Original

ATTESTATION PAPER

No. 61108

Folio 460579

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

1. What is your name? — Murdock Fred McKay
2. In what Town, Township, or Parish, and in what Country were you born? — Tache, Ontario
3. What is the name of your next-of-kin? — Catharine McKay (mother)
4. What is the address of your next-of-kin? — 157 First St W. Portage la Prairie man. Canada
5. What is the date of your birth? — march 27 1891.
6. What is your trade or calling? — Book keeper
7. Are you married? — no.
8. Are you willing to be vaccinated or re-vaccinated? — yes.
9. Do you now belong to the Active Militia? — no
10. Have you ever served in any Military Force? — 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.

M F McKay (Signature of Man.)

F D Rankin (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Murdock Fred McKay, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the **Canadian Over-Seas Expeditionary Force**, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

M F McKay (Signature of Recruit.)

Date July 5th 1915 F D Rankin (Signature of Witness.)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Murdock Fred 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.

M F McKay (Signature of Recruit.)

Date July 5th 1915 F D Rankin (Signature of Witness.)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Winnipeg this 5th day of July 1915

D McLean (Signature of Justice.)

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

D McLean (Approving Officer.)

for O/C LIEUT. COLONEL COMMANDING 61st. OVERSEA'S BATT'N.

M. F. W. 23.
200 M.—8-15.
H.Q. 1770-62-641.

DESCRIPTION OF mindock 2d mc Dair. ON ENLISTMENT.

Apparent Age 24 years 3 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 8 ins.

Chest measurement
- Girth when fully expanded 34½ ins.
- Range of expansion 4 ins.

Complexion Medium

Eyes Blue

Hair Brown

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

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

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

Tip of 2nd finger on left hand amputated.

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 July 5th 1915

Place Kemptonpewell

W A Reilly
Capt CAMC
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

M. J. 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.

D McLean (Signature of Officer.)

Date July 5 1915

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers..... 1

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms..... 2

Proceedings on discharge..... 1

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Discharge Parchment Certificate..... 1

Medical Report for Invalids..... 2

Medical History Sheet..... 2

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

W.O. 363 1344
A.F.W. 3997-1
M.F.W. 192-1
A.F.B. 122-1
Record 1
K 149 1

M. F. W. 62.
50m.—9-16.
H. Q. 1772—39 935.

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name McKAY, MURDOCK FRED

Regt. No. 460579 Rank Pte

Corps 44th Bn

Demob

Deceased 31-3-60

20073

A.F.B. 122-1

No. 61108 / 460579 RANK Pte. NAME Mc Kay M. J.

T. O. S. 5/7/15. UNIT 61st. Battalion
(D. O. 26) of 7/7/15.

M. D. 10

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 July 5.	1915 July 31	✓		
	Aug.	✓		
	Sept.	✓		
	Oct.	✓		
	Nov.	✓		
	Dec.	✓		
1916	1916 Jan.	✓		
	Feb.	✓		
	Mar.	✓		
	Apr	✓	Transfd to 44th Bn 30-4-16	D.O. no 1140 of 12-5-16.

UNIT SAILED
APR 21 1916

Reg. No. 460579 Name McKay M.

Rank Pte Corps 61st Age - Service

Ledger No. Serial No.

HOSPITALS	DATE	DIAGNOSIS
King George Winnipeg Dis unit	15·3·16 27·3·16	Diphtheria C

P. T. O.

HOSPITALS	DATE	DIAGNOSIS

M. F. W. 2553.
75M.—9-19.
1772-39-1332.

Forms R. 149.
7106—250m—7/2/17.

Name Mc Kay. Murdock Fred Rank Private. Reg. No. 460579.

Unit ~~44th Bn.~~ Gen Depot.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
26-8-17.	20 Gen Casuals	Gen R Shld.	a.	1	6002	
7-9-17.	1st W.G.H. Liverpool.	do		B8		7001. 1756
18-12-17	Mil Conv Epsom	do		B94		8670
18-1-18	Discharged do	do		B122		2663
		30 1-18.				
24-5.	Can Hosp. Etchingham		V.D.S.	b 74.		18607.
9/11	Discharged.	Gen	Do.	C167		9392.

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

10 CARD NO.

SURNAME. McKay.

CHRISTIAN NAMES Murdock Fred.

REGL. No. 460579 RANK Pte.

UNIT 61st

FORMER CORPS Nil.

SS Disc 28/2/19

D.O. 56/28/2/19

FOLL. #10 SS. Demob.

Batt.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL McKay, Mrs. Catherine

RELATIONSHIP TO SOLDIER Mother

ADDRESS ~~157~~ 1st St. ~~N.~~ W. Portage la Prairie, Man.

P.O. Box 456 Hause 157 N.K.

(auth S.G.O.P.) June 12/16

COUNTRY OF BIRTH Canada, Yache, Ont. DATE Mar. 27, 1891

PLACE OF ATTESTATION Sewell Camp DATE July 5, 1915

O/S 1/4/16 373/15

R/C 14-12-18 232/122

MARRIED SINGLE yes WIDOWER

TRADE OR CALLING Bookkeeper RELIGION Presbyterian

DESCRIPTION.

APPARENT AGE 24 YEARS 3 MONTHS

HEIGHT 5- FEET 8 INCHES

CHEST MEASUREMENT 34 1/2 INCHES EXPANSION 4 INCHES

COMPLEXION Medium EYES Blue HAIR Brown

DISTINGUISHING MARKS Tip of 2nd finger on left hand amputated.

MEDICAL EXAMINATION. PLACE Camp Lewell DATE July 5, 191[illegible]

NAME Mc. Kay. Murdock. Freal.

REGT'L No. 460579

H. Q. FILE No. 649.

RANK AND CORPS Pte. 44th Bn. (Form 6th Bn).

FOLLOWS No.

FOLLOWS

CABLE No.	DATE	NATURE OF CASUALTY
23-6. M 6062.	5-9-17	Adm 20th Gen. Hosp, Camiers. Aug. 26th 1917. (G. S.W. right shoulder.
M 6108 W.S.M	25-9-17	Progressing favourably. First Western Gen Hospt Fazakerley Liverpool.

L. L. 20497—M. & D. 7908

M. F. W. 42—50M.—5-17.
H. Q. 17/2-39-8-3.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
A1	#20 Gen Camiers	26-8-17	GSW R. Shldr. Manx.
B-8-1-1	West, Gen. Hosp. Liverpool	7-9-17	GSW. R. Shoulder, (Manx)
B94-2	10 Mil. Conv. Woodcot		
	Park Epsom.	18-12-17	GSW R Shoulder.
B122(3)	" Ditch.	18-1-18.	" " " " 2-2-18.
L24	Can Etchinghill Lymnge	24-5-18	V.D.G.
L.167.	Wisch.	9-11-18	20.

