Triplicate

931232

SPECIAL.

TRIPLICATE

ATTESTATION PAPER.

No. 2 Construction Raft'n. C. E. E.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Ross
1a. What are your Christian names?	Stephen
1b. What is your present address?	217 Grafton St. Halifax N. S.
2. In what Town, Township or Parish, and in what Country were you born?	Preston Halifax Co N. S.
3. What is the name of your next-of kin?	Horace Ross
4. What is the address of your next-of-kin?	110 Maitland St, Halifax N. S
4a. What is the relationship of your next-of-kin?	Son
5. What is the date of your birth?	11-3-1879
6. What is your Trade or Calling?	Teamster
7. Are you married?	yes
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.

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, x Stephen Ross, 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.

x Stephen Ross (Signature of Recruit)

Date Sept 4th 1916 J. F. Topp Sergt (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, x Stephen Ross, 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.

x Stephen Ross (Signature of Recruit)

Date Sept 4th 1916 J. F. Topp Sergt (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 Hfx N.S. this 5 day of Sep 1916.

[signature] (Signature of Justice)

M. F. W. 23.
600M.—2-16.
H. Q. 1772-39-841.

A Justice of the peace in and for the City & County of Halifax, N. S.

Description of Stephen Ross on Enlistment.

Apparent Age 36 years 10 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft 4¼ ins.

Chest measurement: Girth when fully expanded 34½ ins. Range of expansion 2½ ins.

Complexion Dark²

Eyes Wk. Brwn.

Hair Black

Religious denominations:
- Church of England
- Presbyterian
- Methodist
- Baptist ~~or Congregationalist~~ yes
- 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).

Two Scars on right side of Chin Scar over each eye Scar on both knees

Weight 127 lbs.

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 Sept 4th 191 6. J.M. Murdoch

Place Halifax N.S. Capt A.M.C. Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

Stephen Ross 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.

C.H. Reis Capt. for (Signature of Officer)

OCT 20 1916

Date 191 . L'T. COL.

O. Comd'g No. 2 Construction Battalion, C. E. F.

REGIMENTAL DOCUMENTS

3-7-19 ant

NAME ROSS STEPHEN REGT. NO. 931232 UNIT No 2 Const. Bn H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
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)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	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 Demot
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
1	MEDICAL EXAMINATION (M.F.W. 129)					
1	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
1	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)		24266			21 – 10
1	AFW 3997					21 – 10
1	MFW 192					1 12
1	DMS 1375					
1	Dental Cert.					
1	MFW 67					1.
1	Cas Card					
	Bon					

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

NAME Ross. S. REGT. No. 93[illegible]232

RANK AND UNIT 2 Con. Pte

NEXT OF KIN

CABLE		NATURE OF CASUALTY
No.	DATE	

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

N-S. Regt

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 323(1)	Can For. Corps. La Joux Jura.	15 9/18	V.D.G.
A 340-3	Disch	4-10 18	" " "

a7E
Sm.

Number 931232 Rank Spr.

Surname ROSS

Christian Name Stephen

Units C.O.R.C.C Theatre of War France

Date of Service 17-5-17

Remarks

Latest Address 110 Maitland St
Halifax N.S.

Roll No

200m.-2-21.M. "B" Page 9100.

Next of kin

Address on leave

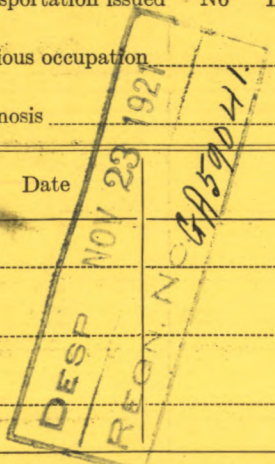
Address on discharge

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.

SURNAME. Ross

CHRISTIAN NAMES Stephen

REGL. No. 931232 RANK Pte.

UNIT ~~No 2 Construction~~ # 6 Dist Dpo Bn

FORMER CORPS Nil

CARD No. 6

SOS Dis 20-2-19
Dem
D.O 43 of 12-2-19

NEXT OF KIN.

NAMES IN FULL Ross Horace,

RELATIONSHIP TO SOLDIER Son

ADDRESS 110 Maitland St. Halifax, N.S.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Preston, Halifax Co N.S. DATE Mar. 11th 1879.

PLACE OF ATTESTATION Halifax, N.S DATE Sept. 5th 1916.

