

ATTESTATION PAPER.

No. 26265.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... Anthony Gindley
2. In what Town, Township or Parish, and in what Country were you born?..... Liverpool England
3. What is the name of your next-of-kin?..... Alder Bliss (guardian)
4. What is the address of your next-of-kin?..... Ottawa Ont
5. What is the date of your birth?..... 6 March 1900
6. What is your Trade or Calling?..... Book Binding
7. Are you married?..... No
8. Are you willing to be vaccinated or re-vaccinated?..... Yes
9. Do you now belong to the Active Militia?..... Yes
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



A. Gindley.....(Signature of Man).
H. Woodside.....(Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Anthony Gindley, 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 22 Sept 1914. A. Gindley.....(Signature of Recruit)
H. Woodside.....(Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Anthony Gindley, 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 22 Sept 1914. A. Gindley.....(Signature of Recruit)
H. Woodside.....(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 Valcartier this 24 day of Sept 1914.

[Signature].....(Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

[Signature].....(Approving Officer)

9-14
B

Description of Anthony Gmley on Enlistment

Apparent Age 14 years 6 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 4 ft. 10 ins.

Chest measurement { Girth when fully expanded 30 ins.
Range of expansion 3 ins.

Complexion Fair

Eyes Blue

Hair Fair

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

4 Voc Mark on left Arm.

Bugler



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 Sept 5 1914.

Place Valcartier Camp

Capl Amc
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.

Anthony Gmley 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.

W. A. Camp (Signature of Officer)

Date Sept 24 1914.

ATTESTATION PAPER.

Original
No. 246.456

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? Ginley
- 1a. What are your Christian names? Anthony
- 1b. What is your present address? 267 Booth St. Ottawa, Ont.
2. In what Town, Township or Parish, and in what Country were you born? Donegal, Ireland
3. What is the name of your next-of-kin? Mrs. A. Richardson
4. What is the address of your next-of-kin? 267 Booth St. Ottawa Ont.
- 4a. What is the relationship of your next-of-kin? Guardian
5. What is the date of your birth? March 6th, 1900
6. What is your Trade or Calling? Student
7. Are you married? No
8. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes *AP*
9. Do you now belong to the Active Militia? No
10. Have you ever served in any Military Force?
If so, state particulars of former Service. 22 months 14th Batt. C.E.F.
11. Do you understand the nature and terms of your engagement? Yes
12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Anthony Ginley, 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 June 1st. 1916. A. Ginley (Signature of Recruit)
J. Edwards-Lewis (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Anthony Ginley, 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 June 1st. 1916. A. Ginley (Signature of Recruit)
J. Edwards-Lewis (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 Ottawa, Ont. this 1st. day of June 191 6

Swenson (Signature of Justice)

Description of Anthony Ginley on EnlistmentApparent Age 16 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. 2 ins.

NIL

Chest measurement { Girth when fully expanded 33 ins.
Range of expansion 3 ins.Complexion Med.Eyes Blue
Brown

Hair

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

CERTIFICATE OF MEDICAL EXAMINATION.

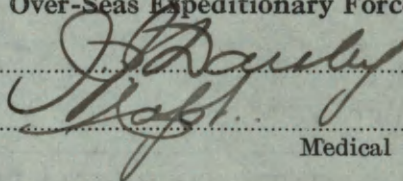
I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

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 June 1st. 191 6Place Ottawa, Ont.

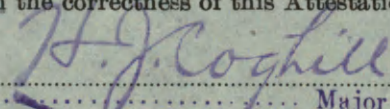
*Insert here "fit" or "unfit."

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:—



Medical Officer.

CERTIFICATE OF OFFICER COMMANDING UNIT.

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

(Signature of Officer)

Major and Adj.

207th. Ottawa Carleton Battalion

Date June 1st. 191 6

GINLEY

ANTHONEY

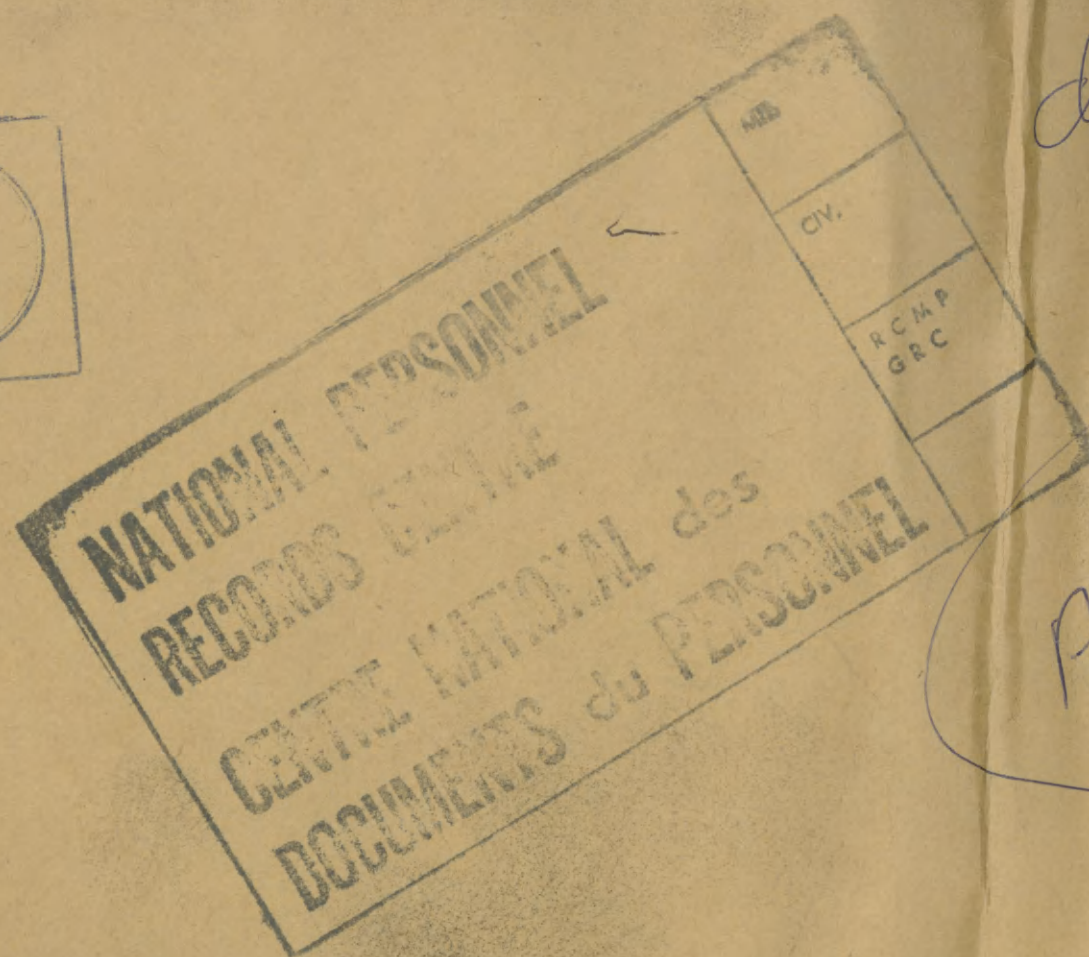
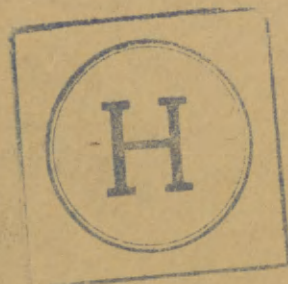
1ST ENLIST 26265

2ND ENLIST 246456

10365

1ST ENLIST PERM. UNF IT

2ND GEN. DEMOB



date of death - 2 Nov 1945
(from death certificate NARC)

AO-140-3562

Box H
3562



Casualty Form—Active Service.

Regiment or Corps

14 Canadian Bn. R.M.C.

Regimental No.

26265

Rank

Private

Name

Ginley, Anthony

Enlisted (a)

Sept 22/14

Terms of Service (a)

Period of war

Service reckons from (a)

Sept 22/14

Date of promotion to }
present rank }Date of appointment }
to lance rank }Numerical position on }
roll of N.C.Os. }

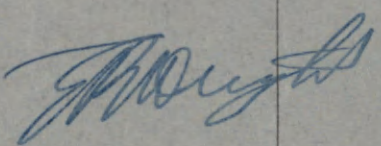
Extended

Re-engaged

Qualification (b)

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B, 213, Army Form A, 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B, 213, Army Form A, 36, or other official documents.
Date	From whom received				
16.7.15	etc.	Arrived with unit.	Managire	15.7.15	NR.
13/6/15	No 1 C.I.A.	Bayll. 4 Log	To C.I.A.	7/6/15	A36
		Permanence			
		5 days F.P. No 2 for Slavery			
12/6/15	C.I.A. Batt	Conduct out of Bounds	Field	8/8/15	B2069
4/9/15	C.I.A.	Sick	To 3 C.I.A.	1/9/15	B213
8/9/15	3 C.I.A.	Rever	To 2 C.I.A.	2/9/15	A36
5/9/15	2 C.I.A.	Influence	2 C.I.A.	3/9/15	A36
18/9/15	O.C. Unit	Rejoined Batt.	Field	14/9/15	B. 213
13.1.16	O.C. 26.7.1.	Sprained Rt. Ankle (leg) Adm.	No. 2 C.I.A.	10.2.16	A36
24.2.16	8 C.I.A.	Sprained Ankle.	Ad	18.2.16	A36
			1st	19.2.16	A36
19.2.16	18 General	A. F. B. 117 received. 1st	Field		
		Injury received whilst in the performance of duty.	1st		
4/3/16	10/8 Gen.	Spr. Ankle (Rt) (leg) Adm.	10/8 Gen. Depot.	4/3/16	File No 150/Inf/14/7. W. 3054 (11)

(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.

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. 4. 16	to D.D.	7 days leave to	with from	11. 4. 16	Dr 13. P4r. no 18. d/ 30. 4. 16.
30. 4. 16	OC. Reinfank Havre.	Spent Ankle Immature. Classified "P. B" and transferred to 23 rd Reserve Ln, West Sandring,	Chorncliffe	30. 4. 16	COPIED Archives COPIES nd. File 101/6.6. 3/6/157. 1. G.C. R.O. 208, d/ 25th 7/15. Part 11 Orders No 19, dated 7.5.16.
				Lieut. for Lt-Col. A.A.G. Canadian Section. G.H.Q. 3rd Echelon. B.E.F.	
					

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

AJS

This is to Certify that No. 23235 (Rank) Private
Name (in full) GIBLEY, Anthony. enlisted in
the 14th Infantry Battalion
CANADIAN EXPEDITIONARY FORCE at Valcartier, P. Q. on the 22nd
day of September 19 14
HE served in CANADA ENGLAND FRANCE & BELGIUM
and is now discharged from the service by reason of being "Under-age."



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

Age 16 Years
Height 5' 1"
Complexion Fresh
Eyes Blue
Hair Fair
Marks or Scars 4 Vaccination scars
Left Arm.



Signature of Soldier

Issuing Officer

Rank

Date of Discharge May 30th, 1916.

Asst. Director of Records.
Appointment

Signed at Ottawa, Ontario. this Tenth day of January 19 20
in Military District No. National Defence Bq.
File Reference No. 649-2-501

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

CANADIAN EXPEDITIONARY FORCE
Discharge Certificate

No. 26265 (Rank) Private Name GILLEY, Anthony.
Unit 14th Battalion, C.S.F.
Address on Discharge 267 Booth St, Ottawa, Ont.
Character and Conduct "GOOD"
Former Occupation Student
Special Qualifications of Value in Civil Life
Medals and Decorations 1914-15 Star, British War & Victory Medals
Remarks Subsequently served in CANADA & ENGLAND with 207th Inf. Bn.
from 1-6-16 to 10-1-19 S.O.S. "Demobilization."
Signed at Ottawa, Ontario. this Tenth day of January 1930

Name of Officer

Rank

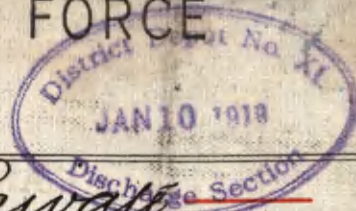
Major,

Appointment

Asst. Director of Records.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate



RECEIVED
4 NOV 10 1918
H.Q. CANADIAN EXPEDITIONARY FORCE
CANADA

This is to Certify that No. 246456 (Rank) Private

Name (in full) Anthony Linley enlisted in

the 204th Battalion

CANADIAN EXPEDITIONARY FORCE at Ottawa Ont on the 1st

day of June 1916

HE served in England

and is now discharged from the service by reason of on demobilization

under T.O 1420 of 12. 12. 18.

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

Age 18 Years

Height 5' 2"

Complexion Medium

Eyes Blue

Hair Brown

Marks or Scars scar 4 fingers
R hand

Alinley

Signature of Soldier

H. S. Andrews

Issuing Officer

Captain

Rank

Date of Discharge 10th January 1919 for Ab District Depot XI

Appointment

Signed at Victoria B.C. this 10th day of January 1919

in Military District No. XI

File Reference No. DDG 5992

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.

NOV 10 1915

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. _____ (Rank) _____ Name _____

Unit _____

Address on Discharge _____

Character and Conduct _____

Former Occupation _____

Special Qualifications of Value in Civil Life _____

Medals and Decorations _____

Remarks _____

Signed at _____ this _____ day of _____ 19 _____

Name of Officer

Rank

Appointment

To be made out in duplicate.

