A 6°

A5-8444

V. 2.

ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

		(ANSWERS).
1.	What is your name?	John Alexander McKillop.
2.	In what Town, Township or Parish, and in what Country were you born?	Dundee Scotland.
3.	What is the name of your next-of-kin?	(Father) Alex McKillop
4.	What is the address of your next-of-kin?	23 Ogilvie St. Dundee Scotland
5.	What is the date of your birth?	28th July 1894
6.	What is your Trade or Calling?	Gardiner
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? 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

John A McKillop (Signature of Man).

J B Wainwright (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, John A. McKillop, 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.

John A McKillop (Signature of Recruit)

Date 2nd Aug 1915 J B Wainwright (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, John A. McKillop, 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.

John A McKillop (Signature of Recruit)

Date 2nd Aug 1915 J B Wainwright (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 Montreal this 2nd day of Aug 1915

(Signature of Justice)

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

(Approving Officer)

M. F. W. 23.
200 M.—5-15.
H. Q. 1772-39-841.

Description of John A. McKillop on Enlistment.

Apparent Age 21 years ——— months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft 6¼ ins.

Chest measurement: Girth when fully expanded 36½ ins. Wt 117½ lbs.
Range of expansion 2½ ins.

Complexion Fair

Eyes Blue

Hair Brown

Religious denominations:
- Church of England
- Presbyterian
- Wesleyan
- 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).

1 Vacc l arm

Scar above rt eye

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 2nd Aug 191 5 — J. A. Farrie Lieut A.M.C. Medical Officer.

Place Montreal

*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.

J. A. McKillop 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.

J. Mascoupe (Signature of Officer)

Date Aug 2 191 5

REGIMENTAL DOCUMENTS

Pte. NAME Mc. KILLOP, JOHN, A. REGT. NO. 458444. UNIT 60th. Bn. H. Q. FILE NO. 13-3-49.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
	ATTESTATION PAPER (M.F.W. 23, 133, or 51)		~~Hudson~~ Ret 8-10-19	~~8-10-19~~		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)					
2X	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
1	MEDICAL EXAMINATION (M.F.W. 129)					Demob.
1	~~TRANSFER~~ CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)				23061	DESERTION
1	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)					
	M.F.W. 193					
	M.F.W. 2571					
	D.M.S. 1375.					
	G.G.H.C. 6009.					
	B.D.C. 167					
	Nov 17.					
2	A.F.B. 1237					
X	Cancelled					

W. 2589
100M-11-18
1772-39-1377

Form R. 149.

John. A.

Name McKillop Rank Pte Reg. No. 458444

Unit 14 Btn.

Next of Kin Alex. McKillop 23. Ogilvie St. Dundee. Scotland.

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
6-4	3rd Johns amb Bde Hp.	Etaples	S.W. L Leg	B186	17/4	668-23
10-4	1st W. Gen Hsp. Dangaheels		do	B184		16223
8-6	Mil Con Hosp Epsom		do	B239		19412
4-8	Discharged		do	B290		7366
	23rd Res Bn Bearnshot		31-8-18			

Form R. 149.

Name *Rank* *Reg. No.*

Unit

Next of Kin

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

NAME McKillop John A

RANK AND CORPS Cpl Pte 14th. Bn.

REGT'L No. 458444

H. Q. FILE NO. 549.

FOLLOWS NO.

FOLLOWS

CABLE NO.	DATE	NATURE OF CASUALTY
N-106 7-4	12-4-18	S. Adm. St. Johns Amb. Bde. Hosp. Staples April 6th 1918 GSW L Leg

L. L. 20497—M. & D. 7908

M. F. W. 42—50M.—5-17.
H. Q. 1772-39-893.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
4722-1	1/Car. Fld. Amb.	29-6-18	Debility
G728	Rep. from Base Rej unit	14-7-18	" "
a186-3	2E Johns. Amb. Brig. Etaples	6-4-18	S.W. L. Leg. (Quebec Regt
B189-1	1/Stawest Gen. Hazakerley Liverpool	10-4-18	" "
B237-2	Milbow W.Gate Pk Epsom	8-6-18	S.W. L. Leg
B890(2)	" " " " "	9-8-18	" " " " (Que. R.)

Nfld 458444

~~458234~~ Cpl

Number ..... Rank .....

Surname ..... McKillop .....

Christian Name ..... John .....

Units 14th Pn Can Inf Theatre of War France

Date of Service ..... 31-12-15 .....

Remarks .....

Latest Address ~~P.O. St. John N.F.~~

Hibernia N.B.

Roll No. B Page 2019.

Next of kin

Address on leave

Address on discharge

Transportation issued Yes / No Date

Character on discharge

Previous occupation

Date and place of enlistment

Diagnosis

Date of Medical Boards

Date	Remarks

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

OCT 2 1920

FORM D.M.S. 1300.
8137—50m—28/2/17.