R/C. 25/1/19 256/70 Pte.

L. L. 6945. M. & D. 6994.

M. F. W. 22. 100M.—8-16. H. Q. 1772-39-339.

From Halifax per S.S. [redacted] Scottsland 38/3/17

MARRIED Yes SINGLE WIDOWER

TRADE OR CALLING Teamster RELIGION Baptist

DESCRIPTION.

APPARENT AGE 36 YEARS MONTHS

HEIGHT 5 FEET 4 1/4 INCHES

CHEST MEASUREMENT 34 1/2 INCHES EXPANSION 2 1/2 INCHES

COMPLEXION Dark EYES DK. Brown HAIR Black

DISTINGUISHING MARKS Two scars on right side of chin, Scar over each eye, Scars on both Knees.

MEDICAL EXAMINATION. PLACE Halefax N.S. DATE Sept 4th 1916

Present Address — 217 Grafton St., Halefax, N.S

Form R 149

Stephen.

Name Ross Rank Pte. Reg. No. 931232.

Unit 2nd C.C. Co.

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918						
15-9	C.F.C.H.-La Jour.		V.D.G.	A 323	[illegible]	4159/15
4-10	Dischgd.		"	A 340		4669/15

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

No. 81282. RANK Pte. NAME Ross. Stephen

T. O. S. 4-9-16
D. O. 24-6-9-16

UNIT No 2. Construction Battalion

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Sept. 4	Sept 30	〃		
	Oct.	〃		
	Nov.	〃		
	Dec.	✓		
1917	Jan 1917	✓		
	Feb.	〃		
	Mar.	〃		

Surname	Christian Name or Names	Reg. No.
ROSS	S.	931232.

Rank Pte. Unit NS½ 2Con.

Cas. List.	CFC. La Joux Jura. 15-9-18.
20-9-18. A323	V.D G. 4.
10.10.18 a340-3	Liesa. 4.10.18.

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

D.M.S. 1300. 50M-30-8-18.

Cas. List.

*Name Rose S. Rank Pte. Regtl. No. 931232

Fyle Depot 74-R-478

Original unit Ryton Present unit 6 D D. M. or S. M. Age 1879 Religion Bapt Ref. H.Q.

Port, ship and date of arrival Empress Breton Halifax 22-1-19.

Next of kin Son. Horace Rose 112 Maitland St. City.

Address on leave 112 Maitland St. City.

Address on discharge

Transportation issued Yes No Date Character on discharge

Previous occupation Seamster. Date and place of enlistment Sept 4th 1916

Diagnosis Date of Medical Boards

Date.	Remarks.	Pt. 2 Order No.
29-1-19	T. O. S. fr. 12-1-19 Posted Casy Co.	29.
20-2-19	DISCHARGED at Halifax, N. S DO	43

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

(over)

Date.	Remarks	Pt. 2 Order No.

M. F. W. 192
150m.—5-18
1772-39-1243

Awards

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

M. F. W. 54. (A. F. B. 106.)
250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, ~~Regiment or Corps~~ No 2 Construction Batt. C.E.F.

Regimental No. 931232 Rank pte Name Stephen Ross

C. E. F.

Enlisted (a) 4-9-16 Terms of Service (a) period of war & 6 months Service reckons from (a) 4-9-16

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	Halifax N.S.	25/3/17	
		Disembarked, England	Liverpool	7/4/17	
	OC No 2 Constn Batt	Proceeded Overseas	Seaford		Pt 2 D.O. # A. Gayfer Capt for Capt & Adjt
21.5.17	OC	Forfeits 5 days pay for Making avv y with Iron Rations	Fld	21.5.17	B 2069. Pt. 2. 120 26/7/17
24.8.18	OC/unit	Granted 14 days leave	Ex.	23.8.18	B213 [illegible] 1918
14-9.18	do	Rejoined from leave	Field	10.9.18	B2.3

CERTIFIED CORRECT. 6 JUN. 1917 CAN. RECORDS, LONDON.

MAY 17 1917

Landed fn France 17-5-17 N.I.

