Gunner

ORIGINAL

Original 304559

ATTESTATION PAPER.

No. 304559

Folio. 221

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your surname? ..... Reeves
1a. What are your Christian names? ..... Manley Guest
1b. What is your present address? ..... 286 Queen St Kingston
2. In what Town, Township or Parish, and in what Country were you born? ..... Westmeath Ont Can.
3. What is the name of your next-of-kin? ..... Mr R.G. Reeves
4. What is the address of your next-of-kin? ..... 541 Wall Street Peterboro Ont Canada
4a. What is the relationship of your next-of-kin? ..... Father
5. What is the date of your birth? ..... 4 March 1896
6. What is your Trade or Calling? ..... Student
7. Are you married ? ..... no
8. Are you willing to be vaccinated or re-vaccinated and inoculated? ..... yes
9. Do you now belong to the Active Militia? ..... No
10. Have you ever served in any Military Force? ..... no
If so, state particulars of former service.
11. Do you understand the nature and terms of your engagement? ..... yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? ..... yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, M. G. Reeves, 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.

M. G. Reeves (Signature of Recruit)

Date Nov 17 1915 W. H. Brown Capt (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, M. G. Reeves, do make Oath, that I will be faithful and bear true Allegiance to His Majesty **King George the Fifth**, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

M. G. Reeves (Signature of Recruit)

Date Nov 17 1915 W. H. Brown Capt (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 Kingston this 24th day of November 1915.

J. M. Farrell (Signature of Justice)

M. F. W. 23
200 M—9-15
H. Q. 1772-39-841

Description of W. G. Reeve on Enlistment.

Apparent Age 19 years 7 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height	6 ft. 1/4 ins.
Chest measurement. Girth when fully expanded	37 ins.
Chest measurement. Range of expansion	3 ins.
Complexion	Dark
Eyes	Brown
Hair	Brown

Religious denominations

Church of England	
Presbyterian	
Methodist	X
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.)

None

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 declares that he is not subject to fits of any description.

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

Date 23 Nov 1915. H. A. Boyce

Place Kingston

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.

W. G. Reeve 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. W. Rice Captain (Signature of Officer)

Date Nov 24 1915.

OS 8-1-19.

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name PEEVER. MANLEY. GUEST.

Regt. No. 304559. Rank Sgt.

Corps No 3. A. M. C. Y.D.

Demobilization

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

Attestation Papers 1

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet 1

Compulsory Stoppages.....

Casualty Forms 2

Proceedings on discharge 2

Corps History Sheet.....

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

Parchment Certificate 1 duch

Medical Report for Invalids.....

Medical History Sheet 2

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate 1

mAW129-1
AB122-1
mAW71-1

R122-1
R129

1 Cap Card
1 Pl Card

M. F. W. 62.
50M.-9-16.
H. Q. 1772—29-935.

168

2/1—20
23—21
2—21

Rec'd

Stand

B3

Number 804559 Rank a/Bdr.

Surname PEEVER

Christian Name Stanley Gustaf

Units C.F.A. Theatre of War France

Date of Service 13-7-16

Remarks

Latest Address c/o Queens University

Kingston Ont.

Roll No. B. Page 9231.

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

DEP. JUN 21 1929 REGN. No. 4535472

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

R. 149. Manley, Guest

Name PEEVER, *Rank* A/Bdr. *Reg. No.* 304559

Unit 9th.Brigade,C.F.A.

Next of Kin CANADA.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917.						
16-5.	No.8.Can.Fld.Ambulance.		P.U.O.	A.171.		
19-5.	Discharged to Duty.		do	A.171.		

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

NAME Reever W. G.

REGT'L No. 304559.

H. Q. FILE No. 649.

RANK AND CORPS A/Bdr. 9th Byde C.F.A.

FOLLOWS No.

FOLLOWS

CABLE

NO. DATE

NATURE OF CASUALTY

L. L. 20497—M. & D. 7908

M. F. W. 42—50M.—5-17.
H. Q. 1772-39-833.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
a171	No. 8. Can. Fld. Amb.	15-5-17	P. U. O.
a171	Disc. to Duty	19-5-17	P. U. O.

