257TH. BATT. C.E.F.

ORIGINAL

ATTESTATION PAPER.

No. 1102361

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Richardson	
1a. What are your Christian names?	David James	
1b. What is your present address?	Midland, Ont. Can.	Canada
2. In what Town, Township or Parish, and in what Country were you born?	Midland, Ont. Can.	
3. What is the name of your next-of kin?	George R. Richardson	
4. What is the address of your next-of-kin?	30 Robertson St. Toronto	Canada
4a. What is the relationship of your next-of-kin?	Father	
5. What is the date of your birth?	Oct. 23rd 1892	
6. What is your Trade or Calling?	Fireman	
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? 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 His Majesty's Forces and been rejected?	No	
16. If so, what was the reason?		

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, David James Richardson, 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.

David James Richardson (Signature of Recruit)

Date Feb 6th 1917. pte. F. P. Jackes (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, David James Richardson, 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.

David James Richardson (Signature of Recruit)

Date Feb. 6th 1917. pte. F. P. Jackes (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 Midland this 6th day of February 1917.

H. Jackes J.P. (Signature of Justice)

M. F. W. 23
750M—8-16
H. Q. 1772-89-941

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

1102361

Description of Richardson, David James on Enlistment.

Apparent Age 24 years 7 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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).

Height	6 ft. 7 ins.
Chest measurement — Girth when fully expanded	40 ins.
Chest measurement — Range of expansion	3 ins.
Complexion	light
Eyes	brown
Hair	light
Religious denominations — Church of England	
Presbyterian	Pres.
Methodist	
Baptist or Congregationalist	
Roman Catholic	
Jewish	
Other denominations (Denomination to be stated.)	

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 Feb 8th 1917 T. J. Johnston M.B.

Place Midland Ont. 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:—

DECLARED FIT BY MEDICAL BOARD
TORONTO RECRUITING DEPOT
R. Morrison Lt M.O.
for PRESIDENT

CERTIFICATE OF OFFICER COMMANDING UNIT.

David James Richardson 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.

A. D. Watts (Signature of Officer)
Major Lt-Col.

FEB 15 1917

Date 191 .

REGIMENTAL DOCUMENTS

NAME RICHARDSON, DAVID JAMES, Spr REGT. NO. 1,102,361 UNIT 357th Bn 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)	2.6.19				DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					D Ems
	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)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	D Certificate					
3	Mis					
1	Enclosed					
1	R.122					
3	Mis					

RECEIVED 10 DEC 1919 RECORDS

10550

481962

41 - 29
19 - 29
11-29

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

Number....110236.....Rank...Spr..

Surname....RICHARDSON....

Christian Name...David James....

Units...7th Coy Bty Theatre of War...France

Date of Service.....29-3-17.

Remarks.....

Latest address...411 Montrose Ave

.....Toronto Ont.

Roll No. B Pay 10399

Next of kin

Address on leave

Address on discharge

Transportation issued Yes / No — Date

Character on discharge

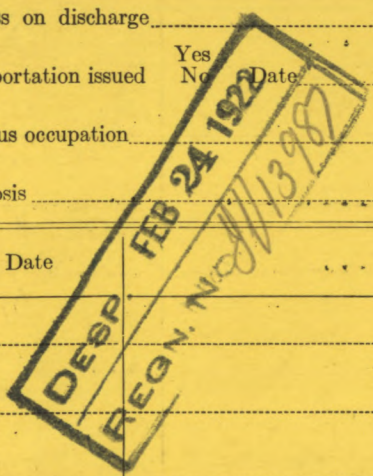
Previous occupation

Date and place of enlistment

Diagnosis

Date of Medical Boards

Date | Remarks



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

No. 1102367 RANK Pte NAME Richardson L. James

T. O. S. 6-2-17 UNIT 257th Battalion Rly Construction
(A.O. 30.14-2-17)

M. D. 3.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917	1917			
Feb 6	Feb 28	✓		

Form R. 149.

Name RICHARDSON David James Rank Spr. Reg. No. 1102361

Unit 7th. C.R.I.

Next of Kin Geo. R. Richardson, 30 Robertson St. Toronto, Ont. Can.

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
3-7	7 Can. G. Hosp. Etaples		P.W.O.	A263		2424-5
12-8	30 Base Depot		-do-	A2944		3236-8
6-12	3 Can. C.E. Etn.	Cutis	Medical	A394		140128
7-12	59 C.C. [redacted]	-do-		A396		140286
11-12	9. G. Hosp. Rouen	-do-		A402		163372
13-12	Discharged	Do.		A404.		6381

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

NAME Richardson D. J.

RANK AND CORPS Pte Can. Rly. Troops.

REGT'L No. 1102361

H. Q. FILE No. 649.

CABLE	
No.	Date

NATURE OF CASUALTY

FOLLOWS NO.

FOLLOWS

L. L. 26438. M. & D. 8207.

M. F. W. 42—50M.—8-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS C.R.T.
a 263 [2]	7 Can. Gen. Etaples	3-7-18	P.U.O.
a 294	" " " Disch.	12-8-18	P.U.O.
a 394	3 Can. Cas. Cl. Station	6-12-18	Otitis Media.
a 396	59 Cas. Cl. Station	7-12-18	Otitis Media.
a 402	9 Gen. Rouen	11-12-18	" "
a 404	Disch.	13-12-18	" "

D.M.S. 1300-50M-21-11-17.

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
RICHARDSON.	D.J.	1102361.

RANK	UNIT	CO.	TROOP / BATTY
Spr.	C.R.T. 7.		

HOSPITAL	DATE OF ADMISSION
7. C.G.H. Etaples.	3-7-18.
1. 3 C. C. C. S..	Hosp. 6-12-18.
2. 59. C. C. S.	Hosp. 7. 12. 18.
3. 9. G. Rouen.	11. 12. 18. Hosp.
4.	Hosp.

