

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

COPY

(Class ONE)

1. Surname..... GILLESPIE

2. Christian name..... Charles Dugald

3. Present address..... Dugald, Manitoba, Canada.

4. Military Service Act letter and number..... 512620 JC

5. Date of birth..... 7th June, 1894

6. Place of birth..... Dugald, Manitoba, Canada.
(town, township or county and country)

7. Married, widower or single..... Single

8. Religion..... Presbyterian.

9. Trade or calling..... General Merchant

10. Name of next-of-kin..... Dugald Charles GILLESPIE

11. Relationship of next-of-kin..... Father

12. Address of next-of-kin..... Dugald, Manitoba, Canada. *WS*

13. Whether at present a member of the Active Militia..... No

14. Particulars of previous military or naval service, if any..... none

15. Medical Examination under Military Service Act:—
 (a) Place..... Winnipeg, Canada. (b) Date..... 15/11/17 (c) Category..... A2

DECLARATION OF RECRUIT

I, Charles Dugald GILLESPIE, do solemnly declare that the above particulars refer to me, and are true.

Charles Dugald Gillespie (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age.....	23	yrs	5	mths.	} Distinctive marks, and marks indicating congenial peculiarities or previous disease.
Height.....	5	ft	10	ins.	
Chest measurement } fully expanded.....	}	}	38	ins.	
			range of expansion.....	2½	
Complexion.....	Ruddy				
Eyes.....	Hazel Grey				
Hair.....	D. Brown				

NIL

W. Wood Major for
 Commanding, 1st Depot Battalion Manitoba Regiment
 O. C. First Depot Btln.
 Manitoba Regt.

Place Winnipeg, Canada Date 9th January, 1918

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class)

1. Surname

2. Christian name

3. Present address

4. Military Service Act letter and number

5. Date of birth

6. Place of birth

7. Married without wife

8. Religion

9. Trade or calling

10. Name of next-of-kin

11. Relationship of next-of-kin

12. Address of next-of-kin

13. Whether or person a member of the Army Militia

14. Particulars of previous military or naval service, if any

15. Medical examination under Military Service Act

(a) Place

(b) Date

(c) Category

DECLARATION OF RECRUIT

I, the undersigned, do hereby solemnly declare that the particulars stated in the foregoing form are true and correct to the best of my knowledge and belief.

(Signature of Recruit)

DESCRIPTION OF CALLING E.P.

Apprentice	Yes	No
Trade	Yes	No
Chief	Yes	No
Handwritten	Yes	No
Conclusion	Yes	No
Eye	Yes	No
Ear	Yes	No

Distinctive marks and marks indicating congenital peculiarities or previous disease

