Duplicate 931250

3/41/b #8

# ATTESTATION PAPER.

No.

No. 2 Construction Batt'n. C. E. F.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

## QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? Tyler.
a. What are your Christian names? Fletcher
b. What is your present address? Bridgetown, Anna. Co., N.S.
2. In what Town, Township or Parish, and in what Country were you born? Hillsburn, Anna. Co., N.S.
3. What is the name of your next-of kin? Mrs Percy Jackson
4. What is the address of your next-of-kin? Bridgetown, Anna. Co., N.S.,
4a. What is the relationship of your next-of-kin? Sister
5. What is the date of your birth? May 10th, 1894
6. What is your Trade or Calling? Farmer (Labourer)
7. Are you married? No
8. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes
9. Do you now belong to the Active Militia? No
10. Have you ever served in any Military Force? No
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? Yes.

## DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, ....., 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.

his
Fletcher + Tyler. (Signature of Recruit)
mark

Date Sep 6th 1916. Ernest Underwood (Signature of Witness)

## OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, ....., 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.

his
Fletcher X Tyler (Signature of Recruit)
mark

Date Sep 6th 1916. Ernest Underwood (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 Bridgetown this 6th day of Sep. 1916

Ernest Underwood (Signature of Justice)

M. F. W. 23.
600M.—2-16.
H. Q. 1772 39-841.

a J.P. in & for the County of Annapolis. N.S.

## Description of Fletcher Tyler on Enlistment.

Apparent Age 23 years 4 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft 6½ ins.

Chest measurement.
- Girth when fully expanded 36 ins.
- Range of expansion 3½ ins.

Complexion dark

Eyes dark

Hair black

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

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

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

## CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider h'm* fit for the Canadian Over-Seas Expeditionary Force.

Date Bridgetown 191 . W. E. Armstrong

Place Sept 6th 1916 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.

Fletcher Tyler 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 for (Signature of Officer)

Date OCT 20 1916 191 . LT. COL.

O. Comd'g No. 2 Construction Battalion, C. E. F.

3-4-19-2.m

REGIMENTAL DOCUMENTS

NAME TYLER. Fletcher REGT. NO. 23/2251 UNIT No.2 Construction Bn. H. Q. FILE NO.

| | CONTENTS | DATE RECEIVED | TO WHOM FORWARDED | DATE FORWARDED | M. F. W. 2505 REFERENCE | NON-EFFECTIVE BY |
|---|---|---|---|---|---|---|
| | ATTESTATION PAPER (M.F.W. 23, 133, or 51) | | | | | DEATH |
| | CASUALTY FORM (M.F.W. 54 or A.F.B. 163) | | | | | Category |
| | 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. 120) | | | | | |
| | 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) | | | | | DISCHARGE |
| | DENTAL HISTORY SHEET (M.F.B. 465) | | | | | Category |
| | MEDICAL REPORT (M.F.B. 227 or A.F.B. 179) | | | | | |
| 2 | MEDICAL EXAMINATION (M.F.W. 129) | | | | | Demob. |
| 1 | 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) | | | | | DESERTION |
| 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) | | | | | |
| 1. | COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A) | | | 22219 | | |
| 1. | A.F.W. 3997. | | | | | |
| 1 | Rqtn | | | | | |
| | | | | | | 15-18 |
| | | | | | | 15-18 |
| | | | | | | 11-19 |
| | | | | | | 1 |

W. 2569
100M-11-18
1772 39-1377

11

To be made out in duplicate.

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 ..... 931260

(3) Full Name of Soldier..... Fletcher Fyles

(4) Place of Birth..... Hillsburn N. S.

(5) Are you married, or not ? .....

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

(b) Present Postal Address..... ~~Bridgetown N.S~~

(7) Are you a widower ? .....

(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.
I772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ?—

If so, state name and address —

(10) Is your Mother alive ?—

If so, state name and address —

(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 To Cousin
Mrs Jessie Marsh Clarence N.S

(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.

Cousin Sister, Mrs Percy Jackson
Mrs Jessie Marsh Bridgetown
Clarence N.S Anna. Co. 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.

—

(15) Are you insured ?—

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. Reis Capt
*for Officer Commanding.*

Date OCT 21 1916

No. 931250 RANK Pte. NAME Tyler Fletcher

T. O. S. UNIT No 2. Construction Battalion

M. D. 6

| PAID FROM | PAID TO | SIG. OR REC'T | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. | |
|---|---|---|---|---|
| | | | PARTICULARS | AUTHORITY |
| 1916 Oct 1. | 1916 Oct. 31 | " | | |
| | Nov. | ✓ | | |
| | Dec. | ✓ | | |
| 1917 | Jan 1917 | ✓ | | |
| | Feb. | " | | |
| | Mar | " | | |

age.

Number 931250 Rank ~~Pte.~~ Spr.

Surname TYLER

Christian Name Fletcher

Units 66 O.R. 66. 66. Theatre of War France

Date of Service 17-5-17

Remarks

Latest Address Kentville

N.S.

Roll No. B Page 18287

200m.-2-21.M.