DIAGNOSIS

1. P.U.O. ? Otitis Media R.
2.
3.

DISPOSITION

C.L. 12-7-18. A263/2.
17. 8. 18. a 294.
11-12-18 a/994-1.
18 12 18 a 396 @
20. 12. 18 a 402-3.
23. 12 18 a 404.

Hélio. 12. 8. 18.
" 13. 12. 18. DATE

REMARKS

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

EPITOME OF HOSPITAL TREATMENT

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

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 1102361 (Rank) Spr

Name (in full) David James Richardson enlisted in the 257 bn

CANADIAN EXPEDITIONARY FORCE at Midland on the 6

day of Feb 1917

HE served in France & Belgium M.E.F.

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	26	Marks or Scars	
Height	6-2		
Complexion	light-		nil
Eyes	brown		
Hair	light		

D. J. Richardson
Signature of Soldier

F. C. Thurn
Issuing Officer

Date of Discharge: NO. 2 DISTRICT DEPOT MAY 11 1919 TORONTO

For Capt
O.C. No. 2 District Depot.
Rank

Date MAY 11 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

19 , and

HE served in

and is now discharged from the service by reason of

Demobilization

Period Expired

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

Marks or Scars

Age

Height

Complexion

Eyes

Hair

Signature of Soldier

Date of Discharge

MAY 1 1 1919

DISTRICT DEPOT

TORONTO

Taxable Office

Post

Rank

Date MAY 11 1919 19

NB — 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.

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. 110236 Rank S.P.R. Surname RICHARDSON.
(Given name in full) DAVID JAMES.

Unit or Corps C.F.R.T.D. Birthplace MIDLAND ONT CAN

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

1. GENERAL DESCRIPTION:

Physique Good Weight 175 lbs. Height 6 ft. ..... in. Colour of Eyes Blue.

Nutrition Nor.

Pulse 76

Condition of arteries Nor

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 Nor.

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.

Otitis Media. 6/12/18. #7 Can Gen. in Hosp 1 month. Admits his ears are as good as day of enlistment and therefore No disability.

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

[OVER]

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at .....(Overseas)

Date 18/3/19 Signed W. Stitt 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 S.T. Richardson

(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 a Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

C.A.D.C. 5009A

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

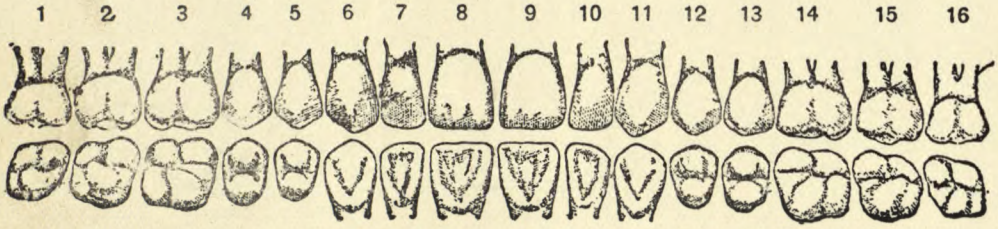
DENTAL CERTIFICATE FOR DEMOBILIZATION

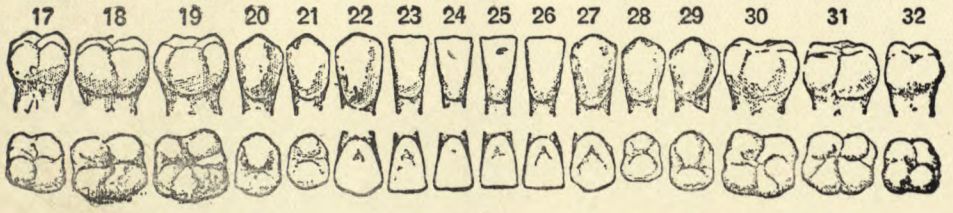
Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) RICHARDSON D.J.

REGIMENT 7th Bn. C.R.T. RANK No. 1102361

Date of Examination in England 25.3.19 | 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 27. 28. 29. 30
2. EXTRACTIONS 14
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 No.
- (*c*) In France

KNOTTY ASH CAMP, LIVERPOOL.

Signature of Dental Officer Capt

257th. BATTALION C.E.F. ORIGINAL ORIGINAL

MEDICAL HISTORY SHEET 1102361

Surname Richardson Christian Name David James

Examined { on 8th day of Feb 191 7
at 1 p.m.

Birthplace { City or Town Midland
County Simcoe Canada

Apparent age 24 yrs

Trade or occupation Fireman

Height 6 feet 2 Inches

Weight 190 lbs.

Chest measurement { Minimum 37 inches
Maximum expansion 40 inches

Physical development Good.

Small-pox Marks Nil

Vaccination Marks { Arm Right Left
Number None None

When Vaccinated last 15 yrs ago

(a) Marks indicating congential peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection Slight varicose veins on st. leg below knee

Approved by J J Johnston
Rank M.O.

DECLARED FIT BY MEDICAL BOARD
TORONTO RECRUITING DEPOT
R Morrison M.O.
for PRESIDENT

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	
21/1/7		H K O'Connor	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
12/1/7		H K O'Connor	M.O.
21/1/7			M.O.
			M.O.

Enlisted on 6th day of February 191 7 at Midland

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	257 Bty. Const.	1102361		Feb 6th 1917
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
Midland Bks	18/3/19	A.	Discharged

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

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

Surname Richardson Christian Name Daniel James

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				

To be made out in duplicate.