Surname	Christian Name or Names	Reg. No.
McKillop	J.A.	458444

Rank	Unit	Co.	Troop	Batty.
Cpl.	14th. Batt. Rifle.			

Hospital — Date of Admission

Transferred | Can. Fld. Amb. — Hosp. 29-6-17
St Johns Amt. Bde. Etaples — Hosp. 6.4.18.
12 W. G., Liverpool — Hosp. 10-4-18
Woodcote Pk. Epsom. — Hosp. 8.6.18.

Diagnosis: Debility Rw

Later Diagnosis (if changed) (1) S.W.L. leg. Rw.
(2)
(3)

Additional Diagnosis: if more than one state present

DISPOSITION — Date

Rej unit 14.7.17
Dis. 9-8-18

REMARKS

A 722.
C.L. 1-8-17
8.8.17 A 728
12.4.18. A 186. 3.
16-4-18 B 189-1.
11.6.18 B 237 (2)
13-6-18 B 290 (2)

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

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

LOCAL

*Name McKILLOP John A. Rank Pte Regtl. No. 458444

Fyle Depot 86-Mc-208

Original unit 60th Bn Present unit 14th #M. or S. Age 24 Religion Bapt Ref. H.Q.

Port, ship and date of arrival Halifax N.S. Carmania 29-12-18

Next of kin Alexander McKillop 23 Ogilvie St Dundee Scotland

Address on leave

Address on discharge

Transportation issued Yes / No Date Character on discharge

Previous occupation Gardener Date and place of enlistment 2-8-15 Montreal P.Q.

Diagnosis G.S.W. Leg Date of Medical Boards

Date. T.O.S.	Remarks.	Pt. 2 Order No.
21-12-18	Casualty Coy 29-12-18 Leave from 30-12-18 to 13-1-19	#2
22-1-19	To Disembarkation Station	
22-1-19	Dis from H.M.S. Tor MBD 86	22-1-19

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

(over)

Date.	Remarks	Pt. 2 Order No

M. F. W. 192
150m.—5-18
1772-39-1243

Army Form B. 103.

Regimental Number 45/14444

Casualty Form—Active Service.

Regiment or Corps 14th Ed'n B. Rundgt

Rank Pte Surname McKillop Christian Name J.A.

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

Enlisted (*a*) ..... Terms of Service (*a*) ..... Service reckons from (*a*) .....

Date of promotion to present rank ..... Date of appointment to lance rank .....

Extended { ..... / ..... } Re-engaged { ..... / ..... } Qualification (*b*) ..... or Corps Trade and rate .....

Occupation ..... Signature of Officer .....

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked ...			
		Disembarked ..			
9.4.18	St John. Amt	D/W Leg. m ... to	England	9.4.18	E3104
			Lin at		W30 83/5143
10.4.18	do		Cambria	10.4.18	Hz Hr 43/1918
		Braunstott			
					Lieut for Lt Col as Edinburgh
26.4.18	CRD	Taken on Strength	Bishop Le	12.18.0097	45 R221 Lieutenant for Colonel i/c Records O.M.S.C.

(*a*) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(*b*) Signaller, Shoeing-Smith, &c

W. 8635—M2753. 2000m. 9/17. (35611) C. P. & S., Ltd., Form B./103 E/1807. P.T.O.

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks: Taken from Army Form B.213, Army Form A.36, or other official documents.
13-8-18	23rd. CAN. RES. BN.	TAKEN ON STRENGTH	Brancaster	9-8-18	B.F. II. C. No. 225
10-12-18	23rd Can. Res. Bn.	On Command to Segregation Camp, Rhyl	Brancaster	10-12-18	IP, II 0.344
	do	On Command to Segregation Camp, Rhyl, ceases	Rhyl		
	do	S.O.S. on Transfer from O.H.F. of C. to the CEF. Canada.	Rhyl		

Lieutenant
/Adjutant
23rd Canadian Reserve Bn.

21/12/18 England TAKEN ON STRENGTH DD#7 FREDERICTON, N. B.

PART II. ORDER No. 2 2/1/19

"DISCHARGED" FROM HIS MAJESTY'S SERVICE Capt. & Adjt,
For O. C. District Depot No. 7.

auth RO 1420 Sect (C)
Ham NB

22-1-19 DD#18 23-1-19

R W Lindsay Lieut.
O. C. Discharge Section
For O. C. District Depot No. 7.

45234

R—122.

Rank Name McKILLOP, John A. Reg'l No. 458444

Unit Dft. 60th Bn. to 23rd Res. Bn. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Montreal, 2nd August, 1915. Place of Birth Dundee, Scotland.

Name and Address, Next-of-Kin Alex. McKillop, 23 Ogilvie St., Dundee.