(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				
21.9.18	oc.	V.D.G. To Hospital.		15.9.18	B213.
15.9.18	Jno Hfr	V.D.G. Admitted		15.9.18	W 4515
4.10.18	" "	V.D.G. Discharged		4.10.18	W 7342
5.10.18	oc.	V.D.G. Reason for Hospital	Sick	4.10.18	B213
5.10.18	Do	Forfeits Field allowance & is placed under stoppage of pay at 50¢ per d while in hospital from 15.9.18 to 4.10.18 (20 days)			B213 Pt II 56 9 Oct 1918
11 12/18	AAG	Trans to Eng Ord Ported to N.S. Reg Depot	Bramshott	14 12/18	KR 344
14.12.18	N.S.R.D.	S.O.S. & attached to 2 C.C.D for Ors & Rations	B'shott	14.12.18	D.O 305.
12/1/19	NSRD	On Command to CDD Kinmel Pk SOS O.M.F.C. Rhyl on trans. to A.E.F. Disch. Canada Sailing No 4	BRAMSHOTT		Part II D.O. NSRD 313 27 12/18

Ca Hewett
Lieut. for Lt.-Col., A. A. G.
Canadian Section, G. H. O. 3rd Echelon. B. E. F.

Ca. Knight LIEUT,
OFFICER i/c RECORDS,
NOVA SCOTIA REGTL. DEPOT.

KM Hammond Lieut
Kinmel Park

Embarked for Canada 12-1-19

CANADIAN EXPEDITIONARY FORCE
Discharge Certificate

This is to Certify that No. 931232 (Rank) Private

Name (in full) Stephen Ross enlisted in

the No. 2 Construction Battalion

CANADIAN EXPEDITIONARY FORCE at Halifax N.S. on the 4th

day of September 1916

HE served in France

and is now discharged from the service by reason of Demobilization

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

Age 39 years " Months

Height 5 feet 6 inches

Complexion Dark

Eyes Brown

Hair Black

Marks or Scars

Scar, Right Knee

S Ross
Signature of Soldier

C W MacAloney CAPTAIN.
Issuing Officer
O. C. DISCHARGE SECTION No. 6 DISTRICT DEPOT

Rank

Appointment

Date of Discharge February 20, 1919

Signed at Halifax N.S. this 12th day of February 1919

in Military District No. 6

File Reference No.

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

Uniform not to be worn after Date of Discharge, unless authority has first been obtained from G. O. C. District.

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

M. F. W. 54. (A. F. B. 103.)
350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps .....

Regimental No. 931232 Rank Pte. C. E. F. Name Ross S.

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

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

Extended ..... Re-engaged ..... Qualification (b) .....

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
12.1.19	O'seas. T/O/S. No. 6 D.D. Halfx. Casy Co.			22.1.19	Do 79. A. M. Ferguson Lieut ASST. ADJT. No. 6 DISTRICT DEPOT
20.2.19		DISCHARGED at Halifax, N. S	Do #43	for	R. L. Chester LIEUT O C. DISCHARGE SECTION NO. 6 DISTRICT DEPOT

(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				

Form R 122.
2353—100M—9-12-16

JM

Rank Name ROSS, Stephen. Reg'l No. 931232

Unit No..2 Const. Bn. If in perm. Corps, What Unit? Married or Single Married.

Place and Date of Enlistment Halifax, N.S. 4th Sept 1916. Place of Birth Preston, Hfx Co.

Name and Address, Next-of-Kin Horace Ross.

110 Maitland St., Halifax, N.S. Relationship Son.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

R.B. N9 6732
OR CAN

H. W. & V., Ld.—9546-16.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
C					
Arrived in England. S.S. Southland				7.4.17.	A.W.W.W.
14.6.17.	2nd CCCo	Arrd in France	Field	17.5.17	Pt-II 115A
16.12.18	NSRD.	TOS from 2nd CCC	pte B Sheth	14.12.18	305 & 71 D/ 19.12.18 2nd CCC
27.12.18	N.S.R.D	O/C to C.D.D. Rhyl	– –	27.12.18	– 313.
25.1.19	N.S.R.D.	ceases o/c to Rhyl. & S.O.S. to C.E. & Canada	Ripon	12.1.19	– 18.

A.F.B. 103 CHECKED
30 MAY 1917

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

C.A.D.C. 5009 A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) ROSS S.

REGIMENT No 2 Cond. Coy RANK Pte No. 931232

Date of Examination in England 31-12-18 | Date of Examination in France

DIRECTIONS TO DENTAL OFFICERS

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

PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS 2, 3, 15, 30, 31
3. CROWNS
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

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

(a) In Canada

(b) In England

(c) In France

KINMEL PARK, NORTH WALES.

