ORIGINAL

2 M. D. 1st Depot Battalion 1st C.O. Regiment

M.S.A. Regtl. No. 3034971

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class One)

1. Surname: Mc L A Y ~~Murdock~~
2. Christian name: Murdock ~~McLay~~
3. Present address: Sault Ste. Marie, Ont
4. Military Service Act letter and number: 818682
5. Date of birth: 10th Feb. 1890
6. Place of birth (town, township or county and country): Lions Head, Ont
7. Married, widower or single: Single
8. Religion: Presbyterian
9. Trade or calling: Strander
10. Name of next-of-kin: John McLay
11. Relationship of next-of-kin: Brother
12. Address of next-of-kin: Lions Head, Ont.
13. Whether at present a member of the Active Militia: NO
14. Particulars of previous military or naval service, if any: none
15. Medical Examination under Military Service Act:—

(a) Place: Sault Ste. Marie, Ont. (b) Date: 3rd Oct. 1917. (c) Category: A2

DECLARATION OF RECRUIT

I, Murdock McLay, do solemnly declare that the above particulars refer to me, and are true.

Murdock McLay (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age: 27 yrs. mths.

Height: 5 ft. 6 ins.

Chest measurement: fully expanded 37 ins.; range of expansion 5 ins.

Complexion: Dark

Eyes: Blue

Hair: Dark

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

Scar right hand.

John McLaughlin

O. C. 1st. Depot Btln.

1st. C.O. Regt.

Place: Toronto, Ont. Date: April 18th 1918.

M. F. W. 133.
500 M.—8-17.
1772—39—1158.

M. D. Depot Battalion Regiment

Regtl. No.

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class)

1. Surname
2. Christian name
3. Present address
4. Military Service Act letter and number
5. Date of birth
6. Place of birth
town, township or county and province
7. Married, widower or single
8. Religion
9. Trade or calling
10. Name of next-of-kin
11. Relationship of next-of-kin
12. Address of next-of-kin
13. Whether at present a member of the Active Militia
14. Particulars of previous military or naval service, if any
15. Medical Examination under Military Service Act—
(a) Place (b) Date (c) Category

DECLARATION OF RECRUIT

I do solemnly declare that the above particulars relate to me and are true.

(Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age

Height

Chest measurement { fully expanded ... range of expansion ...

Complexion

Eyes

Hair

Distinctive marks, and marks indicating congenital peculiarities or previous diseases

O. C. Depot Bttn.

Regt.

Place Date

M.T.W. Ltd.
100M—5-17
1175—33—1135

24-579

REGIMENTAL DOCUMENTS

NAME McLAY MURDOCK, REGT. NO. 3034971 UNIT 3rd Bn H Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
1	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)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
1	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob.
1	MEDICAL EXAMINATION (M.F.W. 129)					
1	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)				25341	
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	Misc.					

W 2589
100M-11-18

2 2 D. CARD NO.
SDD Disc 29/4/19
D0118/28/4/19
POLL
Demob #2 Dec

SURNAME. McLay

CHRISTIAN NAMES Murdock

REGL. No. 3034971 RANK Pte

UNIT 1st Can. Inf. Regt. 1st Dpo. Bn. (12th T.O.) S. Apr. 18 1918

FORMER CORPS Nil.

D.O. Part II No 107

NEXT OF KIN.

NAMES IN FULL McLay John

RELATIONSHIP TO SOLDIER Brother

ADDRESS Lions Head, Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada. Lions Head Ont. DATE Feb. 10th 1890

PLACE OF ATTESTATION Toronto, Ont. DATE Apr. 18th 1918

6/8. 9-6-18 1272/12

Pte 21/4/19 - 309/447 Pte.

L. L. 26989 M. & D. 8191.

M. F. W. 22. 100M. 8-17. H. Q. 1772-39-339.

MARRIED SINGLE WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

Number 3034971 Rank Pte

Surname McLAY

Christian Name Murdock

Units 3rd Bn Can Inf Theatre of War France

Date of Service 28-9-18

Remarks 476 Albert St

Latest Address Sault Ste Marie Ont

Roll No. B. Page 7708.

