

ATTESTATION PAPER.

No. 877467

ORIGINAL

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... Gillan
- 1a. What are your Christian names?..... David
- 1b. What is your present address?..... Florence
- 2. In what Town, Township or Parish, and in what Country were you born?..... Langtoshire Scotland
- 3. What is the name of your next-of-kin?..... John Gillan
- 4. What is the address of your next-of-kin?..... Florence
- 4a. What is the relationship of your next-of-kin?..... Father
- 5. What is the date of your birth?..... Dec 2nd 1898
- 6. What is your Trade or Calling?..... Miner
- 7. Are you married?..... no
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... No
- 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?..... No
- 12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, David Gillan, 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 Mar 13th 1917 David Gillan (Signature of Recruit)
Alonzo Marshall (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, David Gillan, 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 Mar 13th 1917 David Gillan (Signature of Recruit)
Alonzo Marshall (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 Sydney Mines this 13th day of March 1917.

HR Sheehan (Signature of Justice)

A Justice of the Peace in and for the County of Cape Breton

Description of Spelman Howard on Enlistment.

Apparent Age... 18 years 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.

wt. 108

Chest measurement. { Girth when fully expanded..... 32 ins.
 Range of expansion..... 2 ins.

Complexion Light

Eyes Blue

Hair Brown

Religious denominations. { Church of England.....
 Presbyterian... X.....
 Methodist.....
 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..... 13-3 191 6

J. A. McCreary CAPT.
 M. O. 185th. "Overseas" Bn. C. E. F.
 Cape Breton Highlanders
 Medical Officer.

Place..... Sydney Mines

*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.

877467 Pte David Gilton 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.

27 April (Signature of Officer)
 LIEUT. COL.
 Comd g. 185th. "Overseas" Bn. C. E. F.
 Cape Breton Highlanders

Date..... 27 April 191 6

DUPLICATE

To be made out in duplicate.

H.Q. 54-21-23-53

185th. BATTN C. O. E. F.

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.....
185th. of Battalion C.O.F. C.B. Hyland
- (2) Regimental Number.....
877267
- (3) Full Name of Soldier.....
Gellan David
- (4) Place of Birth.....
Larkhall Scotland
- (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?.....

If so, state name and address.....

Yes
John Gellan Florence and Tapa Breton

(10) Is your Mother alive?.....

If so, state name and address.....

Yes
Emily Gellan Florence

(11) If your Mother is a widow.....

Are you her sole support, or not?.....

No

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

(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?.....

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

Yes
Metropolitan Insurance Co

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

yes

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

Date.....

17-7-16

Wm. C. E. F.

LIEUT. COL.
Comd'g. 1st Bn. Commanding. C. E. F.
[Cap. Breton Highlanders.]

REGIMENTAL DOCUMENTS

NAME

Gillan David

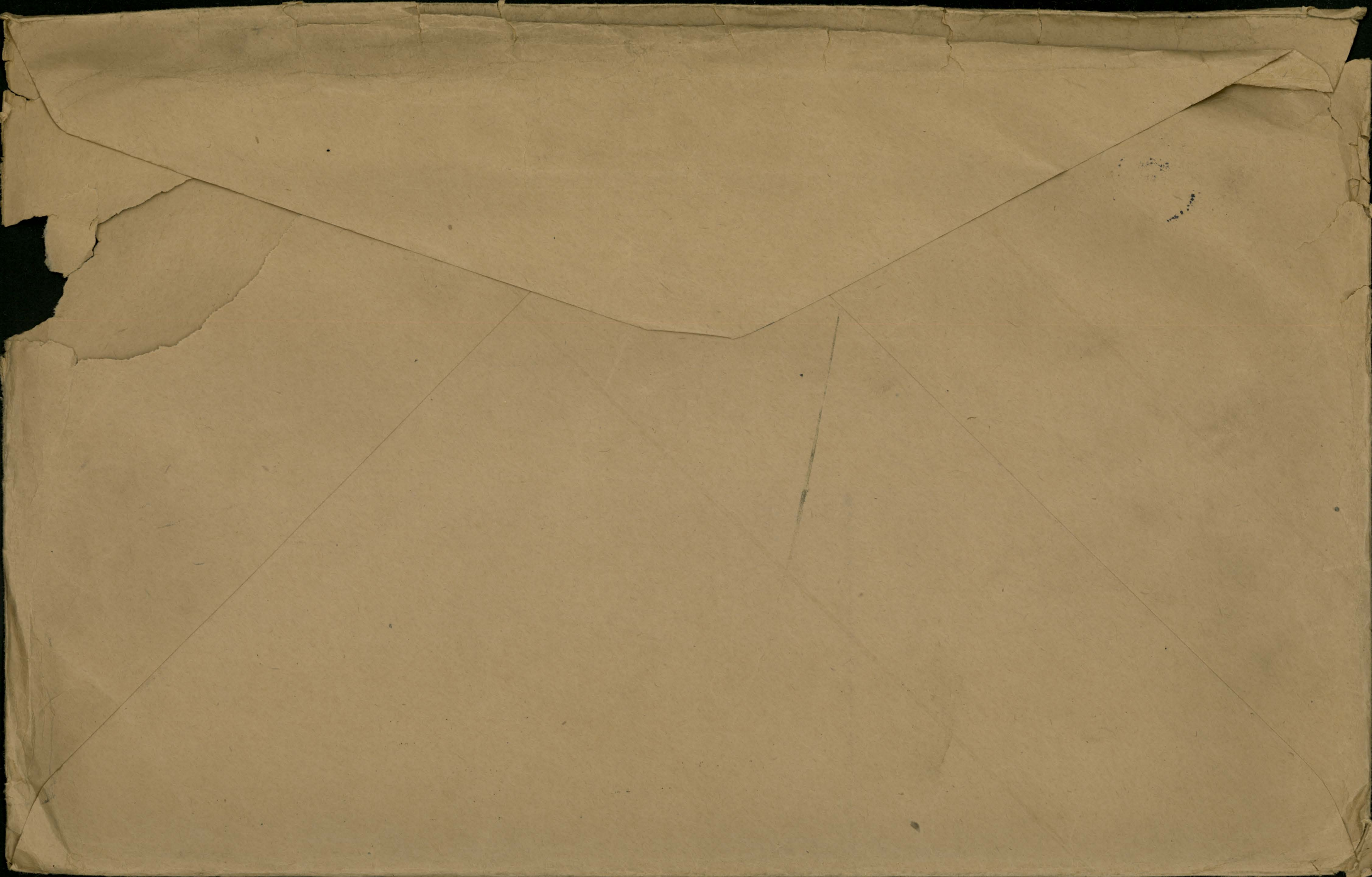
REGT. NO.