H.Q. 54-21-23-53

DUPLICATE

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

257th BATTN

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

---

(1) Name of Overseas Unit which Soldier joins 251st Batt. C E F

(2) Regimental Number 1102361

(3) Full Name of Soldier Richardson, David James

(4) Place of Birt Midland, Ont Canada

(5) Are you married, or not ? no

(6) If married, state,
(a) Full name of your wife —

(b) Present Postal Address —

(7) Are you a widower ? —

(8) Have you any children ? —

If so, give number of boys and girls —

Also their names and ages —

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes

If so, state name and address Geo. R. Richardson 30 Robinson St Toronto Ont Canada

(10) Is your Mother alive? no

If so, state name and address —

(11) If your Mother is a widow —

Are you her sole support, or not? —

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

—

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

—

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

no

(15) Are you insured? no

If so, in what Company? —

Have you made arrangements for payment of your Insurance premium —

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

[signature] Lt. Col.
O. C. 257th Batt. C. E. F.
Officer Commanding.

Date Feb. 15th 1914

A.F. B.178

Regional No.....

MEDICAL HISTORY of—

Regimental No. 1102361

Region Prov.

Surname Richardson

Christian Names David James

TABLE I.—General Table.

Birthplace { Parish Midland
County Ont. Canada

Examined { on ..... day of Feb. 8th 1917,
at Midland Ont.

Declared Age 24 years 4 months days.

Trade or Occupation Fireman

Height 6 feet 2 inches. Weight ..... lbs.

Colour of Hair Light Complexion Light

„ Eyes Brown

Chest Measurement { Girth when fully expanded 40 inches.
Range of expansion 3 inches.

Physical Development .....

Vaccination Marks { Arm, RIGHT | LEFT
Number ..... | .....

When Vaccinated .....

Vision { R.E.—V = ... With Glasses { R. .....
L.E.—V = ... L. .....

Identification Marks, such as Tattoo, Moles, Scars, etc :—

.....

.....

Defects or Ailments :—

.....

.....

Examined and found—

Fit for Grade { I. / II. / III. / IV.

(Strike out those which do not apply.)

Signature .....

Chairman of Medical Board.

Re-examined for posting at .....

On ..... day of ..... 191....

Enlisted { at .....
on ..... day of ..... 191....

	Corps	Regtl. No.
Joined on enlistment		
Transferred to		

TABLE III.—Boards, Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service; Extension, Re-engagement, or Prolongation of Service, Issue of Surgical Appliances, Particulars of Dental Treatment, etc.

Date	Brief details and Signature

Special Remarks: state if a discharged Soldier

.....

.....

.....

.....

TABLE IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

Became non-effective by .....

on ..... day of ..... 191....

(*Signature*) .....

(*Rank*) .....

(29056) W3751/P1398. 800m. 7/18. M.R.Co.,Ltd. E 3540.

TABLE II.—Only for admissions to Hospital or to the Sick List in Case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				

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

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

1102361

Unit, Regiment or Corps. 257th. BATT. C. E. F.

Regimental No. ~~402511~~ Rank Private Name Fickarden David James.

Enlisted (a) 6-2-17 Terms of Service (a) DURATION OF WAR AND SIX MONTHS. C. E. F. Service reckons from (a) 6-2-17

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) Fireman

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	FEB 16 1917	
		Disembarked England		FEB 27 1917	
29-5-17.	7th.C.R.T.	257 Bn now the 7th C.R.T. Arrived in France.	Rvrfleet Field.	MAR - 3 1917 29-3-17.	H.M.T. Mauretania Emb. 1st Class P. 2nd Class Disembd. 1st Class P. 3rd Class 53 Lt. Col. O.C. 257 Bn. C.E.F. 94.
16/3/18	O.C. Unit	Granted 14 days Leave U.K.		15/3/18	B213 Pte 26/3/18
90/4/18	O.C. Unit	Rejoined from Leave Field		14/4/18	B213
3/7/18	Com Gen	P.U.O. Adm.	Com Gen	3/7/18	W3034 to 88.
11/8/18	Com Gen	Remaining	Com Gen	11/8/18	H.H. 17/90.

CERTIFIED CORRECT. 6 JUN 1917 OFFICER I/C RECORDS LONDON.

CERTIFIED 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) *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				
12/8/18	C.G.R.D.	T.O.S. "A"	C.G.R.D.	12/8/18	R of R 1144
20/8/18	C.G.R.D.	Left for Unit	Field	20/8/18	R of R D 1352
12/8/18	1 Can Gen.	P.U.O. to Base Depot		12/8/18	W 3034-W 9851
24/8/18	O.C. Unit	Rejoined Unit	Field	20/8/18	B 213
6/12/18	3rd C.C.S.	Otitis to	3 Can. C.C.S.	5/12/18	A 36/3812
7/12/18	59 C.C.S.	Otitis Ext (R) admitted	to 59 C.C.S.	7/12/18	A 36/3983
7/12/18	3 Can. C.C.S.	Otitis admitted to Convert 7-12-18	3 Can. C.C.S.	4/12/18	A 36/3916/9574
10-12-18	59 C.C.S.	Otitis Ext (L) adm. to	59 C.C.S. A.T.36	7-12-18 10-12-18	A 36/4108
28.12.18	C.G.R.D.	Sfd to England & posted to C.R.I. Depot,	Witley	28.12.18	R. R. 8
31.12.18	C.R.Dept.	Taken on Strength.	Witley	22.12.18	361

Chas B Chapnell
Lieut. for Lt.-Col., A. A. G.
Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

30 APRIL 18 CRTD S.O.S. to Kinmel
Pte. J. D. Wild (A.) 2 KNOTTY ASH

SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103—I.
Part I.