C.A.D.C. 5009A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

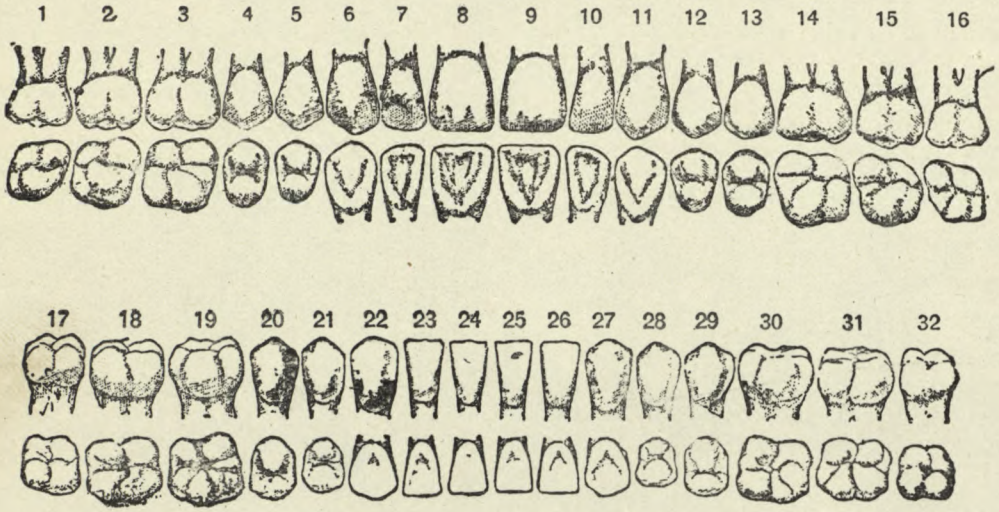
DIRECTIONS TO DENTAL OFFICERS

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

NAME OF SOLDIER (Block Letters) McLAY M.

REGIMENT 3 Bn RANK Pte No. 3034971

Date of Examination in England 25/3/19 Date of Examination in France



14

I

PRESENT DENTAL REQUIREMENTS

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

HAS HE EVER REFUSED DENTAL TREATMENT?

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

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

BRAMSHOTT CAMP
HANTS.

Signature of Dental Officer A B Lerosby
Capt

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

M. F. W. 54. (A. F. B. 10s.
500M.—9-16
H. Q. 1772-39-9 0.

Casualty Form—Active Service.

Unit, Regiment or Corps: 44th Bn 1st ~~DEPOT~~ BATTALION 1st C.O.R. Murdock Mc La

Regimental No. 3034971 Rank Pte. Name ~~MURDOCK Mc Clay~~ (Murdock)

Enlisted (a) 18-4-18 Terms of Service (a) D of W C.E.F. Service reckons from (a) April 18 1918

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) Stranger

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 Canada.	JUN -3 1918		
		Arrived England.	21-6-18		E. G. Smith Major O.C. D.R. 44
3-7-18	12th Bn	T.O.S 12th Res Battn	Witley	21-6-18	Part II/256
30-9-18	12th Res. Bn. C.E.F.	Transferred to 3rd Battn	do	28-9-18	"Cassandra" Part II 232 H W Sanesbury Lieut i/c Records
SEP 30 1918	C. B. D.	ARRIVED C. B. D.	FRANCE	SEP 29 1918	N. R. D 12th Res. Bn. C.E.F. PART II ORDERS No. D OCT 4 1918
SEP 30 1918	C. B. D.	LEFT C. B. D. FOR CAN. CORPS REINF. CAMP		OCT 2 1918	N. R. D.
OCT 2 1918	CAN. CORPS REINF. CAMP O. C. BN.	ARRIVED CAN. CORPS REINF. BN.	CAMP FIELD	OCT 2 1918	B. 213
OCT 3 1918		LEFT FOR UNIT		OCT 3 1918	
OCT 5 1918	3RD CAN BN.	JOINED UNIT		OCT 4 1918	B 213.

