESCRIPTION:

Physique good Weight 160 lbs. Height 5 ft. 10½ in. Colour of Eyes Grey

Nutrition good

Pulse 76

Condition of arteries Normal

Vision Rt. N Left N

Hearing (conversational voice) Rt. N ft.

Left N ft.

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

Tatoo marks on both arms below elbow on flexor aspects.

Opinion as to general health and physical condition Fit

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 Yes Genito Urinary Sytem No Cardio-Vascular System No

Special Senses No Integumentary System No Respiratory System No

Disturbance of mentality No Muscular System No Digestive System No

Osseous and Joint System No Any other general condition No

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

Is slightly nervous but has always been this way. Feels as well as when he enlisted on [illegible].

No disability.

APPROVED

Lieut. A.M.C.
For A.D.M.S. No. 3
19-3-19

(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 Bamfield MD 3 (Canada)

Date 1/9/19 Signed W Dagnall Capt M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to, or during service.

Signature Lyes. M. C. Kay

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

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

[OVER]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-39-1142.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 1013698 (Rank) Private

Name (in full) McKAY, George enlisted in

the 230th Forestry Bat'n.

CANADIAN EXPEDITIONARY FORCE at Port Arthur, Ont. on the 8th

day of June 19 17

HE served in Canada, England and FRANCE

and is now discharged from the service by reason of in accordance with R.O.1420.

Demobilization. Auth. 3DD 3. Mc.509, D. 19.3.19

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

Age 48 years 5 months	Marks or Scars
Height 5 feet 10 inches	Tattoo marks on both arms
Complexion Dark	
Eyes Grey	
Hair Dark Brown	

Geo McKay
Signature of Soldier

Capt
Issuing Officer

O. C. Discharge Section
No. 3 District Depot
Rank

Appointment

Date of Discharge 22.3.19

Signed at Kingston, Ont. this 22nd day of March 19 19

in Military District No. 3

File Reference No. 3DD 3. Mc.509.

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

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

FORM P. 559
8245-150M.-7/17

MARRIED OR SINGLE: S.
PLACE OF BIRTH: Brockville, Ont.
NAME OF NEXT OF KIN: Jennie McKay RELATIONSHIP: S.
ADDRESS: Gen. Delivery Kingston, Ont.

NAME OF NEXT OF KIN: RELATIONSHIP:
ADDRESS:

APPOINTMENTS. PROMOTIONS AND REVERSIONS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

DATE ADMITTED	ADMISSIONS DATE DISCH'D	V. OR A.	TO HOSPITAL, &c. NAME OF HOSPITAL

SEPARATION ALLOWANCE

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE) STOPPED EFFECTIVE (DATE
PAYABLE TO REASON
RELATIONSHIP AUTHORITY
AUTHORITY FOR ISSUE REMARKS
SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE) STOPPED EFFECTIVE (DATE)
PAYABLE TO REASON
RELATIONSHIP AUTHORITY
AUTHORITY FOR ISSUE REMARKS
NEW PAYBOOK ISSUED NEW PAYBOOK ISSUED

REG'L NO. 1013698 RANK Private NAME McKay, George.
PLACE OF ATTESTATION Port Arthur, Ont. DATE OF ATTESTATION 8/6/17 ORIGINAL UNIT 238th Batt'n.
PRESENT UNIT C.F.C.

ASSIGNED PAY

(1) PER MONTH $20.00 DATE EFFECTIVE 1/12/17 AUTHY. A2M-29/11/17
PAYABLE TO Mrs Nellie Morrison 84 Leasalle Road Verdun Que Can.
RELATIONSHIP Sister
(2) PER MONTH $ DATE EFFECTIVE AUTHY.
PAYABLE TO
RELATIONSHIP
(3) PER MONTH $ DATE EFFECTIVE AUTHY.
PAYABLE TO
RELATIONSHIP
(4) PER MONTH $ DATE EFFECTIVE AUTHY
PAYABLE TO
RELATIONSHIP
DISCHARGE DATE AND PLACE
REASON AND AUTHORITY