877467

UNIT

H. Q. FILE NO.

<div data-bbox="187 194 389 378" style="float: left; border: 1px solid black; border-radius: 50%; width: 60px; height: 60px; display: flex; align-items: center; justify-content: center; margin-bottom: 10px;"> <div style="font-size: 2em; font-weight: bold; text-align: center;">S</div> </div> 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)					
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)				11844	DEATH Category
TRAINING HISTORY SHEET (M.F.W. 113)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE Category
DENTAL HISTORY SHEET (M.F.B. 465)					
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
MEDICAL EXAMINATION (M.F.W. 129)					
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
<i>1 case</i>					
<i>7 med</i>					
<i>1 W</i>					
<i>1 Q 122</i>					
<i>1 pay card</i>					
					14-15 23-15 27-16
					/



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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block Letters) GILLAN, D.
REGIMENT N.S. R. D. RANK PTE. No. 877467

Date of Examination in England _____ Date of Examination in France _____



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 4.5.6.7. 1P. 20.21.

2. EXTRACTIONS

3. CROWNS

4. DENTURES

- (a) Full Upper
- (b) Part Upper
- (c) Full Lower
- (d) Part Lower

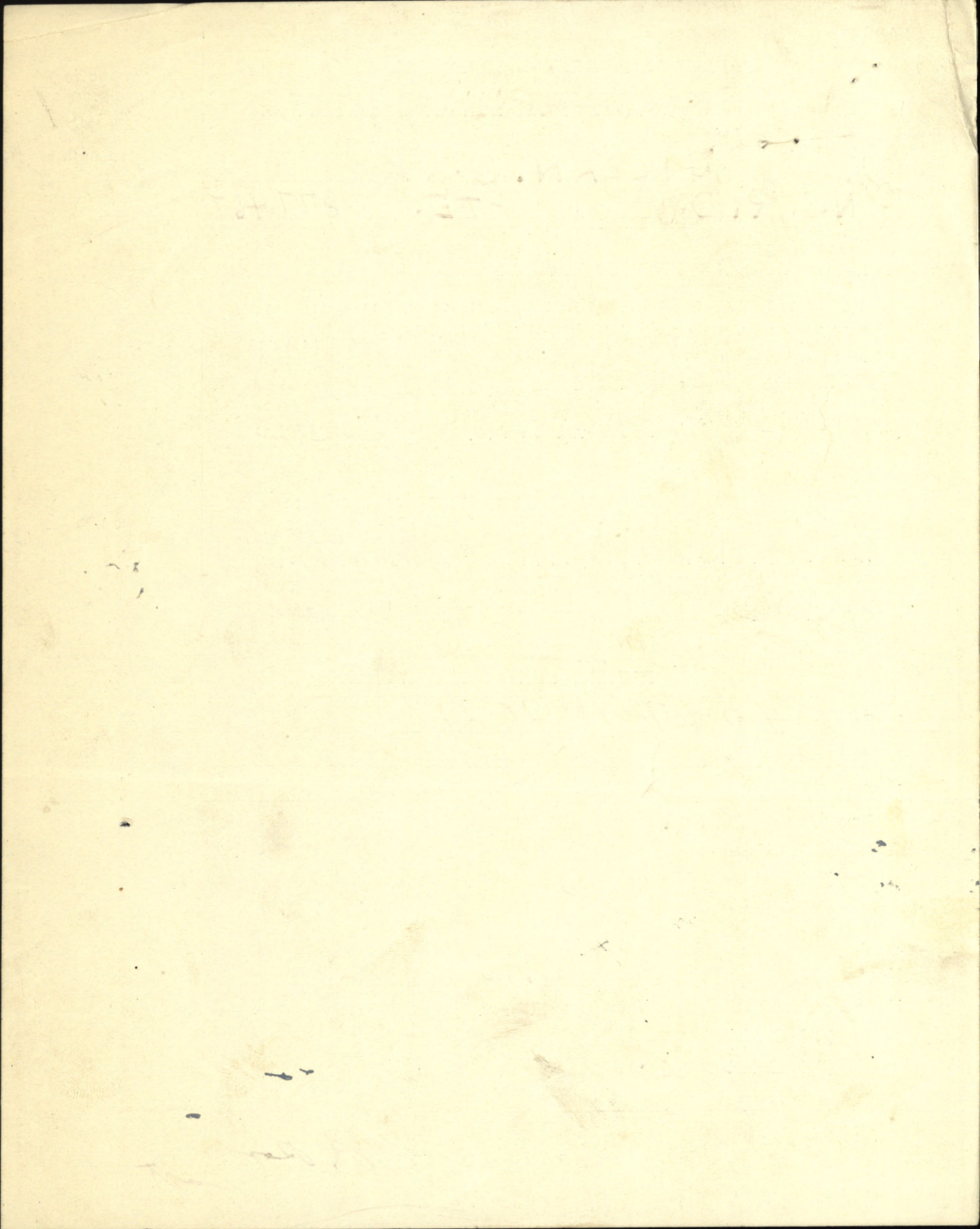


HAS HE EVER REFUSED DENTAL TREATMENT? no

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 yes.
- (c) In France

Signature of Dental Officer R. Ross
cost



Dead on arrival

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. <i>not entered</i>	Regimental No.	Rank.	Surname.	Christian Name.
	877667	Pte	Lillan David	
Year 1919	Unit.	Age.	Service.	
	85 th Bn	MD 6 of 19		

Station and Date.

Disease

The body of a well developed young man age estimated ab 24.
 Was dead on arrival at hospital
 No particulars then available.
 Afterwards identified as Pte Lillan
 Badges on tunic of 85 Bⁿ C.S.T.

