Duplicate

DUPLICATE

ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ..... Smith.
1a. What are your Christian names? ..... Albert. Henry.
1b. What is your present address? ..... Glenalla. Manitoba.
2. In what Town, Township or Parish, and in what Country were you born? ..... Northumberland County, Ontario.
3. What is the name of your next-of kin? ..... Mrs. Sarah. Smith.
4. What is the address of your next-of-kin? ..... Glenalla. Manitoba.
4a. What is the relationship of your next-of-kin? ..... Mother.
5. What is the date of your birth? ..... June, 21st 1896.
6. What is your Trade or Calling? ..... Farmer.
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, Albert. Henry. Smith., 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.

Albert Henry Smith (Signature of Recruit)

Date February 10th. 1916 A. E. Watts (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Albert. Henry Smith., 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.

Albert Henry Smith (Signature of Recruit)

Date February 10th. 1916 A. E. Watts (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 Neepawa this tenth day of February 1916

A Brown (Signature of Justice)

M. F. W. 23.
200 M.—11-15.
H. Q. 1772-39-841.

Description of Albert. Henry Smith. on Enlistment.

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

Height ..... 6 ft. 1 ins.

Chest measurement.
- Girth when fully expanded ..... 36½ ins.
- Range of expansion ..... 3½ ins.

Complexion ..... Fair.

Eyes ..... Grey

Hair ..... Brown

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

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

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

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 February 10th 1916.

Place Neepawa. Manitoba.

Jno. B. Poole
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.

Albert. Henry. Smith. 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.

R. A. Gillespie (Signature of Officer)
Lt. Col.
Commanding Recruiting Area B.

Date February 10th 1916.

REGIMENTAL DOCUMENTS

2-7-19 PAP

NAME SMITH Albert Henry. REGT. NO. 1000621 UNIT 27 Bn H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE
	ATTESTATION PAPER (M.F.W. 23, 133, or 51)				
	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)				
	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)				
	DENTAL HISTORY SHEET (M.F.B. 465)				
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)				
1	MEDICAL EXAMINATION (M.F.W. 129)				
	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)				
	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)			25233	
4	Miss				
1	6D.3				
1	Pay Card				

NON-EFFECTIVE BY

DEATH

Category

DISCHARGE

Category

Demob

DESERTION

32-17.
18-17
3-2-17

FORM D.M.S 1300

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
Smith.	A. H.	100621.

RANK	UNIT	CO.	TROOP	BATTY
Pte.	Manx 24.			

HOSPITAL	DATE OF ADMISSION
6. C. F. Amb.	6.11.17
1. 11 Cas. Clear Station	HOSP. 6-11-17
2. 16 & 17 Le Treport. 3 CD Le Treport	6-9-18 HOSP. 10-9-18
3.	HOSP.
4.	HOSP.

DIAGNOSIS

1 Gsw. L. Hand. G.S.W. Head

2.

3.

DISPOSITION — DATE

Drs. 8-11-17

Ch. 14.11.17 A62. 5.

15-11-17 A 6 3 (31)

13-9-18 A/318-3.

16-9-18 L 320 (5)

12-10-18 @ 33 4 (4)

REMARKS

Mis. Barracket - 27-9-18.

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.		

Number 1000621 Rank Pte Cpl.

Surname SMITH

Christian Name Albert Henry.

Units 2nd Bn Can Inf Theatre of War France

Date of Service 31.5.17

Remarks

Latest Address ~~Lonella Man.~~
Riding Mountain
Man.

Roll No. B Page 13021

200m—2—21.M.

DESP. MAY 30 1922
REGN. NO. 180751

FORM R. 149.
7106—250m—7/2/[illegible]

Albert. Henry

Name SMITH Rank Pte Reg. No. 1000621

Unit 27th

Next of Kin Canada WR.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917						
6-11	6 b. to A.	Bayonet W.	Lt Hand	A162	M 435	7511
6-11	11 C. C. S		do			7478
8-11	Discharged to Duty			5163		7595
1918				WR 4-1-18		
6-9	16 Gen Le Irepost	G.S.W. Head		A 318		3988
10-9	3 Base Dep. to Irepost		do	A 320		4030
27-9	Dvsl. to 3 Base.			A 334		4418
WR						

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

C.