(1) STOPPED EFFECTIVE
CAUSE
DATE A3M FORMS REND.
(2) STOPPED EFFECTIVE
CAUSE
DATE A3M FORMS REND.
(3) STOPPED EFFECTIVE
CAUSE
DATE A3M FORMS REND
(4) STOPPED EFFECTIVE
CAUSE
DATE A3M FORMS REND.
ACCOUNT TRANSFERRED TO N.E. BRANCH (DATE)
ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

PARTICULARS OF TRANSFERS

TO UNIT	EFFECTIVE DATE	AUTHORITY
C.F.C. France	1-11-17	a.R

PERIOD FROM	PERIOD TO	PAY AND FIELD ALLOWANCE No. OF DAYS	PAY AND FIELD ALLOWANCE RATE	PAY AND FIELD ALLOWANCE $ c.	WORKING PAY No. OF DAYS	WORKING PAY RATE	WORKING PAY $ c.	SEPARATION ALLOWANCE $ c.	ASSIGNED PAY CREDITS $ c.	ANY OTHER CREDITS $ c.	TOTAL CREDITS $ c.	SEPARATION ALLOWANCE $ c.	CASH PAYMENTS DURING THE MONTH 1 $ c.	2 $ c.	3 $ c.	4 $ c.	ASSIGNED PAY $ c.	OTHER CHARGES $ c.	TOTAL DEBITS $ c.	BALANCE CARRIED FORWARD CREDIT $ c.	BALANCE CARRIED FORWARD DEBIT $ c.	NUMBER OF ACQUITTANCE ROLLS 1	NUMBER OF ACQUITTANCE ROLLS 2	NUMBER OF S.A. AND A.P. CHEQUE
July 1/	Balance from Canada									12 80	12 80									12 80				
July		31	1.10	34 10							34 10									46 90				
Aug				34 10							34 10									81				
Sept				33							33									114				
				10 20						12 80	114 00													

REMARKS. ALL CASUALTIES, PROMOTIONS, &c., TO BE NOTED, ALSO PARTICULARS OF "OTHER CREDITS" OR "OTHER CHARGES"

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

1013698 Pte McKay Geo $20.00

Att. Fld

PERIOD FROM	PERIOD TO	PAY AND FIELD allowance No. of Days	PAY AND FIELD ALLOWANCE Rate	PAY AND FIELD ALLOWANCE $ c.	WORKING PAY No. of Days	WORKING PAY Rate	WORKING PAY $ c.	SEPARATION ALLOWANCE $ c.	ASSIGNED PAY CREDITS $ c.	ANY OTHER CREDITS $ c.	TOTAL CREDITS $ c.	SEPARATION ALLOWANCE $ c.	CASH PAYMENTS DURING THE MONTH 1 $ c.	2 $ c.	3 $ c.	4 $ c.	ASSIGNED PAY $ c.	OTHER CHARGES $ c.	TOTAL DEBITS $ c.	BALANCE CARRIED FORWARD Credit $ c.	BALANCE CARRIED FORWARD Debit $ c.	NUMBER OF ACQUITTANCE ROLLS 1	NUMBER OF ACQUITTANCE ROLLS 2	NUMBER OF S.A. AND A.P. CHEQUE	REMARKS. ALL CASUALTIES, PROMOTIONS, &c., TO BE NOTED, ALSO PARTICULARS OF "OTHER CREDITS" OR "OTHER CHARGES"
MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS				DR. 1	DR. 2	DR 3	DR 4	BALANCE	OFFR. RED. PAY	SER. ALLCE	ENG.										
Sept	Bal	###													114										
Oct	P-Pay	34	10	AR 603 56 Coy 6/7/17				1 9			7 13				140 97		60								
		34	10								7 13														
Nov	P Pay	33	-	AR 68 56 Coy 6/7/17				15/9/17			3 57														
				" 78 " "				15/9/17			3 57														
				" 49 " "				29/9/17			3 57														
				Can A P							10 71														
Dec	P Pay	34	10										20				75								
				Dr 19186 AR 2849 6/12/6				17/9/17			12 16														
				AR 108 56 Coy 6/7/6				30/9/17			3 57				161 63										
		67	10								26 44		20												
1918 Jan				Can A P									20												
	P Pay	34	10	AR 185 56 Coy 6/7/6				31/1/17			4 46														
				" 150 " "				15/11/17			12 49														
				" 224 " "				15/12/17			6 25														
		34	10								23 20		20		152 53		75								
Feby	P Pay	30	50	Can A P									20												
				5 days F P #2. 4-12-17 A.W.O.L. from midnight until 11 A.M. Nov 3 1917 forfeits 1 day R.W. & D. 15/11/17 56 60																						
												6 60													
				C/R 268 56 60				14-1-18			3 57														
				" 230 6 Dist				28-1-18			4 46														
		30	80								8 03	6 60	20		148 70		~~47~~								
March	P P	34	10	Can A P									20												
				AR 613 8/3/18 #6 Qto 6/6							53 53														
				" " " "							4 87														
				" 400 9/3/18 " "							13 38														
				" 549 28/2/18 " "							4 46														
				" 653 29/3/18 " "							8 03														
		34	10								84 27		20		76 53		75								

