

Original

ATTESTATION PAPER.
252nd O.S. B. C.E.F.
CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

No.
Folio.

QUESTIONS TO BE PUT BEFORE ATTESTATION.
(ANSWERS.)

1. What is your surname? *Salin*
- 1a. What are your Christian names? *Alec*
- 1b. What is your present address? *Leidsay, Ont.*
2. In what Town, Township or Parish, and in what Country were you born? *Hagermanland (Sweden)*
3. What is the name of your next-of-kin? *Mrs Mary Salin*
4. What is the address of your next-of-kin? *Kipling St. Ontario*
- 4a. What is the relationship of your next-of-kin? *Mother*
5. What is the date of your birth? *4 April 1897*
6. What is your Trade or Calling? *Labourer*
7. Are you married? *No.*
8. Are you willing to be vaccinated or re-vaccinated and inoculated? *Yes*
9. Do you now belong to the Active Militia? *No*
10. Have you ever served in any Military Force? *No*
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? *Yes*
12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } *Yes*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Alec Salin*, 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.

Date *Dec 5/1916* *Alec Salin* (Signature of Recruit)
J. Roberts (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Alec Salin*, 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.

Date *Dec 5/1916* *Alec Salin* (Signature of Recruit)
J. Roberts (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 *Leidsay* this *5th* day of *Dec* 191*6*.
J. Roberts (Signature of Justice)

Description of Alec Salin (Alec) on Enlistment.

Apparent Age 19 years 4 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 745 5 ft. 6 1/2 ins.

Chest measurement { Girth when fully expanded 37 1/2 ins.
 Range of expansion 4 1/2 ins.

Complexion Fair

Eyes Blue

Hair Dark Brown

Religious denominations.
 { Church of England.....
 Presbyterian.....
 Methodist..... X
 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 Dec 5/16 191 .

Jarrhite MO

Place Lindsay 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:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

Alec Salin 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.

Lindsay J. J. Green (Signature of Officer)

Date Dec 5/1916 191 .

30-11-18-04



DISCHARGE DOCUMENTS

R. O. No.
H. Q. No.

- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers.....
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet.....
- Compulsory Stoppages.....
- Casualty Forms.....
- Proceedings on discharge.....
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- Parchment Certificate.....
- Medical Report for Invalids.....
- Medical History Sheet.....
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet.....
- Clothing Transfer Certificate.....
- Inventory of Kit.....
- Last Pay Certificate.....

