

Duplicate
8-5-19

Not on roll

9-10

511

ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... *William Hebdidge Stacey*
2. In what Town, Township or Parish, and in what Country were you born?..... *Southernhampton England*
3. What is the name of your next-of-kin?..... *George Greenway*
4. What is the address of your next-of-kin?..... *295 George St Toronto Canada*
5. What is the date of your birth?..... *18th February 1894*
6. What is your Trade or Calling?..... *Farm Labourer*
7. Are you married?..... *No*
8. Are you willing to be vaccinated or re-vaccinated?..... *Yes*
9. Do you now belong to the Active Militia?..... *Yes*
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*

William H Stacey (Signature of Man).
George A. Louch (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *William Hebdidge Stacey*, do solemnly declare that the above answers made by me to the above questions 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.

I te. *26th October* 1914. *William H Stacey* (Signature of Recruit)
George A. Louch (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *William Hebdidge Stacey*, 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 *26th October* 1914. *William H Stacey* (Signature of Recruit)
George A. Louch (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 entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at *Woodstock Ont* this *26th* day of *October* 1914.

F. Goulet (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

E. Skye (Approving Officer)

Description of William Hebdidge Stacey on Enlistment.

Apparent Age 20 years ✓ 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 5 ft. 9 ins.

Chest measurement { Girth when fully expanded 37 ins.
 Range of expansion 3 ins.

Complexion Brunette

Eyes Blue Gray

Hair Dark Brown

Religious denominations. { Church of England —
 Presbyterian —
 Wesleyan —
 Baptist or Congregationalist Yes
 Other Protestants (Denomination to be stated.) —
 Roman Catholic —
 Jewish —

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 October 26 1914.

Place Woodstock Ont.

A. Beverley Welford Steph
 Medical Officer.
22 Dept.

*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.

William Hebdidge Stacey 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.

W. Stacey (Signature of Officer)

Date 28th November 1914.

Change Next of

ORIGINAL ATTESTATION PAPER.

No. 1606981
Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION. (ANSWERS.)

1. What is your surname?..... *Stacey*
- 1a. What are your Christian names?..... *William*
- 1b. What is your present address?..... *330 Fishel St. North Bay*
2. In what Town, Township or Parish, and in what Country were you born?..... *Southampton Eng.*
3. What is the name of your next-of-kin?..... *Mary Stacey*
4. What is the address of your next-of-kin?..... *Southampton Eng.*
- 4a. What is the relationship of your next-of-kin?..... *Mother*
5. What is the date of your birth?..... *Feb. 18th. 1894*
6. What is your Trade or Calling?..... *Railway Freighter*
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?..... *3 months in 22nd Oxford Rifles*
11. Do you understand the nature and terms of your engagement?..... *yes* *Mr. J. W. Baird*
12. Are you willing to be attested to serve in the } CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } *yes* *(Aunt) Fenwick, Ont.*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *William Heddige Stacey*, 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 *Oct. 27th* 1916. *W. H. Stacey* (Signature of Recruit)
J. M. Cubbin Lieut. (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *W. H. Stacey*, 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 *Oct. 27th* 1916. *W. H. Stacey* (Signature of Recruit)
J. M. Cubbin Lieut. (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 *North Bay* this *27th* day of *Oct* 1916
S. Neeger (Signature of Justice)



Description of W. D. Stacey on Enlistment.

Apparent Age 22 years 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.) *nil*

Height 5 ft. 8 ins.

Chest measurement { Girth when fully expanded 38 7/2 ins.
 Range of expansion 3 1/2 ins.

Complexion ~~dark brown~~ medium

Eyes grey

Hair dark brown

Religious denominations. { Church of England
 Presbyterian
 Methodist
 Baptist or Congregationalist yes
 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 Oct. 27 1916 asst army med
 Place north bay h. i. a. m. e.
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.

W. D. Stacey 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.

..... (Signature of Officer)

Date Oct. 27 1916 O. C. NORTHERN FUSILIERS 228TH O. S. BATTALION

REGIMENTAL DOCUMENTS

20
6-5-19

NAME **STACEY** William et al. REGT. NO. 1086981 UNIT 228 Bn H. Q. FILE NO. 18

CONTENTS

S

1st Ed.
1

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

M

H

DEATH

Category

DISCHARGE

Category

Demob.

DESERTION

- 1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)
- 1 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)
- 1 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)
- 1 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)
- 1 DENTAL HISTORY SHEET (M.F.B. 465)
- 1 MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)
- 1 MEDICAL EXAMINATION (M.F.W. 129)
- 1 TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)
- 1 PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)
- 1 DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)
- 1 LAST PAY CERTIFICATE (M.F.W. 44)
- 1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)
- 1 PARTICULARS OF CHARACTER (A.F.W. 3226)
- 1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