H.Q. 54-21-23-53

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.....
207th. OTTAWA, CARLETON BATTALION
- (2) Regimental Number..... 246456
- (3) Full Name of Soldier..... Anthony Linley
- (4) Place of Birth..... Donegal, Ireland
- (5) Are you married, or not?..... —
- (6) If married, state,
(a) Full name of your wife..... —
.....
(b) Present Postal Address..... —
.....
- (7) Are you a widower?..... No —
- (8) Have you any children?..... —
If so, give number of boys and girls.....
Also their names and ages.....
.....
.....
.....

(9) Is your Father alive?.....

No.

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

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

No.

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

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

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

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

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

~~Mrs Anthony Ginter~~
Mrs. A. Richardson (Guardian)
267 Booth Street
Ottawa, Ont.

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

(15) Are you insured?.....

No.

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

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

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

Date.....

January 24th 1917. 207th Battalion.

Officer Commanding.

Office of the A.D.M.S. Canadians,
Moore Barracks,
Shorncliffe.

May 6th. 1916.

From:-

The A.D.M.S., Canadians,
Shorncliffe.

To:-

Officer i/c Records,
London.



Name.....Ginley, A....(D.C.M).....
No.26265.....Rank.....Pte.....
Battalion..14th.--23rd. Res.....

The above noted appeared before a Medical
Board at Shorncliffe on.....May 6th.....1916,
and the following entry has been made on the
Medical History Sheet of this man:-

Board recommends: "Discharge."
(Signed) George T. McKeough, Mjr., President, S. M. B.

6th. May, 1916. Approved for Discharge.
(Signed) S. L. Walker, Capt., for A.D.M.S. Canadians.

Further entries are also contained on this
Medical History Sheet, which are herewith copied:-

I hereby certify that the entries as above
noted are true copies.

Captain, C.A.H.C.
for A.D.M.S., Canadians.

[Faint, mostly illegible text and markings, possibly bleed-through from the reverse side of the page.]



Documents with a.a.g.

HQ. 649-G-501

9-6-16

Returned

Declaration made by Soldier before Pensions and Claims Board, Canadian Expeditionary Force.

Name. **ANTHONY GINLAY**

Regimental No. **26265** Rank **Pte.** Unit **14th Bn. (23rd Res.)**

Date of Birth? **6. March 1900** Place of Birth? **Liverpool, Eng.**

Occupation or trade previous to enlistment? **Student**

Date of enlistment? **Aug. 24. 1914.**

Place of enlistment? **Ottawa**

Are you married or single? **Single**

If married how many children have you? (Boys) (Girls)

What are their ages?

Have you a widowed mother dependent on you solely for support? **No**

What was the condition of your health at the time of your enlistment? **Good**

Where and when did your disability originate? **Canada.**

Is your disability the result of wounds, injuries or illness contracted in action, in the presence of the enemy, or on active service during training or other duties? **Under age**

What is your present condition of health? **Good.**

What work, if any, are you fit for? **Any**

Have you any civil employment open to you at present? **No**

What is your present address? **C.C.A.C. Bath**

Where do you wish to take your discharge? **Canada.**



ED.

I, having been duly sworn, declare that I have read the answers given by me to the above questions which are true and correct, and I have signed—

Witnessed by

H. May Mear

A. Ginley

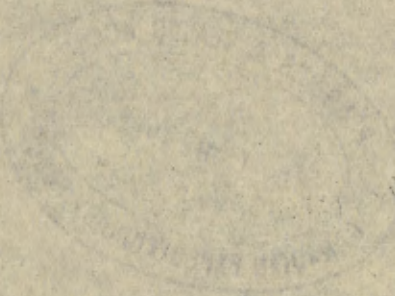
Declaration made by Soldier before Pensions and Claims Board Canadian Expeditionary Force.

Name _____
Residential No. _____
Place of Birth _____
Date of Birth _____
Occupation or trade previous to enlistment _____
Date of enlistment _____
Place of enlistment _____
Are you married or single? _____
If married how many children have you? _____
What are their ages? _____
Have you a widowed mother dependent on you wholly for support? _____
What was the condition of your health at the time of your enlistment? _____
Where and when did your disability originate? _____

Is your disability the result of wounds, injuries or illness contracted in action or the presence of the enemy, or on active service during training or other duties? _____

What is your present condition of health? _____
What work, if any, are you able to do? _____
Have you any other employment open to you? _____
What is your present address? _____
Where do you intend to take your discharge? _____

I declare that the above is true and correct, and I have signed the same in the presence of _____



C.A.D.C. 5009.

20M-19-2-18.

M-8. 31.

2464

DENTAL CERTIFICATE.

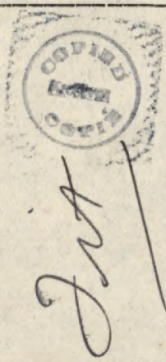
Stimley A.

The following Certificates will

be attached to the Medical History Sheets of all

Y. S. Br

Other Ranks being returned to Canada for disposal.

Date of Examination.	Present Dental Condition.	In case of loss or decay of teeth. Is the loss due to wounds, injury or disease directly attributed to Active Service?	Has he ever declined Dental Treatment.	Recommendation.
<i>19/11/18</i>				<i>W. R. Hurst</i> <i>Adj. S. G. D. C.</i>

DENTAL CERTIFICATE

The following Certificate will

be attached to the Medical History Sheet of a

Other Name being returned to Canada for dental

Name of Dentist	Date of Examination	Nature of Dental Condition	Cause of Dental Condition	Remarks
J. A. D. 6.3000	100-100-10	The following Certificate will be attached to the Medical History Sheet of a	Other Name being returned to Canada for dental	

By order of O.C.: O.S. M. O. XI

C. R. File

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

g. 727

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. 246546 Rank Pk Surname Guiley
(Given name in full)

Unit or Corps 207th Bn. C. E. P. Birthplace Dougal, Ireland.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 130 lbs. Height 5 ft. 4 1/2 in. Colour of Eyes Blue
Nutrition Good
Pulse 66
Condition of arteries Normal
Vision Rt. 10/10 Left 10/10
Hearing (conversational voice) Rt. 12 ft.
Left 15 ft.

Identification marks, scars, or deformities.
(Give cause and date of origin).
Scar palm surface R
4th finger and palm
contraction to 120
Before enlistment

Opinion as to general health and physical condition Both good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No") (Subjective evidence may be sufficient in certain cases.)

Nervous System No Genito Urinary System No Cardio-Vascular System No
Special Senses No Integumentary System No Respiratory System No
Disturbance of mentality No Muscular System No Digestive System No
Osseous and Joint System No Any other general condition No

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

RA.

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at (Overseas)

Date

Signed M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature

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

THIS SECTION FOR USE IN CANADA—

Examined at (Canada)

Date JAN 4th 1919

Signed Douglas Corsan Major 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 A. H. H. H.

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

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



Medical Examination upon leaving the Service **of an Officer fit for general service or a Soldier fit for duty.**

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank Pte Name Anthony Surname Quirley
 Unit or Corps Y S Batt (Colb) (If a soldier) Regtl. No. 246456
 Born at Donegal Ireland on, date 6th March 1900
 Signature (for identification) A Quirley

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

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe.

Weight 140 lbs.
 Height 5' 3 in.

no



2. NUTRITION AND DIATHESIS?

Good

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

3. NERVOUS SYSTEM?

normal

4. RESPIRATORY SYSTEM?

normal

5. HEART?

Abnormal Sounds? no

Abnormal Size? no

Pulse Rate? 72

Intermittence or irregularity? no

6. ARTERIES.—Any hardening?

no

7. DIGESTIVE SYSTEM?

Good

8. GENITO-URINARY SYSTEM?

normal

Urinalysis—S.G.? 1.020 Reaction? Acid Albumen? Nl. Sugar? Nl.

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

France 1916 discharged for running ears treated
Ottawa Canada for 3 mos. Re-enlisted 1917 Jan. no running
since and apparently no disability

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

no

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

Good

Examined at Kimmel Park Rygl Signed Charles L... M.O.
 Date 18/11/18 Signed Swetten Capt M.O.

If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.

1. NAME OF PATIENT	
2. AGE	
3. SEX	
4. RACE	
5. DATE OF EXAMINATION	
6. TIME OF EXAMINATION	
7. PLACE OF EXAMINATION	
8. NAME OF PHYSICIAN	
9. NAME OF NURSE	
10. NAME OF ASSISTANT	
11. NAME OF ATTENDING PHYSICIAN	
12. NAME OF SURGEON	
13. NAME OF ANESTHETIC	
14. NAME OF OPERATOR	
15. NAME OF OBSERVER	
16. NAME OF RECORDER	
17. NAME OF REPORTER	
18. NAME OF REVIEWER	
19. NAME OF APPROVER	
20. NAME OF SIGNER	
21. NAME OF WITNESS	
22. NAME OF JURY	
23. NAME OF COURT	
24. NAME OF JUDGE	
25. NAME OF CLERK	
26. NAME OF DEPUTY	
27. NAME OF SHERIFF	
28. NAME OF DEPUTY SHERIFF	
29. NAME OF CONSTABLE	
30. NAME OF DEPUTY CONSTABLE	
31. NAME OF JAILER	
32. NAME OF DEPUTY JAILER	
33. NAME OF WARDEN	
34. NAME OF DEPUTY WARDEN	
35. NAME OF CHIEF CLERK	
36. NAME OF DEPUTY CHIEF CLERK	
37. NAME OF CLERK	
38. NAME OF DEPUTY CLERK	
39. NAME OF RECEPTIONIST	
40. NAME OF DEPUTY RECEPTIONIST	
41. NAME OF ATTORNEY	
42. NAME OF DEPUTY ATTORNEY	
43. NAME OF COUNSELOR	
44. NAME OF DEPUTY COUNSELOR	
45. NAME OF SOCIAL WORKER	
46. NAME OF DEPUTY SOCIAL WORKER	
47. NAME OF CHAPLAIN	
48. NAME OF DEPUTY CHAPLAIN	
49. NAME OF MINISTER	
50. NAME OF DEPUTY MINISTER	
51. NAME OF PASTOR	
52. NAME OF DEPUTY PASTOR	
53. NAME OF RABBI	
54. NAME OF DEPUTY RABBI	
55. NAME OF PRIEST	
56. NAME OF DEPUTY PRIEST	
57. NAME OF MONK	
58. NAME OF DEPUTY MONK	
59. NAME OF NUN	
60. NAME OF DEPUTY NUN	
61. NAME OF BROTHER	
62. NAME OF DEPUTY BROTHER	
63. NAME OF SISTER	
64. NAME OF DEPUTY SISTER	
65. NAME OF PRIOR	
66. NAME OF DEPUTY PRIOR	
67. NAME OF ABBOT	
68. NAME OF DEPUTY ABBOT	
69. NAME OF SUPERIOR	
70. NAME OF DEPUTY SUPERIOR	
71. NAME OF VICAR	
72. NAME OF DEPUTY VICAR	
73. NAME OF CURATE	
74. NAME OF DEPUTY CURATE	
75. NAME OF CHURCHWARDEN	
76. NAME OF DEPUTY CHURCHWARDEN	
77. NAME OF PARSON	
78. NAME OF DEPUTY PARSON	
79. NAME OF RECTOR	
80. NAME OF DEPUTY RECTOR	
81. NAME OF VICAR GENERAL	
82. NAME OF DEPUTY VICAR GENERAL	
83. NAME OF ARCHDEACON	
84. NAME OF DEPUTY ARCHDEACON	
85. NAME OF DEAN	
86. NAME OF DEPUTY DEAN	
87. NAME OF BISHOP	
88. NAME OF DEPUTY BISHOP	
89. NAME OF PRIMATE	
90. NAME OF DEPUTY PRIMATE	
91. NAME OF CARDINAL	
92. NAME OF DEPUTY CARDINAL	
93. NAME OF PRINCE	
94. NAME OF DEPUTY PRINCE	
95. NAME OF DUCHESS	
96. NAME OF DEPUTY DUCHESS	
97. NAME OF MARQUESS	
98. NAME OF DEPUTY MARQUESS	
99. NAME OF EARL	
100. NAME OF DEPUTY EARL	
101. NAME OF VISCOUNT	
102. NAME OF DEPUTY VISCOUNT	
103. NAME OF BARON	
104. NAME OF DEPUTY BARON	
105. NAME OF LORD	
106. NAME OF DEPUTY LORD	
107. NAME OF KNIGHT	
108. NAME OF DEPUTY KNIGHT	
109. NAME OF SQUIRE	
110. NAME OF DEPUTY SQUIRE	
111. NAME OF ESQUIRE	
112. NAME OF DEPUTY ESQUIRE	
113. NAME OF GENTLEMAN	
114. NAME OF DEPUTY GENTLEMAN	
115. NAME OF LADY	
116. NAME OF DEPUTY LADY	
117. NAME OF MRS.	
118. NAME OF DEPUTY MRS.	
119. NAME OF MISS	
120. NAME OF DEPUTY MISS	
121. NAME OF MRS. JONES	
122. NAME OF DEPUTY MRS. JONES	
123. NAME OF MISS JONES	
124. NAME OF DEPUTY MISS JONES	
125. NAME OF MRS. SMITH	
126. NAME OF DEPUTY MRS. SMITH	
127. NAME OF MISS SMITH	
128. NAME OF DEPUTY MISS SMITH	
129. NAME OF MRS. BROWN	
130. NAME OF DEPUTY MRS. BROWN	
131. NAME OF MISS BROWN	
132. NAME OF DEPUTY MISS BROWN	
133. NAME OF MRS. WHITE	
134. NAME OF DEPUTY MRS. WHITE	
135. NAME OF MISS WHITE	
136. NAME OF DEPUTY MISS WHITE	
137. NAME OF MRS. BLACK	
138. NAME OF DEPUTY MRS. BLACK	
139. NAME OF MISS BLACK	
140. NAME OF DEPUTY MISS BLACK	
141. NAME OF MRS. GREEN	
142. NAME OF DEPUTY MRS. GREEN	
143. NAME OF MISS GREEN	
144. NAME OF DEPUTY MISS GREEN	
145. NAME OF MRS. GRAY	
146. NAME OF DEPUTY MRS. GRAY	
147. NAME OF MISS GRAY	
148. NAME OF DEPUTY MISS GRAY	
149. NAME OF MRS. HILL	
150. NAME OF DEPUTY MRS. HILL	
151. NAME OF MISS HILL	
152. NAME OF DEPUTY MISS HILL	
153. NAME OF MRS. WATSON	
154. NAME OF DEPUTY MRS. WATSON	
155. NAME OF MISS WATSON	
156. NAME OF DEPUTY MISS WATSON	
157. NAME OF MRS. ROY	
158. NAME OF DEPUTY MRS. ROY	
159. NAME OF MISS ROY	
160. NAME OF DEPUTY MISS ROY	
161. NAME OF MRS. COOK	
162. NAME OF DEPUTY MRS. COOK	
163. NAME OF MISS COOK	
164. NAME OF DEPUTY MISS COOK	
165. NAME OF MRS. BAKER	
166. NAME OF DEPUTY MRS. BAKER	
167. NAME OF MISS BAKER	
168. NAME OF DEPUTY MISS BAKER	
169. NAME OF MRS. NELSON	
170. NAME OF DEPUTY MRS. NELSON	
171. NAME OF MISS NELSON	
172. NAME OF DEPUTY MISS NELSON	
173. NAME OF MRS. CARTER	
174. NAME OF DEPUTY MRS. CARTER	
175. NAME OF MISS CARTER	
176. NAME OF DEPUTY MISS CARTER	
177. NAME OF MRS. PERKINS	
178. NAME OF DEPUTY MRS. PERKINS	
179. NAME OF MISS PERKINS	
180. NAME OF DEPUTY MISS PERKINS	
181. NAME OF MRS. ROBERTS	
182. NAME OF DEPUTY MRS. ROBERTS	
183. NAME OF MISS ROBERTS	
184. NAME OF DEPUTY MISS ROBERTS	
185. NAME OF MRS. TAYLOR	
186. NAME OF DEPUTY MRS. TAYLOR	
187. NAME OF MISS TAYLOR	
188. NAME OF DEPUTY MISS TAYLOR	
189. NAME OF MRS. HARRIS	
190. NAME OF DEPUTY MRS. HARRIS	
191. NAME OF MISS HARRIS	
192. NAME OF DEPUTY MISS HARRIS	
193. NAME OF MRS. FOSTER	
194. NAME OF DEPUTY MRS. FOSTER	
195. NAME OF MISS FOSTER	
196. NAME OF DEPUTY MISS FOSTER	
197. NAME OF MRS. BENTLEY	
198. NAME OF DEPUTY MRS. BENTLEY	
199. NAME OF MISS BENTLEY	
200. NAME OF DEPUTY MISS BENTLEY	