FORM D.M.S. 1300

SURNAME	CHRISTIAN NAME OR NAMES	REG. No.
McKay	N. J.	460579

RANK	UNIT	TROOP	BATTY.
Pte	H.Q. Lab Units (C.D.) 44th Batt.		

HOSPITAL — DATE OF ADMISSION

20th Gen. Camiers 26-8-17

1. [redacted] W. G. Liverpool Hosp. 7.9.17

2. Mil Conv Woodcote Park 18.12.17
C.D. Eastbourne 24-5-18

3. Hosp.

4. Hosp.

DIAGNOSIS

1 G.S.W. R. Shldr. L.
V.D.C. Hd

2.

3.

DISPOSITION A 1 (1) — DATE

Dis. 18-1-18

C.L. 4-9-17
12.9.17 B.8.
21-12-17 B.04-2.
" 25-1-18 B.122 (3)
31-5-18 C/24.
14.11.18. 6167.

REMARKS

Dip 9.11.18

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

EPITOME OF HOSPITAL TREATMENT

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

Manitoba Military Hospital

Date Feb 14 1919

REQUISITION FOR TREATMENT OR EXAMINATION

Reg'tal # 460579. Rank. Pte. Name. cKay. F. . . . . Unit 10DD. . . . . .

Bed . . . . . Ward. . . . . .

Injury or disease. .V.D.G..&.T.B.. in. shoulder Part.affected.. . . . . ..

Treatment or Exam.

X-Ray right shoulder.

T.A. Goodchild.

Capt CAMC

REPORT

M.F. IN POSTERIOR CHEST WALL opposite 2nd interspace between superior angle of scapula and chest wall. Hole in superior angle of scapula.

Signed J McMillan Lt (M.C.)

NP

Asst. Director Medical Services
No.
FEB 20 1919
MILITARY DIST. No. 10, WINNIPEG

McGregor Barracks Feb 17 1919

Re# 460579 Pte F McKay

Exam of Chest

Expansion 30-34 Chest is rather emaciated. There is a small scar above right clavicle. There is no abnormal percussion note over lung area. Auscultation shows a mild friction rub. below right clavicle heard at the beginning of inspiration and at the end of expiration only. This I consider is due to old infection , there being nothing active at present. No other abnormality.

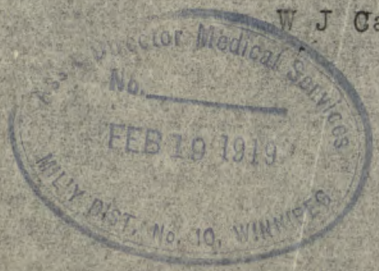
Re Heart. Pulse rate 100 at rest, increased after exercise, touching toes 8 times, to 148, five minutes later at rest rate was 108.

Rhythm and volume both normal.

Heart is enlarged towards the left. Dulness ½" outside nipple line. There is a mild mitral regurgitant murmur heard over the valve but not transmitted . This is not sufficiently serious to cause his Tachycardia. Cause of Tachycardia: I am unable to state. The enlargement of heart is probably secondary to Tachycardia.

W J Campbell Capt.

NP.



LTR.

R—122

Rank | Name McKAY, Murdock Fred | Reg'l No. 460579

Unit 61st, Bn. | If in perm. Corps, What Unit? | Married or Single Single,

Place and Date of Enlistment Camp Sewell, 5th, July, 1915, Place of Birth Tache, Ontario.

Name and Address, Next-of-Kin Catherine McKay.

157-1st, ~~Kt~~ N W, Portage-La-Prarie, Manitaba, Canada. Relationship Mother

Assigned Pay Monthly $ | Payable to | Relationship

Separation Allowance $ | Payable to | Relationship

N/E. R.B. No. 3758
File R.L.
Category OR Can

Discharge, Date and Place | Reason | Character

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
C.		Arrived in England	12 APR 1916		
12-5-16	61st Batt'n	S.O.S. transf'd to 44th Batt'n	Shorncliffe	12-5-16	Pt II D.O. #114.
16.5.16	Adj't. 44th Bn.	T.O.S. from 61st Batt'n	Bramshott	12.5.16	. . . 137 Auth 4th C.D.O 193/16
13.7.16	" "	Awd. 28 days No. 2. F.P. for Malingering. Forfeits 28 days pay under R.W.	"	13.7.16	" " 195
31-8-13	44th	Embarked For France		10-8-16	a 7 B 103 checked 16 B Pt-11-224
3.9.17	Man Reg	Adm No 20 Gen Hosp	Camiers	26.8.17	C.L.A.I. Gsw. R. thigh
11.9.17	"	Adm 1st Western Gen Hosp	Liverpool	7.9.17	" B8.
13.9.17	44th Bn	Invalided. Posted to M.R.D.	Field Pte	6.9.17	Pt II 0.107 Pt II 0. 189 19.9.17 MRD
20.12.17	M.R. (44th)	T/E to Mil. Conv. Hosp Woodcote Pk.	Epsom	Pte. 18.12.17	C.L.B. 94. G.S.W. R. Shoulder 3rd R.D. Pt II 0. 32
31 1 18	Gen Depot	T.O.S. from M.R.D. Shown on Garr. duty to H.Q.R.S. Shoreliffe —	Shorncliffe	30 1 18	Pt II 0. 26 1/2 18 amended by D.O. 140 d/ 13.6.18 of G.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.
25.5.18	Gen: Depot	Ceases on Garr. duty HQRS. S'cliffe	Pte S'cliffe	23.5.18	D.O. 124
9/12/18	Gen Dep	SOS to B E F Canada	Pte Witley	7/12/18	D.O. 292

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

3 blues

14196

No. 10 DISTRICT DEPOT DISCHARGE SECTION

This is to Certify that No. 460579 (Rank) Pte.

Name (in full) Murdoch Fred McKay enlisted in the 61st Battalion CANADIAN EXPEDITIONARY FORCE at Sewell Camp on the Fifth day of July 1915

HE served in 44th Battalion France & Belgium

and is now discharged from the service by reason of *Demobilization R.O. 1420 (c)*

☆ C.O. 48 - 579 D.O.56 ☆

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

Age 27 yrs 11 mos.