Signature of Dental Officer H W Reid Capt.

ORIGINAL 931232

MEDICAL HISTORY SHEET

Surname Ross Christian Name Stephen

Examined { on 4th day of Sept 1916 at Halifax N.S.

Birthplace { City or Town Preston County Halifax N.S.

Apparent age 37 years

Trade or occupation Teamster

Height 5 feet 4 1/4 Inches

Weight 127. lbs.

Chest measurement { Minimum 32 inches Maximum expansion 34 1/2 inches

Physical development good

Small-pox Marks nil

Vaccination Marks { Arm ~~Right~~ Left Number 2

When Vaccinated last 1907

(a) Marks indicating congential peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Approved by Jm. Murdoch

Rank Capt Ame M.O.

Date	Fit or Unfit	Examined for Re-Engagement
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations
5/4/17		Dave Murray M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
24/10/16	L.G.R.	H.V. Kent Major M.O.
31/10/16	L.G.R.	H.V. Kent Major M.O.
7/11/16	L.G.R.	H.V. Kent Major M.O.

Enlisted on 4th day of September 1916 at Halifax N.S.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment		931232		4/9/16
Transferred to No. 2 CONSTRUCTION, B'n. C.E.F.				

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 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 Rus Christian Name Stephen

STATION	Date of Arrival at the Station	DATES OF Admission into Hospital Day	Month	Year	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

To be made out in duplicate.

DUPLICATE

H.Q. 54-21-23-53

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

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 No 2 Construction Batt

(2) Regimental Number 931232

(3) Full Name of Soldier Stephen Ross

(4) Place of Birth Halifax. N.S.

(5) Are you married, or not ? yes

(6) If married, state,
(a) Full name of your wife Mrs Alice Ross

(b) Present Postal Address ~~2 17 Grafton St~~ Grafton Unknown
~~Halifax N.S.~~ P.O.

(7) Are you a widower ? No

(8) Have you any children ? yes one

If so, give number of boys and girls one boy

Also their names and ages

Horace age 8 yrs

M. F. W. 67.

200M.—3-16.
1772 39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? No

If so, state name and address ———

(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.

$20.00

(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.

Mrs Charles Tolliver (Cousin)
110 Maitland St Halifax

(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 Yes

(15) Are you insured? No

If so, in what Company? No

Have you made arrangements for payment of your Insurance premium No

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

C. H. Rey Capt
for *Officer Commanding.*

Date OCT 20 1916

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2 Mrs Mary Solliver (Assignee)

Name of Soldier Ross Stephen

931234 Pte, 2 cm Battn

L. L. Job 5470—Req. 6888.

Month.	Year.	Cheque No.	Amt.	Remarks.
			20.	APR 1917
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		J 5065	20	
May		H 11202	20	
June		M 20814	20	20 [illegible]
July		N 25125	20	[illegible]
Aug.		E 32280	20	
Sept.		K 39181	20	[illegible]
Oct.		D 46925	20	
Nov.		X 50578	20	
Dec.		L 62131	20	
Jan.	1918			
Feb.			180	
March				
April				
May				
June				
July				

CANADIAN
ASSIGNED PAY AUDITED
OK. [illegible]
AUDIT CLERK
DATE 19/5/19

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 5470—M. & D. 6888

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

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

Mrs

To Whom Mary Tolliver

Address 110 Maitland St
Halifax. N.S.

Rate 20. APR 1917

By Whom Assigned Ross Stephen

Regtl. No. 931234 2

Rank Pte

Corps 2. Battn

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

CANADIAN
ASSIGNED PAY AUDITED
O.K. J.W. Rose
AUDIT CLERK
DATE 19/5/19

4.9.16

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
50m.–6-16.
1772—39—818.

Sheet No. 2.

Mary Solliver Guardian

Name of Soldier Ross, Stephen

Pte

L. L. Job 4503.—Req. 6832.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept. 16				
Oct.				
Nov.				
Dec.		K 26237	46	46 R
Jan.	1917	B 30620	12	12
Feb.		R 33822	12	12
March		S 36886	68	68
April		F 27643	20	20
May		J 5473	20	20
June		J 8672	20	20
July		J 12169	20	T
Aug.		T 33706	20	
Sept.		B 19455	20	
Oct.		J 21429	20	B
Nov.		B 24790	20	B
Dec.		G 26907	20	
Jan.	1918			
Feb.			318	
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

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.				