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:- 1-12-17.		EFFECTIVE DATE:-	
AMOUNT:- ~~$~~ 20.00		AMOUNT:-	

NAME:- Mc KAY, George. 173

NUMBER:- 1013698.

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. Nellie Morrison
84 Leasalle Rd, Verdun, Quebec
Stopped Effec 1/1/18 a.3.m (Sister) just

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private

UNIT AND TRANSFERS

ORIGINAL UNIT:- 230th Bn.

DATE ACCOUNT FIRST OPENED:- 1-7-17.

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			C.F.C. France

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
~~9-1-19~~	~~2229~~	~~Field~~	~~3 73~~				
~~28-1-19~~	~~6957~~	~~B. Depo.~~	~~#84~~				
~~5-2-19~~		~~24005, #39~~	~~24~~				
~~6-2-19~~	~~7584~~	~~B. Depo.~~	~~9 73~~				
			18 57				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	10		

PARTICULARS OF RENDERING NON-EFFECTIVE:- Dis. to Canada 28/2/19. Auth. C.R.C. Nk. 2750, S'dale 15 S'dale 1 M.D. 3 le M.D. 3

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mch 31st	Balance Forward.								78 53	75	
April	P. P.	33 -		Can AP				20			
				A.R. 55, 15/4/18, #6 Dis	3 57						
				" 140, 30/4/18 "	4 46				83 50	75	
May	P. P	33			8 03			20			
		34 10		Can AP.				20			
				AR 240, 17/5/18 "	3 57						
				" 339, 31/5/18 "	4 46				89 57	75	
		34 10			8 03			20			
June	P. P	33		Can AP				20			
				AR 442, 15/6/18 "	3 57						
				" 538, 30/6/18 "	5 35				93 65	75	
		33			8 92			20			
July	P. P.	34 10		~~Can AP~~				~~20~~			
				AR 690, 15/7/18 #6 Dis	3 57						
				" 842, 31/7/18 "	5 35				118 83		
		34 10			8 92						
Aug.	P. P	34 10		" 957, 15/8/18 "	3 57			—			
				" 1181, 31/8/18 "	5 35				144 01	105	
Sept.	P. P.	34 33 10 -		ak. 1392, 17-9-18, 6 Dist.	8 88 3 57			-			
				" 1508, 30-9-18, " "	5 35				168 09 30 84	120 -	
		33			8 92						
Oct.	do	34 10		ak. 1610, 15-10-18, 6 Dist.	3 73				198 46 29 51		
		34 10			3 73						
Nov.	do	33 -		✓ 1833 15/11/18 ✓ 5 days F. P. 2. 22-10-18. all't. from 10.00 p.m. 20-10-18 to 7.30 a.m. 22-10-18. D.O. 49, 2-11-18, 56 Coy.	13 06			7 70			
Dec.	do	34 10		ak. 1914, 30-11-18, 6 Dist.	5 60						
				" 2015, 18-12-18, " "	9 33						
Jan.	do	34 10							263 97		
		101 20			27 99	7 70					

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

F. Y. (11.)

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									263 97		
Feb.	P. P.	3080		Adv. 3229, 13-1-19, 5 Dist.	3 13						
	Int. on Def. Pay	7 87		" 6957, 28-1-19, B. Dep.	4 87						
				" 7584, 6-2-19, "	9 13				284 31		
		3867			18 33						
21/3/19				24005 5/2/19		24			284 07		
				10 S.t.o Canada 23/3/19 S.Liab 23 6.8.6.							