No. 304559 RANK Gnr. NAME Peever, M. G
304531 Dec Paylist

T. O. S. 24.11.15 UNIT 46th Queens Battery (9th Bgde)
DO 25 of 25-11-15

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Nov 24	1915 Nov 30	✓		
Dec		✓		
1916 Jan 7	1916 Jan 31	✓	Trans to H Q 9th Bde	Jan Paylist
Feb		✓		

No. 304559 RANK Pte NAME Peever. M G

T. O. S. UNIT #3 Special Service Coy

Transfd from #3 Cas. Coy. 1-3-18.
200604 1-3-18.

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918	1918			
Jan 3	Feb 18.	M.		

CARD NO. 3
S.D.S. Dis 4-12-18
auth W.O. 338/14
FOLL.
4-12-18. Demob.

SURNAME. Peever.

CHRISTIAN NAMES Manley, Guest.

REGL. No. 304559 RANK Gnr.

UNIT ~~46th Bty~~ (Queens) H.Q. 9th Fld. art. Bde.

FORMER CORPS nil

NEXT OF KIN.

NAMES IN FULL Peever. R. G.

RELATIONSHIP TO SOLDIER Father

ADDRESS 541 Water St. Peterboro. Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada. PROVINCE Westmeath. Ont.

PLACE OF ATTESTATION Kingston. Ont. DATE Nov. 24th. 1915

Trans from 46 Bty to H.Q. 9th Fld art Bde. auth letter R/C. 13-2-18 recd from 9th D.A. 8-5-16-1TQ.593-3-4

L. L. 94504. M. & D. 6512.

M.F.-W.22. 250M.—2-16. H. Q. 1772-39-339.

MARRIED SINGLE yes 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

Med. Student C 3

M. F. W. 71—500M.—5-13.
1772—39—961.

NAME Reeves Hartley Frederick

REGIMENTAL NO. 304559 RANK Sgt.

ENLISTED AT Kingston Ont PROMOTIONS, &c. AND DATE

DATE Nov 24th 1915

IF SERVED PREVIOUSLY, STATE UNIT, &c.

MARRIED, WIDOWER, OR SINGLE Single

NEXT OF KIN R. G. Reeves RELATIONSHIP Father

ADDRESS OF 541 Water St Peterboro - Ont

ASSIGNMENT OF PAY $ C. TO

ADDRESS

SEPARATION ALLOWANCE, ENTITLED OR NOT

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR

CASUALTIES, &c.

NATURE E.G. ABSENCE, PROMOTION, &c.	PART II. D. O.		REMARKS IF IN HOSPITAL, NOTE NAME, &c.
	NO.	DATE	
T.O.S	275	2/10/18	
Discharged	338	4/12/18	

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

W a w

Name Peever, M.G.
Surname Christian Name

Regimental Number 304559 Rank Pte.

Unit #3. A.M.C.T.D.

Original Unit

District where paid M.D. 3.

Date of Discharge 4-12-18.

P. D. P. Filing Number

Address (in full) 184 Barrie St.,
Kingston, Ont.

Rates:—Regimental pay $ per diem: Field Allowance $ per diem. Separation Allowance $ per month.

L. L. 46038—M. & D. 9245.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

M. F. W. 127.
25M.—8-18.
1772-39-1140.

Remarks: Account opened 6-1-19.

File No.....

WAR SERVICE GRATUITY.

Register No.....

Reg. No.....

Name.....

Address.....

Dec'n No..... W.S.G. File No.....

Award.....days at $.....per day $.....

S. A.....months at $.....per mo. $.....$

Less P. D. P. Credited $.....

$

Less further debit balance $.....

Net due paid as below

TO SOLDIER / TO DEPENDENT

Pg. No	Ck. No	Amount
2		
3		
4		
5		
6		

Pay Soldier $.....

Clerk.....

Dependent.....

Address.....

Pay Dependent $.....

Days..... Rate..... Due.....

Less P.D.P. credited.....

Less further Dr. Bal. or overpayment.....

Net.....

Date	Ck. Order	Ck. No.	Amount		Remarks.	Date	Ck. Order	Ck. No.	Amount.	
1						1				
2						2				
3						3				
4						4				
5						5				
6						6				

495-D.P.-100M-6-19 (10248).