Name SALIN ALEX
 Regt. No. 1087056 Rank PTE
 Corps 21st Bn

Killed in Action
14-12-17

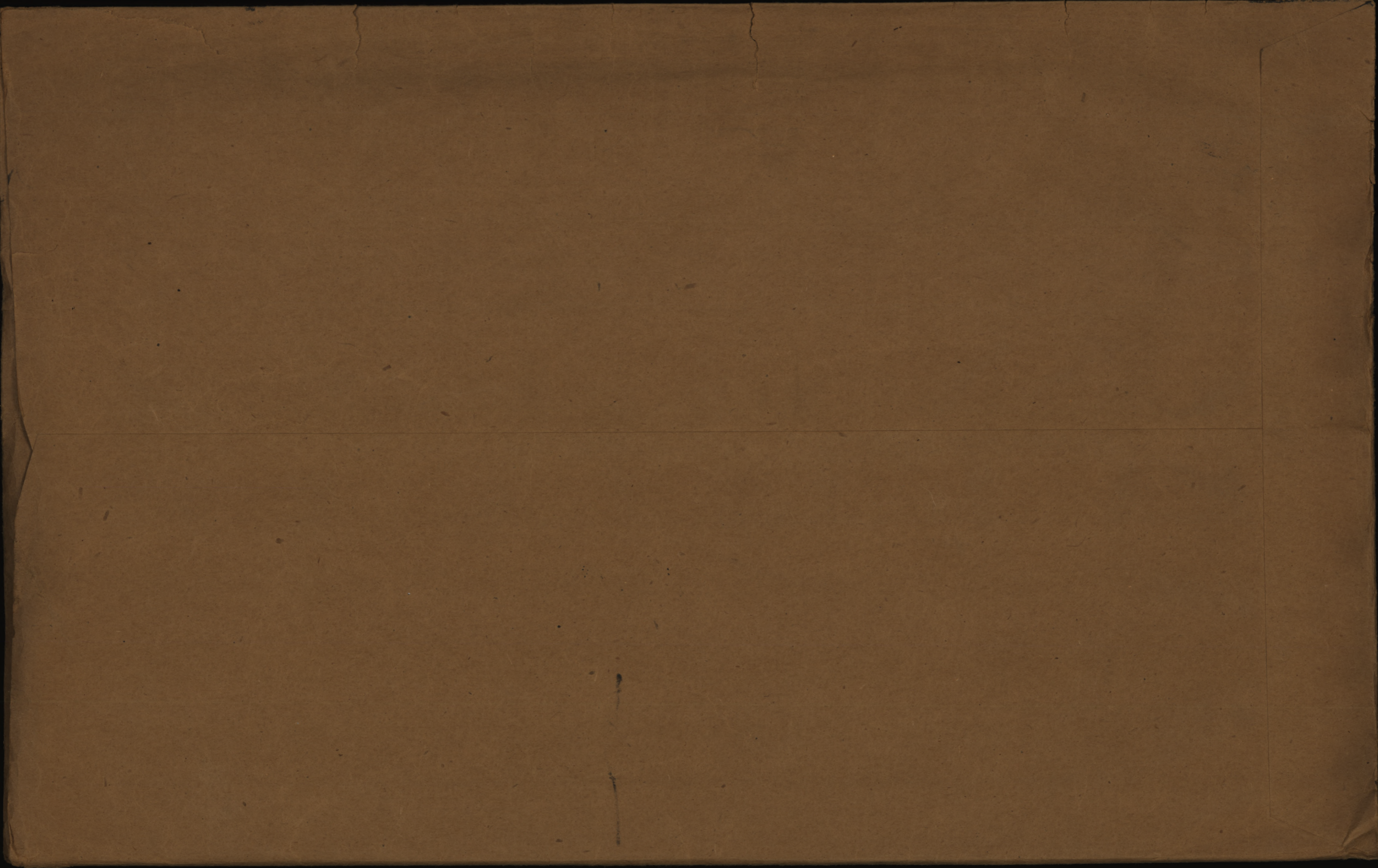
02025

26-19
 14-19
 1-19



Cas card

mx
26/10/20
Willo



SURNAME

CHRISTIAN NAME OR NAMES

REG. NO.

SALIN.

A.

1087056.

RANK
Pte.

UNIT

Co.
E.O. 21.

TROOP

BATTY.

HOSPITAL

DATE OF ADMISSION

1.

HOSP.

2.

HOSP.

3.

HOSP.

4.

HOSP.

DIAGNOSIS

1

2

3

R.F.B. KILLED IN ACTION. 14-12-17. R.

DISPOSITION

C.L. 21-12-17. A94.

DATE

REMARKS

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

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

2.

3.

4.

5.

6.

7.

NAME

Salin, Alex.

REGT'L No.

1087056

H. Q. FILE NO. 649.

RANK AND CORPS

Pte 21st Bn Form 252nd

FOLLOWS

CABLE

NO.

DATE

NATURE OF CASUALTY

No.

FOLLOWS

8-2

M. 6546

21-12-17

b.

Killed in Action Dec 14th 1917 ✓

A. J. B 2091a

Raven

17-12-17

(Noted 1-2-18)

LIST NO.

HOSPITAL

DATE OF
ADMISSION

REMARKS

a 94

Reported from Base

14-12-17

Killed in Action

649-S-19753

SALIN Pte. A. #1087056 - 21st Bn

not dig for star,

Med & D (Mother) Mrs. Mary Salin
Kipling, Ontario.

P & S (Father) John Salin, Esq.,
Kipling, Ontario.

Serial No 463471

Mem Cross (Mother) Mrs. Mary Salin
Kipling, Ontario.

Scroll Desp. DEC 27 1920 Reqn. No 76524

29530

Pl Plague Desp. JUN 29 1922 Reqn. No P41183

Disp 4-11-20 (M) @ 29099.

B.

461

SURNAME.

Salin

CARD NO.

X

CHRISTIAN NAMES

Alex

FOLL.

REGL. No.

1084056

RANK

pte

UNIT

252nd

Bu

FORMER CORPS

Nil

NEXT OF KIN.

NAMES IN FULL

Salin Mrs Mary

CHANGE OF ADDRESS

RELATIONSHIP TO SOLDIER

Mother

ADDRESS

Kipling C.O., Ont.

COUNTRY OF BIRTH

Sweden.

DATE

Apr 7th 1894

PLACE OF ATTESTATION

Lindsay, Ont

DATE

Dec 5th 1916

*Q/82-6-17 868
4*

FROM HALIFAX FER

MARRIED **OLYMPIC 2-6-17** SINGLE

yes

WIDOWER

TRADE OR CALLING

Labourer

RELIGION

Methodist

DESCRIPTION.

APPARENT AGE

19

YEARS

7

MONTHS

HEIGHT

5

FEET

6 1/2

INCHES

CHEST MEASUREMENT

37 1/2

INCHES

EXPANSION

4 1/2

INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

L. Brown

DISTINGUISHING MARKS

Nil

MEDICAL EXAMINATION.