DESP OCT 26 1922
REGN. No. 116925
Bd U Ref 24 41 22

No. 1250 RANK Pte. NAME Fletcher Tyler

931250

T. O. S. 6-9-16 UNIT No 2 Construction Battalion.

D.O. 28 16-9-16

M. D. 6

| PAID FROM | PAID TO | SIG. OR REC'T | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. | |
|---|---|---|---|---|
| | | | PARTICULARS | AUTHORITY |
| 1916 Sept. 6 | 1916 Sept. 30 | W | | |
| Oct. | | W. | | |

Reg. No. 931250. Name Tyler Fletcher.

Rank Pte. Corporal Lance-Sergeant Age 24 Service

Ledger No. Serial No.

| HOSPITALS | DATE | DIAGNOSIS |
|---|---|---|
| Gen. Hosp. Etaples. N.S. | 19-1-17 | Pyrexia. |
| Dis. to duty. | 23-1-17 | |

P. T. O.

| HOSPITALS | DATE | DIAGNOSIS |
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M. F. W. 2553..
50M-6-19.
1772—39-1332.

SURNAME. Tyler

CHRISTIAN NAMES Fletcher

REGL. No. 931250 RANK Pte

UNIT No 2 Construction

FORMER CORPS Nil

6. CARD NO.

SOS 17/2/19 M.D.R.19 - Demob.

FOLL. 76.45-d-14/2/19.

Bn 689.

NEXT OF KIN.

NAMES IN FULL Jackson, Mrs Percy

RELATIONSHIP TO SOLDIER Sister

ADDRESS Bridgetown Annapolis Co N.S.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada Hillsboro NS DATE May 10th 1894

PLACE OF ATTESTATION Bridgetown N.S. DATE Sept-6 1916

R/C. 25/1/19. 256/11-6

L. L. 6945. M. & D. 6994.

M. F. W. 22. 100m.—8-18. H. Q. 1772-39-339.

From Halifax per S.S. "Southland" 28/3/17.

MARRIED SINGLE yes WIDOWER

TRADE OR CALLING Farmer RELIGION Baptist

DESCRIPTION.

APPARENT AGE 23 YEARS 4 MONTHS

HEIGHT 5 FEET 6½ INCHES

CHEST MEASUREMENT 32 INCHES EXPANSION 4 INCHES

COMPLEXION Dark EYES Dark HAIR Black

DISTINGUISHING MARKS Not stated.

MEDICAL EXAMINATION. PLACE Bridgetown N.S. DATE Sept-6th 1916

Present address Bridgetown. N.S.

*Name Tyler Fletcher Rank Pte Regtl. No. 93/250

Fyle Depot Ft-T-296

Original unit P.P.C.O.R. Present unit 6th D.D. M. or S. Age 23 Religion Bapt Ref. H.Q.

Port, ship and date of arrival Halifax Oct "Empress of Britain" 22/1/19

Next of kin Sister Mrs. Percy Jackson

Address on leave

Address on discharge

Transportation issued Yes / No Date Character on discharge

Previous occupation Labourer Date and place of enlistment Bridgetown N.S. 6/9/16

Diagnosis Date of Medical Boards

| Date. | Remarks. | Pt. 2 Order No. |
|---|---|---|
| 29/1/19 | T.O.S. from 12/1/19 Posted Cary Bn | 29 |
| 17-2-19 | DISCHARGED at Halifax, N.S. | 66 |

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

(over)

| Date. | Remarks | Pt. 2 Order No. |
| --- | --- | --- |
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M. F. W. 192
150m.—5-18
1772-39-1243

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. 931250 Rank Pte C. E. F. Name Tyler F.

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 | | | | |
| 12.1.19 | O'seas. T/O/S. No. 6 C.D. Hdqr. | Casy Co. 22.1.19 | | | A. M. Ferguson Lieut ASST. ADJT. No. 6 DISTRICT DEPOT |
| 17-2-19 | | DISCHARGED at Halifax, N. S DD. 45 | | | for 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 | | | | |
| | | | | | |

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 Batt C.E.F.

Regimental No. 931250 Rank Spte Name Tyler Fletcher

C. E. F.

Enlisted (a) 6-9-16 Terms of Service (a) Period of war & subs thereto Service reckons from (a) 6-9-16

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 | 25/8/16 | |
| | | Disembarked England | Liverpool | 7/4/17 | |
| | O.C. Dust Bn | Proceeded Overseas | Seaford | MAY 1 1917 | Pte 2 A.O.C. |
| | | | | | A. B. Maclean Lieut Adjutant, No. 2 Construction Batt'n, C.E.F. |
| | | Landed in France 17-5-17 N.R. | | | |
| 6/12/17 | O.C. Unit | 10 days F.P. No 2. for (1) Malingering. (2) Neglecting to obey an order of a superior officer | | 29-11-17 | B2064 P.29 Nov 1917 |
| 5/1/18 | O.C. Unit | att to 1 Dist Can Forest Corps | | 30/12/17 | B213 |
| 7-9-18 | O.C. 38 C.B.C. | Granted 14 days leave | Ash | 3-9-18 | B213 Army 52 of Sept 1918 |
| 28-9-18 | do | Returns from leave | Seaford | 19-9-18 | B213 |

