REGIMENTAL DOCUMENTS

NAME Brother Martin REGT. NO. 91267 UNIT 199 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. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)				55034	
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
3	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)					
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	LAST PAY CERTIFICATE (M.F.W. 44)					
	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					8 12
	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					8 12
1	R. 149.					9 12
1	Casualty Report					
1	Pass					2

FORCES
RECEIVED
10 JUN 1968
RUSSELL

A.P. "A"

199TH BATTALION C.E.F.
IRISH CANADIAN RANGERS

Original

ATTESTATION PAPER.

No. 919267

APR 17 1916

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... Butler
1a. What are your Christian names?..... Martin
1b. What is your present address?..... 410 Richmond St. Montreal, P.Q.,
2. In what Town, Township or Parish, and in what Country were you born?..... Montreal, P.Q.,
3. What is the name of your next-of kin?..... Mrs. Martin Butler,
4. What is the address of your next-of-kin?..... 410 Richmond St. Montreal, P.Q.,
4a. What is the relationship of your next-of-kin?. Wife
5. What is the date of your birth?..... February 1st, 1892
6. What is your Trade or Calling?..... Printers Assistant
7. Are you married?..... Yes
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? If so, state particulars of former Service. ...55th Irish Canadian Rangers
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, Martin Butler, 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.

Martin Butler (Signature of Recruit)

Date April 17th, 1916 (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Martin Butler, 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.

M Butler (Signature of Recruit)

Date April 17th 1916. (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 Montreal this 17th day of April 1916.

(Signature of Justice)

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

Description of Martin Butler on Enlistment.

Apparent Age 24 years 2 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ... 5 ft 8 ins.

Chest measurement: Girth when fully expanded ... 34½ ins.
Range of expansion ... 3½ ins.

Complexion ... Fair

Eyes ... Light Blue

Hair ... Brown

Religious denominations.
- Church of England ...
- Presbyterian ...
- Methodist ...
- Baptist or Congregationalist ...
- Roman Catholic ... X
- 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).

Scar over left Eye
Second finger right hand smashed

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 April 17 1916.

Place Montreal

H. Gunby
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.

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

... (Signature of Officer)

Date 17th April 1916

649-B- 11452.

Butler, Martin, #919267 Pte., 24th Form 119th Btn.

not elig for star.

Medals & Decs.	Widow	Mrs. Winnifred Butler, 1784 de la Roche St., Amherst Park, Montreal.

Scroll Desp. JAN 13 1921 Regn. No 29814

MAY 3 1922

Plague Desp. Regn. No P36830

P. & S. (Serial no. 765233.	Widow	Same as above.
Mem. Cross	Widow	Same as above.
Mem. Cross	Mother	Mrs. Annie Butler, C/O Mrs. Winnifred Butler, Address as above.

22781

Desp · SEP 17 1920 (m) C 23056

Mf Desp. SEP 17 1920 (W) C 23099

W/117

630

ICR

Number 919267 Rank Pte

Surname BUTLER

Christian Name Martin

Units 24th Bn. Can. Inf. Theatre of War France

Date of Service 27-8-17 D

Remarks (W) Mrs. Winnifred Butler,

Latest Address 1784 de la Roche St.,
Amherst Park,
Montreal.

Roll No. 1V. Tag 2 42 24

200m.-6-21.M.

GRATUITY (IMPERIAL)

CHRISTIAN NAME	SURNAME	REG. No.
SCHEDULE No.	LINE No.	
UNIT RETIRED OR DISCHARGED FROM		
PLACE OF RETIREMENT OR DISCHARGE		
DATE RECEIVED FROM OTTAWA	IMPERIAL DEPOT No.	
DATE RECEIVED FROM REG. DEPOT.	DATE FORWARDED TO OTTAWA	

868—D.P.—40M-1-12-19.

No. 919267 Rank Pte. Name Butler M.

T. O. S. Unit 199th Battalion
#1 Co. Reinforcing Platoon
D. of C. Aux. Irish Can. Rangers. M. D. #

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Dec. 1	1916. Dec. 13	M.		

