

band
30/8/16

Duplicate

931100

ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... Turner
- 1a. What are your Christian names?..... Harry
- 1b. What is your present address?..... Dragon St Halifax N.S.
- 2. In what Town, Township or Parish, and in what Country were you born?..... Halifax N.S.
- 3. What is the name of your next-of-kin?..... Mrs. Turner
- 4. What is the address of your next-of-kin?..... 76 Albertville St. Halifax N.S.
- 4a. What is the relationship of your next-of-kin?..... Mother
- 5. What is the date of your birth?..... November 10th 1890
- 6. What is your Trade or Calling?..... Labourer
- 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, Harry Turner, 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 August 9th 1916. Harry Turner (Signature of Recruit)
Robert H. Buehler Sgt (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Harry Turner, 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 August 9th 1916. Harry Turner (Signature of Recruit)
Robert H. Buehler Sgt (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 Halifax this 9 day of Aug. 1916.
(Signature of Justice)

Description of Harry Turner on Enlistment.

Apparent Age 20 years 9 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. 2 ins.

Chest measurement. { Girth when fully expanded 36 ins.
Range of expansion 2 ins.

Complexion Dark

Eyes Black

Hair Black

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

Weight 126 lbs

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 7-8 1916

B. Johnson
.....
Capt.
Medical Officer.

Place Halifax N.S.

*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.

..... Harry Turner 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.

Lt. Col. D. H. Sutherland (Signature of Officer)

Date AUG 10 1916 1916

..... **L.T. COL.**
D. Comd'g No. 2 Construction Battalion, C. E. F.

REGIMENTAL DOCUMENTS

NAME *TRAYNER Harry*

REGT. NO. *931410*

UNIT *1st Bn* H. Q. FILE NO.

I

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

5

3

M

H

ATTESTATION PAPER (M.F.W. 23, 133, or 51)

CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

TRAINING HISTORY SHEET (M.F.W. 113)

FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)

REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)

COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)

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 CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)

PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)

DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)

LAST PAY CERTIFICATE (M.F.W. 44)

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)