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 | | | | |
| 28-11-18. | OC 38 Coy. C.T.C | Admonished. Forfeits 10 DAYS PAY R.W.<br>W.O.A.S-A.W.L 23.59 25-11-18.<br>until 07.00 26-11-18. | Field | 26-11-18. | B 2069. P. 68. 69. |
| 11 12/18 | A.A.G | Leave to Eng. & proceed to N.S. Reg Depot | Bramshot | 14 12/18 | K.R 344 |
| | | | | | Ca Hewett. Lieut. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F. |
| 17.12.18 | A.S.R.D. | T.O.S and attd 2nd C.B.D. for Quarters & Rations | Bramshott | 14.12.18 | D 0305 |
| | NSRD | ON COMMAND TO C.D.D. Kinmel Park BRAMSHOTT | | | PART II D.O. NSRD 313 27/12/18 |
| | | | | | Ca Knight LIEUT. OFFICER i/c RECORDS, NOVA SCOTIA REGTL. DEPOT. |
| 12/1/19 | | A.O.S. O.M. 76 on transfer to C.F.F. Discharge Canada Sailing No 4 | Kinmel Park | | |
| | | R.M. Hammond Lieut | Embarked for Canada | | 12/1/19 |

# CANADIAN EXPEDITIONARY FORCE

## Discharge Certificate

**This is to Certify** that No. 931250 (Rank) Private

Name (in full) Fletcher Tyler enlisted in

the No 2 Construction Battalion

CANADIAN EXPEDITIONARY FORCE at Bridgetown on the 6th

day of September 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 9 months

Height 5 Feet 11 Inches

Complexion Dark

Eyes Brown

Hair Black

Marks or Scars nil

his
Fletcher x Tyler
mark
Signature of Soldier

Witness

for J. M. Hughes LIEUT
O.C. DISCHARGE SECTION NO 6 DISTRICT DEPOT
Issuing Officer

Rank

Appointment

Date of Discharge February 17. 1919

Signed at Halifax N.S. this 17th day of February 1919

in Military District No. 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

# 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 this certificate will not be completed.

Particulars called for on back of this coupon.

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

# 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. 931250 Rank Pte Surname Tyler
(Give name in full)
F Gilchrist

Unit or Corps D.D.&.C. Birthplace Hillspring Annapolis County N.S.

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

1. GENERAL DESCRIPTION:

Physique good Weight 150 lbs. Height 5 ft. 11 in. Colour of Eyes Brown.

Nutrition good

Pulse 76

Condition of arteries good.

Vision Rt. 20/20 Left 20/20

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

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

Nil.

Opinion as to general health and physical condition good

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

Nervous System nil Genito Urinary System nil Cardio-Vascular System nil

Special Senses nil Integumentary System nil Respiratory System nil

Disturbance of mentality nil Muscular System nil Digestive System nil

Osseous and Joint System nil Any other general condition nil

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.

Kentville
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 ..... Feb 12/19..... 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 space to be used, if necessary, in connection with Section 3, overleaf, only.)

[OVER]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-39-1142.

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 Malical 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 Tyler Surname Fletcher

Unit or Corps 17th Reserve (If a soldier) Regtl. No. 931250

Born at Hillsboro, N.S. on, date May 10, 1895

Signature (for identification) Fletcher His X mark Tyler

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

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

Weight 164 lbs.

Height 5 ft. 7 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.** temporary bronchitis

5. **HEART?**

Abnormal Sounds? nil

Abnormal Size? nil

Pulse Rate? 64 Intermittence or irregularity? nil

6. **ARTERIES.**—Any hardening? nil

7. **DIGESTIVE SYSTEM?** nil

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

Urinalysis—S.G.? 1020 Reaction? acc 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 Kinmel Park Signed W. Stephens Capt. M.O.

Date 2-1-19 Signed [illegible] Major R.A.M.C. 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.*

931250

ORIGINAL

# MEDICAL HISTORY SHEET

Surname Tyler Christian Name Fletcher

Examined on 6 day of Sept 1916 at Bridgetown

Approved by W R Armstrong

Birthplace City or Town Hillsburn County Annapolis

Rank M.O.

Apparent age 23

Trade or occupation Labourer

Height 5 feet 6 1/2 Inches

Weight 150 lbs.

Chest measurement Minimum 32 inches Maximum expansion 36 inches

Physical development good

Small-pox Marks No

Vaccination Marks Arm Right — Left — Number None

When Vaccinated last Never

(a) Marks indicating congential peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection

| 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 | |
|---|---|---|---|
| 16/3/17 | Take | Dan Murray | M.O. |
| | | | M.O. |
| | | | M.O. |

| Date | Result | Anti-Typhoid Inoculations, Etc. | |
|---|---|---|---|
| 24/10/16 | Take | H.C. Kent Major A.M.S. | M.O. |
| 31/10/16 | Take | H.C. Kent Major A.M.S. | M.O. |
| 8/11/16 | Take | H.C. Kent Major A.M.S. | M.O. |

Enlisted on 6th day of Sept 1916 at Bridgetown N.S.

| | Corps | Regt'l Number | Habits | Date |
|---|---|---|---|---|
| Joined on enlistment | | 931250 | | 6/9/16 |
| 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 Taylor Christian Name H Alexander

| STATION | Date of Arrival at the Station | Dates of Admission into Hospital | | | Dates of Discharge from Hospital | | | 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 |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Day | Month | Year | Day | Month | Year | | | | |
| 1 Inland | | 19 | 1 | 17 | 28 | 1 | 17 | Pyrexia of Origin | 5 | | |

Form R 122
2353—100M—9-12-16.