37247

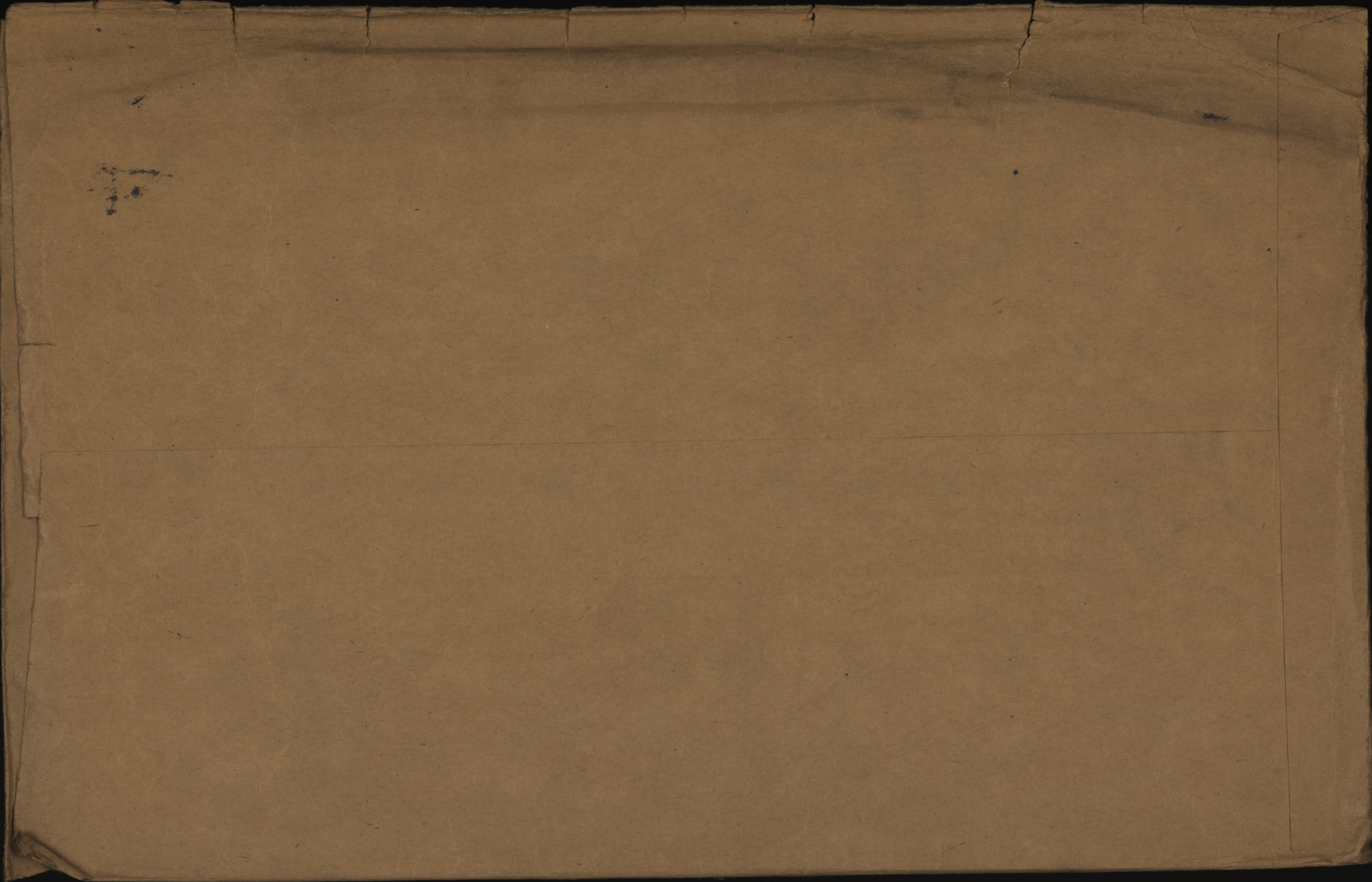
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CD3. Pay Card.
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No. 511

RANK

Pte

NAME

Stacey, W 18

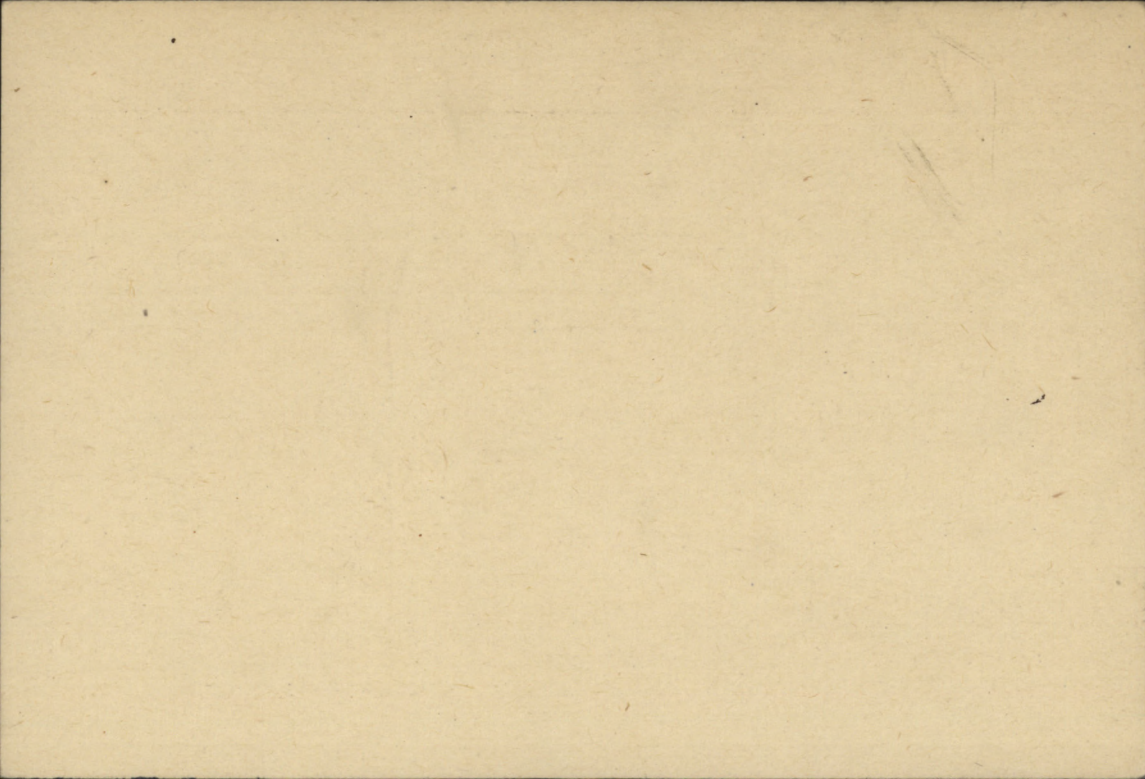
T. O. S.

UNIT

18th Battalion.

M. D. /

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914	1914			
Oct-26	Nov 30	✓		
	Dec	✓		
1915	1915			
Jan 1	Jan 14	✓	Dischgd 14-1-15	D.O. 76- Jan 1915:
			UNIT SAILED APR 18 1915	
a/c closed by payment B.				



Surname *Stacey* H. Q.
Christian names *William H. Hedges* M. D. No. *1*
Regtl. No. *511* Rank *Cte* T. O. S. 19
Unit *18th* S. O. S. *Dis 14-119 15^T* of
Reason *M. unfit*
Auth. *(Dis encl)*

Next of kin *Greenway, George* Relationship *Not Stated*
Address *295th George St, Toronto, Ont* Also notify:

BORN—Place *England, Southampton* Date *Feb 18th 1894*
ATTESTED—Place *Woodstock, Ont* Date *Oct 26th 1914*
O/S R/C

Complexion Brunette Eyes Blue Grey Hair D. Brown

H-513

SP4 R-13
R-13

Number 1006981

Rank

Surname

STACEY

Christian Name

William Heddige

Units

Can Ry Lps

Theatre of War

France

Date of Service

5-5-17

Remarks

Latest Address

Box 1250 North Bay
Out

Roll No.

B Page 12288

200m.-2-21.M.

