

Triplicate.

Triplicate.

7 M. D. 65th, Depot Battery O. E. P. Regiment

Regtl. No. 336205

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class 1)

1. Surname Smith.
2. Christian name Benjiman Nash.
3. Present address Woodstock, N. B.
4. Military Service Act letter and number
5. Date of birth September 6th, 1896
6. Place of birth Woodstock, N. B.
7. Married, widower or single Single.
8. Religion O. of E.
9. Trade or calling Clerk.
10. Name of next-of-kin Mrs Edith Smith.
11. Relationship of next-of-kin Mother.
12. Address of next-of-kin Woodstock, N. B.
13. Whether at present a member of the Active Militia No.
14. Particulars of previous military or naval service, if any No.
15. Medical Examination under Military Service Act:—
(a) Place Woodstock, N. B. (b) Date 13th, Oct. 1917 (c) Category A 2.

DECLARATION OF RECRUIT

I, Benjiman Nash Smith, do solemnly declare that the above particulars refer to me, and are true.

Benjiman Nash Smith (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 21 yrs 4 mths.
Height 5 ft 6 ins.
Chest measurement fully expanded 35 1/2 ins.
range of expansion 2 1/2 ins.
Complexion Fair.
Eyes Gray.
Hair Brown.
Distinctive marks, and marks indicating congenial peculiarities or previous disease.
Hearing Normal.
Vision R D 20/20
L D 20/20
Vacc. 1 left.
Childhood.

J. H. Wams Major.
O. C. 65th Depot Bn.
O. E. A. C. E. P. Regt.

Place Woodstock, N. B. Date December 27th, 1917.

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

Class

1.	Surname	
2.	Christian name	
3.	Present address	
4.	Military Service Act letter and number	
5.	Date of birth	
6.	Place of birth	
7.	Number of widow or child	
8.	Religion	
9.	Trade or calling	
10.	Name of next of kin	
11.	Relationship of next of kin	
12.	Address of next of kin	
13.	Whether at present a member of the A.S.C. (India)	
14.	Particulars of previous military or naval service if any	
15.	Medical Examination under Military Service Act	
(a) Place		
(b) Date		

DECLARATION OF RECRUIT

I, _____ do solemnly declare that the above particulars refer to me and are true.

(Signature of Recruit)

DESCRIPTION ON CALLING UP

Height		Approximate
Weight		
Complexion		
Type		
Hair		
Build		
Stature		
Complexion		
Type		
Hair		
Build		
Stature		

Place _____
M. S. No. _____
1917-18

ADVA



SURNAME.

Smith

CARD NO.

leaf over 87

CHRISTIAN NAMES

Benjiman Nash

50524-7-19

demob. COLL.

50213-4-18-19

1722

REGL. NO.

336205.

RANK

Gr.

UNIT

65th. Hq. Bty.

FORMER CORPS

nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Smith Mrs. Edith

RELATIONSHIP TO SOLDIER

Mother.

ADDRESS

Woodstock N. B.

COUNTRY OF BIRTH

Canada, Woodstock

DATE

N.B. Sept. 6th. 1896.

PLACE OF ATTESTATION

Woodstock N. B.

DATE

Dec. 27th. 1917.

O/S. 25-3-18 ¹¹³⁶/₃.

N/B 28-7-19 379 Dvr

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE

m. *g* Number 336205.

Rank *Gur*

RA
W

Surname *SMITH*

Christian Name *Benjamin Nash*

Units *Nth Regt. E. F. Theatre of War* *Siberia*

Date of Service *1-10-18.*

Remarks

Latest Address *Woodstock N. B.*

Roll No *B*

200m. - 2-21.M. *Page 11636*

Next of kin

Address on leave

Address on discharge

Transportation issued

Yes No
Date

Previous occupation

Diagnosis

Date

Character on discharge

Date and place of enlistment

Date of Medical Boards

Remarks

DESP. MAR 24 1922
REGN. NO. 81790

DESP. APR 6 1922
REGN. NO. 11111

Ret. O. Retd 5-4/22

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

CANADIAN EXPEDITIONARY FORCE

WAR SERVICE BADGE

DISCHARGE CERTIFICATE

CLASS A NUMBER

THIS IS TO CERTIFY that No. 236205 (Rank) Driver

Name (in full) Benjamin Nash Smith enlisted in
the 65th Battalion C.F.A.

