229333338.

ORIGINAL

ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1.	What is your surname?	McLEAN,
1a.	What are your Christian names?	HAROLD HENRY,
1b.	What is your present address?	L.S.H.(R.C.).
2.	In what Town, Township or Parish, and in what Country were you born?	Brandon, Man. Canada,
3.	What is the name of your next-of kin?	Mrs A. McLean,
4.	What is the address of your next-of-kin?	Laighton Av' East Kildonan, Man.
4a.	What is the relationship of your next-of-kin?	Mother,
5.	What is the date of your birth?	11th April 1896,
6	What is your Trade or Calling?	Salesman,
7	Are you married?	No,
8	Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes,
9.	Do you now belong to the Active Militia?	Permanent Force,
10.	Have you ever served in any Military Force? If so, state particulars of former Service.	No,
11.	Do you understand the nature and terms of your engagement?	Yes,
12.	Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force?	Yes,
13.	Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit?	No
14.	If so, what was the nature of the disability?	
15.	Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?	No
16.	If so, what was the reason?	

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

H H McLean (Signature of Recruit)

Date 10th February 1917. D Cameron ORD (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Harold Henry McLean, 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.

H H McLean (Signature of Recruit)

Date 10th February 1917. D Cameron ORD (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 10th day of February 1917.

J L Ashcroft Captain. (Signature of Justice)
Commanding Strathcona's.

M. F. W. 23
750M—3-16
H. Q. 1772-39-341

N.B.—Attention is drawn to the fact that any person making a false answer to any of the above questions is liable to a penalty of six months' imprisonment

Description of Harold Henry McLean, on Enlistment.

Apparent Age 20 years 10 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 9 ins.

Chest measurement.
- Girth when fully expanded. 34 ins.
- Range of expansion 3 ins.

Complexion Fair,

Eyes Brown,

Hair Brown,

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

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

Nil,

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 6th February 1917. Robt Henderson Capt

Place Tuxedo Park, Winnipeg, Man. Capt C A M C

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.

Harold Henry McLean, 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.

L. Lt. Captain, (Signature of Officer)
Commanding Strathcona's.

Date 10th February 1917.

31-7-1916

REGIMENTAL DOCUMENTS

NAME McLEAN, HAROLD, HENRY Regt. No. 2293336 UNIT L.S.H. H. Q. FILE NO.

	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)					DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
11	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)					
	DENTAL HISTORY SHEET (M.F.B. 465)					DISCHARGE
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Category
1	MEDICAL EXAMINATION (M.F.W. 129)					Wounds
	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)				25926	DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
2	Nil.					
1	Form B149					
1	Card Red					

W. 2587
100M-11 18
1772 [illegible]-1377

M.T.O. CARD NO. 4

SURNAME. Mc Lean.

CHRISTIAN NAMES Harold Henry

REGL. NO. 293338 RANK Pte.

UNIT L. S. H. (R.C.) (6th R.D.)

FORMER CORPS Permanent Force

S.O.S. 10-7-19 Dental F.

~~100.193~~ 12-7-19. 10.2.19.

NEXT OF KIN.

NAMES IN FULL Mc Lean, Mrs. A.

RELATIONSHIP TO SOLDIER Mother

ADDRESS Leighton Ave, East Kildonan
Winnipeg, Man.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada. Brandon, Man. DATE Apr. 11th 1896

PLACE OF ATTESTATION Winnipeg. Man. DATE Feb. 10th 1917

R.C. 5-7-19 362 - 13. Pte

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

M. F. W. 22. 100M.—11-16. H. Q. 1772-39-339.

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Salesman RELIGION Presbyterian

DESCRIPTION.

APPARENT AGE 20. YEARS 10. MONTHS

HEIGHT 5 FEET 9. INCHES

CHEST MEASUREMENT 34. INCHES EXPANSION 3. INCHES

COMPLEXION Fair. EYES Brown HAIR Brown

DISTINGUISHING MARKS Nil

MEDICAL EXAMINATION. PLACE Tuxedo Park. (Winnipeg. Man.) DATE Feb. 6th. 1917

Present Address. Winnipeg. Man

Number 2293338 Rank Pte.