(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.

W. S. B. CLASS. A.

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				
	Emb. Camp	Proceeded to England.		MAR 22 1919	N.R. Pt.2 O.No. d/.... G.J. Skelton LIEUT. FOR LT-COL. A.A.G
	S.O.S.	PROCEEDED TO CANADA	Part II 12/12	12/4/19	A. Langhurst Lieut for CAPT. & ADJT. 3RD CANADIAN BN. TORONTO REGIMENT.
	OLYMPIC SOUTHAMPTON 15.4.19				W. Sully CAPT. ADJUTANT H.M.T.
APR 15 1919	O.S.	T.O.S. No 2 DISTRICT DEPOT, TORONTO		1919	PART II P.O. 118
APR 23 1919	S.O.S.	(DISCHARGED FROM H.M.S. No. 2 DEPOT,			PART II P.O. 113

Lieut.
For O.C. No. 2 District Depot.

Form R 122.
10287—65M—28-7-17.

LTR Rank Name MC LAY, Murdock Reg'l No. 3034971

44th Dft 1st En 1st C.O.R Unit If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Toronto, April 18th, 1918. Place of Birth Lions Head. Ont.

Name and Address, Next-of-Kin John McLay

Lions Head, Ontario Relationship Brother.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

N/E. R.B. No. 22336
File R.L.
Category CAN. OR

Discharge, Date and Place Reason Character

Report. Date.	From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
		Arrived in England		21-6-18	S/S CASSANDRA
3.7.18	19 Res.	To S. from Canada	Pte Fielde	24.6.18	156 3rd Bde
30.9.18	"	SOS to 3rd Bde	" "	28.9.18	232 100 4.10.18
24.3.19	3 Batt	Proceed. to England	Pte Field	22.3.19	24 Pte II O.T. 27.3.19 C. Wing C.C.C.
14.4.19	C Wing CCC.	SOS to Canada	" Bmshott	14.4.19	12.

A.F. 103 CHECKED 30 OCT 1918

49-1-161
14-4-19

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				

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. 3034976 Rank Pte. Surname McLAY
(Given name in full) MURDOCK

Unit or Corps 3rd Bn. Birthplace Lions Head Ont.

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

1. **GENERAL DESCRIPTION:** stiff

Physique good Weight 158 lbs. Height 5 ft. 6 in. Colour of Eyes Blue.

Nutrition good

Pulse 60 per min. regular

Condition of arteries good

Vision Rt. 6/12 Left 6/12

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

Identification marks, scars, or deformities. (Give cause and date of origin.)
Large vaccin. m. of arm
Small pox marks.

Opinion as to general health and physical condition good

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

Nervous System no Genito Urinary System no Cardio-Vascular System no

Special Senses 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.

Mumps. small pox, infancy
recovered.

no disability

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Brussels (Overseas)

Date 25-3-19 Signed [illegible] 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 Murdock McLay

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

THIS SECTION FOR USE IN CANADA—

Examined at ..... (Canada)

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 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.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge
Class "A" No. .....

THIS IS TO CERTIFY that No. 3034971 (Rank) Pte

Name (in full) McLAY MURDOCK enlisted in

the 1st C.O.R.

CANADIAN EXPEDITIONARY FORCE at Toronto on the 3

day of October 1917

HE served in 3rd Battn.

and is now discharged from the service by reason of Demobilization. ~~Medical Unfitness.~~

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

Age 29

Height 5 ft 6 ins

Complexion Dark

Eyes Blue

Hair Dark

Marks or Scars

Scar Rt hand

M McLay
Signature of Soldier

Date of Discharge

No. 2 DISTRICT DEPOT
APR 23 1919
TORONTO

Issuing Officer
For
O.C. No. 2 District Depot.
Rank

Date APR 23 1919 19

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.B. 39A.
1049-D.P.-300M-11-18.
H.Q. 1772-39-882.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. ..... (Rank)

Name (in full) ..... enlisted in

the .....