GEN'L AUDITOR
Posting checked by
.....
Date.....

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
60m.—12-15.
1772—39—819.

Sheet No. 2. Mrs R. G. Peever

L. L. Job 89002.—Req. 6213.

Name of Soldier Peever, M. G.

#304559 Gr. 9 Field Art Byde

#15.00

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	M1738	15	
May		M5901	15	
June		F30233	15	
July		C10678	15	
Aug.		H13106	15	
Sept.		Q19924	15	
Oct.		Q24726	15	
Nov.		K26853	15	
Dec.		I34014	15	
Jan.	1917	K48394	15	
Feb.		H42299	15	
March		52377	15	15. W.
April		H4192	15	15-15.
May		M.O.88	15	15 (W)
June		Q17831	15	Ba
July		H24592	15	Ba
Aug.		V31209	15	5/2 Wellington St., London, Ont. (20/7/17 work)
Sept.		V38763	15	Co
Oct.		R44633	15	
Nov.		V51053	15	
Dec.		X58683	15	345 Co.
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.				

L. L. Job 85095—M. & D. 5953.

512 Wellington St., London, Ont.

2nd Contingent

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
20m.—9-15.
H. Q. 1772-39-819.

To Whom Mrs R. G. Peever

Address ~~541 James St~~ ~~Peterboro Ont~~

Rate 15 00 FEB 1 1916

By Whom Assigned Peever M. G.

Regtl. No. 304559

Rank Gr.

Corps Hqrs 9 Field Arty Bde

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		016942	30 —	

CONSOLIDATED 3 ACCOUNT

P—56

Rank Gnr. Name PEEVER Manley Guest Reg'l No. 304559

Unit H.Q.9th Bde.C.F.A. If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Kingston, 17 Nov.1915. Place of Birth Westmeath, Ont, Can

Name and Address, Next-of-Kin Mr R.G.Peever

541 Water Street, Peterboro, Ont, Canada Relationship Father

PAY OFFICE CANADIAN CONTINGENTS SEP 11 1918

Assigned Pay Monthly $ 15. 12. 16 Payable to Mrs R. G. Peever. same address.

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.
Feb.		29	1.00	29 -	29	.10	2 90	10	41 90			4 87	15		19 87	22 03	Bal from Jan.
Mar		31	1.00	31 -	31	.10	3 10		34 10			26 76	15		41 76	14 37	
				60 -			6 -	10	76 -			31 63	30		61 63		

Carried forward to Large Ledger sheet

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						

FORM D.M.S. 1200.
8127—50m—28/2/17.

Surname: Peever | Christian Name or Names: M. G. | Reg. No.: 304559

Rank: A/Bdr | Unit: 9 b. Fd. | Co. | Troop | Batty.

Hospital: 8 b Aus Fld Amb. | Date of Admission: 15.5.17

Transferred | Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis: P.U.O.

(1) Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION | Date

D/S 19.5.17

C/S 8.6.17 H171

REMARKS

EPITOME OF HOSPITAL TREATMENT.

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

ORIGINAL 304559 97

MEDICAL HISTORY SHEET.

Surname Peever Christian Name Stanley Guest

Examined on 23rd day of Nov 1915 at Kingston

Approved by A. A. Boyce

Birthplace City or Town Northreath County Renfrew

Rank M.O.

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

Apparent age 19

Trade or occupation Student

Height 6 Feet 1/4 Inches.

Weight 158 Lbs.

Chest measurement Minimum 34 inches. Maximum expansion 37 inches.

Physical development Good

Small-Pox Marks no

Vaccination Marks Arm Right. Left. no Number no

When Vaccinated last 1911

Date	Result	Vaccinations.
Jan 22/16		A. A. Boyce M.O.
		M.O.
		M.O.

(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection nil.

Date	Result	Anti-Typhoid Inoculations, Etc.
Jan 22/16		A. A. Boyce M.O.
12/2/16		H. Stewart M.O.
3/7/16 (Paratyphoid)		H. G. Thomson M.O.

Enlisted on 24th day of November 1915 at Kingston

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	46th Bty	304559		
Transferred to..	H.Q. 9th Bde 1/2/16			

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.

50M—9-14.
H. Q. 1772-39-439.

