ORIGINAL 93/338

ATTESTATION - PAPER.

No.

~~No. 2 CONSTRUCTION~~, B'n. C.E.F.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ~~Stephenson~~ Stevenson
1a. What are your Christian names? Ernest Alonzo
1b. What is your present address? Grand Sille Ferry Digby Cty. N.S.
2. In what Town, Township or Parish, and in what Country were you born? Grand Sille Ferry N.S.
3. What is the name of your next-of kin? Mrs George ~~Stephenson~~ Stevenson
4. What is the address of your next-of-kin? Grand Sille Ferry. N.S.
4a. What is the relationship of your next-of-kin? Mother
5. What is the date of your birth? July 1894
6. What is your Trade or Calling? Teamster
7. Are you married? Single
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, ~~Earnest Alonzo Stevenson~~ 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.

Earnest Alonzo Stevenson

~~Earnest Alonzo Stevenson~~ (Signature of Recruit)

Date 30-10-16 191 . Matthew J. Edwards (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, ~~Earnest Alonzo Stevenson~~ 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.

Earnest Alonzo Stevenson

~~Earnest Alonzo Stevenson~~ (Signature of Recruit)

Date 30-10-16 191 . Matthew J. Edwards (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 Yarmouth N.S. this 31st day of October 1916

C. H. Reis Capt (Signature of Justice)

M. F. W. 23.
400M.—1-15.
H. Q. 1772-39-841.

Stevenson

Description of Stephenson Ernest alonzo on Enlistment.

Apparent Age 22 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 6 ins.

Chest measurement: Girth when fully expanded ..... 37 ins.
Range of expansion ..... 2 ins.

Complexion ..... Dusky

Eyes ..... Brown

Hair ..... Brown

Religious denominations:
Church of England .....
Presbyterian .....
Methodist .....
Baptist or Congregationalist ..... Y
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).

Large scar between index finger and thumb of the left hand.

RA

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 25 1916.

Place Toronto No 8.

H.C. Kent Major am C
Medical Officer.

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

Stevenson
Ernest alonzo Stephenson having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

C. W. Rees Capt (Signature of Officer)

Date [illegible] 1916 191 .

Stevenson Ernest Alonzo 931338 No. 2 Const. Bn.

CONTENTS

1 ATTESTATION PAPER (M. F. W. 23, 133 OR 51)
2 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)
REGT. CONDUCT SHEET (M.F.B. 263 OR A.F.B. 121)
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)
MEDICAL EXAMINATION (M. F. W. 129)
TRANSFER OF 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)
1 LAST PAY CERTIFICATE (M. F. W. 44)
1 PROCEEDINGS ON DISCHARGE (M. F. W. 218 OR A. F. B. 268)
PARTICULARS OF CHARACTER (A. F. W. 3226)
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M. F. W. 39A)
DENTAL CERTIFICATE ON DISCHARGE (C. A. D. C. 5669)
UNIT INDEX CARD (SEE PARA. 191 OR 192)

10. 9th. D. 1375 - 1-R-122

(M7W67-1

26-3-19
M.E.B

M. F. B. 270.
850M-6-18
H. Q. 1772-39-67

O. H. M. S.

REGIMENTAL DOCUMENTS

REGT No. UNIT

NON-EFFECTIVE BY ..... CATEGORY .....

Demobilization

41700

483017

Number 931338 Rank Pte. Spr.

Surname STEVENSON

Christian Name Ernest Alonzo

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

Date of Service 17-5-17

Remarks

Latest Address Annapolis
Royal N.S.

Roll No. B Page 11209

200m—2—21.M.

DESP. JAN 23 1928
REGN. No. 365-24

*Name STEVENSON. E. Rank PTE. Regtl. No. 931338

Fyle Depot 74-S-806.

Original unit 2 Con Bn. Present unit #6 D. D. M. or S. Age 22 Religion Bapt. Ref. H.Q.