Has an old healthy scar from operation for appendicitis.
 Entrance wound evidently of a bullet over scapular area rt shoulder; wound small less than 1/2 inch in diam.
 Exit wound 1" in diam, in front of neck immediately to rt of thyroid cartilage.
 A cut on chin, caused by the passage of same missile.

Cause of death
 Bullet wound of neck.

Harkerford Capt

* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.
 Wt. W 6604/M 2870-1,500,000-3/17-H. & Sp. (10938). Forms/I. 1237/12. (E239) [P.T.O.]

Station
and Date.

Dead on arrival
5/3/19

MEDICAL CASE SHEET.*

*Not-Entered
in A.D. Book
Year
1919.*

**MILITARY HOSPITAL,
KINDEL PARK, BMTL**

No. in
Admission
and
Discharge
Book.

Regimental No.

Rank.

Surname.

Christian Name.

877667

Pte.

Gillan

David

Unit.

Age.

Service.

Station
and Date.

Disease

The body of a well developed young man, age estimated at 24.

Was dead on arrival at Hospital. No particulars thus available. Afterwards identified as above.

Badges on tunic of 85th. Bn. C. M. F.

Has an old, healthy scar from operation for appendicitis.

Entrance wound evidently of a bullet, over scapula area rt. shoulder: wound small, less than $\frac{1}{2}$ inch in diam.

Exit wound 1" in diam. in front of neck immediately to rt. of throat cartilage.

A cut on chin, caused by the passage of some missile.

Cause of death:- Bullet wound of neck.

* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

Station
and Date.

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

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

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, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

1. Christian names DAVID 2. Surname GILLAN
3. Rank Pte 4. Original Unit 105th Bateria 5. Reg. No. 877467
6. Address, in full, to which future payments of gratuity are to be forwarded
David Gillan, Florence P.O., Cape Breton, N.S.
7. Date of enlistment in the C.E.F.
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge not applicable
9. Relationship of such dependent not applicable
10. Address, in full, of such dependent not applicable
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? not applicable
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:—
.....
.....
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?
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service.....
.....
.....
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.....
.....
.....
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department No
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? 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?

21. Have you, during the present war, served in the Imperial Forces?

22. Are you entitled to receive, 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? *No*

(b) If so, was such reversion in consequence of misconduct or inefficiency? *not applicable*

24. Are you now serving in the C.E.F.? If not, give:—(a) Date of discharge (b) Reason for discharge

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 in which you served at the front, and dates of such service with that unit

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: *David Gellan*
Place of Residence: *Flarence, Cape Breton*
Declared before me at: *Kennel Park North Wales*
This *10th* day of *March* 19 *19*

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths under P.C. 2767, dated 11th Nov., 1918. *J. Shepherd Kel. Major*

POST DISCHARGE PAY.

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

Certified Correct

District Paymaster.

FORM OF WILL.

I, David Gillan (Name in full)
 Regimental Number 877467 serving in 185th Battalion
 of the Canadian Expeditionary Force, do hereby revoke all former Wills by me
 made and declare this to be my last Will.

I bequeath all my real estate unto

Nil

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

absolutely, and my personal estate I bequeath to

My Mother, Mrs John Gillan
Florence, Cape Breton, C. S.

Name and Address
 of person or
 persons to receive
 personal estate*
 (See note).

IMPORTANT

NOTE
 This must be Signed
 and Dated by
THE SOLDIER
HIMSELF.

this 23rd day of August A. D. 1916

David Gillan Signature of Soldier.

*N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence
 of us both present at the same time, who in his presence, at his request, and in
 the presence of each other have hereunto subscribed our names as Witnesses.

**THE TWO
 WITNESSES
 MUST
 SIGN HERE**

Signature of First Witness John Willie McLeod

Address of Witness Florence Cape Breton N.S.

Occupation of Witness Miner

Signature of Second Witness George Unsworth

Address of Witness Florence, Cape Breton, C. S.

Occupation of Witness Miner

1900

FORM OF WILL

Faint, mostly illegible text, possibly bleed-through from the reverse side of the page. The text appears to be a legal document, likely a will, given the title at the top. It contains several paragraphs and possibly some numbered sections, but the individual words are too light to transcribe accurately.

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

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 877467 Rank Rt. Surname GILLAN
(Given name in full)
David
 Unit or Corps N.S.R.A. Birthplace Bank Hall, Scot.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 130 lbs. Height 5.7 ft. Colour of Eyes Grey
 Nutrition Good
 Pulse 74
 Condition of arteries Soft
 Vision Rt. 6/6 Left 6/6
 Hearing (conversational voice) Rt. 18 ft.
 Left 18 ft.

Identification marks, scars, or deformities.
 (Give cause and date of origin).
Appendectomy scar
1911 -

Opinion as to general health and physical condition Fit

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.

None

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Ripon (Overseas)

Date 20/2/19

Signed D. W. M. Kay Lt 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 x D. Gillan

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at (Canada)

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 a Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
					DO. No. 35 d/3-4-18.
29-3-18	C. I. B. D.	T. O. 85 BEN ON ARRIVAL	FRANCE	29-3-18	N. R. 602.
"	C. I. B. D.	T. O. TO C. R. C.	FIELD	3-4-18	N. R. 1121.
3-4-18	C. C. R. C.	T. O. S.	"	3-4-18	N. R. 2352.
14-4-18	C. C. R. C.	S. O. S. TO UNIT	"	14-4-18	N. R. 448.
20-4-18	UNIT	JOINED UNIT	"	14-4-18	B. 215
29-1-19	C. I. B. D.	Trans to Eng reported to N.S.R.D. Ripon as Mines for demob	N.S.R.D. Ripon	30-1-19	MR 6/11 A. J. 1-19
					Lieut. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.
6 FEB 1919	N.S.R.D.	T.O.S. FROM C. I. B. D. POSTED TO Depot Co.	Ripon	5-2-19	PART II D.O. 28
25 FEB 1919	N.S.R.D.	S.O.S. TO M. D. Nole	Ripon	25-2-19	PART II D.O. 45
					LIEUT. OFFICER in RECORDS, NOVA SCOTIA REGT. DEPOT
		CANCELLED			
		LIEUT. OFFICER in RECORDS M.D. 8			

WAR SERVICE BADGE.