R. 149.

Name Butler, M *Rank* Pte. *Reg. No.* 919267

Unit ~~22nd Reserve~~ ~~199th, Battalion~~ 199th Battn.

Next of Kin

Date 1917	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
29-12-16	ist, West Gen	Liverpool.	Diphtheria.	2		
10.2.17	conv. to Hosp	Woodvale Epsom	do.	8		
22-2-	Dis. "	"	"	~~16~~	17.	

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List

SURNAME. Butler (593-1=12) (649-B-11452)

CHRISTIAN NAMES Martin

REGL. NO. 919267 RANK Pte.

UNIT 199th B'n

FORMER CORPS 55th Irish Canadian Rangers

CARD NO. ✓

FOLL. D

NEXT OF KIN.

NAMES IN FULL Butler, Mrs. Martin

RELATIONSHIP TO SOLDIER Wife

ADDRESS 410 ~~Richmond St.~~ Montreal P.Q.
1786 De la Roche St, P.Q.
P.S. A.P. 16/11/16

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada Montreal P.Q. DATE Feb. 1st 1892

PLACE OF ATTESTATION Montreal P.Q. DATE Apr. 17th 1916.

P/S 13-12-16

L. L. 94504. M. & D. 6512.

M. F. W. 22. 250m.—2-16. H. Q. 1772-39-339.

From Halifax per SS Olympic 13-12-16

MARRIED yes SINGLE WIDOWER

TRADE OR CALLING Printers Asst RELIGION Roman Catholic

DESCRIPTION.

APPARENT AGE 24 YEARS 9 MONTHS

HEIGHT 5 FEET 8 INCHES

CHEST MEASUREMENT 36 1/2 INCHES EXPANSION 3 1/2 INCHES

COMPLEXION Fair EYES Lt. Blue HAIR Brown

DISTINGUISHING MARKS Scar over left eye
Second finger Rt. hand smashed.

MEDICAL EXAMINATION. PLACE Montreal P.Q. DATE Apr. 17th 1916.

Present Address ___ 410 Richmond St. Montreal P.Q.

No. 919267 Rank Pte Name Butler M.

T.O.S. 17-4-16 Unit 199th Battalion
(Do 54 of 17-4-16) (Irish Canadian Rangers) M.D. 4

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916.			
April 17	April 30	"		
	May	"	Forfeits 1 days pay.	Do 67 of 3-5-16.
	June	"		
	July	"		
	Aug	"		
	Sept.	"		
	Oct.	"		
	Nov	"	Forfeits 5 days pay.	Do 204 of 9-10-16.
	Dec.	M.	Forfeits 2 days pay.	Do 226 of 4-11-16.

UNIT SAILED
DEC 15 1916

REGT'L No 917267

NAME Butler Martin

H. Q. FILE No. 649-

RANK AND CORPS Pte. (Form 99th Bn.) 24th Bn.

FOLLOWS NO.

FOLLOWS

CABLE No.	CABLE DATE	NATURE OF CASUALTY
M5756 3-H B2090 A.	21-7-17 17.7.17 Rptd	C. Killed in action July 11th 1917 " " " Rcd. 5-9-17

L. L. 12767—M. & D. 7390.

M. F. W. 42—50M.—12-16.
H. Q. 1772-39-893.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
M02.	1st " West Gen. Liverpool	29-12-16	Diphtheria
" 8	Cav. Con. Hosp. Woodcote P. Epsom	10-2-17	Diphtheria
16	Discharged	22-2-17.	"
a 569.	Regt. from Base-	11-7-17.	Killed in action -

FORM R. 149.
7106—250m—7/2/17.