Depot Bill

Recd

Signature

Date

RECEIVED
 ADVANCE
 1917

REGIMENTAL DOCUMENTS

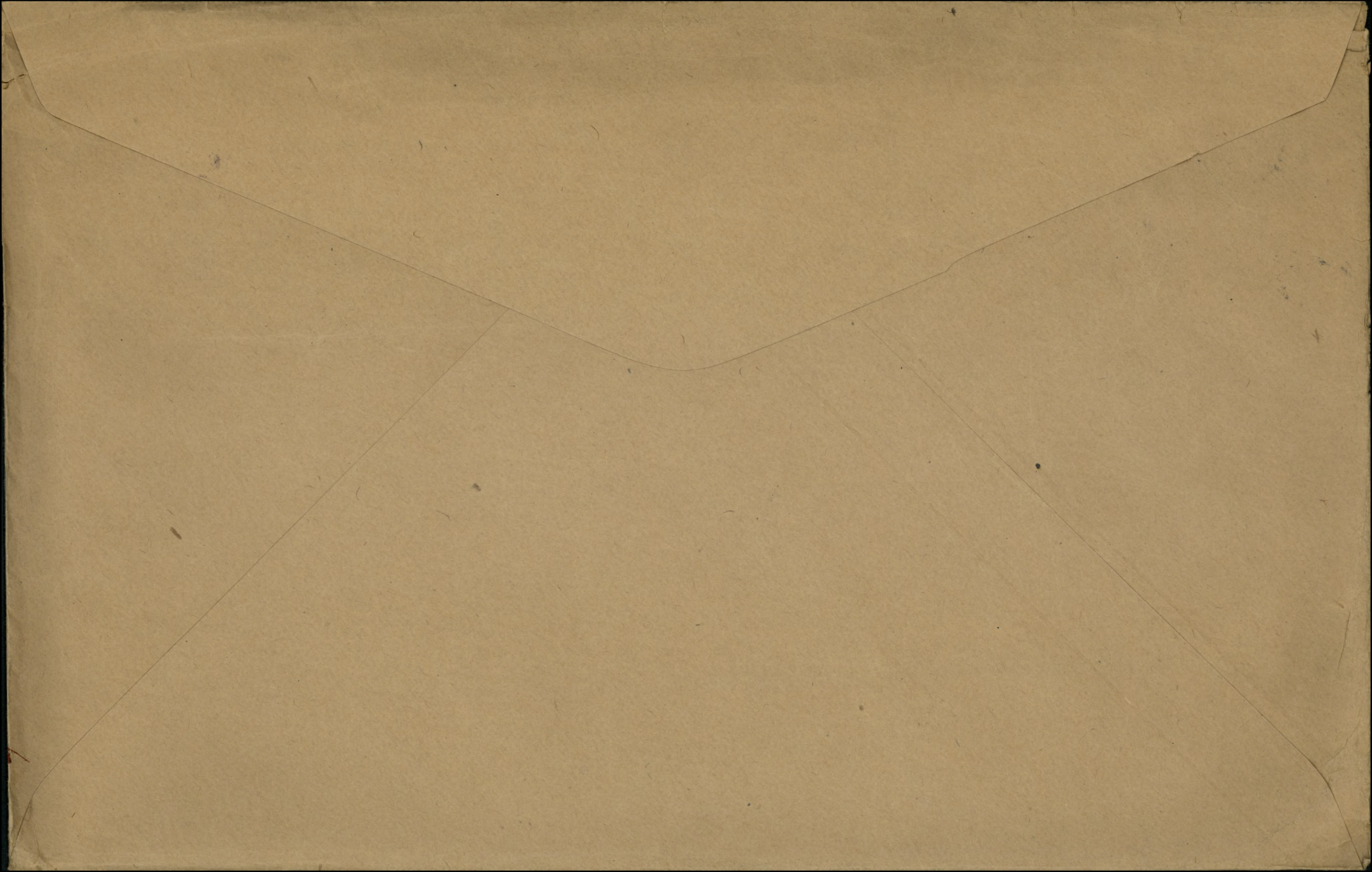


Gillespie Charles Dugald REGT. NO. *23 7952* UNIT _____

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)				12023	DEATH Category
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					
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)					DISCHARGE Category
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					
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)					DESERTION 11/15 23-16 <u>33-18</u> /
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)					
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>case card will misc</i>					

*M.H.
3-3-24
RR*



CARD NO. X

FOLL.

NAME.

Gillespie

CHRISTIAN NAMES

Charles Ungald

REGL. NO.

23795-20

RANK

Pte.

UNIT

Man. Regt. 1st Lps. Bn.

FORMER CORPS

Art.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Gillespie, Ungald Charles

RELATIONSHIP TO SOLDIER

Father

ADDRESS

Ungald. Man.

COUNTRY OF BIRTH

Canada Ungald. Man.

DATE

June 7th 1894

PLACE OF ATTESTATION

Winnipeg Man.

DATE

Jan. 9th 1918O/S 5-2-18 ¹⁰⁶⁷/₅.

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE

NAME Gillespie Charles Duggald REGT'L. No. 2379520
 RANK AND CORPS Pvt. 52nd Bn form Man FILE NO 649

FOLLOWS
 No. Regt. 1st
sps. Bn
 FOLLOWS

CABLE		NATURE OF CASUALTY
NO.	DATE	
	<u>not</u>	<u>Duggald Charles Gillespie (father)</u> <u>Duggald, Man</u>
<u>145-2</u> <u>291</u>	<u>5-9-18</u>	<u>D of W #1ld Amb. sps aug 28</u> <u>1918. Ysw chest pentg. frac leg.</u>

LIST NO.