Port, ship, and date of arrival Halifax. N. S "Empress of Bretain " 22-1-19.

Next of kin Mother. Mrs. George. Stevenson.

Address on leave Bridgetown. N. S.

Address on discharge

Transportation issued Yes / No Date Character on discharge

Previous occupation Teamsete.r Date and place of enlistment Truro. N. S. 31-10-16.

Diagnosis Date of Medical Boards

Date.	Remarks	Pt. 2 Order No.
12-1-19	T. O. S. #6 D. D. and posted to CASY. COY. 22-1-19	D.O. 29.
1-3-19	Discharged at Halifax	58

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

(over)

Date.	Remarks.	Pt. 2 Order No.

M.F.W. 192
150M—6-18.
1772-39-1243.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2. Wm Rhoda Stephenson (Assignee)

Name of Soldier Stephenson Earnest.

Pte. 931338. No 2. Can. Inf.

L. L. Job 5470—Req. 6888.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			15 APR 1917
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		Z 5101	15	
May		Y 11958	15	
June		U 18373	15	15
July		Z 27691	15	
Aug.		P 32518	15	
Sept.		Y 39751	15	
Oct.		R 45157	15	
Nov.		N 53202	15	
Dec.		P 61184	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.				

L-L.Job 5470—M. & D. 6888

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

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

To Whom Mr Phoebe Stephenson
Address Granville Ferry. N. S

By Whom Assigned Stephenson Ernest
Regtl. No. 931338
Rank Pte.
Corps No 2. Con Bn.

Rate 15.00 APR 1917

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

CONSOLIDATED 5 ACCOUNT

Form R 122.
2353—100M—9-1-16

Stevenson

LTR Rank Name STEPHENSON, Erhest Alanzo Reg'l No. 931338

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

Place and Date of Enlistment Truro.N.S. 30th Oct. 1916. Place of Birth Grand Ville Ferry. N.S.

Name and Address, Next-of-Kin Mrs George Stephenson.
Grand Ville Ferry. N.S. 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.

N/E. R.B. No 6745
File R.L.
Cable
OR CAN

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.
		Arrived in England ss "Southland"		7-4-17	A.F.B. 123 CHECKED 30 MAY 19 Awww.
14.6.17	4th C.B. Emotn Bn	Arrived in France	Field	17.5.17	20th 115.
16.12.18	NSRD.	TOS from 2nd CCC	Pte	B'Shift	14.12.18 AO 305 & 71 D/ 19.12.18 2nd CCC.
27-12-18	NSRD	O/C to C.D.D. Rhyl	"	-	27-12-18 - 313
25.1.19	NSRD	ceases O/C C.D.D. Rhyl. & SOS & C.E.F. Canada	-	Repon	12.1.19 - 18

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.					

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps No. 2 CONSTRUCTION, B'n. C.E.F.

Regimental No. 93138 Rank Pte Name Ernest Alanzo Stephenson

C. E. F.

Enlisted (a) 30-10-16 Terms of Service (a) duration of war & 6 months Hamouths Service reckons from (a) 30-10-16

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)

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Embarked Canada	Halifax N.S.	24/3/17	
		Disembarked England	Liverpool	3/4/17	
	O.C. # 2 Constn Bath	Proceeded Overseas	Seaford	MAY 17 1917	Pte's D.O #
					A. B. Macleay Lieut for Adjutant, No. 2 Construction Bn. C.E.F.
		Landed fm France		17-5-17	N.R.
19.6.17.	O.C.	Forfeits 1 days pay absent from 10 pm to 10.20 pm (20 min)	Fd	15/6/17	Brobq. Pte H.O 122. 7/17
5/7/17	"	7 days FPNR for (Refusing to obey an order (keeping himself dirty)	"	4/7/17	Brobq O/C 124. 24/7/17

