

26-8-18,  
2B,

(H)

### DISCHARGE DOCUMENTS

R. O. No.....  
H. Q. No.....

- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers..... *x2*
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet..... *1*
- Compulsory Stoppages.....
- Casualty Forms..... *1*
- Proceedings on discharge.....
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- Parchment Certificate.....
- Medical Report for Invalids.....
- Medical History Sheet..... *1*
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet..... *1*
- Clothing Transfer Certificate.....
- Inventory of Kit.....
- Last Pay Certificate.....

Name  
Reg  
Corps

*COLLINGS* WALTER, BAYLIS.  
 Name.....  
 Regt, No *475.441* Rank. *pte.*  
 Corps. *P. S. L. I. D.*

*Killed in action 15-9-16.*

29293

(M)

(P)

- Index Card.....
- Casualty Card..... */*
- Non-Effective Card.....
- Part II Order Card.....
- Change of Address Card.....
- Honour & Award Card.....

(H)

*2*  
*21-22*  
*16 22*  
*3-22*  


---

*2*

*A. F. B. 178 - 1*  
*copy*  
*Cas card*  
*only full*  
*copy*

M. F. W. 62.  
50m.-9-16.  
H. Q. 1772-39-836.

*mx*  
*27/12/18*

OPEN  
(ATIA)

1888

4 Universities  
*original*

4th OVERSEAS UNIVERSITIES CO., C.E.F.  
**ATTESTATION PAPER.**

No. 475441  
Folio **OCT 8** Ent'd

**CANADIAN OVER-SEAS EXPEDITIONARY FORCE.**

**QUESTIONS TO BE PUT BEFORE ATTESTATION.**

- (ANSWERS).
1. What is your name? *Walter Baylis Collings*
  2. In what Town, Township or Parish, and in what Country were you born? *Montreal, Can*
  3. What is the name of your next-of-kin? *Earnest Albert Collings (Father)*
  4. What is the address of your next-of-kin? *899 City Hall Av. ~~Mont~~*
  5. What is the date of your birth? *February 12 - 1897*
  6. What is your Trade or Calling? *Clerk (Royal Canadian Mounted)*
  7. Are you married? *No*
  8. Are you willing to be vaccinated or re-vaccinated? *or "muculated" ~~WBC~~* *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*
- W B Collings* (Signature of Man).  
*[Signature]* (Signature of Witness).

**DECLARATION TO BE MADE BY MAN ON ATTESTATION.**

I, *Walter Baylis Collings*, do solemnly declare that the above answers made by me to the above questions 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 *Oct 8* 1915 *W B Collings* (Signature of Recruit)  
*[Signature]* (Signature of Witness)

**OATH TO BE TAKEN BY MAN ON ATTESTATION.**

I, *Walter Baylis Collings*, 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 *Oct 8* 1915 *W B Collings* (Signature of Recruit)  
*[Signature]* (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 *16* day of *October* 1915.  
*[Signature]* (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.  
*[Signature]* (Approving Officer)

Description of Walter Baylis Collings on Enlistment.

Apparent Age 18 years 8 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.

Chest-measure-ment { Girth when fully expanded 33 1/2 ins.  
 Range of expansion 3 1/2 ins.

Complexion Light

Eyes Blue

Hair Dark brown

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

2. Moles on back

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date Oct 8 1915

Jachabot Capteme

Place Montreal

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.

Walter Baylis Collings 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.

Date 16/10/15 1915

A. She (Signature of Officer)  
cap

No. 475441. Pte. W.B. Collings.

MILITARY SERVICE  
DEC 2 1916  
H.Q. 649. C. - 5377  
CANADA

4th OVERSEAS UNIVERSITIES CO., C.E.F.

P.F.C.L.I.

14

WILL

I in the event of my death.  
I give the whole of my property  
and effects to Mr + Mrs. E.A.  
Collings (Mother + Father yet present  
at 899 City Hall Ave)  
Montreal, Province of Quebec  
Canada.

W.B. Collings

Private 475441

January 11<sup>th</sup> 1916

PTE. W.B. COLLINGS.

No. 475441.

711

4. 12/16  
 A 162-4 12/16

15  
 RATES OF REGIMENTAL PAY.

OFFICERS—ALL ARMS. Per diem.

