

REGIMENTAL DOCUMENTS

NAME *ACMLEY CLIFFORD*

REGT. NO. *264776*

UNIT *213<sup>th</sup> Bn.*

H. Q. FILE NO.

*796*

**S**

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TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505  
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DEATH

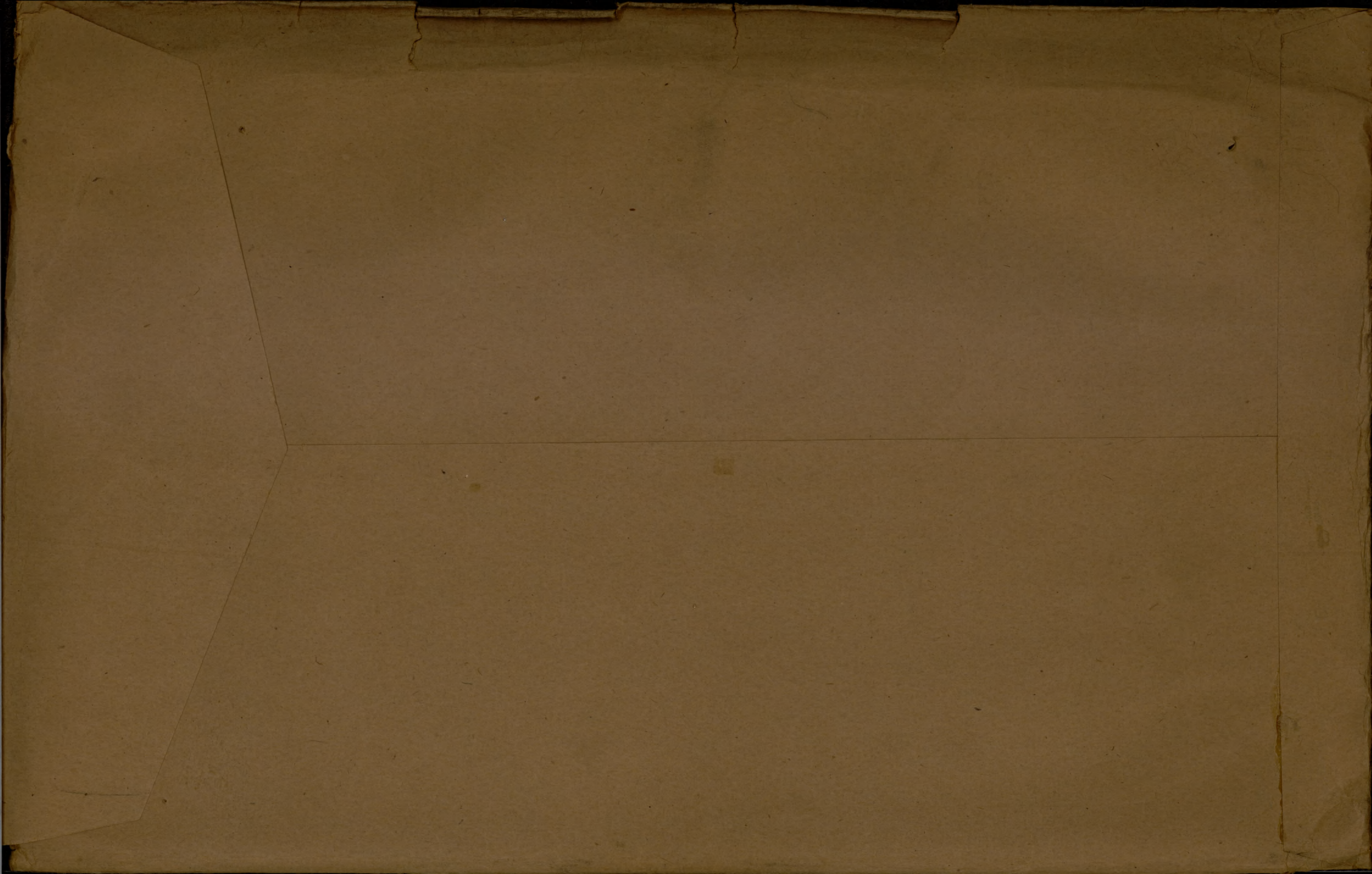
Category

DISCHARGE

Category

*Plenob*

DESERTION



ATTESTATION PAPER.  
213th OS Bn., CEF

No. 264776

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.  
(ANSWERS.)

- 1. What is your surname? ..... Ackley
- 1a. What are your Christian names? ..... Clifford
- 1b. What is your present address? ..... Bancroft St., Toledo, O/
- 2. In what Town, Township or Parish, and in what Country were you born? ..... Cincinnatti, Ohio
- 3. What is the name of your next-of-kin? ..... Mrs. L.G. Witham
- 4. What is the address of your next-of-kin? ..... 2134 Eastern Ave., Cincinnatti, Ohio
- 4a. What is the relationship of your next-of-kin? ..... Mother
- 5. What is the date of your birth? ..... Dec. 21st, 1886/
- 6. What is your Trade or Calling? ..... Painter
- 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? ..... None  
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, Clifford Ackley, 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 November 27th 1916 Clifford Ackley (Signature of Recruit)  
L. G. Witham (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Clifford Ackley, 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 November 27th 1916 Clifford Ackley (Signature of Recruit)  
L. G. Witham (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 Windsor this 27th day of November 1916  
J. J. Quinn (Signature of Justice)

Description of Ackley, Clifford on Enlistment.

Apparent Age 29 years 11 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. 6 ins.

Sc from burn on l. leg.

Chest measurement { Girth when fully expanded 36 ins.  
 Range of expansion 34 ins.

Complexion Fair  
 Eyes Blue  
 Hair Light Brown

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

I consider him\* fit for the Canadian Over Seas Expeditionary Force.

Date November 27th 191 6

Place Windsor, Ont.

*[Handwritten Signature]*  
 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.

Clifford Ackley 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. 215th CS Bn., CEF (Signature of Officer)

Date November 27th 191 6

# CANADIAN EXPEDITIONARY FORCE

## Discharge Certificate

This is to Certify that No. 264776 (Rank) SPT.

Name (in full) ACKLEY, CLIFFORD enlisted in  
the 213th Bn.

CANADIAN EXPEDITIONARY FORCE at Windsor, Ont. on the 27th  
day of November 19 16

HE served in England and 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 32 yrs.

Height 5' 6"

Complexion Fair

Eyes Blue

Hair L. Brown

Marks or Scars

Yacc. scars on left arm

Clifford Ackley  
Signature of Soldier

James L. Spence  
Issuing Officer

O.C. No. 2 District Depot.  
Rank

Date of Discharge March 26th, 1919

Appointment

Signed at Toronto, Ont. this 26th day of March 19 19

in Military District No. 2

File Reference No.

TORONTO

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

Uniform is not to be worn after  
expiration of one month from  
date of discharge, except by special  
permission of G. O. C. district.

On demobilization the  
particulars called for on  
the back of this cer-  
tificate will not be cor-

DUPLICATE

264776

H.Q. 54-21-23-53

To be made out in duplicate.

*[Handwritten signature]*

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 213th OS Bn., CEF

(2) Regimental Number 264776

(3) Full Name of Soldier Clifford Ackley.

(4) Place of Birth Cincinnati, Ohio, USA

(5) Are you married, or not? No

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

(b) Present Postal Address.....

(7) Are you a widower? No

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

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

Also their names and ages.....