CERTIFIED CORRECT. 6 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				
23/8/17	O.C. Units	7 days F.P. No 2 for AWL from 10 p.m. 19.8.17 until 7 A.m 20-8-17 Forfeits 1 days Pay under R.R.S.		21-8-17	B 2069 P 275 C 134 d/= 19/10/17
20/9/17	O.C.	30 days F.P. No 2 for (1) Destroying Government Property. (2) Keeping himself in an unsanitary condition		18/9/17	B 2069. P 134 d/= 19/10/17
5/1/18	O.C. Units	att to 1 Dist 67 Corps.	Abancon	20/12/17	B 213.
31-8-18	O/38 Coy C.T.C.	Granted 14 days leave	ult.	28-8-18	B 213. pay 5 1/7 Aug 1918
28-9-18	do.	Return from leave	Zuid	18-9-18	B 213
28-11-18.	O.C. 38 Coy C.T.C.	10 ~~DAYS~~ F.P. No 2 FORFEITS. 1 day Pay R.W. W.O.A.S A.W.L from 22.00 26-11-18. until 07.30 27.11.18.	"	27.11.18.	B 2069 P ~~Bde~~ 69.
11 12/18	M.S.	Trans to England & posted to N.S. Reg Depot	Bramshott	14 12/18	A.R. 32/4.

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

17.12.18.	M.S.R.D.	T.O.S. and attd 2nd C.C.D. for Quarters & Rations	Bramshott	14.12.18	D.O. 305

PART II D.O. M.S.R.D. 313 27/12

NSRD ON COMMAND TO C.D.D. Kinmel

BRAMSHOTT

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

12/1/19 Sub. Cmp. for trans to C.E.F. Rhyl Disch. to Canada Hampstead Park
Embarked from Canada 12-1-19 Barking No. 4 Depot

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. 931338 Rank Pte Surname Stevenson
(Give name in full)
Earnest
Unit or Corps D.D. #6 Birthplace Granville Ferry N.S.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 175 lbs. Height 5 ft. 4 in. Colour of Eyes Black

Nutrition Good

Pulse 70

Condition of arteries normal

Vision Rt. 6/6 Left 6/6

Hearing (conversational voice) Rt. 15 ft.

Left 15 ft.

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

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.

Annapolis Royal N.S.

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

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at..... (Overseas)

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

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

Signature .....

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

THIS SECTION FOR USE IN CANADA—

Examined at..Halifax.....(Canada)

Date .....Oct. 4/18..... Signed J. W. McNaughton...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 Lorne Stinson.....

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

(This space to be used, if necessary, in connection with Section 8, overleaf, only.)

[OVER]

M.F.W. 122.
1033 (D.P.) 500M-11-18.
1772-39-1142.

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps .....

Regimental No. 93/338 Rank Pte. C. E. F. Name Stevenson E.

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

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

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

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
12.1.190 Vsea. T/O/S.		No. 6 D.D. & Dfr. Casy Co.	22.1.19.	Do. 29.	A. M. Ferguson Lieut ASST. ADJT. No. 6 DISTRICT DEPOT.
4-3-19	Discharged at Halifax		DO 58		C W MacAlvey CAPTAIN. O. C. DISCHARGE SECTION No. 6 DISTRICT DEPOT.

(*a*) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(*b*) *e.g.* Signaller, Shoeing Smith, etc , etc., also special qualifications in technical Corps duties.

P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				

DUPLICATE

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

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

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

---

(1) Name of Overseas Unit which Soldier joins No. 2 CONSTRUCTION, B'n. C.E.F.

(2) Regimental Number 93338

(3) Full Name of Soldier Ernest Alango Stephenson

(4) Place of Birth Grand ville Surrey Co. S

(5) Are you married, or not? Single

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

(b) Present Postal Address Grandville Surrey Co. S.

(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? George S Tephenson

If so, state name and address Grand ville Ferry Co S

(10) Is your Mother alive? Mrs George S Tephenson

If so, state name and address Grand ville Ferry Co S

(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.