97W-3997

7W192

DM 8-1375

6946-5089

check

R-122

DEATH

Category

DISCHARGE

Category

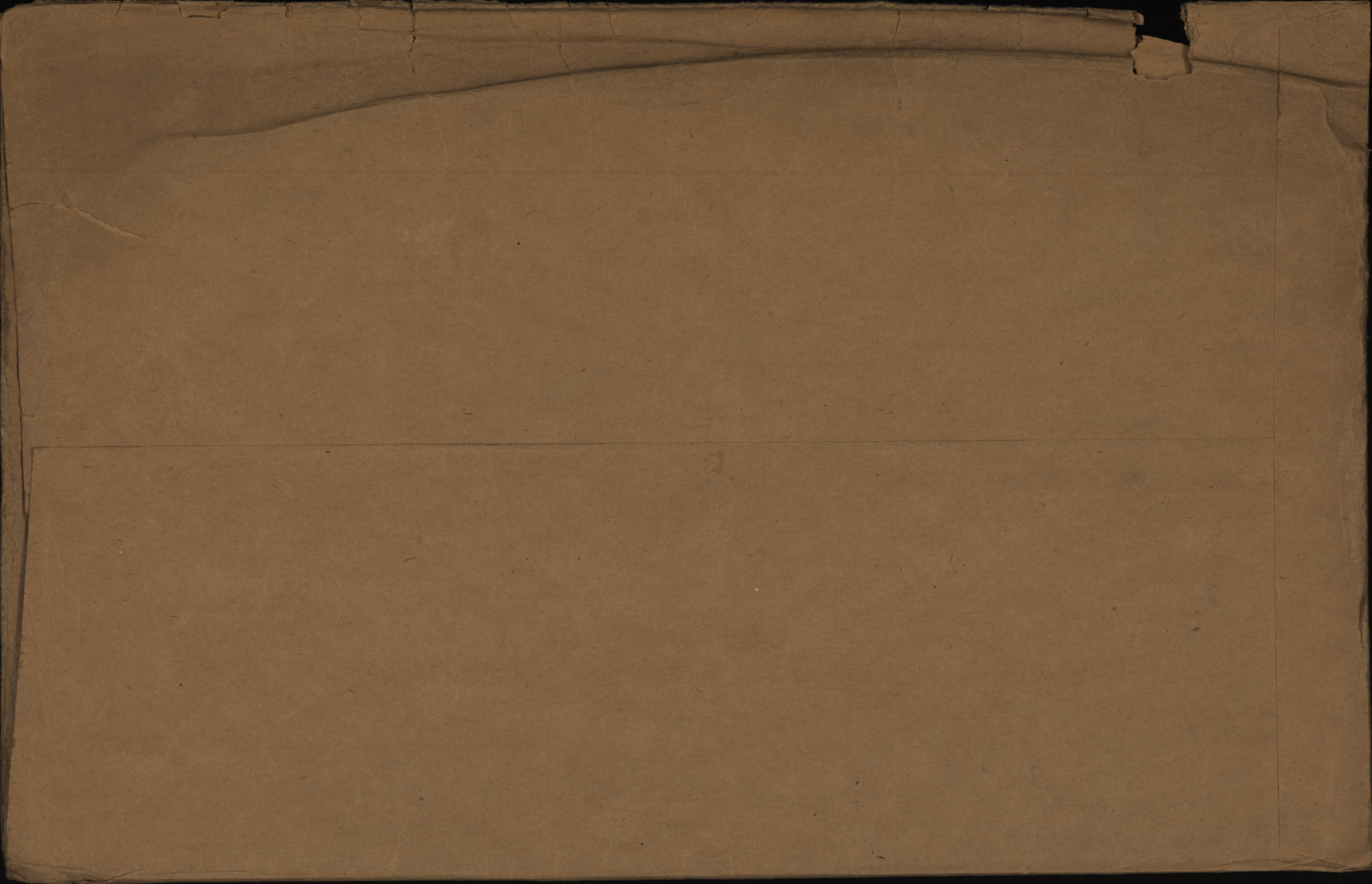
honor.

DESERTION

21037

8 17
8 17
7 18

2



you were

Number 931100 Rank Mr.

Surname TURNER

Christian Name Harry

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

Date of Service 17/5/17

Remarks c/o Mrs. A. Richardson,

Latest Address Beechville

15 3 1/2 Creighton St., St. Margaret's Bay

Roll No. B Page 14608 Halifax

200m-2-21.M. N.S.

B

X

DESP. JUL 5 1922
REGN. N^o 43382

HOSPITALS

DATE

DIAGNOSIS

M. F. W. 2553.

50M-6-19.

1772-39-1332.

NAME

Turner W.

RANK AND CORPS

Pvt. 2. Co.

REG'TL. No.

931100

H. Q. FILE NO. 649

FOLLOWS

No.

FOLLOWS

CABLE

NO.

DATE

NATURE OF CASUALTY

LIST NO.

HOSPITAL

DATE OF
ADMISSION

REMARKS

a 119. ¹²

Jura. Champpade.

14-1-18

H.S. Regt.
Haemorrhoids.

a 129.

Discharged ¹²

24-1-18.

" "

No. 931100 RANK

Pte.

NAME

Turner, Harry.