Relationship Father.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.B. N. 17900
File R.L.
O R CANADA
Category

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
17.9.15	O.C. 23	Taken on strength	Shorncliffe	6.9.15	M.H. 220
3.1.16	"	Trans. to 14th Bn	Overseas	31.12.15	" 2.
~~15.1.16~~ 1.1.16.	O.C. 14th	Taken on strength 14th	France	~~15.1.16~~ 1-1-16.	do 3.
23-6-17	"	appt'd act Lce/Cpl unpaid	"	21-2-17	— 61.
"	"	To be Corporal.	"	5-3-17	— 61.
1-8-17	"	adm No 1 Can Field Amb		29-6-17.	C.S. 17722. Debility
8-8-17	"	Rejd from base Rejoined Unit	Fld	4-7-17	— 725 —
29.11.17	"	Reverts to ranks at own request	"	Cpl 17.11.17	F.R. DO 109.
12.4.18	O. Regt	Dam ded	"	Gte 6.4.18	C.L.A. 186
22.4.18	14th Bn	W. Posted to C.R.D.	"	" 10.4.18	O.C. F.R. 97 d 20.4.18 C.R.D. P.2043

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				
13-8-18.	23 Res.	T.O.S. from ORD	Bailleul	9-8-18	Do 225 & Do, 195 of 12-8-18 Corps
20-8-18	"	SOS to C & F Canada		21.12.18	" 20

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

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 44 8444 Rank Pte Surname McKILLOP

(Given name in full) JOHN ALEXANDER

Unit or Corps 7 D.W. Birthplace Bathgate - Scotland

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

1. GENERAL DESCRIPTION:

Physique Good Weight 140 lbs. Height 5 ft. 6½ in. Colour of Eyes Blue

Nutrition Good

Pulse 72 good volume

Condition of arteries Normal

Vision Rt. 6/6 Left 6/6

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

Identification marks, scars, or deformities. (Give cause and date of origin).
Small bullet wounds through upper part of Calf of left leg.

Opinion as to general health and physical condition Good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)

Nervous System No Genito Urinary 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.

(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 Fredericton N.B. (Canada)

Date 18-1-19 Signed H. Macaulay 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 John A. McKillop

(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.
1772-89-1142.

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 John Alex Surname McKillop

Unit or Corps 23rd Pls (If a soldier) Regtl. No. 458444

Born at Bathgate Scotland on, date Twenty Eighth July 1894

Signature (for identification) J. A. McKillop

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

1. **PHYSIQUE**—Any deformity, maiming or lameness? If so, describe. – none

Weight 135 lbs.

Height 5 ft. 6 ins.

2. **NUTRITION AND DIATHESIS?** – good.

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?** – no

4. **RESPIRATORY SYSTEM.** – no.

5. **HEART?** – no

Abnormal Sounds? – no.

Abnormal Size? – no

Pulse Rate? – 63. Intermittence or irregularity? – no.

6. **ARTERIES.**—Any hardening? – no

7. **DIGESTIVE SYSTEM?** – no.

8. **GENITO-URINARY SYSTEM?** –

Urinalysis—s.g.? 1024. Reaction? acid Albumen? no Sugar? no

9. **SKIN, MIDDLE EAR, EYE** or any other part? – no.

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe. – no.

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

Examined at Liverpool Camp Signed Town Major M.O.

Date 13-12-18 Signed [illegible] 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.*

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 458444 (Rank) Private

Name (in full) JOHN A. MC KILLOP enlisted in

the 60th Battalion

CANADIAN EXPEDITIONARY FORCE at Montreal, Que. on the second

day of August 19 15.

HE served in Canada, England and France.

and is now discharged from the service by reason of Demobilization

Authority R.O. 1420 (c)

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

Age 24 years, 5 months

Height 5 feet, 6½ inches

Complexion Fair

Eyes Blue

Hair Brown

Marks or Scars One vaccination scar on left arm. Scar above left eye.

Signature of Soldier

Issuing Officer

LIEUT-COLONEL

Rank

O.C. DISTRICT DEPOT NO. 7

Appointment

Date of Discharge January 22nd, 1919.

Signed at Fredericton, N.B. this 22nd day of January 19

in Military District No. 7.

File Reference No. D.D.7. 86-Mc-208.

DISTRICT DEPOT No. 7
JAN 22 1919
FREDERICTON, N.B.

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

92431.—W6490/1535.—2,000,000—J. J. K. & Co., Ltd.—Forms B. 103/1.

Army Form B. 103.

Casualty Form—Active Service.

CERTIFIED CORRECT
Canadian Record Office,
Westminster House,
7, Millbank, S.W.

Regiment or Corps 23RD RES BATT. C.E.F.

Regimental No. 458444 Rank Private Name McKillop J.A.