Surname Peuren Christian Name Stanley Guy

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.3 Can.Fld.Amb.		15	5	17	19	5	17	P.U.D.		Dis. to duty.	A171-A171 PC.

R—122

VES

Rank ~~Gnr.~~ Name PEEVER Manley Guest Reg'l No. 304559

Unit H.Q.9th Bde.C.F.A. If in perm. Corps, What Unit? Married or Single *Single

Place and Date of Enlistment Kingston, 17 Nov.1915. Place of Birth Westmeath, Ont, Can

Name and Address, Next-of-Kin Mr R.G.Peever

541 Water Street, Peterboro, Ont, Canada. Relationship Father

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No. 4193.
File R.L.
Category Con't.

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. A.F.B. 103 CHECKED (N.R) 29 DEC. 1916
		Arrived in England 14 FEB 1916			S.S. Metagama
7-8-16	9th Bde.	Embarked for France.	Field	13-7-16	P. II O. 165
11-9-16	"	Apptd a/Bdr without pay	"	20-6-16	" 149
8-6-17.	do	Adm. #8 Canadian Field Ambulance.	do	15-5-17.	C.F.A. 171. "P.H.O."
8-6-17.	do	Discharged to Duty	do	19-5-17.	C.F.A. 171 do
16-12-17	Reg. Dep	Rt and A/Bdr 8-8-18 TOS from 9 Bde as minor	Dpt Witley	13-12-17	P II O 182 " 9th Bde 213 20/12/17
28-12-17		On Cond to C.D.D. Buxton	" "	28-12-17	294
13-2-18	CARD	Cease on Cond to C.D.D. Buxton Ceased with to Canada Sold on being Disch to Canada ATH-A.C. 2(W) 3 & 2-2P. 1013 8/12/17-	"	31-1-18	P. 44

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.
	Dis Depot.	For Duty	ND "B" Kingston	9/2/18	NR 442.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 204559 (Rank) Private

Name (in full) Peever (Manley Guest) enlisted in the 46th. Battery, transferred to 9th. Brigade H.Q., went to France, returned to Canada Feb. 1918, to No. 3. Casualty Unit, transferred to No. 5. A.M.C. Training Depot. C.E.F.

CANADIAN EXPEDITIONARY FORCE at Kingston, Ont. on the Seventeenth

day of November 19 15

HE served in ---------- Canada, England and France ----------

and is now discharged from the service by reason of "On Demobolization"

Authority 3 M.D. 26-6-28 of 16/11/18.

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

Age 22 years 9 months	Marks or Scars 1 Vaccination mark left arm.
Height 6 feet 1 inch	
Complexion Dark	
Eyes Brown	
Hair Dark Brown	

W. G. Peever
Signature of Soldier

J. P. Williams
Issuing Officer

Capt.
Rank

O.C. #3 Area C. Depot.
Appointment

Date of Discharge 4th. December 1918

Signed at Kingston, Ontario. this Fourth day of December 19 18

in Military District No. 3

File Reference No. T.D.3-280.

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, particulars called for on back of discharge certificate, will not be completed

H.D. 3
No. 13

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

~~MARRIED~~ Dec. f 16 A-c 11

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

Regimental No. 304559 Rank Pte. Name Peever, M.C.

Corps No. 3 A.M.C. Training Depot who was* discharged

On December 4th. 1918. 191....., to.....

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from Dec. 1st. 1918 191....,
to Dec. 4th. 1918 191...., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Bal. Cr. from prev. month	4	10
Advances by Cheques No.			Regt'l Pay 4 days at $ 1.00	4	
Advances by Cheques No.			Field Allow. 4 days at $ .10		40
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges			Other Allowances* Clothing	35	
Payment on transfer or discharge No. 7886	79	70	Other Credits* Subsistence	3	20
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)	33	
Total	$79	70	Total	$79	70

*Give particulars.

A monthly stoppage of $ Nil. (†) has.....(‡) been paid on account of Assigned
{Pay for the month of.....191....
{and Sep'n Allce. for month of.....191....} (to) Assignee.....

(Address).....

.....

(†) 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

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

REMARKS:—

State (1) date of enlistment November 17th. 1915

(2) if married and if a Separation Allowance Card has been submitted No.