Medical Examination upon leaving the Service
 of an Officer in for General Service or a Soldier in for duty.

EXAMINATION

BY

STANDING MEDICAL BOARD, SHORNCLIFFE.

May 2

1916

No. *26265* Unit *14th Bn* Rank *Pte*

Name *Ginley A.* Age *16*

SHORNCLIFFE—C.O.A.O.

Examination held at *(19, Westbourne Gardens, Folkestone.)*

DISABILITY.

Overseas—Local.
(scratch one out)

Under Age

Present Condition.



*Discharge papers
get his story A/U.C.M.*

Board recommends:—

1. Fit for duty.
2. Fit for duty after.....weeks physical training.
3. Fit for light duty.....weeks.
4. Fit for permanent base duty.
5. Discharge.

Signatures:—

Members

.....President.
W. T. Lusk
R. W. Forgeson Capt

APPROVED

Shorncliffe.....1916.Captain.

A/D. A.D.M.S.,
Canadian Training Division.

EXAMINATION

STANDING MEDICAL BOARD, SHORNCIFFE

1816

WAVE

WAVE

WAVE

STANDING MEDICAL BOARD

STANDING MEDICAL BOARD

STANDING MEDICAL BOARD

STANDING MEDICAL BOARD

STANDING MEDICAL BOARD

STANDING MEDICAL BOARD

STANDING MEDICAL BOARD

STANDING MEDICAL BOARD

STANDING MEDICAL BOARD

STANDING MEDICAL BOARD

STANDING MEDICAL BOARD

STANDING MEDICAL BOARD

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as it is essential that the Members of the Pensions and Claims Board should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Article 591 to 598 of the Canadian Pay and Allowance Regulations as amended G.O., 57, May 1st, 1915).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

20. (a) State whether the disability is the result of injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service.

(b) If due to one of these causes, to what specific condition do the Board attribute it?

1. Yes 2. Yes

General Service Conditions

21. Has the disability been aggravated by

(a) Intemperance?

(b) Misconduct?

No
No

22. Is the disability permanent?

No disability except age

23. If not permanent, what is its probable minimum duration?

Not applicable

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

Less than 1/4 No time and
yes in France

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{4}$, $\frac{1}{2}$, $\frac{3}{4}$, or total incapacity.

25. If an operation was advised and declined, was the refusal unreasonable?

Not applicable

26. Do the Board recommend

(a) Fit for duty?

(b) Fit for light duty?

(c) Invalided to Canada?

(d) Discharge as permanently unfit?

Yes
Yes
Yes
Yes



Signatures:—

SHORNCLIFFE—C.O.A.O.
(19, Westbourne Gardens, Folkestone.)

Station

Date

6 - MAY 1916

J. T. Walker President.

B. W. M. M. C. E. Members.
E. L. Pope Capt.

Approved.

Station

Date

6 - MAY 1916

Administrative Medical Officer.

Capt. for A.D.M.S.
Canadian Training Division, Shorncliffe.

PENSIONS AND CLAIMS BOARD, Canadian Expeditionary Force, assembled at
 Folkestone, Kent, England, on the 9th day of May 1916
 Prior Park, Bath

Members of Board.

LIEUT.-COL. SIR H. MONTAGU ALLAN, C.V.O., *President*. MAJOR JOHN L. TODD, C.A.M.C.
LIEUT.-COL. W. GRANT MORDEN. ~~MAJOR MAURICE ALEXANDER~~

Legal Adviser.

Proceedings. Major R. Raikes. C.A.M.C. Major Hume Blake.

The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked

NO. 26265.
Pte. A. Ginley.
14th. Batt.

Recommends :-

When this man is discharged, he be granted a gratuity of Fifty Dollars on the authority of order in council NO. 3021 dated December 25th. 1915.

1000

Signed at Prior Park, Bath, this 9th. day of
May 1916.

H. Montagu Allen President.
Lt.-Col.

Lt.-Col.

R Barker Major.
Ernie Black C. A. M. C.
Major.

Form to be used instead of blank space on Army Form 179.

Proceedings of Medical Board at Discharge Depot.

Number, Rank, Name and Corps of disabled soldier:-

26265 Pte Givley, Anthony 14th Bn.
D. & M.

Previous civilian occupation:- Student

Cause of Disability

None -

Condition: in detail, which prevent the soldier earning a full livelihood.

None - is under age 16.

Heart & lungs normal.

Opinion of the Board.

Degree of Incapacity, (Please state in fractions).

none

Probable duration of incapacity:-

not applicable.

Does it render him permanently unfit for Military Service?

Yes for 2 years.

Would operation, special treatment, or the use of appliances, etc., lessen incapacity?

no

Signature:-

W. W. Carmichael Capt President

Station Quebec.

Conrad G. Giggie Capt R.M.C.

} Members

Date 27th May 1916.

Arthur MacLennan Capt
C.M.C.

Approved.

Date

May 27/16

W. W. Carmichael Capt.
Asst. Director Medical Services.

Date

Director General Medical Services.

1940

DEED

WOLLORET

MEDICAL HISTORY SHEET.

Surname Ginley Christian Name Anthony

Examined { on 2nd day of October 1914
at S. S. Andania

Birthplace { City or Town Liverpool
County England

Apparent age 14 years 6 months

Trade or occupation Office Boy

Height 5 Feet 0 Inches.

Weight 100 Lbs.

Chest measurement { Minimum 30 inches.
Maximum expansion 33 inches.

Physical development good.

Small-Pox Marks None

Vaccination Marks { Arm Right Left 4
Number four

When Vaccinated last 1910

(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection

Approved by H. C. Seringer

Rank Regt. Quar. M.O.

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	VACCINATIONS.
		M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>Sep. 1914</u>	<u>2</u>	<u>H. C. Seringer</u> M.O.
		M.O.
		M.O.

Enlisted on 24th day of Sept 1914 at WALCARTIER

	CORPS.	REG'T L. NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>Independent Reg.</u>	<u>26265</u>		
Transferred to..	<u>3rd D. R. C.</u> <u>14th Batt.</u> <u>3rd Brigade</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.

Christian Name.

[illegible]

P. 697-35M.

5926-10-1-17.

26265 Pte Givley A

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS.

Date of Payment.	No. of Acq. Roll	A M O U N T					Place of Payment.	Name of Paymaster.	Remarks.
		Francs	£	S.	\$	¢			
March 9/16	2423	25			4	26	Field		? amount one not changed
March 20/16	nil								
March 15/16	2423	25			4	26	"		Pay Book Shows three payments in March 1916 Only one payment Charged onto Ledger Sheet

1.007-354
5026-10-1

EXTRACTS FROM ACTIVE SERVICE PAY BOOKS.

Date of Payment	No. of Pay Roll	No. of Pay Roll	No. of Pay Roll	No. of Pay Roll	Place of Service	Name of Payee	Remarks
Jan 1 1915	1000	1000	1000	1000	1000	1000	1000
Jan 1 1915	1000	1000	1000	1000	1000	1000	1000
Jan 1 1915	1000	1000	1000	1000	1000	1000	1000
Jan 1 1915	1000	1000	1000	1000	1000	1000	1000
Jan 1 1915	1000	1000	1000	1000	1000	1000	1000
Jan 1 1915	1000	1000	1000	1000	1000	1000	1000

241

Hacue
Name and address of next-of-kin *267. Booth St.
Ottawa.*

Reason for discharge *Under age.*

Olympic. 25/5/16. Class I. H.R. 649-G-501.

[illegible]

Name.

Name and address of next-of-kin

Character on discharge

[illegible]

NAME GINLEY, Anthony

Pte.

Regimental No.

26265

Name and address of next-of-kin

(no kin)

Unit

~~14th Battalion~~

b.b.d.b.

Alder Bliss, (guardian)

Date of enlistment

Sept. 22nd, 1914.

Ottawa, Ontario.

Place of birth

England

Married (yes or no)

No

Date and place discharged

Amount of pay assigned monthly \$

Reason for discharge

To whom payable

Character on discharge



Date		PAY		Field Allowance				Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					
Sept 22	Oct 31	40	1.00	40	40	1.00	40		44			25			25	
Nov 1	Nov 30	30	1.00	30	30	1.00	30	9	42			35			35	
1/12/14	31/12/14	31	-	31	31	-	31	10	41	10		35			35	
1/1/15	31/1/15	31	-	31	-	-	31	10	40	20						
1/2/15	18/2/15	28	-	28	28	-	28	10	40	20		15			15	
Mar 1	31/3/15	31	-	31	31	-	31	10	56	90	10	12			12	
Apr 1	30/4/15	30	-	30	30	-	30	10	78	10	11	6			6	
May 1	31/5/15	31	-	31	31	-	31	10	105	10	13	3			3	
1/6/15	30/6/15	30	-	30	30	-	30	10	136	20	16	3			6	
1/7/15	31/7/15	31	-	31	31	-	31	10	163	20	19	50			50	
Adjustment of Exchange										147	30	107				
Aug 1	31/8/15	31	1.00	31	31	1.00	31	10	152	55	186	65			8	76
Sept 1	30/9/15	30	-	30	30	-	30	10	177	89	210	89		5	13	71
Oct 1	31/10/15	31	1.00	31	31	1.00	31	10	197	18	231	28			40	80
Nov 1	30/11/15	30	-	30	30	-	30	10	190	48	223	48			5	30
Dec 1	31/12/15	31	-	31	31	-	31	10	218	18	252	28			2	68
Jan 1	31/1/16	31	-	31	31	-	31	10	249	60	283	70			16	57
Feb 1	29/2/16	29	-	29	29	-	29	10	267	13	299	03			2	62
										260		281	94		550	287
										260		525	583		95	



Date		PAY		Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From		No. of Days	Rate	Amount	No. of Days	Rate			No.	Date					
				226.00			52.60	52.5			281.94		2.50	287.44	
1/2/16	31/2/16	31	100	31	31	10	310	296.41			4.36			4.36	Trans C-C & L mth. C-C I 9/1/16
							326.15								
				557.00			557.00	525.61			286.30		550	291.80	Carried forward to Large Ledger sheet
Police trans to New Ledger															



MILITIA AND DEFENCE ASSIGNED PAY.