~~$ 15.00~~

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

~~Brother~~

(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.

C. W. Rees Capt
for *Officer Commanding.*

Date OCT 30 1916

DUPLICATE 93338

MEDICAL HISTORY SHEET

Surname Stephenson Christian Name Earnest Alonzo

Examined { on 30th day of Oct 1916
at Truro N.S.

Birthplace { City or Town Granville Ferry
County Annapolis Co. N.S.

Apparent age 22

Trade or occupation Teamster

Height 5 feet 6 Inches

Weight 153 lbs.

Chest measurement { Minimum 32 inches
Maximum expansion 35 inches

Physical development Fair

Small-pox Marks None

Vaccination Marks { Arm Right X Left
Number One

When Vaccinated last 9 years ago

(a) Marks indicating congential peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection

A slight curvature forward of both Tibial bone tending to flat foot.

Approved by

H V Kent

Rank Major A.M.C. M.O.

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

Date	Result	Vaccinations	
21/3/17		D Dall Murray	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
14/2/17	1st R	H.V. Kent Major	M.O.
4/3/17	2nd R	D Dall Murray	M.O.
21/3/17	2nd R	D Dall Murray	M.O.

Enlisted on 30 day of Oct 1916 at Truro

	Corps	Regt'l Number	Habits	Date
Joined on enlistment		93338		10/30/16
Transferred to	No. 2 CONSTRUCTION, B'n. C.E.F.			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result

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

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

Surname Stephenson Christian Name Ernest Alan

Date of Arrival at the Station	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

C.A.D.C. 5009 A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

MD 6

NAME OF SOLDIER (Block Letters) STEPHENSON . E.A.

REGIMENT No. 2 Con. Bn. RANK Pte No. 93138

Date of Examination in England 31. 12. 18 Date of Examination in France

DIRECTIONS TO DENTAL OFFICERS

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

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 3 - 14 - 30 - 18
2. EXTRACTIONS 19
3. CROWNS
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

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

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

KINMEL PARK, NORTH WALES.

Signature of Dental Officer W. Kennedy Lieut.

M.F.W. 44.
1133 (D.P.) 250M.-12-18.
1772-89-903.

CANADIAN EXPEDITIONARY FORCE.

LAST PAY CERTIFICATE

Regimental No. 931338 Rank Pte. Name Stephenson, E.A.
(Surname first)

Unit 2nd. who was Discharged

On 1-3-19 191..., to ...

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-1-19 to 1-3-19 191... the inclusive date of transfer or discharge.

	Dr.		Cr.	
Bal. Dr. or Cr. from prev. month Dr. L.P.C. Subs,	40	89	11	15
Regimental Pay 60 days at $ 1 c			60	00
Field Allowance 60 days at $ c. 10			6	00
Separation Allowance Nil.				
Clothing Allowance $ 35.00			35	00
Post Discharge Pay W.S.G. $ 70.00	70	00		
*Other Credits				
Advances $ 20.16---$ 15.00-----$ 36.10----$	71	26		
Separation Allowance and Assigned Pay Cheque No.				
*Other Charges				
Balance on ~~transfer or~~ on discharge, cheque No. Debit:			70	00
Total	182	15	182	15

*Give particulars.

A monthly stoppage of $ 15.00 (†) has ... (‡) been paid on account of Assigned Pay for the month of Feb. 191 9 and Separation Allce. for month of 191... (to) Assignee Mrs. P. Stephenson,

(Address) Grandvills Ferry, N.S.

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

Made by: A.A.C.

ON TRANSFER OF AN OFFICER. Checked:

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

REMARKS:—

State (1) date of enlistment ... married or single Single,

(2) Separation Allowance, entitled or not No. (3) Reason for discharge Denob. D.O.58

(4) Authority for discharge or transfer ...

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer or soldier.