Enlisted (a) 2/8/15 Terms of Service (a) _____ 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) _____

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				
		Drafted to 14th Canadian Battalion Overseas from 23rd Reserve Battalion C.E.F.			E. Moore Lt. IT. A/Adjt.
1.1.16.	C.B.D.	Arrived from England and taken on Strength 14th Canadian Battalion.	C. B. D.	1.1.16.	Nom. Roll.
9.1.16.	do	Left fro Unit.	Field.	9.1.16.	do 101/BD/3/185.
14.1.16	Unit	Joined.	do	11.1.16	B213.
11/8/16	Unit	Sniping course	D.G.T.M.Sch	6/8/16	B213.
do	do	From do	do	10/8/16	B213.
22.12.16	Unit	10 days leave to	U.K.	16.12.16	do Str. ho 3. 1917.
5.1.17	Unit	Rejoined from leave	Unit	16.12.16	do.
7.4.17	Unit	To Bom bomb Sng Sch.	Field	7.4.17	do.
17.4.17	do	Returned from do	Unit	6.5.17	do
10.6.17	Unit	Appd A/L/Cpl. Unpaid.	10th Bn	21.2.17	KI. 16-900 x. ho 61. 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.

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.
19. 5. 17	Unit.	To be Corporal.	14th Bn.	5.3.17	B213. No 61. 1917.
7. 7. 17	do	Hospl Sick	Field	29.6.17	do 455.
1. 7. 17	16. F. A.	Debility. Ad	1 6. F. A.	30. 6. 17	A36/Eng 80. 454.
14. 7. 17	Unit	Reported	Unit	14. 7. 17	B213. 455.
1. 7. 17	3 6. F. A.	Debility Ad	3 6. F. A.	29. 6. 17	A36/Eng 80. 455
		To	1 6. F. A.	29. 6. 17	
8. 7. 17	16. F. A	do Ad	1 6. F. A	30. 6. 17	A36/Eng 97. 463.
		To	duty	7. 7. 17	
17. 11. 17.	Unit	Reverts to the ranks at own request. K.R.O. 301	Unit	17/11/17	Certificates. K1. 16-3194b. Ptr. No 109-1917.
22/11/17.	Unit	Forfeits 1 days pay pay to make good for losing by neglect Value 1/8 [illegible] pa	20/11/17 & placed cost of Article Government pt II D/O 112		under stoppage of lost (Iron Ration 1/8) property (Iron Ration of 1917
29. 12. 17	Unit	GRANTED 14 DAYS LEAVE	Unk.	27/12/17	B213. No 3-1918.
19. 1. 18	do	RETURNED FROM LEAVE	Unit	13/1/18	do
13.4.18	do	To Hospl Wd	Field	5.4.18	do
6.4.18	St J. Amb.	Sick-Leg. L.	St J. Amb	6.4.18	
6.4.18	2 C.F.A.	do Knee. Ad.	2.C.F.A.	5.4.18	E2158
		To	8. C.C.S.	5.4.18	
6.4.18	8 CCS	do Ad 30	32 do Aux.	5.4.18 5.4.18	E2764

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year	458444	Pte	McKillop	J.A.
	Unit.		Age.	Service.
	14 Canada		22	3 yrs.

Station and Date.

Disease A. W. L. to Regt.

* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

Wt. W 6604/M 2870—1,500,000—8/17—H. & Sr. (10938). Forms/I. 1237/12. (E239)

[P.T.O.

Station and Date.	

OVERSEAS

No. ~~2 Division~~. IV

Forms I. 1237 12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	458444	Pte.	McKillop,	J.A.

Year	Unit.	Age.	Service.
1918	14th Can. Battn.		Pay book.

Station and Date.

Disease GSW 5/4/18

8 - JUN 1918

Wounds well healed been a walking out case for about five weeks. well developed. R. 98.7. 11

J.S. Farmilo Major

Convalescent Hospital, Woodcote Park, Epsom

14/6/18 R.T.I. absent.

15/6/18 Transfer to IV Div. Scabies

J.S. Farmilo Maj

CAPT. C.A.M.

"IV" DIVISION.

20-7-18 Scabies Cured

pelby Sth. RT. 5 VIII BCH

22/7/18

disc. P.T.2 fit.

Aug. 5th 1918 Duty Gr 4th Normal A. 13 CH

T 14. B / 26-7-18

* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

Wt. W 6604/M 2870—1,500,000—8/17—H. & Sp. (10938). Forms/I. 1237/12. (E239)

[P.T.O.

Station and Date.	

A—305

12/ 31385

MILITIA AND DEFENCE 22255

ASSIGNED PAY.

To whom Mrs. A.McKillop,

Address 23, Ogilvie Street,

~~Dundas~~, Dundee,

Scotland.

Rate $20.00

Date to Commence 1st August 1916

By whom assigned McKillop, J.A.

Regtl. No. 458444

Rank Pte.