SURNAME. Smith

CHRISTIAN NAMES Albert Henry

REGL. No. 1000621 RANK pte

UNIT 226th

FORMER CORPS nil

CARD NO. 10126-5-14 Lond.

D0150 1-30-5-14

ROLL. M10 10DD

B.C.

NEXT OF KIN.

NAMES IN FULL Smith, Mrs. Sarah

RELATIONSHIP TO SOLDIER mother

ADDRESS Glenalla, Manitoba

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Northumberland Co, Ont. DATE June 21/1896.

PLACE OF ATTESTATION Neepawa DATE Feb, 10, 1916.

From Halifax 13/2/16 Per S.S. "Olympic" R/C. 22/5/19 336

L. L. 90589.—M. & D. 6312.

M. F. W. 22. 100m—1-16. H. Q. 1772-39-839.

MARRIED SINGLE yes WIDOWER

TRADE OR CALLING farmer RELIGION Methodist

DESCRIPTION.

APPARENT AGE 19 YEARS MONTHS

HEIGHT 6 FEET 4 INCHES

CHEST MEASUREMENT 33 INCHES EXPANSION 3½ INCHES

COMPLEXION fair EYES grey HAIR brown

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE Neepawa, Man DATE Feb. 10/1916.

No. 1000621 RANK Pte. NAME Smith, A. H.

T. O. S. UNIT 226th Battalion C. E. F.
Nanaimo Detachment.
M. D. 10.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916.	1916.			
Mar. 1.	Mar. 31.	L	Forfeits 6 days Field allowance.	D. O. 62. Mar: Paylist.
Apr.		L		
May		L		
June		L		
July		L		
Aug.		L.		
Sept		L	forfeits 14 dys pay	Sept paylist
Oct		L	forfeits 1 dy pay	Oct paylist
Nov.		L	forfeits 2 dys pay	Nov 26470 of 8-11-16
Dec.		L	S/P paylists only	Dec paylist.

UNIT SAILED
DEC 15 1916

NAME Smith Albert Henry

REGT'L No. 1000621

RANK AND CORPS Pte. 27th Bn (Garr. 226th Bn)

H. Q. FILE No. 649.

FOLLOWS NO.

FOLLOWS

CABLE NO.	CABLE DATE	NATURE OF CASUALTY
M6351/113-6	14-11-17	Adm. to 6 Fld Amb. Depot Nov. 6th, 917 Bayonet-wound Hand.
N.O.K.	Mrs. Sarah Smith (mother) Glenalla Manitoba	
A318 49-6.	15-9-18	Adm. 16 Gen. H. Le 2nd Report Sept. 6th, 1918. GSW. head.

L. L. 20497—M. & D. 7908

M. F. W. 42—50M.—5-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
a62 35	6 Can Fld Amb	6-11-17	Bay. Wd. L. hand
a63 3	11 Cas Clg Stat	6-11-17	" " " "
a63 3	Discharged	?-11-17	Do Do
a318 (3)	16 Gen. Re Depot	6-9-18	Gsw Head
a320 (6)	3 Conv. Dep Re Depot	10-9-18	Gsw Head
a334 (4)	Duse to Base Details	27-9-18	Gsw Head

~~To~~ be made out in duplicate. H.Q. 54-21-23-53

25

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.....

226th. OVERSEAS BATTALION C. E. F.

(2) Regimental Number 1000621

(3) Full Name of Soldier..... Albert Henry Smith

(4) Place of Birth..... Northumberland Co Ontario.

(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 ? ..... No

(8) Have you any children ?.....

If so, give number of boys and girls.....

Also their names and ages.....

M. F. W. 67.

200M.—3-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes

If so, state name and address Robert Henry Smith Glenella, Man.

(10) Is your Mother alive? Yes

If so, state name and address Sarah Smith Glenella Man.

(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.

/

(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.

R A Grier

Lieut. Colonel

Commanding 226th. Overseas Battalion, C. E. F.

Officer Commanding.

Date October 3/16

FORM OF WILL.

I, Albert Henry Smith (Name in full)

Regimental Number 100671 serving in 11th Bath

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

I bequeath all my real estate unto Father

Robert Henry Smith
Glendale Man

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

absolutely, and my personal estate I bequeath to Father

Robert Henry Smith
Glendale Man

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

IMPORTANT NOTE
This must be Signed and Dated by THE SOLDIER HIMSELF.

this Third day of October A. D. 191

Albert Henry Smith Signature of Soldier.