Height 5 ft 8 inches

Complexion medium

Eyes Blue

Hair Brown

Marks or Scars Tip of 2nd finger left hand amputated

M F McKay.
Signature of Soldier

A. Forbes.
Issuing Officer

Major
Officer Commanding Name Rank District Depot

Appointment

Date of Discharge 28.2.19

Signed at Winnipeg this 28th day of February 19 19

in Military District No. 10

File Reference No. 44-M 1121

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

WAR SERVICE BADGE

CLASS "A" NO. 71332 ISSUED

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.

CERTIFIED CORRECT.
30 AUG. 1916
CAN. RECORDS, LONDON.

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

G.B.K.

M. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 61st. Overseas Battalion

Regimental No. 460579 Rank Pte. Name McKay, Murdock Fred
C. E. F.

Enlisted (a) 5/7/15 Terms of Service (a) D. of W. Service reckons from (a) Enlistment

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) Book Keeper

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	Canada	1-4-16	s.s. "Olympic."
		Arrived Bordon	England	11-4-16	
16-5-16	44th Bn.	Transferred to 44th Battalion, Can. Inf.	Bramshott	12-5-16	D.O.Pt.II No.137.
		Proceeded for service overseas ~~with Battn.~~	AUG 10 1916		W. W. Clarke Major & Adj. 44th Battalion C. E. F.
10-8-16	44th. Bn.	Disembarked France	Havre	12-8-16	Nominal Roll
26.8.17	23 C.C.S.	S/W. R. Shar.	adm.	25.8.17	a 36. 6359.
		To	23 a. T.	26.8.17	
26.8.17	20 Fen.	" "	adm.	26.8.17	to 3034-6865.
25.8.17	12 C.C.S.	" "	adm.	25.8.17	a 36. 7385.
		To.	6 C.C.Sh	"	
1.9.17	a/c Unit	Wounded	Field	24.9.17	B213. dcs. 193.

(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.

460579.Pte.McKay,Murdock Fred

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.
6-9-17.	20 Gen.	Inv.(Wded.) & posted to M.R.D.Shorncliffe, per A.T."Stad Antwerpen" J.M.Anderson Lieut. for Lt.Col.,A.A.G. Canadian Section.	Field	6-9-17	W.3083/3858 Pt.II.D.O.#107 d/13-9-17.
9.9.17.	M.R.D.	T.O.S. from the 44th Bn.	S'cliffe	6.9.17.	Pt II O. 189. L E Cumming LIEUT: FOR LT: COL: I/C RECORDS. C.O.M.F.
29-1-18	"	Std Dep Can.	S'cliffe	28-1-18	Pt II. D.O. 29.
31-1-18	"	SoS. Transfered to General Depot for duty with Sqrs. Mess. & Stdgrs.	do	30-1-18	Returned — 31 [illegible] Lieut. & Adjutant, Manitoba Regimental Depot.
31.1.18	Gen Depot	T. O. of Gen Depot for Cond Rdrs Sqrs Mess.	do	30.1.18	Do 26.
13.6.18	"	On Guard duty Sceptre	do	13.6.18	Do 1490
25.5.18	"	Leave Guard duty admitted to Shell Hosp.	do	23.5.18	Do 1214.
~~23.11.18~~	"	~~"ON COMMAND" 1st C.D.D., BUXTON. Leave to be awarded on return to Depot of Embn.~~	Witley	~~23.11.18~~ 22.11.18	~~Do 2709~~ Do 292. R Jackson LIEUT. OFFICER I/c RECORDS.
9.12.18 ~~23.11.18~~		"ON COMMAND" 1st C.D.D., BUXTON.		7.12.18	
7.12.18 Sailed for Canada		SoS to C of Canada			

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.

Casualty Form—Active Service.

Unit, Regiment or Corps 61st Batt. C. E. F.

Regimental No. 460579 Rank Pte. Name Wm. Ray. Murdock. Fred

Enlisted (a) 5-7-15 Terms of Service (a) C.E.F. D. of. W. Service reckons from (a)

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

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

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				
		T. O. S. No. 10 DISTRICT DEPOT. 7-12-18 D. O. 250 PARA 1856 Ja Dack Lt for. Lt. Col. Officer Commanding No. 10 District Depot.			
		Discharged 28-2-19. C. O. 48/579 D. O. 56 Ja. Dack Lt for. Major Officer Commanding No. 10 District Depot			

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) *e.g.* Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				

*Name ...McKay Murdock... Rank ...Pte... Regtl. No. 460579

Original unit ...61st... Present unit ...G. Depot... M. or S. Age ...24... Religion ...Pres... Ref. H.Q. ...

Fyle Depot 10.3.3.M.1/65

Port, ship and date of arrival ...14-12-18 Olympic, Halifax...

Next of kin ...Catherine McKay 157 1st. St. Portage-la-prairie (Mother)...

Address on leave ...

Address on discharge ...

Transportation issued Yes / No Date ... Character on discharge ...

Previous occupation ...Bookkeeper... Date and place of enlistment ...Camp Sewel July 15th 1915.

Diagnosis ... Date of Medical Boards ... Bmed

Date.	Remarks.	Pt. 2 Order No.
7-12-18	T.O.S.#10 D.D.Posted C.s. Coy CO 301-4789 DO	250-1856
	14 days landing leave with subs.	

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

(over)

Date.	Remarks.	Pt. 2 Order No.

M.F.W. 192.
60M-3-18. (D.P.) 353.
1772-39-1243.

C.A.D.C.5009. 50M-3-5-18.

CANADIAN ARMY DENTAL CORPS.

DENTAL CERTIFICATE.

NOTE:- This form will be attached to the Medical History sheet of each Other Rank being returned to Canada for disposal.

REGTL. No. 460579* NAME MCKAY M-F. RANK Pte UNIT Res Depot

Date of Examination	19-11-18
Present Dental Condition	Unfit
In case of loss, or decay of teeth, is the loss due to wounds, injury, or disease, directly attributable to Active Service?	Yes.
Has he ever declined Dental Treatment?	No.
Recommendation	1 Upper Filling 1 Lower Filling

A.D.D.S. WITLEY 19 NOV 18 CANADIAN ARMY DENTAL CORPS

Date 19 NOV 18

Station .....

Signature of Examining Officer H R Conway Capt. C.A.D.C.

* Name should be entered in block letters.

L. L. Job 95618—M. & D. 6555.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
15m.– 3-16.
H. Q. 1772-39-819.

To Whom Mrs. Catherine Mc Kay

Address P.O. Box 456 or 157 West 1st. No. St.,
Portage La Prairie,
Man.

Rate $20 00

By Whom Assigned Mc Kay M.F.

Regtl. No. 460579

Rank Pte.

Corps 61st. Battn.