Corps, &c. 14th Battn.

PAYMENTS.

Month	Year	Cheque No.	Amt.		REMARKS
Aug.	1915				
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1916				
Feb.					
March					
Apl.					
May					
June					
July					
Aug.		138363	20 —	✓	
Sept.		175300	20 —	✓	
Oct.		213102	20	✓	
Nov.		252116	20	✓	
Dec.		289468	20	✓	
Jan.	1917	329989	20	✓	
Feb.		372281	20	✓	
March		435237	20	✓	Checked & found correct A. Ogle
			160		

80 00 ✓

ASSIGNED PAY.

By whom assigned Mc Killop, J.A.

Regtl. No. 458444 Pte. 14th Batt.

Month	Year	Cheque No.	Amt.		Pay Sheet		REMARKS.
Jan.	~~1916~~ 1917						
Feb.							
March							
Apl.							
May.							
June							
July							
Aug.							
Sept.							
Oct.							
Nov.							
Dec.							
Jan.	~~1917~~ 1918						
Feb.							
March							
Apl.							
May							
June							
July							
Aug.							
Sept.							
Oct.							
Nov.							
Dec.							

P—56

Rank

Name McKILLOP, John A.

Reg'l No. 458444

Unit Dft. 60th Bn. to 23rd Res. Bn.

If in perm. Corps, What Unit?

Married or Single Single.

Place and Date of Enlistment Montreal, 2nd August, 1915. Place of Birth Dundee, Scotland.

Name and Address, Next-of-Kin Alex. McKillop, 23 Ogilvie St., Dundee.

Relationship Father.

Assigned Pay Monthly $

Payable to

Relationship

Separation Allowance $

Payable to

Relationship

Discharge, Date and Place

Reason

Character

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
1915																	
Sept 1.	30	30	1.00	30	30	.10	3.	10	43			17 03			17 03	25 97	On L.P.C
Oct 1.	31	31	1	31	31	10	3 10	25 97	60 07			29 20			29 20	30 87	
Nov 1.	30			30 00			3. 00	30 87	63 87			60 83			60 83	3 04	
Dec 1	Dec 31	31	1.00	31	31	10	3 10	3 04	37 14			31 63			31 63	5 51	Trans to Bk 31/12/15
Jan 1	1/31/16	31		31	31		3 10		39 61			2 61			2 61	37	JM
1.2.16	29.2.16	29	-	29	29	-	2 90		68 90			5 23		60	5 83	63 07	clothing.
1.3.16	31.3.16	31	-	31	31	-	3 10		97 17			5 22			5 22	91 95	
				91 00			21 30	10	97 17			151 75		60	151 35		

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ENGLAND OR ~~CANADA~~.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1-8-16	EFFECTIVE DATE:-
AMOUNT:- 20⁰⁰	AMOUNT:-

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

Mrs A McKillop (Mother)
23 Ogilvie St
Dundee Scot

NAME:- McKILLOP John A E
NUMBER:- 458444

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:- 60th Batt
DATE ACCOUNT FIRST OPENED:- 1-4-16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			14th Batt
Dosg 20/4/18	1.5.18	21.5.18	& RD
			Canada Sect

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
14.11.18	1977	23 Res 11.12.18	7 30				
28.11.18	2141	" 14.12.18	4 87				
5.12.18	2228	" 19.12.18	24 33				
			36 50				
31.12.18		Cr Bal 35.24 L P	6			Compiled 9-12-18	

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE:- Dis to Can 1-1-19 Amch Rhyl 5.12.18 Disposal

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mar 31	Bal For'd								67 02		
April	pp	33		A 8 & RA 31516 £4.2.2			20		80 02		
				H.R. 1168 r. 29.4.18.	4 87				75 15		
		33			4 87		20				
May	PP	34 10		A.P. May - £4.2/2 - A 63240			20		55 15		
									89 25		
		34 10					20				
June	P.P.	33							122 25		
				A.P. £4 2 2 B 68898			20		102 25		
				A R 12886 A Epo 21.6.18	4 87				97 38		
		33			4 87		20				
July	P.P.	34 10							131 45		
				A.P. July £4/2 63032			20		111 48		
				A R 754 66 H Epo 10.7.18	9 73				101 75		
		34 10			9 73		20				
Aug	P.P.	34 10		A/P Aug £4 1/2 63896			20		115 85		
				GR 2211 2.8.18	29 20				86 65		
				A R 683 66 H Epo 9.8.18	48 67				37 98		
	S.F. 12 days from 9.8.18 to 21.8.18								46 74		
	Do 225 23 Res 13.8.18	8 76									
		42 86			77 87		20				
Sep	P.P.	33		A/P Sep £4 1/2 D 25248			20		59 74		
				A R 1423 23 Res 14.9.18	4 87				54 87		
				A R 1540 23 Res 30.9.18	7 30				47 57	A/c agnst 31/10/18	
		33			12 17		20				
OCT	-	34 10		£ 4.2.2 D 46859			20		61 67		
				A R 1695. 23 R. 12.Oct.	9 73				51 94		
				" 1851 " 31/10	7 30				44 64		
		34 10			17 03		20				