C.T.

Rank — Name TYLER, Fletcher - Reg'l No. 931250 ✓

Unit No.2 Construction Bn. If in perm. Corps, What Unit? — Married or Single Single -

Place and Date of Enlistment Bridgetown.6th Sept.1916 - Place of Birth Hillburn, Anna Co.N.S.

Name and Address, Next-of-Kin Mrs Percy Jackson, -

Bridgetown, Anna Co., Nova Scotia, Canada. Relationship Sister -

C761

N/E. R.B. No.
File R.L.
Category OR CAN

Assigned Pay Monthly $ — Payable to — Relationship

Separation Allowance $ — Payable to — Relationship

Discharge, Date and Place — Reason — Character

H. W. V., Ld.—9546-16.

| 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 per S.S. Southland | | 7.4.17 | Awrd. |
| 14.6.17 | 2nd Const. Bn | Arrived in France | Field | 17.6.17 | |
| 16.12.18 | NSRD | TOS from 2nd CCC | fr Bchelt | 14.12.18 | AO 305 of 71 & 19.12.18 2 CCC. |
| 27.12.18 | N.S.R.D | O/C to C.D.D Rhyl | " | 27.12.18 | -313 |
| 5.1.19 | N.S.R.D. | ceases O/C & T Rhyl + L.o.S to C.E.F Canada | Rhyl | 12.1.19 | — 18. |

A.F.B. 103 CHECKED
30 MAY 1917

| 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. | | | | | |
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| | | | | | | |

P. 559

MARRIED OR SINGLE S.

PLACE OF BIRTH Hillburn, Anna. Co. N.S.

NAME AND ADDRESS OF NEXT OF KIN Mrs. Percy Jackson
Bridgetown, Anna. Co. N.S.

RELATIONSHIP OF NEXT OF KIN Sister

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

15.00
1/35

**CASUALTIES, PROMOTIONS, &c.**

| PARTICULARS | EFFECTIVE DATE | AUTHORITY |
|---|---|---|
| | | |

**ADMISSIONS TO HOSPITAL, &c.**

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

REG'L NO. 931250 RANK NAME Tyler Fletcher

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

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

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

DATE OF ATTESTATION Sept 16th 1916 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 15.00 DATE EFFECTIVE 1 Jany 1918. c.

PAYABLE TO Mrs Jessie Marsh, Clarence, Bridgetown, N.S. Canada. RELATIONSHIP Cousin.

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 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | Separ | | | | | | 26 25 | 26 25 | | | | | | | | | | | | | | | | 26 25 | | | | Bal from Canada. |
| Apl | 30 | 1 10 | 33 | 00 | | | | | | | | | | 33 00 | | | | | | | | | | | | | | | | 59 25 | | 15 - | 44 25 | |
| MAY | 31 | 1 10 | 34 | 10 | | | | | | | | | | 34 10 | 37 1/5 | | | | | | | 9 73 | | | | | | 14 60 | 78 75 | | 30 - | 48 75 | |
| June | 30 | - | 33 | 00 | | | | | | | | | | 33 00 | 65 14/5 | | | | | | | 4 87 | | | | | | 4 86 | 106 89 | | 45 - | 61 89 | |
| July | 31 | - | 34 | 10 | | | | | | | | | | 34 10 | | | | | | | | 4 86 | | | | | | - | 140 99 | | 60 - | 80 99 | |
| Aug | - | - | 34 | 10 | | | | | | | | | | 34 10 | | | | | | | | | | | | | | - | 175 09 | | 75 - | 100 09 | |
| Sep | 30 | - | 33 | - | | | | | | | | | | 33 - | | | | | | | | | | | | | | 17 83 | 190 26 | | 90 - | 100 26 | |
| | | | 201 | 30 | | | | | | | | | 26 25 | 227 55 | | | | | | | | 1946 | | | | | | 3729 | 190 26 | | 315 | | |

| MONTH | PARTICULARS | CR. 1 | CR. 2 | PARTICULARS | DR. 1 | DR. 2 | DR. 3 | DR. 4 | BALANCE | DEFERRED PAY | SER. ALLOWANCE |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Sep | Bal | ~~190 26~~ 86 | | | | | | | 190 26 | 315 | |
| Oct | P.P. | 34 10 | | AR.552 27/9. 2 Boots Tan Ank C.F.C. | 3 57 | | - | - | | 105 | |
| | | | | " 601 11 9/11 " " " " | 3 57 | | | | | | |
| | | | | " 471 13 6/12 " " " " | 3 57 | | | | 213 65 | 420 | |
| | | 34 10 | | | 10 71 | | - | - | | | |

CANADIAN
ASSIGNED PAY AUDITED
A.F. Hawkesworth
AUDIT CLERK
DATE 26/5/19

Pte G31250 Tyler. F.