HOSPITAL

DATE OF
ADMISSION

REMARKS

a 309

H Gen Fld Amb

28-8-18

D of was Sw Chest pen. Rheg Trac

Number

23795-20

Rank

Pt

Surname

GILLESPIE

Christian Name

Charles Dugald

Units

52nd Bu. Can. Theatre of War France

Date of Service

22-6-18

Remarks

Latest Address

(M) Mrs. Elizabeth Gillespie,
Dugald,

Roll No.

Man

200m.-2-21.M.

Page 15522

DESP

JUL 27 1922

REGN. NO.

68729044

649-G-14125 ^{52nd Bn (France)}

✓
✓
✓
✓
GILLESPIE, Pte. Charles D., #2379520, 1st Depot Bn.

M. & D. (Mother)

Mrs. Elizabeth Gillespie,
Dugald,
Man.

form - man Regt

P. & S. (Father)

Dugald Charles Gillespie, Esq.,
Same as above.

Serial No 793727

Mem. C. (Mother)

Mrs. Elizabeth Gillespie,
Same as above.

Not Eligible for 14-15 Star

E. W.M.

E. B.W.M.

MAR 22 1921 50461

JUL 15 1922

30545
B.
R.R.
42408

806

M

47637.

MAR 10 1921

SURNAME

CHRISTIAN NAME OR NAMES

REG. NO.

Gillespie,

C. D.

2379520

RANK

UNIT

Co.

TROOP

BATTY.

Pte
HOSPITAL

Man. 52

DATE OF ADMISSION

1.

A. C. F. Amb.

HOSP. *28-8-18*

2.

HOSP.

3.

HOSP.

4.

HOSP.

DIAGNOSIS

1.

S.W. Chest Pen. R. Leg. Frac.

2.

Died of wounds 28-8-18 R

3.

DISPOSITION

DATE

Ch. 3-9-18 @ 309

REMARKS

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

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 ^{2nd Bn} First Depot Battalion Manitoba Regiment

Regimental No. 2379520 Rank Pte Name Gillespie Charles Dugaid

C. E. F.

Enlisted (a) 9/1/18 Terms of Service (a) C.E.F. Dgw. Service reckons from (a) 9/1/18

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) CIVIL General Merchant
MILITARY

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
DISEMBARKED

*Halifax
Canada*

3/2/18

FEB 16 1918

CERTIFIED CORRECT,
 2 JUL 1918
 CAN. RECORDS, LONDON.

22/18 18th Res Bn. Taken on strength on arrival from CANADA.

Digby. 17/2/18. Part 2 D.O. 53.

Obtained from So. S. drafted from 652nd Battalion

Scapra 21.6.18

Part 2 D.O. 172.

*E. J. Thomas Capt.
Adjutant, 18th Res. Bn.*

O. C. C. B. D. Landed in France. Taken on strength 52nd Cdn. Bn. 22.6.18 Nom. Roll d/22.6.18

— do. — Left for *Unit* 24.7.18 Pt II D.O. 55 d/27.6.18

O.C. 52nd Bn. Arrived Unit for duty 10.8.18 Nom. Roll d/24.7.18

24.7.18 *Joined* B. 213 d/17.8.18

6.8.18 *to Unit* *Yes.* 24.7.18 *uk*

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

2379520 Pte. Gillespie C.D.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
28. 8. 18	H. C. S. A.	Died of wounds received in Action (see chest & log trac pens)	H. C. S. A.	28. 8. 18	<p>H. C. S. A. 18/17540.</p> <p>9110 98/18</p> <p><u>ReWriter</u></p> <p>Lt for Lt. Col. <u>Pal</u> Cdn Sect. 3 Cech. <u>Y. H. S.</u></p>

Disc. 17/5/18. Pte. D. G. S.