(1) *Substantive rank *Acting rank *[To be entered in pencil to facilitate alteration.]	(2) Regiment or Corps	(3) Regtl. No.
(4) Surname Richardson. (5) Christian Names David James (6) Army Form, number of, Attestation Form or Record of Service paper (7) Whether of British or of Alien origin [*vide* A.C.I. 578 of 1918] (8) Date of birth as stated on enlistment (9) (*a*)	254 Bn.	1102361

(10) Enlistment (*b*) (11) Engagement (*c*)

(12) Service reckons from (*date*) 6 Feb 1917 (13) Special conditions (if any) of enlistment (*d*)

(14) Any subsequent variations (if any) of conditions of service

Initials and Rank of an Officer.

(Authority) (*date*)

(15) Category	Date	Medical Authority	Initials and Rank of an Officer

(16) (Record of Occupation in Civil life (*vide* Army Order 93 of 1917)

Industrial Group No.
Trade or Calling
Married or Single
Particulars of Trade Test

Occupation Cards despatched on (*date*)
Second Occupation Card despatched on (*date*)

(17) Next of Kin
(18) Demobilizer (*f*) (Place) (Signature of Posting Officer
(19) Pivotal-man (*f*) (Date)
(20) Qualifications (*g*) *or* (21) Corps trade and rate

(22) Extended { (23) Re-engaged {

(24) Miscellaneous entries:—

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [*vide* A.C.I, 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoeing-smith, &c.

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W1889—PP1150 1M 5/18 G.W.P.Co (3490)

(A) Report: Date.	(A) Report: From whom received	(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
			Arrived in England.		27-2-17	
13.3.17	254 Bn	Now	Known as 7 Bn C.R.T.			D.O. 56.
27.5.17	7 C.R.T.		Proceeded O'Seas	Purfleet	27.3.17	D.O. 70.
29.5.17	do-		Landed in France	Field	29.3.17	D.O. 94.
			Adm 7 C.G.H. Hosp. Etaples	"	3.7.18	C.h.A. 263 P.M.O.
			To Base Depot	"	12.8.18	C.h.A. 294 do
			Adm 3 Can C.C. Stn.	"	6.12.18	C.h.A. 394 Otitis media
			To. 19 C.C. Stn.	"	7.12.18	" A. 396 " "
			To. 9 Gen Hosp. Rouen.	"	11.12.18	" A. 402 " "
			Discharged	"	13.12.18	" A. 404 " "
31.12.18	C.R.T.D.		Posted from 7 C.R.T. & On Com'd to 4 Res Bn Witley	Witley	22-12-18	D.O. 361.
17.1.19	7 C.R.T.		L of S to C.R.T.D.	Field	22-12-18	D.O. Nos.
6.2.19	C.R.T.D.		Ceases on Com'd 4 Res Bn	Knotty Ash	5.2.19	D.O. 32.

for Colonel i/c Records, Lieut., D.D.R.C.

Nothing to be written in this margin.

SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103—I.
Part I.

Army Form B. 103 (ff.) to be gummed on here if required.

Nothing to be written in this margin.

W1889—PP1150 1M 5/18 G.W.P.Co (3490)

(1)*Substantative rank *Acting rank *[To be entered in pencil to facilitate alteration.]	(2) Regiment or Corps	(3) Regtl. No.
(4) Surname		
(5) Christian Names		
(6) Army Form, number of, Attestation Form or Record of Service paper		
(7) Whether of British or of Alien origin [*vide* A.C.I. 578 of 1918]		
(8) Date of birth as stated on enlistment		
(9) (*a*)		

(10) Enlistment (*b*)

(11) Engagement (*c*)

(12) Service reckons from (*date*)

(13) Special conditions (if any) of enlistment (*d*)

(14) Any subsequent variations (if any) of conditions of service

Initials and Rank of an Officer.

(Authority) (*date*)

(15) Category	Date	Medical Authority	Initials and Rank of an Officer

(16) (Record of Occupation in Civil life (*vide* Army Order 93 of 1917)

Industrial Group No.

Trade or Calling

Married or Single

Particulars of Trade Test

Occupation Cards despatched on (*date*)

Second Occupation Card despatched on (*date*)

(17) Next of Kin

(18) Demobilizer (*f*)

(19) Pivotal-man (*f*)

(20) Qualifications (*g*)

(Place)

(Date)

or (21) Corps trade and rate

(Signature of Posting Officer

(22) Extended

(23) Re-engaged

(24) Miscellaneous entries:—

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [*vide* A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent, &c. [e] It to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoeing-smith, &c.

(A) Report		(B)	(C)	(D)	(E)	(F)
Date	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting, as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer
			Attached C.C.C. Kinmel Park for return to Canada. Part II Orders No. _____. Ceases to be attached C,C,C, Kinmel Park on embarking for Canada, Part II Order No. 109-8.5.19			

Commanding 2 Wing,
Kinmel Park Camp.

MAY 3 1919 O.S. T. O. S. No. 2 DISTRICT DEPOT, TORONTO. 1919 PART II D. O. 136

MAY 11 1919 S. O. S. (DISCHARGED FROM H. M. S.) No. 2 DIS. DEPOT, PART II D. O. 136

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

Nothing to be written in this margin.

Form R 122.
2353—100M—9-1-16

J.P. Rank — Name RICHARDSON, David James. — Reg'l No. 1102361.

Unit 257th Bn. — If in perm. Corps, What Unit? — Married or Single Single.

Place and Date of Enlistment Midland. 6th Feb.1917. — Place of Birth Midland. Ont. Canada.

Name and Address, Next-of-Kin George R.Richardson.

30 Robertson St.Toronto.Canada. — Relationship Father.

Assigned Pay Monthly $ — Payable to — Relationship

Separation Allowance $ — Payable to — Relationship

Discharge, Date and Place — Reason — Character

H. W. & V., Ld.—9546-16.

N.F. B.C. 15564
File No.
Can C.E.