Date 28-2-19

Place Halifax, N.S. ... CAPTAIN,

PAYMASTER, NO. 6 DISTRICT DEPOT. Paymaster.

N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916.

(B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.

(C) For purpose of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. As payment of the balance will have been made, the words "on transfer or" will be deleted.

(D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificates will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.

CREDITS, ADVANCES, Etc.

Credits, Advances, Forfeitures, Issues on Repayment, etc., since issue of this L.P.C. are to be entered hereunder:

Date	Place	Cheque No. A.R. No. or Other Particulars.	AMOUNT		Signature of Officer Making Payment.
			Dr.	Cr.	

D.M.S. 1375.

Medical Examination upon leaving the Service

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

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

Rank Pte. Name Stevenson Surname Ernest A.

Unit or Corps 17th Reserve (If a soldier) Regtl. No. 931338

Born at Granville Ferry, N.S. on, date July 15, 1894

Signature (for identification) Earnest Stevenson

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

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

Weight 150 lbs.

Height 5 ft. 6 ins.

2. **NUTRITION AND DIATHESIS?** good

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

3. **NERVOUS SYSTEM?** nil

4. **RESPIRATORY SYSTEM.** nil

5. **HEART?**

Abnormal Sounds? nil

Abnormal Size? nil

Pulse Rate? 68 Intermittence or irregularity? nil

6. **ARTERIES.**—Any hardening? nil

7. **DIGESTIVE SYSTEM?** nil

8. **GENITO-URINARY SYSTEM?** nil

Urinalysis—S.G.? 1020 Reaction? ac Albumen? nil Sugar? nil

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

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

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

Examined at Kentville Park

Date 2 – 1 – 19

Signed W. Geo. Jones Capt. M.O.

Signed W. Everett Lane M.O

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

P. 559

MARRIED OR SINGLE S.

PLACE OF BIRTH Grand Ville Ferry N.S.

NAME AND ADDRESS OF NEXT OF KIN Mrs. George A. Stephenson Grand Ville Ferry N.S.

RELATIONSHIP OF NEXT OF KIN Mother.

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 931338 RANK NAME Stephenson, Ernest Adanzo. E ✓

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

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

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

DATE OF ATTESTATION Oct. 30th 1916 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 15.00 DATE EFFECTIVE 1.4.17.

PAYABLE TO Mrs. Phoebe Stephenson, Granville Ferry. N.S. RELATIONSHIP Mother.

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	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
													10 30	10 30																10 30				Bal from Canada.
Apl 1/30	30	1.10	33	00										33 50													15 -		15 -	28 30			28 30	
MAY 1.31	31	1.10	34	10										34 10	37 1/5							9 73				15 -		29 60	32 80			32 80	
June 1.30	30	-	33	00										33 00	10 19/4							4 87				15 -		19 87	45 93			45 93	
July 1.31	31	-	34	10										34 10	64 14/5							4 87				15 -		15 -	65 03			65 03	
Aug. "	"	-	34	10										34 10												15 -	7 70	27 37	71 76			71 76	Sig 7th FPI, 147:17. Do. 124:24:8:17 Apply 1 do. pay & allce, 15 6/7 Dazza 7 8/30
Sept 1.30	30	-	33	-										33 -												15 -		25 71	79 05			79 05	
			201	30									10 20	211 60								19 47		14 28		90	8 80	132 55	79 05				

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER-RED PAY	SEP. ALLCE. ENG.
Sept	Bal	~~79 05~~ 86							79 05		
Oct	PP.	34 10		Sig 7th FP2. 21 6/7 + 1 dy Pay RW. DP. 134. 19-10-17		8 80	- 15				
				" 20 " " " 18 6/7 DO. 134. 19. 10/7		22 -					
				AR 550. 27 6/7 2 Bound Bn. Alt C. & C.	3 57						
				" 629. 11 6/7 " " " "	3 57						
				" 469 - 13 6/7 " " " "	3 56				56 65		
		34 10			10 70	30 80	15				