(9) Is your Father alive?..... No - Stepfather: L.G. Witham,  
If so, state name and address..... 2134 Eastern Ave., Cincinnati, Ohio, USA

(10) Is your Mother alive?..... Yes - Mrs. Minnie Witham,  
If so, state name and address..... Same as father.

(11) If your Mother is a widow..... Yes (Remarried)  
Are you her sole support, or not?.....

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

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

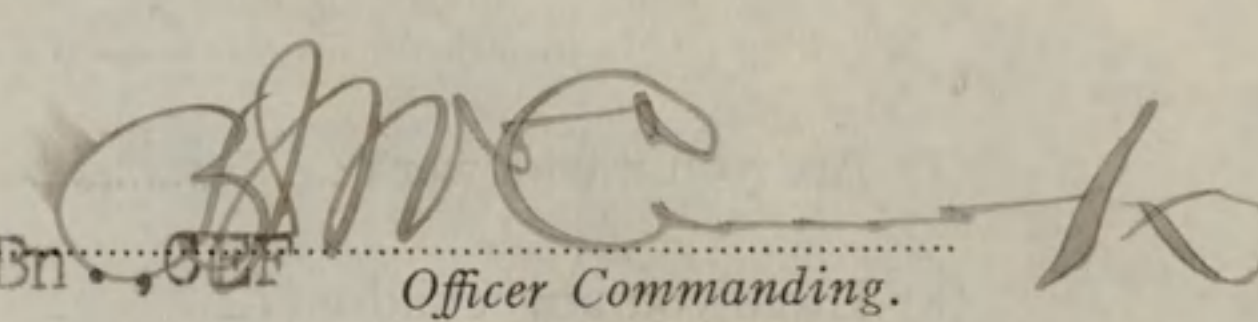
(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

(15) Are you insured?..... No

If so, in what Company?.....

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

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

Lt. Col., 213th CS Bn., 6888  Officer Commanding.

Date..... 27th November, 1916.



RECEIVED  
MAY 11 1916  
SPECIAL AGREE WITH  
C. J. ...

DEPARTMENT OF MILITIA AND DEFENCE.

DISCHARGED

WAR SERVICE GRATUITY.

OTTAWA, CANADA.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

If the applicant will enquire at the local Branch of the Canadian Patriotic Fund he will be informed if there is an official who will take this Declaration free of charge.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

1. Christian Names *Clifford* 2. Surname *Ackley*
3. Rank *Private* 4. Original Unit *213 Bn.* 5. Reg. No. *264776*
6. Address, in full, to which future payments of gratuity are to be forwarded  
*2134 Eastern Ave.  
Cincinnati Ohio U.S.A.*
7. Date of enlistment in the C.E.F. *Nov. 27/1916*
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge
9. Relationship of such dependent *Not Applicable*
10. Present address, in full, of such dependent
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:  
*C.E.F. Depot Quebec May 1917*
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? *No*
14. Were you on active service only in Canada or the United States? If so, give particulars of units and dates of such service *No*
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served  
*27/11/16 To 26/3/19* *213 Bn. 211 Bn. 5 C.P.R.*
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department *2 1/2 years*
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? *3 months* *No*

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units. *No*
19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid *No*
20. Have you been issued with a War Service Badge? If so, what class? *No*
21. Have you, during the present war, served in the Imperial Forces? *No*
22. Are you entitled to received, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled *No*
- 23 (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England
- (b) If so, was such reversion in consequence of misconduct or inefficiency?
24. Are you now serving in the C.E.F. *No* If not, give:—(a) Date of discharge *26/3/19* (b) Reason for discharge *Demobilization*
25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit
26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit *S.P. C.R.C. May 1917 - Jan 1919*
27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? (b) If so, are you in receipt of full pay and allowances from that Department?

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: *Ackley, G. 2134 Eastern Ave. Cincinnati Ohio W.S. 9.*

Place of Residence:

Declared before me at: *Town*

This *MAR 20 1919* day of 19....

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner of the Administration of Oaths. *[Signature]*

POST DISCHARGE PAY.				
Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....

Certified Correct.

District Paymaster.

# ORIGINAL MEDICAL HISTORY SHEET

ORIGINAL

Surname Ackley Christian Name Clifford

Examined { on 27th day of November 1916  
 at Windsor, Ont.

Approved by W.R. Stackhouse  
 Rank Capt. M.C. M.O.

Birthplace { City or Town Cincinnati  
 County Ohio

Apparent age 29 yrs 11 mos

Trade or occupation Painter

Height 5 feet 6 Inches

Weight 140 lbs.

Chest measurement { Minimum 34 inches  
 Maximum expansion 36 inches

Physical development Good

Small-pox Marks None

Vaccination Marks { Arm Right Left 1  
 Number 1

When Vaccinated last Childhood

(a) Marks indicating congenital peculiarities or previous disease Appendix 1 yr. ago.

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

R.E. 20 L.E. 20  
20

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
Date	Result	VACCINATIONS
<u>11/1/17</u>	<u>W.R. Stackhouse</u>	M.O.
		M.O.
		M.O.
Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>8/12/16</u>	<u>+ W.R. Stackhouse</u>	M.O. <u>Paratyphoid</u>
<u>10/1/17</u>	<u>W.R. Stackhouse</u>	M.O.
		M.O.

Enlisted on 27th day of November 1916 at Windsor, Ont.

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>213th O.S.Bn. C.E.F.</u>	<u>264776</u>		<u>November 27th, 1916.</u>
Transferred to	<u>211th O/S Battalion C.E.F.</u> <u>CRP Depot</u> <u>8th Am. B.D.S.</u>			<u>Dec 13th 1916</u> <u>17-3-17</u> <u>21-3-17</u>

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT
<u>Windsor, Ont.</u> <u>S. Miller</u> Major, A.M.C.	<u>27/11/16.</u>	<u>on enlistment</u> <u>W.R. Stackhouse</u> Capt., A.M.C.	<u>Fit</u> <u>W.R. Stackhouse</u>
<u>Wentworth Camp</u> <u>Toronto</u>	<u>6-2-17</u> <u>22/3/19</u>	<u>no disability</u> <u>N.A.D.</u>	<u>A. W. Stackhouse</u> <u>Fit</u>

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



# MEDICAL HISTORY SHEET

DUPLICATE

Surname

Ackley

Christian Name

Clifford

Examined { on 27th day of November 1916  
at Windsor, Ont.

Approved by

*W.R. Stackhouse*

Birthplace { City or Town Cincinnati  
County Ohio

Rank *Capt. M.M.* M.O.

Apparent age 29 yrs 11 mos

Trade or occupation Painter

Height 5 feet 6 Inches

Weight 140 lbs.

Chest measurement { Minimum 34 inches  
Maximum expansion 36 inches

Physical development Good

Small-pox Marks None

Vaccination Marks { Arm Right Left 1  
Number 1

When Vaccinated last Childhood

(a) Marks indicating congenital peculiarities or previous disease Appendix i yr. ago.

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

R.E. 20 L.E. 20  
20 20

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
11-1-17.	W. K. Turner.	M.O.
		M.O.
		M.O.
Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
8/12/16	+ <i>W.R. Stackhouse</i>	<i>Paratyphoid</i> M.O.
10.1.17	W. K. Turner.	M.O.
		M.O.

Enlisted on 27th day of November 1916 at Windsor, Ont.