APR 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				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—4-16.
1772—39—819.

Sheet No. 2. Mrs. Catherine McKay

Name of Soldier McKay M. 4th 6th Bn.

L. L. Job 310.—Req. 6574.

$ Pte $20.00

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	Y2824	20	
May		95285	20	
June		A4901	20	
July		M11666	20	
Aug.		C12274	20	
Sept.		Q19275	20	
Oct.		Q24005	20	
Nov.		M26192	20	
Dec.		33799	20	
Jan.	1917	D40412	20	
Feb.		W45952	20	
March		V49437	20	20 B
April		S33510	20	20. E
May		59477	20	20
June		R15816	20	Ba
July		S24128	20	B.
Aug.		F34696	20	
Sept.		C37433	20	
Oct.		K43341	20	
Nov.		45011	20	
Dec.		57225	20	$420.00
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

O.K. CANADIAN
ASSIGNED PAY AUDITED
AUDIT CLERK
DATE 12-3-19

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY * ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1.4.16.	EFFECTIVE DATE:-
AMOUNT:- 20.	AMOUNT:-

NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

Kath. McKay.
157. 1st St.
Portage La Prairie
Manitoba
Stopped effective 1.12.18.

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
5.9.18	a351. Z139	Personal Chq. 5½d	~~11~~				
23.10.18	a351 945	" " 5d	~~10~~				
~~11.11.18~~	~~a351~~	£1	~~4 87~~				
			5 08				

PARTICULARS OF RENDERING NON-EFFECTIVE Discharged Leave 30/11/18. Witley 29. 18/11/18.

MONTH	PARTICULARS	CR 1	CR 2.	PARTICULARS
31.3.18				
Apr.	P.P.	33		299 11/4/18 Ldt 5 chf
		33		
May	P.P.	34/10		C.A.P.
				a.R. 1245 - 14/5/18 - Dts
				O.N.a.R 973 - 30/4/18 - "
		34/10		
June	P.P.	33		C.A.P.
				O.N.a.R 1038 - 14.6.18 - Ctf
		33		
July	P.P.	34/10		C.A.P.
				O.N.a.R 1375 - 12.7.18 -
		34/10		
Aug	P.P.	34/10		C.A.P.
				O.N.a.R. 1811 17.8.18 Ds
		34/10		
Sept	P.P.	33		C.A.P.
				O.N.a.R. 2179 - 12.9.18 - C
		33		
Oct.	P.P.	34/10		C.A.P.
				O.N.a.R. 2529 - 11.10.18 - C
		34/10		
Nov.	P.P.	33		C.A.P.
				a.R 9753 - 1.11.18 - C
		33		
11/3/19				a351/Z139 5/9/18
				a351/945 23/10/18

CANADIAN
ASSIGNED PAY AUDIT
AUDIT CLERK
DATE 17 19

ASSIGNED PAY * ~~ENGLAND~~ OR CANADA.

EFFECTIVE DATE:- 1.4.16.

AMOUNT:- 20.

SEPARATION ALLOWANCE. * ENGLAND OR CANADA.

EFFECTIVE DATE:-

AMOUNT:-

NAME:- McKAY Murdock Fred

NUMBER:- 460579

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.

Kath. McKay.
157. 1st St.
Portage La Prairie
Manitoba

Stopped effective 1.12.18.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:-

DATE ACCOUNT FIRST OPENED:-

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			Gen Dep.
	1.5.18.		MRD

DAILY RATES OF PAY AND ALLOWANCES

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

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
5.9.18	a8351 Z139	Personal Chq. 5½d	~~11~~				
23.10.18	a8351 P45	" " 5d	~~10~~				
~~1.11.18~~	~~9753~~	£1	~~4 87~~				
			5 08				

PARTICULARS OF RENDERING NON-EFFECTIVE Rejoined Base 30/11/18. Witley D9. 18/11/18. Ld Bal #123.13 LG Bal #118.05

MONTH	PARTICULARS	CR 1	CR 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
31.3.18									51 21		
Apr.	P.P.	33		299 11/4/18 Lt S. Cliffe	7 30						
				a/c				20			
		33			7 30			20	56 91		
May	P.P.	34/10		C.A.P.				20			
				a/c 1245 - 14/5/18 - Dts.	9 73						
				O.N.A.R. 973 - 30/4/18 - " - Cliffe	7 30				53 98	-	
		34/10			17 03			20			
June	P.P.	33		C.A.P.				20			
				O.N.A.R. 1038 - 14.6.18 - Ch. Hill	2 43				64 55		
		33			2 43			20			
July	P.P.	34/10		C.A.P.				20			
				O.N.A.R. 1375 - 12.7.18 - E. Hill	2 43				76 22	-	
		34/10			2 43			20			
Aug	P.P.	34/10		C.A.P.				20	90 32		
				D.N.A.R. 1811 17.8.18 Etchinghill	2 43				87 89		
		34/10			2 43			20			
Sept	P.P.	33		C.A.P.				20	100 89		
				O.N.A.R. 2179 - 12.9.18 - E. Hill	2 43				98 46	-	
		33			2 43			20			
Oct.	P.P.	34/10		C.A.P.				20	112 56		
				O.N.A.R. 2529 - 11.10.18 - E. Hill	2 43				110 13		
		34/10			2 43			20			
Nov.	P.P.	33		C.A.P.				20			
				W.R. 9753 - 1.11.18 - G.P.O.	4 87		m		118 26	-	✓
		33			4 87			20			
11/3/19				a8351/Z139 5/9/18		11					
				a8351/P45 23/10/18		10			118 05		

CANADIAN ASSIGNED PAY AUDIT
AUDIT CLERK
DATE 17 11 19

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE

NAME

Cr. 1.		Cr. 2.		PARTICULARS	Dr. 1		Dr. 2		Dr. 3.		Dr. 4.		BALANCE		Deferred		Separation	

MARRIED OR SINGLE S

PLACE OF BIRTH Jacks Ont

NAME AND ADDRESS OF NEXT OF KIN Catherine McKay

157 1st NW. Portage La Prairie Man Can

RELATIONSHIP OF NEXT OF KIN Mother

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHO

ADMISSIONS TO HOSPITAL, &c.