DESP. APR 15 1922
REGN. NO. 269394/22

Dr v. Retd 24/22

DESP. MAR 19 1924
REGN. NO. 2820

William Hebdige

Name **STACEY** Rank **Spr.** Reg. No. **1006981**Unit **6th. C.R.J.D.**Next of Kin **Mrs E.W. Baird, Feronia, Ont. Can.**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918						
28-6	38 G.C. Station	Influenza		9255		32393
5-7	50 Unit	-do-		9261		32798
18-2-19	60. Mid to Top Hapnerway	St. Albans	Influenza	B457		7411
	Ref B457 d/26-2-19					
	Entry on C.h."B" to be cancelled please re-verify on C.h."C" as on strength of CRTD.			B496		
19-2-19	Disch		do	C540		4501
SHT	267519	see Rec that.				
	55 CRT 1-3-19					
				31-1-19		CRTD.

No. 1006981. RANK Pte.

NAME Stacey W. 26.

T. O. S. 27-10-16 UNIT 228th Battalion.
 D. O. 210.30-10-16 Construction Rec. M. D. 2

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
1916 Oct 27	1916 Oct 31	O. S.		
	Nov.	w		
	Dec	w		
1917 Jan	1917	w		
Feb. payfile not available				

UNIT SAILED
 FEB 1 6 1917



SURNAME.

Stacey

9.3 CARD NO.

CHRISTIAN NAMES

William H.

J. A. Die 2-4-19.

Rec'd FOLL.

D.O. 95 75-4-19.

REGL. NO.

1006981

RANK

Pte.

UNIT

228th

Bn

FORMER CORPS

22nd Oxford Rifles (3 mos)

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Stacey Mrs. Mary,

RELATIONSHIP TO SOLDIER

Mother.

ADDRESS

Southampton, Eng.

Also Notify - J.C. Thompson, Main St., North Bay, Ont.

COUNTRY OF BIRTH

England, Southampton

DATE

Feb. 18th, 1894.

PLACE OF ATTESTATION

North Bay, Ont.

DATE

Oct. 27th, 1916.

N/b. 30-3-19. 293/20 (Spr)

From St. John N.B. Per. S. S. "Missanahie" 16-2-17

MARRIED

SINGLE

yes

WIDOWER

TRADE OR CALLING

Railway
Freighters

RELIGION

Baptist or Congregation

DESCRIPTION.

- alist

APPARENT AGE

22

YEARS

MONTHS

HEIGHT

5

FEET

8

INCHES

CHEST MEASUREMENT

38 1/2

INCHES

EXPANSION

3 1/2

INCHES

COMPLEXION

Medium

EYES

Grey

HAIR

Dark Brown

DISTINGUISHING MARKS

Nil

MEDICAL EXAMINATION.

PLACE

North Bay, Ont.

DATE

Oct. 27th, 1916.

Present Address

330 Fisher St., North Bay, Ont.

REG. NO. 1006981 NAME Stacey G. H.
(SURNAME FIRST)

RANK Plt CORPS 228 Batt

AGE 22 SERVICE 1/12

NAME OF HOSPITAL Exhibition Camp PLACE Toronto

DATE OF ADMISSION 18-11-16

DISEASE Bronchitis

DISCHARGE

OPERATION

DISCHARGED TO DUTY Yes.

TRANSFERRED TO Base Hospital 18-11-16 Discharge 22-11-16.

DISCHARGED BY MEDICAL BOARD

NAME

Stacey J. W.

REG'TL No. *1006981*

H. Q. FILE NO. 649.

RANK AND CORPS

Spr. 6th Can. Rly Sps.

FOLLOWS

No.

CABLE

NATURE OF CASUALTY

NO.

DATE

FOLLOWS

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A255	38 Cas. Clg. Stab	38.6-18	Influenza
A261-2	Discharged	3-7-18	" "
B457	@ Co. of Middlesex		
	war. Trapsbury St Albans.	18-2-19	Influenza
	Cancelled as per H. P.		
	B495		as this Soldier is on strength of Depot.
C478	County of Middlesex war. Trapsbury St Albans	18-2-19	Influenza
C540	" Disc.	19-2-19	" " "

SURNAME

CHRISTIAN NAME OR NAMES

REG. NO.

STACEY.

W.H.

1006981.

RANK
Spr.

UNIT

C.R.T. 6. *Depot.*

Co.

TROOP

BATTY.

HOSPITAL

39. C.C.S.

DATE OF ADMISSION

28-6-18.

6 of 4m. war. Napsbury.

18. 2. 19.

1.

HOSP.

2.

HOSP.

3.

HOSP.

4.

HOSP.

DIAGNOSIS

Influ'za. *R*

1.

Influenza R

2.

3.

DISPOSITION

DATE

C.I. 3-7-18. A255.

Dis. 3-7-18.

10-7-18 Q261②

REMARKS

Dis 19.2.19

26. 2. 19 B. 457. ✓

4-4-19 B. 495. Cancel Entry B457 (Infl.)

30.6.19 C540. as this soldier is on strength (Depot)

A.M.D. 2 Dept.

Bch. of D.G.M.S. O.M.F.C. London

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

2.

3.

4.

5.

6.

7.

Stacey, William Hebdidge

War Service Badge

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

M. F. W. 54. (A. F. B. 103.)

Class "A" No. 1006981

350M.—5-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps *228 Bn C.C.F.*

Regimental No. *1006981*

Rank *Plt*

Name *Wm. H. Stacey*

C. E. F.

Enlisted (a) *27/10/16*

Terms of Service (a) *Duration of War*

Service reckons from (a) *27/10/16*

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) *Roadster*

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				
<i>12/3/17</i>	<i>228th Bn</i>	<i>taken on strength 6th C.R.S.</i>	<i>Embarked</i>	<i>Canada 16-2-17</i>	
			<i>Arrived</i>	<i>England 27-2-17</i>	
			<i>Profleet</i>	<i>8/3/17</i>	<i>Part II D.O. 71</i>
<i>2/4/17</i>	<i>Depot</i>	<i>taken on strength</i>	<i>Profleet</i>	<i>2/4/17</i>	<i>Part II D.O. 81</i>
<i>5/5/17</i>	<i>Depot</i>	<i>Depot to 6th Bn</i>	<i>Profleet</i>	<i>5/5/17</i>	<i>Part II D.O. 114</i>
		<i>6 courses</i>			<i>H. J. Tompkins</i>
<i>28.5.17</i>	<i>6 C.R.S.</i>	<i>arrives in France</i>	<i>Field</i>	<i>5.5.17</i>	<i>Part II D.O. 9. 28/5/17.</i>

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

(b) e.g. Signaller, Shoing Smith, etc. etc., also special qualifications in technical Corps duties.