Surname Mc LEAN

Christian Name Harold Henry

Units C.L.H. Theatre of War France

Date of Service 16-2-18

Remarks

Latest Address 832 ~~Mac Millan Ave.~~
~~Fort Rouge Man.~~
79 Chestnut St.
Winnipeg
Man.

Roll No B Page 8254

No. RANK NAME

T. O. S. UNIT

M. D.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY

DESP. NOV 23 1921 REGN. NO. A/V/9780/A

NAME Mc Lean, H. H. REGT. No. 42.933.35

RANK AND UNIT Pte. C. L. H.

NEXT OF KIN

CABLE	
No.	DATE

NATURE OF CASUALTY

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

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS Can Can.
A H5H.	7. Gen. Limerick	18-2-19.	H2.
A H62.	3. Can. Gen Boulogne.	26-2-19.	H2.
A H93.	Discharged	10-H-19.	H2.

Form R. 149.

Name Mc LEAN HAROLD HENRY Rank Pte Reg. No 2293338

Unit C.L.H.

Next of Kin Canada.

Date 1919		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List
15.	2	9 C.G.H. Wimereux		"Z"	A45			4314-16
26.	2	13 C.G.H. B'Eng.		"	A462			7412-b
10.	4	Disch.		"	A493			9771/8

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

Surname	Christian Name or Names	Reg. No.
MC LEAN.	H.H.	229338.
Rank 1. Pte.	Unit 1. Cav. CLH.	
2.	2.	
3.	3.	
4.	4.	

Cas List.	Hospital and Diagnosis.	Date
26-2-19.A454.	7. G.H. Wimereux.	18-2-19.
	V.D.S.	
Y.3.19.A462.	3 Can. G. Boulogne	26.2.19
17.4.19.A493	Disch	10.4.19

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

Cas. List.	Hospital and Diagnosis.	Date

FORM OF WILL

I, Harold Henry McLean. (Name in full)

Regimental Number 229338 serving in L.S.H.(R.C.)

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

I devise all my real estate unto

Mrs Catherine McLean (mother)
Leighton Avenue, East
Kildonan, Winnipeg. Man

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

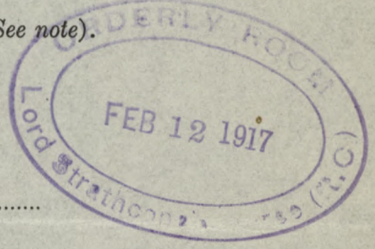
absolutely, and my personal estate I bequeath to

As above.

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 10th day of February A.D. 1917.

H H McLean 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 L. Arnold Capt

Address of Witness L.S.H.(R.C.)

Occupation of Witness OC Regt Depot Strathcona's

Signature of Second Witness D. Cameron

Address of Witness L.S.H.(R.C.)

Occupation of Witness ORS Strathcona's

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

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

Army Form B. 103.

Casualty Form—Active Service.

Temp

Regiment or Corps ~~EATON MACHINE GUN BATTERY~~

Regimental No. 229338 Rank Pte. Name McLean J.

Enlisted (*a*)_____ 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				
2-6-19	C.R.C.R	S.O.S to M# 13	K.P.C.	3-6-19	D.O. 150

Robt Angus
Lieut
for. O.C. C.R.C.R

(*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				

ORDERLY ROOM
FEB 13 1917
Lord Str. (R.C.)
2293-388.

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps L. S. H. (R.C.)