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

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

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness Nalbernier Lieut

Address of Witness 76 Maryland St Winnipeg Man

Occupation of Witness Soldier

Signature of Second Witness JW Gillespie Lieut.

Address of Witness 431 Charles st Winnipeg Man

Occupation of Witness Officer in C E F

M. F. W. 82
300M-5-16.
1772-39-983.

FORM OF WILL

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

W.S.B. 6 1000 A

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

Casualty Form—Active Service.

Unit, Regiment or Corps 226th. OVERSEAS BATTALION C. E. F.

Regimental No. 1000621 Rank Private Name Albert Henry Smith

Enlisted (a) Feby 10/16 Terms of Service (a) War & 6 mos after Service reckons from (a) Feby 10/16

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) Farmer

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 Halifax N.S. 15/12/16 Disembarked Liverpool 25/12/16			H.M.T. 2810
7/4/17	O.C. 226th Battalion	S.O.S. on transfer to 14th Reserve Battalion	Bramshott	26/3/17	Pt. 2 0.84.5 .....Capt. Adjt., for O.C., 226th Battalion.
9/4/17	O.C. 14th	T.O.S. on transfer from 226th Battalion.	Dibgate	7/4/17	Pt. 2 0.95.1 .....Capt. Adjt., for O.C., 14th Reserve Battalion.
31-5-17	O.C. 14th Res. Batt.	S.O.S. on proceeding Overseas to 27th Battn.	Dibgate	31-5-17	Pt. 2 D.O. 147.3 .....Capt. Adjt., 14th Reserve Battalion, (Man.)

CERTIFIED CORRECT. 8 JUN 1917 CAN. RECORDS, LONDON

(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				
1-6-17	C.B.D.	Arrvd. C.B.D.	France	1-6-17	Pt. II O/34 7-6-17.
30-6-17	27 Bn.	do. Unit	Field	28-6-17	B.213.
7 "/17	" "	Bay. W. Hand S/Cdn " " Disch Duty	" "	6 "/17	
				8 "/17	A 1821. B 3089
6 "/17	" "	" " dam	" "	6 "/17	a 1714 B 3347
6 "/17	" "	" "	" "	6 "/17	a 1841. B 3534
10 "/17	26.27"	Wounded	"		B 213.
17 "/17	"	Rejoined Unit	"	9 "/17	B 213. a/13 "/17.
19/8	27th Bn.	Granted 14 days leave		19-1-18	" a/8 d/28-1-18
2-2-18	"	Returned	Field	3-2-18	"
2.3.18	"	Awarded G.C Badge	" "	10-2-18	B 213 d/20/2 a/18 3/18
5-9-18	2 Gen	GSW Head	To 23 CCS	4-9-18	H. 7170
5-9-18	2 B.H.	" "	To CCS	4-9-18	a. 8860
6-9-18	16 Gen	" "	dam	6-9-18	H. 9007
9-9-18	"	" "	To 3 CP	9-9-18	H. 9921
8-9-18	23 CCS	" "	To 26 A.T.	5-9-18	K. 1217
10-9-18	3 CD	" "	dam	10-9-18	K. 1217
27-9-18	"	" "	Base	27-9-18	K. 4021
29-9-18	62 BD	To A. from 3 CD		29-9-18	NR 461
1-10-18	"	Left for CCRC.		2-10-18	" 1409
2-10-18	CCRC	Arrived		2-10-18	" 1549
5-10-18	"	To Unit		5-10-18	" 1769
12-10-18	27 Bn	Joined		9-10-18	B 213
20-10-18	"	Apptd L/Cpl vice 875222 L/C. Robinson (Kma)		27-8-18	Letter K.318/17227 Pt III 9-8-1918.
28-12-18	"	14 Days leave	U.K.	25.12.18	B.213. Pt II O. 10 of 1919

Army Form B. 103. Cpl Sheet 2. Regimental Number 1000621

Casualty Form—Active Service.

Regiment or Corps 27th Can Bn

Rank Pte Surname Smith Christian Name Albert Henry

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

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

Date of promotion to present rank ..... Date of appointment to lance rank .....