(3) cause of discharge on demobilization authority 3 M.D. 26-6-172

(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 December 4th. 1918.

Place Kingston, Ontario

J. Williams Capt.
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.

300M—2-18.
H. Q. 1772-39-903.

C.A.D.C. 5009-10M.
3494-30-[redacted]7.

[redacted]304559

Sgt Peever M

A.R.D.

DENTAL CERTIFICATE.

The following Certificates will be attached to the Medical History Sheets of all Other Ranks being returned to Canada for disposal.

Date of Examination.	Present Dental Condition.	In case of loss or decay of teeth. Is the loss due to wounds, injury or disease directly attributed to Active Service?	Has he ever declined Dental Treatment.	Recommendation.
3-1-18	Ft 1 filling	no	no	Public Expense

F. H. Gunn
Capt CADC

M. F. W. 129.

50m.—7-17.
1772—39—1142.

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 Private Name Manley Guest Surname Peever

Unit of Corps No. 3 A. M. C. TRAINING DEPOT (If a soldier) Regtl. No. 304559

Born at Westmeath, Ontario. on, (date) March 11, 1896.

Signature (for identification) M G Peever

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

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

Weight	Colour of eyes
160 lbs.	Brown
Height	**Identification Marks**
6 ft. 1/4 in.	Mole back right hand.

2. NUTRITION AND DIATHESIS?

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

3. NERVOUS SYSTEM? Is there a history of previous disability?

Has had neurasthenia; no resulting disability.

4. RESPIRATORY SYSTEM? Is there a history of lung trouble?

Normal

5. HEART?

Abnormal Sounds? No

Abnormal Size? No

Pulse Rate? 135 Intermittence or Irregularity? No Muscular Tone? Good

6. ARTERIES.—(a) Any hardening or nodulation? No

(b) Blood Pressure. Syst. 120 Dias. 90

7. DIGESTIVE SYSTEM? (Condition of teeth and tonsils to be included).

Good

8. GENITO-URINARY SYSTEM?

Urinalysis—S.G.? 1020 Reaction? Alkaline Albumen? nil Sugar? nil

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

Norm al

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 Category A 2

Examined at #3 A.M.C. Hqrs.

Date 25-11-18.

Signed [illegible] M. O.

Signed [illegible] M. O.

M G Peever
Signature note of Soldier.

If any disease or impairment of health or physical condition is discovered or complained of by the soldier examined, 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

S. B. Mellon Capt. A.M.C.

for D/ A.D.M.S. Mil. District No. 3
For A.D.M.S. Mil. District No. 3

DEC 7 - 1918

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

92431.—W6490/1585.—2,000,000—J. J. K. & Co., Ltd.—Forms B. 103/1.

Certified Rt. 2.26.91.
R2S. 24117. KT. 101/601. asam

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps Headquarters, 9th. Brigade, C.F.A.

Regimental No. 304559 Rank Driver Gunner Name Peever, Manley Guest

Enlisted (a) 17.11.15 Terms of Service (a) D.O.W. Service reckons from (a) 17. 11. 15

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 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. February 5th. 1916 "Melegama" Arrived, England. February 14th. 1916			
7.8.16.		Embarked Overseas	Southampton	7.8.16.	R. Newton Capt. Adjt. for O.C. 9th Brigade, C.F.A.
		LANDED IN FRANCE	HAVRE	14/7/16.	
5/9/16	O/C. unit	appt a/Bdr without pay	Field	30/6/16	P+I 0.177 dy 10-9-16
26/5/17	unit	Struck off strength		15/5/17	B-213 W6 b 198 - 2/6/17
26/5/17	-do-	Rejoined unit	Fld	19/5/17	-do- -do-
26/5/17	8 b 73a	P.R.O.	a.o.c. Hos to Duties	15/19/5/17	A36/418 W6 b 199 4/6/17
19/5/17	8 b 73a	P.R.O	a.o.c.	15/5/17	A36/4060 W6 b 199 4/6/17
29/9/17	unit	Granted 10 days	Leave	29/9/17	B 213 P+I 158 13/9/17
29/9/17	—"—	Rejoined from Leave		17-9-17	" " 165 29-9-17