CANADIAN EXPEDITIONARY FORCE at ..... on the .....

day of 19

HE served in .....

and is now discharged from the service by reason of Demobilization. Medical Unfitness.

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

Age .....

Height .....

Complexion .....

Eyes .....

Hair .....

Marks or Scars .....

Signature of Soldier

Date of Discharge

Issuing Officer

For

O.C. No. 2 District Depot

Rank

Date 19

No. 2 DISTRICT DEPOT

APR 23 1919

REGD

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.T.R. 204.
Tho-O.P.-300M-11-18.
H.Q. 1-11-39-838

FORM OF WILL

I, Murdock McLay (Name in full)

Regimental Number 3034971 serving in

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

EPO Sault Ste Marie Ont

I devise all my real estate unto

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

absolutely, and my personal estate I bequeath to

Annie McLay (Sister)
Cape Chin, Ont

Name and Address of person or persons to receive personal estate* (*See note*).

NOTE

This space for the appointment of Executor if necessary.

IMPORTANT NOTE

This must be signed and Dated by THE SOLDIER HIMSELF.

this 25 day of April A.D. 1918

Murdock McLay Signature of Soldier.

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

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

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness H W Payne

Address of Witness Barrie Ont

Occupation of Witness Sgt. Dept. C. S. L.

Signature of Second Witness H R Olds

Address of Witness 454 Clarence Ave Toronto Canada

Occupation of Witness Manufacturers agt

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

Certified Copy.

ORIGINAL

ORIGINAL

M.S.A.

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar.

1. Surname Murdock McLay Christian name ~~McLay~~ Murdock

2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 818682

3. Consecutive number on schedule of men reporting for service (if he appears on it)

4. Address (including street and number, if any) Sault Ste. Marie, Ont.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 3rd day of Oct. 1917, by the undersigned medical board sitting at Sault Ste. Marie, Ont.

5. Age as stated 27 Years Months.

6. Apparent age 27 Years Months

7. Height 5 Feet 6 Inches.

8. Weight 147 Pounds.

9. Chest measurement Minimum 34 Ins. Maximum 37 Ins.

10. Complexion Dark Eyes Blue Hair Dark

11. Physical development good (Good / Fair / Poor)

12. Smallpox marks yes

13. Number of vaccination marks Right arm Left arm yes

14. When vaccinated last 1910

15. Distinctive marks and marks indicating congenital peculiarities or previous disease None except Small Pos marks

16. Slight defects but not sufficient to cause rejection Slightly enlarged Tonsils

The man denies having had Rheumatism / Tuberculosis / Syphilis

We find no evidence of past Rheumatism / Tuberculosis / Syphilis

(Strike out disease admitted or suspected.)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category A2

17. (a) Vision. R. L.

(b) Hearing. R. L.

A.T. Basted Capt. President.

B.H. Hamilton Member. A. Sinclair Member.

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
25/4/18	good	[illegible] Capt. M.O.	20/4/18	[illegible]	M.O.
		M.O.	25/4/18	[illegible] Capt	M.O.
		M.O.	30/4/18		M.O.

Joined 18-4-18 day of April 1918 at Toronto, Ont.

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	1st Depot Bn			
Transferred to	1st C.O.R. 12th Bn 3rd Bn	3034971		28.9.18

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result

Certified true copy
M. Murdock
Capt.

N.B.—This sheet is 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.
300M.—10-17.
1772-39-439.

Signature of Man Murdock McLay

14

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

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

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY	* ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:-	1/6/18	EFFECTIVE DATE:-	
AMOUNT:-	$10.00	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.