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	213th C.S. Bn. C.E.F.	264776		November 27th, 1916.
Transferred to	211th Batt			

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT
Windsor, Ont. <i>Stiller</i> Major, A. M. C.	27/11/16.	on enlistment <i>Geo. Hewin</i> Capt., A. M. C.	Fit <i>Stewart Capt.</i>

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



**Medical Examination upon leaving the Service  
of 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 SAPPER Name CLIFFORD Surname ACKLEY  
 Unit or Corps C.R.T.D. (If a soldier) Regt. No. 264/76  
 Born at CINCINNATI, OHIO on date DEC 21<sup>ST</sup> 1886  
 Signature (for identification) Clifford Ackley

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

1. **PHYSIQUE**—Any deformity, maiming or lameness? If so, describe. no

Weight  
152 lbs.  
 Height  
5 ft. 6 ins.

2. **NUTRITION AND DIATHESIS?**

Good

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

3. **NERVOUS SYSTEM?**

normal

4. **RESPIRATORY SYSTEM.**

normal

5. **HEART?**

Abnormal Sounds? normal  
 Abnormal Size? normal  
 Pulse Rate? 74 Intermittence or irregularity? nil

6. **ARTERIES.**—Any hardening?

none

7. **DIGESTIVE SYSTEM?**

normal

8. **GENITO-URINARY SYSTEM?**

normal

Urinalysis—s.g.? normal Reaction? normal Albumen? nil Sugar? nil

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

normal

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 Fort Leavenworth Signed W. H. ... M.O.  
 Date 6-2-19 Signed W. H. ... Capt. ...

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 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..... Name..... Surname.....  
 Unit or Corps..... (If a soldier) Regt. No.....  
 Date of examination..... on date.....  
 Signature (for identification).....

The examination is to be made jointly by two Medical Officers

1. General appearance - Any abnormality, including or including? If so describe

Weight

Examined at..... lbs

.....

2. Inspection of the head

After searching inside and through examination is any evidence found of disease or impairment of the parts indicated below? If so describe

3. General system

4. Cardiac system

5. Respiratory system

6. Abdominal organs

Abdominal size?

7. Intelligence or irregularity?

Time taken?

8. Attention - Any wandering?

9. Soldier's system

10. General system

11. General system

12. General system

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

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

Examined at..... Signed..... M.O.

..... Signed..... 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, or the Officer or Soldier to be sent before a Medical Board for regular boarding.



DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 2

NAME OF SOLDIER Ackley Clifford

REGIMENT Spz

No. 264776



INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhoea	Synthetic Porcelain	Extracting	DENTURES			Gold Clasp	Gold Filling	CROWNS		Bridge Work	OPERATOR	Military District	REMARKS		
											U	L	P			Gold	Porcelain						
Condition on first Examination																							
<i>Discharge Exam. At Exhibition Camp Date. MAR 22 1919</i>																							

Certificate issued for

FIT

*W. Sample  
Major*



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

*At*

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. 264776 Rank Pty Surname ACKLEY  
(Given name in full)  
Clifford  
 Unit or Corps # 200 Birthplace Cincinnati, Ohio

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

1. GENERAL DESCRIPTION:

Physique Good Weight 136 lbs. Height 5.6 ft. Colour of Eyes Blue  
 Nutrition Good  
 Pulse 72  
 Condition of arteries Good  
 Vision Rt. 20 Left 20  
 Hearing (conversational voice) Rt. 21 ft. Left 21 ft.

Identification marks, scars, or deformities.  
 (Give cause and date of origin.)  
appendix scar  
one vaccination mark  
left arm

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.

Urinalysis Albumen neg Sugar neg  
no Hemina Hemorrhoids varicose veins tubercle  
no Goitre

*At*

APPROVED  
 MAR 22 1919  
  
 CAPT.  
 FOR A. D. M. S. M. D. 2

(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.....*Toronto*.....(Canada)

Date .....*22/3/19*..... Signed .....*Clifford Akeley*.....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.....*Clifford Akeley*.....

(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]

# CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44.  
1188 (D.P.) 250M.-12-18.  
1772-89-903.

## LAST PAY CERTIFICATE

Regimental No. 26th Coy/6 Rank Spr. Name Ashley C  
(Surname first)  
 Unit No. 2 District Depot who was\* **DISCHARGED**  
 On MAR 26 1919 191....., to.....  
 \*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from March 1 to MAR 26 1919 191...  
 the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month .....	45 34	
Regimental Pay..... <u>26</u> days at \$ <u>1</u> c.....		26 -
Field Allowance..... days at \$ <u>10</u> c.....		2 60
Separation Allowance .....		35 -
Clothing Allowance .....		40 -
Post Discharge Pay .....		12 -
*Other Credits .....		
Advances .....	20 -	
Separation Allowance and Assigned Pay Cheque No. ....		
*Other Charges .....		
Balance on transfer or on discharge, cheque No. ....	50 26	
<b>Total .....</b>	<b>145 60</b>	<b>145 60</b>

\*Give particulars.

*C.P.*



Please quote reference -----

Your reference -----

# Military Hospitals Commission

CANADA

From:—The District Vocational Officer,

NO 2 DISTRICT DEPOT

To:—The Officer Commanding,

NO 2 DISTRICT DEPOT

264776 *Ph*

*Ackley Clifford*

Sir,—

I beg to inform you that the marginally named -----

*man*

(Man, N. C. O., Etc.)

----- was interviewed by a Vocational Officer

MAR 21 1919

on ----- 19-----, and all particulars with reference to his education and industrial history have been entered upon Form M.H.C. 156.

*Ph. Duncan*

Vocational Officer.





2

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) ACKLEY - C.

REGIMENT 5th C.R.T. RANK Spr No. 264776

Date of Examination in England 8-2-19 Date of Examination in France \_\_\_\_\_



DIRECTIONS TO DENTAL OFFICERS

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

PRESENT DENTAL REQUIREMENTS

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

*Fit*

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

*No.*

KNOTTY ASH CAMP,  
LIVERPOOL

Signature of Dental Officer *[Signature]*



Handwritten notes at the top of the page, including the name "M. J. ...".

Handwritten notes in the middle section of the page.

- (1) ...
- (2) ...
- (3) ...
- (4) ...
- (5) ...
- (6) ...
- (7) ...
- (8) ...
- (9) ...
- (10) ...

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

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

# Casualty Form—Active Service.

250M.—1-16.  
H. Q. 1772-39-920.

Unit, Regiment or Corps 21st OS Bn., CEF ✓  
 Regimental No. 264776 Rank Private Name Ackley, Clifford ✓  
C. E. F.  
 Enlisted (a) 27/11/16 Terms of Service (a) War & 6 mos after Service reckons from (a) 27/11/16 ✓  
 Date of promotion to present rank. } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }  
 Extended ..... Re-engaged ..... Civil: Painter  
 Qualification (b) .....

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 38, 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. 38, or other official documents.
Date	From whom received				
19-3-17	211th Battn.	S.O.S. 211th Battn. on Transfer to Can. Rly. Troops, Depot.	Portfleet	17-3-17	Part II, B.O. 2, 19-3-17 ✓
18-3-17	C.R.T. Depot	Taken on strength	Portfleet	16-3-17	D.O. Pt II 66 ✓
<del>20-3-17</del>	<del>C.R.T. Depot</del>	<del>Transferred to 8th Bn. C.R.T.</del>	<del>Portfleet</del>	<del>20-3-17</del>	<del>D.O. Pt II 68</del>

*H. Cowell* Major Adjt.  
211th Bn. Can. Inf.