4-9-16

L. L. Job 4503.—M. & D. 3832.

MILITIA AND DEFENCE

M. F. W. 11.
50m.—6-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Mary Solliver

Address 110 Maitland St-
Halifax
N. S.

Relation to Soldier wife, child or mother } Guardian

Name of Soldier Ross, Stephen

Regtl. No. 931232

Rank Pte

Corps No 2 Construction Batt

To what Corps belonging when called out }

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			1 Child 8 years Boy
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

CONSOLIDATED 2 ACCOUNT

P. 550
MARRIED OR SINGLE M.

PLACE OF BIRTH Preston N.S. Co.

NAME AND ADDRESS OF NEXT OF KIN Horace Ross.
110 Maitland St. Halifax N.S.

RELATIONSHIP OF NEXT OF KIN Son.

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. 931232 RANK NAME Ross. Stephen.

IF IN PERMT. CORPS } WHAT UNIT UNIT 2nd Con Bn. TRANSFERRED TO DATE AUTHORITY

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION Halifax N.S. TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION Sept 4th 1916 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 20.00 DATE EFFECTIVE 7.4.17.

PAYABLE TO Mrs Mary Tolliver 110 Maitland St. Halifax N.S. RELATIONSHIP Guardian

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
							Separation.							8 55	8 55													A/S			8 55				Bal. from Canada.
Aug. 1/20	30	1.10	33	00											33 00												20 -		20 -	21 55			21 55	
MAY	1.31	31	1.10	34	10										34 10	36	1/5							9 73				20		34 60	21 05			21 05	
June	1.30	20	--	33	00										33 00	9	19/4							4 87				20		24 87	29 18			29 18	
July	1.31	31	-	34	10										34 10	64	14/5							4 87				20 -	5 50	25 50	37 78			37 78	Journals 5 do. pg. 21-5-17 Dr. 120. 26.7.17.
Aug.	"	"	--	34	10										34 10													20 -		23 57	48 31			48 31	
Sep	1.30	30	-	33	-										33 -													20 -		34 28	47 03			47 03	
				201	20									8 55	209 55									1947		17 85		120 -	5 50	162 82					

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER. SER. RED. ALLCE. PAY ENR.
Sep	Bal	~~47 03~~							47 03	
Oct	RP.	34 10		AR. 519 27/9 2 Comfortables @ 4.28	3 57			- 20		
				" 628 11/9 " " " "	3 57					
				" 468. 13/9 " " " "	3 56				50 43	
		34 10			10 70			20		

CANADIAN
ASSIGNED PAY AUDITED
D.A.
AUDIT CLERK
DATE 19-5-17

DATE
AUDIT CLERK
CANADIAN
ASSIGNED PAY AUDITED

Pte 931232 Ross. S 20.00

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	CR.3	DR.4	BALANCE		DEFER-RED. PAY	SER. ALLCE. ENG.													
	Oct Bal																		50	43															
Nov	P.P.				33	–											20																		
									AR-828.	25 9/17.			C.F.C.	3	57																				
									-852	12 10/17			"	3	57																				
									-974	25 10/17			"	3	57																				
DEC	– –				34	10			-1092	10 11/17			"	3	57		20		63	25															
					67	10								14	28		40																		
JAN 1918	P.P.				34	10											20																		
									-1261.	23 11/17.			2 Constr Bn	12	49																				
									-1435	21 12/17			" "	7	14				57	72															
					34	10								19	63.		20																		
FEB	"				30	80			Assigned Pay								20																		
									-1856	24 1/18.			C.F.C.	3	57																				
									-1599	4 1/18.			Gura	3	57				61	38															
					30	80								7	14		20																		
MAR 1918					34	10			Ass Pay								20																		
									AR2014	14 2/18			"	7	14																				
									-2322	18 3/18			"	7	14				61	20															
					34	10								14	28		20																		

P 820
12474--375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY	* ~~ENGLAND OR~~ CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:- 1 APR 1917		EFFECTIVE DATE:-	
AMOUNT:- 20⁰⁰		AMOUNT:-	

NAME:- Ross Stephen E

NUMBER:- 931232

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

Mrs Mary Tolliver Sdr
110 Maitland St
Halifax NS.