Disc. 17/5/18. Pte. D. G. S.

FORM OF WILL.

I, Charles Dougald Gillespie (Name in full)
 Regimental Number 2379520 serving in C COMPY 1ST DEPOT BATT'N MAN. REG'T.
 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

Elizabeth Gillespie
Dougald
Men. Canada

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 26 day of January A. D. 1918

Charles Dougald Gillespie 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.

Signature of First Witness Mr De Vreeze

Address of Witness Abinto St Barracks Winnipeg

Occupation of Witness Soldier

Signature of Second Witness J. M. Winn

Address of Witness 236 Spring Bank Avee

Occupation of Witness Soldier

**THE TWO
 WITNESSES
 MUST
 SIGN HERE**

FORM OF WILL

I, _____ of the County of _____ and Province of _____ do hereby declare that I am of sound mind and memory and I hereby declare that I am not under any duress, coercion, or undue influence of any person, and that I am not of any age or condition which renders me incapable of making a will.

I hereby declare that I am not married, and I have no spouse, and I have no children, and I have no issue, and I have no other persons who are entitled to any part of my estate, and I hereby declare that I have no other persons who are entitled to any part of my estate.

I hereby declare that I have no other persons who are entitled to any part of my estate, and I hereby declare that I have no other persons who are entitled to any part of my estate, and I hereby declare that I have no other persons who are entitled to any part of my estate.

I hereby declare that I have no other persons who are entitled to any part of my estate, and I hereby declare that I have no other persons who are entitled to any part of my estate, and I hereby declare that I have no other persons who are entitled to any part of my estate.

I hereby declare that I have no other persons who are entitled to any part of my estate, and I hereby declare that I have no other persons who are entitled to any part of my estate, and I hereby declare that I have no other persons who are entitled to any part of my estate.

I hereby declare that I have no other persons who are entitled to any part of my estate, and I hereby declare that I have no other persons who are entitled to any part of my estate, and I hereby declare that I have no other persons who are entitled to any part of my estate.

I hereby declare that I have no other persons who are entitled to any part of my estate, and I hereby declare that I have no other persons who are entitled to any part of my estate, and I hereby declare that I have no other persons who are entitled to any part of my estate.

I hereby declare that I have no other persons who are entitled to any part of my estate, and I hereby declare that I have no other persons who are entitled to any part of my estate, and I hereby declare that I have no other persons who are entitled to any part of my estate.

I hereby declare that I have no other persons who are entitled to any part of my estate, and I hereby declare that I have no other persons who are entitled to any part of my estate, and I hereby declare that I have no other persons who are entitled to any part of my estate.

LTR

Rank

Name

GILLESPIE, Charles Dugald

Reg'l No.

2379520

Unit **2 Dft. 1st Batt Man Regt**

If in perm. Corps, }
What Unit? }

Married or Single

Single.

Place and Date of Enlistment

Winnipeg 9th Jan. 1918.

Place of Birth

Dugald Manitoba
Canada

Name and Address, Next-of-Kin

Dugald Charles Gillespie

Dugald Manitoba Canada

Relationship

Father.

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

N/E. R.B. N. 12101
File R.L. 25-C-3856
Category DW

M.A.
3-3-21
R.R.

Discharge, Date and Place

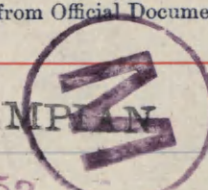
Reason

Character

H. W. & V., Ltd., -9546-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. Authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
		Arrived in England		16-2-18	S/S GRAMPIN
22, 2, 18.	18 Res Pn,	T, O, S FROM Canada		17.2, 18.	Pt, II D.O 53
27.6.18	52 nd B ⁿ	T.O.S on footing from 18 th Res	Pt. Seafood	22.6.18	--- 55 18 th Res Pt. 20172 21.6.18.
3.9.18	C.R. Man.	Wounded	Field	28.8.18.	C.L. No. A. 309.
3.9.18	52 nd B ⁿ	Died of Wounds	Pt. ---	28-8-18	Pt. I.O. 78.