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.
		Arrived in England	SS Missanabie	27/2/17	
13:3:17	257th Bn. NOW KNOWN AS	7th. Bn. C.R.T. Pt. II. D.O. 56			
27.3.17	7th CRT	Proc.d o/s.	Purfleet	27.3.17	Pt II 70.
29.5.17	7th CRT	Landed in France	Field	29.3.17	Pt II 94
31.12.18	Depot CRs	Posted from 7th CR's a on Comd. 4th Res Bn Witley	s/pr Witley	22-12-18	7th CRs D/105 d/17-1-19 a 36
21-1-19	Gen Dep	T.O.S. from 9 Q.F. Co	R.C. Witley	19-1-19	D 17 Cancelled by Gen Dep. 5121 4/5.6.19
6 2. 19.	CRT D.	Ceases to be on Command 4 Res Bat.	Knottyash	5.2.19	D 32.
10.4.19	do	SOS to MDC. Weg & Hyd	" " "	9.4.19	— 95.
		53-I-106		3-5-19	

A.F.B. 103 CHECKED 18 APR 1917

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.	
11.4.19	MO2.	TOS Pending rel to Can	Spr Rhyl	9.1.19	~~Do~~ 86	
8.5.19	"	S.O.S. to Canada	" "	3.5.19	" 109	

L-L. Job 5470—M. & D. 6888

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H. Q. 1772-39-819

To Whom Geo R Richardson

R.R#2 Address ~~30 Roberson St~~

Allandale, Ont. ~~Toronto. Ont~~

By Whom Assigned Richardson David

Regtl. No. 1102361

Rank Pte

Corps 257th Bn H

Rate 1.0.

MAR 1917

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 5 ACCOUNT

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2. Geo R Richardson
(Assignee)

L. L. Job 5470—Req. 6888.

Name of Soldier Richardson David Jas
1102361, Pte. 237th Batt

Month.	Year.	Cheque No.	Amt.	Remarks.
			10.	MAR 1917
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		A7201	10	20 E.
May		D11145 ~~10~~	20	D/11145 Can 65.
June		C 18147	10	10 Bo RR#2 Allandale, Ont
July		D 25153	10	Ca
Aug.		S 30414	10	
Sept.	W	40882	10	D
Oct.	T	45286	10	
Nov.		A 34742	10	
Dec.	M	61599	40	
Jan.	1918			100 D
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: Midland. Ont. Can.

NAME AND ADDRESS OF NEXT OF KIN: Mr George R. Richardson
30 Robertson St Toronto. 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. 1102361 RANK Pte NAME RICHARDSON David James

IF IN PERMT. CORPS } WHAT UNIT } UNIT 25th Batt.

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION Midland

DATE OF ATTESTATION 6-2-17

TRANSFERRED TO / DATE / AUTHORITY

TRANSFERRED TO / DATE / AUTHORITY

TRANSFERRED TO / DATE / AUTHORITY

TRANSFERRED TO / DATE / AUTHORITY

ASSIGNED PAY MONTHLY ~~$10~~ 30 ~~00~~ xxx 100 DATE EFFECTIVE ~~1-3-17~~ 1-4-18 C.

PAYABLE TO Mr George R. Richardson 30 Robertson St. Toronto. Can. RELATIONSHIP Father

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)

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
1917			14	65											14 65											Balance from Canada			14 65					
Mar. 31	31	1 00/70	34	10											34 10																			
Apr.	30	1 00/70	33												33																			
May	31	-	34	10											34 10																			
June	30	/	33	00											33 00																			
July	31		34	10											34 10																			
Aug	31	"	34	10											34 10																			
Sept	30	"	33	00											33 00																			
			250	05											250 05										1595	17 27	487		70		1080	9			

1 2 3 4

64 22-4
10 4-4 108 10-5
157 21/5
197 5-6-17
245 19-6-17
290 1-7-17

251 14/3 466 24/3 R.T.D

2 62 2 62 2 67
2 68
2 68
2 67

1460 487

1 2 3 4

1917 Mar. 31 Apr. 30 May 31 June 30 July 31 Aug 31 Sept 30

11023361 Pte. Richardson David James.

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	DEFER-RED. ALLCE. PAY ENG.
	Bal 30/9/17	~~44 96~~							141 96	25 Oct
Oct	P.P.	34 10							10	
				AR 494 1-9-17 7CR1	267					
				" 343 15/9/17 "	268					
				" 438 [illegible]/17 "	268					
				" 397 18/9/17 "	267					
				" 558 15-9-17 "	268				15268	
Nov.	P.P.	34 10			1338				10	
		33 00		" 623 16.10.17 "	357					
Dec.	"	34 10		" 674 2-10-17 "	268					
				" 736 14.11.17 "	357					
				" 678 2-11-17 "	357					
				Nov. P.P.					10	
				Dec. P.P.					10	86 39 50
		67 10		AFW 3069 18 Aug 1917 7CR1	1339				20	
Jan				AR. 791 1-12-17 7 CR. 2.	892					
				AR 848 15-12-17 "	357				19768	
	P.P.	34 10							10	55
		34 10			1281				10	
Feb	P.P.	30 80							10	
				AR 950 13-1-18 7CR1.	357					
				" 905 2-1-18 "	357					
				" 1007 3-2-18 7CR1.	357					
		30 80			1071				10	30777 60
Mar	P.P.	34 10		" 1137 18-2-18 "	357					
				Marchal P					10	
				AR 1168 1-3-18 7CR1.	357					
				" 4039. 13.3.18 "	9733					
				" 1508. 13.3.18 "	357					
				" 11678. 29.3.18 "	1460					
				S.P. 11418 28-3-18 London	3407				7516	65 00
		34 10			15671	15671			10	

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR 3	DR 4	BALANCE	DEFER-RED. ALLCE. PAY ENG.