Regimental No. 6[illegible]4 Rank Private Name ~~H. H.~~ McLean, Harold Henry

C. E. F.

Enlisted (a) 10/2/17 Terms of Service (a) W. of War Service reckons from (a) 10/2/17

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

Extended Re-engaged Qualification (b) Salesman

W. S. B. CLASS A

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	26.3.17	S.S. Missanabie
		Debarked.	England	7.4.17	
8/4/17	T/C CRCR	T.O.S. R.C.R.	Seaford	7.4.17	Part II Order No 34
22.10.17	T/C CRCR	S.O.S. in reporting to C.C.R.D. as shown on Command to No 1 Cadet Wing R.F.C. Hastings	Seaford	22.10.17	Part II Order No 291
23.10.17	C.C.R.D.	T.O.S. Can. Cav. Regt. Depot and shown On Command to No. 1 Cadet Wing R.F.C. Hastings.	Shorncliffe	22.10.17	Part II Order No. 218

E. J. Bishop Capt
~~LIEUT.~~
ASST. ADJUTANT,
FOR OFFICER COMMANDING,
CANADIAN RESERVE CAVALRY REGIMENT.

Director of Records 19 JUN 1919 CANADIAN

(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.

2293338. McLean N.H.

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.
5.2.18	C.C.R.D.	Ceases to be shown "On Command" to R.F.C. Hastings, and S.O.S. reporting to C.R.C.	Hastings	4.2.18	Part II. Orde No. 31
					John W Landrock CAPT. & ADJUTANT FOR OFFICER COMMANDING CANADIAN CAVALRY REGIMENTAL DEPOT.
6.2.18	C.R.C.R.	T.O.S as posted from C.C.R.D.	S,cliffe	4.2.18	Part II 490 57.
18-2-18	O.C.C.R.C.R.	S.O.S. having proceeded overseas to C.L.H.	S,cliffe	16-2-18	Part 11 Order No 49
					CANADIAN RESERVE CAVALRY REGIMENT
5.2.18	2. Cadet Wing	S.O.S rejoins unit	Hastings	5.2.18	P II o #31 D.S.R.
					R Hooper Lt for Lt/Col i/c Records C.O.M.T.
16.2.18	C.G.B.D.	T.O.S. on arrival at	Base	16/2/18	N.R. 518. Ptford. 12.21.2.18.
19.2.18	C.C.R.C.	arrived at C.C.R.C.	Field	19.2.18	N.R. 137.
24.2.18	unit	Rejoined unit	Do	20.2.18	P.B. 373.
28.12.18	C.L.H.	Deprived of 7 days pay for W.O.A.S. Absent w/o leave from Reveille (6.00 hrs) 21.12.18 until Reveille (06.00 hrs) 22.12.18 (Forfeits 1 days pay under 3rd Reglns)		23.12.18	B 2069 A 20 # 7 11
19.2.19	C.L.H.	Absent without leave	Fld	2.2.19	B 213. K.D. notified 24.2.19
27.2.19	"	To Hospital	Field	14.2.19	B 213
18.2.19	Genl	D.S.	Adm Genl	18.2.19	W 3034-W77 S.S.

CERTIFIED CORRECT. 20 FEB 1919 CAN. RECORDS, LONDON.

Army Form B. 103. Regimental Number 229338

Casualty Form—Active Service.

Regiment or Corps Can Light Horse

Rank Pte Surname McLean Christian Name H. H.

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 ...			
	AAG	S.O.S Can Light Horse on transfer to Can Record List	transfer	1.3.19	A.A.G. Can Sect BRO Havre K38-1 PRO #14 (1919)
26.2.19	3 Can Genl	V.D.S. Admy Can Genl.	Admy Can Genl.	26.2.19	W3034-7887
		T.O.S. Can. Record List		2-3-19	D020d/1919
			A Brand Lieut for Lt.-Col., A.A.G., Canadian Section		
12-5-19	B.P.B.R.	T.O.S. from C.L.H.	Rhyl Pte	1-5-19	D.O. 12 R

FOR LT.-COL. i/c RECORDS, C.O.M.F.

(*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—M2733 2000m 9/17 (35611) C. P. & S., Ltd., Form B./103 E/1807. P.T.O.

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				
		26/6/19 T.O.S. Dispersal Station	90. 193. Pas.		
		11 and Dispersed 10/7/19 M. E. Patton Lieut for O. C. 10 District Depot.	" " "	3.	