DEPOT CAN. RLY. TROOPS.

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

CERTIFIED CORRECT.  
8 JUL 1917  
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					
<del>28-3-17</del> <del>27</del>	<del>8th Batta C.R.T.</del>	<del>Taken on strength.</del>	<del>Purfleet.</del>	<del>21-3-17</del>	<del>D. O. Part 11 Order No. 10.</del>	
11/5/17	C.R.T.	Proceeded Overseas to 5th Bn	Purfleet	11/5/17	Pt II Do No 120 ✓ H. Taylor	
12.5.17	C.R.T.	Landed France as reinforcement and taken on strength		12.5.17	From Roll of 6th Bn Part II O.M. No 44 d/1-15/5/17	
20.5.17	occurs	Joined Unit		17.5.17	B 313 d/ 20-5-17 Des 45	
8.11.17	Lo	Sentenced to 10 days U.K.L. - latter 21.10.17 to 30.10.17 23.10.17. Reports 3 days pay	Field	23.10.17	B 2069 Pt II Do 106 d/ 17.11.17	
20.4.18	Do	To Can Corps Lewis Gun Squad	Perfay	16.4.18	Do	
4.5.18	Do	Rejoined unit	Field	29.4.18	Do	
7.6.18	3 C.P.A.	P.W.	adm	3 C.P.A.	1.6.18	74652
2.6.18	Do	P.W.	Do	Do	Do	75300
1.6.18.	12 C.P.A.	P.W.	Do	12 D.I.	Do	75092
			Do	3 Do	Do	
10.6.18	3 C.P.A.	Remaining				76787
11.6.18	Do.	P.W.	adm	3 C.P.A.	1.6.18	77029
			To Duty		10.6.18	
15.6.18	5 C.P.A.	Rejoined unit	Field	Do		8213
29.6.18	Do	Granted Leave 28.6.18 to 12.7.18				Do H 10.64 d/ 8-7-18
20.7.18	Do	Rejoined unit	Field	14.7.18		Do

3

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

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

# Casualty Form—Active Service.

Unit, Regiment or Corps.....

Regimental No. 264776 Rank Spr Name Ackley C  
C. E. 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				
<u>26/3/19</u>		<u>S.O.S. (Discharged) No. 2 District Depot</u> <u>Since the [unclear]</u> <u>Part II D.O. No. 83</u>			
		<u>For</u> <u>G.O. No. 2 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, 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				

SPO

ASAC

*Mil*

SUGAR

*Mil*

REACT

MICROSCOPIC

UNIT OF CELL

DATE

19

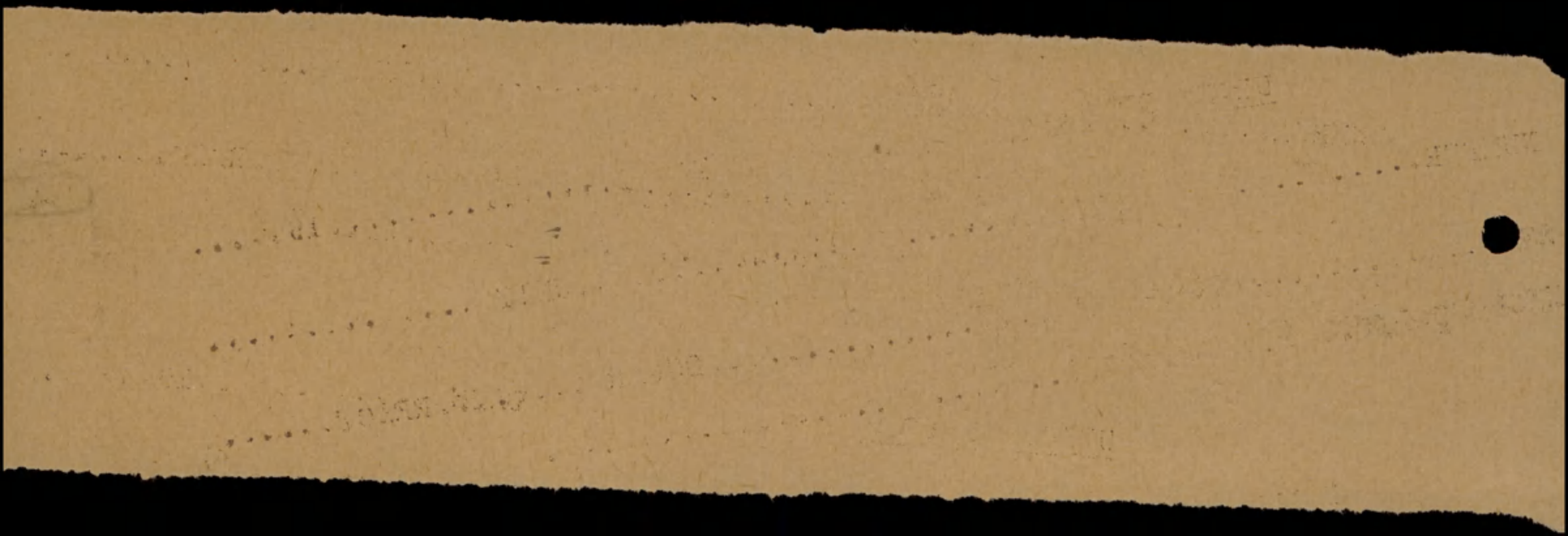
NUMBER

NAME

UNIT

SUGAR

REACT





MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

M. F. W. 12a.  
 50m.-6-16.  
 1772-39-819.

*Mrs L. G. Witham*  
 Sheet No. 2.

Name of Soldier *Ackley L.*

PAYMENTS.

L. L. Job 4503 - Req. 6332.

# *264776*

*213<sup>rd</sup> Battalion*

Month.	Year.	Cheque No.	Amt.	Remarks.
			<i>\$ 20<sup>00</sup>/<sub>100</sub></i>	<i>DEC 1 1916</i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.		<i>V 36268</i>	<i>20</i>	<i>✓</i>
Jan.	<i>1917</i>	<i>A 38432</i>	<i>20</i>	
Feb.		<i>A 43408</i>	<i>20</i>	<i>20 R</i>
March		<i>A 49331</i>	<i>20</i>	<i>20 L</i>
April		<i>B 179</i>	<i>20</i>	<i>20 E ✓</i>
May		<i>B 6157</i>	<i>20</i>	<i>20 S</i>
June		<i>B 4079</i>	<i>20</i>	<i>20 \$</i>
July		<i>B 21236</i>	<i>20</i>	<i>S</i>
Aug.		<i>C 26196</i>	<i>20</i>	<i>in</i>
Sept.		<i>C 33468</i>	<i>20</i>	<i>in 200<sup>00</sup> ✓</i>
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

*mc*

*200*

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.				

MILITIA AND DEFENCE  
 ASSIGNED PAY  
 OVERSEAS CONTINGENTS

17<sup>th</sup>  
*P. [unclear]*

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

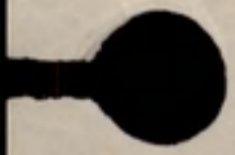
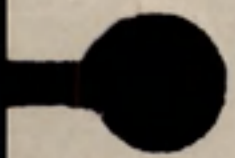
*Mrs. L. G. Witham*  
 To Whom *L. G. Witham*  
 Address *2134 Eastern Ave*  
*Cincinnati*  
*Ohio*  
 Rate *\$20<sup>00</sup> x 2 Dec U.S.A*

By Whom Assigned *Ackley L.*  
 Regtl. No. *264776*  
 Rank *Pte*  
 Corps *213<sup>th</sup> Battr*

DEC 1 1916

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			<i>Consolidated account</i>
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



LTR

Rank *Plé* Name ACKLEY, Clifford

Reg'l No. 264776

Unit 211th, Bn. If in perm. Corps, What Unit?