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1-4-18	EFFECTIVE DATE:-
AMOUNT:- 20	AMOUNT:-
NAME, ADDRESS, RELATIONSHIP & AUTHORITY	WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.
Mr. George R Richardson (Father) 30 Robinson St Toronto Ont Can L.P.C. rendered 24.2.19 A.P. cancelled 1.3.19	

NAME:- RICHARDSON David James

NUMBER:- 1102361

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Sapper

UNIT AND TRANSFERS

ORIGINAL UNIT:- 257 Bn

DATE ACCOUNT FIRST OPENED:- 1-3-17

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			7 C.T.

DAILY RATES OF PAY AND ALLOWANCES

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

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
17/1	41149	Witley 81.	~~2 43~~ ✓			Lud Base	95 57
27/1	176148	✓ 181.	~~2 43~~ ✓			LOC ✓	80 98
21/2.	6058	CRTD L2	~~9 73~~ ✓				
			14 59				

PARTICULARS OF RENDERING NON-EFFECTIVE:- Trans to Can 1.3.19. Z.R. 3570. 21.2.19 Ld to L.d Mn.D.2.

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Feb 31	Bal forward								75 16	65	
Apl	PP	33		aR682 - 9/4/18 CRT (1)	3 57						
				" 106 15/4/18 CRT (9)	3 57						
				Cap				20	81 02	65	
		33			7 14			20			
May	PP	34 10		Cap				20			
				aR222 1/5 " (1)	2 68						
				" 294 16/5 " (7)	2 68				89 76	65	
		34 10			5 36			20			
June	PP	33		aR384 2/6 " (1)	2 68						
				" 496 16/6 " 8	3 57						
				Cap				20			
		33			6 25			20	96 51	65	
July	PP	34 10		611 2/7 " 1	3 57			20			
		34 10			3 57			20	107 04	65	
Aug	PP	34 10		CAP	— —			20			
				8062 18/7/18 SBR 9	8 92				116 22	65	
		34 10			8 92			20			
Sep	PP	33		Cap				20			
				AR. 991. 2. 9. 18 7 CRT (1)	3 57						
				1096 16/9/18 - 5	3 57				118 08	65	Accs agreed 2/6
		33			7 14			20			
Oct.	PP.	34 10		Cap.				20	132 18		
				AR 1219, 2/10/18, 7 6 RT. 6	3 73				128 45		
				1313 10/10/18 ✓ 19	3 73				124 72	65	
		34 10			7 46			20			

NUMBER 1102361 RANK NAME RICHARDSON David James

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									124 7/2	65	
Nov	PD	33		CAP				20	137 7/2		
				1423 21/11/18 4CRT 1H	3 7/3				133 99		
				1520 16/11/18 ✓ 15	3 7/3				130 26	65	
				165H 2/12 ✓ 37	13 8/6				117 20		
Dec	✓	3H/0							151 30		
				Dec CAP				20	131 30		
Jany	✓	3H/0		CAD				20	145 40		
				1926 20/12/18 9BD 1 73	H 66				140 7H		
				£1 10 0 12 1 19							
		101 20			25 18			60			
				AR386H 6/1/19 HRo 1	H 87				135 87		
Feb	✓	30 80		CAP				20	146 67		
				H378 12/1/19 London 27	7 30						
				628 9.1.19 ✓ 23	48 67				90 70	65	
Def Pay Interest		H 87							95 57		
				AR2DN HHQ 17.1.19 HRo 59	2 43				93 14		
				6058 20/2/19 CRTD 77	9 73				83 41		
				76H8 27.1.19 CRD 86	2 43				80 98		
				7064 7.3.19 CRTD END 95	19 47				61 51		
		35 67			9H 90			20			
				697 1/4/19 CR2D END 10	14 60				46 91		
				2885 KP (23) end 16/4	9 73				37 18		
				7576 ✓ (82) end 1/5	9 73				27 45		
					34 06						

£0 3 5 19 £1 5 5

9557
1459
8098

WAR SERVICE BADGE CLASS A 28313 M.D.2

SERVICE GROUP 2

OCCUPATIONAL GROUP 1

Toronto
Father
Farmer

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

B/M

1. No. 1102361 ——— Pres.

2 Rank. Spr.

3. Name. RICHARDSON David James.

4. Unit. C R T 25th Batt'n.

5 Date of Discharge MAY 11 1919 Place TORONTO, ONT.

6 Reason for Discharge C.R.S.

DEMOBILIZATION

7. Authority. No. 2, D.D., Part II, D.O. No. 136

8. Proposed Residence after Discharge

~~411~~ 411 Monrose Ave.
Toronto

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.?

D. J. Richardson
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place No. 2 DISTRICT DEPOT H.M.T. Mauretania
Date MAY 11 1919 Sailing No. 53
TORONTO Embarkation on 3/5/19
Disembarked on 9/5/19

Signature O.C. No. 2 District Depot
(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

Group.....

Checked by No.....

.....

Date.....22 APR 1919.....

PART I.

A.F.B. 179 Canada (Revised 1918). 100m. 16/11/18 D.495

Reserved for M.H.C.

Regt. No. 1102361 Rank. Spr. Surname. RICHARDSON Christian Name. DAVID JAMES.

Unit or Corps—(a) Overseas from United Kingdom Can. Railway Troops (b) In United Kingdom C.R.T. in Pontfract.

Born at—Town. Midland County or Province. Ont. Country. Canada

Date of Birth—Day. 23 Month. October Year 1892 Age. 26 yrs. 11 months.

Joined at. Midland Ont. Date. 6-2-17

Former trade or occupation. Farmer

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

(1) Oblique scar running 1" medially from Base of Right Great toe nail

Height—feet. 5 inches. 11 3/4 Colour of eyes.