C.A.D.C. 5009A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) McLEAN H. H M.D. 10

REGIMENT C. L. H. RANK Pte No. 2293338

Date of Examination in England 4-6-19 | Date of Examination in France

DIRECTIONS TO DENTAL OFFICERS

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

PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS 7
3. CROWNS 19
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

KINMEL PARK, NORTH WALES.

Signature of Dental Officer W. Duncan Capt

CANADIAN EXPEDITIONARY FORCE

3.
3.

DISCHARGE CERTIFICATE

WAR SERVICE BADGE
CLASS "A" NO. 320576 ISSUED

THIS IS TO CERTIFY that No. 2293338. (Rank) Pte.

Name (in full) Harold Harry McLean. enlisted in

the C. E. F.

CANADIAN EXPEDITIONARY FORCE at Winnipeg on the Tenth.

day of February. 1914.

HE served in C. E. F. in France

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

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

Age 23.

Height 5' 9"

Complexion Fair

Eyes Brown.

Hair Brown

Marks or Scars Nil.

H H McLean
Signature of Soldier

Wm Halladay
Issuing Officer

Date of Discharge

Dispersal Station "M" JUL 10 1919 Military District No. 10

Lieut.
Rank

Date 10. 7. 19 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.

1.—That discharge certificate must be carried when wearing uniform,

2.—That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing, and

3.—That wearing of uniform renders him liable to usual military discipline, as if on the strength of a unit.

DUPLICATE.

MEDICAL HISTORY SHEET.

Surname Mc Lean . Christian Name Harold Henry.

Examined { on 29th day of Jan 1916
at Winnipeg Man.

Birthplace { City or Town Brandon
County Man. Canada.

Apparent age 19 years. 9 mo.

Trade or occupation Salesman.

Height 5 Feet 9 Inches.

Weight 140 Lbs.

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

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right. Left. X
Number 1

When Vaccinated last Infancy

(a) Marks indicating congenital peculiarities or previous disease

None

(b) Slight defects but not sufficient to cause rejection

None

FEB 13 1917 Lord Strathcona's Horse

Approved by W. W. Buck

Rank Capt. Camb M.O.

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

Date	Result	Vaccinations.
24-8-16	Un Suc	H Bryan Capt. M.O.
7-9-16	-	H Bryan Capt. M.O.
21-9-16	-	H Bryan Capt. M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
26.5.16	1/4	H Bryan Capt. M.O.
28.7.16	G.	H Bryan Capt. M.O.
4.8.16	G.	H Bryan Capt. M.O.
11.8.16	G.	H Bryan Capt. M.O.
17.8.16	G.	H Bryan Capt. M.O.

Enlisted on 29th day of January 1916 at Winnipeg.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	L. S. H. (R.C.)	~~6424~~		29. 1. 16.
Transferred to..		2293338		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Kinmel P.	12/6/19	Sick A.	J. G. Montgomery

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.
150M.—8-15.
H. Q. 1772-39-439.

Surname Mc Lean Christian Name Harold Henry.

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.
Camp Hughes	30-5-16	28	6	16	6	7	16	Scabies	9	Camp Hughes	H Hyam

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. 1293338 Rank Pte. Surname McLean
(Given name in full) Harold Henry

Unit or Corps C.L.H. Birthplace Brandon Man. Can.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 158 lbs. Height 5 ft. 9 in. Colour of Eyes Brown

Nutrition Good

Pulse 68

Condition of arteries Good

Vision Rt. 6/6 Left 6/6

Hearing (conversational voice) Rt. 21 ft.

Left 21 ft.

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

Nil

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 Kingussie L.D. (Overseas)

Date 12/6/19 Signed W.G. Montgomery 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 W.M. Lean

(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 lescription 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 bv Medical Board.)

(This space to be used, if necessary, in connection with Section 8, overleaf, only.)

[OVER]

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

L. P. Job 4503.—M. & D. 6332.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

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

To Whom Mrs Geo Smith

Address Leighton Ave
East Kildonan Winnipeg
Man

Rate 16ˢ

MAR 1 1917

By Whom Assigned McLean N.F.