A.3.M. FORM. REN'D. ✓ EFFEC. ✓
DISCHARGED TO Canada DATE 28/2/19.
PAY BOOK VERIFIED 8-2-19.
Ledr. # 2811 07 BAL. 284 07 ALLD'D. REN'R 8-2-19.
AUTHY. W.O. 21150, 6/2/19. S.dale to S.dale M.D.3.
COMPILED BY. Hlsainsford.
CHECKED BY

1-3-19 Belgica

PASSED TO W.S.G. 21.3.19

AUDITOR | PAYMASTER

M. OR S.

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

REGT. No. 1013698 RANK Pte. NAME (IN FULL) Mc Kay, L. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN nil RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? DATE EFFECTIVE

TO WHOM PAID nil RELATIONSHIP

ADDRESS nil

M.D. - 3 - 13

PARTICULARS	EFFECTIVE DATE	AUTHORITY
8 1/10		
Pte Geo McKay		
365 Alfred St		
Kingston Ont		

ORIGINAL UNIT C.E.F. 6.F.6. IF IN P.F. WHAT UNIT? (BLOCK LETTERS SURNAME FIRST)

PLACE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY $ nil DATE EFFECTIVE

PAYABLE TO RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS nil

nil

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE Kingston Ont DATE Mar 22nd 1919 REASON AUTHORITY #3DD-3-Mc-50 IF ENTITLED TO POST DISCHARGE PAY

223

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.			TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.			TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT							284	07	284	07																									284	07	
Feb.											2/3/19		1/3/19				487	35													39	87			244	20	
Mar	22	1.10	24	20	11	20	35	00	70	40							314	60													314	60					Do. 65 Subs. 14 days #6973
																																					M.F.W. 2595 Rec.
122 days			280				280																															#237795 Met 22/4
adjd.																																					
Wash'd.																																					
June 3																																					

Mar Service gratuity

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

m 6411

Date of Assignment

Dec 1-17

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

20			

PARTICULARS OF SEPARATION ALLOWANCE

No. 1013698

Rank Pte Promoted Reverted Discharge

Soldier's Name George Mc Kay

Battalion 230 Battn C.E.F.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs Nellie Morrison

Address 84 Leacalle Rd. Verdun Que.

Change of Address

1

2

3

4

Date 1918	Cheque No.	Amount S/A	Amount A/P		Total		REMARKS
							K-12404-G-13.
Jan	H 67000		40	✓	40	R	mailed 4/1/18
Feb	H 72453		20		20		2 M 22-12-17
Mar	M 90791		20		20		
apr	E 4426		20		20	✓	
may	N 19355		20		20	✓	
June	J 23834		20	✓	20	✓	
July	~~L 30574~~		~~20~~		~~20~~	✓	
			£ 140		£ 140	✓	

Q3116

L 30574 banc 22-7-18

A/c Closed 30-6-18.

Ret'd per Belgos

Date 1-3/19 F.X.

Clerk Bendon

Dodsley

In D.C. 3

1740 789 Rend on file K-12404-G-24

CANADIAN ASSIGNED PAY AUDITEE

AUDIT CLERK

DATE 11/6/19

RO. 1908-19-2/18.

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

M. F. W. 128.
400M.—4-17—1772 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.
40m.—4-17—1772 39-1141
L. L. 2929—M. & D. 7993.

War Service Badge Class ...A... 6b.1

SHORT FORM. No. 90961 Issued

11-2-44

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 1013698.

2 Rank. Private

3. Name. McKay, George

4. Unit. No. 3 District Depot.

5 Date of Discharge | 22.3.19. | Place Kingston, Ont.

6 Reason for Discharge ..... Demobilization.

7. Authority. 3DD 3. Mc.509, D. 19.3.19.....R.O. 1420.

8. Proposed Residence after Discharge ..... 365, Alfred St, Kingston, Ont.

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.? 39

X Geo McKay

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place ..... Kingston Ont.