CAN. RECORDS DIRECT
 CAN. RECORDS LONDON
 1917

ADJUTANT,
 DEPOT CAN. RLY. TROOPS.

Casualty Form - Active Service

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				
16.3.18	CRT	Granted 4 days LEAVE	Liverpool	15.3.18	B=13. ill. 24 d/26.3.18.
13.4.18	h/w	Returned from LEAVE	do	7.4.18	B=13.
29.6.18	3806	Influenza. adms 3806	do	28.6.18	cc 4750.
3.7.18	do	do. to Unit	do	3.7.18	G. 344.
13.7.18	6 CRT	Rejoined Unit from Hosp.	do	4.7.18	B=13.
9.11.18	do	1 G.C. Badge	Liverpool	27.10.18	ill 123 of 1918.
24.1.19	CYBA	2fd to England posted to CRT Depot Enniscorthy Ash nr Liverpool for purpose of demob.	do	25.1.19	NR DO. 6/1919
					<p><i>Chas. B. Chaffell.</i></p> <p>Lieut. for Lt.-Col., A. A. G. Canadian Section, G. H. O. 3rd Echelon. B. E. F.</p>
					<p>-1 FEB 1919 CRTD Taken On Strength Enniscorthy 31-1-19 Ph #27</p> <p>MAR 1919 CRT 11</p> <p>Mark. M. D. Wing, No. 3</p>
					<p>55</p> <p>R.W. Longfield. Lt. Col. C.A.</p> <p>Canadian Railway Troops</p>

Original Not Available
 Fill in only.—Unit, Number, Rank and Name.

M. F. W. 54. (A. F. D. 10a.)

500M.—9-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps. 18th Battalion

Regimental No. 511 Rank Pte Name Stacey, William Heddige

Enlisted (a) 26-10-14 Terms of Service (a) O. F. W. War Service reckons from (a) 26-10-14

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

Extended. Re-engaged. Qualification (b).

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
16-1-15	18 th Bn.	S. O. S. med Unfit K R 40 para 322(2) (C) within 3 months of Enl med Unfit for Service	London Out	14-1-16.	14-1-16-25 Vol 3 D.O. #76 d/14-1-16 Amended by AF 101 order 15 d/27-12-22



delivered to
for dog B

(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.]

Casualty Form - Active Service

Unit, Regiment or Corps

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				



CANADIAN EXPEDITIONARY FORCE

War Service Badge Class. *A*

DISCHARGE CERTIFICATE *231037*

Issued

THIS IS TO CERTIFY that No. *1006981*

(Rank) *Sps*

Name (in full) *STACEY WILLIAM HERDIGE*

enlisted in

the *228th Bn.*

CANADIAN EXPEDITIONARY FORCE at *North Bay*

on the *24th*

day of *October*

19 *16*

HE served in *France*

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 *24*

Marks or Scars

Height *5' 10"*

Complexion *Dark*

Eyes *Blue*

Hair *Black*

Wm H. Stacey,
Wm H. Signature of Soldier

J. J. Glendett
Issuing Officer

Date of Discharge

Capt
Rank

Date *May 31 19*

19

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. _____

(Rank) _____

enlisted in _____

Name (in full) _____

the _____

CANADIAN EXPEDITIONARY FORCE at _____

day of _____ 19____

HE served in _____

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:

Markings or Scars _____

Age _____

Height _____

Complexion _____

Build _____

Hair _____

Signature of Soldier _____

Issuing Officer _____

Date of Discharge _____

Rank _____

Date _____

19____

N.B. - As an evidence of this Certificate will be issued, any person finding same is requested to forward it to an authorized channel to the Secretary, British Council, Ottawa, Canada.

FORM 100 (REV. 11-15)
PRINTED IN CANADA

ORIGINAL MEDICAL HISTORY SHEET

Surname Stacey Christian Name William

Examined { on 27 day of Oct. 1916
at North Bay Det

Approved by A. E. Ramsey MD
Rank Lt. A.M.C. M.O.

Birthplace { City or Town Southampton
County Eng.

Apparent age 22

Trade or occupation Railway freight

Height 5' feet 8 Inches

Weight 140 lbs.

Chest measurement { Minimum 35 inches
Maximum expansion 38 1/2 inches

Physical development good

Small-pox Marks none

Vaccination Marks { Arm Right Left
Number 0 3

When Vaccinated last 12 yrs ago

(a) Marks indicating congenital peculiarities or previous disease nil

(b) Slight defects but not sufficient to cause rejection nil

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
<u>1916</u>		
<u>Dec 16</u>		<u>A. Ramsey</u> M.O.
		M.O.
		M.O.
Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>1916</u>		
<u>Dec 6</u>		<u>A. Ramsey</u> M.O.
<u>16</u>		<u>A. Ramsey</u> M.O.
<u>26</u>		<u>A. Ramsey</u> M.O.

Enlisted on 27 day of October 1916 at North Bay Det

	CORPS	REG'L NUMBER	HABITS	DATE
Joined on enlistment	<u>228th Co</u> <u>Bn</u>	<u>1006980</u>		<u>27/10/16</u>
Transferred to		<u>1006981</u>		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT
<u>Toronto, Ont.</u>	<u>July 8th/17</u>		<u>passed.</u>
<u>Knotty Ash</u>	<u>22/12/19</u>	<u>nil</u>	<u>A. H. Wagner</u> <u>Lt. A.M.C.</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.

Surname *Stacy* Christian Name *William*

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

THE HISTORY OF THE MEDICAL DEPARTMENT
 MEDICAL OFFICERS' REPORTS

CASUALTY FORM.

ACTIVE SERVICE.

A.F.B. 103.

NUMBER 1006881 RANK Spr. NAME Stacy, W. H.

25.2.19 T.O.S. WING 3. KINDEL PARK. Part 2 D.O. 4, 4.3.19

29.3.19 S.O.S. On transfer to C.E.F. On proceeding to CANADA. Part 2 D.O. 70, 24 3.19

W. H. Stacy

..... Lieut.

SAILING NO 42
S S REGINA FROM
L'POOL 22, 3, 19

Offr. i/c Wing Discharge Office,
M.D. No. 3 Camp 6 & 7.

Robert Campbell

..... Capt.
Adj. No. 14, C.T.C.S.

27-3-19 S.O.S. *24-19* Discharged *R.O. 1420* Kingston *2-4-19* Pt. 2. Order *95*

R. Campbell
..... Lieut.
for O. C., No. 3 District Depot

1870

W. H. ...

1870

1870

...