Stopped Corps 1-1-19

1/1/2

2 Ribbons 2 Cobbs

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:- 2 Construction Bn

DATE ACCOUNT FIRST OPENED:- 1 APR 1917

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
L.P.C.		28/5/9	Can Sec

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
~~9-12-18~~	~~6745~~	~~Field 25 Fes.~~	~~4 66~~				
~~18-12-18~~	~~3588~~	~~BRDY f 2~~	~~9 73~~				
						90839 new Book	L1N 7/6/18

DAILY RATES OF PAY AND ALLOWANCES

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

1/6 Bal forward Deft Dft

PARTICULARS OF RENDERING NON-EFFECTIVE Desc Can 31/12/18 Auth AR 161. 7/12/18 3 6660. Dft $ - 3 cents. Kit $ 14⁰⁰ Sic

MONTH 1918	PARTICULARS	CR 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
MAR	Bal Ford								61 20		
apl	P. Pay	33 -		C. a. P.				20 -			
				AR 8 3/4 C.F.C Jma	3 57						
				✓ 271 27/4 — " —	3 57				67 06		
		33 -			7 14			20 -			
May	P. P.	34 10		C. a. P.				20 =			
				ah pr 12 7/5 CFC Jma	3 57						
				✓ 426 23/5 — " —	3 57				74 02		
		34 10			7 14			20 -			
June	P. P.	33 =		as pay				20 -			
				AR 713 9/6 CFC 5	3 57						
				✓ 875 27/6 Jma	3 57				79 88		
		33			7 14			20			
July	PP	34 10		Can a P.				20			
				AR 953 10/7 CFC 5	3 57						
				AR 1097 25/7 ✓	3 57				86 84		
		34 10			7 14			20			
Aug	PP	34 10		Can a P				20			
				AR 1260 10/8 CFC 5	3 57						
				AR 1475 25/8 ✓	7 14						
				CP 27767 28/8 L/N	29 20						
				AR 3031 21/8 CFC 5	63 27				~~2 2~~ 2 24		
		34 10			103 18			20			
Sep	PP	33		Can a P				20			
				AR 1880 24/9 CFC 5	3 57				7 19	c/f	
		33			3 57			20	41 29		
Oct	" "	34 10		a P. 30.56. 15/10. 2 Cow.				20	21 29		
				✓ 1519 - 4/10/18 29 days			12 00		9 60	(Wire)	
				3266 17/10. C.F.C 5 ✓	3 57				3 29		
				3535 26/10 ✓	1 57				4 69		
		34 10			5 60	12		20			

1918 NUMBER 931232 RANK NAME ROSS S.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Nov				Forward					3 69		
	C.P.	33 -		C.A.D.				20			
				2696 19/11 S.B.F.B. ✓	3 73						
				2944 26/11 ✓ ✓	13 06						
Dec	"	31 10		C.A.P.	16 79			20 -	14 -		
	✓	~~34 10~~	M.	6745 19/12 C.G.B.D.	4 66						
				3588 18/12 ✓	9 73						
				C.A.P.	31 18			~~20~~ M. 01			
		~~67 10~~ 67 10	M.		31 18			~~40~~ 40 M. - 39¢		L.P.C.	
				156 10/1 Rhyl L.P.C. Endorsed	2 43				01 2 82		
				L.O.L. Can 12/1/19 Bo 23/1 N.S.R.D.							

CANADIAN
ASSIGNED PAY AUDITED
O.K.
[illegible]
AUDIT CLERK
DATE 19-5-19

3 69
67 10
70.79
71 18
- 39¢

D.M.S. 1375.

Medical Examination upon leaving the Service

of an Officer fit for general service or a Soldier fit for duty.

☛ *Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.*

Rank Pte Name Ross Surname Stephen

Unit or Corps 17 Reserve (If a soldier) Regtl. No. 931232

Born at Halifax on, date March Eleven 1878

Signature (for identification) Stephen Ross

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

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

Weight 138 lbs. nil

Height 5 ft. 6 ins.

2. **NUTRITION AND DIATHESIS?** Good

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

3. **NERVOUS SYSTEM?** nil

4. **RESPIRATORY SYSTEM.** nil

5. **HEART?**

Abnormal Sounds? nil

Abnormal Size? nil

Pulse Rate? 68 Intermittence or irregularity? nil

6. **ARTERIES.**—Any hardening? nil

7. **DIGESTIVE SYSTEM?** nil

8. **GENITO-URINARY SYSTEM?**

Urinalysis—s.g.? 1020 Reaction? acid Albumen? nil Sugar? nil

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

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe. nil

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

Examined at Kinmac Park Signed [illegible] Capt. M.O.