Signature of Soldier (*for identification purposes*) David James Richardson

Medical Report

☞ *Read carefully the instructions on last page of this form.*

1. DISABILITY.

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (*a*): Otitis media

Disabilities Group (*b*): Nil

Disabilities Group (*c*): Nil

2. CAUSE OF DISABILITY

		Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	active service	France	1918
(*ii.*) As to Group (*b*) above.	—	—	—
(*iii.*) As to Group (*c*) above.	—	—	—

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

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

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

(*iii.*) As to Group (*c*) above? — If yes, has Active Service aggravated it? —

4. Is the disability due to disease contracted or injuries received while on Active Service?

(*i.*) As to Group (*a*) above? yes

(*ii.*) As to Group (*b*) above? —

(*iii.*) As to Group (*c*) above? —

PART I. (continued).

5. MEDICAL HISTORY. The Man States: I frequently had sore throats in Civil life. I had earache 8 years ago. I never had a discharging ear in Civil life. I came to France with the C. R. V's on March 28. 1914. I carried on until July 1915 when I was sent to Hospital with influenza. While there my right ear got sore and they operated on me & Perforated the drum. I was in Hospital till August 15. 1915. when my ear has discharged at intervals ever since. I have no Pain in it It is slightly deaf in damp weather. It has not discharged for 10 days.
N.H.S. not available

6. PRESENT CONDITION. General Condition Good
Weight — 173 lbs
urinalysis — negative to Sugar & albumen
Respiratory Circulatory, Nervous Digestive
Genito Urinary & Muscular Systems — negative
Eyes — negative
Limbs — negative.
Ears — Right — Voice 14 ft — Watch not at all
Left — Voice 14 ft — Watch not at all
Chronic Catarrhal Otitis media both Ears — Condition not present before enlistment & Caused by service. Likely to improve in Canada — Report by Capt. Hodges

7. OPERATION. (i.) Was one performed? yes (ii.) If so, state what. Paracentesis of R.D. Membrani Tympani (Patients statement)
(iii.) Was one advised and declined? No

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto, unless there is evidence to the contrary.

8. (i.) Is there loss or decay of teeth attributable to Active Service? No
(ii.) If so, describe. —

9. DO YOU RECOMMEND:—
(a) Fit for duty? (state category) yes. B 1
(b) Invalid to Canada? —
(c) Discharge from the Service as permanently unfit? —

Date of Report Dec 20 1915
Station Canadian Base Etaples
Signed J. R. McGregor Capt. C. A. M. C.
Officer in medical charge of case.

I have satisfied myself of the general accuracy of the above Report, and concur therein *except Not in Hospital {Officer i/c Hospital / S.M.O. Brigade} Strike out one of these

Dated at .....Station, on.....191.....

*Delete if inapplicable.

PART II.

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

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

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

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

13. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(Estimate at none, 5%, 10%, 15%, 20%, etc.)

14. THE DISABILITY DUE TO SERVICE.— (*See Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in this estimate.*)
What part of the entire disability estimated next above (13) is due to causes arising during Active Service?
(Estimate at none, 1/10, 2/10, 3/10, etc., or all.)

15. Permanency of the Disability due to Service estimated next above in (14).
(*i.*) Is it permanent?
(*ii.*) If not permanent, what is its probable minimum duration (*in months*)?

16. If an operation was advised and declined, do you consider the refusal to have been unreasonable? Not applicable

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

18. REMARKS :—

Authority A.G.1. 9083 11-11-18

19. RECOMMENDATION :—
(a) Fit for duty? (*state category*) Yes B1
(b) Invalid to Canada? No
(c) Discharge from Service as permanently unfit? No

Date of Board 20-12-18

Signatures of the Board: H. Weatherill Lt Col C.A.M.C. President.
W.G. Fraser Capt Same.

Station Can. Base Etaples France

Approved A.D.M.S.

Dated at Station 191 8

Statement of the Soldier

(This is to be completed only in the case of the Soldier taking his Discharge in England.)
(Sections 1, 2, 5, and 6 are to be read to the Soldier.)

I, the undersigned.....have heard the description of my disability read, and am satisued (or not satisued) with it. (If dissatisfied, statement should follow.) I complain in addition of :—

.....
Signature of Soldier examined.

Instructions to Medical Officers

Question 1.—State the disability in terms of a diagnosis, that is, a diagnosis of the existing condition as distinguished from the disease or injury which caused it. It should be noted that in medical cases the disability may be the actual disease; for example, Tubercle of Lung, Chronic Bronchitis, Myalgia, Gastric conditions and so forth. (Follow the nomenclature as laid down in the "List of Diseases" of 1915, and amended by A. C. I. No. 1587 of 1917.)

Question 2.—The cause of the disability when known should be stated and care should be taken to establish as correctly as possible the place and date of origin. This is important in view of the relationship of Questions 3 and 4 to Question 5.

Questions 3 and 4.—*NOTE*—By Active Service is meant Service with the Colours in Canada, the United Kingdom or elsewhere during the present war, (since the 4th August, 1914.)

Question 5.—MEDICAL HISTORY.—State concisely the essential points of the history of the case as supported by documentary evidence. If further evidence is considered necessary to complete the Medical History, the same not being supported by documents, this should be obtained by questioning the soldier, but should be distinctly shown as "Patient's Statement." It is considered advisable that these latter statements be grouped apart from the evidence supported by documents available to the Medical Officer.

Extracts should be made from all entries on the Medical History Sheet.

If answers to Nos. 2, 3 or 4 show that the Soldier is suffering from some condition which pre-existed enlistment, it is advisable that these answers be substantiated as far as possible by statements obtained from the Soldier showing history of previous illness or injury.