(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				
11-12-17	A&S.	S.O.A. on transfer to Eng with a view to being returned to Canada to complete medical studies		12/12/17	No Letter 121/OS/3850 (DR2) 13-4-17 + A&S. Can A&S 3 Can. 17-1-16 a/21-3-17. KE 21373 Part II 213 a/20-11-17 Gilbow LIEUT. OFFICER i/c RECORDS CANADIAN SECTION G.H.Q. 3RD ECHELON
16-12-17	CARD	To S from 9th Bde	Witley	13/12/17	CC-282-RH-B1-BOS for Colonel i/c Records, Lieut. Cons
16-12-17	CARD	Posted to Depot By Cdg.	Witley	13-12-17	P II 20282
28-12-17	do	Shownon Com. COD Barnston	do	27-12-17	P II 20294 J.B. Bagnall CAPT. For O.C. CAN. ART. REGIMENTAL DEPOT

Army Form B. 103. Temp. Regimental Number 304559

Casualty Form Active Service.

Regiment or Corps .. Canadian R. Artillery

Rank Gr. Surname Pleven Christian Name Manley Guest

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

Enlisted (*a*) Nov. 24/15 Terms of Service (*a*) Duration Service reckons from (*a*) Nov. 17/15

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 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.
		"Olympic" Embarked	4/2/1916		
		Disembarked	14/2/1918		
16.12.17	O/C C.A.R.D.	Struck off Depot Bty C.R.A.	Witley	13.12.17	Pte. A.W.O.L.
29.12.17	do	On com. C.D.D. Buxton	Witley	27.12.17	Pte. A.W.O.L.
			H.H. Bagnall		CAPT. & ADJT. For O.C. CAN. ART. REGIMENTAL DEPOT.
DEC 28 1917		TAKEN ON STRENGTH C.D.D, BUXTON Pt. 11 ORDER No. 307			
		Commanding	B. Vere		Lieut.-Col. Canadian Discharge Depôt.
31 JAN 1918		EMBARKED FOR CANADA FROM LIVERPOOL			
		Commanding	B. Vere		Lieut.-Col. Canadian Discharge Depôt

(*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. 8638 M2733 2000m 9/17 (35611) C. P. & S., Ltd., Form B./103 8/1807. 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				
1.3.18	#3 Can. Coy.	TAKEN ON STRENGTH NO. 3 SPECIAL SERVICE CO.			Auth. G.O.R.O. 75 dated 19.1.18
9-7-18	Transferred to and struck off	No 3 a.m.t. I.D. Barriefield Camp. strength. DO #77/10-7-18.			

Discharged - Authority 3 M.D. 26/8/28 16/11/18

Lieut. & Adjutant
No. 3 Special Service Company, C.E.F.

J. Williams Capt.
O.C. Training Depot, M.D. No. 3
(QUEEN'S)

MARRIED OR SINGLE S.

PLACE OF BIRTH Westmeath Ont. Can.

NAME AND ADDRESS OF NEXT OF KIN Mrs. R. G. Peever, 541 Water Street, Peterboro, Ont. Can.

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

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 304559 RANK Gr. NAME Peever Manley Guest.

IF IN PERMT. CORPS WHAT UNIT — UNIT 9th Bde C.F.A. TRANSFERRED TO CARD DATE 13/11/17 AUTHORITY 282 16/11/17

PERMANENT FORCE ALLOWANCES TRANSFERRED TO NE DATE 15/3/18 AUTHORITY

PLACE OF ATTESTATION Kingston, Ont. TRANSFERRED TO ~~Nil~~ Pay20. DATE 6/9/18 AUTHORITY Nil R.O. 449

DATE OF ATTESTATION 17 Nov 1915. TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 15 DATE EFFECTIVE 1.2.16

PAYABLE TO Mrs. R. G. Peever, 541 Water St. Peterboro. RELATIONSHIP

11 SEP 1918

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) Stopped EFFECTIVE 1-2-18. REASON Discharged

DISCHARGE DATE AND PLACE Canada. 2.1.18. REASON AND AUTHORITY AG. 3a 2/2 P.1063. Disposal.