Regtl. No. 6424 2293338

Rank Pte

Corps 6th Reinf Dpt. L.S.H. R.C.

PAYMENTS

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

CONSOLIDATED 3 ACCOUNT

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2. Mrs Geo Smith
(Assignee)

L. L. Job 5470—Req. 6888.

Name of Soldier McLean N. H.
6424 Cdn Ring Dft. L.S.H. (RC) Lt

16 W

MAR 1 1917

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March		A52687	16	
April		W 3199	16	16 W.
May		W12936 ~~W10139~~	16 16	16 Bo W10138 Can 7 5/11 gg L.
June		M19779	16	5 6
July		W 25931	16	
Aug.		9 31027	16	
Sept.		H37848	16	16 Lu
Oct.		P 43083	16	
Nov.		J 50158	16	
Dec.		Z 58700	16	160
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

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. 559.
MARRIED OR SINGLE Single

PLACE OF BIRTH Brandon. Man. Canada

NAME AND ADDRESS OF NEXT OF KIN Mrs A. McLean

Leighton Ave. East Kildonan. Man. Canada.

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	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No 399338. RANK NAME Mc Lean Alex Henry 314 1C

IF IN PERMT. CORPS | WHAT UNIT | UNIT C.S.H. 6th Draft TRANSFERRED TO C.R.C.R. DATE 1st Nov 1917 AUTHORITY O.P.S.

PERMANENT FORCE ALLOWANCES TRANSFERRED TO Imp. Cadets DATE 1/2/18 AUTHORITY

PLACE OF ATTESTATION Winnipeg TRANSFERRED TO No 1 Summ. Coy DATE 1/4/18. AUTHORITY

DATE OF ATTESTATION 10th February 1917. TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 16.00 DATE EFFECTIVE 1/3/17

PAYABLE TO Mrs G. Smith Leyton Ave. East Kildonan. Man. Canada 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)

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
														24 10	24 10																24 10				Bal. L.F.P.
Oct	30	100	33												33												16		16	41 10				
May	31		34	10											34 10	20	15/4	192	11/5					4 87	9 73			16		30 60	44 60				
June	30		33												33	292	31/5/17							9 74				16		35 48	42 12				
July	31		34	10											34 10													16		16	60 22				
Aug	31		34	10											34 10	378	24/6/17							4 87				16		25 74	68 58				
Sept	30		33												33	575	14 7 17							9 74				16	3 30	63 11	38 47				Forfeits 3 days pay D.O. 193-147
			201	30										24 10	225 40									58 43	29 20			96	3 30	186 93	38 44				

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SER. ALLCE. ENG.
Oct		~~34 10~~							34 10		
	Pres Pay	34 10		A.P.				16			
				A.P. 790 24/7 ERROR	7 30				49 27		
		34 10			7 30			16			

OVER

OVER

2293338. McLean H.H.

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
MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFERRED PAY	SER. ALLCE ENGT																							

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY * ~~ENGLAND or~~ CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1/3/17	EFFECTIVE DATE:-
AMOUNT:- 16 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.

Mrs G Smith.
Layton Ave
East Kildonan
Man Can.

Stopped Off 1-7-19

Sd Cr 82.50
Sp Dr. 67.67

NAME:- M.c LEAN. Harold, Henry K

NUMBER:- 2293338.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte.

UNIT AND TRANSFERS

ORIGINAL UNIT:- L S.H. 6 Draft.