NUMBER 458444 RANK Pte NAME McKillop J.a.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
	B/F.								44 64	Nil	
NOV	P.P.	33		L.4.2.1. E24655			20		57 64		
				Supp. 65							
				D80939. L4.2.2. Dec. '18.			20		37 64		
				AR1927. " 23 Rn 15/11	7 30						
				" 3141 " 30/11	4 87						
				" 3228 " 5/12	24 33				1 14		
Dec	"	34 10							35 24		
		67 10			36 50		40				

L.P.C.

MARRIED OR SINGLE S.

PLACE OF BIRTH Dundee Scot.

NAME AND ADDRESS OF NEXT OF KIN Ellen McKillop.
23 Ogilvie St Dundee.

RELATIONSHIP OF NEXT OF KIN Father

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Promoted Sgt	5-2-19	Bo 61. 23/1/17
Reverts to Ranks (on request)	17-11-17	Bo 109 29/11/17

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 45 8444 RANK ~~Pte~~ ~~L/Cpl~~ Sgt NAME McKillop John A.

IF IN PERMT. CORPS, WHAT UNIT UNIT 60 - 14 Bn.

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION Montreal.

DATE OF ATTESTATION 7/8/15.

ASSIGNED PAY MONTHLY $ 20.00 RDW DATE EFFECTIVE 1.8.16.

PAYABLE TO Mrs A. McKillop. 23 Ogilvie St. Dundee. Scot. RELATIONSHIP Mother.

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

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

DISCHARGE DATE AND PLACE Canada - 1-1-19 REASON AND AUTHORITY Disch Rhyl 5.12.18.

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

TRANSFERRED TO	DATE	AUTHORITY

J.D. C1

DATE	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT C.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT C.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT C.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 DATE	2 No.	2 DATE	3 No.	3 DATE	4 No.	4 DATE	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
							21	30																							91	95				
1-30 Apr 16	30	1.00	30		30	.10	3									33 -	1178	7/4	1222	28/4				261	261						522	119	73.			Clo. chg. 23rd Bn.
May	31		31		31		3	10								34 10	1355	1/5	1314	30/5				255	256					67	578	118	05			
June	30		30		30		3									33	1371	1/6						256							256	118	49			
July	31		31		31		3	10								34 10	1397	23/6	1458	9/7				255	261						516	207	43	105	00	
Aug	31		31		31		3	10								34 10	1510	29/7	1571	15/8				262	262			20			2524	216	29			
Sep	30		30		30		3									33 -	1635	23/8	1668	11/9				261	261			20			2523	224	06			
Oct	31		31		31		3	10								34 10	1674	24/9	1731	6/10				261	349			20			2610	232	06			
Nov	30		30		30		3	-								33 -	1750	26/10	1788	6/11				261	262			20			2523	239	83	105		13483
Dec 1917	31		31	48 80	31		31.									34 10	1805	4/12						✓	✓			20			✓✓	✓	31			
Jan	31	1.00	31	10			45	80								34 10	1883	14/1	1930	6/2	1181	7/1	7R 196	349	261	9733	4867	20			1764	1089	95			
Feb	28	"	30	80												30 80	1964	7/3						✓	✓			20			✓✓	117	15			
Mar	31	"	31	10												34 10	2042	8/4	2148	7/5				267	249			20			32 22	119	01			
																												160							

A.G. & S.A. Checked & found correct Hynes.

458444 Pte McKillop John A

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
April	30	1.10	33	.											33			9	5/4			47274		3 49			20		23 49	128 52		105	23 52	
May	31	1.	34	10											34 10	53	26/4					50087	5 53				20		25 23	137 39		105		
June	30	1.19	36	00										4 80	41 80	131	18/5					A45407	5 35				20		28 94	153 33		105	48 33	Appld ahoff 21-2-17 unpaid Bob 17/6/17 from 6pl 5/3/17. C 48 5 9/10 10d 5-3-17 to 31-5-17
July	31	1.19	34	10											34 10	73	17/6					93635	3 57			447	20		7 81	111 51				
Aug	31	1.10	31	20										3 10	40 30	538 396 447 570 574	23/8 18/7 24/7 4/8 23/8					A14873	3 57				20		20.	131 86		114	17 86	1/20 July Pay books Pay to 6pl 5/9 12d
Sept	30		36	-											36			602 603	6/9 6/9			A185934	3 57 3 57 3 57 3 57 3 35	4 46 3 57			20		47 66	120 20.				