FEB. 103 CHECKED
3/10/18



2379520.pte.Gillespie,C.D.

18th.Res.

WILL WITH
M.D.10.
WINNIPEG.

REC'D FROM COMM. P.M.S'CLIFFE. 23-3-18.

RECORDS REGISTRY O.M.F. COO.	
GREEN ARBOUR HOUSE, OLD BAIL Y LONDON, E.C.	
FILE NO.	PLA 2
22 OCT. 1918	
% 6	1/2
FILE CHARGE	SINCE
TO	
ACTED ON	

Note. Died of Wounds 28-8-18.
Transferred 7-10-18.
Private. C.D. Gillespie, No. 2379520, 52nd Battalion.

BM.

30285.

CANADIAN

16 OCT 1918

ORIGINAL.

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar.

1. Surname **GILLESPIE** Christian name **Charles Dugald**
 2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule **512620 JC**
 3. Consecutive number on schedule of men reporting for service (if he appears on it) _____
 4. Address (including street and number, if any) **Dugald, Manitoba, Canada.**

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the **15th** day of **November** 1917, by the undersigned medical board sitting at **Fort Street, Winnipeg, Canada.**

5. Age as stated **23** Years **6** Months. 6. Apparent age _____ Years _____ Months
 7. Height **5** Feet **10** Inches. 8. Weight **151** Pounds.

9. Chest measurement { Minimum **35 1/2** Ins. 10. Complexion **Ruddy** { Eyes **Hazel grey**
 { Maximum **38** Ins. { Hair **D. Brown**

11. Physical development. { Good
 { Fair
 { Poor 12. Smallpox marks _____

13. Number of vaccination marks { Right arm _____
 { Left arm **1** 14. When vaccinated last **Childhood**

15. Distinctive marks and marks indicating congenital peculiarities or previous disease _____

16. Slight defects but not sufficient to cause rejection _____

The man denies having had { Rheumatism We find no evidence of past { Rheumatism
 { Tuberculosis { Syphilis { Tuberculosis
 (Strike out disease admitted or suspected.) { Syphilis

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category

A2 R.E. 20/20
 L.E. 20/20
 H.R. N.
 H.L. N.

C.W. Trick President.

W. J. Sharman Member. **W. G. Leggett** Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
12-1-18	acc	mep	12-1-18		
			19-1-18		
			23-1-18		

Joined **9th** day of **January** 191**8** at **Winnipeg, Canada**

1st. DEPOT BATTALION, MANITOBA REGIMENT.	REGIMENT NUMBER	HABITS	DATE
Joined on enlistment	2379520		JAN 9 1918
Transferred to.....			
18TH CAN RES BN		FEB 17 1918	

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT

N. B.—This sheet is 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.

Signature of Man
Charles Dugald Gillespie

ASSIGNED PAY: <input checked="" type="checkbox"/> ENGLAND <input checked="" type="checkbox"/> CANADA	SEPARATION ALLOWANCE: ENGLAND or CANADA	NAME: GILLESPIE Chas. Dugald
EFFECTIVE DATE: 1. 6. 18	EFFECTIVE DATE: -	NUMBER: 2379520
AMOUNT: 15 ⁰⁰	AMOUNT: -	PARTICULARS OF RANK OR APPOINTMENT

NAME, ADDRESS, RELATIONSHIP & AUTHORITY	AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
Mrs Eliz Gillespie A.M. 10/4 14 Dugald Man Mother	Lea LPL		Ple

UNIT AND TRANSFERS			
ORIGINAL UNIT: #20ft. 1st M.D. Bn			
DATE ACCOUNT FIRST OPENED: 1. 2. 18			
AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S P'D	UNIT TRANSFERRED TO
Lea LPL	1. 2. 18		18th Res Bn
P 806	1. 4. 18	22. 4. 18	52 Bn
CLD. 309	1. 9. 18		N.C.C.