	Pay.	Field Allowance.
Colonel.....	6.00	1.50
Lieut.-Colonel .....	5.00	1.25
Major .....	4.00	1.00
Captain, .....	3.00	.75
Lieutenant .....	2.00	.50
Paymaster .....	3.00	.75
Quartermaster .....	3.00	.75
Nursing Sister .....	2.00	.50
Command Pay, in addition to pay of rank	1.00	
Adjutant, in addition to pay of rank.....	.50	

WARRANT OFFICERS, N.C.O.'S, AND MEN:

Warrant Officers .....	2.00	.30
Quartermaster Sergeant .....	1.80	.20
Ordnance Room Clerks .....	1.50	.20
Pay Sergeants .....	1.50	.30
Squad, Battery or Company Sergt.-Major	1.50	.30
Colour Sergeant or Staff Sergeant .....	1.50	.30
Squad, Battery or Company Q.M. Sergt.	1.50	.20
Sergeants.....	1.35	.15
Corporals.....	1.10	.10
Bombardiers or Second Corporals .....	1.05	.10
Privates, Gunners, Sappers, etc. ....	1.00	.10
Trumpeters, Buglers and Drummers....		

Working pay in addition to pay of rank varying from \$1.00 to 50 cents per diem according to qualifications is granted to Artificers, Motor Car Drivers, Cooks, etc.

**ORIGINAL**

4th OVERSEAS UNIVERSITIES CO., C.E.F. 5

**MEDICAL HISTORY SHEET.**

475441

Surname Collings

Christian Name Walter Baylis

Examined { on 10th day of Oct 1915  
at Montreal

Approved by Jachabot Capteme

Birthplace { City or Town Montreal  
County Quebec

Rank M.O.

Apparent age 18

Trade or occupation clerk

Height 5 Feet 6 Inches

Weight 124 Lbs.

Chest measurement { Minimum 30 inches

{ Maximum expansion 33 1/2 inches

Physical development Good

Small-Pox Marks No

Vaccination Marks { Arm Right Left  
Number 2

When Vaccinated last as a child

(a) Marks indicating congenital peculiarities or previous disease

(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.
<u>15/11/15</u>		<u>J. A. Fairie</u>
		M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>16/10/15</u>		<u>J. A. Fairie</u>
<u>22/10/15</u>		<u>J. A. Fairie</u>
<u>29/10/15</u>		<u>J. A. Fairie</u>
		M.O.
		M.O.
		M.O.

Enlisted on 16th day of October 1915 at Montreal

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment		<u>475441</u>		
Transferred to.....	<u>11th Res Batt</u>			

**EXAMINED OR DISCHARGED BY A MEDICAL BOARD.**

STATION.	DATE.	DISEASE.	RESULT.

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





Rank Pte. Name COLLINGS, Walter Baylis.

Reg'l No. 475441.

Unit 4th Universities Co. If in perm. Corps, What Unit?

Married or Single Single.

Place and Date of Enlistment Montreal. 8 Oct 1915.

Place of Birth Montreal. Can.

Name and Address, Next-of-Kin Ernest Albert Collings, 899, City Hall, Ave. Mont. Can.

Relationship Father,

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason

Character

*mx.  
5/7/16 mj*

*W.E.S. B. M. 25-C-1950  
K.A.*

**NE R B Serial No 4**

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				
		<i>Arrived in England Lapland 7.12.15.</i>			
		<i>On strength 11<sup>th</sup> B<sup>n</sup> 8.12.15.</i>			
<i>24-4-16</i>	<i>of 11 B<sup>n</sup> of R.C.R.Y</i>	<i>Struck off to R.C.R. &amp; P.P.C.L.I. Dep.</i>	<i>"</i>	<i>24-4-16</i>	<i>Pt II 100</i>
<i>29-4-16</i>	<i>P.P.C.L.I. Dep.</i>	<i>Taken on strength</i>	<i>East Sandling</i>	<i>24-4-16</i>	<i>" " 3.</i>
<i>16-5-16</i>	<i>do.</i>	<i>Struck off strength to P.P.C.L.I. overseas</i>	<i>"</i>	<i>16-5-16</i>	<i>" " 14 a. 7 B. 103 cl. 25-5-16</i>
<i>21. 5. 16.</i>	<i>P.P.C.L.I.</i>	<i>Taken on strength</i>	<i>In the Field</i>	<i>17.5.16.</i>	<i>Pt II 21 War.</i>
<i>30. 5. 16</i>	<i>"</i>	<i>Adm. N<sup>o</sup> 6 Gen. Hosp.</i>	<i>Haare.</i>	<i>22.5.16.</i>	<i>6/2 362. N.Y.D. 37</i>
<i>6. 6. 16</i>	<i>"</i>	<i>Trans Com. Depot</i>	<i>"</i>	<i>30.5.16</i>	<i>" 7. Transletis</i>
<i>25. 9. 16</i>	<i>---</i>	<i>Killed in Action</i>	<i>Field</i>	<i>15.9.16</i>	<i>Pt II 051</i>
<i>29. 9. 16</i>	<i>Base</i>	<i>Repth killed in action</i>	<i>"</i>	<i>15.9.16</i>	<i>CL. 9460 CM</i>

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					

CERTIFIED CORRECT  
Canadian Army Form B. 103  
Record Office,  
Westminster House,  
7, Millbank, S.W.