Extended { ..... / ..... } Re-engaged { ..... / ..... } Qualification (*b*) .....

or Corps Trade and rate .....

Occupation ..... Signature of Officer

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked ...			
		Disembarked ..			
18-1-19	27 Bn	From leave		13-1-19	B 213
8.3.19	"	Prom. Cpl. vice 21531 Cpl Ward (Eng)		10.1.19	" P.H.Q. 13-1419
	Emb. Camp.	Proceeded to England.		12-4-19	N.R. Pt.2 O.No. d/....

A Brander

LIEUT. LT COL. A.A.G.

(*a*) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(*b*) Signaller, Shoeing-Smith, &c.

W. 8685—512753 2000m 9/17 (35611) C. P. & S., Ltd., Form B./103 E./1897.

P.T.O.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
13-5-19.	S.O.S. OF O.M.F.O. ON PROCEEDING TO CANADA.		20 Pl. 11 No 30	13-5-19	

for discharge

D Mclarnon LIEUT.

FOR OFFICER COMMANDING,
"M" WING, C.O.C.

H. M. T. NORTHLAND

EMB. LIVERPOOL 13-5-19

DISEMB. HALIFAX 23 5 19

13.5.19 T.O.S. Dispersal Station 20 1 50 " Pa 2

M

and Dispersed 26.5.19 do 3

Comstadacy Lieut.
for O. C. 10 District Depot.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

WAR SERVICE BADGE
CLASS "A" No. 189794

THIS IS TO CERTIFY that No. 1000621. (Rank) Corporal.

Name (in full) SMITH. ALBERT HENRY enlisted in

the 226th Battalion.

CANADIAN EXPEDITIONARY FORCE at Nespawa on the Tenth.

day of February 1916.

HE served in 24th Battalion 6th. France.

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

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

Age 22 10/12 years

Height 6ft 1/4 ins

Complexion Fair.

Eyes Grey

Hair Brown

A H Smith
Signature of Soldier.

Marks or Scars

Date of Discharge

Dispersal Station "M"
MAY 26 1919
Military District No. 10

F Allcock
Issuing Officer.

M.
Rank

Date 26. 5. 1919

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.

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

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

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

ORIGINAL

MEDICAL HISTORY SHEET.

ORIGINAL

Surname Smith Christian Name Albert Henry

Examined { on 10th day of February 1916 / at Deepawa

Approved by James Lyle Bury Capt / Jno. S. Poole Rank M.O.

Birthplace { City or Town / County Northumberland Ontario

Apparent age 19

Trade or occupation Farmer

Height 6 Feet 1/4 Inches.

Weight 185 Lbs.

Chest measurement { Minimum 33 inches. / Maximum expansion 36 1/2 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right. Left. ✓ / Number 2

When Vaccinated last 1910

(a) Marks indicating congenital peculiarities or previous disease Two warts on front of right chest below clavicle

(b) Slight defects but not sufficient to cause rejection Two warts on front of right chest below clavicle

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.
June 26/16	Pos.	James Duxbury M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
Jan 1915	Take	R.L. 23-1 Vol I
July 3/16.		James Duxbury M.O.
July 17/16.		James Duxbury M.O.
July 26/16.		James Duxbury M.O.

Enlisted on 10th day of February 1916 at Deepawa

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	226th. OVERSEAS BATTALION C. E. F.	1000621		Feby 10/16
Transferred to	14th RESERVE BATTN. C.E.F.			APR 7 1917

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

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

M. F. B. 313.

200M—11-15.
H. Q. 1772 39-439.

Surname Lovell Christian Name Albert Stanley

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
Camp Hughes	June 2/16										James Duxbury

C.A.D.C. 5009A

"M" WING, C.C.C.

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

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.

NAME OF SOLDIER (Block Letters) Smith. A. R. H

REGIMENT 27th Bn RANK Sgt No. 1000621.

Date of Examination in England 16/4/19 | Date of Examination in France

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 4, 32.
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? No

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

- (a) In Canada Yes
- (b) In England
- (c) In France

Signature of Dental Officer W. H. Rowland

Group B.25—

"M" WING, S.C.C.