T. O. S.

9-8-16

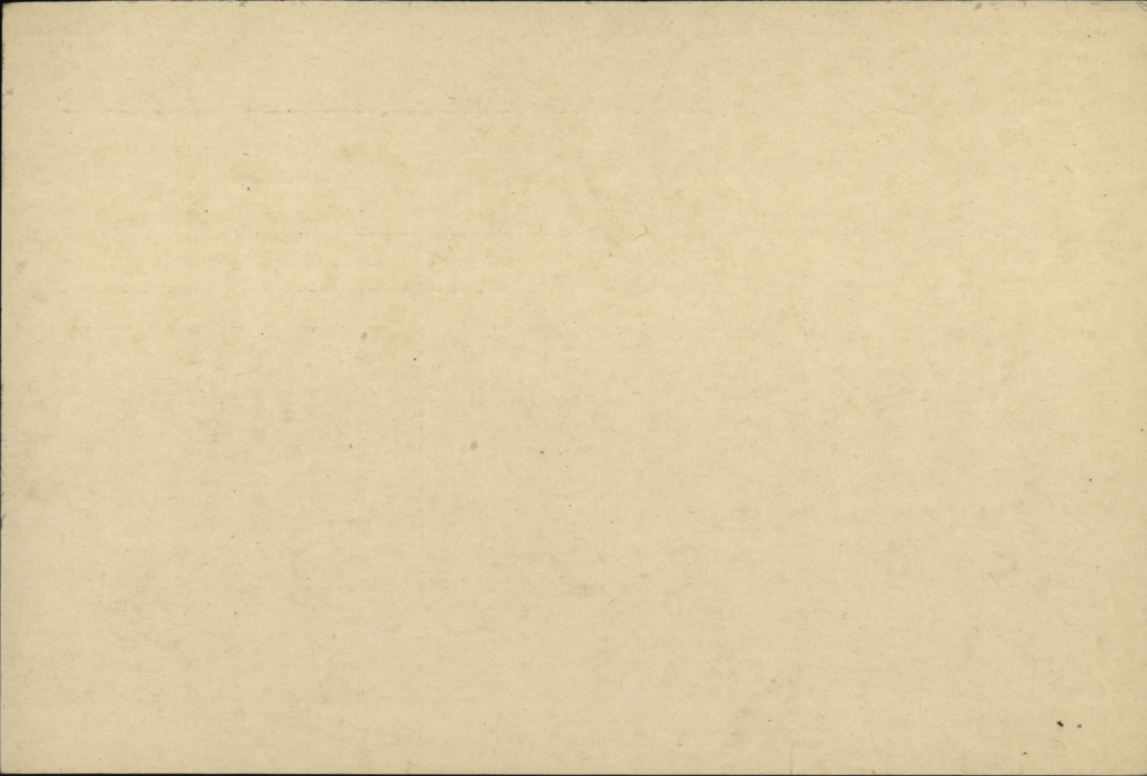
UNIT

No 2 Construction Battalion

D.O.B 7-8-16

M. D. 6

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
1916 Aug 9	1916 Aug 31	n.		
Sept.		n.		
Oct.		n.		
Nov.		✓		
Dec.		✓		
1917 Jan 1917		✓		
Feb.		n.		
Mar.		n.		



SURNAME

CHRISTIAN NAME OR NAMES

FORM D.M.S. 1300.

REG. NO.

TURNER

H.

931100.

RANK

UNIT

Co.

TROOP

BATTY.

Pte.

NS.2C on.

HOSPITAL

DATE OF ADMISSION

Jura Champagnole Jura. ³/₄

14-1-18.

1.

HOSP.

2.

HOSP.

3.

HOSP.

4.

HOSP.

DIAGNOSIS

Haemorrhoids. *h*

1

2

3

DISPOSITION

DATE

CL. 23-1-18 All 19.-2.

4.2.18 @ 129

REMARKS

Dis 24.1.18

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

2.

3.

4.

5.

6.

7.

*Name Turner, H. Rank Pte Regtl. No. 93 1100

Original unit 4th Bn. R.F.C. Present unit 4th Bn. R.F.C. M. or S. M. Age 24 Religion P.C. Ref. H.Q. 74-7 294

Port, ship and date of arrival Halifax, N.S. "Empress of Britain" 29/1/19

Next of kin Mrs Elizabeth Turner (Mother)

Address on leave 154 Broughton St. Halifax, N.S.

Address on discharge

Transportation issued Yes No Date

Character on discharge Labourer Date and place of enlistment Halifax N.S. 7/8/16

Previous occupation Labourer Date and place of enlistment Halifax N.S. 7/8/16

Diagnosis

Date of Medical Boards

Date.	Remarks.	Pt. 2 Order No.
29/1/19	F.O.S. from 12/1/19 Posted Camp Co	29
13.2.19	DISCHARGED at Halifax, N. S	80 43

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

Date.

Remarks

Pt. 2 Order No.