Casualty Form—Active Service.

Regiment or Corps R.C.R. & P.P.C.L.D. Depot

Regimental No. 475 441 Rank Pt. W. Name Collings Walter Baylis

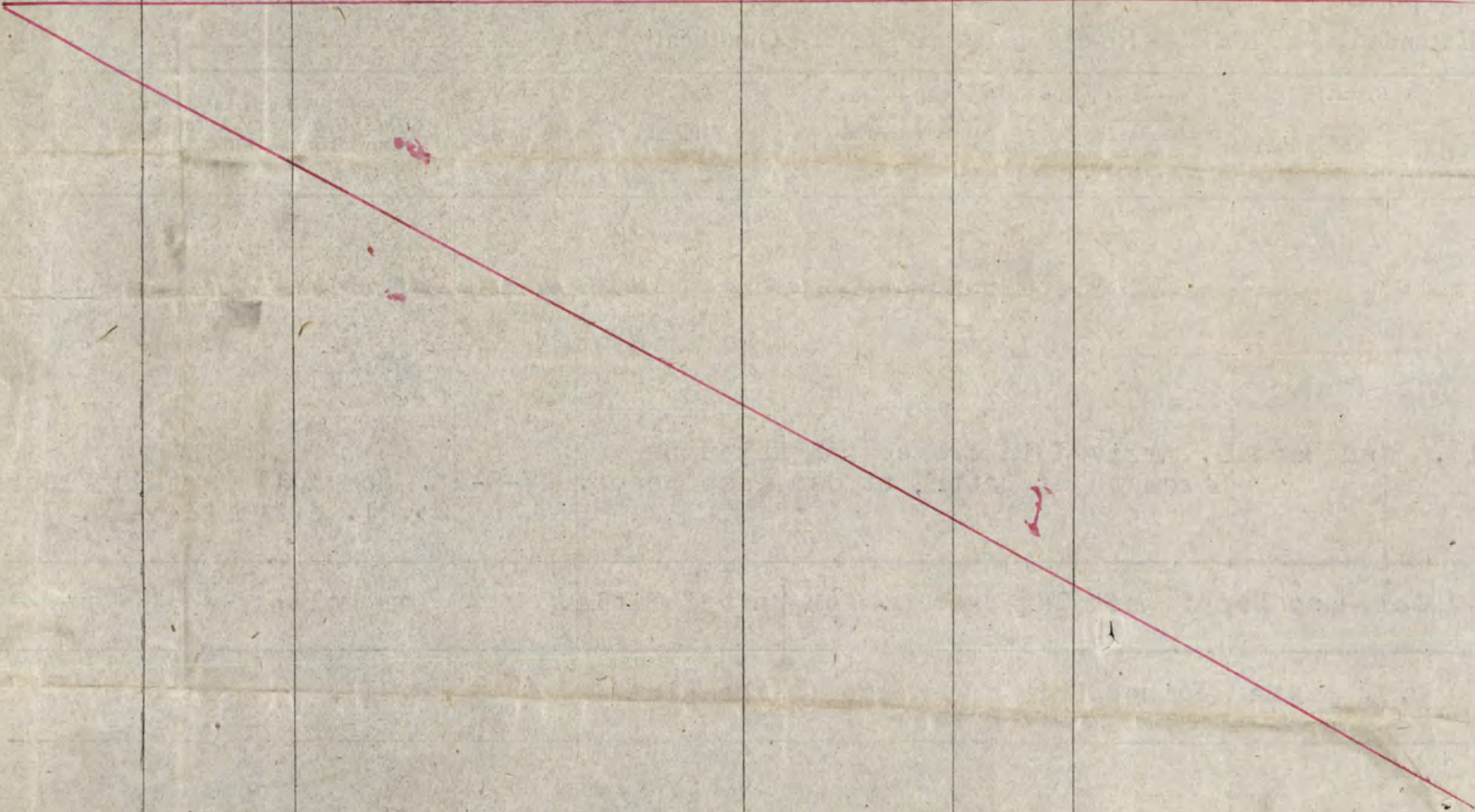
Enlisted (a) 8.16.15 Terms of Service (a) D. of W. Service reckons from (a) 8.16.15