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

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
1916														10 28	10 28						
1-30 4-16	30	1.00	30	—	30	1/0	3	—							33 —	25	15/4	86	30/4		
1-31 5.16	31	1	31	—	31	10	3	10							34 10	663	17/5				
1-30 6-16	30	1	30	—	30	10	3	—							33 —			769	15/6/16		
1.31 7	31	1	31	—	31	10	3	10							34 10						
1-31 8.16	31	1	31	—	31	10	3	10							34 10	971	29/7/16				
1-30 9.16	30	1	30	—	30	10	3	—							33 —	428	24/8/16	105	8/9/16		
1.31 10.16	31	1	31	—	31	10	3	10							34 10	164	19/9/16				
															245 68	247	1/10/16				
1.30 11.16	30	1	30	—	30	10	3	—							33 —	278	2/10/16				
																332	11/11/16				
1.31 12.16	31	1	31	—	31	10	3	10							34 10	386	23.11.16				
1917.			27	50			27	50							— —						
1.31 1.17	31	1.00/10	34	10											34 10	496	31/1/17				
																436	6/1/17				
			—	—											— —						
			336	60										10 28	346 88						

MOTIONS, &c.

Effective Date	Authority

HOSPITAL, &c.

Name of Hospital

Reg'l No. 460579 Rank Pte Name McKay Murdock Fred Alt

If in Permt. Corps / What Unit — Unit 61st Batt.

Transferred to 44th Batt Date 1/5/16 Authority 30 12/5/16

Permanent Force Allowances

Transferred to Man. Dep Date 1-11-17 Authority

Place of Attestation Winnipeg Man

Transferred to Gen. Dep. Date 1/2/18 Authority 26. 31/1/18

Date of Attestation

Transferred to Date Authority

Assigned Pay Monthly $ 20.00 Date Effective 1-4-16

Payable to Kath. McKay, 157-1st Portage La Prairie, Man Relationship

Assigned Pay Monthly $ Date Effective

Payable to Relationship

Stop-Payment Form (Assigned Pay) Rendered (Date) Effective Reason

Discharge Date and Place Reason and Authority

Account Transferred to Non-Effective Branch (Date)

Account Transferred to Officers' Pay Branch (Date)

MRD

13

ACQUITTANCE ROLLS 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
														10 28			Bal. 31-3-16 Can
86	30/4					12 17	7 30			20		39 47		3 81			C.J.
						9 73				20		29 73		8 18			
069	15/6/16						7 44			20		27 44		18 74			
										20	3 0 8 0	5 0 8 0		2 04			Q. M. Chgs. 1.16 Q.2.94005 1/8/16
						7 44				20	1 16	7 2 60		18 74			
105	8/9/16					7 6 7	7 6 1			20	1 5 4	26 77		18 77			Issues on Rep. 1.54 June 1916
						7 6 1				20		25 22 218 03		27 65			
						2 6 1											
						2 6 2				20		25 23		35 42		35 42	
						2 6 1											
						2 6 1				20		22 61		46 91			
										—		— —		— —		— —	
						11 87 33				20		32 20		48 81	— —	48 81	
										—		— —		— —		— —	
						52 22	12 35			200	33 50	298 07		48 81			Carried forward.

CANADIAN
ASSIGNED PAY AUDITED
AUDIT CLERK
DATE 1-6-19

460579 — Pte McKay M. F. — Asst

DATE 1917	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3
Jan.	B/F.		336	60										10 28	346 88									59 22	12 35	
1-28/2/17	28	1 00/10	30	80											30 80	630 553	29/1/17 6/1/17			0 83 1536	21/2/17			2 62 2 61		1 75
1. 31/3/17	31		34	10											34 10	674	20/2/17	810 764	20/3/17 12/3/17					2 62.	2/5 61/23	
1/30/4/17	30		33												33											
May	31		34	10											34 10	93 744								2 61 2 62		
1-30/6	30		33												33	227 150	19/5 8/5							2 68 2 68		
July	31		34	10											34 10	408 483	19/6 8/7.	333	9/6					2 68 2 67	2 68	
Aug	31		34	10											34 10											
Sept	30		33												33 —	714	2-8	811 590	18-9 2-3					2 64	2 68 5 35	9

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SER. ALLCE. ENG.
		60 80			10 28	613 08					
Oct	Bal B/Down ~~98 51~~								98 51		
Oct/17	P. Pay	34 10						20			
				R. 1320 - 15-10-17 - 44 93	9 73				102 88		
Nov.	P. P.	34 10 33		A.P.	9 73			20 20			
Dec	✓	34 10		"				20			
				R 9517 10.12.17 Brit. Hosp.	9 73						
				R. 4725 3.11.17 "	9 73				110 52		
1918		67 10			19 46			40			
Jan.	P.P.	34 10		Can A.P.				20			
				SN AR. 9770 3.11.17 5 C.G.H.	2 43						
				AR. 6918 18.12.17 CCH Epsom	9 73						
				SN AR 967 4.10.17 5 C.G.H.	4 87				107 59		
		34 10			17 03			20			
Feb	✓	30 80		Can A.P.				20	118 39		
		30 80							118 39		
	12 Days.			AR 3288 Sclff 26-2-18	4.87			20	42 86		
Mch	S.F. 18/1/18-2/1/18	8 76		3660. 18/1/18. Epsom	4 87				161 25		
	Do. 22/1/18 M.R.D								110 04		
	P.P.	34 10		Can A.P.				20			
		42 86		2589. 29/1/18 Sclff	4 87						
				3740 17/3. "	7 30.						
				4248 23/3/18 "	9 73.						
				2980. 14/2/18 "	14 60.				51 21		
					90 04				51 21		
		42 86			90 04			20			

Assigned Pay $20.00

CASH PAYMENTS 2	CASH PAYMENTS 3	CASH PAYMENTS 4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
35			200	33 50	298 07	48 81		—	48 81	
	1 75		20		26 98	52 63				
6/ 23			20		30 46	56 27		—		
			20		20	69 27				
			20		25 23	78 14				
			20		25 36	85 78			85 78	
68			20		28 03	91 85				
			20		20	105 95				
68 35		9 74	20		40 44	98 51				
90	1 75	9 74	360	33 50	514 54					

R[illegible]VICE BADGE

This space to be for numbers. CLASS A NO. 71332 ISSUED

M

Proceedings on Discharge.

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

H

MEDICAL DOCUMENTS FORWARDED TO S.C.R. P. B. C. on MAR 11 1919

No.	460579
Rank	Pte.
Surname	McKay
Christian name	Murdock Fred.

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

Corps (Squadron, Battery or Company)	61st, Batt.
Date of discharge	28-2-19
Place of discharge	Winnipeg

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age	27 years 11 months.
Height	5 feet 8 inches.
Complexion	Medium
Eyes	Blue
Hair	Brown
Trade	Book Keeper
Intended place of residence (To be given as fully as practicable.)	Box 456 Portage la Prairie, Man.

Descriptive marks

Tip of 2nd, finger left hand amputated.