M. F. W. 192

150m.—5-18

1772-39-1243

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 931100 (Rank) Private

Name (in full) Harry Turner enlisted in
the #2 Construction Battalion

CANADIAN EXPEDITIONARY FORCE at Halifax, N.S. on the 7th
day of August 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 23 years 3 months

Height 5 feet 2 inches

Complexion Dark

Eyes Black

Hair Black

Marks or Scars

Nil

Harry Turner
Signature of Soldier
Arthur [unclear]
Witness

B. W. Macdonald CAPTAIN
O. C. DISCHARGE SECTION No. 6 DISTRICT DEPOT.

Date of Discharge February 13, 1919

Signed at Halifax, N.S. this 12th day of February 1919

in Military District No. 6 (Six)

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.

CANADIAN 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.

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. 921100 Rank Pvt. Name Turner St.
C. E. F.

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

Date of promotion to } Date of appointment } Numerical position on }
present rank } to lance rank } 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				
<u>12.1.190</u>	<u>Exec. I/O/S. No. 6</u>	<u>D.D. Befr.</u>	<u>Coy Co.</u>	<u>22.1.190</u>	<u>Do 29.</u> <u>Am. Berquon</u> Lieut ASST. ADJT No. 6 DISTRICT DEPOT
<u>13.2.19</u>		<u>DISCHARGED at Halifax, N. S</u>	<u>DO # 43</u>	<u>for R. Chyester</u> Lieut <u>O. C. DISCHARGE SECTION NO. 6 DISTRICT DEPOT</u>

(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, Shoehing Smith, etc., etc., also special qualifications in technical Corps duties.

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

Curry

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 Batt C & J
 Regimental No. 931100 Rank pte Name Harry Turner
 Enlisted (a) 7-8-16 Terms of Service (a) period of War Service reckons from (a) 7-8-16
 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)

CERTIFIED CORRECT.
 MAY 6 JUN 1917
 CAN. RECORDS, LONDON.

Report	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date From whom received	Embarked Canada Disembarked England Proceeded Overseas Coast Guard	Halifax N.S. Liverpool Bedford	25/3/17 27/4/17 MAY 17 1917	#2 S.O.# St. Romaeleau Lt Adjutant, No. 2 Construction Batt'n, C.E.F.
		Landed in France	17-5-17	N.R.
11.6.17.	oc Sentenced today F.P. #2. absent from 10 pm till 10:30 pm	Hd.	11.6.17.	Broby Pte 2-0. 122 78 17
14/1/18	Just hosp Haemorrhoids (S.W) adm		14/1/18	W 3024/68186
19-1-18	remis adm hosp		14/1/18	B 213
24-1-18	Just hosp Haemorrhoids Discharged		24-1-18	W 3024/10160
24/1/18.	oc mis Kept 24 hrs from hosp		24/1/18	B 213

(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.

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				
7.3.18	O.C. Unit	Suspended 10 days FP # 2 H.O.A.S. Disobedience of orders (failing to bathe and change underwear)	Field	4.3.18	B2069 No 26 of 26/3/18
18.7.18	O.C. Unit	10 days SP No 2. 16.7.18 for A. W. L. from 9.30 pm. 14.7.18 to noon 15.7.1918. Infirmary 2 days pay by Reg.	Field.	14.7.18	Reg No. 25 Aug 1918
31.8.18	NO	Granted 14 days leave	Field.	29.8.18	B213/190. 51 of Sept 1918
21.9.18	NO	Returned from leave	Field.	15.9.18	B213
11 ¹² / ₁₈	NO	Trans to Eng & posted to N.S. Reg Depot	Bramshott	14 ¹² / ₁₈	K.R. 344 C.A. Hewitt Lieut. for Lt.-Col., A. A. G. Canadian Section, G. H. O. 3rd Echelon, B. E. F.
17-12-18.	N.S. R.D.	T.O.S. attached to 2nd C.C.D. for Quarters & Nations.	Bramshott.	14-12-18.	DO ² 305.
	N.S.R.D.	ON COMMAND TO L.D. Kinnitt R. Hyl	BRAMSHOTT		PART II D.O. MRP 313 C.A. Knight LIEUT. OFFICER i/c RECORDS, NOVA SCOTIA REGTL. DEPOT.
		Embarked for Canada			12-1-19

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

MDL

NAME OF SOLDIER (Block Letters) TURNER H

REGIMENT No 2 Const Batta RANK Pte No. 93100

Date of Examination in England 30/12/18 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
2. EXTRACTIONS
3. CROWNS
4. DENTURES
 - (a) Full Upper
 - (b) Part Upper
 - (c) Full Lower
 - (d) Part Lower

Nil.