CLASS "A" No

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

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

Casualty Form—Active Service.

280M.—1-16.

H. Q. 1772-39-920.

Unit, Regiment or Corps 185th Overseas Bn. C.E.F.

Regimental No. 877467 Rank Private Name Gellan David
C. E. F.

Enlisted (a) 13.3.16 Terms of Service (a) Duration Service reckons from (a) 13.3.16

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) Minor

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				

Embarked Canada Halifax 13-10-16

Arrived
Disembarked England Liverpool 19-10-16

7/6/17 OC 185th Bn Attached to 15th Canadian Infy Bde as Runner Witley 3-6-17 Part II O. 157
18th Canadian Infantry Bn. Capt. MacDonald
18th Overseas Bn. C. E. F.
[Cape Breton Highlanders]

26-7-17 OC 15 Bde Attd D.D. Q & R Witley D.D. 3/6/17

14-2-18 OC 15 Bde Cross to be attd Witley 2.27/6/17 15-2-18

7/1/18 OC 185th Bn S.O.S. on transfer to 17th Res Bn Bramshott Witley 2.3.2.18

12-3-18 O.C. 17th TOS on transfer from 185th Battalion. Bramshott 23-2-18

PROCEEDED OVERSEAS. FOR SERVICE WITH 85 BATTN.

28 MAR 1918 Part II O. 75

do Mauckay Lieut., Asst. Adjt.
17th Canadian Res. Bn.

(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.

CANADIAN EXPEDITIONARY FORCE

M. D.
6.

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 877467 (Rank) Private

Name (in full) Gillan David enlisted in
the 185th Battalion

CANADIAN EXPEDITIONARY FORCE at Sydney Mines on the 10th
day of March 1916

HE served in France and Belgium with 85th Bn.

and is now discharged from the service by reason of
Demobilization.
Medical Unfitness.

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows:—

Age 20 1/2 Years
Height 5 ft. 5 in.
Complexion Light
Eyes Blue
Hair Brown

Marks or Scars Appendectomy Scar

Signature of Soldier

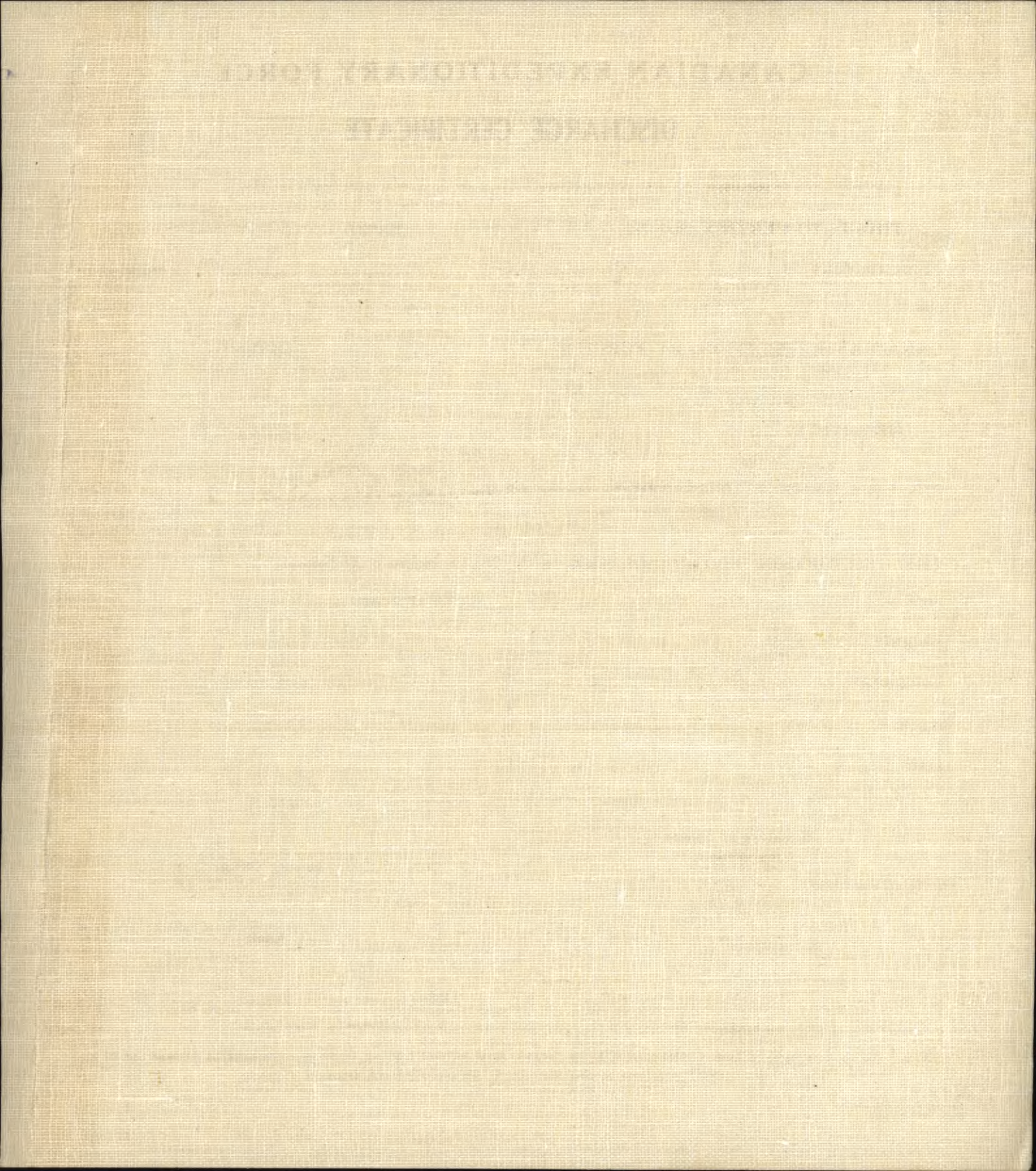
Date of Discharge

Issuing Officer

Rank

Date March 2nd 1919

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.