DATE ACCOUNT FIRST OPENED:- 1/4/17

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
	1/2/18		Imp Cadets
	25/4/18		1st Fme Coy

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
							33 66
~~16/4/19~~	1	~~dy R.W~~	~~1 10~~	~~16/5/19~~		~~Ldn~~	~~4 67~~
~~31 dys~~	~~2/0~~	~~Can Cav~~	~~18 60~~	~~13/5/19~~	~~634~~	~~C R C R~~	~~11 67~~
~~24/4/19~~	~~2610~~	~~Field~~	~~4 56~~	~~14/5/19~~	~~693~~	~~do~~	~~11 67~~
~~7/5/19~~	~~3636~~	~~do~~	~~6 10~~	~~27/5/19~~	~~1106~~	~~do~~	~~4 67~~
~~31/5/19~~	~~Taf 3 dys pay.~~		~~3 30~~	~~27/5/19~~	~~5 dys pay RW 1 dys pay.~~		~~14 30~~
			33 66	~~4/6/19~~	~~134~~	~~1 Kinmell~~	~~8 83~~
							150 49

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE Trans to Can Eff 1-7-19 K 10299. 4-6-19 to R Kyl. 16-6-19 L/Mc Bal M.D. 10

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mar 31	Bal for								57 17		
Apl	Pay	33 -		C.A.P.				16 -			
				D/R A.R. 81 1 Div Sgs 6/4/18	4 46						
		33 -			4 46			16 -	69 41		
May	Pay	34 10		D/R A.R. 105 Cyclists 20/4/18	3 54						
				C.A.P.				16 -			
				D/R A.R. 140 Cyclists 5/5/18	4 46						
				D/R A.R. 247 do 19/5/18	3 54						
					11 60						
		34 10			~~8 03~~			16 -	46 21		
June	Pay	33 -		C.A.P.				16 -			
				1245 6 L H 6 6 18	3 57						
				346 " 20 6 18	4 46						
		33			8 03			16	85 18		
July	P.P.	34 10		C.A.P.				16			
				D/R A.R. 455 5/7/18 6 L H	3 57						
				D/R " 509 25/7/18 6 L H	4 46				95 25		
		34 10			8 03			16			
Aug	P.P.	34 10		C.A.P.				16			
				D/R A.R. 562 3.8.18 C.C. Cyc. Bn	3 57				109 78		
		34 10			3 57			16	147 75		
Sep		33		C.A.P.				16 -	27 60		
				D/R A/R 676 11 9/18 6 B. Cyc. Bn 42	7 14						
				" 754 19 9/18 " 44	4 46				115 18		
		33 -			11 60			16 -			
OCT		34 10		C.A.P.				16			
				D/R 894 19/10 C.R.C.R. 14	8 39				124 89		
		34 10			8 39			16 -			

COMPILED BY A Shaw.
CHECKED BY Mcbalus

NUMBER 229 3338 RANK SPR. NAME McLEAN. H. H.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1918				Bal Frd.					124 89		
Nov	P P.	33		C a P.				16			
Dec	" "	34 10		97 C.P.L. London 15/11/18 L.Y. HORSE	16 79			16			
Jan	" "	34 10						16	161 30		
		101 20			16 79			48	64 90		
				2 r1 - C & H 8.1.19	12 57				77 6 20		
				4 days pay r 3.1.19 Awl 21.12.18 6 r 12.18 4 days H		8 80			70 60		
Feb.	"	30 80		C.a.P.				16			
Mch	"	34 10		C a P.				16			
				1787 - 1 & B 9.1.19	7 54 -						
				789 - C & H. 20.1.19	5 03 -						
				10959 C & B 1.3.19	4 66 -				155 60		
		64 90			29 80	8 80		32			
Apl	"	33 .		C. a P.				16 .			
				Vow. 7908 9. Gen Rem. 1. 1447. Chg/mo 12-4-19.	48 67						
				D/Note. Can A.F. March 1919 Not Pres. Chged. per D 902. D/K 7319.	16 00						
May	P O A.	34 10		C a P.				16 00			
				70543 London 21-5-19	48 67						
				AR. 1903. C of B D. 21-4-19	7 30						
				AR 238. A.T.O.C. 38. 12-4-19	4 56				65 50		
		67 10			175 20			32 00			
June	P O A.	33 00		C.a.P.				16 00	82 50		
				AR. 68321 London 10-5-19	4 87						
				AR 2610 C B of D. 28-4-19.	4 56						
				AR 693. C R C R. 14-5-19.	48 67						
				AR 634 ✓ 13-5-19.	4 87						
				3636. C of D. 8-5-19.	6 10						
				AR. 1108. C R C R. 27-5-19.	4 87						
		33 00		AR. 134. Kin Park. 4-6-19.	38 93						
				AR. 1440 ✓ 23-6-19	4 87				35 24		
		33 00			177 74			16 00			
				Forfeits 8 days P. & S. day Pard 27/5/19 D 0144 CRCR 28/5/19		14 30			49 54		
						14 30					
				S of S to Can 26-6-19 ff 88. C.R.							
				D/063 24-7-19 Rec. List							
				Awl 0800. 1-5-19 - 08.00 3-5-19							
				Forfeits 2 days pay under P & R		2 20			51 74		
						2 20					
Oct				Forfeits 1 day by R.O. 16/19		1 10					
"				31 days N. S/H ?		18 60			71 44		