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

KINMEL PARK,
NORTH WALES.

Signature of Dental Officer

J. Somerville

W.D.

H. R. H.

The General Board of the

MS. 111

MS. 111
MS. 111

MS. 111
MS. 111

MS. 111

111

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 Plt. Name Turner Surname Harry
 Unit or Corps 17 Reserve (If a soldier) Regtl. No. 931100
 Born at Halifax on, date Aug eight 1897
 Signature (for identification) Harry Turner

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

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

Weight 145 lbs. no
 Height 5 ft. ins.

2. NUTRITION AND DIATHESIS P

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 P

no

4. RESPIRATORY SYSTEM.

no

5. HEART P

Abnormal Sounds? no
 Abnormal Size? no
 Pulse Rate? 76 Intermittence or irregularity? no

6. ARTERIES.—Any hardening?

no

7. DIGESTIVE SYSTEM P

no

8. GENITO-URINARY SYSTEM P

Urinalysis—s.g.? 1020 Reaction? ac Albumen? 0 Sugar? 0

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

no

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

no

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

Good

Examined at Kinnel Park Signed H.P. [Signature] M.O.
 Date 2/1/19 Signed [Signature] 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.

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. 931100 Rank Pte Surname Lurmer
(Given name in full)
Harry
 Unit or Corps DA #6 Birthplace Halifax N.S.

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

1. GENERAL DESCRIPTION:

Physique ... Good ... Weight 142 lbs. Height 5 ft. 2 in. Colour of Eyes dark brown
 Nutrition ... Good ...
 Pulse ... 76 ...
 Condition of arteries ... normal ...
 Vision Rt. ... Good ... Left ... Good ...
 Hearing (conversational voice) Rt. 15 ft.
 Left 15 ft.

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

Opinion as to general health and physical condition ... Good ...

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No") (Subjective evidence may be sufficient in certain cases.)

Nervous System ... no ... Genito Urinary System ... no ... Cardio-Vascular System ... no ...
 Special Senses ... no ... Integumentary System ... no ... Respiratory System ... no ...
 Disturbance of mentality ... no ... Muscular System ... no ... Digestive System ... no ...
 Osseous and Joint System ... no ... Any other general condition ... no ...

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

no 3. Gerry St. Lane. Halifax. N.S.
(If space is insufficient, continue on back of form.)

MEDICAL EXAMINATIONS
OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY
THIS SECTION FOR USE OVERSEAS—

Examined at(Overseas)

Date SignedM.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 *Feb 10, 1919.* Signed *Has Lovell*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 *Harry X Turner*

(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.)

DUPLICATE 931100

MEDICAL HISTORY SHEET

Surname Walter Turner Christian Name Harry

Examined on 7th day of August 1916
 at Habersham

Approved by B D Johnson
 Rank Capt. M.O.

Birthplace { City or Town Habersham
 County Wa Scotia

Apparent age 20 years

Trade or occupation Laborer

Height 5 feet 2 inches

Weight 126 lbs.

Chest measurement { Minimum 34 inches
 Maximum expansion 36 inches

Physical development Good

Small-pox Marks Nil

Vaccination Marks { Arm Right Left
 Number Nil

When Vaccinated last never

(a) Marks indicating congenital peculiarities or previous disease Nil

(b) Slight defects but not sufficient to cause rejection none

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

Date	Result	VACCINATIONS
<u>5/4/14</u>		<u>Dau Murray</u> M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>24/10/16</u>	<u>L.P.R.</u>	<u>H V Keut Major amb</u> M.O.
<u>31/10/16</u>	<u>L.P.R.</u>	<u>H V Keut Major amb</u> M.O.
<u>7/11/16</u>	<u>L.P.R.</u>	<u>H V Keut Major amb</u> M.O.