85th Bn

E.T. Rank *Pvt* Name GILLAN, David
 Unit 185th Battn If in perm. Corps, }
 What Unit? }
 Place and Date of Enlistment Sydney, ~~Nov~~ ^{Mines, March} 13th 1916. Place of Birth Lanarkshire
 Name and Address, Next-of-Kin John Gillan. Scotland:

*mx
20/1/1917*

Florence, Cape Breton. Nova Scotia. Canada Relationship Father.

Assigned Pay Monthly \$ Payable to

Relationship

Separation Allowance \$ Payable to

Relationship

Discharge, Date and Place Reason

Character

N/E. R.B. No. 7153
 File No. 20-G-3521
 Category N.O.C.

H

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.				
- C		Arrived in England	S. S. Olympic	18/10/16	
7.6.17	185th Bn	Attached to 15 Cdn. Inf. Bde. for duty as runner	Witley	3.6.17	PT # 157
18 ² /18		Came as 15 th Cdn Inf Coy	Regt	15 ² /18	Regt. 12
9 ³ /18		Sos to 14 th Cdn Inf	Regt	23 ³ /18	Regt 21 r 17 d of 10 60 2/18
29 ³ /18	19 th Bn	Sos to 85 th Bn	Regt	28 ³ /18	" 95 98 d of 10 82 3/18
10.2.19	85 th Bn	SOS posted NSRD. (coal miner)	Plc Field	30.1.19	80.11. & 28 d/6 2.19 NSRB
7-3-19	N.S.R	Killed (in Disturbance)	K. Park	5.3.19	C.L.C.H. 57 9.129 d/9.3.19 m 3 w 6
26.2.19	NSRD	SOS to m D W 6 Rhygl	-	26.2.19	27 & 59 d/28 2.19 m 3 w 6

M

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H. Q. 1772-39-316

Mother

To Whom *Mrs, Emily, Gillian*
Address *Florence*
C. B. N. S.

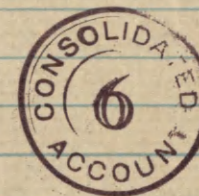
By Whom Assigned *Gillian, David.*
Regtl. No. *877467*
Rank *Plt.*
Corps *185th Batt C-co.*

Rate *20.⁰⁰*

OCT 1. 1916

PAYMENTS

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



8-2-58

11

10



MILITIA AND DEFENCE
ASSIGNED PAY

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

Sheet No. 2.
 (Assignee)

L. L. Job 5470—Req. 6888.

Mrs Emily Gillian Mother
**OVERSEAS CONTINGENTS
 PAYMENTS.**

Name of Soldier

Gillian David

877467

Plt. 185th Bn.

Month.	Year.	Cheque No.	Am ^t .	Remarks.
				<i>20.⁰⁰</i>
				OCT 1 1916
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		<i>U27448</i>	<i>20</i>	
Nov.		<i>U29674</i>	<i>20</i>	
Dec.		<i>T34177</i>	<i>20</i>	
Jan.	<i>1917</i>	<i>Q38388</i>	<i>20</i>	
Feb.		<i>O44385</i>	<i>20</i>	<i>20. k-</i>
March		<i>M49777</i>	<i>20</i>	<i>20 w.</i>
April		<i>I1986</i>	<i>20</i>	<i>20 B.</i>
May		<i>J343</i>	<i>20</i>	
June		<i>L. 15172</i>	<i>20</i>	<i>20 B.</i>
July		<i>Q21963</i>	<i>20</i>	<i>Pa</i>
Aug.		<i>Q28737</i>	<i>20</i>	<i>lo</i>
Sept.	<i>41078</i>	<i>W32550</i>	<i>20</i>	<i>W 32550 Can H's</i>
Oct.		<i>A24989</i>	<i>20</i>	
Nov.		<i>A40743</i>	<i>20</i>	
Dec.		<i>Z56487</i>	<i>20</i>	
Jan.	<i>1918</i>		<i>300</i>	
Feb.				
March				
April				
May				
June				
July				

b

raw

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.				

D $\frac{5}{3}$
SURNAME.

CHRISTIAN NAMES

REGL. NO.

UNIT

FORMER CORPS

CARD NO.

FOLL.

NAMES IN FULL

RELATIONSHIP TO SOLDIER

ADDRESS

NEXT OF KIN.

CHANGE OF ADDRESS

COUNTRY OF BIRTH

PLACE OF ATTESTATION

DATE

DATE

Gillan
David

877467

RANK

Pte

185⁴

Nil

Bm

Gillan John
Father

Florence, L.B.N.S.

Scotland Lanark

DATE Dec 2nd 1898

Sydney Mines N.S.

DATE Mar 13 1916

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

Mines

RELIGION

yes
Presbyterian

DESCRIPTION.

APPARENT AGE

18

YEARS

MONTHS

HEIGHT

5-

FEET

3-

INCHES

CHEST MEASUREMENT

32

INCHES

EXPANSION

2

INCHES

COMPLEXION

Light

EYES

Blue

HAIR

Brown

DISTINGUISHING MARKS

Not stated.

MEDICAL EXAMINATION.

PLACE

Sydney Mines

N.S.

DATE

Mar 13th 1916

Present address. Florence C.B., N.S.

H.Q. 649-G-17644.

Gillan, Pte. David, #877467, Nova Scotia Reg. Depot.

M. & D. (Mother) Mrs. John Gillan,
Florence P.O., C.B., N.S.

P. & S. (Father) John Gillan,
(address as above)

Mem. C. (Mother) Same as above.

(Ser. # 799/23)

Scroll Desp. APR 1 2 1921 Reqn. No. 234902

Phone Desp. DEC 2 1921 Reqn. No. P19037

*Not elig. for star.
" " U.M.
" " B.W.M.*

m.f.

[Handwritten scribbles and numbers, including '4488']

Me 42833

JAN 20 1921

1030

DAVID

25. G. 3522.

Name GILLAN

Rank Lt

Reg. No. 877467.