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) blank

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				
16.5.16	R.C.R. Depot	Proceeded Overseas to P.P.C.L.D.	France	16.5.16	D.S. Tynan Lt. Adj.
22-5-16.	6 Staly HP.	N.Y.D. Admitted to No 6 Staly HP.		22-5-16.	W3034 No 142.
17-5-16.	Can Base D.	Arrived in France and taken on strength of Battn, at Can Base Depot.		17-5-16.	Nom Roll Part 11 Orders No.21. dated 21-5-16.
12-6-16	Can Base Depot	Left Can Base D. for Unit in Field.		12-6-16.	Nom Roll.
	O.C. Battn	Joined Unit from Base In the Field.			B.213.
30-5-16.	G. Staly.	Tonsillitis Discharged to Gono Depot.		30-5-16.	W3034 No 150.
8-6-16.	Can Base D.	Taken on strength of Can Base Depot.		8-6-16.	Nom Roll.
20/9/16	C.L. Bn	Killed in action Field		15/9/16	File KI 132/1271 Pt IV orders no 57 & 2579/10

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

# EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

Surname

Christian Name or Names

Reg. No.

*Collings*

*W.B.*

*475441*

Rank

Unit

Co.

Troop

Batty.

*Plt*

*P. P. C. L. S.*

Hospital

Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1)  
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

*Killed in Action*  
*Report base 15-9-16*

DISPOSITION

Date

*CL. 29-9-16 - A1460'*

REMARKS

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

*PI*

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

Surname **COLLINS** Christian Name or Names **W. B.** Reg. No. **475441.**  
 Rank \_\_\_\_\_ Unit \_\_\_\_\_ Co. \_\_\_\_\_ Troop \_\_\_\_\_ Batty \_\_\_\_\_

Pte. **R.P.C.L.I.** Date of Admission  
 Hospital **No. 6 General Hospital, Havre.** **22-5-16.**  
 Transferred **Cowal depot** Hosp. **30.5.16**

Hosp.  
 Hosp.  
 Hosp.

Diagnosis  
 (1) **Lousillitis**  
 Later Diagnosis (if changed)  
 (2)  
 (3)

Additional Diagnosis: if more than one state present

DISPOSITION \_\_\_\_\_ Date \_\_\_\_\_

XL. 30-5-16. A.362.

REMARKS

**Ch. 6.6.16 # 21367**

A.M.D. 2 DEPT.

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

*h*



Scroll recd. 9-9-21

Scroll Desp. ~~\_\_\_\_\_~~ **AUG 26 1921** Reqn. No. Z52220

Plague Desp. ~~\_\_\_\_\_~~ **SEP 21 1921** Reqn. No. P8047

Invoice Number. 4-1-23. B 2291.

649-C-5377

Collings<sup>✓</sup> Walter B. <sup>✓</sup> Pte. 475441 <sup>✓</sup> P.P.C.L.I.  
*Collings* <sup>✓</sup> *ayles*

Med. & Dec. (Mother), Mrs. Ellen Collings,  
*14 Gauthier St* ~~1654 Clarke Street.~~  
~~Montreal. P. Q.~~  
*Cartierville, Que. (4/23)*

*M*

P. & S. (Mother) Address as above.  
*Sen. no. 460946*

Mem. Cross. (Mother) " " "  
*M.X. despatch (M) 50818 on 24-6-21*

*Not eligible for star*  
*Elig. U.M.*  
*Elig. B.W.M.*  
*m.f.*

*5-5-008*

R. 149.

Name <sup>alter</sup> Collins, W.B. <sup>affix.</sup> Rank Private.

Reg. No. 475441.

Unit P.P.C.L.I.

Next of Kin CANADA.

*D.L. 25-6-1850*

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1916.						
22-5	No. 6. Gen' Hosp'	Havre.	N.Y.D.	A. 362		
30-5	Convalescent Depot		Tonsillitis	A 367		
15/9	Killed in Action			A 460	No 9929/9/16	
			<i>Noted</i>			
	<i>Burial Report sent 8/1/17.</i>					



MARRIED

SINGLE

Yes.

WIDOWER

TRADE OR CALLING

Clerk.

RELIGION

C. of C.

DESCRIPTION.

APPARENT AGE

18

YEARS

8

MONTHS

HEIGHT

5

FEET

6

INCHES

CHEST MEASUREMENT

33 1/2

INCHES

EXPANSION

3 1/2

INCHES

COMPLEXION

Bright.

EYES

Blue.

HAIR

D. Brown.

DISTINGUISHING MARKS

2 moles on back.

MEDICAL EXAMINATION.

PLACE

Montreal, P.Q.

DATE

Oct. 8<sup>th</sup>, 1915.

(649-C-5377)

CARD NO.

SURNAME.

*Bollings.*

CHRISTIAN NAMES

*Walter Baylis.*

FO L. **D**

REGL. NO.