To whom *Lyn A. Linley*
Address *21 Gerard St*
Liverpool

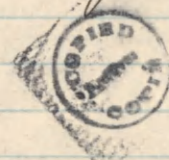
By whom assigned *Linley A.*
Regtl. No. *246456.*
Rank *Pte*
Corps, &c. *Lanc 207 Bw.*

Rate *15 00*
Date to commence *1-12-18.*

ASSIGNED SEPARATION
PAY ALLOWANCE

ASSIGNED PAY AND SEPARATION ALLOWANCE
BEING PAID IN ENGLAND UNTIL ADVISED
FROM OTTAWA OF DISCHARGE OF SOLDIER
NAMED HEREIN.

PAYMENTS.

Month.	Year.	Cheque No.	ASSIGNED PAY Amt.	Pay Sheet Deduction.	REMARKS.
Jan	1916				DISCHARGED TO CANADA. <i>30-11-18</i> <i>W. Bw.</i> <i>15/11</i> 
Feb.					
Mar.					
April					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.		<i>E48112</i>	<i>15 -</i>		
Jan.	1917	<i>E95451</i>	<i>15 -</i>		<i>Stop Dis 10/1/19</i> <i>Auth cable 4957 27/1/19</i>
Feb.					
Mar.					
April					
May					
June					
July					
Aug.					

ASSIGNED PAY.

By whom assigned

Regtl. No.

Month.	Year.	Cheque No.	Amount.		Pay Sheet.		REMARKS.	
Sept.	1917							
Oct.								
Nov.								
Dec.								
Jan.	1918							
Feb.								
Mar.								
April								
May								
June								
July								
Aug.								
Sept								
Oct.								
Nov.								
Dec.								
Jan.	1919							
Feb.								
Mar.								

C.R. Rank **207th. Bn. to** Name **GINLEY. Anthony.** Reg'l No. **246456.**
Unit **East. Ont. Regt.** If in perm. Corps }
What Unit? } Married or Single **Single.**
Place and Date of Enlistment **Ottawa. June 1st, 1916.** Place of Birth **Donegal, Ireland.**
Name and Address, Next-of-Kin **Mrs. A. Richardson.**
267 Booth St., Ottawa, Ont., Canada. Relationship **Guardian.**

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

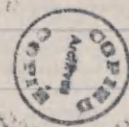
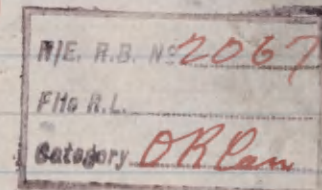
Discharge, Date and Place

Reason

Character

H. W. V., Ld.-9246-16.

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.				
⇒ARRIVED IN ENGLAND 9 6 17 S/S OLYMPIC.⇒					
14 ⁶ / ₁₇ .	7th Res. Bn.	Taken on Strength.	Seaford.	10 ⁶ / ₁₇	Pt. II D. 142.
12 ¹² / ₁₇ .	-	S.O.S. to C.A.M.C. Seiff.	"	12 ¹² / ₁₇ .	300. C.A.M.C. Depot. <i>See 347 d/13-12-17</i>
18-2-18	came S	appt'd A/Lt with pay	" Seiff.	1-1-18	77. <i>Cancelled by Pt II. 115 d/ 25-4-18.</i>
2-5-18	came S	appt'd A/Lt with pay	" Seiff.	1-1-18	- 122.
15-6-18	"	Reverted to perm grade of Private.	"	13-6-18	- 166.
21-6-18	"	S.O.S. to H.M.S. Araguaya	Pt	20-6-18	- 172. <i>H.M.S. Araguaya Pt II. 115 d/ 22-6-18.</i>
5-10-18	H.M.S. Araguaya	S.O.S. to C.A.M.C. Depot	Pt. Shorncliffe	5-10-18	Pt. II D. 122. <i>came S. Pt II. 286 d/1340-18.</i>
31-10-18	came S	S.O.S. to 3 Bn Rhyl, N. Wales.	Pt Seiff.	31-10-18	Pt. II. 304. <i>45 Bn 20 260 d/ 1. 11. 18</i>
25-11-18	G.S. Bn	S.O.S. to C.C. Canada.	Pt. Summer	23-11-18	190 / 281



Rtc

347 d/13-12-17
300. C.A.M.C. Depot.
Cancelled by
Pt II D. 115 d/25-4-18.

H.M.S. Araguaya
Pt II D. 115 d/22-6-18.
came S
Pt II D. 286 d/1340-18.
45 Bn 20 261 d/1. 11. 18

[illegible]

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate



This is to Certify that No. 246456 (Rank) Private

Name (in full) Anthony Girdley enlisted in

the 204th Battalion

CANADIAN EXPEDITIONARY FORCE at Ottawa Ont. on the 1st

day of June 1916

HE served in England

and is now discharged from the service by reason of on demobilization
under R.O. 1420 of 12. 12. 18.



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

Age 18 Years

Height 5' 2"

Complexion Medium

Eyes Blue

Hair Brown

Marks or Scars scar 4th finger
R. hand.

Almsley
Signature of Soldier

M. S. Andrews
Issuing Officer
Captain
Rank

Date of Discharge 10 January 1919 for Ob. District Depot XI
Appointment

Signed at Pictou N.S. this 10th day of January 1919

in Military District No. XI

File Reference No. DDG 5992

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. (Rank) Name

Unit

Address on Discharge

Character and Conduct

Former Occupation

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks

Signed at this day of 19

Name of Officer

Rank

Appointment

On demobilization the particulars called for on the back of this certificate will not be completed.

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

None
Alvin



List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	Attestation Paper,	Militia Form B. 235.
Squadron } Battery } Company }	Conduct Sheet, " B. 263a.	Proceedings on Discharge	" B. 218.
Copies of Convictions, by C. P.	in MS.	In the case of recruits who are rejected on final approval, the discharge documents will consist of (a) Proceedings on Discharge. (b) Attestation. (c) Medical History Sheet (in the event of such having been prepared.)	
Med. Hist. Sheet,	Militia Form B. 313		
Medical Report for Invalid*	" B. 227.		
Statement of Man's Account on Transfer and Last Pay Cer- tificate,	" D. 877.		
*Only if discharged "Medically unfit."			

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

File No. 6951-a-19**WAR SERVICE GRATUITY.**Register No. 9 1730Reg. No. 6265Name GuleyAddress Box 108,Amherst, N.S.

Pay Soldier \$

280.00

Clerk

Dependent Nil

Address

Pay Dependent \$

Days 122 Rate 70.00 Due 280.00

Less P.D.P. credited

Less further Dr. Bal.
or overpayment.Net 280.00Cheques issued in favor of Dept of S.C.R. Ottawa29-4-20Soldier paid by M.D. 11 420.00" " " Ottawa 280.00Total 700.00Amended award. Due 420.00St. Jacques Brothers paid 280.00Refund requested 10/2/21Classified file 6951-a-191-3-21 488 Ac.

Date	Ck. Order	Ck. No.	Amount	Remarks	Date	Ck. Order	Ck. No.	Amount
1 1/5/20	56661	1564768	280.00		1			
2					2			
3					3			
4					4			
5					5			
6			280.00		6			

GEN'L AUDITOR

Posting checked by

Date

P. Evans
13/4/20

Three months pay and allowances after discharge.

Name _____

Surname

Christian Name

Regimental Number

26265

Rank

Address (in full)

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Rates:—Regimental pay \$

per diem; Field Allowance \$

per diem. Separation Allowance \$

per month.

L.L. 53961—M. & D. 9721

[illegible]

Remarks:

No record of P.O.P.

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

No. 26265 RANK Pte

NAME Ginlay. A.

T. O. S.

UNIT

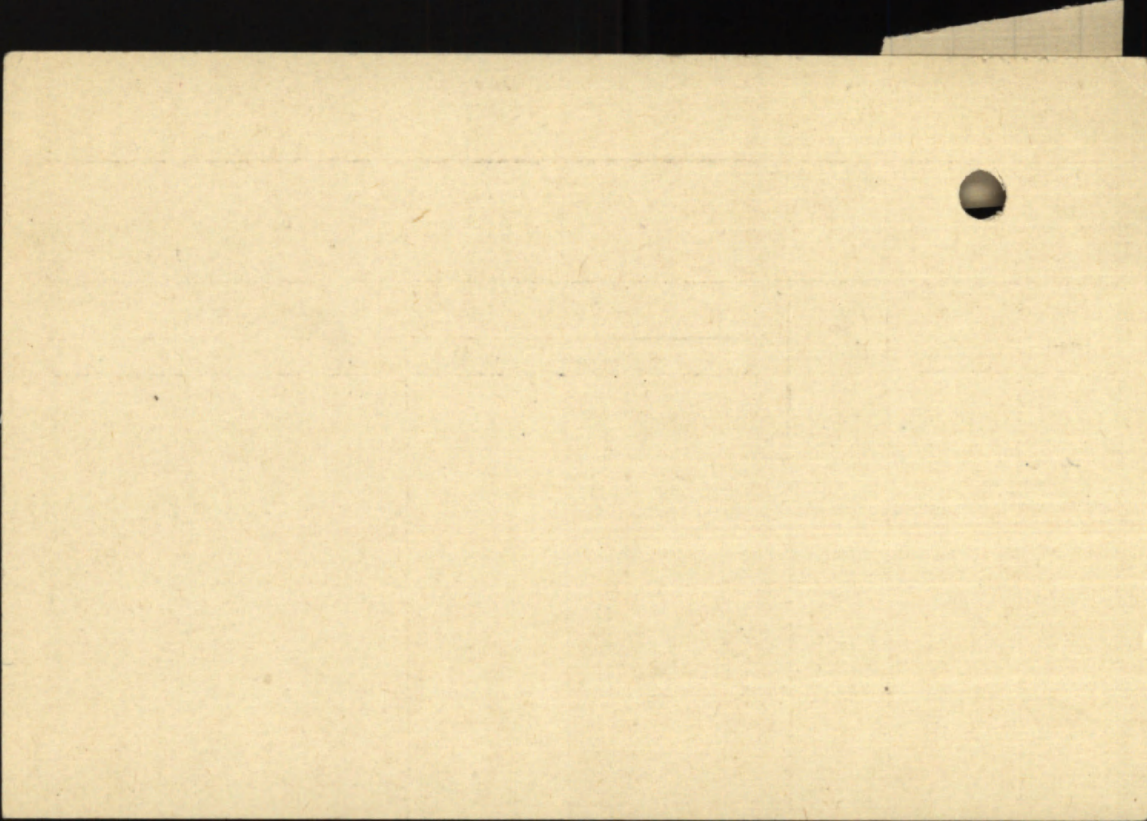
Discharge Depot Quebec.

M. D.

25

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 May 12.	1916 May 30	v	23rd Bn.	





com *P 15th 8* also: 246456 (2nd *entry*) 1914-15 Star
Number *26265* *Box 151*

Surname *GINLEY*

Christian Names *Anthony*

Unit *14th Bn Cany Theatre of War* *France*

15-2-15

Dates of Service

Remarks *Box 158*
Amherst

Latest Address *~~Box 158~~* *N.S.*

~~72 Elgin St. Ottawa~~

Roll No. *B.*
Page 115th

49 55 14 reg
8 25-84 7. 2cm

MAY 10 1921

JUL 10 1921

No 26265

RANK

Gte.

NAME

Ginley, Anthony

T. O. S.

UNIT 1st Vh Battalion. 3rd Battalion

M. D.

Val.

PAID
FROMPAID
TOSIG.
OR
REC'T

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS

AUTHORITY

1914

1914

Sept. 22

Oct 31

✓

UNIT SAILED
OCT 3 1914



Name **Ginley, A.**

Rank

PrivateReg. No. **26265**Unit **14th Battalion**Next of Kin **Canada.**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1915						
26. 6	No. 6 Can. Fld amb.			93.		
1. 9	Rept. to Base			157		
5. 9	Rejoined unit			159		
14. 9	No. 3 Can. Fld amb.	} fever		171		
1916	Transf. to No. 26. Fld amb.			296		
20. 2	Rept. to Base			306		
4. 3	Rejoined unit			359		
18. 3	No. 16. G. Dep.	Camiers	Sprankle R. accid.			
	Transf. to No. 6 howe's Dep. Etaples					
	Can. 26. Fld amb.					

726

Date

Movement

Place

Casualty

List
No.Notified
N/K O.

W.O. List

P.B. off str C B D Trans. to Fild. stone
1-5-16 . D.S. 266



Reg. No. 246 456 Name Givley Anthony
Rank OTC Corps 207 Bn Age 17 Service ✓
Ledger No. [redacted] Serial No.