Unit 25 AD

John Gillan
Florence, Cape Breton (Born 2-12-1898)
Nova Scotia (Relig - Pres)
Canada

Next of Kin

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
5-3-19	<u>Killed</u>	In disturbance near Kimmel Park. Phys.		C. 457		H776
		while defending against rioters				
		Reported by O. L. 6-Mil Div. Kimmel Pr. Phys.				
		Tel. 2-19-36. 1/3899.				4867
		D, O, C N/E				CM7C 4-3-19

No 877467 RANK Pte

NAME William David Gillan

T. O. S. 6-3-16

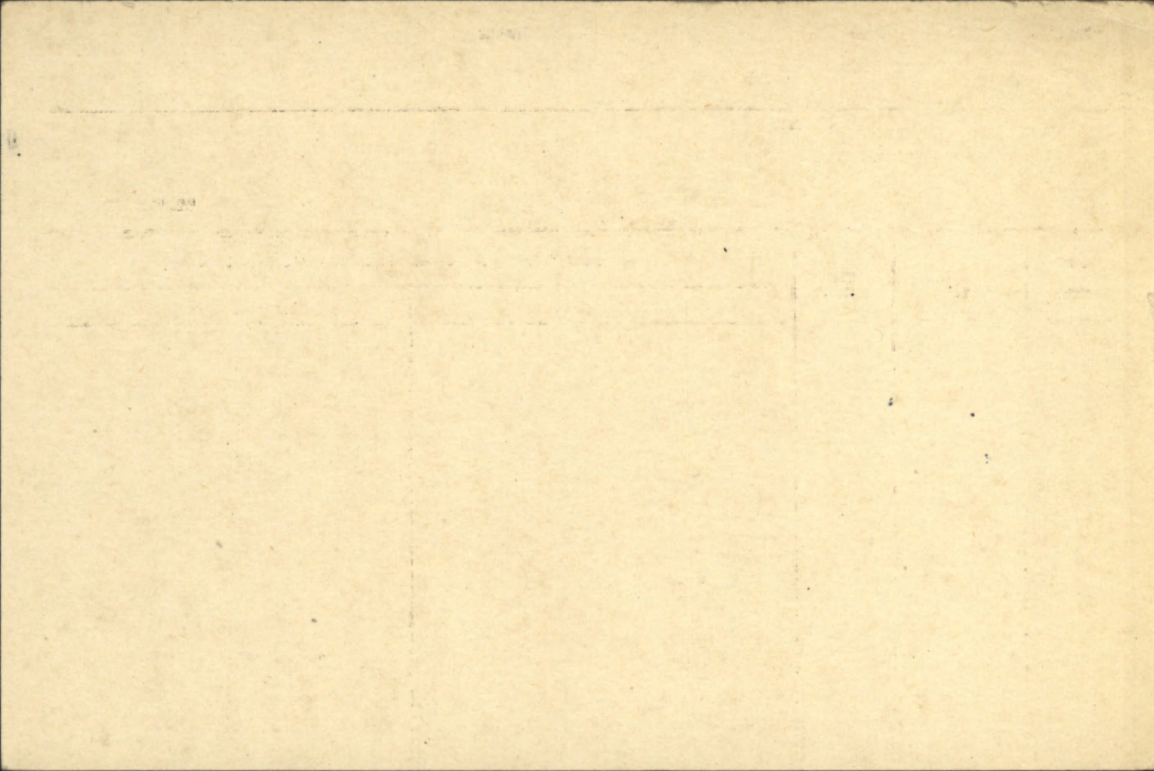
UNIT 185th Battalion C. E. F.

DD: 2-4-16.

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 mar. 6	1916 Apr. 30	m.		
may		✓		
June		✓		
July		✓		
Aug.		✓		
Sept.		✓		
Oct.		✓		

UNIT SAILED
OCT 12 1916



NAME

Gillan David

REGT. No.

877467

RANK AND UNIT

Pte N. S. Regt Ops Form 185th Bn

NEXT OF KIN

John Gillan (Father) Florence C. B. N. S.

CABLE

NATURE OF CASUALTY

No.

DATE

4-2
24776

10-3-19

Rept K. Kemmel Park March 5/19

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

B 457

Rept. by O. C. Mil. Sgt. Kimmel Pk. Killed in
Disturbance 5-3-19

*Miss
Kear*

Number

844464

Rank

Pvt

B

Surname

GILLAN

Christian Name

David

2

Units

85th Gen. Inf.

Theatre of War

France

Date of Service

28 - 3 - 18

II

Remarks

Latest Address

*(M) Mrs. John Gillan,
Florence P.O.*

Roll No.

C. B., N. S.

...-2-21.

B. Page 15473

DEPT. JUL 27 1922

REGN. NO. *6A29093*

Surname

Christian Name or Names

Reg. No.

GILLAN.

D.

877467.

Rank 1 pte.

Unit 1. N.S. Dep.

2.

2.

3.

3.

4.

4.

Cas List.

Hospital and Diagnosis

Date

7-3-19. C457.

Rept. By O/C. 6. Mil. District.

KILLED in Disturbance. 5-3-19.

R

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

Cas. List.

Hospital and Diagnosis.

Date

ASSIGNED PAY. ENGLAND OR CANADA. SEPARATION ALLOWANCE. ENGLAND OR CANADA.
EFFECTIVE DATE: *October 1st 1916.* EFFECTIVE DATE: -
AMOUNT: *\$20.00* AMOUNT: -

NAME: *GILLAN - David.*
NUMBER: *877467.*

NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

*Mrs. Emily Gillan (Mother.)
Florence.
Nova Scotia.*

PARTICULARS OF RANK OR APPOINTMENT
AUTHORITY DATE EFFECTIVE RANK OR APPOINTMENT
Private.