*475441.*

RANK

*Pte.*

UNIT

*4<sup>th</sup> University Co.,  
Pil.*

*McLill.*

FORMER CORPS

NEXT OF KIN.

NAMES IN FULL

*Bollings, Ernest Albert*

RELATIONSHIP TO SOLDIER

*Father.*

ADDRESS

~~*899 City Hall Avenue,*~~  
*1654 Clarke St. Montreal, P.Q.*

CHANGE OF ADDRESS

*649-6-5377-2. 28-4-17.*

COUNTRY OF BIRTH

*Canada. Montreal P.Q.*

DATE

*Feb. 12<sup>th</sup> 1897.*

PLACE OF ATTESTATION

*Montreal, P.Q.*

DATE

*Oct. 8<sup>th</sup> 1915.*

*0/8. 27-11-15 285-*

REGT'L No

475441?  
5441

NAME

Collings Walter Baylis

H. Q. FILE No. 649-

RANK AND CORPS

Pte. P. P. C. L. I. 4th Univ. Co

FOLLOWS

No.

CABLE

NATURE OF CASUALTY

Incly.

FOLLOWS

No.

DATE

C

O/698

28-9-16

Killed in action Sept. 15th 1916.

A/7.

25-9-16

"

"

"

"

LIST No

HOSPITAL

DATE OF  
ADMISSION

REMARKS

4460.

Rep. from Base

15-9-46

Killed in action



*HRB*

Number 475441 Rank Pte

Surname COLLINGS

Christian Name Walter Baylis

Units PPCL I Theatre of War France

Date of Service 16-5-16

Remarks (M) Mrs. Ellen Collings

Latest Address 14 Gauthier St,  
Cartersville Que.

Roll No. \_\_\_\_\_

*Stage 22200*

200m.-6-21.

*V*

*D*

# GRATUITY (IMPERIAL)

CHRISTIAN NAME

SURNAME

REG. No.

SCHEDULE No.

LINE No.