Married or Single Single.

Place and Date of Enlistment Windsor, Nov, 27th, 1916

Place of Birth Cincinnati, Ohio.

Name and Address, Next-of-Kin Mrs L.G. Witham

2134 Eastern Ave, Cincinnati, Ohio,

Relationship Mother.

Assigned Pay Monthly \$

Payable to

Separation Allowance \$

Payable to

Relationship

Relationship

N.I. R.B. No.	10354
File H.L.	
Category	Can. O.P.

Discharge, Date and Place

Reason

Character

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.				
				16ulx. 15.12.16	
					ARRIVED IN ENGLAND S. S. OLYMPIC 28 12 16
18-3-14.	Depot C.R.T.	Posted to Depot C.R.T.	Perfect.	16-3-14	Pt II DO. 66 (8 <sup>th</sup> C.R.T. DO. 2.
20-3-14.	"	" " 8 <sup>th</sup> En "	"	21-3-14	— 68. (8 <sup>th</sup> C.R.T. - DO. 10.)
14:4:14	8 <sup>th</sup> BRT	S.O.S on trip to BRT Depot	"	16:4:14	" 25-26/6 R.T. Depot Pt. II 100. 95 16/4/14.
11. 5. 17	Depot BRT	S.O.S. on proc. of s. to 5 <sup>th</sup> BRT.	Perfect	11. 5. 17	Pt. II O. 120 NR
15. 5. 17	5 <sup>th</sup> BRT.	Arrived in France	Field	12. 5. 17	Pt. II O. 44
		Seized to 10 days. S.P. No. 2.		12-1-19	
5-7-19	"	A.M.P. 21.30. 1-1-19.			
		until apprehended by M.P.	"		
		16.00 8/1/19. Forgets 7 days pay Rmk.			

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.				
30.1.19	CCS.	Pasted from 5th B Coy.	Knotty Ash.	29.1.19	pt II 25.5 <sup>th</sup> B Coy. pt II 9. 30/1/19 AND 7
16.2.19	CCS.	Sgt. to Lt. 2. Rhyf.	Spr. " "	15.2.19	pt II 42 pt II 42/19-2-19
7.3.19	CCC.	Sgt. to Canada	" Rhyf	22-2-19	~ 56
				505. 26.3.19	

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

223

Dec 1<sup>st</sup> / 16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

20-			
-----	--	--	--

### PARTICULARS OF SEPARATION ALLOWANCE

No. 264776  
 Rank Pte Promoted Reverted Discharge  
 Soldier's Name G. Ackley  
 Battalion 213<sup>th</sup> Battn.  
 Beneficiary  
 Relationship  
 Address

### PARTICULARS OF ASSIGNMENT

Name Mrs. L. G. Witham  
 Address 2134 Eastern Ave. Cincinnati Ohio U.S.A.  
 Change of Address  
 1  
 2  
 3  
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Sept 30 - 17.			200	200	
Oct	B 50215		20	20	
Nov	B 51916		20	20	X
Dec	B 52514		20	20	S
Jan/18.	B 563960		20	20	e s
Feb	B 90501		20	20	
Mar	G 97422		20	20	
Apr	G 7203		20	20	e
May	F 10129		20	20	e
June	Z 7014		20	20	e
July	Z 15002		20	20	e
AUG	Z 29961		20	20	e
SEP	Z 43021		20	20	e
OCT	Z 57469		20	20	e
NOV	Z 71986		20	20	e
DEC	Z 93068		20	20	e
JAN	Z 102888		20	20	e
FEB	Z 116815		20	20	e
MAR	Z 129397		20	20	e
			<u>560</u>		

62-6-12  
(746785)

B63959 cam.

A/c Closed 31/3/19  
 Ret'd per Belgie  
 Date 1/3/19 M.F.W. 187 8/3/19  
 Clerk MD2 J. Gallus

M. F. W. 128  
 400M-6-17-1772-38-1141  
 L. L. 22220-M. & D. 1183.

AUDITED.







SURNAME

CHRISTIAN NAME OR NAMES

REG. NO.

ACKLEY.  
RANK

UNIT

C.

Co.

TROOP

264776.  
BATTY

Spr.  
HOSPITAL

C.R.T. 5.

DATE OF ADMISSION

1-6-18.

3. C.F. Amb.

1.

Hos .

2.

HOSP.

3.

HOSP.

4.

HOSP.

DIAGNOSIS

P.U.O. *R*

1.

2.

3.

DISPOSITION

DATE

C.L. 5-6-18. A232.

REMARKS

*14-6-18 2/240-1.*

*Dis:- 10-6-18*

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 L ACKLEY Clifford Rank Spr Regtl. No. 264776 LH

Fyle Depot 24 ac 10

Original unit 213th Bn Present unit 213th Bn M. or S. Age 31 Religion Meth Ref. H.Q.

Port, ship and date of arrival Belgic Halifax 2-3-19

Next of kin Mother Mrs. L.G. Witham 2134 Eastern Ave., Cincinnati Ohio, USA

Address on leave Same

Address on discharge Same

Transportation issued No Yes 26-3-19 Date Cincinnati Character on discharge

Previous occupation Painer. Date and place of enlistment Windsor 27th Nov. 1916

Diagnosis Demobilization Date of Medical Boards 22-3-19

Date.	Remarks	Pt. 2 Order No.
TOS 23-2-19	posted to CAS CO (EXCAMP) 2-3-19	
	leave with subsd from 6-3-19 to 20-3-19	67
26-3-19	SOS DISCHARGED "DEMIOB" ENTITLED TO W.S.G.	83

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

Date

Remarks

Pt. 2 Order No

M. F. W. 192

150m.—5-18

1772-39-1243

SURNAME.

Ackley

CARD NO.

X

CHRISTIAN NAMES

Clifford

SOS Des Drumot 26379

REGL. NO.

264776

RANK

Pte

FOLL. NO 83 of 24/3/19. ~~att~~

UNIT

213 R. (1st R. D.)

250  
Bu

FORMER CORPS

nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Witham, Mrs. L. G.

RELATIONSHIP TO SOLDIER

Mother

ADDRESS

2134 Eastern Ave.,  
Cincinnati, Ohio,  
U.S.A.

COUNTRY OF BIRTH

U.S.A. Cincinnati, Ohio

DATE

Dec. 21, 1886.

PLACE OF ATTESTATION

Windsor, Ont.

DATE

Nov. 27, 1916

Sailed from Halifax per

S.S. "Olympic" 13-12-16

MARRIED

SINGLE *yes.*

WIDOWER

TRADE OR CALLING

*Painter*

RELIGION

*Methodist.*

DESCRIPTION.

APPARENT AGE

*29.*

YEARS

*11.*

MONTHS

HEIGHT

*5.*

FEET

*6.*

INCHES

CHEST MEASUREMENT

*34.*

INCHES

EXPANSION

*2*

INCHES

COMPLEXION

*Fair.*

EYES

*Blue.*

HAIR

*Light brown*

DISTINGUISHING MARKS

*Scar from burn on left leg.*

MEDICAL EXAMINATION.