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. 140621 Rank Corp. Surname SMITH.
(Given name in full) Albert Henry

Unit or Corps 27 Bn. Birthplace Hastings Ont

(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. 1/4 in. Colour of Eyes Grey

Nutrition Good

Pulse 77 Reg. Regular

Condition of arteries Soft

Vision Rt. 6/12 Left 6/6

Hearing (conversational voice) Rt. 21 ft.

Left 21 ft.

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

Two vaccinations Left arm
Chest expanding

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.

7 11/17. Bay Wd. L Hand
5-9/18 S.S.W. Head

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

[OVER]

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Hinley (Overseas)

Date 15-4-19 Signed A Arthur Capt. 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 A. H. Smith

(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.)

R—122
8,401—50,000—21-10-16.

LTR

Rank

Name SMITH, Albert Henry

Reg'l No. 1000621

Unit 226th, Bn.

If in perm. Corps, What Unit?

Married or Single Single

Place and Date of Enlistment Neepawa, Feby, 10th, 1916

Place of Birth Northumberland Co. Ontario.

Name and Address, Next-of-Kin Mrs Sarah Smith.

Glenella. Manitoba.

Relationship Mother.

Assigned Pay Monthly $

Payable to

Relationship

Separation Allowance $

Payable to

Relationship

Discharge, Date and Place

Reason

Character

25777

N/E. R.B. No.

File R.

O.R. Can

Category

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. OLYMPIC 26 12 16			
7-4-17	226	Posted to 14 Res	B'Sholt	7-4-17	PAY Bk 84 (Fo 95) 14 Res 1250 34 A 27A
31-5-17	14 Res	Proceed O'seas to 27 Bn	D'Gale	31-5-17	147 A.F.B 103. Checked 7.6.17 30.6.17. H.W.
13-11-17	M.R. (27)	6 Can Field Amb.	Field	6-11-17	6ZA 62. Bay Wd. L. Hand.
14-11-17	—"—	11 Can Clearing Sta	—"—	6-11-17	6ZA 63. —"— —"—
—"—	—"—	Disch to Duty.	—"—	8-11-17	6ZA. 63. —"— —"—
8-3-18	2y 7th Bn	Awarded D.C.M Badge	Field PTE	10-2-18	PT Bk 20
13-9-18	27	Wounded	Field	6-9-18	C.L. a 3 18
28-10-18	27 Bn.	Appt'd Lance Cpl.	" "	2)-8-18	Do 98.
14-3-19	do	Promoted to rank of Cpl	—"— 4 Cpl	10-1-19	Pay 13.

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.
		14419 27BN PR.. TO ENGLAND		12 4 19	Do 26
		15 4 19 M'W C.C TOS FROM 27th		WitleY 13 4 19	Do 5
		1 3 5 19 M wing S O S to Canada		Wit D 13 5 19	DO 33
		To Canada		13.5.19	62M27

Father

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
18m.—4-17.
1772—39—819.

Sheet No. 2. Robt. Hy. Smith (Assignee)

PAYMENTS.

Name of Soldier Smith Albt. Hy. 1000621 — Pte — 226th Bn

L. L. Job 19227—M. & D. 7814.

#15 Apl 1/17

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June		I 17232	45	} 3 Mo.
July		K 25348	15	@ 15.
Aug.		34539	15	
Sept.		40209	15 + 4	
Oct.		R 45006	15	
Nov.		R 52851	15	
Dec.		R 62146.	15	
Jan.	1918		135	
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 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ENGLAND OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1-4-17	EFFECTIVE DATE:-
AMOUNT:- 15/-	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: Robert Henry Smith
Glenella Swan

Stopped & effective
30/4/19

NAME:- SMITH Albert Henry
NUMBER:- 1000621

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte
BO 98-27 Bn 28/10/18	27/8/18	L/bpl
" 13 " 14-3-19	10-1-19	bpl.