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

Demobilization R.O. 1420-C.

☆ C.O. 48 - 579 D.O.56 ☆

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.

Records 31-3

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) Winnipeg *(Signature of Soldier.)*

(Date) 28-2-19 *(Signature of Witness.)*

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. **Additional Certificate in the case of a Soldier who takes his discharge on his own request.**

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

.....*(Signature of Soldier.)*

10. **Statement of Service.**

Service toward Engagement to.... (the date to which the Record of Service is completed).....years.....days.

Total.....years.....days.

11. **Confirmation of Discharge.**

The discharge of the above-named man is hereby confirmed.

(Place) Winnipeg

(Signature) Major

(Date) 28-2-19

O.C. No 10 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.)

None. Wm H McKay.

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.

Form D.M.S. 1394.
7004.—100M.—5/2/17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Epsom 1917.

No 460579 Rank Pte. Name McKay M. C.

Local Unit ..... Overseas Unit 44th Bn. Age 26

Examination held at M.C.H. Epsom.

DISABILITY.
Overseas—Local
(scratch one out). S.W. Rt. Chest.

PRESENT CONDITION.

Complains of shortness of breath. slight cough. Heart somewhat excitable no murmur. Exam of chest negative. Not very short.

St Martins Plain
8/8/18
Confirmed
Capt RAMC
for Pres. T.M.B.

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 B II. Book-keeper.
5. Discharge .....

Signatures:—

Members { A.H. Cameron Smith Maj. President.
F.J. Wood Capt RAMC
.....

APPROVED

Dated Epsom. 10.1.18 1917. A.H. Cameron Smith Maj.
For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD

Dated at ..... 19 17.

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

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

Examination held at .....

DISABILITY.
Overseas—Local
(state which)

PRESENT CONDITION.

BOARD RECOMMENDS—

1. Fit for Duty at once.

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 17.

For A.D.M.S.

Reserved for M.H.C.

Regt. No. 460224 Rank Pte Surname McKay Christian Name Murdock H.

Unit or Corps—(a) Overseas from United Kingdom 44th (b) in United Kingdom Gen. Dep.

Born at—Town Tache County or Province Ont Country Can

Date of Birth—Day 27th Month March Year 1891 Age 22 yrs. 9 months.

Joined at Sewell Man. Date 5th July 1915

Former trade or occupation Bookkeeper

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

Height—feet 5 inches 8 Colour of eyes blue

Signature of Soldier (*for identification purposes*) M H 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*) DEBILITY

Disabilities Group (*b*)

Disabilities Group (*c*)

2. CAUSE OF DISABILITY

		Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	Service	Lens	1917
(*ii.*) As to Group (*b*) above.			
(*iii.*) As to Group (*c*) above.			

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

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

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

(*iii.*) As to Group (*c*) above ? 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 ? Yes

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

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

PART I. (continued).

5. MEDICAL HISTORY.

Pt. states to have first noticed his condition while at Epsom 14th Dec 1917 while convalescent noticing a tired feeling coming over him at times. Since then he has noticed everything he does seems to much for him & would rather lie down. Since he has not been doing much of late he cannot say whether condition is becoming worse or not.
Wounded 25th Aug. 17 at Hill 70. Shrapnel entering shoulder right just below mid ⅓ of clavicle, & still exists.

6. PRESENT CONDITION.

Shortness of breath on exertion & constant tired feeling, not much relieved by rest. Feels drowsy on rising in morning & remains so for 1 or 2 hrs. Appetite impaired.

Exam.
Lungs shows nothing definite on 1st, 2nd, 3rd breathing
½ inch scar close to apex position
Heart slightly enlarged & excitable, but no organic symptoms
G. U. S. N.
Nervous System. Shows signs of slight nervousness

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

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

Date of Report 16th Nov. 1918.
Station Witley
Signed G. Fuller Capt RAMC
Officer in medical charge of case.

I have satisfied myself of the general accuracy of the above Report, and concur therein *except

Geo. G. L. Fuller Capt RAMC
{Officer i/c Hospital / S.M.O.} {Strike out one of these Brigade}

Dated at Camp Witley Station, on 16-11 1918.

*Delete if inapplicable.

PART II.

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

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

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

12. From the medical information now adduced, was the disability caused or aggravated by:— (a) Negligence of the Soldier {Caused? / Aggravated?} No (b) Misconduct of the Soldier {Caused? / Aggravated?} No / Yes.

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.)* Ten per cent.

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.)* All

15. Permanency of the Disability due to Service estimated next above in (14).
(i.) Is it permanent? No.
(ii.) If not permanent, what is its probable minimum duration *(in months)*? Six months

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

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

18. REMARKS:— N.H.S. shows treatment as pt. in Ath Special Hospital Etretat 23-5-18. to 8-11-18.

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

Date of Board 16-11-18

Signatures of the Board — Lieutenant Lt.-Col. President. H. J. Barton, Major, C.A.M.C.

Station Witley.

Approved W. Fotheringham A.D.M.S.

Dated at ..... MAJOR, D.A.D.M.S. CANADIAN TROOPS, WITLEY. Station

A.D.M.S.- HEADQUARTERS CANADIAN TROOPS. 16 NOV. 1918 WITLEY, SURREY.

191

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.

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

B.P.C. ORIGINAL

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

S.S. Olympic Station Winnipeg, Man Date Feb 18 1919

1. (a) Unit 61/ 44/ MRD TOD. D. GD (b) Regimental No. 460579 (c) Rank Pte

(d) Surname McKAY (e) Christian name Murdock Fred.

(f) Home address Portage La Prairie Manitoba

(g) Next of Kin McKay Katherine (h) Relationship Mother

(i) Address of Next of Kin Portage La Prairie Manitoba

2. Age last birthday 27 Date of birth March 27 1891

3. Enlistment, or Appointment (if an Officer) (a) Place Camp Sewell Man (b) Date July 5 1915

4. Personal description:

(a) Height 5' 8" (b) Weight 124 (stripped) (c) Complexion Dark

(d) Colour of hair Dark (e) Colour of eyes Hazel (f) Identification marks, Scars, etc.

Small scar anterior border of right trapezius muscle

5. Former trade or occupation Bookkeeper

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	3	227

C.E.F.

10 M. D. FEB 19 1919 HEADQUARTERS WINNIPEG

	Periods From	Periods To
Canada	July 5 1915 Dec 81918	April 4 1916 Feb 18 1919
England	April 4 1916 Sept 7 1917	Aug 12 1916 Dec 8 1918
France or other theatres of War	Aug 12 1916	Sept 7 1917

Asst. Director Medical Services No. FEB 19 1919 MILY DIST. No. 10 WINNIPEG

7. Original disease, or injury Mitral Regurgitation

(a) Date of origin 1917 (b) Place of origin France

(c) Cause Stress of service.