Asst Asst - Eff. 1-1-18 15.00

| 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 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | CR.1 | CR.2 | PARTICULARS | | | | | | | DR.1 | DR.2 | DR3 | DR4 | BALANCE | | DEFER-RED PAY | SEP. ALLOE. Dep. | | | | | | | | | | | | | | |
| | Out Bal | | | | | | | | | | | | | | | | | 213 | 65 | | 320 | | | | | | | | | | | | | |
| Nov | P.P. | | | | 33 | - | | | | | | | | 3 | 57 | - | - | | | | 120 | | | | | | | | | | | | | |
| | | | | | | | -855. 12 10/17 | — | | | | | | 3 | 57 | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | "977. 25 10/17 | " | | | | | | 3 | 57 | | | | | | | | | | | | | | | | | | | | |
| DEC | " | | | | 34 | 10 | "1095. 10 11/17 | " | | | | | | 3 | 57 | | | 266 | 47 | | 135 | | | | | | | | | | | | | |
| | | | | | 67 | 10 | | | | | | | | 14 | 28 | | | | | | | | | | | | | | | | | | | |
| JAN | 1918 P.P. | | | | 34 | 10 | | | | | | | | | | - | 15 | | | | | | | | | | | | | | | | | |
| | | | | | | | Sta 10th. FP 3. 29 11/17 to 1. 2/18. | | | | | | | | 11 | — | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | AR 1264. 23 11/17. 26 months PE | | | | | | | 12 | 49 | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | "1599 7. 5 1/18 " " | | | | | | | 4 | — | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | "1438. 21 12/17 " " | | | | | | | 3 | 57 | | | 254 | 51 | | 135 | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | 19 | 85 | | | | | | | | | | | | | | | | | | | |
| | | | | | 34 | 10 | | | | | | | | 20 | 06 | 11 | — | - | 15 | | | | | | | | | | | | | | | |
| FEB | " | | | | 30 | 80 | Assigned Pay | | | | | | | | | | | - | 15 | | | | | | | | | | | | | | | |
| | | | | | | | "2036. 5 7/8. 26 months attc. &c. | | | | | | | 3 | 57 | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | "2196. 21 1/18 " " " | | | | | | | 3 | 57 | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | "2389 5/2/18 #1 " | | | | | | | 3 | 57 | | | | | | | | | | | | | | | | | | | | |
| | | | | | 30 | 80 | | | | | | | | 10 | 71 | | | 15 | 259 | 60 | 135 | | | | | | | | | | | | | |
| MAR 1918 | " | | | | 34 | 10 | Ass Pay | | | | | | | | | | | 15 | | | | | | | | | | | | | | | | |
| | | | | | | | AR. 2627. 20/2 #1. C.F.C. | | | | | | | 3 | 57 | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | "2885. 7 3/18 " | | | | | | | 3 | 57 | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | "3081. 19 3/18 " | | | | | | | 3 | 57 | | | | | | | | | | | | | | | | | | | | |
| | | | | | 34 | 10 | | | | | | | | 10 | 71 | | | 15 | 267 | 99 | 135 | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | 1080 | | | | | | | | | | | | | |

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable

| | |
|---|---|
| ASSIGNED PAY * ~~ENGLAND OR~~ CANADA. | SEPARATION ALLOWANCE. * ENGLAND OR CANADA. |
| EFFECTIVE DATE:- 1st Jany 1918 | EFFECTIVE DATE:- |
| AMOUNT:- 15.00 | AMOUNT:- |

NAME:- Tyler Fletcher

NUMBER:- 931250

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 Jessie Marsh Cousin.
Clarence, Bridgetown N.S.
Stopped eff 1/1/18

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.P.C. | | 28/2/19 | Canada |

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

1918

| DATE OF PAYMENT | NUMBER OF A.R | UNIT PAID BY | AMOUNT | DATE OF PAYMENT | NUMBER OF A.R | UNIT PAID BY | AMOUNT |
|---|---|---|---|---|---|---|---|
| 9/12 | 6636 | | ~~4.66~~ | | | | |
| 18/12 | 3592 | | ~~9.13~~ | | | | |
| | | | ~~13.79~~ | | | | |
| 25/11 | | 1 dep pay | ~~1.10~~ | | | | |

DAILY RATES OF PAY AND ALLOWANCES

| AUTHORITY | PAY | F.A. | P.F.A. | SUBS'CE ALL'CE |
|---|---|---|---|---|
| | 1 - - 10 | | | |
| Militia PR 161-17-12-1 | ~~1.4.91~~ 1.5.81 | | | ~~1.76.32~~ 1.95.87 |

Canada 1/18 Alg. 10/18 4/15.11.18 Ledger Balance L.P.C. ✓ 201.56 26

PARTICULARS OF RENDERING NON-EFFECTIVE:

| MO 1918 | PARTICULARS | CR 1 | CR 2 | PARTICULARS | DR 1 | DR 2 | DR 3 | DR 4 | BALANCE | DEFERRED 1080 | SEPARATION |
|---|---|---|---|---|---|---|---|---|---|---|---|
| MAR | Bal Ford | | | | | | | | 26799 | | |
| Apl | P. Pay | 33 - | | C&P | | | | 15 - | | | |
| | | | | aR 131 6/4 CFC 201 | 3 57 | | | | | | |
| | | | | aR 313 22/4 - " - | 3 57 | | | | 27885 | 135 | |
| | | 33 - | | | 7 14 | | | 15 - | | | |
| May | P. Pay | 34 10 | | C&P | | | | 15 - | | | |
| | | | | aR 508 7/5 CFC1 | 2 68 | | | | | | |
| | | | | " 736 22/5 - " - | 4 46 | | | | 29081 | 135 | |
| | | 34 10 | | | 7 14 | | | 15 - | | | |
| June | P. Pay | 33 - | | ~~all Pay~~ | | | | 15 - | | | |
| | | | | aR 923 7/6 CFC1 | 3 57 | | | | | | |
| | | | | ✓ 1119 22/6 ✓ | 3 57 | | | | 30167 | 135 | |
| | | 33 | | | 7 14 | | | 15 | | | |
| July | P Pay | 34 10 | | Can A P | | | | 15 | | | |
| | | | | aR 1309 6/7 CFC1 | 3 57 | | | | | | |
| | | | | aR 1518 22/7 ✓ | 3 57 | | | | 31363 | 135 | |
| | | 34 10 | | | 7 14 | | | 15 | | | |
| Aug | P Pay | 34 10 | | Can A P. | | | | 15 | | | ~~13000~~ |
| | | | | aR 1713 6/8 CFC1 | 3 57 | | | | | | |
| | | | | aR 1960 22/8 ✓ | 3 57 | | | | | | |
| | | | | aR 2057 31/8 ✓ | 3 57 | | | | 32202 | 135 | |
| | | 34 10 | | | 10 71 | | | 15 | | | |
| Sep | PP | 33 | | Can A P | | | | 15 | | | |
| | | | | CP 31503 7/9 London | 73 00 | | | | | | |
| | | | | CP 32979 17/9 London | 9 73 | | | | | | |
| | | | | aR 3716 21/9 CFC1 | 97 33 | | | | 159 96 | 135 | 4a |
| | | 33 | | | 180 86 | | | 15 | | | |
| | | | | | | | | | | 1890 | |

DIAN AUDITED
RECEIVED
AUDIT CLERK
DATE 28 Feb 1919

NUMBER 931250 RANK Pte NAME TYLER F.

| MONTH | PARTICULARS | CR. 1. | CR. 2. | PARTICULARS | DR. 1 | DR. 2 | DR. 3. | DR. 4. | BALANCE | DEFERRED | SEPARATION |
|---|---|---|---|---|---|---|---|---|---|---|---|
| OCT 1918 | | | | Forward | | | | | 159 96 | 180 00 | |
| | Pte pay | 34 10 | | A Pay | | | | 15 | | | |
| | | | | 2694 7/10 C.F.C.I | 3 73 | | | | | | |
| | | | | 2946 23/10 ✓ | 3 73 | | | | 141 60 | 135 | |
| | | 34 10 | | | 7 46 | | | 15 | | | |
| Nov | ✓ ✓ | 33 | | C A.P. | | | | 15 | | | |
| | ✓ ✓ Dec | 34 10 | | 3113 8/11 ✓ | 3 73 | | | | | | |
| | Int. on Def pay 31/12/18 Cr. | 9 65 | | 3320 26/11 ✓ | 13 06 | | | | | | |
| | | | | C.A.P. Dec. | | | | 15 | 124 84 | 135 | |
| | | | | 6636 10/12 C.F.C.R.D. | 4 66 | | | | | | |
| | | | | 3592 18/12 ✓ No | 9 73 | | | | 185 89 | 270 | |
| | | | | Allot. 2352 25/11 - 0701 26/11/18 | | | | | 109 12 | 270 | |
| | | | | 1 Leap by Rld. 26/11/18 BO. | | 1 10 | | | | 135 | |
| | | | | 69 10/12 2 C Coy | | | | | 185 46 | 229 5 | |
| | 96 14 | | | | 31 18 | 1 10 | | 30 | | | |
| | | | | 194 10/1 Rbk Endorsed | 9 73 | | | | 175 73 | | |
| | | | | | 9 73 | | | | | | |
| | | | | S.D.S.Saw 12/1/19 DO. 18 25/1/19 NSRD | | | | | | | |

War Service Badge
Class "A" # 76151 issued
AW.

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. | 931250. |
| Rank | Private |
| Surname | Taylor |
| Christian Name | Fletcher |

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

| | |
|---|---|
| Corps (Squadron, Battery or Company) | No 2 Construction Battalion |
| Date of Discharge | February 17. 1919. |
| Place of Discharge | Halifax N.S. |

**1.** DESCRIPTION AT THE TIME OF DISCHARGE.

| | |
|---|---|
| Age | 24 years 9 months. |
| Height | 5 feet 11 inches. |
| Complexion | Dark |
| Eyes | Brown |
| Hair | Black |
| Trade | Farmer |
| Intended place of residence (To be given as fully as practicable.) | Centreville N.S. |

Descriptive Marks

nil

**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.

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.

100M.—1-17.
H. Q. 1772-39-113.

(OVER)

Discharged
Dec. 18/3/19.

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.

(Place) Halifax N.S. Fletcher his mark Tyler ..... *(Signature of Soldier.)*

(Date) Feb 14/19 C W MacLean witness ..... *(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) 25- 2 19

*(Signature)* .....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

his
Fletcher x Tyler
mark.

Neomacbean
witness

(OVER)

# List of Discharge Documents.

| | | |
|---|---|---|
| Reg. Conduct Sheet, | Militia form | B. 263. |
| Squadron / Battery / Company — Conduct Sheet, | " | B. 263a. |
| Copies of Convictions, by C. P. | | in MS. |
| 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."

| | | |
|---|---|---|
| Attestation Paper, | Militia Form | B. 235. |
| 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 (in the event of such having been prepared.)