Stopped 1/3/19
*Killed 5/3/19
Auth 6457 7/3/19.*

UNIT AND TRANSFERS
ORIGINAL UNIT: *185th BATTN CAN.*
DATE ACCOUNT FIRST OPENED: *Nov. 1st 1916.*

AUTHORITY DATE EFFECTIVE DATE LEDGER SHEET T S F D UNIT TRANSFERRED TO
85th Bn 32 3/4/18 1:4/18 3/13/18 85th Bn
185th BATTN C

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
<i>27/1/19</i>	<i>8633</i>	<i>C. J. B. H.</i>	<i>4.66</i>				
<i>7/2/19</i>	<i>5786</i>	<i>R. R. D. G.</i>	<i>34.07</i>				
			<i>38.73</i>				

DAILY RATES OF PAY AND ALLOWANCES
AUTHORITY PAY F.A. P.F.A. SUBS: CE ALL: CE
12 210

PARTICULARS OF BENDING NON-EFFECTIVE
Discharged Canada 2/19/19. Killed 5.3.19. Auth 6457 7/3/19. Ledger B. 41.63. L.P. 2.90

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
<i>Mar.</i>	<i>Balance Forward.</i>								<i>18.20</i>		
<i>Apr.</i>	<i>P. Pay</i>	<i>33</i>		<i>Cap.</i>				<i>20</i>			
				<i>AR 72 14/18 4 King CERC</i>	<i>4.46</i>						
				<i>✓ 186. 16/4/18</i>	<i>3.57</i>						
				<i>✓ 307 25/3/18 17 Resbn</i>	<i>7.61</i>						
				<i>AR 11. 27.4.18 85th Bn</i>	<i>4.46</i>				<i>17.95</i>		
		<i>33</i>			<i>13.25</i>			<i>20</i>			
<i>May</i>		<i>34.10</i>		<i>Cap</i>				<i>20</i>			
				<i>AR 149 8/5</i>	<i>3.57</i>						
				<i>✓ 207 18/5</i>	<i>4.46</i>				<i>26.02</i>		
		<i>33</i>			<i>8.03</i>			<i>20</i>			
<i>June</i>		<i>33</i>		<i>Cap</i>				<i>20</i>			
				<i>AR 275 3/6</i>	<i>3.57</i>						
				<i>✓ 336 19/6</i>	<i>4.46</i>				<i>28.99</i>		
		<i>33</i>			<i>8.03</i>			<i>20</i>			
<i>JUL</i>		<i>36.10</i>		<i>Cap</i>				<i>20</i>			
				<i>✓ 398 2/7</i>	<i>3.57</i>						
				<i>✓ 461 18/7</i>	<i>4.46</i>				<i>35.06</i>		
		<i>33</i>			<i>8.03</i>			<i>20</i>			
<i>Aug</i>		<i>34.10</i>		<i>Cap</i>				<i>20</i>			
				<i>AR 519 4/8</i>	<i>3.57</i>						
				<i>✓ 576 6/8</i>	<i>3.57</i>				<i>42.02</i>		
		<i>33</i>			<i>7.14</i>			<i>20</i>			
<i>Sept</i>		<i>33</i>		<i>Cap</i>				<i>20</i>			
				<i>644</i>	<i>3.57</i>						
				<i>718</i>	<i>3.57</i>						
				<i>769</i>	<i>8.92</i>				<i>38.96</i>		
		<i>33</i>			<i>16.06</i>			<i>20</i>			

NUMBER 877467

RANK

NAME GILLAN J.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
Oct	P.P.	34 10		bal.				20			
		34 10		AR 177 - 12 th edo - 13/10/18	3 73			20	49 33		
Nov	✓	67 10		AR 883 - 13 th edo - 3/4/18	3 73						
Jan	✓	34 10		AR 1021 - " - 20/11/18	13 06						
				AR 1120 - " - 3/12/18	3 73						
				AR 1226 - " - 14-12-18	3 73						
				cap				40			
				cap				20	66 28		
Feb	P.P.	30 80		AR 1310 - 12 th edo - 1-1-19	3 73			60			
				AR 2175 - " - 9-1-19	18 66						
				AR 1410 - " - 17-1-19	3 73						
				AR 1531 - " - 23-1-19	9 33						
				cap				20	41 63		
				AR 8633 CBPA 31/1/19	4 66						
				AR 5786 Ripon 7-2-19	31 07						
		30 80		" 6894 RABLY 25/2	2 43				.47		
					76 61			20			
Apr	Recd P.P.	34 10		cap				20 00	14 57		
		34 10						20			
Aug				2264 Bal-ban	14 57						

Statement Rendered 5.7.19 (9/5/19)
Cr Bal 14.57

MARRIED OR SINGLE

PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

*Lanapline Scot
Florence, Nova Scotia, Can.
Mrs. William
Florence, Nova Scotia, Can.
Sister*

CASUALTIES, PROMOTIONS, &c. TABLE with columns for PARTICULARS, EFFECTIVE DATE, AUTHORITY, DATE ADMITTED, DATE DISCHARGED, V. OR A., NAME OF HOSPITAL.

REG'L. NO. 877467 RANK Private UNIT 185th NAME Gilliam William David
IF IN PERM. CORPS WHAT UNIT TRANSFERRED TO DATE AUTHORITY
PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY
PLACE OF ATTESTATION Sydney, Nova Scotia, Can. TRANSFERRED TO DATE AUTHORITY
DATE OF ATTESTATION Mech 6th 1916 TRANSFERRED TO DATE AUTHORITY
ASSIGNED PAY MONTHLY \$ 20. DATE EFFECTIVE Oct. 1st 1916
PAYABLE TO Mrs. William, Florence, Nova Scotia, Can. RELATIONSHIP Sister
ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE
PAYABLE TO RELATIONSHIP
STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON
DISCHARGE DATE AND PLACE REASON AND AUTHORITY
ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)
ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

Gilliam (Col's Muster Roll Sept 1917)

Table with columns: DATE, PAY (NO. OF DAYS, RATE, AMOUNT), FIELD ALLOWANCE, WORKING OR SPECIAL PAY, ASSIGNED PAY CREDITS, OTHER CREDITS, TOTAL CREDITS, ACQUITTANCE ROLLS (1-4), CASH PAYMENTS (1-4), ASSIGNED PAY, OTHER CHARGES, TOTAL DEBITS, BALANCE (CREDIT, DEBIT), PAY WITHHELD OR DEFERRED, PAY AVAILABLE FOR ISSUE.