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER-RED PAY	SER. ALLCE. ENG.
	Bal For'd	~~1X 17~~							17070		
Oct	6pl	3720		A190905			20				
		3720		1st Batt AR648 12/9/17	357				13383		
Nov	6pl	3600		Dr 910 - £4-2-2			20				
				AR807 1st Batt 11-10-17	535						
				AR867 " 18-10-17	535						
				AR757 " 27-9-17	357						
				AR685 " 21-9-17	357						
				AR647 13th Batt 19-9-17	357						
				AR651 15th Batt 15-8-17	357						
				AR Engl Dr £4-2-2 611915			20				
				AR990 1st Batt 13-11-17	535						
				Reverts 17/11/17 Dr 109 99/11 1st Bn							
				Dr 1st d/s a 10			140				
Dec 1918	CC I.T	3H10		Forfeit 10% Pay 17/11/17 Dr 113 10/12/17 1st Bn		110			13110		
		7010			3033	250	140				
Jan	"	3H10		C 3331H - £4-2-2			20				
				AR 761 1670 1st Batt 30-12-17	2893						
				" " "	973						
				AR 1057 " 27-11-17	1338						
				AR 1115 " 11-12-17	357						
				" 1730 " 28-12-17	HH6				7513		
		3H10			7007		20				

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER-RED PAY	SER. ALLCE. ENG.
	Bal For'd								7513		
Feby	CC I.T		3080	67H520 £4-2-2			20				
				AR1189 1st Batt 31-12-17	HH6						
				" 1378 " 15-1-18	HH6						
			3080	" 1484 " 29-1-18	357				73HH		
					12H9		20				
Mar	CC I.T		3H10	D 31129 £4-2-2			70				
				AR1576 1st Batt 17-2-18	HH6 HH6						
				" 1779 " 18-3-18	357						
				" 1720 " 15-3-18	HH6						
				" 1786 " 21-3-18	803						
			3H10		2057		20		670Y		

This space to be for numbers.

M 206

Proceedings on Discharge.

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

No. 458444

Rank Private

Surname MC. KILLOP

Christian name JOHN A.

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

Corps (Squadron, Battery or Company) 60th Battalion

Date of discharge January 22nd, 1919.

Place of discharge Fredericton, N. B.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 29 years 5 months.

Height 5 feet 6¼ inches.

Complexion Fair

Eyes Blue

Hair Brown

Trade Gardener

Intended place of residence (To be given as fully as practicable.) St. John, N. B.

Descriptive marks

One vaccination scar on left arm; Scar above right eye.

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

Authority for discharge R.O. 1420 (c)

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.

Good

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)

Stan 8-10-19 H.L.

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)...Fredericton, N.B.... John A. McKillop ... *(Signature of Soldier.)*

(Date)...January 21st, 1919.... R A Bell ... *(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)..Fredericton, N. B.... A J Ashe Lieut. Col.
O. C. District Depot No. 7.
(Signature).....

(Date).....January 22nd, 1919...

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

John A. McKillop

Date of enlistment.....2-8-15.

Date left Canada.....17-8-15

Date returned to Canada....30-12-18.

Service in Canada, England . AND France.

Disability..... .....None.

FOUR BLUE SERVICE CHEVRON.

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 or Particulars of Recruit	Militia Form	W. 23 / 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.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916)

Regimental No. 458444 Rank ..... Name McKillop JA

Corps ..... who was* Driver

On 22/1/19 191..., to 1/19

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from ..... 19 ..... 191...

to 22/1/19 191..., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Balance Cr. from prev. month		24
Advances by Cheques No. 1/19	10	00	Regt'l. Pay 22 days at $ 1.10 c.		
Assigned Pay and Sep'n Allce. No. Ens	20	00	Field Allow. days at $ c.	24	20
Other charges C.D.V.		67	Separation Allowance* (Monthly)		
Payment on transfer or discharge No. 15/1097			Other Allowances* Clo	35	00
Bal. Cr. (to be paid by the new unit)			Other Credits* Subs	11	20
			121 W.S.C.		
			Bal. Dr. (to be deducted by new unit)	50	00
Total	14	64	Total		140
			*Give particulars.		14064

A monthly stoppage of $ 20.00 (†) has been paid (‡) been paid on account of Assigned Pay for the month of Jan 1919 and Sep'n Allce. for month of Mch 191...

(to) Assignee Mrs A McKillop

(Address) 23 Olgivie St Dundee Scotland

(†) Insert amount to be assigned, whether it has been paid or not.
(‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer.

Out Allowance of $..... has been paid by Paymaster, Military District No.....

REMARKS:—

State (1) date of enlistment.....

(2) if married and if a Separation Allowance Card has been submitted 22/1/19

(3) cause of discharge ..... authority DD7

(4) authority for transfer.....

NOTE.—Separation Allowance and Assigned Pay Card and Index Card (M.F.W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay List of the Unit.