...

...

...

...

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) STACEY W. H.

REGIMENT 6th Bn. C.R.I. RANK Spr. No. 1006981

Date of Examination in England 25-2-19. 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
2. EXTRACTIONS
3. CROWNS
4. DENTURES

Fit

- (a) Full Upper
- (b) Part Upper
- (c) Full Lower
- (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT ?

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

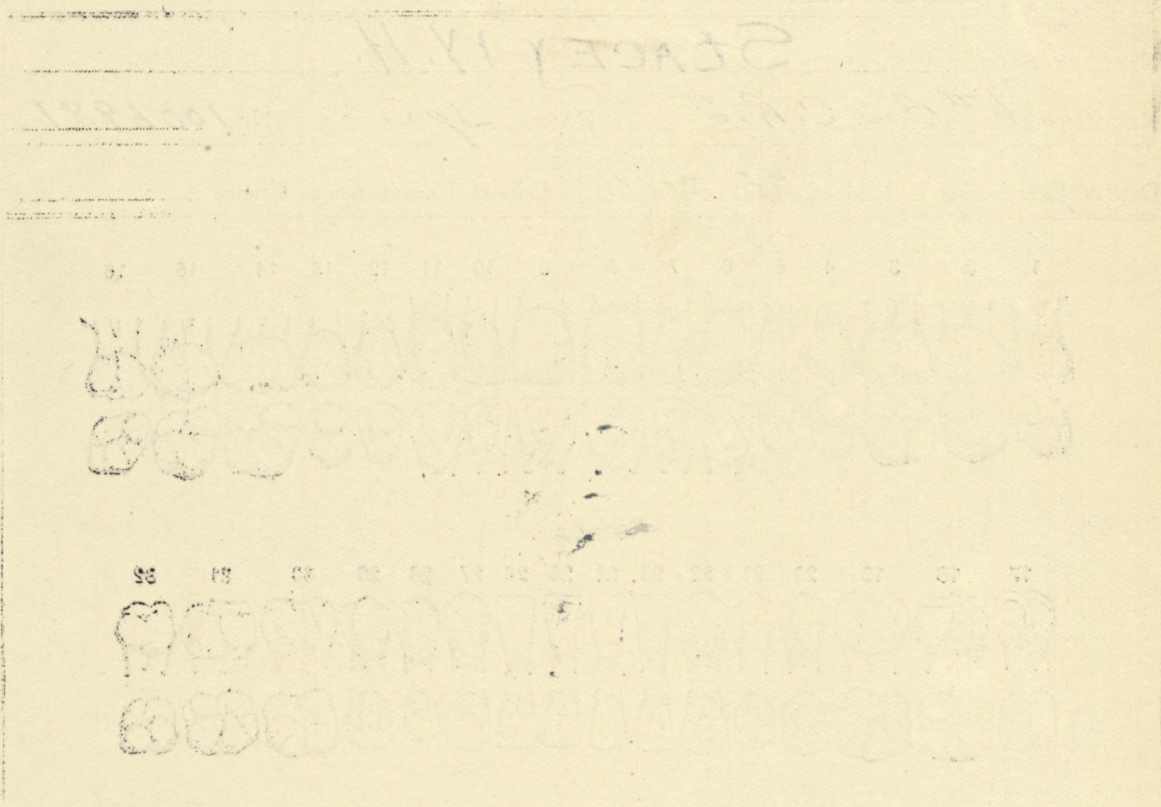
- (a) In Canada
- (b) In England
- (c) In France *yes*

KNOTTY ASH CAMP,
LIVERPOOL

Signature of Dental Officer *Alfred B. ...*

UNITED STATES DENTAL BOARD
NOTIFICATION

STACEY III



32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17 16 15 14 13 12 11 10 9 8 7 6 5 4 3 2 1

EXPLANATION OF RESULTS

7/14

- ()
- ()
- ()

Signature: *[Handwritten Signature]*

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. 1006951 Rank SPR Surname STALEY
 (Given name in full) WILLIAM H.
 Unit or Corps CRTD. Birthplace SOUTHAMPTON. ENG

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

I. GENERAL DESCRIPTION:

Physique Good Weight 150 estimated lbs. Height 5'9" ft. Colour of Eyes blue.
 Nutrition Good
 Pulse 72
 Condition of arteries none
 Vision Rt. 6/6 Left 6/6
 Hearing (conversational voice) Rt. 21 ft. Left 21 ft.

Identification marks, scars, or deformities.
 (Give cause and date of origin.)
None.

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 yes
 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.

Had in fluenza in 6-18. In hospital 5 days. Good recovery.
Had in fluenza in 2-19. In hospital 1 wk. Good recovery.

[110]

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

[OVER]

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at(Overseas)

Date 22/2/14

Signed R. Wagner 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 Spw W. H. Stacy

(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.)

JM. Rank **STACEY, William Hebdidge.** Reg'l No. **1006981**
 Unit **228th Bn.** If in perm. Corps, }
 What Unit? } **Single.** Married or Single
 Place and Date of Enlistment **North Bay. 27th Oct 1916.** Place of Birth **Southampton, Eng.**
 Name and Address, Next-of-Kin **Mrs F. W. Baird.**
Feronia, Ont. Relationship **Aunt.**

Assigned Pay Monthly \$ Payable to

Relationship

Separation Allowance \$ Payable to

Relationship

N/E. R.E. 19819
 File R.L.
 Category

Discharge, Date and Place Reason Character

H. W. & V., Ld.—9546-16.

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 per S.S. MISSANABIE 27.2.17					
12:3:17 228th Bn. NOW KNOWN AS 6th. Bn. C.R.T. Pt. II. D.O. 71.					
2.4.17	Dep. B.R.T.	T.C.S. from 6. B.R.T.	Purfleet	2.4.17	PSH 81
5.5.17	Do	J.C.S. to 6 th B.R.T. J's sea	"	5.5.17	PSH 114
9-11-18	6 B.R.T.	Granted one G.B. Badge	Spr Field	27.10.18	PSH 123
30 1 19	6 CRT	Posted to CRT D. Timothy Ash	Spr Field	25.1.19	PSH 2027/19.
42-G-28					
1-3-19	6 RTD	S.O.S. to M.D. Wing 3	R. Ash	28.2.19	PSH 2055
O1/R					
S.O.S. to M.D. Wing 3					
P. 2. D. O. L. O. 22. 7. 19					
22319 P.L. 42 m 43					

B. 103 CHECKED
 MAY 1917
 8.6.1917 PSH 98285

CRTS.
 M.D. 3. P. II 54
 4/4.3.19.