CANADIAN EXPEDITIONARY FORCE at Woodstock on the 27th
day of December 19 17

HE served in 16th Brigade C.F.A. Russia

Demobilization.

and is now discharged from the service by reason of ~~Medical Unfitness.~~

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

Age 22 years

Height 5 feet 6 inches

Complexion Fair

Eyes Grey

Hair Brown

B. Nash Smith
Signature of Soldier.

Marks or Scars.....

Date of Discharge



Ranking Officer H. B. FOR
DISPERSAL STATION O. C. DISTRICT DEPOT #7

Rank

Date JUL 29 1919 19.....

NB- 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.

- 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.

CLASS **A**
WAR SERVICE BADGE
NO. **290410** Issued

LTR

Rank

Name

SMITH, Benjamin Nash

Reg'l No. 336205

Unit **No. 8. Dft. 65th Batty**

If in perm. Corps, }
What Unit? }

Married or Single **Single.**

Place and Date of Enlistment **Woodstock, Dec. 27th, 1917.** Place of Birth **Woodstock, N.B.**

Name and Address, Next-of-Kin **Mrs Edith Smith**

Woodstock, N.B. Relationship **Mother.**

Assigned Pay Monthly \$ Payable to

Relationship

Separation Allowance \$ Payable to

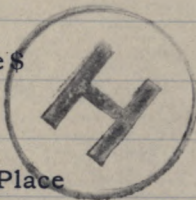
Relationship

Discharge, Date and Place

Reason

Character

H. W. V., Ld.—9546-16.



F.B.I. 100 CHECKED
12 SEP 1918

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.				
		Arrived in England			
8-3-18	Rest B^{de}	205 from quada	In	3-4-18	S/S GRAMPIAN
9-9-18	~	SOS 16^{de} B^{de} Cya	"	3-4-18	P.O. 94
23-9-18	16^{un} B^{de}	Pro/Sec to WREFF. with 16^{un} B^{de}	by	8-9-18	257. 46^{de} B^{de} 19 d/10/18
16-10-18	~	Disembarked Archangel	by	20-9-18	~ 28
		DANADIAN ARTILLERY			
9*10*19	Records	S.O.S. TO CANADA	London	18-7-19	A O 4
		To Canada		98-C-136	18-7-19

only

U.S.B. Class "A"

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. 65th Depot Battery C. E. A., C. E. F.

Regimental No. 336205 Rank Private Name Benjamin Nash Smith.
C. E. F.

Enlisted (a) 27/12/17 Terms of Service (a) Duration War + 6 mos. Service reckons from (a) 27/12/17

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

Extended Re-engaged Qualification (b) Clerk.

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				
		<u>Embarked</u>	<u>Helfx</u>	<u>22/3/18</u>	
		<u>Disembarked</u>	<u>Glasgow</u>	<u>3/4/18</u>	<u>Lt. Graupian</u>
<u>8/4/18</u>	<u>Les Bde C.E.A.</u>	<u>208 from Canada</u>	<u>Witley</u>	<u>3/4/18</u>	<u>B.O.M. II 98 98</u>
<u>9-9-18</u>	<u>Res. Bde. C.F.A.</u>	<u>B.O.S. to 16th Bde. C.F.A.</u>	<u>Witley</u>	<u>7-9-18</u>	<u>B.O. Pt. II 252</u>
<u>14-9-18</u>	<u>Ob. 16th Bde. C.F.A.</u>	<u>I.O.S. from Res. Bde. C.F.A.</u>	<u>Witley</u>	<u>7-9-18</u>	<u>Lt. & Asst. Adj. Reserve Brigade, C.F.A.</u>
<u>23-9-18</u>	<u>"</u>	<u>Proceeded on leave to Northern Russia</u>	<u>H. M. S. "Stephen"</u>	<u>20.9.18</u>	<u>Pl. 100.28.</u>
<u>16.10.18</u>	<u>"</u>	<u>Arrived at Archangel</u>	<u>Field</u>	<u>1.10.18</u>	<u>Pl. 100.32. Co. 2. Lt.</u>

CERTIFIED CORRECT.
 12 SEP 1918
 CAN. RESERVE, C. DIVISION.