Date ..... 22.3.19.

Signature ..... Lieut.

(O. C. Discharging Unit.)

for O. C. Discharge Section

No. 3 District Depot

M.F.B. 218a—300M.-11-18—1772-39-113.

MM

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

B46 B18

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

Reserved for M.H.C.

Regt. No. 1012648 Rank Pte Surname McKay Christian Name George

Unit or Corps—(a) Overseas from United Kingdom Can. For. Corps (b) in United Kingdom C. For. Corps

Born at—Town Brockville County or Province Ont. Country Canada

Date of Birth—Day 13th Month Oct. Year 1880 Age 41 yrs. 8 months.

Joined at Port Arthur Ont. Canada Date 9th June 1917

Former trade or occupation Labourer

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

female figure tattoos on R forearm. female head tattoos on left forearm

Height—feet 5 inches 10 Colour of eyes Grey.

Signature of Soldier (*for identification purposes*) George McKay

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*): ARTERIO-SCLEROSIS

Disabilities Group (*b*): NA

Disabilities Group (*c*): NA

2. CAUSE OF DISABILITY

		Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	Civil life.	Canada	Prior to enlistment
(*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.

1. Illnesses etc prior to enlistment:- Diphtheria :- 8 yrs old.
2. Occupation :- Labourer.
3. Enlisted:- June 8/17 Forestry.
4. Arrived in England July 4/17.
5. Went to France July 22/17
6. Debility - 2 days in Hosp. Evacuated with draft.
7. Documents:-(a) 23.12.18 to 1.1.19 V.D.S.
   (b) Nil.
8. Man's statements:- Tells absolutely fit. Do 43 yrs old.

6. PRESENT CONDITION.

Subjective Nil.
Objective:- Only fair development.
Circulatory Syst:- Apex and size of heart normal. No adventitious sounds. Roughening of first mitral. Pulse regular. Good reaction. ~~Artery~~ Artery palpable.
Respiratory Syst:- Chest small. Good expansion and resonance Breath sounds normal.
Nervous Syst:- Apparently normal.
Digestive Syst:- Apparently normal.
Genito-Urinary:- Apparently normal.
Do in very fair condition but do not think he could stand strain of A man.

7. OPERATION. (i.) Was one performed? No (ii.) If so, state what. N/A

(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. 6 pulled because of decay.

9. DO YOU RECOMMEND:—

(a) Fit for duty? (state category) Yes B1

(b) Invalid to Canada? N/A

(c) Discharge from the Service as permanently unfit? N/A

Date of Report 3—1—1919.

Signed Frank R Smith Capt.
Officer in medical charge of Coy.

Station Summerfield

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? na — Aggravated? na
(b) Misconduct of the Soldier — Caused? na — Aggravated? na

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.)

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 I
This man is of rather poor development but exhibits no sign of disease or disability save definite arterio-sclerosis. There is some question about age. He looks about 43 years

Authority A.G. Tel 9083 11/11/18

19. RECOMMENDATION :—
(a) Fit for duty? *(state category)* B1
(b) Invalid to Canada? No
(c) Discharge from Service as permanently unfit? No

Date of Board 3 Feb 1919

Station Sunningdale

Signatures of the Board — A.H. Newman Capt. President. — J.J. Downey Major

Approved J.G. Munro Captain, C.A.M.C. for A.D.M.S., Canadians, London A.D.M.S.

Dated at ..... Station 191

ASSISTANT DIRECTOR OF MEDICAL SERVICES, CANADIAN LONDON AREA. FEB 4 1919 13. BERNERS ST. LONDON, W.1

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, 101369 George McKay 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 :—

George McKay
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.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 3.

NAME OF SOLDIER McM... G...

RANK Pte.

No. 1013698

REGIMENT D.D.

INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

	Date	Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhoea	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination	1919 Mar 19 1/5										12. / 2,3,12, 13,14,15, 18,19,21, 30,31,32,									D.D. Wilson Capt. 3		Dentures required Jr. Complete.