PLACE

*Windsor, Ont.*

DATE

*Nov. 27<sup>th</sup> 1916*

*Present Address Bancroft St. Toledo Ohio. U.S.A.*

No. *264776* RANK

*Pte*

NAME *Ackley G.*

T. O. S.

UNIT *211<sup>th</sup> op Battalion C. C. F.*

M. D. *11*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916 Dec 13</i>	<i>1916 Dec 31</i>	<i>n</i>	<i>Attached from 213<sup>th</sup> op Bn</i>	

1887

1887

Name	Age	Sex	Profession	Remarks
John Smith	25	M	Farmer	Wife & 3 children
Mary Jones	30	F	Homemaker	Wife & 2 children
Robert Brown	18	M	Student	Attending school
Elizabeth White	45	F	Teacher	Wife & 1 child
James Green	22	M	Blacksmith	Wife & 2 children
Sarah Black	35	F	Dressmaker	Wife & 1 child
William Gray	15	M	Farmer	Son of John Smith
Anna Hill	28	F	Homemaker	Wife & 2 children
George King	20	M	Student	Attending school
Margaret Lee	40	F	Teacher	Wife & 1 child
Richard Scott	12	M	Farmer	Son of Robert Brown
Elizabeth Young	32	F	Homemaker	Wife & 2 children



NAME *Ackley G.*

REGT'L. No. *264776*

RANK AND CORPS *Pvt.*

H. Q. FILE NO 649

*(5) Can. Ry Troops.*

FOLLOWS

No.

FOLLOWS

CABLE

No.

DATE

NATURE OF CASUALTY

LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

A232.

3 Can Hd. Amb.

1-6-18

P.U.O.

A240,

Disc

10-6-18

u u u





No. 264776 RANK Pte

NAME Achesley, Clifford

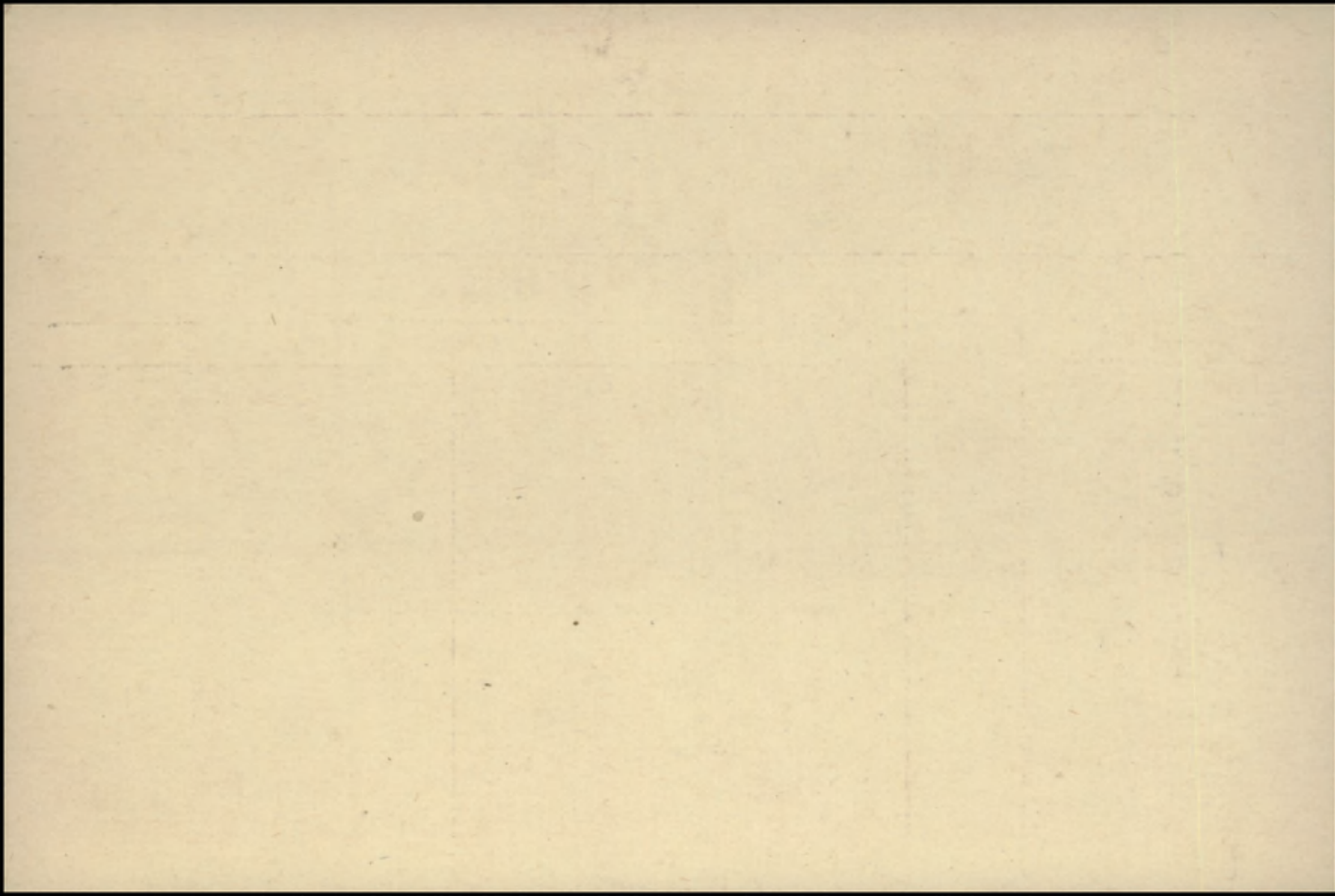
T. O. S. 27-11-16.

UNIT 21<sup>st</sup> Battalion

Do. 181.

M. D. 2

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
1916 Nov. 27 <sup>th</sup> Dec. 15 <sup>th</sup>	1916 Nov. 27 <sup>th</sup> Dec. 12 <sup>th</sup>	✓	S.O.S. on Proceeding O/S 12-12-16	D.O. 1916.



\* Strike out whichever inapplicable.

ASSIGNED PAY	<del>ENGLAND</del> CANADA.	SEPARATION ALLOWANCE	ENGLAND OR CANADA.
EFFECTIVE DATE:-	1/12/16	DATE:-	
AMOUNT:-	20 <sup>00</sup>	AMOUNT:-	

NAME:- ACKLEY Clifford  
NUMBER:- 264446

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.