M. F. B. 227.

300M.—8-18.
1772-39-117.

NP

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (*a*) Weakness—slight, moderate, marked, etc; (*b*) Loss, complete or partial, of an organ or member, or of its functions; (*c*) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (*d*) Any other restrictions in choice of occupation.)

Impaired function of heart (a) no general bodily weakness (b) partial loss of function of heart (c) no (d) no

9. Present condition—(*a*) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Heart is slightly hypertrophied apex beat ¼" to left nipple he has a faint mitral regurgitant murmur heard at apex and not transmitted. Heart has good compensation no history of loss of compensation. Pulse at rest 100 bending forward touching floor 6 times which caused no dyspnoea pulse rose to 108 returning to 100 in 2 minutes. Blood pressure systolic 102diastolic 80. No praecordial pain, slight dyspnoea on running up a flight of 16 stairs, walking at, rapid pace 5 minutes causes slight dyspnoea: he eats and sleeps well. Soldier taking his time can walk 3 miles. Report attached.

(*b*) Has the invalid now any affection of the following systems, not described in Section 9 (*a*) above?
(Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System No Cardio-Vascular System No (If pulse rate is abnormal, B. P. will be taken.) Genito-Urinary System No (Albumen and Sugar will be excluded.)

Special Senses No Respiratory System Yes Integumentary System No

Disturbances of Mentality No Digestive System No Muscular System No

Osseous and Joint Systems No Any other general condition No

Small Friction rubs are heard over a small area below right clavicle anteriorly: this is due to an old pleurisy 12 years ago. Condition has not been aggravated by service.

10. (*a*) History (of the condition referred to in Section 9 (*a*).)

About March 1917 soldier felt run down, he noticed that he played out easily, he carried on nevertheless without reporting M.O. This condition was gradually getting worse, he got a flesh wound in Sept 1917 and in the hospital in England, it was discovered that his heart was defective: he was boarded in Jan 1918 and placed in Category B "2" in which he has carried on till his return to Canada.

10.—(*b*) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid has suffered either prior to or since enlistment, and not included in Section 10 (*a*).)

Pleurisy 12 years ago. Complete recovery except as mentioned in 9 b. Diphtheria in March 1916, in hospital 2 weeks, complete recovery, unless tachycardia mentioned in 9 is a result. Flesh wound right shoulder caused by shrapnel Aug 25 1917. Complete recovery except foreign body lodged in posterior chest wall. X-Ray report attached. Gonorrhoea in May 1918, in hospital 5½ months. Apparent cure.

(*c*) (Here give a description of wounds, scars and deformities.

See 4 "E"

11.—(*a*) Did the disabling condition have its origin before enlistment? No

(*b*) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

Not applicable

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? (A) no no (B) no

The regimental documents will be referred to.

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? Permanent improvement in 6 months.

14. Treatment (Case reports, general or special, should be secured and attached where possible.)

None

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? No

(If the answer is "yes" state nature of treatment required and probable duration)

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

(If not, briefly state why)

17. Recommendations

Fit in Category C "3"

(Incard) Capt

Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned M F McKay have heard the description of my disability and present condition read, and am satisfied (~~or not satisfied~~) with it. (If dissatisfied, statement should follow.)

I complain in addition of No

Director Medical Services FEB 19 1919 MILY DIST. No. 10. WINNIPEG

M F McKay Rank.

Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticised.

Yes

19. Is the invalid fit for

(a) General service,	(Category A)	(~~Yes~~ or No.)
(b) Service abroad, not general service,	(" B)	(~~Yes~~ or No.)
(c) Home service (Canada only),	(" C)	(Yes or ~~No.~~)
(d) Temporarily unfit,	(" D)	(Yes or No.)
(e) Unfit for service in Categories A, B and C	(" E)	(Yes or No.)

20. It is certified that the invalid

(a) ~~Does require treatment.~~ (Give the nature of the condition and of the treatment required and its probable duration.)

(b) Does not require treatment.
(c) ~~Should pass under his own control.~~
(d) Should not pass under his own control.
(Strike out condition not applicable.)

21. It is recommended that the invalid be ~~discharged~~. (When not for discharge add special recommendation.)

Fit in Category C "3"

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

E L MacIntyre Capt *President.*

J Grant Capt } Members

PLACE Winnipeg Man

DATE ~~Feb~~ 18 1919

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned.....understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....

Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

PLACE

DATE

} Members

APPROVED BY

Assistant Director of Medical Services.

DATE FEB 20 1919

APPROVED BY

Director-General of Medical Services.

DATE

1932

MEDICAL HISTORY SHEET.

ORIGINAL

Surname McKay. Christian Name Murdoch Fred

Examined on 3rd day of July 1915
at Sewell, Manitoba

Birthplace City or Town Tache
County Ontario

Apparent age 24 3/12

Trade or occupation Book-keeper

Height 5' Feet 8 Inches.

Weight 122 Lbs.

Chest measurement Minimum 30½ inches.
Maximum expansion 34½ inches.

Physical development good

Small-Pox Marks none

Vaccination Marks Arm Right. Left.
Number 1

When Vaccinated last 1905

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Approved by Robt Reilly
Rank capt CAMC M.O.

Date	Fit or Unfit	Examined for Re-engagement, 12 SEP 1917	
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.

Date	Result	Vaccinations.	
17.2.16	✓	G. V. Bedford	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
23.7.15	✓		M.O.
9.8.15	✓		M.O.
16.2.16			M.O.
14.7.16			

Enlisted on 5 day of July 1915 at Camp Sewell

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	61st Batt C.E.F.	~~A6110~~		5/7/15
Transferred to...	44th, BATTALION C.E.F.	460579		

CANADIAN

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Epsom	10.1.18	Sw. R. Chest.	Bn all Comm. Sweden
St Martins Pla	8-2-18	Old G.S.W. R. Chest	B'n 9th Elverton Fr Hospl
Walton	16-11-18	Debility	B'n Walton Hospl

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

M. F. B. 313.
100M.—1-15.
H. Q. 1772-39-439.

Surname Mc Kay Christian Name Murdoch Rec.