Enlisted on 7 day of August 1916 at Habersham

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment				<u>8/7/16</u>
Transferred to				

2 CONSTRUCTION, B'n. C.E.F. 931100

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT

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

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 Batt.

(2) Regimental Number 931100

(3) Full Name of Soldier Harry Turner

(4) Place of Birth Halifax N.S.

(5) Are you married, or not? no

(6) If married, state,
(a) Full name of your wife no

(b) Present Postal Address ~~77 Albermarle St Halifax N.S.~~

(7) Are you a widower? no

(8) Have you any children? no

If so, give number of boys and girls _____

Also their names and ages _____

(9) Is your Father alive? no

If so, state name and address

(10) Is your Mother alive? yes

If so, state name and address

154 Creighton ~~74 Albemarle St. Halifax N. S.~~ Mrs Elizabeth Turner

(11) If your Mother is a widow yes

Are you her sole support, or not? ~~yes~~ no

(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.

X

(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.

Mother
~~Mrs Elizabeth Turner~~
~~74 Albemarle St. Halifax N. S.~~

(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.

X

(15) Are you insured? no

If so, in what Company? no

Have you made arrangements for payment of your Insurance premium? no

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. Reis Capt
ja Officer Commanding.

Date OCT 28 1916

MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

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

To Whom

Address

Rate

By Whom Assigned

Regtl. No.

Rank

Corps

Mrs Elizabeth Turner
154. Brighton St.
Halifax
N.S.

15.00

APR 1917

Turner Harry
931100
Pte.
2nd Cdn. 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				



1111111111

12 1111111111

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2. *Mrs. Elizabeth Turner*
(Assignee)

Name of Soldier *Turner, Harry*

PAYMENTS.

Pte. 931100. 2nd Can. Bn.

L. L. Job 5470—Req. 6888.

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>15⁰⁰</i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		<i>Z 5145</i>	<i>15</i>	
May		<i>T 11919</i>	<i>15</i>	
June		<i>S 19160</i>	<i>15</i>	<i>lu</i>
July		<i>G 26207</i>	<i>15</i>	<i>lu</i>
Aug.		<i>V 32456</i>	<i>15</i>	
Sept.		<i>J 40699</i>	<i>15</i>	
Oct.		<i>H 46461</i>	<i>15</i>	
Nov.		<i>S 54210</i>	<i>15</i>	
Dec.		<i>Z 59979</i>	<i>15</i>	
Jan.	1918		<i>135</i>	
Feb.				
March				
April				
May				
June				
July				

APR 1917

M.F.C.

CANADIAN
ASSIGNED PAY AUDITED
W. Binks.
AUDIT CLERK
DATE *27/5/19*

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: 1 APR 1917		EFFECTIVE DATE: -	
AMOUNT: 15 ⁰⁰		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.	
Mrs Elizabeth Turner Mother 154 Creighton St. Halifax N.S. <i>Stopped off 1/1/19.</i>			

NAME: TURNER Harry
NUMBER: 931100

PARTICULARS OF RANK OR APPOINTMENT			
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT	
		Pt.	
UNIT AND TRANSFERS			
ORIGINAL UNIT: 2 Construction Bn			
DATE ACCOUNT FIRST OPENED: 1 APR 1917			
AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
L.P.C.	28/2/19		Canada

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
7/12	6632		4.66				
1/12	3592		9.75				
			14.59				

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS					
AUTHORITY	DATE EFFECTIVE	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
		1	10		