*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.*

(458) Wt. W. 2290—PP1182 6-18 J.F.W. (E5277)

27-12-18

Army Form W3997.

6

Regtl. No. 91250 Rank Pte

Name Tyler J
(Christian Names in full) (Surname)

Unit 2 Lon Bn. Regt. or Corps R.S.L.R.

Category. A1 Next of Kin. Cousin

REASON FOR RETURN.

Medical Board held at Bramshott. 1918.

INTENDED PLACE OF RESIDENCE. St John

# COVER

FOR

# DISCHARGE DOCUMENTS.

CAMPAIGNS. MEDALS AND DECORATIONS.

✓ Attestation Paper.
✓ Casualty Form.
✓ Field Conduct Sheet.
✓ Med: Hist Sheet.
Med: Board Proceedings.
D.O.S.2.
C.A.D.C. 5009.
Last Pay Certificate.

7 OK

JAN 12 1919 29
Taken on Strength ..... B. C. .....

AUDITOR | PAYMASTER

M. OR S. Emp. of Britain 21/1/18

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

REGT. No. 931250 RANK Pte. NAME (IN FULL) Tyler F.

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? nil. DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

| PARTICULARS | EFFECTIVE DATE | AUTHORITY |
|---|---|---|
| 1 | | |
| 10 | | L.P.L. |

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

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 15.00 DATE EFFECTIVE FEB 1 1919 159

PAYABLE TO Mrs Jessie Marsh RELATIONSHIP

ADDRESS ~~Chatham, Baddeck~~ N.S. Kentville Kings Co N.S.

ANY CHANGE IN ASSIGNEE OR ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE — DATE 17-2-19 — REASON Demob'n. — AUTHORITY D.O. 45 — 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 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Subs. P.D. 529 |
| Jan 1 | | | | | 11 | 20 | | | 11 | 20 | | | | | | | | | | | | | | | | 05 | | | | | | | | | | |
| 1/1 to 3/19 | 48 | 1.10 | 52 | 80 | 120 35 | 66 | 11 | 15 | 219 | 61 | | | | | | | A.K. 732 50 | 00 | | | 151 17 169 | 56 | | | | 05 | | | | | | 219 | 61 | | | | x 61 L.P.C. |
| | | | | | | | | | | | | | | | | | | | | | 151 18 70 | | | | | | | | | | | 70 | | 70 | | |
| | | | | | | | | | | | | | | | | | War Service Gratuity | | | | | | | | | | | | | | | | | | | |
| | 153 | | 350 | 00 | | | | | 350 | 00 | | | | | | | March 20/19 Gratuity | | | | 70 | 00 | | | 70 | 00 | | | | | | 140 | 00 | 210 | 00 | |
| | | | | | | | | | | | | | | | | | April 15/19 149965 | | | | 70 | 00 | | | | | | | | | | | | 140 | | |
| | | | | | | | | | | | | | | | | | May 13/19 585067 | | | | 70 | 00 | | | | | | | | | | | | 70 | 00 | |
| | | | | | | | | | | | | | | | | | June 13/19 596997 | | | | 70 | 00 | | | | | | | | | | | | nil | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | 350 | 00 | | | | | 350 | 00 | | | | | | | | | | | 280 | 00 | | | 70 | 00 | | | | | | 350 | 00 | | | | |

Certified that all payments due on this acct. have been paid.

..... Capt.,
For Senior Officer Pay Services, M. D. 6

30M-11-18.—L.L. 50877-M. & D. 9553.

| 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. | $ | C. | $ | C. | $ | C. | NO. | DATE | NO. | DATE | NO. | DATE | $ | C. | $ | C. | $ | C. | $ | C. | $ | C. | $ | C. | $ | C. | $ | C. | $ | C. | $ | C. | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Date of Enlistment

MILITIA AND DEFENCE

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS T 6246

Date of Assignment Jany 1/18

RATE OF SEPARATION ALLOWANCE

| | | | |
|---|---|---|---|
| | | | |

RATE OF ASSIGNMENT

| | | | |
|---|---|---|---|
| 15.00 | | | |

## PARTICULARS OF SEPARATION ALLOWANCE

No. 931250

Rank Pte Promoted Reverted Discharge

Soldier's Name Fletcher Tyler

Battalion 2nd Construction Batt

Beneficiary

Relationship

Address

## PARTICULARS OF ASSIGNMENT

Name Mrs Jessie Marsh

Address Clarence

Change of Address Bridgton N.S.