(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]

W. S. B. CLASS A
W. S. B. CLASS 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				
	16 th Bde C. F. A.	Embarked for U.K. per. H.M.S. "Egareza" 11.6.19		Pt. 150	
16-7-19	CARD	Sol O.M.S.C. proceeding to Canada	W.C. King Major, Officer i/c Base Records, N.R.E.F.		LIEUT. OFFICER i/c RECORDS, <i>[Signature]</i> Lieut. & Asst. Adjt. For O. C. District Depot No. 7.
31/7/19	Eng.	TAKEN ON STRENGTH PART II. ORDER No. 212 ST. JOHN, N. B.	H.M.T.S. WINIFREDIAN EMBARKED 18-7-19	18/7/19	Lieut. & Asst. Adjt. For O. C. District Depot No. 7.
31/7/19	Asst. H.M.S.	STRUCK OFF STRENGTH PART II. ORDER No. 212	District Depot No. 7.	29/7/19	Lieut. & Asst. Adjt. For O. C. District Depot No. 7.

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..... 65th. Depot Battery C. E. F.

(2) Regimental Number 336205

(3) Full Name of Soldier..... Benjiman Nash Smith.

(4) Place of Birth..... Woodstock, N? B?

(5) Are you married, or not? No.

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

(b) Present Postal Address.....

(7) Are you a widower?

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

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

Also their names and ages.....

(9) Is your Father alive?.....**Yes.**.....

If so, state name and address **Charles Allan Smith, Woodstock, N. B.**

(10) Is your Mother alive?.....**Yes.**.....

If so, state name and address **Mrs Edith Smith.**

Woodstock, N. B. Carl. Co.

(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?.....**Yes.**.....

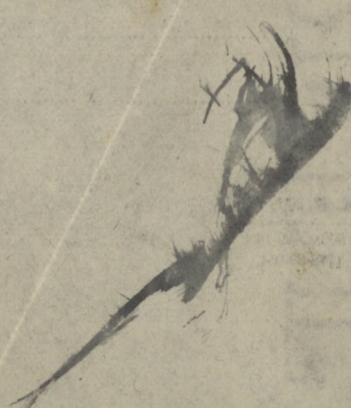
If so, in what Company? **Canada Life & Imperial Life Ass. Co.**

Have you made arrangements for payment of your Insurance premium.....**Yes.**.....

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

Date **December 27th, 1917.**

J. M. Evans
.....
Officer Commanding
Commanding 65th Depot Battery C.F.A.



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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationary Services, London

NAME OF SOLDIER (Block Letters) SMITH. BENJAMIN NASH.
 REGIMENT C.F.A. RANK DVA No. 336205

Date of Examination in England 4 July 19 Date of Examination in France _____



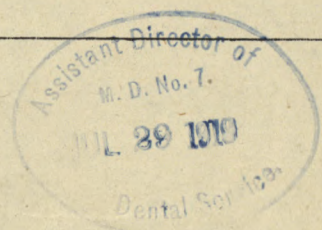
DIRECTIONS TO DENTAL OFFICERS

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



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 1. 2. 6. 7. 8. 9. 10. ~~11~~ ~~12~~ 17.
2. EXTRACTIONS 15. 31.
3. CROWNS nil
4. DENTURES
 - (a) Full Upper
 - (b) Part Upper nil
 - (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 no
 - (c) In France no
 - (d) nil

Signature of Dental Officer C. R. Wilkes

1850

1850

1850

1850

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS DIVISION 7

NAME OF SOLDIER..... **SMITH, B.N.**..... No. **336205**
 REGIMENT **C.F.A.**..... RANK..... Driver.



DATE	No.	FILLINGS				Extracted	Anesthetic	Treated	Crowns	Cleaned	As 2° 3	Pulp Removed	Put Pulp	Artificial Teeth	OPERATOR	REMARKS
		Amal.	Phosp.	G. Per.	Cement											
1920 June		2				2	1920								D. A. R. Currie	
		32					12/19/20								COMPLETED.	

Jas. W. Magee Major
 District Dental Officer,
 Military District No. 7



DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

Division

336205

Driver

RANK

7

CADC 5009A.

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

DENTAL CERTIFICATE FOR DEMOBILIZATION.

Directions to Dental Officers.

NAME OF SOLDIER

SMITH B.N.

REGIMENT C.F.A.

RANK

DVR

No.

336205

Date of examination in England

4.7.19

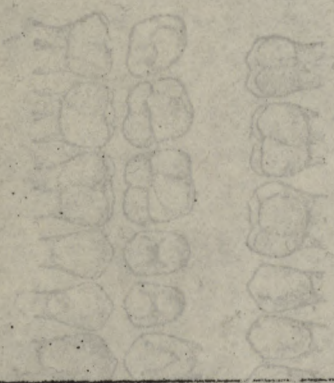
Date of examination in France.