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

C

DATE 1916	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
Mar			60				6							10	76												31 63	30		61 63	14 37				
Apr	30	1.00	30		30	.10	3								33	134	15.4.16	166	29.4					487	219			15		41 77	5 60				
May	31		31		31		3	10							34 10	206	16.5	242	31.5					486	12	17 ✓		15		32 03	7 07				
June	30		30		30		3								33													15		15	25 67				
July	31		31		31		3	10							34 10	321	23.6	326	11.7					1704	243 ✓			15		3447	25 30				
Aug	31		31		31		3	10							34 10	1	14.7	58	12.8					262	262 ✓			15		22 85	36 55		2 -	345 55	
Sept	30		30		30		3								33	86	27.8	38	31.7					262 ✓	261 ✓			15		1762	5 93				
Oct	31		31		31		3	10							34 10	150	22.4	180	9.10					5 23 ✓	261 ✓			15		2284	63 19				
Nov	30		30		30		3								33													15		15	81 19				
Dec.	31		31		31		3	10							34 10	246		297						785 ✓	872 ✓			15		3157	8372		3		
1917			33	50																														
Jan	31		34	10											34 10	329								573 ✓				15		20 73	97 59				
Feb.	28		30	80											30 80	362								267 ✓				15		1767	110 77			110 77	
Mar.	31		34	10											34 10	505								262 ✓				15		3069	114 18				
			467	50										10	477 50	440		541	23/3					523 ✓	261 ✓										
			467	50										10 00	477 50									6602	5567			31 63	210	3863 32					

304559 Lt. Peever M. G.

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
			467	80										10	477 80								
Apr	30		33												33								
May	31		34	10											34 10								
June	30		33												33	156							
July	31		34	10											34 10								
Aug	31		34	10											34 10	438	8/6	361	24/7				
Sept	30		33	00										10	38 00	349		507					
			668	80										1000	678 80								

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE
Oct		11866							11866
	Gss Pay	34 10		a.p.					15 137 76
				831 9/9/17 10 Bde	24 34				
				831 " "	73				
				610 5/9/17 10 "	268				37 74
		34 10			100 02				15
Nov	Gss Pay	33		a.p.					15
				675 3/10 9 Bde.	446				
				748 23/10 9 Bde.	357				47 71
Dec	Gss Pay	34 10		a.p.					15
	Deferred Pay int 30/11/17	Nil		AK 808 8/11 9 Bde	446				62 35
		67 10			1249				30
1918 Jany	2 days G.P.	2 20							15 49 55
									36 41
				868 24/11 9 Bde.	1249				13 14 0/2
				950 17/12 9 Bde.	446				
				KM GR. 522 21/12 CARD	973				
				521 17/12 CARD	973				13 cal
		2 20			36 41				15 14 60
									1 46
				19535 Kempton 25/1/18	973				
				17319 ✓ 4/1/18	487				1 46
		- -			1460				
July	St. Cm. 1391 to close A/c Sales #2. 31/1/7	1 46							

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

CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE
66 02	55 67		31 63	210		363 32				
				15		15	137 18			
				15		15	151 28			
8 03				15		23 03	161 25			
				15		15	180 35			
2 68	2 68			15		20 36	194 09			
	26 85									
2 67	5 35		82 73	15		108 43	118 66			
79 40	66 38		114 36	200		560 14				

REMARKS

A 3 M. FORM REN'P. Spd. EFFEC. 1/2/18
DISCHARGED TO Canada DATE 3/9/18
PAY BOOK VERIFIED 2. 1. 18.
Cr BAL. 13 14 L.P.C. REN'D.
AUTHY. A.F.B. 3a. 2/2 P 1063.

Checked

This space to be for numbers.

Proceedings on Discharge.

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

DEPT MILITIA & DEFENCE
DEC 31 1918
H.Q. CANADA

No. 304559

Rank Sergeant

Name Peever (Manley Guest)
Note—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) No. 3 A. M. C. TRAINING DEPOT

Date of Discharge 4/12/18

Place of Discharge KINGSTON, ONT.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 22 years 9 months.
Height 6 feet 1/2 inches.
Complexion Dark
Eyes Brown
Hair Dk. Brown
Trade Medical Student
Intended place of residence (To be given as fully as practicable.) Medical Faculty, Queen's University, Kingston, Ont.