Wm. S. Witham (Mother)  
1134 Eastern Ave. Linn, Mo. U.S.A.  
Stoppid 1.3.19

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		<u>Ote</u>

UNIT AND TRANSFERS  
ORIGINAL UNIT:- 211th Battalion  
DATE ACCOUNT FIRST OPENED:- 1/1/14

AUTHORITY	DATE EFFECTIVE	DATE LEADER SHEET T'S'F'D	UNIT TRANSFERRED TO
			<u>5th B.R.T.</u>

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

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
<u>25.7</u>		<u>Do. 104 (5 CRT) 2nd Lt.</u>	<u>550</u>	<u>28.2.19</u>		<u>Co Bae K.S.</u>	<u>3793</u>
<u>17.1.19</u>		<u>7 days RW 10 days S.P. 1st Lt. Parry</u>	<u>1890</u>			<u>Debit Bae K.P.C</u>	<u>1047</u>
<u>22.7.19</u>	<u>581</u>	<u>C.R.T.</u>	<u>2920</u>				
			<u>5340</u>				

DAILY RATES OF PAY AND ALLOWANCES				
AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	<u>1</u>	<u>10</u>		

PARTICULARS OF RENDERING NON-EFFECTIVE: Disto Linn 28.2.19 AR 2765 Money Out to knowy Cash 8219

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
<u>1918</u>											
<u>Mar 31</u>	<u>Bal. forward</u>								<u>59 30</u>		
<u>April</u>	<u>P. Pay</u>	<u>33 00</u>		<u>AP</u>				<u>20</u>			
				<u>3. 15/4/18 5<sup>th</sup> C.R.T.</u>	<u>3 57</u>						
				<u>100. 25/4/18 C.C.B.</u>	<u>4 46</u>				<u>64 27</u>		
		<u>33 00</u>			<u>8 03</u>			<u>20 00</u>			
<u>May</u>	<u>v</u>	<u>34 10</u>		<u>AP</u>				<u>20</u>	<u>78 37</u>		
				<u>200. 5<sup>th</sup> C.R.T. 15/5/18</u>	<u>2 68</u>				<u>75 69</u>		
				<u>290 v 31/5/18</u>	<u>2 68</u>				<u>73 01</u>		
		<u>34 10</u>			<u>5 36</u>			<u>20</u>	<u>106 01</u>		
<u>June</u>			<u>33</u>	<u>AP 454 15/6/18 5 CRT</u>	<u>2 68</u>				<u>97 96</u>		
				<u>v 522 30/6/18 v</u>	<u>3 57</u>						
				<u>v 626 20/6 v</u>	<u>3 57</u>						
				<u>C.P. 13833 30/6</u>	<u>4 85</u>						
				<u>AP 385 28/6 v</u>	<u>63 27</u>						
		<u>33</u>			<u>77 96</u>			<u>20</u>	<u>805</u>		
<u>July</u>	<u>Disto Pay</u>	<u>34 10</u>		<u>AR 15133 8/7/18 C. Linn</u>	<u>9 73</u>						
				<u>AR</u>				<u>20</u>			
				<u>870 3/1/18 short</u>	<u>3 57</u>						
		<u>34 10</u>			<u>13 30</u>			<u>20</u>	<u>8 85</u>		
<u>Aug</u>	<u>v</u>	<u>34 10</u>		<u>Cap</u>				<u>20</u>			
				<u>AR 995 15/8/18 v</u>	<u>3 57</u>						
				<u>v 1071 31/8/18 v</u>	<u>3 57</u>						
		<u>34 10</u>			<u>7 14</u>			<u>20</u>	<u>15 81</u>		
<u>Sept</u>	<u>v</u>	<u>33 00</u>		<u>Cap</u>				<u>20</u>			
				<u>v 1192 15-9 v</u>	<u>3 57</u>						
				<u>v 1302 30-9-18 v</u>	<u>3 57</u>						
		<u>33</u>			<u>7 14</u>			<u>20</u>	<u>21 67</u>		

NUMBER 264776

RANK *Pte*

NAME *ACKLEY Clifford*

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
	Balance Forward			<del>Cap.</del>				20	21 67		
<i>Oct</i>	<i>Ptis pay</i>	34 10		<i>Cap.</i>				20	35 77		
				<i>7 days P.P. No 2 23-9-18</i>					2697		
				<i>" " Pay R.W. No 105 8-10-18 5<sup>th</sup> CRT.</i>		8 80			23 24		
				<i>AR 1401 @ 15-10 ✓</i>	3 73				19 51		
				<i>✓ 1509 41 31-10 ✓</i>	3 73						
		34 10			7 46	8 80		20			
<i>Nov</i>		33		<i>Cap.</i>				20	32 51		
				<i>✓ 1594 32 30-11 ✓</i>	9 33				23 18		
<i>Dec</i>		34 10		<i>Cap.</i>				20	31 28		
				<i>✓ 1708 48 15-12 ✓</i>	7 46				29 82		
<i>Jan</i>		34 10		<i>Cap.</i>				20	43 92		
		101 20			16 79			60			
<i>Feb</i>		30 80		<i>Cap.</i>				20	54 72		
				<i>✓ 1830 16 31-12</i>	7 46				47 26		
				<i>✓ 1927 23 5-1-19</i>	9 33				37 93		
				<i>10 days P.P. 2, 12-1-19</i>					19 23		
				<i>7. Pay R.W. 11 5-2-19 5 CRT.</i>		18 70			9 97		
				<i>AR 5251 57 5-2-19 CRT.</i>	29 20						
		30 80			45 99	18 70		20			
					43 99	18 70		20			
<i>Mar</i>				<i>AR 204117 80 104 5 CRT.</i>							
				<i>5 days P.P. 2, 12-1-19</i>		5 50			15 47		
				<i>SES. 27 2-19 SL 78.</i>							

*at agreed*





C

264776 Spr. Ackley C. Assp. \$70.00

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS		
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE				AMOUNT		1	2	3	4	1	2				3	4				CREDIT	DEBIT
			\$	c.						\$	c.																
Print Fwd	26	730							1060	27790					1266	730	268	160	5060	233	2444	66					
Sept 30	33							33	1060	31090	338	15/7	441	17/8	268	268		20		3071	4695						
	300	30									386	31/7	479	31/8	267	268		180	5060	263	95						
MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER. PAY	SEP. ALLG. PAY																
Sept 1917	Bal	46	95						4695																		
Oct	PP	34	10	AR 829 15/17 SCRT	2	68			20																		
				OR																							
				AR 889 15/17 CRD/Qualia	2	46			5391																		
					4	14			20																		
Nov				AR 585 30/17 SCRT	2	68			20																		
	PP	33		10d 2/12 23/10/17 AR 2/10/17 - 23/10/17																							
				10d 2/12 23/10/17 AR 2/10/17 - 23/10/17					1430																		
Dec				AR 641 31/17 SCRT	5	35																					
				Decal	8	03		1430	5868																		
1918 Jan									20																		
				AR 682 15/17 SCRT	2	68			892																		
				AR 735 30/17					892																		
				✓ 787 15/17	2	68																					
				✓ 890 31/17	5	35																					
	PP	34	10						1963																		
Feb	PP	30	80	CAP					20																		
				AR 935 15/18 SCRT	2	68																					
				✓ 998 31/18	2	68			5859																		
				✓ 1042 15/18	2	68			536																		
				62 P					20																		
				AR 106 28/18	3	57			3337																		
				" 1156 31/3/18	7	14			5930																		
					12	39			20																		

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

M. OR S. \_\_\_\_\_ REGT. No. 264776 RANK Spr. NAME (FULL) ACKLEY G. (BLOCK LETTERS SURNAME FIRST)

IF IN P.F. WHAT UNIT? Same

ORIGINAL UNIT C.E.F. C. P. Y.