Name BUTLER Martin *Rank* Pte. *Reg. No.* 919267

Unit 24th Battalion

Next of Kin Canada

25. B. 3989

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
11-7-17	Rept from Base					
	KILLED IN ACTION			A569	M5756	21-7

Date		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
Butler.	M.	919767

Rank	Unit	Co.	Troop	Batty.
Pte	199 Batt^{n}	24 Bn		

Hospital: 1 Western Gen Liverpool — Date of Admission: 29-12-16

Transferred: Woodcote Park - Epsom — Hosp. 10.2.14

Hosp.

Hosp.

Hosp.

Diagnosis: Diphtheria

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

RFJ Base Killed in Action 11.7.17

R.

DISPOSITION

Date

CL
9-1-17 — 2

CL. 16.2.14.8

12.3.17.16 Dis. 22.2.17.

21.7.17 A569

REMARKS

A.M.D. 2 DEPT.
Beh. of D.G.M.S. O.M.F.C. London.

R.

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

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 199th Battalion, C.E.F.

Regimental No. 919267 Rank Private Name Butler, Martin

C. E. F.

Enlisted (a) 17/4/16 Terms of Service (a) Dofad + Hostos. Service reckons from (a) 17/4/16

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) Labourer.

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 Disembarked	Canada England	16.12.16 28.12.16	S.S. Olympic
10-4-17.	OC. 199th	Transferred to the 23rd Reserve Bn. Shoreham.	Bailey	10-4-17.	Part II D.O. 130/17.
17.5.17	23rd Bn.	Taken on Strength	Shoreham	10-5-17	D.P.11.0.145
28.5.17	23rd. R. BN.	Posted to 24th. Bn.	27.5.17 Shoreham	27.5.17	D.P.11.0.145

St Cave Browne
CAPT. & ADJT.
FOR LIEUT. COL. O. C. 199TH BN. C. E. F.

W. H. Chalmers Lieut.
for O. C. 23rd. Res. Bn. C. E. F.

(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.

CORRECT: 9 JUN. 1917 CANADIAN DIVISION.

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.
23.2.17	6646	Rept. and T.O.S.	Hastings	23.2.17	R II D.O 93.
12.3.17	6646	T.O.S on trans/to 2nd Lieut.	Hastings	10.3.17	" 1 D.O. 118
5-4-17	2nd Res	T.O.S on trans/from 3rd C.C.D	St Leonards	5.4.17	" 1 D.O. 47.
					E. Macneela LIEUT. FOR LT: COL: I/C RECORDS. C.M.F.
	C. B. D.	ARRIVED C. B. D.	FRANCE	28.5.17	N. R. D 29.5.17 PART II ORDERS No 54 D 25/6/17
	C. B. D.	LEFT C. B. D. FOR	7th Bn	2.6.17	N. R. D 2.6.17
	C. C. 7th BN	ARRIVED 7th BN.	FIELD	5.6.17	B 213 D 8.6.17
11.7.17	. . . .	Killed in action	"	11.7.17	Ki.16/13845 326 of 14/7/17 P20. 61 of 17/7/17.

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

Temporary

Army Form B. 178

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY OF

Surname Butler *Christian Name* M.

TABLE 1.—General Table.

Birthplace { Parish .... County ....

Examined { on........day of........191 , at ....

Declared Age ....years........days.

Trade or Occupation ....

Height........feet........inches

Weight ....lbs.

Chest Measurement { Girth when fully Expanded ....inches; Range of Expansion ....inches

Physical Development ....

Vaccination Marks	RIGHT	LEFT
Arm........		
Number	....	....

When Vaccinated ....

Vision { R.E.—V = ... L.E.—V = ...

(a) Marks indicating congenital peculiarities or previous disease—

....

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

....

Approved by ....

Rank ....

Medical Officer.

Enlisted { at........ on........ day of ....191...

	Corps	Regtl. No.
Joined on enlistment		
Transferred to	199th Bn	919267

Became non-effective by ....

on........ day of ....191...

(Signature)........

(Rank)........