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.

CHART



Present Dental Requirements.

1. Fillings 1.2.6.7.8.9.10.12.17.

2. Extractions 15.31.

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 (b) In England (c) In France.

Signature of Dental Officer. W.R.Wilkes. Capt.

1 OCT 1917

Original No. 336205

MEDICAL HISTORY SHEET

Surname Smith Christian Name Benjamin Ash

Examined { on 27th day of December 191 7
 at Woodstock, N. B.
 Birthplace { City or Town Woodstock,
 County Carlton, N. B.

Approved by [Signature]

Rank _____ M.O. _____

Apparent age 21
 Trade or occupation Clerk
 Height 5 feet 6 Inches
 Weight 135 lbs.
 Chest measurement { Minimum 33 inches
 Maximum expansion 2 1/2 inches
 Physical development Good
 Small-pox Marks None.

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 One.

Date	Result	VACCINATIONS
<u>28/12/17</u>	<u>[Signature]</u>	M.O.
<u>5/1/18</u>	<u>[Signature]</u>	M.O.
<u>16.3.18</u>	<u>[Signature]</u>	M.O.

When Vaccinated last Childhood.
 (a) Marks indicating congenital peculiarities or previous disease None

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>28/12/17</u>	<u>[Signature]</u>	M.O.
<u>5/1/18</u>	<u>[Signature]</u>	M.O.
<u>9.3.18</u>	<u>[Signature]</u>	M.O.

(b) Slight defects but not sufficient to cause rejection None.

Enlisted on 27th day of December 191 7 at Woodstock, N. B.

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>65th, Battery,</u>	<u>336205</u>		<u>27/12/17.</u>
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT
<u>WOODSTOCK, N. B.</u>	<u>4/3/18</u>		<u>A2</u>

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.

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

THIS SECTION FOR USE OF OFFICERS

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. 336205 Rank Doc Surname SMITH
 (Given name in full) Benjamin Nash
 Unit or Corps C.F.A. Birthplace Woodstock N.B.

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

I. GENERAL DESCRIPTION:

Physique mt Weight 154 lbs. Height 5 ft. 7 in. Colour of Eyes blue
 Nutrition good
 Pulse normal
 Condition of arteries good
 Vision Rt. 20/6 Left 20/6
 Hearing (conversational voice) Rt. 20 ft. Left 20 ft.

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

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.

present condition good

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Ripon.....(Overseas)

Date 7/7/19..... Signed W. R. Kerr 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 B. D. 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.)

* Strike out whichever inapplicable.

ASSIGNED PAY. ENGLAND or CANADA. SEPARATION ALLOWANCE. ENGLAND or CANADA.

NAME:- SMITH Benjamin Nash.
NUMBER:- 336205

EFFECTIVE DATE:- 1/78
EFFECTIVE DATE:-

AMOUNT:- \$20
AMOUNT:-

PARTICULARS OF RANK OR APPOINTMENT		
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
Gan L.P.C.		Gr.

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 E. Smith (Mother) n/r.
Woodstock n.s.

stopped 1.8.19

UNIT AND TRANSFERS

ORIGINAL UNIT:- # 80 ft. 65 B24
DATE ACCOUNT FIRST OPENED:- 1-78

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S/D	UNIT TRANSFERRED TO
	1.8.19	21.7.19	16 dca

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
16.6	77	Russia	4.47				
17.6	27	Ripon	97.33				
8.7		Area Pool	24.33				
		4 days pay	4.40				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
Gan L.P.C.	1.00	10		

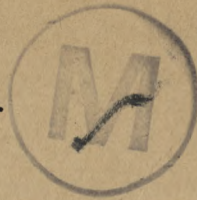
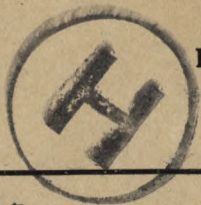
PARTICULARS OF RENDERING NON-EFFECTIVE Dis of Anos 31.7.19 nr 11590 Ripon 9.7.19 to Ripon nr 27 Credal 80.96