HOSPITALS

DATE

DIAGNOSIS

M. F. W. 2553.

50M-6-19.

1772-39-1332.

Quene
Emm

Number 246456 Rank a/cpl.

Surname GINLEY

Christian Name Anthony

Units E.O.R Theatre of War England

Date of Service 9-6-17

Remarks

Latest Address Brown Jug Hotel

Victoria B.C.

Roll No. Page 3649.

200m.-2-21.M.



No. 24 6456 RANK

NAME

Girley, Anthony.
Girley

T. O. S. 1-6-16

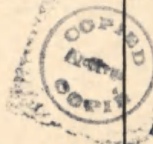
UNIT

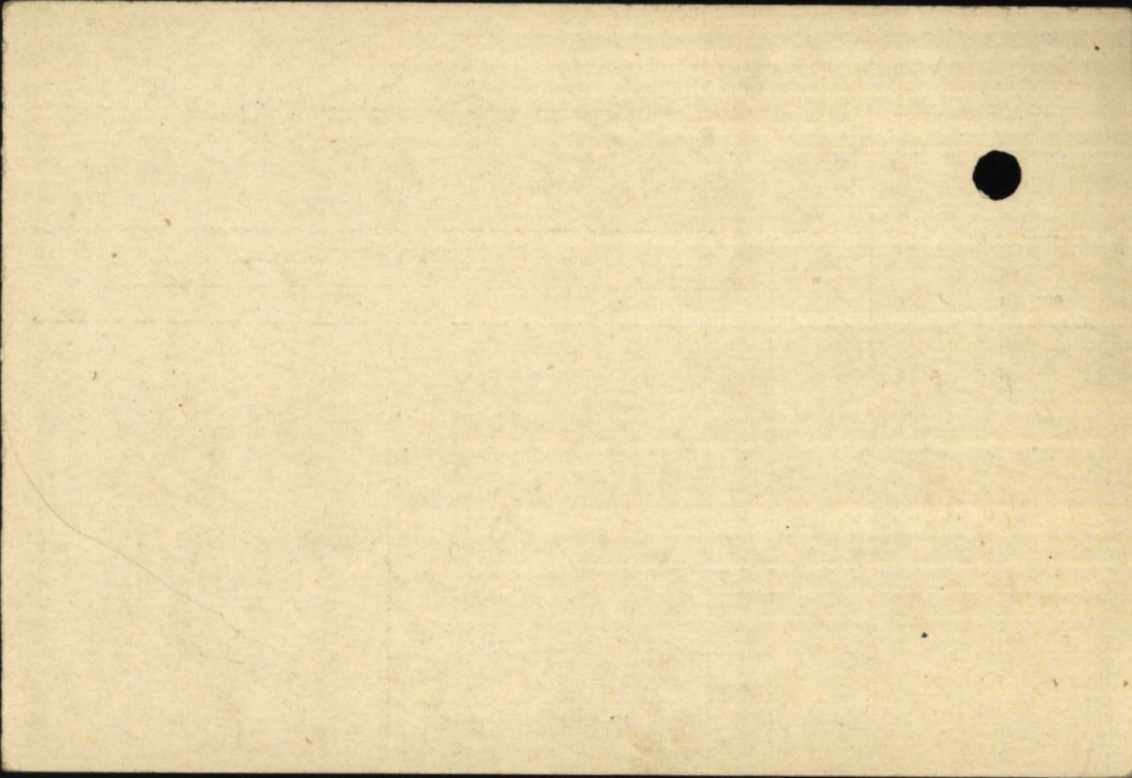
DO 5-8-6-16

207th Battalion

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
June	June 30	✓	For 5 days pay. aw L.	DO 95. June 1916.
July		✓		
Aug		✓	For 2 days pay.	DO 137. 4-8-16
Sept.		✓	For 2 days pay abs.	DO 166-8-9-16
Oct.		✓	For 1 day pay abs	DO 196. 12-16-16
Nov		✓	For 7 days pay abs	DO 221. 10-11-16
Dec		✓		
1917	1917			
Jan		✓		UNIT SAILED
Feb		✓		JUN 2 1917
Mar		✓		DO 96. 14-4-17
Apr		✓		DO 97. 23-4-17
May		✓		
June 1	June 10	✓	72 hrs det aw L. For 6 days	





NAME *Ginley Anthony*

H. Q. FILE NO. 649-

REG'T'L. NO. *26265* ✓

RANK AND COMP'S

Oto 1st (4th. Battalion) 13rd. Bn.

CASE

NO.

DATE

NATURE OF CASUALTY

<i>62601.</i>	<i>26/6/15</i>	<i>Pres. rep. missing not off. reported prisoner of war.</i> <i>bayonet wound leg. 7-6-15</i>
<i>0231</i>		<i>Return to Can add May 23rd</i> <i>1916 - Under age.</i>

NO. *708.*

FOLLX



LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
✓ 43.	No. 1. Can. Fld. Amb. To bas. bl. Str.	7-6-15	Bayonet w.d. l. leg.
✓ 154	Rep. from Base	1-9-15	Rejoined unit
✓ 159	No. 3. Can. Fld. Amb.	5-9-15	Fever. Discharged to No. 2. Can. Fld. Amb.
✓ 171	Reported from the Base	14-9-15	Rejoined unit
A 296.	No. 18 Gen. Carriers	20-2-16	Spr. Rt ankle. accid.
A 306	To No. 1. Can., Etaples	4-3-16	Spr. Ankle R. acc. sev.
A 359	Can. Base depot.	18-3-16	spr. ankle. Rt. accident.



*Name Ginley, Anthony Rank Pte Regtl. No. 246456
 Original unit 2 Present unit 1 M. or S. M Age 18 Religion b E Fyle Depot 5992
 Port, ship, and date of arrival " Aquitania " 22/11/18
 Next of kin Guardian Mr. A. Richardson, 267 Booth St. Ottawa Ont.
 Address on leave 19/11/18
 Address on discharge Crown Jug Hotel Victoria B.C.
 Transportation issued Yes 10/1/19 No 10/1/19 Date 10/1/19 Character on discharge Student
 Previous occupation Student Date and place of enlistment Ottawa, Ont. 1/6/16
 Diagnosis on demobilization Date of Medical Boards 9-1-19

Date.	Remarks	Pt. 2 Order No.
<u>JAN 9 1919</u>	<u>T.O.S. from O/seas 23/11/18 Posted to Cas. Coy. 18/12/18 Leave 8/1/19</u>	<u>9/43 B</u>
<u>10.1.19</u>	<u>Posted to Dis. Sec. from Cas. Coy. - DDSD. B(c) 11.1.19</u>	<u>13/13.1.19</u>

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

(over)

Date.

Remarks.

Pt. 2 Order No.

M.F.W. 192
150M-6-18.
1772-39-1243.

Surname

Christian Name or Names

Reg. No.

Ginley A.

26,265

Rank

Unit

Co.

Troop

Batty.

Pte 14 Battr

Hospital

no 1 Can Field Amb.

Date of Admission

Transferred

Ces. Clearing Det.

Hosp.

7-6-15

2 Can Field Amb

Hosp.

5-9-15

18 General Carriers

Hosp.

20.2.16

6 Convalescent Depot Etaples

Hosp.

4.3.16

Diagnosis

Bayonet w. l. leg.
Fract(1)
Later Diagnosis (if changed)

(2)

(3)

Sprained R. Ankle (acc)

Additional Diagnoses, if more than one state present

DISPOSITION



C. Base Depot 1F. 3. 16.

Date

C.L. 26. 6. 15.

REMARKS

93
 C.L. 13. 9. 15. 157 Rept. from Base Rejoined
 " 15-9-15 #159 Unit 1. 9. 15
 " 29-9-15 #171
 " 29.2.16 #2296 Reported from Base rejoined
 " 14.3.16 #2306 Unit 14-9-15
 " 19.5.16. #359(2)

A.M.D. A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

NAME: GINLEY Arthur

EFFECTIVE DATE:- 1/1/9

EFFECTIVE
DATE :-

NUMBER:- 246456.

AMOUNT:- 15

AMOUNT:—

PARTICULARS OF RANK OR APPOINTMENT

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.

M^{rs} Annie Givley 21 Gerard St. Liverpool
Mother

Stopped off 1/12/18 W

Box 77 18 3-18	1-1-18	dl
166. 15-6-18	13-6-18	He He

UNIT AND TRANSFERS

ORIGINAL UNIT:- 207. Bm

DATE ACCOUNT FIRST OPENED. - 11-6-17

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
347		1-1-18	C. a. Mc. 8

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
11/14/18	1881	SP Bn £1/10	730	30/11/18		Ledger balance	1000 30
15/11/18	213	Q4005 1/10	35				12 30
17/11/18	2028	SP Bn £1-0-0	487			Balance after LPT	1078
			1252				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBSCE ALL CE
	1	-	10	
	1	-	10	
	1	-	10	

PARTICULARS OF RENDERING NON-EFFECTIVE:-

Discharged to Canada eff/12/18. auth lps 136. 18/11/18

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
1918											
Mar. 31.	B.L. Ford.								116 97 57		
April.	Cpl. Pay	36		- A8985 £ 3-1-8			15		137 97 70		
				69 12.4.18. AR. Camm	6	9 73			128 24		
				X 9616. 25-12/18. Camm	11	1 35			126 89		
				242 26.4.18. AR. Camm	18	18			126 71		
				328		9 73			116 98		
May	Cpl. Pay	36		- A93795 £ 3-1-8		20 99		15	139 18 70		
		37 20		473 13.5.18	3	9 73			129 45		
				922 29.5.18	15	14			129 31		
				702 29.5.18	15	4 87			124 44		
June	Cpl. Pay	37 20		- B32710 £ 3-1-8	11	14 74		15	145 44 70		
		36		1141 14.6.18	3	5 01			140 43		
				H 96 23.6.18. 1... 5g. H	7	4 87			135 56		
				91320 20.6.18	8	5 78			129 78		
7-18	P.L. S.	26		B98909 £ 3-1-8		15 66		15	148 88 70		
		34 10		Diff. Cpl. S. 18-30/18 18 10			1 80		147 08		
8-18		34 10		C44510 £ 3-1-8			1 80	15	166 18 70		
		34 10		A.W.L. M.N. 24/8/18-9pm. 26/8/18. Fined 2 days pay + forfeited 2 day pay. D.O. 119-31/8/18			4 40		161 78		
		34 10					4 40	15			
Sept		33		D18860 £ 3-1-8				15	179 78		
				at 176. Helipad Uruguay 25/8/18 (4)	25				154 78		
				184 " 31/7/18	6	10			144 78		
		33		1903. 18/9/18 Camm D	3	24 33		15	120 45		
Oct		34 10		D71858 £ 3-1-8		57 33		15	139 15		
				2 days pay 19/18. 28/9/18. A.W.L. 2pm to 7pm 29/9/18							
				D.O. 22. 3/10/18 M.N. Hel. Uruguay			2 20		137 35		
				CP2206. 14/10/18 Camm D	12	24 45			102 90		
				Q4005. 27.2 14/10/18	23	9 97			102 93		
				CP2384 29/10/18	38	4 87			98 06 70		
	Forward	34 10			39 29	2 20	15				

15 NUMBER 246456 RANK *lpl* NAME GINLEY A

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Dec	<i>forward</i>	<i>3410</i>			<i>3929</i>	<i>220</i>	<i>15-</i>		<i>9806</i>		
	<i>Interest on deferred pay</i>	<i>435</i>							<i>10239</i>		
Nov	<i>P pay</i>	<i>32</i>		<i>Sub A 76.676 3-1-8</i>	<i>3929</i>	<i>220</i>	<i>15</i>		<i>12039</i>		
		<i>7145</i>					<i>30</i>				
				<i>Q4005 213 Yelbw 15/11 81</i>	<i>36</i>				<i>12003</i>		
				<i>AR 88, Yelbw 11/11 81</i>	<i>730</i>				<i>11273</i>		
				<i>DN AR 2038 17/11 75B 83</i>	<i>487</i>				<i>10786</i>		
					<i>1253</i>						
1919				<i>DO 224, 7th Bn 18/9/17 reads</i>							
Feb				<i>Awarded 5 days pay for a.w.L.</i>							
				<i>forfeits 3 days pay for a.w.L.</i>							
				<i>Rev. 13/9/17 10-40 am 15.9.17</i>							
				<i>Obs no 12. 7th Bn. Sep 1917</i>		<i>880 A</i>			<i>9906</i>		
				<i>P.868. Read 10/2/19.</i>		<i>880</i>					

[illegible][illegible]

[illegible]

P. 559
MARRIED OR SINGLE

Single

PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN

Mrs. A. Richardson
767 Booth St. Ottawa Ontario
Canada

RELATIONSHIP OF NEXT OF KIN

Guardian

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$

EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, ETC.

PARTICULARS

EFFECTIVE DATE

AUTHORITY

To be Capt.

11/18

20 77 18/3/18

REG'L No.

246456

RANK

Pte

NAME

Ginsley Arthur

UNIT

207 Bn

TRANSFERRED TO

7 Res

DATE

11-6-17

AUTHORITY

14-6-17

IF IN PERM. CORPS
WHAT UNIT

PERMANENT FORCE ALLOWANCES

TRANSFERRED TO

Canb. D.