1 MRS.JESSIE MARCH,
CLARENCE,
BRIDGTON,N.S. 15 15.00
% 931250 PTE FLETCHER TYLER
FIFTEEN DOLLARS

2 M Feb 4/18

3 a/c for Jan/18

4 a/c P.O. #2282 issued to adjust Feby ck now issued 27/3/18

| | Date | | Cheque No. | Amount S/A | Amount A/P | Total | REMARKS |
|---|---|---|---|---|---|---|---|
| | Feb | | | | ~~15~~ | ~~15~~ | |
| | " | U | 72828 | | 15 | 15 | mailed 11-2-18 ✓ |
| | Mar | M | 92508 | | 15 | 15 | ✓ |
| Mailed | Mar 28 | U | 85-985 | | 15 | 15 | ✓ |
| | Apr | M | 85-78 | | 15 | 15 | ✓ |
| | May | T | 20140 | | 15 | 15 | ✓ |
| | June | P | 26934 | | 15 | 15 | ✓ |
| | July | D | 23990 | | 15 | 15 | ✓ |
| | Aug | T | 38807 | | 15 | 15 | |
| | Sept | P | 47594 | | 15 | 15 | |
| | Oct | G | 5-3329 | | 15 | 15 | |
| | Nov | O | 86877 | | 15 | 15 | |
| | Dec | M | 67773 | | 15 | 15 | |
| | Jan | L | 75-762 | | 15 | 15 | |
| | | | | | 195 | 195 | |

CANADIAN
ASSIGNED PAY AUDITED
AUDIT CLERK
DATE 26/3/19

A/c Closed 31/1/19

Ret'd per England Britain MO 6

Date 22/4/19 M.F.W.187 28/1/19

A/c Closed 18334-t-12

MO 5-1771

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7993.

Date of Enlistment

MILITIA AND DEFENCE

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

| | | | |
|---|---|---|---|
| | | | |

RATE OF ASSIGNMENT

| | | | |
|---|---|---|---|
| | | | |

## PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank  Promoted  Reverted  Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

## PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

| Date | Cheque No. | Amount S/A | Amount A/P | Total | REMARKS |
|---|---|---|---|---|---|
| | | | | | |

M. F. W. 128
400M—6-17—1772-39-1141
L. L. 22520—M. & D. 7493.

# CANADIAN CONTINGENT EXPEDITIONARY FORCE

## LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 931250 Rank Pte. Name Tyler, F.

Corps 2nd. Bn. who was* Discharged

On 17-2-19 191..., to .....

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-1-19 191....

to 17-2-19 191..., the inclusive date of transfer or discharge.

| Dr. | $ | c. | Cr. | $ | c. |
|---|---|---|---|---|---|
| Bal. Dr. from prev. month | | | Balance Cr. from prev. month | 11 | 15 |
| Advances by Cheques No. W.S.G. 15118 | 70 | 00 | Regt'l. Pay 48 days at $ 1 c. | 48 | 00 |
| No. A.R. 73 D. | 50 | 00 | Field Allow. 48 days at $ c. 10 | 4 | 80 |
| Assigned Pay and Sep'n Allce. No. | | | Separation Allowances* (Monthly) | | |
| Other charges Regt. Fund 15117 | | 05 | Other Allowances* Clothing | 35 | 00 |
| Payment on transfer or discharge No. 169 | 56 | | Other Credits* L.P.C. | 120 | 66 |
| Balance Cr. (to be paid by the new unit) | | | Bal. Dr. (to be deducted by new unit) | 70 | 00 |
| Total | 289 | 61 | Total | 289 | 61 |

*Give particulars.

A monthly stoppage of $ 15.00 (†) has (‡) been paid on account of Assigned

Pay for the month of Jan. 191... 9
and Sep'n Allce. for month of 191...

(to) Assignee Mrs. Jessie Marsh,

(Address) Clarence, Bridgetown,

N.S.

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

### On Transfer of an Officer.

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

REMARKS:—

State (1) date of enlistment .....

(2) if married and if a Separation Allowance Card has been submitted No.

(3) cause of discharge Demob. authority D.O.45

(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 20-2-19

Place Halifax, N.S.

..... CAPT.
*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.

M. F. W. 44.

H.Q. 1772-39-903.
100M-9-18. D.P. 874.

No. 6 District Depot
No. RECORDS OFFICE
FEB 23 1919
HALIFAX, N.S.

# CANADIAN CONTINGENT EXPEDITIONARY FORCE

## LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 1917 (C.E.F., 1918).

Regimental No. ..... Rank ..... Name .....

Corps ..... who was* .....

On ..... 191 ..., to ..... 191 ...

*Insert "discharged" or "transferred"

The following is a statement of the account of the above named from ..... 191 ...

to ..... 191 ..., the inclusive date of transfer or discharge.

| Dr. | $ | c. | Cr. | $ | c. |
|---|---|---|---|---|---|
| Bal. Dr. from prev. month | | | Balance Cr. from prev. month | | |
| Advances by No. | | | Regt'l. Pay ..... days at $ ..... c. | | |
| Cheques No. | | | Field Allow. ..... days at $ ..... c. | | |
| Assigned Pay and Sep'n Allce. No. | | | Separation Allowances* (Monthly) | | |
| Other charges* | | | Other Allowances* | | |
| Payment on transfer or discharge No. | | | Other Credits* | | |
| Balance Cr. (to be paid by the new unit) | | | Bal. Dr. (to be deducted by new unit) | | |
| Total | | | Total | | |

*Give particulars.

A monthly stoppage of $ ..... (1) has ..... (1) been paid on account of Assigned Pay for the month of ..... 191 ...

and Sep'n Allce. for month of ..... 191 ... (to) Assignee .....

(Address) .....

.....

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

### On Transfer of an Officer.

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

REMARKS:—

State (1) date of enlistment .....

(2) if married and if a Separation Allowance Card has been submitted .....

(3) cause of discharge ..... authority .....

(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 .....

Place .....

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.

M. F. W. 14.

H.Q. 1172-89-1903.
200M-9-18. D.P. 874.