Date 2—1—19 Signed [illegible] M.O.

☛ *If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.*

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. 931232 Rank Pte Surname Ross.
(Given name in full)
Stephen Ross.

Unit or Corps D.D.-6. Birthplace Preston N.S.

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

1. GENERAL DESCRIPTION:

Physique good Weight 136 lbs. Height 5 ft. 6 in. Colour of Eyes Brown

Nutrition good

Pulse 76

Condition of arteries good

Vision Rt. 20/20 Left 20/20

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

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

scar. R. knee.

Opinion as to general health and physical condition good

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

Nervous System No Genito Urinary System No Cardio-Vascular System No

Special Senses No Integumentary System No Respiratory System No

Disturbance of mentality No Muscular System No Digestive System No

Osseous and Joint System No Any other general condition No

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

110 Maitland St.
Halifax
N. S.

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

[OVER]

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at ....(Overseas)

Date ..... Signed .....M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature .....

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

THIS SECTION FOR USE IN CANADA—

Examined at Shelburne (Canada)

Date Feb 10/19. Signed [signature] 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 [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.)

[OVER]

M.F.W. 129.
1038 (D.P.) 500M-11-18.
1772-29-1142.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

1918-19
No. 6 DISTRICT DEPOT

LAST PAY CERTIFICATE

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

Regimental No. 931232 Rank Pte Name Ross, S.

Corps 2nd Con Bn who was* Discharged

On 20-2-19 191..., to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-1-19 191...

to 20-2-19 191..., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month L.I.P.L	62	69	Balance Cr. from prev. month	11	15
Advances by Cheques No. 13382	70		Regt'l. Pay 51 days at $ 1 c.	51	
Advances by Cheques No.			Field Allow. 51 days at $ c. 10	5	10
Assigned Pay and Sep'n Allce. No. 13383	30		Separation Allowances* (Monthly)	30	
Other charges Reg. Fund		05	Other Allowances* Clothing	35	
Payment on transfer or discharge No. 13382	39	51	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit) L.I.P.	70	
Total	202	25	Total	202	25

*Give particulars.

A monthly stoppage of $ 20 05 (†) has (‡) been paid on account of Assigned Pay for the month of Jan 1919 and Sep'n Allce. for month of Feb 1919 (to) Assignee Mrs. M. Tolliver

(Address) 110 Maitland St. Halifax N.S.

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

On Transfer of an Officer.

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

REMARKS:—

State (1) date of enlistment

(2) if married and if a Separation Allowance Card has been submitted Yes

(3) cause of discharge Demob'n authority D.O. 43

(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 20-2-19

Place Halifax N.S. W.M. Paymaster.

Paymaster No. 6 District Depot

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

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

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

M. F. W. 44.

H.Q. 1772-39-903.
100M-9-18. D.P. 874.

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.....191.....

$	c.
.....	
.....	
.....	
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.....	
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.....	–
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.....

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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).

No. G31232

Rank Private

Surname Ross

Christian Name Stephen

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

Corps (Squadron, Battery or Company) M.D. Construction Battalion

Date of Discharge February 20, 1919

Place of Discharge Halifax N.S.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 39 years 11 months.

Height 5' feet 6 inches.

Complexion Dark

Eyes Brown

Hair Black

Trade Teamster

Intended place of residence (To be given as fully as practicable.) 110 Maitland St Halifax N.S.

Descriptive Marks

Scar Right Knee

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

Demobilization

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.

N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.

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

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

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

6. Medals and Decorations.....

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (*Squadron or Battery*), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place).....

(Date).....

.....

Commanding .....

8. **Certificate to be signed by the Soldier on Discharge**

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place) Halifax N.S. [illegible] Ross .....*(Signature of Soldier.)*

(Date) February 12 - 1919 [illegible] .....*(Signature of Witness.)*

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. **Additional Certificate in the case of a Soldier who takes his discharge on his own request.**

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

.....*(Signature of Soldier.)*

10. **Statement of Service.**

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

Total.....years.....days.

11. **Confirmation of Discharge.**

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

(Place) Halifax N.S.