Pte 931338 Stephenson R. A. 15th

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																	
	Oct Bal																	56 65																	
Nov	P.P.		33 -		AR 853 12/11 C.T.C.									3 57				15																	
					- 975. 25/11 -									3 57																					
DEC	"		34 10		- 1093. 10/11/17									3 57				15	80 04																
			67 10											10 71				30																	
JAN	1918 P.P.		34 10															15																	
					- 1262. 23/11/17. 2 Bonds &c									12 49																					
					- 15997. 5/1/18 " "									2 -																					
					" 1436 - 21 12/17 " "									7 14					80 51																	
			34 10	- -										21 63	- -	- 15																			
FEB	"		30 80		Assigned Pay - 2035. 5/1/18 2 Bonds. allt C.T.C.									3 57				15																	
					- 2196 - 21/1/18 " " "									3 57																					
					2388 5/2/18 #1 "									3 57					95 60																	
			30 80											10 71				15																	
MAR 1918	"		34 10		Ass'd Pay													15																	
					AR 2676. 20/2. #1. C.T.C.									3 57																					
					" 1247. 8/3/18. #2 Brit. C.T.C. 7r.									3 57					97 56																	
			34 10											7 14				15																	

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY * ~~ENGLAND OR~~ CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1 APR 1917	EFFECTIVE DATE:-
AMOUNT:- 15 00	AMOUNT:-

NAME:- STEPHENSON Ernest Alonzo F

NUMBER:- 931338

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

Mrs Phoebe Stephenson
Granville Ferry NS mother

Stoppage Effd 1-1-19

17/12/18
M.R. 161 2 Vol C.O.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:- 2 Construction Bn

DATE ACCOUNT FIRST OPENED:- 1 APR 1917

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
L.R.O.		28/2/19	Canada Section.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
9-12-18	6753	No 5 C/K.	4 66				
18-12-18	3590	B.R.D.C.	9 73				
		11 Days Pay	12 10				
			26 49				
			~~26 49~~				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 - -	10		
	Ledger Bal	$ 50	20	

PARTICULARS OF RENDERING NON-EFFECTIVE:- Transferred to Can 1-1-19 auth N.R. 161. 2nd Vol C.O. 17-12-18 L.P.O. Bal $ ~~35 81~~ 23 71

MONTH 1918	PARTICULARS	CR 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
MAR	Bal Fwd								97 56		
apl	P. Pay	33 -		C.A.P.				15 -			
				aR 130 6/4 CFCA°1	3 57						
		33 -		" 312 29/4 —"—	7 14				104 85		
May	P.P.	34 10		C.A.P.	10 71			15 -			
				aR 507. 7/5 CFC1	2 68			15 =			
				" 735 22/5 —"—	4 46				116 81		
		34 10			7 14			15 -			
June	P. Pay	33 -		Can aP				15 -			
				aR 922 7/6 CFC1	3 57						
				" 1118 22/6 "	3 57				127 67		
		33			7 14			15 -			
July	P Pay	34 10		Can aP				15 -			
				aR 1308 6/7 CFC1	3 57						
				aR 1517 22/7 "	3 57				139 63		
		34 10			7 14			15 -			
Aug	Pay	34 10		Can aP				15 -			
				aR 1712 6/8 CFC1	3 57						
				aR 1999 26/8 "	1 78						
				aR 3210 26/8 "	97 33						
				aR 1959 27/8 "	3 57				52 48		
		34 10			106 75			15 -			
Sep		33 -		Can aP				15 -			
				CP 29793 7/9 London	38 93						
				CP 31839 9/9 "	9 73						
				aR 2453 23/9 CFC1	3 57				1825 a/a		
		33			52 23			15 -			

35 81.
12 10
23 71

COMPILED BY T. Burton

CHECKED BY [illegible]

NUMBER 931338 RANK Pte. NAME STEPHENSON Ernest Alonzo.