UNIT RETIRED OR DISCHARGED FROM

PLACE OF RETIREMENT OR DISCHARGE

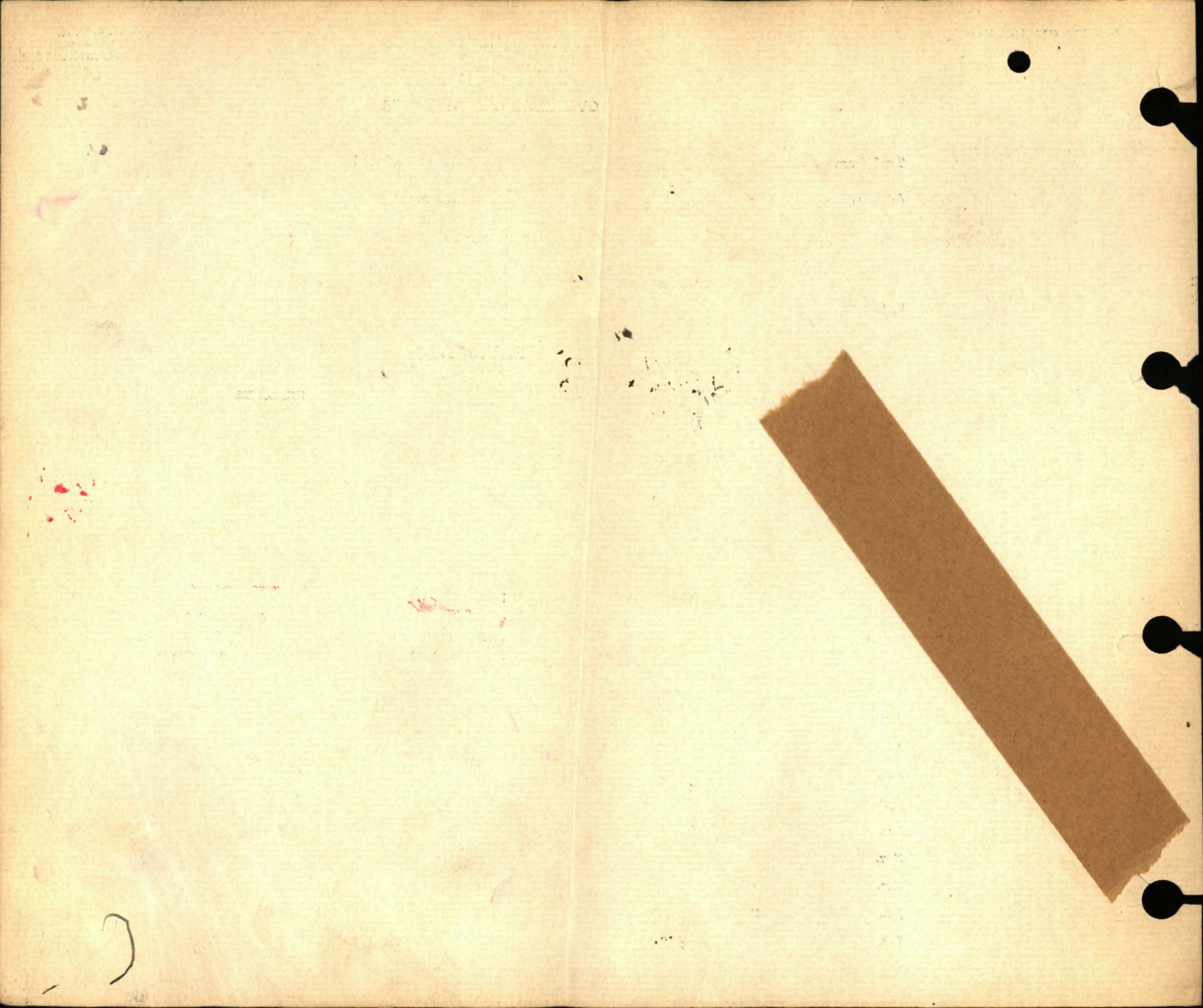
DATE RECEIVED FROM OTTAWA

IMPERIAL DEPOT No.

DATE RECEIVED FROM REG. DEPOT.

DATE FORWARDED TO OTTAWA

DEPT. JAN 16 1923  
REG. NO. 14228



413

MILITIA AND DEFENCE  
ASSIGNED PAY  
OVERSEAS CONTINGENTS

*2nd Contingent*  
*Bank Account.*

*C*

To Whom *Bank of Montreal,*  
*West End Branch*  
Address *Ottawa, Montreal*

By Whom Assigned *Collings, Walter Baylis,*

Regtl. No. *475441*

Rank *Pte.*

Corps *4<sup>th</sup> Overseas Universities Coy.*  
*C. C. F.*

To credit:-  
*(mother) Mrs. Ellen Collings,* *Ont. Ont.*  
*Bank of Montreal,*  
*West End Branch, Montreal, Que.*  
Rate *\$15<sup>00</sup>*

*DEC 1 - 1915*

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<div style="border: 1px solid red; padding: 10px; display: inline-block;"> <i>Casualties</i> </div>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.		<i>Z 6212</i>	<i>15 -</i>	<i>Killed in Action Sept 15-16 (26) 62 29-9-16</i>  <i>Also 2 M. Oct 2nd 16</i> <i>Stop pay 16h</i>
Jan.	1916	<i>0 13278</i>	<i>15 -</i>	
Feb.		<i>Q 13834</i>	<i>15 -</i>	
March		<i>W 15857</i>	<i>15 -</i>	

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.				



# ASSIGNED PAY

OVERSEAS CONTINGENTS

*Mrs Ellen Callings*

Sheet No. 2.

*Bank of Montreal*

**CREDIT**  
PAYMENTS.

Name of Soldier

*Callings, Walter B.*  
*414*  
*4 Univ Co.*

L. L. Job 89002.-Req. 6213.

*475441*

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>\$1500</i>
April	1916	<i>N 2041</i>	<i>15.</i>	
May		<i>O 4524</i>	<i>15</i>	<i>Callings</i>
June		<i>P 7936</i>	<i>15</i>	
July		<i>E 7367</i>	<i>15</i>	
Aug.		<i>H 11729</i>	<i>15</i>	
Sept.		<i>Q 17704</i>	<i>15</i>	<i>Account closed bas.</i>
Oct.		<i>Q 22286</i>	<i>15</i>	
Nov.		<i>X 27180</i>	<i>15</i>	
Dec.				<i>Also 2 M Oct 2/16 &amp; Stop. Nov. 1 16 &amp;</i>
Jan.	1917			<i>Please issue cheque for October adjustment</i>
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

*Cancelled*

*Total \$165*  
 P. R. ... By ...  
*28/5/17* By *AC*



Rank *Pte.* Name **COLLINGS, Walter Baylis.**

Reg'l No. **475441.**

Unit *4th Universities Co.* If in perm. Corps, What Unit?