Descriptive Marks

Vaccination mark left arm.

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

"On Demobolization" Auth. 3 M.D.26-6-28 of 16-11-18

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 soldier and the Officer Commanding his Squadron, Battery or Company:

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

Medical Student.

M. F. B. 218.
25m.—11-15.
H. Q. 1772-39-113.

(OVER)

5. He is in possession of the following number of G. C. Badges:

Nil.

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations..... Nil.

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) KINGSTON, ONT. ..... J. Wilkinson Capt.

(Date) 4/12/18 ..... *Commanding* O.C. Training Depot, M. D. No. 3 (QUEEN'S)

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.

(Place) KINGSTON, ONT. ..... W. G. Peever ..... *(Signature of Soldier.)*

(Date) 4/12/18 ..... Wm. Garrison Sgt. ..... *(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.

..... W. G. Peever ..... *(Signature of Soldier.)*

10. **Statement of Service.**

Service toward Engagement to.....(the date to which the Record of Service is completed)..3..years..18..days.

Total.....3.....years.....18.....days.

11. **Confirmation of Discharge.**

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

(Place) KINGSTON, ONT.

(Date) 4/12/18. ..... *(Signature)* J. Wilkinson Capt.

O.C. Training Depot, M. D. No. 3 (QUEEN'S)

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

W-G. Reeves

(OVER)

554-31-12-IE

JAN - 1 1919

NOT CHARGED DEC 31 1918

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263.	Attestation Paper, Militia Form B. 235.
Squadron / Battery / Company } Conduct Sheet, " B. 263a.	Proceedings on Discharge " B. 218.
Copies of Convictions, by C. P. in MS.	In the case of recruits who are rejected on final approval, the discharge documents will consist of
Med. Hist. Sheet, Militia Form B. 313	(a) Proceedings on Discharge.
Medical Report for Invalid* " B. 227.	(b) Attestation.
Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.	(c) Medical History Sheet (in the event of such having been prepared.)
*Only if discharged "Medically unfit."	

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.

AUDITOR | PAYMASTER

M. OR S. | PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES | REGT. No. 304559 | RANK Sto. | NAME (IN FULL) Deever, M. G. (BLOCK LETTERS, SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Nil | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

P-85

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Sto- M. G. Deever.		
184 Barrie St.		
Kingston Ont.		

ORIGINAL UNIT C.E.F. #3 Mtc. Ly. Depot. | IF IN P. F. WHAT UNIT?

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION Nov 17th 1915 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY, $ Nil. | DATE EFFECTIVE

PAYABLE TO | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE Kingston. | DATE December 4th 1918 | REASON Demob. | AUTHORITY 3 Mtd. 66-172 | IF ENTITLED TO POST DISCHARGE PAY

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.	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.	TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
Balance from previous account	183 days						420	-																						48	00			Deb. Blue L.P.C.
Jan 6/19.									a 4608						33	00									48	00			81	-	33	-			M.T.W. 2595 Received.
Feb. 10/19									B.4331						70	00													151	-	269	-		
" 19.									$238156			~~H600~~			129	-													280	-	140	-		
March 31/19									$239108						70	-													350	-	70	-		
APR 30 1919									$328475						70	-													420	-				

OK

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

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

Feb 1-16

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15-			

3 84 P.2
3 mar

PARTICULARS OF SEPARATION ALLOWANCE

No. 304585-9

Rank Gnr Promoted Reverted Discharge

Soldier's Name Mrs. Reeves

Battalion Hqs 9 Fld Arty Bge

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs R. G. Reeves

Address 512 Wellington St.

Change of Address London Ont.

1

2

3

4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Dec 31	—		345	345	
Jan 1918	W 69183		15	15	
Feb	73486		15	15	
			365	375	

A/c Closed 28/2/18.
Ret'd per [illegible]
Date 14/2/18 F. X. 23/2/18
Clerk R.H. 23/2/1918

M.R.O. 2b. Rendered
FEB 23 1918

ARMY PAY HAS BEEN MADE FOR THIS ACCOUNT

M. F. W. 128
400M.—6-17—177-39-1141
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—1772-38-1141
L. L. 22320—M. & D. 7933.