Date 22/1/19

Place Dundee

Cameron Capt
for Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit, duplicate to District Paymaster, triplicate to accompany the pay list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44

H.Q. 1772-39-903.
160M-9-18. D.P. 874.

M.D. No. 7

M. OR S.

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

Hibernia, Queens Co., N. B.

REGT. No. 458444 RANK Pte NAME (IN FULL) McKILLOP, J. A.

AUDITOR | PAYMASTER

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE

Nil

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
6 X 70		

ORIGINAL UNIT C.E.F. 60th Bn. — IF IN P.F. WHAT UNIT? — (BLOCK LETTERS SURNAME FIRST)

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

S.S. Carmania 30-12-15

DATE OF ATTESTATION 2-8-15 — TRANSFERRED TO — DATE — AUTHORITY

25/95

ASSIGNED PAY $ 20.00 — DATE EFFECTIVE

PAYABLE TO Mrs A. McKillop, — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

Paid by Am. P.O. M.S. 6.

ADDRESS 23 Algivia St. Dundee Scot.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE Fredericton — DATE 22-1-19 — REASON Demob — AUTHORITY AO 92 — IF ENTITLED TO POST DISCHARGE PAY

BALANCE FROM PREVIOUS ACCOUNT

MONTH	PAY AND F.A. NO. OF DAYS	PAY AND F.A. RATE	PAY AND F.A. AMOUNT $	PAY AND F.A. AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	C.	TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	ACQUITTANCE ROLLS COL. NO. 1 DATE	ACQUITTANCE ROLLS COL. NO. 2 NO.	ACQUITTANCE ROLLS COL. NO. 2 DATE	ACQUITTANCE ROLLS COL. NO. 3 NO.	ACQUITTANCE ROLLS COL. NO. 3 DATE	CASH PAYMENTS COL. NO. 1 $	CASH PAYMENTS COL. NO. 1 C.	CASH PAYMENTS COL. NO. 2 $	CASH PAYMENTS COL. NO. 2 C.	CASH PAYMENTS COL. NO. 3 $	CASH PAYMENTS COL. NO. 3 C.	ASSIGNED PAY $	ASSIGNED PAY C.	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C.	OTHER CHARGES $	OTHER CHARGES C.	$	C.	TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
																																						T.O.S. AO 92
Dec							35	24	35	24																											35 24	
Dec		1/10															30	00	5	00											35	00					24 Per Boat
Jan	22	1/10	24	20	35	00	41	20	70	40	19	16	70				10	00	109	97							20	00	6	41	140	64	70	00			Pd by Engd
							420		420																				70		70				350		
Feb											46	21																	70		70				280		
																													70		70				210		OK C 391166 AR 158 28/3/19
																													70		70				140		OK 3 2 9 0 1 3 29/4/19
							20	00	20	00																									160		A.P.D. Jan. Charged in Error. FILE 7-MC-154
																													90		90				70		OK 125064 90 4/19 23/7/19
																													70		70						OK 126059 Jan 20 22/9/19
																																Mon. Off. etc.					
B.							440		440																				440		440						

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.	

A 58444 4187

ORIGINAL.

MEDICAL HISTORY SHEET.

Surname Mc Killop Christian Name John Alexander

73

Examined { on 2nd day of August 1915 / at Montreal

Approved by J. A. Fairie

Rank Lieut A.M.C. M.O

Birthplace { City or Town Dundee / County Scotland

Apparent age 21 years

Trade or occupation Gardener

Height 5 Feet 6¼ Inches.

Weight 117½ Lbs.

Chest measurement { Minimum 34 inches. / Maximum expansion 36½ inches.

Physical development

Small-Pox Marks

Vaccination Marks { Arm Right. Left. 1 / Number 1

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Date	Fit or Unfit	Examined for Re-engagement,
4/8/18	A.	16 APR 1918 B. L. Harden M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
20-5-16	Good	J.A.F. M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
19/6/15		M.O.
26/6/15		R Cumming M.O.
7/7/15		R Cumming M.O.

Enlisted on day of 191 at

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment				
Transferred to..	72nd Batt C.E.F.	458444		

CANADIAN

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

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

M. F. B. 313.
100M.—5-15.
H. Q. 1772-39-439

Surname ..... Christian Name .....

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
No 1 C.F.A.		29	6	17	14	7	17	Debility.		Rej Unit.	A722-A728. GH
MILL ROAD INFIRMARY, LIVERPOOL.		11	4	18	7	6	18	Sev. L. leg		Imperfect healed wd	[illegible]
M.C.H. Upton	7	6	18	8 - AUG 1918				G.S.W. Lt Leg (Femur)	64	Fealing Sft. Heart & Lungs normal Discharged to Reserve Unit Category A.	B.C. Henderson Capt. C.A.M.C.