PLACE

Lindsay. Ont.

DATE

Dec 5th 1916

Present Address.

Lindsay. Ont.

yes
Roll

Number *1087056*

Rank *pte*

~~B~~

Surname *SAHIN*

Christian Name *Alec*

Units *2nd 15th Can Inf* Theatre of War *France*

Date of Service *14/11/17* *D*

Remarks *brother*

Latest Address *Mrs. Mary Salin*
Kipling Court.

Roll No *B*

Cage 9309

Next of kin

Address on leave

Address on discharge

Transportation issued

Yes
No

Date

Character on
discharge

Previous occupation

Date and place of
enlistment

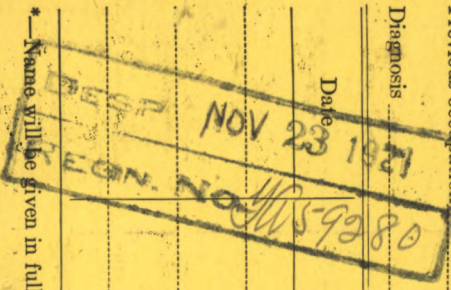
Diagnosis

Date of Medical
Boards

Date

Remarks

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



42

69

FORM OF WILL

I, Alec Salin (Name in full)
Regimental Number 1084056 serving in 252nd Bn CEF

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

I devise all my real estate unto

my mother, Mary Salin, Name and Address
Kipling, P.O. Canada of person or
persons to whom
it is to go.

absolutely, and my personal estate I bequeath to

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

NOTE

This space for the appointment of Executor if necessary.

IMPORTANT NOTE

This must be signed and Dated by THE SOLDIER HIMSELF.

this 10 day of May A.D. 1914

Alec Salin Signature of Soldier.

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

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

Signature of First Witness J.R. Roberts

Address of Witness 16 Victoria St. Biskhead.

THE TWO WITNESSES Occupation of Witness Stenographer, England.

MUST SIGN HERE Signature of Second Witness G.W. Davison

Address of Witness 1447 Alexander Ave. Montreal

Occupation of Witness Shipper

252nd. O. S. BATTALION, C. E. F. 1087056.
MEDICAL HISTORY SHEET ORIGINAL.

Surname Salin Christian Name Alex

Examined { on 5 day of Nov 1916
 at Lindsay Ont.
 Birthplace { City or Town Lindsay
 County Sweden

Approved by Jas White
 Rank _____ M.O.

Apparent age 19 1/2 mos
 Trade or occupation Labourer
 Height 5 feet 6 1/2 Inches
 Weight 145 lbs.
 Chest measurement { Minimum 33 inches
 Maximum expansion 4 1/2 inches
 Physical development Good
 Small-pox Marks _____

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT

Vaccination Marks { Arm Right Left
 Number _____

Date	Result	VACCINATIONS
<u>3/5/17</u>	<u>Good</u>	<u>A. Graham</u>

When Vaccinated last _____
 (a) Marks indicating congenital peculiarities or previous disease _____

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>21/3/17</u>	<u>Good</u>	<u>A. Graham</u>
<u>3/4/17</u>	<u>Good</u>	<u>A. Graham</u>
<u>14/4/17</u>	<u>Good</u>	<u>A. Graham</u>
<u>31.10.17</u>	<u>Good</u>	<u>Jas White</u>

Enlisted on 5 day of Nov 1916 at Lindsay Ont

CORPS	REG'L NUMBER	HABITS	DATE
<u>252nd Bn. C.E.F.</u>	<u>1087056</u>	<u>Good</u>	<u>5/12/16</u>
<u>8th CANADIAN RESERVE BATTALION</u>			<u>JUN 10 1917</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT

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

J. M. G.

MEDICAL HISTORY SHEET

1.087056
DUPLICATE.

Surname Tolin Christian Name Alex

Examined { on 5 day of Dec 1916
 at Lindsay
 Birthplace { City or Town
 County Sweden

Approved by J. A. White
 Rank _____ M.O.

Apparent age 19 yrs 7 mos
 Trade or occupation haberer
 Height 5 feet 6 1/2 Inches
 Weight 145 lbs.
 Chest measurement { Minimum 33 inches
 Maximum expansion 37 1/2 inches
 Physical development Good
 Small-pox Marks _____

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right Left
 Number _____

Date	Result	VACCINATIONS
<u>3/5/15</u>	<u>Good</u>	<u>Graham</u> M.O.
		M.O.
		M.O.

When Vaccinated last _____
 (a) Marks indicating congenital peculiarities or previous disease _____

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>2/3/12</u>	<u>Good</u>	<u>Graham</u> M.O.
<u>3/4/12</u>	<u>Good</u>	<u>Graham</u> M.O.
<u>1/4/13</u>	<u>Good</u>	<u>Graham</u> M.O.