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.
Mill Road Infirmary Affiliated to:- 1st Western General Hospital LIVERPOOL		7	9	17	17	12	17	Sh Shldr. (R)		Transferred to ban. conv. Hosp Woodcote Pk. Epsom.	J J Warner.
M C H Epsom	17	12	17	18	JAN	1918	Sld. Rt Clav.	33	On admission S.W. over Rt. Scald. says T.B. near lung did not spit blood after injury. No duty since Admitted 3/12/17 Col Rudolph remarks - Head excitable but otherwise sound fit for B2. By Board Cat B2 discharged for Employment	J D Carpenter Capt Cam's
CANADIAN HOSPITAL, ETCHINGHILL, LYMINGE.	23	5	18	8	11	18	Gonorrhoea	170	Admitted with T.P.D. Pus Syl. smear Treated by irrigations sounds + massages Discharged dry Urine. Clear Neg for Syl + Pus.	Capt R.A.M.C.

The marginally named man is suffering from Chronic Gleet. No Gonococci can be found in his discharge. He is quite fit for duty. He should not be admitted to Hospital for Venereal Disease unless he develops any complications or contracts a fresh attack.
(Auth. War Office Circular letter 24/Gen. No. 514.)

MC 152.

1-28 | AUDITOR | PAYMASTER

M. OR S. — PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES — REGT. No. 460579 RANK Pte NAME (IN FULL) McKay Murdoch Fred

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE

TO WHOM PAID Mrs Katherine McKay — RELATIONSHIP Mother

ADDRESS Box 456 Portage-la-Prairie Man

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 61st Btn — IF IN P.F. WHAT UNIT? — (BLOCK LETTERS SURNAME FIRST)

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 5-7-15 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ — DATE EFFECTIVE

PAYABLE TO — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Box 456 Portage-la-Prairie Man

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE — DATE 28-2-19 — REASON — AUTHORITY — IF ENTITLED TO POST DISCHARGE PAY

MONTH 19	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	C.	TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	COL. NO. 1 DATE	COL. NO. 2 NO.	COL. NO. 2 DATE	COL. NO. 3 NO.	COL. NO. 3 DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	BALANCE CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					
Feb 28	183								600	-					680301		70	-																		1st Pymt. W.P.C.
															68044				30	-														500	-	" " " (1.a)
Mar 28															127428		70	-																		2nd " "
															127429				30	-														400	-	" " " (2.a)
April 28															556710		70	-																		3rd " "
															711				30	-														300	-	" " " (3.a)
May 23															576522		70	-																		4th " "
															576523				30	-														200	-	" " " (4.a)
June 26															775912		70	-																		5th " "
															775913				30	-														100	-	" " " (5.a)
												Aug 2			1204568		70	-																Nil		70 00 6th & Final
												" "			1204569				30	-														Nil		30 00 " " " " " " SA
									600	00							420	00	180	00											600	00					

AUDITED AUG 7 1919 Audit Clerk M.D. 10

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

AUDITOR | PAYMASTER

M. ~~OR S.~~

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

REGT. No. 460579 RANK Pte NAME (IN FULL) McKay Murdoch F. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Yes — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP
Mrs. Catherine McKay
Portage la Prairie
Man.

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 61 Bn — IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 20.00 — DATE EFFECTIVE

PAYABLE TO — RELATIONSHIP
Mrs. Catherine McKay
ADDRESS
Portage la Prairie
Man.

ANY CHANGE IN ASSIGNEE OR ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE Winnipeg — DATE 28/2/19 — REASON D. — AUTHORITY 200.56 — IF ENTITLED TO POST DISCHARGE PAY Yes

183 Days W.S.A.

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	C.	TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1	COL. NO. 1 DATE	COL. NO. 2	COL. NO. 2 DATE	COL. NO. 3	COL. NO. 3 DATE	CASH PAYMENTS COL. NO. 1 $	COL. NO. 1 C.	COL. NO. 2 $	COL. NO. 2 C.	COL. NO. 3 $	COL. NO. 3 C.	ASSIGNED PAY $	ASSIGNED PAY C.	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C.	OTHER CHARGES $	OTHER CHARGES C.	$	C.	TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT							58	05	58	05																								58	05	Trans. Cr 58.05 for pay on 1-12-18
1/12/18 31/12/18	62	1.10	68	20	30	—	11	30	167	45	94	62	13690		13690		103	35	14	10	30	—	20						31/1		167	45					A Pelzer Dec LPC Cash Cr 200.56 Dr 200.56 L.P.C. ford.
1/1/19 28/2/19	28		30	80	35 30	—			95	80	21541		21541						45	80	30	—	20	—							95	80			88		
			99	00	95	—	127	30	321	30							103	35	59	90	60	—	40								263	25	88		58	05	

30M-11-18.—L.L. 50877-M. & D. 9553.

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

Date of Enlistment: 1-3-18

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment: April 1916

RATE OF SEPARATION ALLOWANCE

~~25~~	30		

1-9-18
1-24-18
no 36164

m 6556

RATE OF ASSIGNMENT

20			

PARTICULARS OF SEPARATION ALLOWANCE

No. 460579

Rank Pte Promoted Reverted Discharge

Soldier's Name M. F McKay

Battalion 61st Battn

Beneficiary

Relationship Mother

Address

M.F.W 2534 issued.

PARTICULARS OF ASSIGNMENT

Name Mrs Catherine McKay

Address ~~P.O. Box 415~~ or ~~157 West 1st St~~ Portage

Change of Address La Prairie, Man.

1

2

3

4

K-12407-M-21

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
Dec. 31	—		420 ✓	420		*S.A. Effective 1-3-18 auth S.B. 6-5/18 J.H.G.
Jan. 18	J 66291		20	20	Jm	
Feb "	H 92585		20	20		
mar	M 90921		20	20	*	
apr	E 4564		20	20	✓	
may	H 3500	50	—	50	✓	mailed 7-5/18
"	~~H 19492~~		~~20~~	~~20~~		may canc chq order issued 15-5/18 H 19492 canc 16-5-18
"	H 6274	25	20	45	✓	mailed 16-5/18
June	J 23971	25	20	45	✓	
July	L 30711	25	20	45	✓	
Aug	L 41451	25	20	45	✓	
Sept	L 46378	25	20	45	✓	
Oct	T 53644	25	20	45	✓	
Nov	P 59117	25	20	45	✓	
Dec	L 67211 ✓	45	20	65		
		290	660			

A/c Closed 31-12-8

Ret'd per Olympic

Date 14/12/18 M.F.W. 187 19-12-18 M.D. #10

Closed G.R. Bingham MRO 36458

O.K. CANADIAN
ASSIGNED PAY AUDITED
AUDIT CLERK
DATE 17-2-19

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7663.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400M.—6-17—1772-39-141
L. L. 22320—M. & D. 7693.