Miss Annie Laura McLay (Sister)
Cape Chin, Ontario
Stopped Pff 1-4-19

5497
Bishop
MD 2

NAME:- McLAY, Murdock
NUMBER:- 3034971

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
L.O.C. from Can.	1/6/18.	Pte.

303

Pff. 4L

UNIT AND TRANSFERS

ORIGINAL UNIT:- 1st Depot. Bn, 1st C.O.R.

DATE ACCOUNT FIRST OPENED:- 1/6/18.

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
12th Res. DO. #156	21/6/18		12th Can Res Bn

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
14/3	3226	20/pro	3 73				
26/3	1018	bwn'g £15	73				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
L.O.C. from Can.	1 -	10		

PARTICULARS OF RENDERING NON-EFFECTIVE: Trs to Can 1/4 MR 5497 Drams 28/3 Drams MD2 L&C Bal Cr 22 40 Leo Bal Cr 99 13

MONTH	PARTICULARS	CR 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
	Balance from Canada								10 -		
		33						20			
July	Pay.	34 10		590 5/7/18 12th Res Bn	487						
				1549 26/7/18 ✓ ✓	487				4736		
		67 10			974			20		10	
Aug	Pay.	34 10		ab 1600 7/8/18 do	36 50		Mo	8 10			
				94005 / 1600 9/8/18 Do	1 32						
				ab 1771 14/8/18 Do	9 73						
				ab 1990 27/8/18 Do	7 30				16 61	15	
		34 10			54 85			10			
Sep	DO	33						10	39 61		
				AR 2277 13/9 Do	9 73						
				" 2444 25/9 Do	9 73				20 15	20	
		53			19 46			10			
Oct	PP	34 10		Cap				10			
				ab 687 No 2 1 Bde 7/10	3 73				16 64		
				" 8th " 25/10	3 73				36 79		
		34 10			7 46			10	36 79		
Nov	PP	33		Cap				10			
				ab 1075 No 2. 1 Bde 3/11	3 73						
Dec	PP	34 10		Cap				10			
1919				ab 1370 No 2. 1 Bde 20/11	3 73						
Jany	PP	34 10		Cap				10	100 53	40	
		101 20			7 46			30			
Feby			✓	ab 649 No 2. 1 Bde 23/12	9 08						
				" 1535 " 16/12	9 08						
				" 1822 " 6/1	5 03						
				" 1975 " 16/1	3 73						
			✓	Forward	26 92				100 53	40	

COMPILED BY H Barns
CHECKED BY M

NUMBER 303 4971 RANK Pte NAME McLay, M.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1919.	Amt. Forward				26 92				100 53	40	
Feby & March	pp	64 90		ap 2369 Nor. 1 Bde. 3/2/19	13 06				166 59		
				" 2944 " 24/2	3 73				71 17		
				ear Feby & March				20			
				ap 3120 Nor. 1 Bde 5/3	3 73					50	
	Into Day Pay	1 14		3226. 3 Bn 18/3	3 73				95 40		
		66 04			51 17			20			
				1018. 26/3 bcong	73 .				22 40		
					73 .						
				SoS to Can 2L 49. 1/4/19							

"OLYMPIC" 21-4-19 DISPERSAL "I"

AUDITOR	PAYMASTER
23	M

M. OR S. M 92

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

REGT. No. 3034971 RANK Pte. NAME (IN FULL) McLAY, M. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? No. | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 1 Res Bn | IF IN P.F. WHAT UNIT? | PLACE OF ATTESTATION | TRANSFERRED TO Bk. of Montreal, Sault Ste Marie, Ont. | DATE | AUTHORITY

DATE OF ATTESTATION 18.4.18 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ 10. | DATE EFFECTIVE 30.4.19 | Closed by Ottawa

PAYABLE TO Annie Laura McLay. | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Cape Chin Ont.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED PLACE Toronto DATE 23-4-19 REASON Demob AUTHORITY DO 118 IF ENTITLED TO POST DISCHARGE PAY Yes

T.O.S. 15/4/19 D.O. 118
SUBS. ..... TO ..... D.O. .....