MONTH	PARTICULARS	Cr. 1.	Cr. 2.	PARTICULARS	Dr. 1	Dr. 2	Dr. 3.	Dr. 4.	BALANCE	DEFERRED	SEPARATION
Oct	Balance Forward								1825		
	PP	34 10		2693 7.10 C.F.C.	3 73						
				C.A.P.				15			
				2945 23.10 "	3 73				29 89		
		34 10			7 46			15			
Nov.	P.P.	33 -		C.A.P.				15 -			
				3112. 8.11. C.F.C.I.	3 73						
				3319. 25.11. "	13 06						
Dec	P.P.P.	34 10						15	50 2		
				6753 10.12. C.B.D.	4 66						
				3590. 18.12 B.R.D.G.	9 73						
				10 days F.P. II 27 11/18. Allt 22.00-26 11/18 to 7.30 27 11/18. 1 day Pay Rec. Total 11 days - 70. 69 10.12.18. 2 Con Coy		12 10			23 71		
		67 10			31 18	12 10		30 -			
				164. 10.1. End L.P.C. Rhyl	9 73				13 98		
					9 73						

29.89
67.10
96.99
73.28
23.71

P.O.S. to Canada 12.1.19 D.O.18. N.S.R.D. 25/9

CANADIAN
ACCRUED PAY AUDITED
to 31/12/18
E.S. Bradley
AUDIT CLERK
DATE 2/6/19

War Service Badge
Class A - 76653 issued

This space to be for numbers.

Proceedings on Discharge.

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page.)

No. 931338

Rank Private

Surname Stephenson Stevenson

Christian name Ernest A.

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

Corps (Squadron, Battery or Company) No 2 Con. Bn.

Date of discharge March 1, 1919

Place of discharge Halifax N.S.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 24 years 7 months.	Descriptive marks
Height 5 feet 4 inches.	Nil
Complexion Dark	
Eyes Brown	
Hair Black	
Trade Teamster	
Intended place of residence (To be given as fully as practicable.)	Minneapolis Royal N.S.

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

Demobilization

Authority for discharge.....

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

3. Conduct and character while in the service have been, according to the records, etc.

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

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

M. F. B. 218.

200M.—5-18.
H. Q. 1772-39-113.

(OVER)

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

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

6. Medals and Decorations.....

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

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

(Place).....

(Date).....

.....

Commanding.....

8. Certificate to be signed by the Soldier on Discharge

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

(Place) Halifax NS Earnest Stevenson *(Signature of Soldier.)*

(Date) Feb 26/19 Edmeadeau *(Signature of Witness.)*

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

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

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

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

10. Statement of Service.

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

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

11. Confirmation of Discharge.

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

(Place) Halifax NS

(Signature) F.S. Davis Major

(Date) March 1, 1919 for LIEUT, COL.

No. 6 DISTRICT DEPOT.

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

Nil

Ernest Stevens

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form	B. 263
Squadron / Battery / Company } Conduct Sheet,	"	B. 263a
or		
Field Conduct Sheet	"	W. 178
Copies of Convictions, by C. P.		in MS.
Med. Hist. Sheet,	Militia form	B. 313
Casualty Form	"	W. 54
Medical Report for Invalid§	"	B. 227
Dental History Sheet	"	B. 465
Last Pay Certificate	"	W. 44
Duplicate Discharge Certificate	"	W. 39A
‡Form of Will	"	W. 82

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

Attestation Paper	Militia Form	W. 23
or		
Particulars of Recruit	"	W. 133
Proceedings on Discharge	"	B. 218

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet.

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

N.B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS S 10898

Date of Assignment

April-1917.

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15-			

PARTICULARS OF SEPARATION ALLOWANCE

No. 931338.

Rank Ste Promoted Reverted Discharge

Soldier's Name Ernest Stephenson.