TABLE III.—Boards; Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief Details and Signature

TABLE IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation
199 Arrival sent B'pool		
1 Res Gen Camp – B'pool		
24/7/16.	16/4/17	

[11,100] W3211/M564 450m 7/16sv W. P. & Co. 59 (E188)

TABLE II.—Only for admissions to Hospital or to the Sick List in case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
C.C.H. Epsom	9	2	17	22	2	17	Dyptheria		Recovery discharged to C&A[illegible] for P.T.	
									Physical Training one week.	[illegible] Capt RAMC

205-14

Form P. 85.

1918—60M—29-11-16.

123991

FORM OF WILL.

Name in full.

I Martin J. Butler

Regimental Number 919267 serving in 199 D.C.O.I.C.R.

of the Canadian Expeditionary Force do hereby revoke all former Wills made by me and declare this to be my last Will.

Name & Address of person or persons to whom it is to go.

I DEVISE and BEQUEATH all my real estate unto ~~my wife~~

absolutely, and my personal estate I bequeath to ~~my wife~~

Name & Address of persons or person to receive personal estate (see Note 1.)

his - Winnie - Butler
1786 - De La Roche st. amherst park
Montreal Canada

Fill in Date and Year.

IN WITNESS WHEREOF I have hereunto set my hand this 6th day of May A.D. 1917.

M J Butler
(*Signature*)

Signed by the said Testator as his last Will and Testament, the same having been read over and explained to him, in the presence of us both present at the same time who at his request and in his presence and in the presence of each other have subscribed our names as witnesses.

ESTATES BRANCH,
JAN 8 1918
MILITIA DEPT.

Name of Witness W. D. Blanchard
Address of Witness Fairbanks La Salle Rd Montreal
Occupation of Witness Soldier
Name of Witness M. O. Dion
Address of Witness 150 Stuart Street Kingston Ont.
Occupation of Witness Soldier

N.B.—Personal Estate includes pay, effects, money in Bank, insurance policy, in fact everything except real Estate.

ORIGINAL

421

MEDICAL HISTORY SHEET.

Surname Butler *Christian Name* Martin

Examined { on 17 day of Apr 1916
at Montreal.

Birthplace { City or Town Montreal.
County P.Q.,

Apparent age 24 yrs 2 months

Trade or occupation Printers Assistant

Height 5 Feet 8 Inches.

Weight 116 Lbs.

Chest measurement { Minimum 33 inches.
Maximum expansion 36½ inches.

Physical development Good

Small-Pox Marks none

Vaccination Marks { Arm Right. Left.
Number 3

When Vaccinated last as a child

(*a*) Marks indicating congenital peculiarities or previous disease

(*b*) Slight defects but not sufficient to cause rejection Second fingers Smashed right hand

Approved by H. Ruby

Rank Major M.O.

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

Date.	Result.	Vaccinations.
23/11/16		J.P. Brander M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
24.7.16	Good	J. Brander Capt M.O.
1.8.16	Good	M.O.
8.8.16	Good	M.O.

Enlisted on 17th *day of* April 1916 *at* Montreal

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	199th Battn. Irish Can. Rangers.	919267		
Transferred to	24th Bn			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Montreal PQ	24/10/16	fit	PASSED MED. BOARD J. Alexander Capt. A. M. S.

26 FEB HEC

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.

M. F. B. 313.
400M.—1-16.
H. Q. 1772-39-430.

Christian Name Martin

Surname Butler

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
Annexe Hospital, Fazakerley, Liverpool.		28	12	16	25	1	17	Diphtheria	28	Nil.	Edwards
St James Rd Annx. att: 1st W. G. Hospl, Liverpool.		25	1	17	9	2	17	-do-	16.	Nil	T. B. Grimsdale
(CANADIAN DIVISION) CONVALESCENT HOSPITAL. WOODCOTE PARK, EPSOM		9	2	17	22	2	17	Do	14	Recovered. Discharged to Ccac for. P.2.	J. M. Burnett Capt. C.A.M.C. Registrar.

Form R 122.
2353—100M—9-12-16.

E.T.

M.X. 7/9/20 M.K.