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
31/78	Balance from Gan								10.10		
Apr	Gurs Pay	33.00		AR 417 20/4/18 CRA	2.43			20.00	20.67		
		33		Apr.	2.43			20			
May	Gurs Pay	34.10		b.a.p.				20	34.77		
				AR 740 1-5-18 CRA	19.47						
				AR 1481 23-5-18 do	2.43				12.87		
		34.10			21.90			20			
June	Gurs Pay	33		b.a.p.				20	25.87		
				AR 1893 12-6-18 CRA	2.43						
				AR 2295 16-6-18 do	4.87				18.57		
		33			7.30			20			
July	Gurs Pay	34.10		b.a.p.				20	32.67		
				AR 2701 10-7-18 CRA	4.87						
				AR 3016 14-7-18 do	4.87				22.93		
		34.10			9.74			20			
Aug	"	34.10		b.a.p.				20	37.03		
				AR 3581 14/8 "	4.87				32.16		Agreed 27/8/18
		34.10			4.87			20			
Sept	Sp.	33		AP.				20	45.16		
				AR 4459 16/8 11/9	4.87						
				" 4195 CRA 1/9	14.60				25.69		
		33			19.47			20			
Oct	Spex	34.10						20	39.19		
		34.10						20			

NUMBER	RANK	NAME	MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
				gp Fwd.								39 74		
Nov					33		cat				20 -			
Dec					34 10		cat				20			
Jan					34 10		cat				20			
					101 20						60	80 99		
Feb					30 80		cap Feb				20			
Mar					34 10		at				20	105 84		
					67 10						40			
Apr					67 10		AR				40			
							AR & 47. 1607a 27.17	7 60 ✓				125 39		
								7 60			40			
							Du 61 16 bde 27/3	10 14 ✓						
							Artic allow 1.11.18 to 20.4.19							
							181 DAYS AT 12 CENTS per diem	21 72						
							Bonus 1.2.19 to 31.6.19							
							@ 10/6 per d/week #9-16-6	47 82			20			
June					33		June AP				20			
July					34 10		July AP				20			
							Du 27 16 bde 19/6	97 33				114 56		
								107 47			40			
							455 " 8/7	24 33				85 36		
							97 " 16/6	487				61 03		
							685 " 15/7	24 33						
								58 53						
							HK Day Pay		440			566 3		

Lot. 15 7/9. No 98

SHORT FORM.
 PROCEEDINGS ON DISCHARGE.
 (Demobilization.)



H.M.T.S. WINIFREDIAN
 EMBALLED 18-7-19

13 C

1. No. 336205.
 2. Rank. Pvt.
 3. Name. Smith - Benjamin Nash.
 4. Unit. 16th C 7a Brigade. D.D. No. 7
 5. Date of Discharge JUL 29 1919 Place ST. JOHN, N.B.

6. Reason for Discharge Demobilization
 Dispersal Gp - "E"
 Occup " - 3.
 Svc " - 31.
 Religion - Catholic
 Next of Kin - Mother

7. Authority. R.O. 1420

8. Proposed Residence after Discharge. Woodstock N.B.

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.? ³⁹ A
 290410.
 B. Nash Smith
 Signature of Soldier.

10. CONFIRMATION.
 The discharge of the above named man is hereby confirmed.
 Place.....
 Date.....
 Signature.....
 Ramond Capt
 (O. C. Discharging Unit.)
 DISPERSAL STATION "C" DISTRICT DEPOT #7



O. C.
 N. B. FOR
 DISTRICT DEPOT #7

SHORT FORM
PROCEEDINGS ON DISCHARGE
(Description)

1	Name of Soldier	...
2	Rank	...
3	Company	...
4	Regiment	...
5	Division	...
6	Department	...
7	Grade of Discharge	...
8	Remarks	...
9	Signature of Soldier	...
10	Signature of Discharge Clerk	...

THE SIGNATURE OF THE SIGNED PARTY IS HEREBY CONFIRMED.

CONFIRMATION

Signature of Discharge Clerk

Signature of Soldier

Signature of Discharge Clerk

LIST OF DISCHARGE DOCUMENTS

Assessment Paper, Philadelphia	Medical Form W-28
of Particulars of Receipts	Medical Form W-187
Field Contact Sheet	Medical Form W-172 or A-1, B-1, 122
Outsiders Form	Medical Form W-24 or A-1, B-1, 184
Last Pay Certificate	Medical Form W-44
Certificates that missing documents are indispensable	
Medical History Sheet	Medical Form W-103 or A-1, B-1, 174
Proceedings of Medical Board	M. F. B. 207, A-1, B-1, 174 or A-1, B-1, 174
Dental History Sheet	Medical Form W-103
Medical Report	M. F. B. 207, A-1, B-1, 174 or A-1, B-1, 174
Regimental Contact Sheet	Medical Form W-103
Company Contact Sheet	Medical Form W-103