UNIT AND TRANSFERS

ORIGINAL UNIT:- 226th Bn
DATE ACCOUNT FIRST OPENED:- 1-1-17

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			27 Bn

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
4.4.19	231.	Feld 207 Es	~~3 6 5~~				
16.4.19	512	M Wing L H 0-0	~~0 8 3~~				
			7 1 18				
L.P.B Lend 19/4/19							

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	~~1 05~~	~~- 10~~		
Promoted to bpl 10-1-19	1 10	10		
Do 13-14-3-19 27 Bn.				6/-
				1 9 3

Dist to Canada 30/4/19 WR 87183. Bramshott to Bramshott L.P.B Bale Led Bale 14-4-19 Dr. 73:15

PARTICULARS OF RENDERING NON-EFFECTIVE:-

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mar.	Balc. Fwd								128 29	45 -	
Apl	A.A.	33 -		Cal				15			
				AR 19. 27 Bn 12/4/18	3 57				142 72	45	
		33 -			3 57			15			
May.	P P	3H 10		Cal				15 -			
				AR 90 27 Bn 5-5-18	8 03						
				AR 678 18/9/17 27 Bn	2 68						
				AR 138 25/5/18 " "	4 46				146 65	45 -	
		3H 10			15 17			15			
June	P P	33 -		Cal.				15			
				AR 191 11-6-18 27 Bn.	3 57				161 08		
		33			3 57			15			
July	P.P	3H 10		A.P.				15			
				AR 946 2-7-18 "	4 46						
				" 481 11-7-18 31	3 57						
				" 609 24-7-18 "	8 92				163 03	45	
		3H 10			16 95			15			
				" 5512 27-7-18 27 Bn.	8 92				154 31		
					25 87						
Aug	P.P.	3H 10		A.P.				15			
				AR 723 19-8-18 6 Brig	3 57				169 84	45	
		3H 10			3 57			15			
Sep.	"	33.		A.P.				15			
				" 860 30-8-18 31 Bn	3 57						
				" 574 16-9-18 2 C.G.H	4 46						
				" 2050 30-9-18 C.S.D.	4 46						
		33		" 15750 14-9-18 2 C.D.	1 49			15	173 57		
					1H 27				Balance Forward		

NUMBER 100062 / RANK ~~Pte~~ ~~L/Cpl~~ Cpl NAME SMITH A. H.

MONTH 1918	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Sep 30	Balance Forward								173 57	45	acct agreed 30/9/18
OCT	add pay as L/Cpl 27/8/18 to 30/9/18 - 35 dys @ 5/-	1 75		C A P				15			
	L/Cpl Pay	35 65		AR 1851 17/10/18 6 Bde	3 73						
				DR 2510 7/10/18 6 B.A.C. Dt	3 73						
				AR 2468 29/10/18 6 Bde	3 73				184 78	45	acct agreed 31/10/18
		37 40			11 19			15			
NOV	Promoted to Cpl 10-1-19 Nov Dec & Jan	105 80		C A P Nov & Dec				30			
	22 dys at 5/- = 22 dys = 1-10	1 10		" 2728 13/11/18 "	3 73						
				" 3506 28/11/18 27 Bn	13 06						
				" 3854 16/12/18 "	6 49						
				C A P Jan				15	222 30	45	
		105 80			23 28			45	70 80		
FEB				6P 92217 27/12/18 London	24 33				293 10		
	Feb & Mar Cpl Pay	70 80		AR L 6470 27/12/18 27 Bn	97 33				176 04		
				" 3948 26/12/18 "	3 89						
				" 4915 21/1/19 "	3 73						
		70 80		" 5222 9/2/19 "	3 73						
				" 5694 25/2/19 "	3 73						
				6415 11-3-19 "	3 65						
				C A P Feb & Mar				30			
				7032 21-3-19 "	3 65				1 89 06		
					144 04			30			
Apr	Cpl Pay	36 -									
	Int on def Pay to 30-4-19	4 87		C A P Apr.				15	148 93		
				231 3-4-19 "	3 65						
				512 16-4-19 "	68 13						
				2016 5-5-19 Lond on L.P.C. "	9 73				63 42		
		40 87			81 51			15			
				S.O.S 13.5.19 S/L 62 mkd							

P. 559
MARRIED OR SINGLE S.

PLACE OF BIRTH Northumberland Co Ont.

NAME AND ADDRESS OF NEXT OF KIN R. W. Smith.
Glenella. Man.

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
Awarded Good Conduct Stripe	10.2.18.	Bo. 19/1/18 20.

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 1006621 RANK Pte NAME Smith Albert Henry.