DIED of WOUNDS. 28/12/18
CLD 309 3/9/18

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS							
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
31							

DAILY RATES OF PAY AND ALLOWANCES					
AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE	
Lea LPL	1 00	10			

PARTICULARS OF RENDERING NON-EFFECTIVE: D.O.W. 28.12.18 CLD 309 3.9.18

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
31.1.18	Balance from Lea								10 00		
31.3.18	Balance from Lea								40 84 30		
April	Pro Pay.	33		AR 58. 11 ¹⁴ / ₁₈ 18 th Res	9 43 1						
				Balance from Lea							
				AR 182 29/4/18 18 Res	14 60				44 44 45		
		33			24 33						
May	P.P.	34 10		AR 255 13/5/18 18 Res	14 60						
				✓ H 50 24/5/18	4 30				61 71 60		
		34 10			21 90						
JUL	P.P.	33		B. A. P.				15			
				AR 625 11/6/18 18 Res	12 14						
		33		AR 1048 26/6/18 18 Res	4 46				63 08 60		
July		34 10		B.A.P.	16 63			15			
				AR 1299 29/7 30 WCCRC	3 57				78 61 60		
		34 10			3 57			15			
Aug		34 10		B.A.P.				15	97 71		
				719 18/7 9 Bde	4 46				93 25		
		34 10			4 46			15	93 25		
Oct	cash in Effects J 584		5 10								
	cash in Effects J 584		18						98 53		
1919			5 28								
Feb	Int on Def Pay	2 37							100 90		

NON EFFECTIVE ACT.

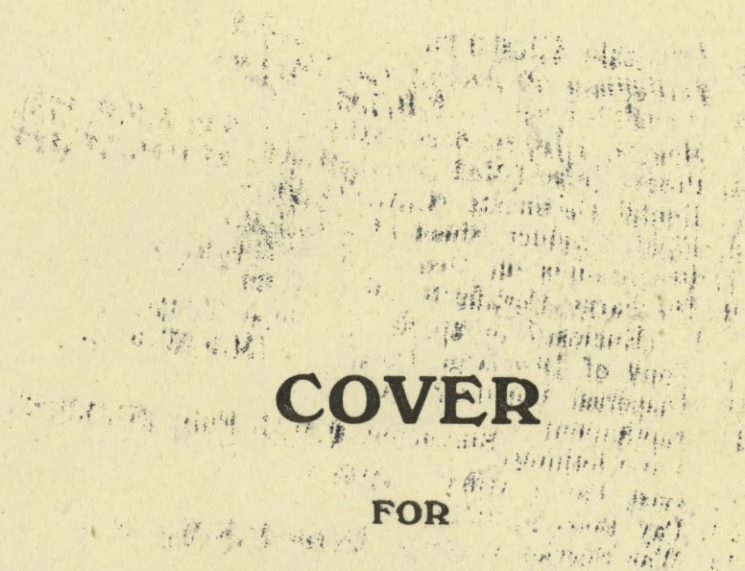
Statement Rendered 28.12.18
Credit Balance 100.90

Regtl. No..... Rank **2349520**.....

Name **Charles Hugh** **Gillespie**
(Christian Names in full) (Surname)

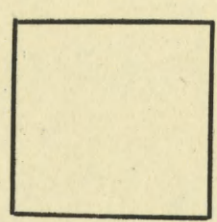
Unit..... Regt. or Corps.....

Date of { Discharge*
Disembodiment*
Transfer to the Reserve* }191.....
* Strike out whichever inapplicable.



COVER
FOR
DISCHARGE DOCUMENTS.

NOTE.—In every case where A.F Z.22 is included among the documents the letter Z is to be stamped in the space provided below.



Regt. No. _____ Rank _____

Name _____
(Print an Name in full)

Unit _____
 or _____
 Corps _____

Date of { Discharge*
 Disembodiment
 Transfer to the Reserve* } _____

191 _____

* Strike out whichever inapplicable.

COVER

FOR

DISCHARGE DOCUMENTS.

NOTE.—In every case where A. F. 2.22 is included among the documents the letter X is to be stamped in the space provided below.



War Service Badge
Class "A" No.