DATE

1-1-18

AUTHORITY

347

PLACE OF ATTESTATION

Ottawa Ontario

TRANSFERRED TO

DATE

DATE OF ATTESTATION

June 1. 1916.

TRANSFERRED TO

DATE

AUTHORITY

ASSIGNED PAY MONTHLY \$

5.00

DATE EFFECTIVE

14-6-17

PAYABLE TO

Miss J. Dorman, P.O. Box 108, Montreal, N.S.

RELATIONSHIP

Guardian

ASSIGNED PAY MONTHLY \$

15.00

DATE EFFECTIVE

1-1-18

PAYABLE TO

Mrs. Annie Ginsley 21 Gerard St. Liverpool

RELATIONSHIP

Mother

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE)

EFFECTIVE

REASON

DISCHARGE DATE AND PLACE

REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

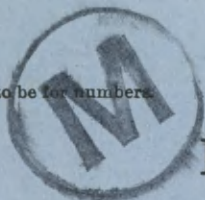
ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

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	DEBIT																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																															
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Can't Pay 15⁰⁰₁₁

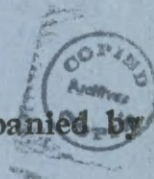
[illegible]

This space to be for numbers.



Proceedings on Discharge.

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



No.	246456	
Rank	Private	
Name	Grimley, Anthony	
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.		
Corps (Squadron, Battery or Company)	204 th Battalion	
Date of Discharge	10 th January 1919	
Place of Discharge	Victoria B.C.	
1.	DESCRIPTION AT THE TIME OF DISCHARGE.	
Age.....	18.....years..... ☒months.	Descriptive Marks scar 4 th finger right hand.
Height.....	5.....feet.....2.....inches.	
Complexion	Medium	
Eyes	Blue	
Hair	Brown	
Trade	Student	
Intended place of residence	Brown Jug Hotel	
(To be given as fully as practicable.)	Victoria B.C.	
2.	The above-named man is discharged in consequence of <i>on demobilization</i> <i>under R.O 1420 d/12.12.18. (C)</i>	
N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.		
To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.	3. Conduct and character while in the service have been, according to the records, etc.	
	N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:	
	4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)	

M. F. B. 218.

100m.—6-16.

H. Q. 1772-39-113.

(OVER)

E. R. J.

G. R. B.
4/2/19

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



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

6. Medals and Decorations.....

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

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

(Place).....

(Date).....

Commanding

8. **Certificate to be signed by the Soldier on Discharge**

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

(Place)..... *A. Curley* (Signature of Soldier.)

(Date)..... *J. Davy* (Signature of Witness.)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. **Additional Certificate in the case of a Soldier who takes his discharge on his own request.**

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

..... (Signature of Soldier.)

10. **Statement of Service.**

Service toward Engagement to..... (the date to which the Record of Service is completed)..... years..... days.

Total..... years..... days.

11. **Confirmation of Discharge.**

The discharge of the above-named man is hereby confirmed.

(Place).....

(Signature)..... *H. S. Andrews*

(Date).....

DUPLICATE
DUPLICATA

M. F. B. 440.
200m-10-20.M.

MILITIA AND DEFENCE

In reply please quote

No.

Ottawa, December 14th, 1920.

From:

The Adjutant-General,
Canadian Militia.

To:

#246456

Mr. Anthony Ginley
Brown Jug Hotel,
Victoria, B.C.

Sir:

Enclosed herewith please find Military
Will executed by you while in the C.E.F., and
returned, the same being your own property.

O. Langman

Lieut., for Lt.-Col.,
Director of Records,
for Adjutant-General.

D-1
EEM.

00110112
00110112
00110112

MILITIA AND DEFENSE

00110112, 00110112, 00110112

The American Republic
of Central America

100,000,000
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Medical Report on an Invalid.

Station C.C.A.C. Folkestone.

Date May 4th, 1916.



1. Unit. **14th. Batt. (23rd. R. Batt.)**
2. Regimental No. **26265.**
3. Rank **Pte.**
4. Name **Ginley, Anthony.**
(D.C.M.).
5. Age last birthday **16 yrs. in Mar./16.**
6. Enlisted { on **August 24/14.**
at **Ottawa.**
7. Former Trade { **Student.**
or Occupation {

8. Disability.

Under age.

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. **Canada.**

10. Place of origin of disability. **Canada.**

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

Landed in England Oct. 19/14 and acted as a bugler and as such left for France Feby 11/15 where he did duty as a private due to buglers being disbanded. He served 12 mos. in ranks and was in battles of Ypres and Festubert where he got the D.C.M. for special services rendered. He carried on doing full duty carrying pack and equipment until end of Feby/16 when as result of sprained foot he was sent to Le Havre base who sent him as being too young to the C.C.A.C.

12. (a) Give your opinion as to the causation of the disability.

Under age.

(b) If you consider it to have been caused by wounds received or illness contracted (1) in the presence of the enemy (2) on active service, explain the specific conditions to which you attribute it. (See notes on page 3).

I. No.

II. No.

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

No organic disease
of the heart -
same.

Lungs & Weight Normal.

Has grown since enlisted at 14 yrs.

Has a S.V. Murrmur.

Had an accident in trench whereby was wounded in calf of leg by a comrade's bayonet.

Wound healed and trifling.

(a) In action ?

No.

(b) On field service ?

No.

(c) On duty ?

No.

(d) Off duty ?

No.

He says No.

If so—(a) When?

(b) Where?

Not applicable.

(c) Opinion ?

No.

Not applicable.

Not applicable.

(a) Fit for duty ?

No.

(b) Fit for light duty?

No.

(c) Invalided to Canada?

No.

(d) Discharge as permanently unfit ?

Yes

Yes.
D. H. Hough ~~Left~~ Came

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith,
except

Station _____

Officer in charge of Hospital.

Date_____

* Loss of teeth on, or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

Rank and Name

GINLEY, Anthony

Regimental No.

26265

Name and Address of Next-of-kin

Unit

14th Battn.

Alder Bliss - guardian

Date of enlistment

Sept. 22, 1914

Ottawa, Ontario

Place of birth

England

Married (Yes or No)

No

Date and place of discharge

If in Permanent Force

Reason for discharge

Character on discharge

Promotions or appointments

44481

CC A C

N/E. R.B. No. 7612

File R.L.

Category

REMARKS
Taken from Official Documents

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				
		Embarked.			
7/6/15	W.O.	Cas. Cpl. Sn.		26/6/15	Cas. list 93. O.N.
1/8/15	Nb. 14 Bn.	Rejoined unit 14 Bn	France	1/8/15	Nominal roll.
8/8/15	do	5 days no. 2 F.P. for slovenly conduct out of bounds	In the Field	28/8/15	Part II order. 34. (2)
1/9/15	W.O.	Rejoined unit	In the Field	13/9/15	as list 157 (6)
5/9/15	W.O.	No 2 ban 3rd Amb.	France	15/9/15	as list 159
14.9.15	do	Rejoined unit (sever)	do	29.9.15	do 171
20.2.16	14 Bn.	No 18 Gen. Hosp.	Camiers	29.2.16	as L.A. 296. Frayed ankle right accident.
14.3.16	do.	To No. 6. Gen. Depot.	Etaples.	14.3.16	do A 305.
30.4.16	Nb. 14 Bn.	Granted 7 days leave.	France	11.4.16	do II O. 18
7.5.16	do	Trans to C.B.A.C.	Folkestone	30.4.16	do 19 P.B.

Report

Date

From whom received

Record of promotions, reductions, transfers, casualties, etc, during active service. The authority to be quoted in each case.

Place

Date

REMARKS
Taken from Official Documents

2-5-16	CCAC	Taken on strength	Fistone	2-5-16	PT 0 139	
10-5-16	CCAC	On commd C.E.D. for discharge	Folkestone	8-5-16	PT 0 154	
9-5-16	CCAC	Taken on strength	Bach	8-5-16	PT 0 73	
18/5/16	do	SLS dis. to Canada	do	18/5/16	PT 0 81	
19/5/16	14 th Bn	add Can Base depot		18/3/16	L. A. 359. (sprained right ankle)	
CHECKED. 5th Dec, 1916.				CCAC	PT 0 333-9	25-8-16



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

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

500M.—9-16

H. Q. 1772-39-9. 0.

Casualty Form—Active Service.

2
Unit, Regiment or Corps. 207th O/R B.
Regimental No. 246456 Rank Pte Name Kimley Anthony
Enlisted (a) 1.6.16 Terms of Service (a) 2 of W. Service reckons from (a) 1.6.16
Date of promotion to } Date of appointment } Numerical position on }
present rank } to lance rank } roll of N. C. Os. }
Extended. Re-engaged. Qualification (b).

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B 213, Army Form A. 36, or other official documents
Date	From whom received				
9.1.19	Overseas.	T. O. S. District Depot XI.	Victoria, B. C.	23.11.18	D. O. Pt II 9/43. 1919
	Discharged on demobilization		" "	10.1.19	DOP II 11/49/d/11. 1. 19
	under RO 1420 d/12. 12. 18				M. B. Andrews Capt for O. C. District Depot.,

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

[P.T.O.]

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

Casualty Form—Active Service.

Regiment or Corps.....

Rank Pte. Surname Ginley Christian Name AnthonyReligion C of E Age on Enlistment 16 years 16 monthsEnlisted (a) 1-6-16 Terms of Service (a) War Service reckons from (a) 1-6-16

Date of promotion to present rank..... Date of appointment to lance rank.....

Extended { } Re-engaged { } Qualification (b) Bugler
or Corps Trade and Rate.....John A. Sullivan Cpt Signature of Officer.

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				
		Embarked <u>Halifax 28-5-17</u>			
		Disembarked <u>Liverpool 10-6-17</u>			
<u>14-6-17</u>	<u>OC 7th Res Bn T.O.S. from Canada</u>	<u>Seaford</u>	<u>10-6-17</u>	<u>PU 142</u>	
<u>14/6/17</u>	<u>OC 7th Res Bn sent to C.A.M.C. Depot</u>	<u>Seaford</u>	<u>14/6/17</u>	<u>PU 200</u>	
<u>14/6/17</u>	<u>C.A.M.C.D. T.O.S. from 7th Res Bn</u>	<u>Seaford</u>	<u>14/6/17</u>	<u>PU 200</u>	
<u>18-3-18</u>	<u>C.A.M.C. Depot</u>	<u>Apptd Cpl with Pay and Allowances to complete</u>			
		<u>East. No. 4 Res. Coy</u>	<u>Shorncliffe</u>	<u>1-1-18</u>	<u>Pt 2 00 44</u>
<u>25-4-18</u>	<u>do</u>	<u>Part 2 D.O. 27-4 re Apptmt as A/Cpl is cancelled.</u>	<u>do</u>	<u>1-1-18</u>	<u>Pt 2 113</u>
<u>3-5-18</u>	<u>do</u>	<u>Apptd A/Cpl with Pay & Allowances to complete</u>			
		<u>East. No. 4 Coy</u>	<u>do</u>	<u>1-1-18</u>	<u>Pt 2 122</u>

(a) In the case of a man who has re-engaged for, or enlisted into Section, D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) Signaller, Shoenig-Smith, &c.

[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 of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
15.6.18	CAMEL DEPOT	Reported to R.G. of P.C. for Shorncliffe	Shorncliffe	13.6.18	Rt. DO 166
21.6.18	do	Reported to R.G. of P.C. for Shorncliffe	Shorncliffe	21.6.18	Rt. DO 166
22.6.18	Amstb "Arguaya" Depot	D.O.S. from same Depot	Liverpool	20.6.18	PH. DO 115
31.8.18	do	Adm. Hosp. for well St. Halifax	Halifax	14/8/18	PH DO 119
31.8.18	do	Diagnosis: - Septic Hand	NS.	20/8/18	PH DO 119
31.8.18	do	Dischd Hospital	do	20/8/18	PH DO 119
5/10/18	Amstb "Arguaya" Depot	D.O.S. from same Depot	Shorncliffe	5/10/18	PH DO 122
					Walter Cross MAGE, D.A.D.M.S. FOR ADMS. CANADIANS BUXTON AREA
13/10/18	CAMEL DEPOT	Taken on strength from R.M.S. "Arguaya"	Shorncliffe	5/10/18	PH DO 126
31.10.18	do	So Sp. Young Soldier's Battalion	do	31.10.18	For 300
		Reported to R.G. of P.C. for Shorncliffe	Shorncliffe	31.10.18	For 300
1.11.18	U.S. Bn.	D.O.S. from same	Shorncliffe	1.11.18	For 300
		Embarked	Shorncliffe	2.11.18	For 300
		Disembarked	Canada	2.11.18	For 300

Medical Report on an Invalid.

Station

C.C.C.C. Folkestone

Date

May 4th/16

1. Unit. 14th Batt (23rd R Bde)

5. Age last birthday 16 yrs in Mar/16

2. Regimental No. 26265

6. Enlisted { on Aug 24/14
at Ottawa

3. Rank Plt

7. Former Trade { or Occupation Student

4. Name Guiley Anthony
(D.C.M.)

8. Disability.

Under Age.

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability.

Canada

10. Place of origin of disability.

Canada.

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

Landed in England Oct 18/14 & acted as a Rifleman & as such left for France. He did duty as a private due to being disbanded. He served 12 mos in France & was in battle of Arras. He carried on, doing full duty, carrying pack & equipment until end of July 16 when as result of straining foot he was sent to Le Havre base & sent him on being too young for the case.