Married or Single **Single.**

Place and Date of Enlistment **Montreal. 8 Oct 1915.**

Place of Birth **Montreal. Can.**

Name and Address, Next-of-Kin **Ernest Albert Collings, 899, City Hall, Ave. Mont. Can.**

Relationship **Father.**

Assigned Pay Monthly \$ *15<sup>00</sup> Dec 1/15* Payable to *Mrs Ellen Collings* *Bank of Montreal West End Branch Montreal H. Q.*

Relationship

Separation Allowance \$ Payable to

*Checked by T. Williams*

Discharge, Date and Place *15-9-16. H. in A. C. R. 29/9/16* Reason *H. in A. C. R. 29/9/16* Relationship Character

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						
<i>Dec 1</i>	<i>31</i>	<i>31</i>	<i>1<sup>00</sup></i>	<i>31</i>	<i>31</i>	<i>10</i>	<i>3 10</i>	<i>10</i>	<i>44 10</i>	<i>955</i>		<i>14 60</i>	<i>15</i>		<i>29 60</i>	<i>14 50</i>	<i>* Clothing allow, 10<sup>00</sup> Bal on L.P.C. from Depot.</i>
<i>1916</i>																	
<i>Jan 1</i>	<i>31</i>	<i>31</i>	<i>1<sup>00</sup></i>	<i>31</i>	<i>31</i>	<i>10</i>	<i>3 10</i>		<i>34 10</i>	<i>1158</i>		<i>9 73</i>	<i>15</i>		<i>24 73</i>	<i>23 87</i>	
<i>Febr 1</i>	<i>29</i>	<i>29</i>	<i>1<sup>00</sup></i>	<i>29</i>	<i>29</i>	<i>10</i>	<i>2 90</i>		<i>31 90</i>	<i>1428</i>		<i>9 73</i>	<i>15</i>		<i>29 59</i>	<i>26 18</i>	
<i>Ends 1</i>	<i>31</i>	<i>31</i>	<i>1<sup>00</sup></i>	<i>31</i>	<i>31</i>	<i>10</i>	<i>3 10</i>		<i>34 10</i>	<i>1334</i>		<i>4 86</i>	<i>15</i>		<i>36 90</i>	<i>23 38</i>	
				<i>122</i>			<i>12 20</i>	<i>10</i>	<i>144 20</i>			<i>60 82</i>	<i>60</i>		<i>120 82</i>	<i>23 38</i>	<i>✓</i>

Statement of  
FEB 23 1917  
Account rendered

Cash found in effects *H. R.*

Cash found in effects

BALANCE TRANSFERRED TO NEW LEDGER.

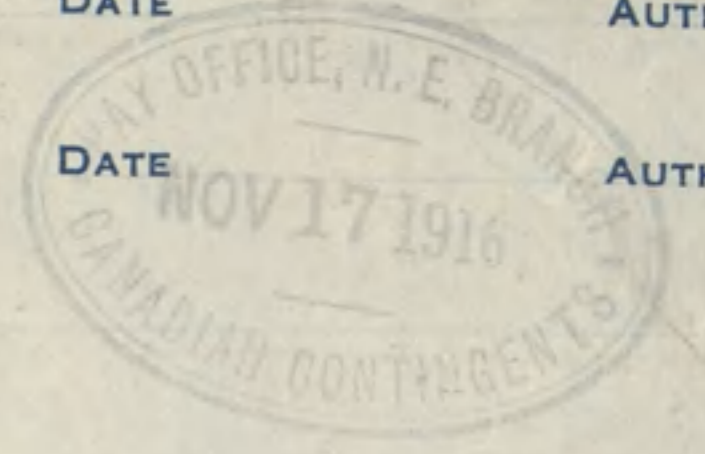
Checked *[Signature]*  
*[Signature]*



MARRIED OR SINGLE *S.*  
 PLACE OF BIRTH *Montreal P.Q.*  
 NAME AND ADDRESS OF NEXT OF KIN *Ernest Albert Collings  
 899 City Hall Ave. Montreal*  
 RELATIONSHIP OF NEXT OF KIN *Father*  
 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
<i>Killed in Action</i>	<i>16.9.16</i>	<i>C.L. 460 29/9/16</i>

REG'L No. *475441* RANK *Pvt* NAME *Collings Walter Baylis*  
 IF IN PERM. CORPS | WHAT UNIT UNIT *P.P. 6. 6. 1*  
 TRANSFERRED TO DATE AUTHORITY  
 PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY  
 PLACE OF ATTESTATION *Montreal*  
 TRANSFERRED TO DATE AUTHORITY  
 DATE OF ATTESTATION *8th Oct. 1915.*  
 TRANSFERRED TO DATE AUTHORITY



ASSIGNED PAY MONTHLY \$ *15.00* DATE EFFECTIVE *1/12/15*  
 PAYABLE TO *Mrs Helen Collings, Bank of Montreal - W. 8. Branch, Montreal*  
 RELATIONSHIP  
 ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE  
 PAYABLE TO  
 STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *2-10-16* EFFECTIVE *1-10-16* REASON *Killed in Action. C.L. 460*  
 DISCHARGE DATE AND PLACE REASON AND AUTHORITY  
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) *10/9/16*  
 ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