IF IN PERMT. CORPS WHAT UNIT UNIT 226th Bn TRANSFERRED TO 14 H.R. Bn. DATE 31/3/17. AUTHORITY Bo 84

PERMANENT FORCE ALLOWANCES TRANSFERRED TO 27th Bn DATE 1-11-17 AUTHORITY Nom Roll

PLACE OF ATTESTATION Keeseva. Man. TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION Feb 10 1916 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 15.00 DATE EFFECTIVE 1st April 1917 A2M6 Form 24/3/17. B.

PAYABLE TO Mr Robert Henry Smith. Glenella, Man. 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) C.J.

DATE 1917	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 DATE	2 No.	2 DATE	3 No.	3 DATE	4 No.	4 DATE	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
														24 10	24 10																24 10				Bal from Can
Jan 1/31	31	1.10	31		31	10	3	10							34 10															58 20		15		
Feb 1/28	28	1.10	30	80											30 80															89		30		
Mar 1/31	31		34	10											34 10	156	34/3	73	15/3					19 46	58 40				77 86	15 24		45	
Apl 1/30	30		33												33												15		15	63 24		45		Transfd to 14 H.R. 31/3/17
May 1/30	30		33												33												15		15	91 24		45		
May 31	1		1	10											1 10	182	28/4							9 96					17 04	65 30		45	
June 1/30	30		33												33	301	15/5							7 30									
																391	31/5							9 73					34 45	63 84		45	
July	31		34	10											34 10									9 73				15	15	82 94				
Aug.	31	1.10	34	10											34 10												15	15	102 04		45		
Sept	30		33												33												15	15	120 04		45		
			300	30										24 10	324 40									55 96	58 40		90 00	204 36					
			300	30										24 10	324 40									55 96	58 40		90 00	204 36					

1000621. Pte Smith. A. H.

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
MONTH	PARTICULARS				CR. 1			CR. 2	PARTICULARS					DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SERVICE ALLCE. ENG.															
Oct					~~180 04~~													180 04																	
"	Pay 31 Days @ 1/10				34 10								A.S.P.					15																	
													D.R. 27662. 576. 26/9/17. 27th Bn.	2 68																					
													D.R. 32235. 618. 4/9/17 " "	2 68																					
													~~D.R.~~ 5485 505 5/8/17 " "	2 68																					
					34 10									8 04				15 00		131 10															
Nov.	30 days A.P.				33 00								a/c 771 7/10/17. 27 Bn	3 54				15																	
Dec.	"				34 10								" 776. 19/10/17 " "	4 46																					
													D.R. 26962. a/c 112. 11/11/17. 2 Bn	4 46																					
													D.R. 25166. a/c 1442. 17/12/17. 27 Bn	5 35																					
													" 25969. a/c Canc. 25/6/17. 2 Bn	2 64																					
													a/c 822. 4/11/17 27 Bn	3 54																					
1918					67 10								a. P. C.	24 08				15 30		144 12															
Jan	31 " " "				34 10								Can. A. Pay.					15																	
													a/c 862 23/11/17 24 Bn	13 38																					
													" 905 13 12/17 —11—	3 57																					
													" 947 23 12/17 —11—	4 46																					
					34 10									21 41				15		141 81	45														
Feb.													b a/c					15																	
	28 days P. P.				30 80								a/c 942. 6/1/18. 24 Bn	3 57																					
													H.C. (E) 2905 17 1/18 —11—	24 33																					
													a/c 1009 - 25-1-18 ✓	4 46																					
													" 1089 - 13.2.18 ✓	3 57																					
					30 80									35 93				15		121 68															
Mar.													b a/c					15																	
	P P				34 10								a/c 1135 24-2-18. 27th Bn	4 46																					
													a/c 1178 4/3/18 27 Bn	3 57																					
													a/c 1228 17/3/18 27 Bn	4 46																					
					34 10									12 49				15		128 29	45														

DA · M.
O.Q. 1.

WAR SERVICE BADGE
CLASS "A" No. 14144.

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 1000621.

2 Rank. Corporal.

3. Name. SMITH. ALBERT HENRY.

4. Unit. 27th Battalion

5 Date of Discharge | 2. 5. 19. | Place ~~Glenella~~ Winnipeg Man

6 Reason for Discharge Demobilization.

7. Authority. DO 150

8. Proposed Residence after Discharge Glenella Man.

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.?