Rank Pte Name BUTLER, Martin ✓ Reg'l No. 919267 ✓

Unit 199th Battn. If in perm. Corps What Unit? } Married or Single Married ✓

Place and Date of Enlistment Montreal.April 17th.1916. ✓ Place of Birth Montreal.

Name and Address, Next-of-Kin Mrs Martin Butler. ✓ Quebec. ✓

410. Richmond St.Montreal. Quebec. Canada. ✓ Relationship Wife. ✓

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character LC369

Category 1 2 1 2
File R.L. R.L.25 B 93857
N/E. R.B. No. Ka

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		26 DEC 1916	
9-1-17.	C.L. 199 Bn.	Admn. to 1st West. Gen. Hospital.	Liverpool.	29.12.16	C.L. 2., Pt II. O. 6. Diptheria
16-2-17	C.L. 199 Bn	Trans: to Can. Convalescent Hospital Woodcote Pk Epsom Letter written to 199th	Epsom	10-2-17	C.L. 8
23-2-17	CCAC	Rptd & TOS	Hastings	23-2-17	Pt II DO 93
28-2-17	"	Hom 3rd CCD for Dis	"	26-2-17	— 100
12-3-17	199th	Dis C.C. Hsp Wcote SK	Epsom	22-2-17	CL 16 + Pt II 0104
12-3-17	C.C.A.C	S.O.S on transfer to 2 Que Regiment	Hastings 2ndQueRD	10.3.17	Pt. II D O. 118 Pt. II O #7 9/16.3.17
5-4-17	22nd Res	T.O.S. on trans from 3rd C.C.D.	St Leonards	5-4-17	— 47 + D.039 4/17-4-17 of 2nd Q.R.D. 13CCD Pt II Do 43.

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.
14-4-17	22nd Res	S.I.S on posting to 199th Bn	Witley	14-4-17	Pt II O 56
10.5.17	23rd Res Bn	T.O.S. from 199th Bn	Shoreham	10.5.17	Pt II DO 127. + 199 Bn Pt II O 130 10.5.17
28.5.17	—	S O S on Trans to 24th Bn	Field	27.5.17	Pt II DO 145. + 24 Bn Pt II O 54 d 25.6.17
21.7.17	24 Bn.	Rptd Killed in Action	—	11.7.17	62 A 569. also Pt II DO 61 14.7.17

RECEIVED 10 SEP 1917 RECORDS

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

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

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
50m.—4-16.
1772—39—818.

Sheet No. 2. Mrs Wm Butler wife

Name of Soldier Butler Martin

L. L. Job 310.—Req. 6574.

Month.	Year.	Cheque No.	Amt.		Remarks.
April	1916				
May		Q3194	29-	29 + adj	
June			x x x	x	Deduct 20.00 overpaid owing to discharge in 21st Batt.
July		99602	20	20	
Aug.		H 11895	~~20~~	20	
Sept.		R 15333	20	20	
Oct.		N 18664	20	20	
Nov.		P 21720	20	20	
Dec.		P 21165	20	20	
Jan.	1917	O 27786	20	20	
Feb.		N 31541	20	20	
March		N 32689	20	20	
April		O 35 7	20	20	
May		09525	20 → 349	20	
June		Q 7053	20	20	
July		Q 9885	20	20	
Aug.		S 13574	20	20	
Sept.			~~20~~	B	
Oct.			x	x	
Nov.				1309	
Dec.					
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

Pensions Notified Date 24-7-17
Killed in Action
~~Died of Wounds~~ } Date 11-7-17
~~Missing~~
C. L (3) 22-7-17 Clerk WaYawett
Date Noted 24-7-17 191

Pension Granted 1-9-17
B.P.C. to Recover $
Clerk J. P. Date 17-8-17

ACCOUNT CLOSED
DATE PER W

14—4—16

86

L. L. Job 310—M. & D. 6574.

MILITIA AND DEFENCE

M. F W. 11.
50m.—4-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Mrs Wm Butler

Address ~~#10~~ ~~Richmond St.~~ 1786 Ste La Roche St. Amherst Park Montreal Que. L. 5/7/16.