Enlisted on 5 day of Dec 1916 at Lindsay bus

CORPS	REG'L NUMBER	HABITS	DATE
<u>2nd. In. C. Co. 1054006</u>		<u>Good</u>	<u>5/12/16</u>
Transferred to _____			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT

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

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 252nd O. S. BATTALION, C. E. F.

Regimental No. 1087056 Rank Pvt Name Alex Salen

Enlisted (a) 5/12/16 Terms of Service (a) War & 6 months Service reckons from (a) 5/12/16

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) Laborer

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				

Embarked at Halifax N.S. May 29th 1917.

Disembarked at Liverpool, England 10th June 1917

Transferred to 6th Res. Bn. 10/16/17 PART II No. 136

CERTIFIED CORRECT.
 12-6-17
 14-11-17
 G.A.G. RECORDS, LONDON.

O.C. 6TH CAN. RES. BN. TAKEN ON STRENGTH 6TH CAN. RES. BN.

DRAFTED
 TRANSFERRED TO 21st Bu.

Seaford 10-6-17 PART II No. 136

Seaford 14-11-17 PART II No. 269.

OFFICER i/c RECORDS 6th CAN. RES. BN.

2 C.C.B.D.	Arrived & Taken on Strength	2 C.C.B.D.	14-11-17	Part II Ord. 99	17-11-17
2 C.I.B.D.	21st Canadian Battalion.	Field	17-11-17	N.R.	
C. C. Rein. C.	Left for C.C. Rein C.	Can. Corps Rein. Camp.	17-11-17	N.R.	
DR	Arrived.	Guid	2-12-17	2 R	
	Left for Unit				

(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.

1087056

Salin, a

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
15/12	21 st BN	Killed in action	Field	14-12-17	Telegram H.G. 316. Pt. II D. 108 d/17-12-17.
			Whogau	Major	for Lt.-Col., A.A.G. Canadian Section. G. H. Q. 3rd Echelon B.E.F.

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 18m.-4-17.
 1772-39-819.

Sheet No. 2 Mrs Mary Salin
 (Assignee)

Name of Soldier Salin A

L. L. Job 1927-M. & D. 7814.

PAYMENTS.

1087056, PG. 252" Bm

Month.	Year.	Cheque No.	Amt.	Remarks.
				JUN 1 1917
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June		O 19996	15 .	
July		S 25096	15 . 6	
Aug.		J 32360	15 .	
Sept.		P 38837	15 . 03	
Oct.		N 44778	15 .	
Nov.		L 52379	15 .	
Dec.		Q 39571	15 .	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

13'

~~108~~

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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.				

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS


M. F. W. 12.
 25m-4-17.
 H. Q. 1772-39-819.

To Whom *Mrs Mary Salin*
 Address *Kipling P.O. Ont-*

By Whom Assigned *Salin A*
 Regtl. No. *1087056*
 Rank *Plt*
 Corps *252" Bn*

Rate *15.* JUN 1 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				

2

1110

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

June 1 - 1918

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

<i>15-</i>			
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PARTICULARS OF SEPARATION ALLOWANCE

No. *1087056*

Rank *pte* Promoted Reverted Discharge

Soldier's Name *A. Salin*

Battalion *252nd Batta*

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name *Mrs Mary Salin*

Address *Kipling P.O. Ont*

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>1917</i>					
<i>Dec 31</i>	<i>W</i>		<i>105</i>	<i>105</i>	<i>C.F.X. 105⁰⁰ to 31-12-17. } 11-1-18 cancelled. Bal acct closed 31-12-17. } Ball.</i>
<i>Jan 18</i>	<i>W 70026</i>		<i>15</i>	<i>15</i>	

Pensions Notified Date *11-1-18*

Killed in Action

Died of Wounds } Date *4-12-17*

Missing

C. L. 39(3) 22-12-17 Clerk *S. Ball*

Date Noted *11-1-1918*

**CANADIAN
ASSIGNED PAY AUDITED**

W. J. McElroy
AUDIT CLERK

DATE *10-6-15*

M. F. W. 128.
4000-6-17-1772-39-1141
L. L. 22220-M. & D. 1993.

E 3327

1087056

Plé Calina

42/4p 21 Btu

Kind 4

14/12/17

Captain.
for Lt-Col A.A.G.
Canadian Section.

If page 20 with Military Will is removed, state on
this page to whom it has been forwarded and date:—

Will removed & sent to
Headquarters In D[#] 8 Hingston
25/5/17

[Signature]
Paymaster, 6th Can. Div.

[Handwritten notes in purple ink:]
Let files
be prepared
20/6/17
[Signature]