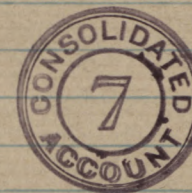
MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

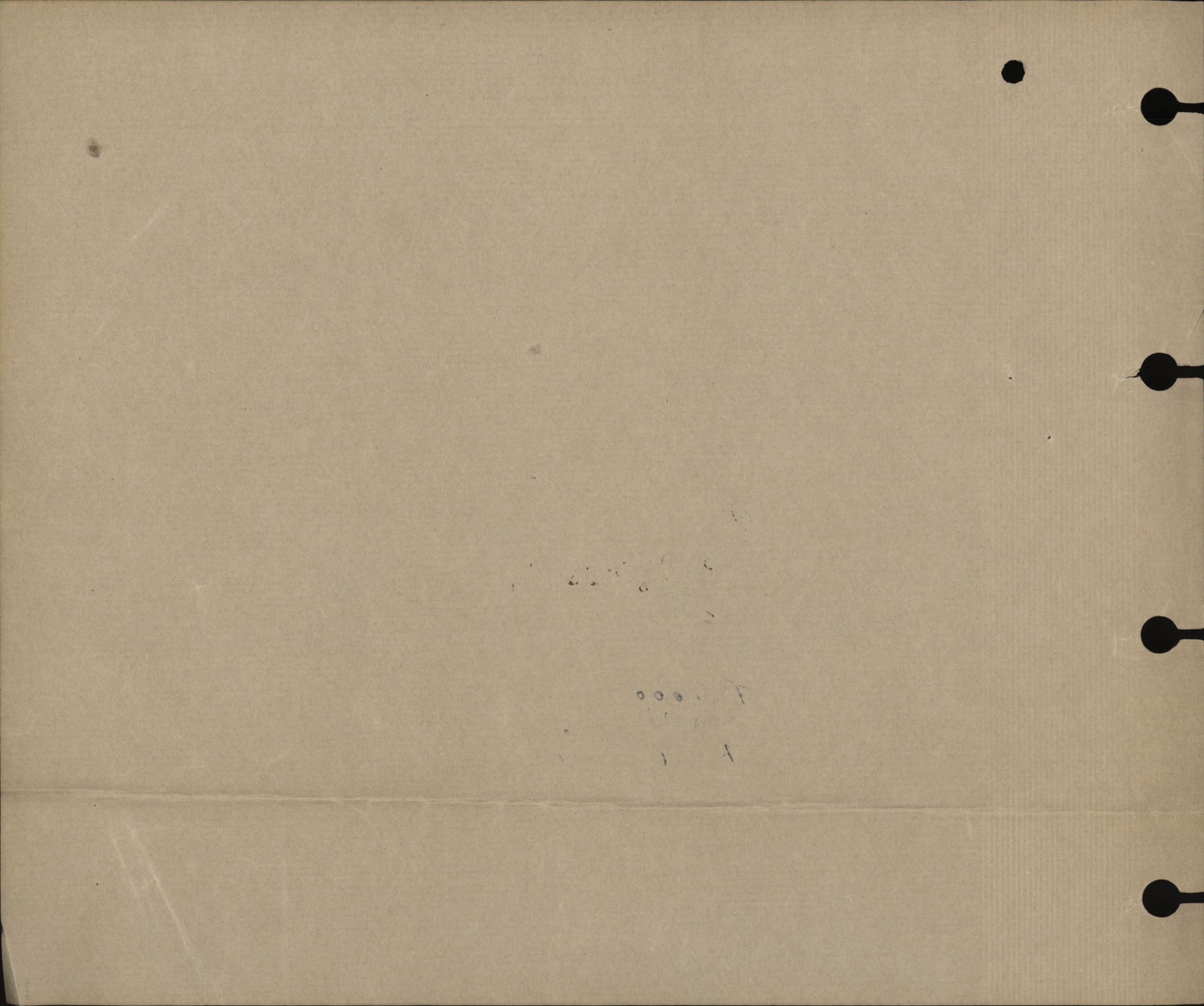
To Whom *Mrs Thomas W Baird*
 Address *Ferona P.O.
 Ont.*
 Rate *20.⁰⁰* **FEB 1917**

By Whom Assigned *Stacey, Wm. H.*
 Regtl. No. *1006981*
 Rank *Pte*
 Corps *228 Bn.*

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				





ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2. Mrs Thomas W Baird
(Assignee)Name of Soldier Stacey Wm H.

PAYMENTS.

1006981.Pte228B.

L. L. Job 5470—Req. 6888.

Month.	Year.	Cheque No.	Amt.	Remarks
			<u>20.⁰⁰</u>	FEB 1917
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March		<u>52092</u>	<u>40</u>	} <u>NOK</u>
April		<u>5022</u>	<u>20</u>	
May		<u>811695</u>	<u>20</u>	
June		<u>R18392</u>	<u>20</u>	<u>20</u> <u>(W)</u>
July		<u>V25451</u>	<u>20</u>	<u>Lu</u>
Aug.		<u>L32776</u>	<u>20</u>	
Sept.		<u>T40007</u>	<u>20</u>	
Oct.		<u>O45715</u>	<u>20</u>	
Nov.		<u>K53603</u>	<u>20</u>	
Dec.		<u>M63684</u>	<u>20</u>	
Jan.	1918			
Feb.			<u>22⁰</u>	
March				
April				
May				
June				
July				

NA6

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.				

* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.				
EFFECTIVE DATE: <i>1-2-14</i>		EFFECTIVE DATE: -					
AMOUNT: <i>20⁰⁰</i>		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.					
<i>Mrs W Band Enionia Aunt: Ont. Stopped Eff 1-3-19</i>							
PARTICULARS OF RANK OR APPOINTMENT							
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT					
		<i>Sapper.</i>					
UNIT AND TRANSFERS							
ORIGINAL UNIT: <i>228th Batta</i>							
DATE ACCOUNT FIRST OPENED: <i>1-3-14</i>							
AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T & P O	UNIT TRANSFERRED TO				
			<i>66th</i>				
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS							
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
<i>12/19</i>	<i>5576</i>	<i>CRNS</i>	<i>£14 68 13</i>				
DAILY RATES OF PAY AND ALLOWANCES							
AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE			
	<i>1</i>	<i>10</i>					

*Dis to Jan 1/3/19 NR £3139. 17/2/19 CRNS to Knolly Ash
for 2293 Defd Pay Nil Ledger 9105*

PARTICULARS OF RENDERING NON-EFFECTIVE:-												
MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION	
	<i>Forward</i>								<i>18 36</i>			
<i>April</i>	<i>PP</i>	<i>33</i>		<i>6ar</i>				<i>20</i>	<i>34 10</i>			
<i>May</i>	<i>PP</i>	<i>33</i>		<i>AR 69. 6CRJ 28/4</i>	<i>10</i>	<i>4/14</i>		<i>20</i>	<i>58 32</i>			
		<i>34 10</i>		<i>6ar</i>				<i>20</i>	<i>37 12</i>			
				<i>AR 138 do 3/5</i>	<i>13</i>	<i>7/14</i>		<i>20</i>	<i>31 18</i>			
		<i>34 10</i>							<i>64 18</i>			
<i>June</i>	<i>PP</i>	<i>33</i>		<i>6ar</i>				<i>20</i>	<i>44 18</i>			
				<i>AR 248 6CRJ 22/6</i>	<i>10</i>	<i>3 54</i>			<i>40 14</i>			
		<i>33</i>				<i>3 57</i>		<i>20</i>	<i>44 11</i>			
<i>July</i>	<i>PP</i>	<i>34 10</i>		<i>6ar</i>				<i>20</i>	<i>54 11</i>			
				<i>AR 369 do 8/4</i>	<i>1</i>	<i>3 54</i>						
				<i>H 91 do 18/4</i>	<i>3</i>	<i>3 54</i>			<i>47 57</i>			
		<i>34 10</i>				<i>7 14</i>		<i>20</i>	<i>81 67</i>			
<i>Aug</i>	<i>PP</i>	<i>34 10</i>		<i>C.P.</i>				<i>20</i>	<i>61 67</i>			
				<i>607 5/8 6CRJ</i>	<i>4</i>	<i>3 57</i>						
				<i>708 21/8</i>	<i>10</i>	<i>3 57</i>			<i>54 53</i>			
		<i>34 10</i>				<i>7 14</i>		<i>20</i>				
<i>Sept</i>	<i>PP</i>	<i>33</i>		<i>825 1/9 6CRJ</i>	<i>1</i>	<i>3 57</i>			<i>67 53</i>			
				<i>6ar</i>				<i>20</i>				
				<i>932 25/9</i>	<i>12</i>	<i>3 57</i>			<i>60 39</i>			
		<i>33</i>				<i>7 14</i>		<i>20</i>				
<i>Oct</i>	<i>PP</i>	<i>34 10</i>		<i>6ar</i>				<i>20</i>	<i>74 49</i>			
				<i>1027 12/10/18 6CRJ</i>	<i>9</i>	<i>3 73</i>			<i>70 76</i>			
				<i>1130 31/10/18 do</i>	<i>40</i>	<i>3 43</i>			<i>64 03</i>			
		<i>34 10</i>				<i>7 14</i>		<i>20</i>				
				<i>Forward</i>								

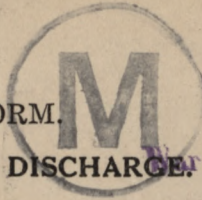
COMPILED BY *McLernon*
CHECKED BY *Adams*

NUMBER 1006981 RANK Sp1. NAME STACEY William L.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
				Balance Forward					67 03		
Nov	PP	33		cap				20	80 03		
Dec	P.P.	34 10		1259 15/11/18 6 CRT 1 1679				20	63 24		
1919				C.A.P.					77 34		
Jan	PP	35 10		CAP				20	91 44		
		107 20			16 79			60			
Feb	PP	30 80		cap.				20			
				1345. 6 CRT 26/12 15 746							
				1477 " 18/1 25 373					91 05		
				5576. CRT 8/2 67 68 13					22 92		
				2476 ✓ 7/3 96 487					18 05		
				3487. ✓ 19/2 114 973					8 32		
		30 80			93 92			20			

Sails for Ca 22/3 J.L. 42 9.2.

21



9-10

M. D. 8

SHORT FORM. PROCEEDINGS ON DISCHARGE War Service Badge Class. A

(Demobilization.) No. 231037 Issued

1. No. 1006981

2. Rank. Spr.

3. Name. STACEY. Wm. A.

4. Unit. G.W. 228th Bu

5. Date of Discharge 2-4-19 Place Ottawa

6. Reason for Discharge. Remob. SAILING NO. 42 Aunt. S S REGINA FROM LPOOL 24 3 19

War Service Badge Class "A" No. A III

7. Authority. R-0 1420

8. Proposed Residence after Discharge. North Bay Ont



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

W. A. Stacey Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

Date APR 2 1919

Signature. Captain (O. C. Discharging Unit.)

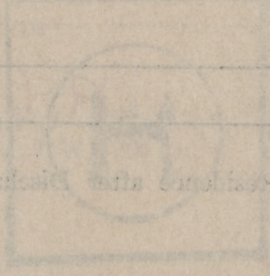


1594

PROCEEDINGS ON DISCHARGE

(Discharge)

1. Name	
2. Rank	
3. Branch	
4. Title	
5. Date of Discharge	
6. Reason for Discharge	
7. Authority	
8. Proposed Residence after Discharge	



CERTIFICATE TO BE SIGNED BY SOLDIER

I hereby acknowledge that at the underlined date and time I received my discharge Certificate

M. E. W. J.

Signature of Soldier

CONFIRMATION

10

The discharge of the above named man is hereby confirmed.

Place

Date

Signature of Officer (Official Seal)

Signature

LIST OF DISCHARGE DOCUMENTS

Attestation Power, Triplicate	Medical Form W. 38
or Particulars of Receipt	Medical Form W. 113
Field Conduct Sheet	Medical Form W. 118 or A.F.B.-122
Capacity Form	Medical Form W. 54 or A.F.B. 103
Last Pay Certificate	Medical Form W. 44
Certificate that missing documents are nonexistent	
Medical History Sheet	Medical Form B. 318 or A.L.B. 178
Proceedings of Medical Board	M.P.B. Form A.F.B. 179 or A.F.A. 45
Dental History Sheet	Medical Form B. 455
Medical Report	Medical Form W. 123 or D. M. S. 132
Regimental Conduct Sheet	Medical Form B. 238
Company Conduct Sheet	Medical Form B. 303

1. Attestation Power, Triplicate
 2. or Particulars of Receipt
 3. Field Conduct Sheet
 4. Capacity Form
 5. Last Pay Certificate
 6. Certificate that missing documents are nonexistent
 7. Medical History Sheet
 8. Proceedings of Medical Board
 9. Dental History Sheet
 10. Medical Report
 11. Regimental Conduct Sheet
 12. Company Conduct Sheet

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 (D-3).
11. Equipment and Clothing Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851).
13. Pay Book (P. 64).
14. War Service Continuity (Form M.F.W. 2595).
15. Sundry Documents.