65602 New Book issued CFC 5 2/2

Canada 1/1/17 N.R. 101 17/12/18 Ledger Bal 55.50 39.41

MO	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
MAR 1918	Bal Ford								101.56		
Apr	P. Pay.	33		C.A.P.				15			
				AR 984 CFC para	3.57						
				272 22/4 -	3.57				112.42		
		33			7.14			15			
May	P. Pay	34	10	C.A.P.				15			
				AR 414 9/5 CFC para	3.57						
				428 23/5 -	3.57				121.38		
		34	10		7.14			15			
June	P. Pay	33		Ass Pay				15			
				AR 714 7/6 CFC 5	3.57						
				877 27/6 para	3.57				135.24		
		33			7.14			15			
July	P. Pay	34	10	Canada P				15			
				AR 954 10/7 CFC 5	3.57						
				AR 1099 25/7	3.57				147.20		
		34	10		7.14			15			
Aug	P. Pay	34	10	Canada P				15			
				10 days FP. 2. 16/7/18 ant. 939 Pn 14/7 until Nov. 15/7/18 for 2 days pay under Rev Bn 2 Con 7/8/18				13.20			
				AR 1262 10/8 CFC 5	3.57						
				AR 1476 25/8	3.57						
				CL 29149 31/8 LID	19.47						
				AR 1634 28/8 CFC 5	7.14				119.35		
		34	10		33.75	13.20		15			
Sep	P. Pay	33		Canada P				15			
				AR 22993 3/9 London	9.73						
				AR 3534 28/8 CFC 5	97.33						
		33		Canada P				15	119.35		

NUMBER 931100

RANK Pfc

NAME TURNER H

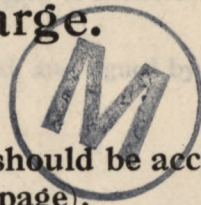
MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1918	Sep. Bradford	33		Bradford	107 06			15	119 35		
				CP. 32731. 11/9 London	2 87						
				AR 1881 2419 CFC 5	3 57				21 85		
		33			115 56			15			
OCT 1918	pbe pay	34 10		AP				15			
				2263 13/10 ✓	3 73						
				2328 26/10 ✓	3 73				33 49		
		35 10			7 46			15			
Nov.	✓	33		AP				15			
	✓	34 10		2699 11/11 ✓	3 73						
	✓			2917 26/11 ✓	13 06						
				AP				15	53 80		
				6632 10/12 CFB D.	4 66						
				3591 18/12 2Lls	9 43				39 41		
		67 10			31 8			30			
				169 10/1 2 hours LPL	9 73				29 68		
				audited	9 73						

SLC ban 12/19 BO 15 27/19 7288

CANADIAN
 ASSIGNED PAY AUDITED
 OK. to 31/12/18
 E.H.S. [Signature]
 AUDIT CLERK
 DATE 27/5/19

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.	931100
Rank	Private
Surname	Turner
Christian Name	Harry
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	#2 Construction Batts.
Date of Discharge	February 13, 1919
Place of Discharge	Halifax, N.S.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age	23 years 3 months		Descriptive Marks	(Place)
Height	5 feet 2 inches		Nil	(Date)
Complexion	Dark			
Eyes	Black			
Hair	Black			
Trade	Labourer			
Intended place of residence (To be given as fully as practicable.)	Beechville St. Margarets Bay Rd. Halifax Co., N.S.			(Place)

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

Demobilization

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.

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

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

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.

100M.—1-17.
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 the 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.

(Place)..... Halifax, N.S. Harry J. Turner (Signature of Soldier.)

(Date)..... Feb. 12th 1919 (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 N.S.

(Date)..... 13/2/19

(Signature).....

Damgefan

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.)

List of Discharge Documents.

<p>Militia Form B. 335</p>	<p>Reg. Conduct Sheet Militia Form B. 303a</p>
<p>Proceedings on Discharge Militia Form B. 318</p>	<p>Copies of Convictions by C. T. in M.S. Militia Form B. 313 Medical Report for Invalid* Militia Form B. 327 Statement of Man's Account on Transfer and Last Pay Certificate Militia Form D. 857</p>

Nil

Harry Turner

Mark

Witness

Squadron
Battery
Company

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.

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

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263.	Attestation Paper, Militia Form B. 235.
Squadron } Battery } Conduct Sheet, " B. 263a. Company }	Proceedings on Discharge " B. 218.
Copies of Convictions, by C. P. in MS.	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 (in the event of such having been prepared.)
Med. Hist. Sheet, Militia Form B. 313	
Medical Report for Invalid* " B. 227.	
Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.	
*Only if discharged "Medically unfit."	

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.

Additional Certificate in the case of a Soldier who has been discharged on his own request.