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.			TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.			TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT 31.3.19							22	40	22	40																									22	40	Bal. to Calendar
29.4.19	29	1.0	31	90	22 30																																1st to 29.4 pay & Leaving allow. w.e. 29.4.19 Pay
																	4 875						10 -														
							136	90									139 43														159 30						April Bal. & Trans. allow.
			W.S.G.																				W.S.G.														
122 days			280	00			280	00									April 23rd										6	60			76 60		203	40			w.e. 29.4.19 Pay & Leaving allow.
																	June 16 700225 a/c						63	40							140 00		140	00			over credited pay
																	June 21 a/c 700225						70	00							210 00		70	00			
																	July 18 a/c 100760						70	00							280 00						
																	final																				
							280	-															273 40				6	60			280 00						

1st W.S.G. Paid by #2 D.D.

1st W.S.G. Paid by #2 D.D.

W.S.G. PAID IN FULL

CAPTAIN
FOR PAYMASTER WAR SERVICE GRATUITY

AMOUNT DUE SOLDIER DEPENDENT

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

Date of Enlistment 18-4-18

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

M 8302

Date of Assignment 1st June 1918

9L4MC20 S.K.

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

10.00			

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion 1st Depot Battn 1st C.O.R. 44th Draft

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1 ANNIE LAURA MC LAY
CAPE CHIN
2 ONT. 10 10.00
% 3034971 PTE MURDOCK MC LAY
3 TEN DOLLARS
4

Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
						12467-W-14
June	J 1545		10	10	✓	Spec Reg Chg. Marles 25/6/18 McK 24/6/18
July	L 32418		10	10	✓	
Aug	M 35738		10	10	✓	
Sept.	Q 48209		10	10	✓	
Oct	J 55456		10	10	✓	
Nov	P 60936		10	10	✓	
Dec.	Y 60207	✓	10	10	✓	
Jan.	V 69804		10	10	✓	
Feb.	Z 81509		10	10	✓	
Mar.	K 84051		10	10	✓	
Apr.	N. 584.		10	10	✓	
			110	$110		

A/c Closed 30-4-19.
Ret'd per Olympia
Date 21/4/19 M.F.W.187 29/4/19
Clerk Z Charbonneau

Jan S #2
Jan R #86377 Sorty 29/4/19 SB

AUTHORITY FOR NEW ACC'T. N.R.M. 202.B.1. J. A. Kincaid 24-6-16

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7993.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128.
400M—6-17—1772'39-1141
L. L. 22320—M. & D. 7393.

War Service Badge
Class "A" No. 286626

D. A. I.
O. S. 13.

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 3034971

2 Rank. Pte

3. Name. McLAY MURDOCK

4. Unit. 3rd Battn

5 Date of Discharge APR 23 1919 Place Toronto

6 Reason for Discharge Demobilization

7. Authority. No.2 District Depot, Part II, D.O.No. 118

8. Proposed Residence after Discharge Sault Ste. Marie, Ontario

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W.?

x. Murdock McLay
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

Date

No. 2 DISTRICT DEPOT
APR 23 1919
TORONTO

For
O.C. No. 2 District Depot

Signature
(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

1. No.

2. Rank

3. Name

4. Unit

5. Date of Discharge APR 23 1919 Place

6. Reason for Discharge

7. Authority. No. 2 District Depot, Part II, O.S.N.

8. Proposed Residence after Discharge

CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W. T.

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

Date

Signature

(O. C. Discharging Unit.)

No. 2 DISTRICT DEPOT
APR 23 1919
TORONTO

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

1. Triplicate Attestation Paper (M F W 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39) (Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing } Statement Q.M.G. Form (D.O.S. 2).
12. ~~Last Pay Certificate (P. 851).~~
13. ~~Pay Book (A.B.64).~~
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group B
Checked by No. 15
Date 11-4-19