(Date) 28/2/19

[illegible] LIEUT, COL.

(Signature).....No. 6 DISTRICT DEPOT.

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.)

Nil.

S. Ross

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.

Date of Enlistment

4-9-16

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

April-1917

RATE OF SEPARATION ALLOWANCE

~~20~~		30	

$ 25.00
1-12-17
P.C. 3257

1-9-18
PC 2783
MO 27223

R 06999

RATE OF ASSIGNMENT

20			

PARTICULARS OF SEPARATION ALLOWANCE

No. 931232.

Rank pte Promoted Reverted Discharge

Soldier's Name Stephen Ross.

Battalion 2 Batt'n.

Beneficiary Mary Tolliver

Relationship Guaddian (1 child 8 years Boy)

Address

PARTICULARS OF ASSIGNMENT

Name Mrs Mary Tolliver.

Address 110 Maitland St.

Change of Address Halifax N.S.

1

2

3

4

M R W 25-5-14 2 & 18

015-665-Sc 4

Date 1917		Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
Dec	31	—	318	180	498		
Jan	18 L	69582	30	20	50		
Feb -	D	72339	25	20	45		
Mch -	R	95428	25	20	45	✓	
Apl	S	8196	25	20	45	✓	
May	V	15943	25	20	45	✓	
June	S	26716	25	20	45	✓	
July	E	21323	25	20	45	✓	
Aug	S.	41205	25	20	45		
Sep	X	H3494	25	20	45		
Oct	H	56185	25	20	45		
Nov	W	61563	25	20	45		
Dec	H	67196	45	20	65	✓	
Jan 19	G.	69194	30	20	50		
			673	440	1113		

M R Rd Sp 20449 Destroy Rmds 28/1/19 MDL
OK Audit WRL 25/1/19

A/c Closed 31-1-19
Ret'd per Empress of Britain 22-1-19
Date 28-1-19 M.F.W.187
Clerk

MDL

CANADIAN
ASSIGNED PAY AUDITED
OK
AUDIT CLERK
DATE 19/5/19

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

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

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank — Promoted — Reverted — Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400m.—6-17—177-38-1141
L. L. 22330—M. & D. 7693.

Taken on Strength JAN 12 1919 B. O. 29

AUDITOR | PAYMASTER

M. OR S. Emp. of Britain 21/1/19

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

REGT. No. 931232 RANK Pte. NAME (IN FULL) Ross S.

NEXT OF KIN RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Yes. DATE EFFECTIVE FEB 1 1919

TO WHOM PAID Mrs M. Tolver RELATIONSHIP

ADDRESS 110 Maitland St. Halifax N.S.

on account of child.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
1		
10		

ORIGINAL UNIT C.E.F. 2nd Con. Bn. IF IN P.F. WHAT UNIT? (BLOCK LETTERS SURNAME FIRST)

PLACE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY $ 20.00 DATE EFFECTIVE FEB 1 1919

PAYABLE TO same RELATIONSHIP

ADDRESS

ANY CHANGE IN ASSIGNEE OR ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE DATE 20/2/19 REASON Demob AUTHORITY DO 43 IF ENTITLED TO POST DISCHARGE PAY

BALANCE FROM PREVIOUS ACCOUNT

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
Jan.					11	20			11	20																											Subs to 029
1/1/19 20/2/19	51	1.10	56	10	35 30		11	15	132	25											13382 39	51	13383 30			05	62	69				05			11	15	Dr. L. P. C.
																					13471 70										70		70				
											War Service Gratuity																										
	153	350 ~~280~~	142		492						G147584	March 20 1919					70										70				140						Doc No 158
											147585	March 20 1919					52														52		210		90 ~~20~~		
											April 21/19	G154847					70																				
											do 21/19	154848					30																140		60		
																	70																				May 15/19 G587125
																	30																70		30		May 15/19 587126
																	70																				
																	30																nil		nil		#602477-8 20/6/19
		350	00	142	00		492	00									422	00									70	00			492	00					

Complete

Certified that all payments due by this acct. have been paid.

[signature] CAPT.

For Senior Officer Pay Services, M. D. 6

30M-11-18.—L.L. 50877-M. & D. 9553.

MONTH	PAY AND F.A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGI-MENTAL CHARGES		OTHER CHARGES				TOTAL DEBITS		BALANCE				PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT								COL. NO. I		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.	