Statement of Service.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 132, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 931100 Rank Private Name Turner H.
 Corps 2nd who was* Discharged
 On 13-2-19 191... to 1-1-19 191...
 *Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-1-19 191... to 13-2-19 191... the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month		25 19	Balance Cr. from prev. month	11	15
Advances by Cheques } No. <u>13468</u>	20	00	Reg'tl. Pay <u>44</u> days at \$ <u>1</u> c.	44	00
} No. <u>75</u>	20	00	Field Allow. <u>44</u> days at \$ <u>10</u> c.	44	40
Assigned Pay and Sep'n Allee. No.			Separation Allowances* (Monthly)		
Other charges <u>Post fund</u>		03	Other Allowances* <u>66</u>	35	00
Payment on transfer or discharge No. <u>13419</u>	49	31	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)	70	00
Total	164	53	Total	164	53

*Give particulars.

A monthly stoppage of \$ 15.00 (†) has (‡) been paid on account of Assigned Pay for the month of Jan 191... (to) Assignee Mr. E. Turner and Sep'n Allee. for month of Jan 191...
 (Address) 154 Loughton St

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

On Transfer of an Officer. Made by: ade
 Out Allowance of \$ has been paid by Paymaster, Military District No. 60305

REMARKS: **M.D. No. 6**
No. 53
 State (1) date of enlistment
 (2) if married and if a Separation Allowance Card has been submitted no
 (3) cause of discharge Discharge authority D043
 (4) authority for transfer

NOTE.—Separation Allowance and Assigned Pay Card and Index Card (M.F.W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay List of the Unit.
 Date 24-2-19
 Place Hungary **PAYMASTER NO. DISTRICT** Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit, duplicate to District Paymaster; triplicate to accompany the pay list at the end of the month, and quadruplicate for retention as a record.
 For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay list at the end of the month, and triplicate for retention as a record.
 If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

UNITED STATES DEPARTMENT OF THE ARMY

TO THE DISTRICT DEPARTMENT OF THE ARMY

signed

M.D. NO. 6033

Made by: _____
Checked: _____

Final Last Pay

of the Unit

CAPTAIN
PAYMASTER NO. 1 DISTRICT DEPARTMENT

Retention for

papers; duplicate

made out in quad
Discharge Pay

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

April 17

OVERSEAS CONTINGENTS

T

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

<i>15</i>			
-----------	--	--	--

5870

PARTICULARS OF SEPARATION ALLOWANCE

No. *931100*

Rank *Pte* Promoted Reverted Discharge

Soldier's Name *Harry Turner*

Battalion *2nd Com Batta.*

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name *Mrs Elizabeth Turner*

Address *154 Creighton st.*

Change of Address *Halifax N.S.*

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>1917</i>					
<i>Dec 31</i>			<i>135</i>	<i>135</i>	
<i>Jan 18</i>	<i>66834</i>		<i>15</i>	<i>15</i>	
<i>Feb 1</i>	<i>68720</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Mar 10</i>	<i>92177</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Apr 10</i>	<i>8242</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>May 1</i>	<i>19772</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>June 1</i>	<i>26591</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>July 1</i>	<i>23644</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Aug 1</i>	<i>38463</i>		<i>15</i>	<i>15</i>	
<i>Sept 1</i>	<i>47250</i>		<i>15</i>	<i>15</i>	
<i>Oct 1</i>	<i>52984</i>		<i>15</i>	<i>15</i>	
<i>Nov 1</i>	<i>56532</i>		<i>15</i>	<i>15</i>	<i>✓</i>
<i>Dec 1</i>	<i>67555</i>		<i>15</i>	<i>15</i>	
<i>Jan 1</i>	<i>75456</i>		<i>15</i>	<i>15</i>	
			<i>330</i>	<i>330</i>	

M. F. W. 128
 400M-6-17-1772-88-1141
 L. L. 22520-M. & D. 1598.

A/c Closed 31/1/19

Ret'd per Compass Britain no 6

Date 22/1/19 M.F.W. 187 29/1/19

Closed 1/18/315-N-53

no 51786 off 29/1/19

CANADIAN
 ASSIGNED PAY AUDITED
W. Binks
 AUDIT CLERK
 DATE *27/5/19*