Group..... *B*
 Checked by No. *21*
S.S.W.
 Date *18.3.19*

Separation and Assigned Pay Branch

Feb. 1-17

OVERSEAS CONTINGENTS

S 9826

RATE OF SEPARATION ALLOWANCE

--	--	--	--	--

RATE OF ASSIGNMENT

<i>20</i>			
-----------	--	--	--

723813

PARTICULARS OF SEPARATION ALLOWANCE

No. *1006981*
 Rank *Pte* Promoted Reverted Discharge
 Soldier's Name *Wm. H. Stacey*
 Battalion *228th Battr*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *Mrs. Thomas Baird*
 Address *Ferona, P.O. Ont.*
 Change of Address
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total
<i>1917</i> <i>Dec 31</i>	<i>-</i>		<i>220</i>	<i>220</i>
<i>Jan/18</i>	<i>Y 70190</i>		<i>20</i>	<i>20</i>
<i>Feb</i>	<i>F 69082</i>		<i>20</i>	<i>20</i>
<i>Mar</i>	<i>T 94617</i>		<i>20</i>	<i>20</i>
<i>Apr</i>	<i>U 8987</i>		<i>20</i>	<i>20</i>
<i>May</i>	<i>V 16781</i>		<i>20</i>	<i>20</i>
<i>June</i>	<i>X 26808</i>		<i>20</i>	<i>20</i>
<i>July</i>	<i>C 26353</i>		<i>20</i>	<i>20</i>
<i>Aug</i>	<i>W 38135</i>		<i>20</i>	<i>20</i>
<i>Sept</i>	<i>Z 36303</i>		<i>20</i>	<i>20</i>
<i>Oct</i>	<i>D 43287</i>		<i>20</i>	<i>20</i>
<i>Nov.</i>	<i>F 51444</i>		<i>20</i>	<i>20</i>
<i>Dec.</i>	<i>Q 67263</i>		<i>20</i>	<i>20</i>
<i>Jan-19</i>	<i>J 73015</i>		<i>20</i>	<i>20</i>
<i>FEB</i>	<i>O 76806</i>		<i>20</i>	<i>20</i>
<i>MAR</i>	<i>B 82708</i>		<i>20</i>	<i>20</i>
			<i>520</i>	<i>520</i>

17209-W-10.

REMARKS

Y 70190 Remailed to Ferona Ont 28.1.18 RH.

A/c Closed 31-3-19.

Ret'd per Regina.

Date 30³/19... M.F.W. 187 5⁴/19.

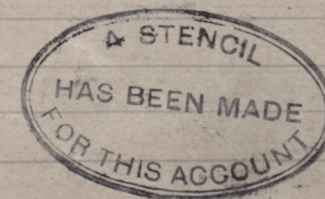
Closed

M.D.# 3.

M.R.H.P. 70317 Destroy end. 5th May, 1919.

*✓
✓
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✓
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✓*

M. F. W. 128
4 Oct. 6, 7, 1-73-33-114
L. L. 2220-M. & D. 1931.



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. 123.
 400mc-511-1772 89-1141
 L. L. 22320-M. & D. 1983.

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

M. OR S. _____ REGT. NO. *1006981* RANK *Spr.* NAME (IN FULL) *STACEY William Holodige*

NEXT OF KIN *hid* RELATIONSHIP _____ ORIGINAL UNIT C.E.F. *228th Bn.* IF IN P.F. WHAT UNIT? _____

ADDRESS _____ PLACE OF ATTESTATION _____ TRANSFERRED TO _____ DATE _____ AUTHORITY _____

DATE OF ATTESTATION *27-10-16* TRANSFERRED TO _____ DATE _____ AUTHORITY _____

IS SEPARATION ALLOWANCE PAID? _____ DATE EFFECTIVE *1-2-50* ASSIGNED PAY \$ *20.00* DATE EFFECTIVE *1-2-17*

TO WHOM PAID *hid* RELATIONSHIP _____ PAYABLE TO *Mrs. Thomas Stacey, Aunt* ADDRESS *Ferris, P.O. Ont.*

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE _____ EFFECTIVE _____

DISCHARGED *Ottawa* PLACE _____ DATE *2-4-19* REASON *Resub.* AUTHORITY _____ IF ENTITLED TO POST DISCHARGE PAY _____

8-1396

MONTH	PAY AND F.A.		OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS		
	NO. OF DAYS	RATE			AMOUNT		COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1					COL. NO. 2	COL. NO. 3		DEBIT	CREDIT
					\$	C.													
																	<i>Returned "Regina"</i>		
				<i>22.92</i>	<i>22.92</i>												<i>But. per Eng. L. P. Co.</i>		
<i>1-3-19</i>			<i>35.00</i>						<i>14.60</i>								<i>Clothing Allow. and 1st Payment W. S. G.</i>		
<i>6-4-19</i>	<i>37</i>	<i>1.75</i>	<i>40.70</i>	<i>70.00</i>				<i>4.87</i>	<i>5.00</i>	<i>104.15</i>	<i>40.00</i>			<i>168.62</i>			<i>Pay to Estimate date of discharge.</i>		
			<i>20.00</i>		<i>20.00</i>							<i>4.40</i>					<i>Advances in England.</i>		
																	<i>Boat Money, Train Money.</i>		
																	<i>Overpaid 4 days on discharge.</i>		
																	<i>Overcharged A.P.</i>		
			<i>W. S. G. S. O.</i>		<i>W. S. G. S. O.</i>												<i>1st Pay. W. S. G. S. O.</i>		
			<i>350.00</i>		<i>350.00</i>									<i>70.00</i>	<i>280.00</i>		<i>4325760</i>		
			<i>15.60</i>											<i>85.60</i>	<i>210</i>		<i>Credit Balance.</i>		
														<i>70</i>	<i>140</i>		<i>4337794</i>		
														<i>70</i>	<i>70</i>		<i>49937575</i>		
														<i>70</i>			<i>4954485</i>		
														<i>3656</i>			<i>JUN 2 1919</i>		
																	<i>JUN 20 1919</i>		
																	<i>JUL 31 1919</i>		