Question 6.—PRESENT CONDITION.—As this question is primarily intended for the Medical Officer's report, in answering show clearly the condition of the Soldier at the time of examination.

It is directed that the objective and subjective matter be arranged in separate groups. The objective matter is considered to be the more important, in that it consists of a statement of the Medical Officer's actual finding.

Specialists' reports bearing on the PRESENT CONDITION should be attached.

In addition to description of the disability, a report on "all systems" is required in order that the whole when completed may be a true pen portrait of the Soldier's condition.

The Medical Officer in charge of the case will fill out pages 1 and 2 of this Form. The original must be wholly in the handwriting of the Medical Officer. The copies may be typewritten but must be signed by the Medical Officer who must be responsible that these are true copies of the original.

Finally the O. C. Hospital or S. M. O. or an Officer delegated for such duty by the A. D. M. S., is required to sign a certificate at the bottom of page 2, which reads as follows :—

"I have satisued myself of the general accuracy of this report and concur therewith, except....."

This is a most important part of the paper and one to which the attention of the Officers concerned should be frequently drawn as it is by such strict supervision that the accuracy and good results of Medical Board work can be assured.

ENTRIES OF RECATEGORIZATION

Date	Station	Category	Signature of M. O.	Date	Station	Category	Signature of M. O.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

March 1917

3014

R

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

10	20 1/4/18		

2 m. 19/3/18

PARTICULARS OF SEPARATION ALLOWANCE

No. 1102361.

Rank Pte Promoted Reverted Discharge

Soldier's Name David Jas. Richardson

Battalion 257 Batt'n

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Geo. P. Richardson

Address ~~R.R.2 Adamdale~~

Change of Address Ont

1 30 Robinson St. Toronto Ont. 18/1/18 ca.

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	
1917 Dec 31			100 -	100 -	
Jan 18	F 63687		10	10	
Feb	H 66522		10	10	
Mch.	~~Q 91940~~		~~10~~	~~10~~	✓
April.	R 9651		20	20	✓
March	Z 91228		10	10	✓
May 1918	U 22864		20	20	✓
June	S 23038		10	10	✓ S23038 June 6-18 AP 278 RRS. 24-6-18
June	J 2173		30	30	✓
July	I 24214		20	20	✓
Aug	S 37424		20	20	✓
Sept	O 46705		20	20	✓
Oct	N 57201		20	20	✓
NOV	B 60488		20	20	✓
Dec	J 63701		20	20	✓
Jan	E 77766		20	20	✓
Feb	F 80539		20	20	✓
Mar	C 82162		20	20	✓
Apr	B 2690		20	20	✓
May	M 6056		20	20	✓

REMARKS

O/S 323 D-12.

R 91940 cancelled A.G.R. ✓

2 m. Acd. increasing Cy P. from $10 to $20 from 1/4/18

M.R.O. 1/4/18

M.R.O. 1a rendered 5-6-18 B. ~~$10 Amt to adjust $10 a/c. Amt~~

M.R.O. 1a rendered 18-6-18 B.

Def. C.O.P. 9280 (mailed 26-6-18) to acl. June A/P + $10 increase May. 6-6-18.

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

M. F. W. 128
400m.—6-17—1772-93-1141
L. L. 22320—M. & D. 7993.

MAY 14 19

Destroy 2 Pt 77 35 A/c Closed 31-5-19

A.P. 410.00 Ret'd per Mauretania

Date 9/5/19 F.I. 14/5/19 Lancastria

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. 1493.

"MAURETANIA" 9.5.19

DISPERSAL "T" P.2197.

AUDITOR | PAYMASTER

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

M. OR S. S. | REGT. No. 1102361 | RANK Spr | NAME (IN FULL) RICHARDSON, D.J. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? nil. | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 6.P.Y. | IF IN P.F. WHAT UNIT? ~~Canadian Bank of Commerce West Toronto Ont~~

PLACE OF ATTESTATION | TRANSFERRED TO G.P.O. Port Mc Nicol. Ont | DATE 21/6/19 | AUTHORITY

DATE OF ATTESTATION 6/2/17 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ 20.00 - | DATE EFFECTIVE cleared by Ottawa 31.5.19.

PAYABLE TO Geo. R. Richardson | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS 30 Robinson St., Toronto, Ontario.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED PLACE Toronto | DATE 11.5.19 | REASON Demob. | AUTHORITY D.O.136 | IF ENTITLED TO POST DISCHARGE PAY yes

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.		$	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.		$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					
28.2.19								80	98	80	98																								80	98	Bal. transf. S.P.6.
1.3.19-13.3.19	13	1.10	86	90														endorsed on S.P.6. 5-3-3																		1.3.19-13.3.19-P.10.
					3	00																																Clothing allce.
					70	00																																1st Pay '19. W.S.S.
																		487	500					60	00											A/P - March, April & May 19.
								191	90	137	241							148	48													27	388				Boots & Shoe repairs.
																								70	00											W.S.S. 4 tpd. as above.
																														7	70					Overcredited. 7 days P&A.
																																				Cancelled.
																																				A.F.G.
153	00			350	00			350	00																											
													May	11																							
													June	5	7	17	16																			
												AR 81	July	7	7	31	12																			
												AR 106	Aug	7	10	30	152																			
												AR 130	Sept	5	14	98	87																			
								350																		70											

W.S.G. | AMOUNT DUE SOLDIER ON DISCHARGE | 77 70 | 272 30

W.S.G. | 62 30 | 140 00 | 210 00

70 - | 210 - | 140 -

70 - | 280 - | 70 -

70 | 350 - | 0

W.S.G. PAID IN FULL

FOR PAYMASTER WAR SERVICE GRATUITY LIEUT.

70 | 280 - | 350 -

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