A. H. Smith
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place H.M.T. NORTHLAND

Date H.M.B. LIVERPOOL 13-5-19

H.M.B. HALIFAX 23 5 19

Signature [illegible]
(O. C. Discharging Unit.)

Dispersal Station No. 1 Military District No. 10 MAY 26 1919

M.F.B. 218a—300M.-11-18—1772-39-113.

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

1. Triplicate Attestation Paper (M.F.W. 23). or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39) (Enclosed in special envelope (260M)),
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing } Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851). Dup.
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group 18

Checked by No.....

.....

Date 10 MAY 1919

L.L. 19226—M. & D. 7814.

Father

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

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

To Whom Robt. Ly. Smith

Address Glenella, Man.

By Whom Assigned Smith, Albt. Ly.

Regtl. No. 1000621

Rank Pte

Corps 226th Btn.

Rate $1.15 Apr. 1/17.

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
				2 M 4/4/17 RS. 20/5/17.
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

CONSOLIDATED 7 ACCOUNT

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

S

14626

Date of Assignment Apr 1/17

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15			

father

8L13519 D'

PARTICULARS OF SEPARATION ALLOWANCE

No. 100621

Rank Pte Promoted Reverted Discharge

Soldier's Name Albt Hy Smith

Battalion 226th Battn

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Robt Hy Smith

Address Glenella, Man

Change of Address

1

2

3

4

016961-a-723

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Dec 31			135	135	
1918 Jan	X 70709		15	15	2Dn 4/4/17
Feb 18	Q 72785		15	15	
Mar "	T 91367		15	15	
Apr "	T 10868		15	15	
May	Y 13253		15	15	
June	W 25285		15	15	
July	C 22984		15	15	
Aug	W 34911		15	15	
Sept	W 45350		15	15	
Oct	P 48653		15	15	
Nov	Y 55727		15	15	
Dec	J 64949		15	15	
Jan	D 69869		15	15	
Feb	L 79720		15	15	
	N 82309		15	15	
Apr	U 2919		15	15	
May	O 8669		15	15	
			390	390	

A/c Closed 31/5/19

Ret'd per Northland

Date 23/5/19 M.F.W.187 29/5/19

Clerk Croft

H

#10. M Rodeo LP 89014

HAS BEEN M... FOR THIS ACCOU...

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—1772-39-1141
L. L. 22320—M. & D. 7993.

NORTHLAND

AUDITOR | PAYMASTER

M. OR S. F 2187

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

REGT. No. 100621 RANK 6pl. NAME (IN FULL) Smith: A.H. (BLOCK LETTERS SURNAME FIRST) 26

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Nil — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
26		

ORIGINAL UNIT C.E.F. 226th Bn. — IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO Dis Str M — DATE MAY 13 1919 — AUTHORITY D.O. 150

DATE OF ATTESTATION 10-2-16. — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 15-00 — DATE EFFECTIVE 1-6-19.

PAYABLE TO Mrs. K. A. Smith Mother — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Glenella. Man.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE M.D. 10 — DATE MAY 26 1919 — REASON D — AUTHORITY D.O. 150 — IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	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.			TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT							73	15	73	15																									73	15	CRAL. ENG. L. P. O. 73.15. Paid to 2-6-19
1/5 to 31/6	33	1 20/100	39	60	70	00			144	60			264	22			4	84	5	00	183	15	15	00							214	75					Clothing Allce. 1st payment W.S.G. Advances - Boat - Train
																	9	73																			A.F. chgd. on Eng. L. P. O. to May 6 Cheque
			WSG	SA							War Service Gratuity.												WSG	SA											Soldiers Dependents
18.3 Days at Min	420	00			420	—																	70	00							70	·	350	00	Nil	1st Payment W S G as above
																													840		840		341	60	Nil	
22/7																	797643		140	-											140	·	201	60		140 203 Pay Lists
											26/8/19						1223310		70	·											70		131	60		70 4th " "
											26/9/19						1245223		70	·											70	·	61	60		70 5th " "
											OCT 26 1919						1696698		61	60											61	60	-			6th " "
(5)							420	·															411	60			840				420					
																																				a/c Closed

AUDITED OCT 27 1919 Audit Clerk M.D. 10

200M-3-19.—L. ... 58765-1. & D. 9985.
M. F. W. 2.96.