Relation to Soldier wife, child or mother } Wife

Name of Soldier Butler Martin

Regtl. No. 919164

Rank Pte

Corps 199 Batt.

To what Corps belonging when called out } ✓ ✓

PAYMENTS

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

CONSOLIDATED 5 ACCOUNT

ACCOUNT CLOSED
DATE..... PER... W

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

PAYMENTS.

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2. Mrs M Butler (Assignee)

L. L. Job 5470—Req. 6888.

Name of Soldier Butler S.M. Wife

919267 Pte 199 Bn Supp.

20.00

Remarks. Dec 1, 16

Month.	Year.	Cheque No.	Amt.	
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.		442882	60 00	60 adj 60 L-
March		441673	20	20 L 6
April		41459	20.	20 L
May		J 6413	20	
June		F 137535	20	20 S
July		W 23066	20	B 67x. 31/8/16. 180.00 Stewarth 25
Aug.		Z 29657	20	Cr Continue A/c - Ass.d dependent Stewarth 14
Sept.			~~20~~	03
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

Spec Reg 1-2-17 L

180

Pension Granted 1-9-17

B.P.C. to Recover $ ——

Clerk J.E.L. Date 17/8/17

L-L.Job 5470—M. & D. 6388

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

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

H.

Pte

To Whom Mrs. M. Butler

Address 1786. De la Roche St.
Montreal
Que.

Rate 20.00 Dec 1/16

By Whom Assigned Butler Bn.

Regtl. No. 9 192 67

Rank Pte

Corps 199 Bn. Supp.

PAYMENTS

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

REMARKS

Pensions Notified Date 25.7.17
Killed in Action
Died of Wounds } Date 11.7.17
Missing 22/4/17
C. L. ..... Clerk J. Stewart
Date Noted 25-7-17 19

ACCOUNTS

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname Christian Name

Regimental Number Rank

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Address (in full)

Rates:—Regimental pay $ per diem; Field Allowance $ per diem. Separation Allowance $ per month.

L.L. 53961—M. & D. 9721

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

M. F. W. 127
300M-1-19
1772-39-1140

Remarks.

Register No. D B 489

WAR SERVICE GRATUITY
TO
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. 02597-M-2

Regt'l No. 919267 Name Martin (Christian Name) Butler (Surname)

Unit 24th Bn Rank Private Date of enlistment

Date of casualty 11-7-17 B.P.C. File No. 14168.

Was service performed overseas ? Yes

DEPENDENT

Name Mrs Winnifred Butler Relationship Widow

Address 1784 De La Roche St.,
Amherst Park,
Montreal. P.Q.

Amount of Special Pension Bonus $ 80.00 Abstracted by G M O'Reilly

Eligible for Gratuity $ 180.00

Less amount of Special Pension Bonus paid $ 80.00

Less Debit Balance of S. A. or A.P. $

Total deductions $ 80.00

Balance due $ 100.00

Cheque No. G 189629 Date issued 16-7-20

REMARKS :

Clerk W Mitchell

Audited by

Date 16/7/20

M.F.W. 2652
25M—6-20.
H.Q. 1772—39-1473

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. 22920—M. & D. 7693.

Date of Enlistment

17-4-16

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

Dec 1-16

RATE OF SEPARATION ALLOWANCE

20			

RATE OF ASSIGNMENT

20			

E

PARTICULARS OF SEPARATION ALLOWANCE

No. 919267

Rank Pte Promoted Reverted Discharge

Soldier's Name M. Butler

Battalion 199 Batt'n

Beneficiary Mrs M. Butler

Relationship wife

Address

PARTICULARS OF ASSIGNMENT

Name Mrs M. Butler wife

Address 1786 De la Roche St. Montreal

Change of Address 2nd.