66

WAR SERVICE BADGE
CLASS "A" NO. 241240

D.A. O. Regina

REGTL. NO. 1009685 RANK Me.

NAME Edmondson (SURNAME) Allert Roy (CHRISTIAN NAME IN FULL)

REGT. OR CORPS CANADIAN

UNIT 5th C.F. Bn.

ORIGINAL UNIT 229th Bn.

CATEGORY A.

OCCUPATIONAL GROUP 3

NEXT OF KIN Mother

RELIGION C.E.

PLACE OF RESIDENCE 771 Coteau St. W. Moose Jaw Sask.

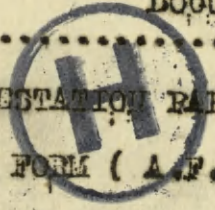
22 Chatham Ont.

CARMANA Sailing No. 45
Embarked 04 19
Disembarked 04 19
*10.9 Commanding Staff, W

DOCUMENTS

DATE

DOCUMENTS	DATE
TRIP ATTESTATION PAPER	1 18.3.19
CASUALTY FORM (A.F.B. 103)	2 18.3.19
MEDICAL HISTORY SHEET	2 18.3.19
MEDICAL CLASSIFICATION BOARD	1 18.3.19
DENTAL CERTIFICATE (C.A.D.C. 5009 A.)	1 19.3.19
FIELD CONDUCT SHEET (A.F.B. 122)	1 30.3.19
P RECORDINGS ON DISCHARGE (M.F.B. 218)	1 19.3.19
DISCHARGE CERTIFICATE (M.F.B. 39. 1.)	1 28.3.19
SPECIAL ENVELOPE (M. 260 1.)	1 28.3.19
COPY OF DISCHARGE CERTIFICATE (M.F.B. 39 A.)	1 28.3.19
C.M.G. FORM (D.O.S. 2.)	1 31.3.19
LAST PAY CERTIFICATE (P. 851)	2 31 MAR 1919
PAY BOOK (A.B. (M.)	1 31 MAR 1919
WAR SERVICE GRATUITY (P. 880.)	1 14
DISPENSAL CERTIFICATE (C.D. 3)	1 2.4.19



Date of Enlistment *9-Jan-18*

MILITIA AND DEFENCE

Date of Assignment ³

Separation and Assigned Pay Branch **G**

3123

1st June 18

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

<i>15</i>			
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PARTICULARS OF SEPARATION ALLOWANCE

No.				
Rank	Promoted	Reverted	Discharge	
Soldier's Name				
Battalion <i>1st Man Depot Bn</i>				
Beneficiary				
Relationship				
Address				

PARTICULARS OF ASSIGNMENT

Name			
Address			
	Change of Address		
1	MRS. ELIZABETH GILLESPIE, DUGALD,		
2	MAN.	15	15.00
3	% 2379520 PTE C.D. GELLESPIE FIFTEEN DOLLARS		
4			

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
					<i>File X 6922-C-7 NR 702</i>
<i>June</i>	<i>M 26151</i>		<i>15</i>	<i>15</i>	<i>M</i>
<i>2928 July</i>	<i>M 1278</i>		<i>15</i>	<i>15</i>	<i>M DA</i>
<i>Aug</i>	<i>O 34325</i>		<i>15</i>	<i>15</i>	<i>M</i>
<i>Sept</i>	<i>J 44549</i>		<i>15</i>	<i>15</i>	<i>M</i>
<i>Oct</i>			<i>15</i>	<i>15</i>	<i>M</i>

*Diid of Wounds Aug 28 1918
per Chas list Sept 6 1918
M R O Quentry Sep. 1-10-18
15 a.p. for Sept. 1918 Recovered by Military Estates 2919
letter on file. a.g.B.5919*

M. F. W. 128
400M-6-17-1772-39-1141
L. L. 23320-M. & D. 1933.

AUTHORITY FOR NEW ACCT. } *29/10-4-18*
Dr Brown 23/5/18

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

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
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M. F. W. 128
400M. 6.17-1772.39-1441
L. L. 22320-M. & D. 1988.