12. (a) Give your opinion as to the causation of the disability.

Under Age

(b) If you consider it to have been caused by wounds received or illness contracted (1) in the presence of the enemy (2) on active service, explain the specific conditions to which you attribute it. (See notes on page 3).

I do
I do

27

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

General Appearance excellent
Lungs & Weight normal
Has Grown since enlisted on 14 Apr.
Has a S. V. Murrum
Had an accident in trench
which was wounded in calf of
leg by a crusader bayonet
Wound healed & trifling.

No organic disease
of the heart
just discharges

14. If the disability is an injury, was caused

- (a) In action? *no*
(b) On field service? *no*
(c) On duty? *no*
(d) Off duty? *no*



15. Was a Court of Inquiry held on the injury?

He Says No

If so—(a) When?

(b) Where?

(c) Opinion?

not applicable

16. Was an operation performed? If so, what?

no

17. If not, was an operation advised and declined?

not applicable

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

not applicable

19. Do you recommend

- (a) Fit for duty? *no*
(b) Fit for light duty? *no*
(c) Invalided to Canada? *no*
(d) Discharge as permanently unfit *Yes*

Dr. H. M. C. C. C.

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except†

Station _____

Officer in charge of Hospital.

Date _____

* Loss of teeth on, or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as it is essential that the Members of the Pensions and Claims Board should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Article 591 to 598 of the Canadian Pay and Allowance Regulations as amended G.O., 57, May 1st, 1915).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

20. (a) State whether the disability is the result of injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service.

(b) If due to one of these causes, to what specific condition do the Board attribute it?

yes
yes

General service Canada

21. Has the disability been aggravated by

(a) Intemperance? *No*

(b) Misconduct? *No*

22. Is the disability permanent?

23. If not permanent, what is its probable minimum duration?

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{4}$, $\frac{1}{2}$, $\frac{3}{4}$, or total incapacity.

25. If an operation was advised and declined, was the refusal unreasonable?

26. Do the Board recommend

(a) Fit for duty?

(b) Fit for light duty?

(c) Invalided to Canada?

(d) Discharge as permanently unfit?

no disability as yet
not applicable

less than 1/4

not applicable

Has been one year in France

Signatures:—

Station SHORNCIFFE—C.O.A.C.
(19, Westbourne Gardens, Folkestone.)

Date May 6 - 16

Approved.

Station Shorncliffe

Date 6 - MAY 1916

W. T. Thompson President.

E. L. Pope Capt. Members.

A. D. Walker
Administrative Medical Officer.

Capt. for A.D.M.S.
Canadian Training Division, Shorncliffe.

PENSIONS AND CLAIMS BOARD, Canadian Expeditionary Force, assembled at
Folkestone, Kent, England, on the 9th day of May 1916
Prior Park, Bath

Members of Board.

LIEUT.-COL. SIR H. MONTAGU ALLAN, C.V.O., *President.* MAJOR JOHN L. TODD, C.A.M.C.
LIEUT.-COL. W. GRANT MORDEN. MAJOR MAURICE ALEXANDER,

Legal Adviser.

Proceedings.

Major R. Raikes. C.A.M.C.

Major Hume Blake.

The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked

NO. 26265.
Pte. A. Ginley.
14th. Batt.

Recommends :-

When this man is discharged, he be granted a
gratuity of Fifty Dollars on the authority of
order in council NO. 3021 dated December 25th. 1915.

Signed at Prior Park, Bath, this 9th. day of
May 1916.

H. Montagu Allan. *President.*
Lt.-Col.

R. Raikes.

Major. M.C.

Lt.-Col.

Hume Blake.

Major.



Ottawa, December 14th, 1920.

From:

The Adjutant-General,
Canadian Militia.

To:

#246456
Mr. Anthony Ginnay
Brown Jug Hotel,
Victoria, B.C.

Sir:

Enclosed herewith please find Military
Will executed by you while in the C.E.F., and
returned, the same being your own property.

Lieut., for Lt.-Col.,
Director of Records,
for Adjutant-General.

D-1a.
EBM.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 246153 Rank Pte. Name Finley, H.
Corps No. 11 Bn. Depot who was* discharged
On 10-1-19 191... to 15-12-18 191...
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 10-1-19 191... to 15-12-18 191..., the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month			Balance Cr. from prev. month	57	97
Advances } No.			Reg't'l. Pay <u>41</u> days at \$. <u>1</u> c.	41	
Cheques } No. <u>24255</u>	30		Field Allow. <u>41</u> days at \$. <u>10</u> c.	410	
Assigned Pay and Sep'n Allee. No. <u>30</u>			Separation Allowances* (Monthly)		
Other charges			Other Allowances* <u>clothing</u>	35	
Payment on transfer or discharge No. <u>24257</u>	69	42	Other Credits* <u>sub. p.</u>	14	20
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		35
Total	149	42	Total	149	42

*Give particulars.

A monthly stoppage of \$ 15 (†) has... (‡) been paid on account of Assigned Pay for the month of January 191... (to) Assignee App. Comm. Finley
and Sep'n Allee. for month of January 191...
(Address) 21 General St. Liverpool Eng.

(†) Insert amount to be assigned, whether it has been paid or not.
(‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer.

Out Allowance of \$... has been paid by Paymaster, Military District No.

REMARKS:—

State (1) date of enlistment
(2) if married and if a Separation Allowance Card has been submitted No
(3) cause of discharge authority 80-11
(4) authority for transfer

NOTE.—Separation Allowance and Assigned Pay Card and Index Card (M.F.W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay List of the Unit.

Date January 10th 1919
Place Kilburn W.C. Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit, duplicate to District Paymaster; triplicate to accompany the pay list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

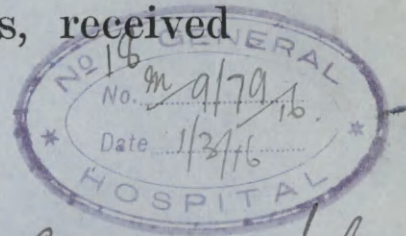
M. F. W. 44.

I.Q. 1772-39-903.
M-9-18. D.P. 874.

App. paid by England
charged to 80-1-19

Report on Wounds or other Injuries, received otherwise than in Action.

114
Gen. No.
4269.



Certificate of Medical Officer.

No. 26265- Pk. Anthony Givley 14 Canadian Inf.

was admitted to hospital on the 20/2/16 suffering from Spasms of ankle.

†Here insert "trivial" or "serious."

The disability is of a Trivial nature, and in all probability

†Here insert "will" or "will not."

† will not interfere with his future efficiency as a soldier.

*Here insert "claims" or "does not claim."

*He does not claim that he was in the performance of military duty at the time of the accident. Was playing football.

(If the soldier makes no claim that he was on duty at the time, the certificate below should be signed by him.)

Station 18 General Hospital W. Edmund L. Rose.
Date 24/2/16 Medical Officer in Charge.

Certificate to be signed by soldier.

I, Pk. Anthony Givley 14 Canadian hereby declare that the injury sustained by me on the 2/2/16 did not occur while I was in the performance of military duty.



A. Givley { Soldier's Signature.
W. Edmund L. Rose. { Signature of Medical Officer.
Station 18 General Hosp
Date Feb 24 '16

Certificate of Commanding Officer.

(This certificate will be completed only in cases of trivial injury where the soldier claims to have been injured while on duty.)

†Here insert "occurred" or "did not occur."

I certify that the injury to the above-named soldier † _____ while he was in the performance of military duty.

†If on duty, state (a) The date of the injury. (b) The place where it occurred. (c) The nature of the duty. (d) Whether the soldier was in any way to blame.

The soldier has been so informed.

Station _____
Date _____ Commanding _____

This Army Form will be attached to the Medical History Sheet, on which it will be recorded whether the soldier was on duty, and whether he was to blame.

Form 100-10

Report on Wounds or Other Injuries Sustained
by a Person in Action

Certificate of Medical Officer

1. Name of Person Injured: _____

2. Date of Injury: _____

3. Place of Injury: _____

4. Name of Medical Officer: _____

5. Name of Commanding Officer: _____

6. Name of Hospital: _____

7. Name of Surgeon: _____

8. Name of Assistant Surgeon: _____

9. Name of Nurse: _____

10. Name of Doctor: _____

11. Name of Hospital: _____

12. Name of Surgeon: _____

13. Name of Assistant Surgeon: _____

14. Name of Nurse: _____

15. Name of Doctor: _____

16. Name of Hospital: _____

17. Name of Surgeon: _____

18. Name of Assistant Surgeon: _____

19. Name of Nurse: _____

20. Name of Doctor: _____

21. Name of Hospital: _____

22. Name of Surgeon: _____

23. Name of Assistant Surgeon: _____

24. Name of Nurse: _____

Septic

CASE HISTORY SHEET.

No. 246456 Rank Pte Name Ginley, Anthony Age 18
Unit 6.9. m.b Completed years of service C 1/2 E 1/2 14 1/2
Date of admission 14.8.18 Date of discharge 20/8/18.
Diagnosis Infected Hand Place of origin Halifax

CONDITION ON ADMISSION AND PROGRESS OF CASE

A blister on palm of Rt hand at base of middle finger with pain swelling and local tenderness also has some soreness in Rt axillary glands. There is evidence of local cellulitis of palm.



Station Hospital
HALIFAX N.S.

FAMILY HISTORY negative
(Tuberculosis, mental or nervous diseases.)

TREATMENT Incision over infected area
(Especially any specific or special form.) Hot Boric pads T.I.D.

CONDITION ON DISCHARGE Recovery
(and disposal made of case.) to Unit.

Date Aug 19/18 V.H. Miller Capt
Medical Officer i/c case.

Urine Anal.

Straw

Normal

Neutral

1028

Alb

nil

Sugar

nil

Uric

nil

207th, OTTAWA, CARLETON BATTALION
MEDICAL HISTORY SHEET

Original

Surname Ginley Christian Name Anthony

Examined { on <u>1st.</u> day of <u>June</u> 191 <u>6</u> at <u>Ottawa, Ont.</u>	Approved by <u>J. Daulby</u> Rank <u>Capt.</u> M.O.	
Birthplace { City or Town <u>Donegal</u> County <u>Ireland</u>		
Apparent age <u>16</u>	Date <u>22/1/18</u>	Fit or Unfit <u>Fit</u> EXAMINED FOR RE-ENGAGEMENT <u>For Active Home Guard</u> M.O.
Trade or occupation <u>Student</u>		
Height <u>5</u> feet <u>2</u> Inches		
Weight _____ lbs.		
Chest measurement { Minimum <u>30</u> inches Maximum expansion <u>33</u> inches		
Physical development <u>Good</u>		
Small-pox Marks <u>None</u>		
Vaccination Marks { Arm <u>Right</u> Number _____		
When Vaccinated last _____	Date <u>14/8/16</u>	Result <u>hy.</u> <u>J. Daulby</u> M.O.
(a) Marks indicating congenital peculiarities or previous disease <u>None</u>	Date <u>31/1/17</u>	Result <u>hy.</u> <u>J. Daulby</u> M.O.
(b) Slight defects but not sufficient to cause rejection <u>None</u>	Date <u>14/7/16</u>	Result <u>Good</u> <u>J. Daulby</u> M.O.
		<u>Good</u> <u>J. Daulby</u> M.O.
		<u>Good</u> <u>J. Daulby</u> M.O.

Enlisted on 1st. day of June 1916 at Ottawa, Ont.

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>207th</u>	<u>246456</u>		
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT

Gusley Christian Name

Anthony

[illegible]

DUPLICATE.

ARMY FORM B. 178.

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

MEDICAL HISTORY ofSurname G I N L E Y Christian Name Anthony

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Liverpool County EnglandExamined ... { on 2nd day of October 1914,
at S.S. "Andania"Declared Age ... 14 years 6 months days.Trade or Occupation ... Office BoyHeight ... 5 feet 0 inches.Weight ... 100 lbs.Chest { Girth when fully Expanded 30 3/4 inches.
Measurement { Range of Expansion 3 inches.Physical Development ... GoodVaccination Marks { Arm ... Right Left 4
Number fourWhen Vaccinated ... 1910Vision ... { R.E.—V=
L.E.—V=(a) Marks indicating congenital peculiarities or previous disease ... { (a) none

(b) Slight defects but not sufficient to cause rejection ... { (b)

Approved by (Signature) F.A.C. Scrimger
(Rank) Capt. A.M.C.
Medical Officer.Enlisted ... { at Valcartier
on 21 day of Sept 1914.

Corps.	Regtl. No.
<u>Independent Reg:</u>	
<u>3rd V.R.C.</u>	<u>26265</u>
<u>14th Batt: 3rd Brigade</u>	

Became non-effective by ...

on ... day of ... 1914.

(Signature)

(Rank)

This Medical History Sheet has been returned with the
 corresponding Attestation Paper, and entries made in red
 have been taken from the Attestation Paper.

W.R. ...
 Colonel in Charge of Records,
 P.T.O.
 Canadian Contingents.

Table II.—Only for Admissions to Hospital or to the Ship

[illegible]

Check List in the case of Warrant Officers treated in quarters.

marks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.