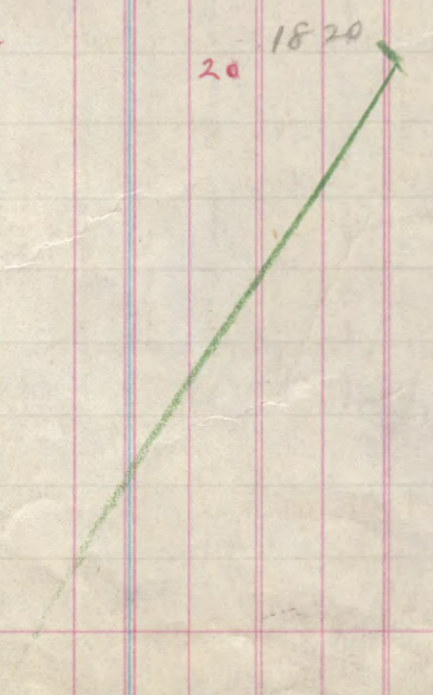
assigned pay has been paid by A.P. branch for Oct 1/16 and remarks received on Oct. 11th. Canada

from Canada

CJ

Gillan
877467 Pt Gilliam David a P + 20⁰⁰

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					NO. DATE	NO. DATE	NO. DATE	NO. DATE	1	2	3	4				CREDIT	DEBIT				DR.1	DR.2	DR.3	DR.4	BALANCE	
			\$	C.			\$	C.			\$	C.																									
1917																																					
Oct 1	Balance Forward			4240											4240																						
	Ptes pay	34	10												20 ⁰⁰																						
				34	10																																
Nov.	Ptes pay	33	00																																		
	" " alloc	34	10																																		
1918	Jan Ptes pay	34	10																																		
				34	10																																
				30	80																																
Feb.	Ptes pay	34	10																																		
				30	80																																
Mar.	Ptes pay	34	10																																		
				34	10																																



ORIGINAL

~~Co B~~
877467
Co B

MEDICAL HISTORY SHEET.

Surname Gillieart Christian Name David

MAR 13 1916

Examined { on 13 day of 1916
at Sydney Mines
Birthplace { City or Town Scotland
County Scotland

Approved by W. O. 185th. "Overseas" Batt'n. G. E. F.
Rank Capt. Breton Highlanders. M.O.

Apparent age 18
Trade or occupation Mines
Height 5 Feet 5 Inches. M.O.
Weight 108 Lbs. M.O.
Chest measurement { Minimum 30 inches. M.O.
Maximum expansion 31 inches. M.O.
Physical development Good. M.O.
Small-Pox Marks none. M.O.

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

Vaccination Marks { Arm Right. Left.
Number none

Date.	Result.	VACCINATIONS.
<u>13/8/16</u>	<u>Good</u>	<u>Gillieart</u>

When Vaccinated last
(a) Marks indicating congenital peculiarities or previous disease Appendicitis
scar

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>7/7/16</u>	<u>Good</u>	<u>Gillieart</u>
<u>14/7/16</u>	<u>"</u>	<u>Isen</u>
<u>10th 23-1-18</u>		<u>Isen</u>

Enlisted on 6th day of March, 1916 at Sydney Mines

	CORPS.	REG'L NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>185 Batt'n. Cape Breton Highlanders</u>	<u>877467</u>		<u>Mar. 6/16</u>
	<u>Attd 15 day by Bd</u>	<u>877467</u>		
Transferred to	<u>Cape Breton 85th Bn</u>	<u>877467</u>	<u>Excellent</u>	<u>15-2-18</u> 28 MAR 1918

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.

Copy

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

MEDICAL HISTORY OF

877467

Surname Gillan

Christian Name David

TABLE I.—General Table.

Birthplace { Parish... Lanarkshire, Scotland
County... Lanarkshire, Scotland

Examined { on 13th day of March 1917
at Sydney Mines

Declared Age 17 years 103 days

Trade or Occupation Miner

Height 5 feet 5 inches

Weight 108 lbs

Chest Measurement { Girth when fully Expanded 32 inches
Range of Expansion 2 inches

Physical Development Good

Vaccination Marks { Arm... RIGHT LEFT
Number none

When Vaccinated never

Vision { R.E.—V—
L.E.—V—

(a) Marks indicating congenital peculiarities or previous disease—
Appendicitis scar

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

Approved by J. Munro
Rank
Medical Officer.

Enlisted { at Sydney Mines
on 13th day of March 1916

Joined on enlistment	Corps 185 th Batta	Regtl. No. 877467
Transferred to		

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
12/8-16	Good J. Munro Vaccinations
7-7-16	Good J. Munro Anti-Typhoid Inoculations
14-7-16	Good J. Munro
14.9.17	J. Munro

TABLE IV.—Service Table.

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

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

G

OVERSEAS CONTINGENTS

3198

Oct '16

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

20			
----	--	--	--

9

PARTICULARS OF SEPARATION ALLOWANCE

No. 877467
 Rank Pte Promoted Reverted Discharge
 Soldier's Name David Gillian
 Battalion 185th Batta. C Coy.
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

(Mother)
 Name Mrs Emily Gillian
 Address Florence C. B. N. S.
 Change of Address
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917					6923-19-2
Dec 31			300	300	Rept. killed Mar 5. 1919 per C.O. 467 fol 1-12-3-19
Jan	J 65128		20	20	Mrs. dest. 76092.
Feb	F 100810		20	20	
Mar	H 90487		20	20	
Apr.	H 9706		20	20	
May	S 17027		20	20	
June	M 27326		20	20	
July	K 28195		20	20	
Aug	O 35531		20	20	
Sept	V 45840		20	20	
Oct	M 53819		20	20	
Nov	N 56598		20	20	
Dec.	X 62319		20	20	
Jan	T 73120		20	20	
Feb	Y 77023		20	20	
Mar	Z 89409		20	20	
			<u>600</u>	<u>600</u>	

M. F. W. 128
 4000-6-17-1772-38-1141
 L. L. 22520-M. & D. 7893.

AUDITED.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

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PARTICULARS OF SEPARATION ALLOWANCE

No. *100*

Rank *SS* *1* Promoted Reverted Discharge

Soldier's Name *S. S. S. S.*

Battalion *15250*

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
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