M.D. 10.

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

WAR SERVICE BADGE
CLASS "A" NO. 320506 ISSUED

1. No. 2293338
2. Rank. Pte.
3. Name. McLean Harold Henry
4. Unit. C.R.C.R.
5. Date of Discharge 10. 9. 19 Place Winnipeg.
6. Reason for Discharge A. Mother Winnipeg
7. Authority. C.O. 193.
8. Proposed Residence after Discharge HMT NORTHLAND EMBK. 26.6.19. T.INPK. 5.7.19

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.?

H H McLean

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

Date JUL 10 1919

Disposal Station "M" M.D. No. 10 Military District

Signature Wm Hanley Lt

(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

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 C[illegible] (Form M.F.W. 2595).

Group 9
Checked by No. 78
18/17
Date 14/6/19

Form R 122
2353—100M—9-12-16.

WWJ.

Rank | Name McLEAN, Harold Henry. | Reg'l No. 2293338

Unit 6th.Dft.L.S.H. | If in perm. Corps, What Unit? | Married or Single Single.

Place and Date of Enlistment Winnipeg 10th.Feb.1917. | Place of Birth Brandon, Man. Canada.

Name and Address, Next-of-Kin Mrs.A.McLean.
Laighton Ave.East Kildonan, Man.

Relationship Mother.

Assigned Pay Monthly $ | Payable to

Relationship

Separation Allowance $ | Payable to

Relationship

N/E R.B. No 5730
File R.L.
Category CAN. OR

Discharge, Date and Place | Reason | Character

H. W. V., Ld.—9546-16.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
		C. ARRIVED IN ENGLAND.		7 4 17	S.S. MISSANABIE.
8-4-17.	C.R.C.R	Taken on strength.	S'cliffe	7-4-17	Rt. II 0.34
23.10.17	6 C R D	To Son posting from 6 R C R ön	"	Pte 22.10.17	" " 218 6 R C R P.S 0231 d 22/10/17
5-2-18	No 2 Cadl Wing S.O.S.	Command No. 1 Cadet Wing R 76 Reports Unit	Hastings	2.2.18	" 31 "
6.2.18	6 C R D	R 76 Ceases on command R.F.C.	S'cliffe	Pte 4.2.18	" 31 6 R C R P.S 037 d 6-2-18
18.2.18	6 R C R.	SOS posted to 6 R C R. To Son proceeding Overseas to 6 L H	"	Pte 16.2.18	" 49 6 L H P.S 012 d 21/2/18
5 3 19	6 L H	SOS to Can Rec Liste	Field	" 1.3.19	P.S 014 720 d 11 3 19 6 R L
12 5 19	6 R C R	SOS from 6 L H	Rhyl	" 11 5 19	P.S 0128 " 55 d 12-6-19. C R L
3 6 19	"	SOS to M D 10	"	" 2 6 19	M D 10 P.S 0150 DO 143 d 4-6-19
26 6 19	M D 10	SOS to Canada	"	" 26.6.19	D.O 161

P.T.O.