ADMISSIONS TO HOSPITAL, &c.			
DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

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				NO. OF DAYS	RATE	AMOUNT	1	2	3	4	1				2	3				4	CREDIT
<i>1916</i>									<i>144 20</i>											<i>120 82</i>	<i>23 38</i>						
<i>Apr 30</i>	<i>30</i>	<i>1</i>	<i>30</i>	<i>30</i>	<i>10</i>	<i>3</i>			<i>33</i>										<i>15</i>	<i>15</i>	<i>41 38</i>						
<i>1/31/16</i>	<i>31</i>	<i>1</i>	<i>31.00</i>	<i>31</i>	<i>10</i>	<i>3 10</i>			<i>34 10</i>										<i>15.00</i>	<i>44 19</i>	<i>31 29</i>				<i>Paid 2 Sep</i>		
<i>1/30-16</i>	<i>30</i>	<i>1</i>	<i>30</i>	<i>30</i>	<i>10</i>	<i>3</i>			<i>33</i>										<i>15</i>	<i>21 81</i>	<i>42 48</i>						
<i>July</i>	<i>31</i>		<i>31</i>	<i>31</i>		<i>3 10</i>			<i>34 10</i>	<i>1361</i>	<i>30/16</i>			<i>3 49</i>					<i>15</i>	<i>18 49</i>	<i>58 09</i>						
<i>Aug</i>	<i>31</i>		<i>31</i>	<i>31</i>		<i>3 10</i>			<i>34 10</i>	<i>243</i>	<i>30/16</i>	<i>2493</i>	<i>15/16</i>	<i>3 49</i>	<i>4 36</i>				<i>15</i>	<i>22 85</i>	<i>69 34</i>						
<i>Sept.</i>	<i>30</i>		<i>30</i>	<i>30</i>		<i>3</i>			<i>33</i>	<i>2570</i>	<i>30/16</i>	<i>2637</i>	<i>15/16</i>	<i>1 74</i>	<i>3 49</i>				<i>15</i>	<i>20 23</i>	<i>82 11</i>						
														<i>8 72</i>	<i>9 85</i>	<i>36 00</i>			<i>15</i>	<i>16 50</i>	<i>31 50</i>	<i>50 61</i>				<i>paid 16.9.16-30.9.16 re-issued 10/18/16 16/9/16</i>	
																					<i>50 61</i>	<i>50 61</i>				<i>50 61 - 26-4-17.</i>	

Checked *[Signature]*

*April 1917*

Statement of  
 FEB 23 1917  
 Account rendered

Cash found in  
*N.R.*



**Table III.—Boards; Courts of Inquiry, 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
15.11.15.	Vacc. T.P. Shaw.
16.10.15.	Inoc. "
23.10.15.	" J.A. Fairie.
29.10.15.	" "

**Table IV.—Service Table.**

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

I certify the foregoing to be a true copy of an original entry on a Medical History Sheet of this man.  
 C.A.M.C.  
 for the Officer in Charge of Records  
 Canadian Contingents.

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. 178 to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

DUPLICATE

**MEDICAL HISTORY of**

Surname COLLINGS Christian Name Walter Baylis

**TABLE I.—GENERAL TABLE.**

Birthplace ... Parish Montreal County Quebec.

Examined ... (on 8th day of October 1915  
at Montreal)

Declared Age ... 18 years ... days.

Trade or occupation ... Clerk

Height ... 5 feet 6 inches.

Weight ... 124 lbs.

Chest Measurement { Girth when fully Expanded 33½ inches.  
Range of Expansion 3½ inches.

Physical Development ... Good

Vaccination Marks { Arm ... Right Left  
Number ... 2

When Vaccinated ... Childhood

Vision ... { R.E.—V=  
L.E.—V=  
(a) Marks indicating congenital peculiarities or previous disease ... { (a)  
(b) Slight defects but not sufficient to cause rejection ... { (b)

Approved by (Signature) J.A. Chabot.  
(Rank) Capt.  
Medical Officer.

Enlisted ... { at Montreal  
on 16th day of October 1915

Corps.	Regtl. No.
<u>4th Un. Co.</u>	<u>475441</u>
<u>11th Reserve Battalion.</u>	

Transferred to ...

Became non-effective by ...  
on ... day of ... 191...

(Signature) ... (Rank) Lieut.-Col.  
of Records

This Medical History Sheet has been compared with the corresponding Attestation Paper, and entries made in red have been taken from (306.) W. 14871/M. 89. 750M. in 1/16. Canadian Contingents.