Battalion No 2. Can. Batt'n

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs Phoebe Stephenson

Address Granville Ferry.

Change of Address N.S.

1

2

3

4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total	
Dec 31	—		135	135	
Jan	V 70714		15	15	
Feb	G 69349		15	15	H
Mar	J 95576		15	15	H
Apr	U 9953		15	15	H
May	Y 14805		15	15	✓
June	Y 21576		15	15	✓
July	R 20669		15	15	✓
Aug	W 39183		15	15	✓
Sept	F 37389		15	15	✓
Oct	D 44392		15	15	✓
Nov	F 52539		15	15	✓
Dec	2 68008		15	15	✓
Jan'19	J 73996		15	15	✓
			330	330	

017363-8-17.

REMARKS

A/c Closed 31-1-19

Ret'd per Emp of Britain

Date 22-1-19 M.F.W.187 28-1-19

Closed A. Sinclair

M.D. #6. MRO. 57654 28-1-19 (Des.) OH 28/1/19. RW

CANADIAN
ASSIGNED PAY AUDITED
E.S. Bradley
AUDIT CLERK
DATE 2/6/19

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 92280—M. & D. 1988.

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. 1493.

Taken on Strength JAN 12 1919, B.O. 29

Stephenson | AUDITOR | PAYMASTER

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

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

REGT. No. 931338 RANK Pte NAME (IN FULL) ~~Stevenson~~ E.A.

NEXT OF KIN RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? DATE EFFECTIVE

TO WHOM PAID No. RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
1		
10		L.P.C.

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

PLACE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY $ 15.00 DATE EFFECTIVE FEB 1 1919

PAYABLE TO Mrs. E. Stephenson RELATIONSHIP mother ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS ~~Granville Ferry~~ Annapolis Royal N.S.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE DATE 1/3/19 REASON Demob AUTHORITY DO 18 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																																					E. Subs. D 029
Jan.					11	20			11	20																05				05			11	15	
1/1/19 3/1/19	59	1.10	64	90			11	15	76	05							171 68				20	16	15564 15				40	89					76	05			
1/1/19 3/1/19	60	1.10	66		35		11	15	112	15							171 68				36	10											112	15			
																	171 69				70												70		70		
153	1		Wpg. da 350	00					350	00																											War Service Gratuity
																											70	00								Wpg. da Soldiers Dependent
																											70	00							210	
																											70	00							140	
																											70	00							70	00
																											70	-							nil	
			350	-					350	-																	350	-					350	-			

Comp to date

A.E. Swaine

30M-11-18.—L.L. 50877-M. & D. 9553.

MONTH	PAY AND F.A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGIMENTAL 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.	$	C.	$	C.	$	C.	NO.	DATE	NO.	DATE	NO.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 931338 (Rank) [illegible]

Name (in full) Ernest Alonzo Stephe[illegible] enlisted in

the No 2 Construction Ba[illegible]n

CANADIAN EXPEDITIONARY FORCE at Truro [illegible]th

day of October 1916

HE served in France

and is now discharged from the service by reason of

Demobilization

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

Age 24 years 7 months

Height 5 feet 4 inches

Complexion Dark

Eyes Blue Brown

Hair Black

Marks or Scars Nil

Earnest Stevens
Signature of Soldier

C W MacAloney CAPTA
O. C. DISCHARGE SECTION Issuing Officer No. 6 DISTRICT DI
Rank

Appointment

Date of Discharge March 1, 1919

Signed at Halifax this 26th day of February 1919

in Military District No. Six (6)

File Reference No.

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

M. F. W. 39a
200m.—2-18.
H.Q. 1772-39-882

IAN EXPEDITIONARY FORCE

Discharge Certificate

No. ..... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

.....

Medals and Decorations .....

.....

Remarks .....

.....

Signed at ..... this ..... day of 19

.....

Name of Officer

.....

Rank

.....

Appointment

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

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