PLACE OF ATTESTATION \_\_\_\_\_ TRANSFERRED TO \_\_\_\_\_ DATE \_\_\_\_\_ AUTHORITY \_\_\_\_\_

DATE OF ATTESTATION 27/11/16 TRANSFERRED TO \_\_\_\_\_ DATE \_\_\_\_\_ AUTHORITY \_\_\_\_\_

ASSIGNED PAY \$ 20.00 DATE EFFECTIVE 1-4-19

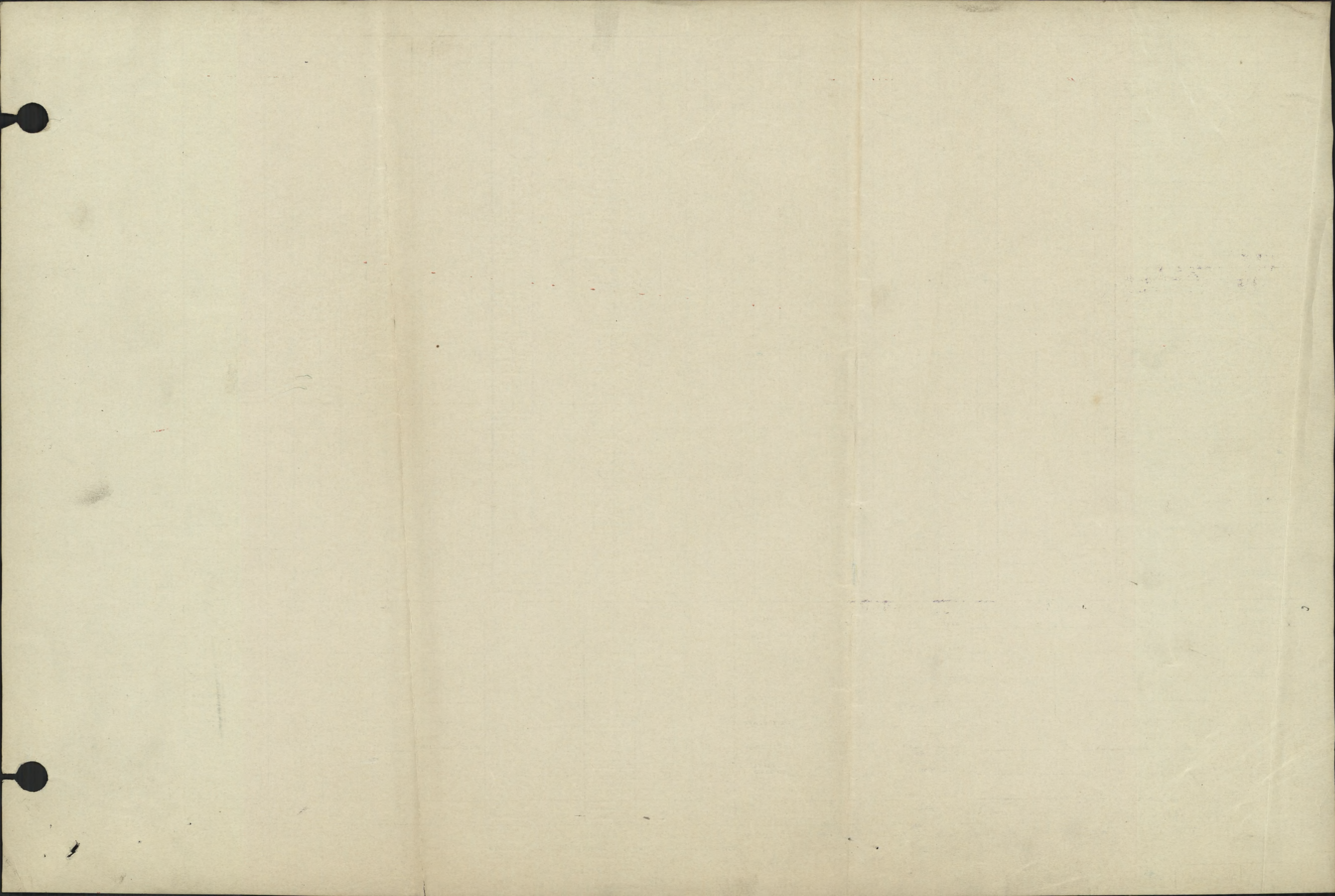
PAYABLE TO Mrs L. G. Witham RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS 2134 Eastern Ave Cincinnati Ohio U.S.A.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE \_\_\_\_\_ EFFECTIVE \_\_\_\_\_

DISCHARGED PLACE TORONTO, ONT. DATE MAR 28 1919 REASON Demob AUTHORITY Do 83 IF ENTITLED TO POST DISCHARGE PAY

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
98-2-19		1.10										15 47					Debit Balance Eng. P.C.	
1-3-19	26	1.10	28 60	12 -	35 -	70 -	1145 60	183529	107027	20 -	1502 61		75 34	145 60	75 34		March 1919 A.P. W.F.	
26.3.19																	T.O.S. 7/2/19 D.O. 7/2/19 SUBS 6/3/19 D.O. 7/2/19	
153 days		4-5-9.	350				350										Due Soldier 1st W.S.G. Paid by #2 D.D.	
																	Apr 25 246 504 70 -	
																	May 21 345 977 70 -	
																	23/6/19 664 429 70 -	
																	Jul. 15 976 012 70 -	
							350										350	



## List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263	Attestation Paper	Militia Form W. 23
Squadron Battery } Company }	Conduct Sheet,	or	
		" B. 263a	Particulars of Recruit
	or		
Field Conduct Sheet	" W. 178	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	
Med. Hist. Sheet,	Militia form B. 313		
Casualty Form	" W. 54		
Medical Report for Invalid§	" B. 227		
Dental History Sheet	" B. 465		
Last Pay Certificate	" W. 44	(a) Proceedings on Discharge.	
Duplicate Discharge Certificate	" W. 39A	(b) Attestation.	
‡Form of Will	" W. 82	(c) Medical History Sheet.	

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

Documents not accompanying this form should be crossed out.

*I hereby certify that the following documents are unobtainable.*

*Officer Commanding.*

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

This space to be for numbers.

## Proceedings on Discharge. M.



War Service Badge  
Nos. 34075  
Assault

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

No.	264776
Rank	Spr.
Surname	ACKLEY, CLIFFORD
Christian name	
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	213th Bn. (#2 D.D.)
Date of discharge	March 26th, 1919
Place of discharge	TORONTO, ONT.
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age.....32.....years.....months.	Descriptive marks  Vacc. scars on left arm
Height.....5.....feet.....6.....inches.	
Complexion Fair	
Eyes Blue	
Hair L. Brown	
Trade Painter	
Intended place of residence	2134 Eastern Ave., Cincinnati, Ohio.
2. The above-named man is discharged in consequence of	
ON GENERAL DEMOBILIZATION	
Authority for discharge.....D.O.....D.D.#2 Pt., 11 #83.....	
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.	
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.

LS.

200M.—5-18.  
H. Q. 1772-39-113.

(OVER)

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

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

6. Medals and Decorations

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

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

(Place).....

(Date)..... Commanding.....

8. Certificate to be signed by the Soldier on Discharge

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

(Place)..... TORONTO, ONT. Clifford Akeley (Signature of Soldier.)

(Date)..... March 26th, 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)..... TORONTO, ONT.

(Signature)..... H. H. H. Sgt

(Date)..... March 26th, 1919

TOP  
G.C. No. 2 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.)

WLB. class A

Army Form W3997.

(2458) Wa. W. 3200-PP1182 6-18 J.F.W. (E3277)

Regtl. No. 264776 Rank Spr

Name ~~Robert~~ Clifford  
(Christian Names in full) (Surname)

Unit ~~11th~~ or 213 Bn  
Corps

MD2 SS26 Cat. A

Toronto  
Mother  
Boot Builder

SLI. JVF. FEB 23/19  
MAR. HX MAR 2 10  
H M 1 BELGIC\*

16

**COVER**

**FOR**

**DISCHARGE DOCUMENTS.**

26

A

*Handwritten scribble or signature*

*Handwritten marks*