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 (U.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 (269M)).
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. 351).
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group..... 2-1
 Checked by No. 22
 Date 1/17/19

Date of Enlistment 27/12/17

MILITIA AND DEFENCE

Date of Assignment

E. B. N.

Separation and Assigned Pay Branch

1st Apr. 1918

OVERSEAS CONTINGENTS

S

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

7580

20 ⁰⁰			
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PARTICULARS OF SEPARATION ALLOWANCE

No. **336205**
 Rank **Gnr** Promoted **Reverted** Discharge
 Soldier's Name **Nash Benjamin Smith**
 Battalion **65th Depot Battery C.F.A. 8th Dfl.**
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name
 Address
 Change of Address
 1
 2 MRS EDITH SMITH,
 WOODSTOCK,
 N.B. 20 20.00
 3 % 336205 GNR: NASH BENJAMIN SMITH
 TWENTY DOLLARS
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total
1918 April	11334	—	20	20
May	14580		20	20
June	26556		20	20
July	24264		20	20
Aug.	36001		20	20
Sept.	49677		20	20
Oct	49971		20	20
Nov	57053		20	20
Dec	65809		20	20
Jan	71052		20	20
Feb	80806		20	20
MAR	83325		20	20
APR	8717		20	20
May	5348		20	20
June	10956		20	20
July	12523		20	20
			320	320

016961-B-94. REMARKS m. A. 7

AUTHORITY FOR NEW ACCT.

M. F. W. 128
400M-617-1172-38-1141
L. L. 22520-M. & D. 7888.

A/c Closed 31.7.19
 Ret'd per *K. Mitchell*
 Date 28.7.19 M.F.W. 187 6/19
C. Mitchell

M.R.D. "Des." R.P. 100816.

AUTHORITY FOR NEW ACCT.
V. B.
Mr. D. W. B. 3...
W. Shipley, 24-48

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

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PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
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M. F. W. 128.
 400M. 17-1772 39-1141
 L. L. 22320-M. & D. 1968.

M.D. No. 7

Royal Bank of Canada, Woodstock, N.B. AUDITOR PAYMASTER

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

REGT. No. 336205 RANK *Ens.* NAME (IN FULL) *Smith Benjamin N.*

Form with fields for NEXT OF KIN, RELATIONSHIP, PARTICULARS, EFFECTIVE DATE, AUTHORITY, ORIGINAL UNIT C.E.F., PLACE OF ATTESTATION, TRANSFERRED TO, DATE, AUTHORITY, DATE OF ATTESTATION, TRANSFERRED TO, DATE, AUTHORITY, IS SEPARATION ALLOWANCE PAID?, DATE EFFECTIVE, ASSIGNED PAY \$, DATE EFFECTIVE, PAYABLE TO, ADDRESS, RELATIONSHIP, ANY CHANGE IN ASSIGNEE OR ADDRESS, STOP PAYMENT FORM, ASSIGNED PAY RENDERED, DATE, EFFECTIVE, DISCHARGED, PLACE, DATE, REASON, AUTHORITY, IF ENTITLED TO POST DISCHARGE PAY.

Table with columns: MONTH, PAY AND F.A. (NO. OF DAYS, RATE, AMOUNT), OTHER CREDITS, TOTAL CREDITS, ACQUITTANCE ROLLS (COL. NO. 1, 2, 3), CASH PAYMENTS (COL. NO. 1, 2, 3), ASSIGNED PAY, REGIMENTAL CHARGES, OTHER CHARGES, TOTAL DEBITS, BALANCE (DEBIT, CREDIT), PARTICULARS OR REMARKS.

BALANCE FROM PREVIOUS ACCOUNT

July
Aug.

Table rows with handwritten data: July (56.63), Aug. (220, 35.00, 70.00, 107.20, 6.8, 6.8, 1.7, 4.87, 5.00, 153.96), WAR SERVICE GRATUITY (122 days at # Min 280.00, 280.00), NON-EFFECTIVE (280.00, 280.00, 275.60, 440, 280.00).

Particulars or Remarks: *Wimped on 28-7-19*, *cr Bal Reg S.P. 31-7-19*, *recd. allow 1st P.W. 89*, *1st P.W.S.G. as above*, *Over cr 80 d on d...*, *Ex 126225 29/8/19*, *cr 132948 cr 136-29/9/19*, *cr 1536105 cr 182-29-19*.