S.L. 88. M-61
26-6-19

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.				
14-7-19	C R L.	Admonished a. W.L. forfs 2 days pay	London	1-5-19 to 3.5-19	Do. 63

AUDITOR | PAYMASTER

M. OR S. M2-1371

NORTHLAND

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

REGT. No 2293338 RANK Pte NAME (IN FULL) McLEAN. H. H (BLOCK LETTERS SURNAME FIRST) 10

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Nil — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
10		

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

PLACE OF ATTESTATION — TRANSFERRED TO Disp Stn M — DATE JUN 26 1919 — AUTHORITY D, O, 193

DATE OF ATTESTATION 29-1-16 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 16.00 — DATE EFFECTIVE 1-8-19

PAYABLE TO ~~Mrs E. Smith~~ — RELATIONSHIP W.S.G.

ADDRESS ~~Leighton Ave E. Kildonan Winnipeg Man.~~

ANY CHANGE IN ASSIGNEE OR ADDRESS Bank of Montreal Winnipeg

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE M.D. 10 — DATE JUL 10 1919 — REASON D — AUTHORITY D, O, 193 — IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS 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 $	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.		TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																														67	67	67	67			Dr BAL. ENG. L. P. C.
July	15	1.10	16	50	35 40				121	50	217263						4	67	14 8	67	1	70	16							100	74	46	91			Clothing Allce. 1st payment W.S.G.
																																					Advances - Boat - Train
																																					A.P. chgd. on Eng. L.P.C. to July
			W.S.G.																				W.S.G.								SOLDIER DEPENDENT					
	183 Days at Min		420						420														40								350		Nil			1st Payment W.S.G. as above
																											5	50			344	50	Nil			Dr 3rd " " P.P.C.
																											46	91			297	59	Nil			Dr Bal Fora
					Aug 16						1214853												40								227	59	6			40 - 2nd p'ment W.S.G.
					Sept 9						1894580												40								154	59	6			40 - 3rd "
					Oct 10						1680816												40								84	59	6			
					Nov 11						1697976												40								17	59	6			To 5.
					Dec.						1823913												17	59							Nil.		6			17 59 FINAL
			420						420														360	59			57	41		420						

Ac. Released

AUDITED DEC 4 1919 Audit Clerk M.S. 10

Certified War Serv. Gratuity Account

200M-3-19.—L. ... 58788-H. & D. 9935.
M. F. W. 2096.
1772-39-1390.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS 8528

Date of Assignment

Mar. 1-17

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

16			

H. L 6 McGill St.

PARTICULARS OF SEPARATION ALLOWANCE

No. 6424 (229338)

Rank Pte. Promoted Reverted Discharge

Soldier's Name H. H. McLean

Battalion 6th. Reinf. Draft. L.S.H. R.C.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs Geo. Smith

Address Leighton Ave. (E. Kildonan

Change of Address Winnipeg. Man.

1

2

3

4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
Dec 31			160	160		
Jan 18	61558	G	16	16	F	
Feb	71070	A	16	16		
Mar	92800	M	16	16		
Apr	1359	T	16	16		
May	13591	P	16	16		
June	25875	J	16	16		
July	32637	L	16	16		
Aug	35959	N	16	16		
Sept	48440	Q	16	16		
Oct	55685	J	16	16	✓	
Nov	61164	P	16	16	✓	
Dec	60367	Y	16	16	✓	
Jan	70015	V	16	16	✓	
Feb.	81699	Z.	16	16	✓	
Mar.	84228	K.	16	16	✓	
apr.	736	N.	16.	16.	✓	
May	5354	E	16	16		
June	9472	F	16	16	✓	
July	12841	E	16	16	✓	
			464	464		

Re R.O. 88.115761 (Destroy) rcd 21-7-19 bcf

A/c Closed 31-7-19

Ret'd per Northland

Date 5-7-19 M.F.W.187 21-7-19

Clerk Stanley

A STENCIL HAS BEEN MADE FOR THIS ACCOU

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7988.

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. 22230—M. & D. 7983.