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Aug 31-17		30 90 00	18 00 00	48 90 00	A.P. & W.P. pensioned. pension granted 1-9-17
					S.A. " " " " "

M. F. W. 128
400m.—6-17—1772-39-1141
L. L. 25230—M. & D. 7666.

P. 559
MARRIED OR SINGLE: Married

PLACE OF BIRTH: Montreal

NAME AND ADDRESS OF NEXT OF KIN: Mrs W. Sutter. 1986 DeLaRocke Montreal PQ.

RELATIONSHIP OF NEXT OF KIN: Wife

NAME AND ADDRESS OF NEXT OF KIN:

RELATIONSHIP OF NEXT OF KIN:

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Killed-in-action	11.7.17.	C2A569 21.7.17. 24th Bn

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL
Stanford Hospital 28/5/16 RG 6/17.			

REG'L NO. 91967. RANK Private NAME Sutter W.

IF IN PERMT. CORPS / WHAT UNIT — UNIT 199th Sutton. TRANSFERRED TO 23 Res. Bn DATE 22-5-17 AUTHORITY RO. 127

PERMANENT FORCE ALLOWANCES — TRANSFERRED TO Pay II L 2-8-17 DATE 1/8/17 AUTHORITY C2A569 21/7/17 24th Bn

PLACE OF ATTESTATION Montreal P.Q. TRANSFERRED TO 24 Bn DATE AUTHORITY

DATE OF ATTESTATION 17th April 1916. TRANSFERRED TO DATE AUTHORITY

PAY OFFICE, N.E. DIVISION, CANADIAN CONTINGENT — OCT 9 1917

ASSIGNED PAY MONTHLY $ ~~20 00~~ DATE EFFECTIVE ~~1st January 1917~~

PAYABLE TO Mrs W. Sutter 1986 DeLaRocke Montreal PQ. RELATIONSHIP Wife

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) 1-8-17 EFFECTIVE ~~1-8-17~~ 1-8-17. REASON Killed-in-action 11.7.17. C2A569. 21.7.17. 24th Bn

DISCHARGE DATE AND PLACE — REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) 1-8-17

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

Entered in N.E. Card Index

T. J. Wilson

DATE 1917	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
Jan 1.															9 10.															9 10.				Balance from Canada.
Jan.	31	1.00/10	34	10											34 10												20.		20.	23 20				
Feb.	28		30	80											30 80								K.62 3/2/17. 1st Can Mtge Hosp.			.49		20.		20 40	33 51			
Mar	31		34	10											34 10												20.	1.10	21 10 61 59	46 51				1 day Lw. 6.2.4-20/3/17 2nd Bn
apl	30		33	.											469 23/2 CCAC Hosp. 33.								5744 2/3 3rd CCAC. 6031 26/3 "		4 99 14 60 4 99		20		44 58	34 93				
May 1-21	21		23	10											23 10	40	4/4							7 30			20		27 30	30 73				To 23 Res. 22-5-17
22-31	10		11	.											11 .			92	15/4						9 73				9 73	32 .				
June	30		33												33 -									7 30	7 30		20		34 60	30 40				2 days Pay II L. 1/8/17. C2A 569. 21/7/17 24th Bn
July	31		34	10											34 10												20		20	44 50				Checked Bailey
																							288 24-6			268			268	41 82			
Checked McKent																								14 60	Balance transferred to N.E. Branch						41 82	C 8/1/18		
W Jas 18																								41 82				41 82					D 41 82 2 Lo Ottawa Forbett.
do																								50 38		268		268	268 Can 21-2-18				AR 2444-14/6/17-21/2/18 E 7 — 24 Bn Lo Ottawa For Coll 26 396 Mtl 29/8. 24/9/18
do Feb/18														268	268																			

Statement of NOV 8 1917 Account rendered

Statement of FEB 8 1918 268 Account rendered

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 $	AMOUNT C.	NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.				1 NO.	1 DATE	2 NO.	2 DATE	3 NO.	3 DATE	4 NO.	4 DATE	1	2	3	4				CREDIT	DEBIT		