Signature of Medical Officer

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
Sept. 1914	Anti-Typhoid Inoculations, etc. F.A.C. Scrimger
" 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.	2 inoc:

Table IV.—Service Table.

[illegible]

Regiment or Corps *1st Bn* *on*

Squadron, Battery, or Company *3 60*

No. *26265* Rank *Private*

NAME in full *Anthony Givley*

Date of Attestation *22 Sept 1914*

Religious Persuasion *R. C.*

If serving in a unit of the Active Militia prior to Mobilisation, the designation of such unit should be clearly stated here—

NOTE.—The account of the soldier while on active service will be kept in the Office of the Paymaster at the Base, and to that Officer all communications relating to his accounts should be addressed.

Daily Rates of—

3

	\$	c.
† Pay.....	1	
† Field Allowance	10	
Total daily rate	110	
Monthly rate for 30 days at \$	33	
Deduct Stoppages on account of assigned pay, amount per month	✓	
Difference, net rate per month of 30 days		

Signature of Soldier.

F. B. Larken Capt

Paymaster.

Date and Station

Field 13 Aug/15

† Subject to amendments (if any) on page 4.

4

For use in case the Rates of Pay given on p. 3 require to be amended—

(1)

The Rate of Pay for issue has been reduced or raised to.....\$......c. (words)

from.....191, on account of.....

Paymaster.

(2)

The Rate of Pay for issue has been reduced or raised to.....\$......c. (words)

from.....191, on account of.....

Paymaster.

* NOTE.—The above rates should be verified, whenever opportunity offers, by the Paymaster compiling the man's account. A new book should be issued, if necessary, the Paymaster forwarding the old one to Paymaster at the Base.

Particulars of

(1)

Next of kin

and address

(2)

Person to whom Assigned pay is payable.

and address

(3)

Children (if any), number, age and sex

6

Promotions, Appointments, Reductions, and any casualty affecting the daily rate of pay.

[illegible]

* NOTE.—In addition to the above record, the Officer making the entry will write across the columns for cash payments the nature of the casualty and the amended rate of pay corresponding with page 4. He will also record in the same place all sentences of imprisonment, attesting such entries by his signature.

This is a DUPLICATE PAY BOOK, the original having been lost, and all issues of pay must be based only on the amount due from this date having regard for the net monthly pay as set forth on page 3.

Date

13 Aug 1915

FB Sharker Capt

Paymaster.

CASH PAYMENTS.

Date	Place	Amount	Signature of Officer Making Payment
1915		£s	
13/8/15	Field	15	FB Sharker
28/8	do	15	FB Sharker
15-9	do	15	FB Sharker
30-9	do	50	FB Sharker
1/10/15	Bal. Campd	£88 26	Adulbat. Paymaster
1/10/15	London S.W.	£6-0-0	Jefford Hunt
17-10	Field	£s 15	FB Sharker
7-11-15	do	15	FB Sharker
16-12-15	do	15	FB Sharker
20/12/15	Redwood	65 ⁵ / ₁₀₀	FB Sharker
4-1-16	Field	15	FB Sharker
21-1-16	do		FB Sharker

Cash payments made to.....

Date	Place	Amount	Signature of Officer Making Payment
5-2-16	Liver	15	J. S. Lanken
9 MAR 1916	7473	25	W. C. Carcher
McL N.	2423	25	W. C. Carcher
20 MAR	HAVRE	25	O. J. Nye
8 AVR	HAVRE	40	P. J. Nye
On leave April 14/16 to April 19/16			

Short Form of Will

If a soldier on active service, or under orders for active service, wishes to make a short will, he may do so on the opposite page. It must be in his own handwriting and must be signed by him and dated. The full names and addresses of the persons whom he desires to benefit, and the sum of money or the articles or property which he desires to leave to them, must be clearly stated.

The following is a specimen of such will leaving all to one person:—

In the event of my death I give the whole of my property and effects to

(Signature) JOHN SMITH,

Private, No. 1793.

Date.....

The following is a specimen of such a will leaving legacies to more than one person:—

In the event of my death I give \$50 to.....

.....and I give \$25 to.....

and I give the remaining part of my property to

(Signature) JOHN SMITH,

Private, No. 1793.

Date.....

.....(Corps)

Place	Date of offence	Rank	Cases of drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
Angkor	5/8/15	Btl.		Drunkenly conductor out of barracks	M.P. (etc)	5 days F.P. & v		Col Fisher	
DISCHARGE									

Army Form B. 122

[P.T.O.]

Army Form B. 122

CANADIAN OVERSEAS EXPEDITIONARY FORCES

Discharge Certificate

This is to Certify that No. 26265 (Rank) Private

(Name in Full) Anthony Finlay D.C.M. enlisted in

14th Battalion

Canadian Overseas Expeditionary Force, on the 22nd of September

1914, and accompanied said unit to Amman

was returned to Canada, and discharged from the service at Amman

on the 30th of May 1916, in consequence of

under age

DESCRIPTION ON DISCHARGE

Age 16.1

Height 5.1

Complexion fair

Eyes blue

Hair fair

Trade Student

Marks or Scars

Signature of Man

Place and Date MAY 29 1916

Officer in charge Discharge Depot.

SHOULD THIS DISCHARGE CERTIFICATE BE LOST, NO DUPLICATE OF IT CAN BE OBTAINED.

N. B.—Any person finding this Certificate is requested to forward it in an unstamped envelope to The Secretary, Militia Council, Ottawa, Canada.

CANADIAN OVERSEAS EXPEDITIONARY FORCES

Discharge Certificate

No. 26265

Rank Private

Name A. Ginday

Unit 14th Battalion

Address on Discharge

264 Booth St.
Ottawa

His conduct and character while in the Service have been :

Good

Place

Date

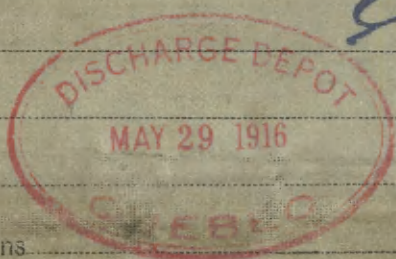
Campaigns

Medals and Decorations

D.C.M.

Commanding

J. J. Sharples
Comd'g. Discharge Depot Quebec



246456

Ginley, A.

20

Perforated sheet for Will from Pay Book of Reg.

No. 246456

Name. Anthony Ginley

Unit. 7 Res 1 Battalion

Military Will

In the event of my death, I give the whole of my property & personal effects including £40 loan Bonds - £200 & interest thereof since Sept. 1916 To; Mrs Annie Ginley
21 Gerrard St.
Liverpool

Signature. A. Ginley

Rank and Regt. Pte 7th Res

Date. Dec 4th 1917



FORM OF WILL.

I, _____ (Name in full)

Regimental Number _____ serving in _____

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

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

absolutely, and my personal estate I bequeath to

_____	} Name & Address of person or persons to receive personal estate* (see note).

In Witness whereof I have hereunto set my hand

this _____ day of _____ A.D. 191 .

Signature.

* 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.

Name of Witness _____

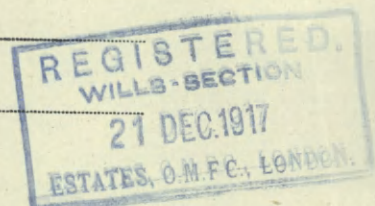
Address of Witness _____

Occupation of Witness _____

Name of Witness _____

Address of Witness _____

Occupation of Witness _____



Baroness
Victoria
122

Name

Ginley Eul 22/9/14

Date of Embarkation for England ~~arrived 15/~~ 30/9/14

Proceeded to France. 15/2/15

Returned to England. 30/4/16 Spk
ankle

Date returned to Canada. 18/5/16


P.R.2855.

Ch Kid
7-9-22

7/6/15
Leas sheet Bay. wd l. leg to duty 1/9/15

1/9/15 Fever

3/9/15 Influenza to duty 14/9/15

10/2/16 Spr ankle Rt-acc.

ho Eng 30/4/16



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

15 ⁰⁰ / ₁₀₀			
-----------------------------------	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. 246456
Rank Pte. Promoted Reverted Discharge
Soldier's Name Anthony Givley
Battalion 207th Battrn
Beneficiary
Relationship
Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

"Duplicate"

① Mrs. Annie Givley
21 Gerard St.
Liverpool,
England.

Date
1917Cheque
No.Amount
S/AAmount
A/P

Total

REMARKS

Dec. 6. 63040

30. - 30. -

0 2 m. 18-12-17.

8-1-18 NEW.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No.	
Rank	Promoted
	Reverted
	Discharge
Soldier's Name	
Battalion	
Beneficiary	
Relationship	
Address	

PARTICULARS OF ASSIGNMENT

Name	
Address	
Change of Address	
1	
2	
3	
4	

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
------	------------	------------	------------	-------	---------

Canadian Pay Office.
Received by Pay II.
FEB 28 1918
and Passed for Action to
Sub-Div.
Date

Accts.	A.
Bank	B.
Disch.	C.
Invest	D.
Obs.	E.
P.Bks	F.
P.N.S.S.	G.
Sep/C	H.
	I.
	K.
	L.
	M.
	P.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

15			
----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. 24643-6

Rank Pte Promoted Reverted Discharge

Soldier's Name Anthony Gmiley

Battalion 207th Batts

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Miss H. Dorman

Address P.O. Box 108 Amherst N.S.

Change of Address

1 Mrs. Annie Gmiley

2 21 Gerard St

3 Liverpool

4 England

1917 Date	Cheque No.	Amount S/A	Amount A/P	Total
<u>hlee</u>	<u>C 63040</u>		<u>30</u>	<u>30</u>
<u>1918 Jan</u>	<u>E 59152</u>		<u>15</u>	<u>15</u>

Also 6951A10

REMARKS

6951-A-10

E 59152 Cancelled

27M-13-11-17

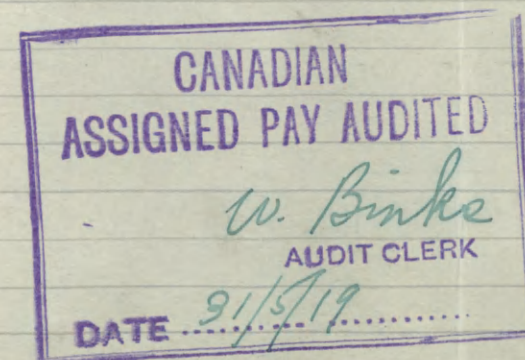
27M. 18-12-17

8-1-18 HCB

Duplicate sheets sent to England

ENGLISH

JAN 18 1916



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank

Promoted

Reverted

Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

Date

Cheque
No.

Amount
S/A

Amount
A/P

Total

REMARKS

M. F. W. 128.
40m. 6-7-1-72-31-114
L. L. 22240-M. & D. 1901.

Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 26265

Army Rank Pte.

Name Ginlay, A.

(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps C.C.A.C.

Battalion, Battery, Company, Depot, &c.

(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge

MAY 30 1916

Place of discharge

QUEBEC

1. Description at the time of discharge.

Age 16 years 1 months

Height 5 feet 1 inches

Chest measurement { girth when fully expanded 31 ins.
range of expansion 2 ins.

Complexion Fresh

Eyes Blue

Hair Fair

Trade Student

Descriptive marks.

Intended place of residence
(To be given as fully as practicable)

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of being no longer physically fit for warservice,

K.R.&.O. para 392 XVI

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

3. Military character:—

Character awarded in accordance with King's Regulations:—

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

Handed June 6/16

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay...	...	...	...	...	...	Class
---	-----	-----	-----	-----	-----	-------

6. Campaigns, Medals and Decorations

Certificate of education

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me in accordance with Regulations.

(Place) _____

Guernsey map

(Date) _____

Commanding	Battn.	Regiment.
------------	--------	-----------

Prior Park, Bath.

8. ** Certificate to be signed by the soldier on discharge.*

hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(Place) _____

A. G. Pinley (Signature of Soldier.)

(Date)

L. H. Cooley. (Signature of Witness.)

(When a soldier is absent through illness or any other cause, and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned should be attached here.)

9. *Additional certificate in the case of a soldier who takes his discharge at his own request.*

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

(Signature of Soldier.)

10. *Statement of service.*

Service towards engagement to _____ (the date to which the record of service is completed) _____ years _____ days.

Further service " " _____ (the date of confirmation of discharge) " "

Total 44.44 " " "

11. Confirmation of discharge.

The discharge of the above-named man is hereby confirmed for **MAX 3 0 1915** (date)

(Place) _____

Signature J. J. Macgillis Lt.-Col.
Comd'g. Discharge Depot Quebec

(Date) MAY 29 1916

Commanding officers (or the Paymaster, if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital, Chelsea, a descriptive return of the man on Army Form D. 400.

RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)



Nil

A. G. Wiley



LIST OF DISCHARGE DOCUMENTS.

1. Proceedings on discharge (Army Form B. 268)
2. Proceedings on transfer to reserve (if any) (Army Form B. 2056)
3. Duplicate attestation
4. Army Form B. 97 (if any)
5. Declaration of change of name (if any)
6. Re-engagement paper (if any) (Army Form B. 136)
7. Authority for continuance, or extension, of service (if any) (Army Form B. 221)
8. Court of Inquiry on an injury (if any) (Army Form A. 2)
9. Regimental conduct sheet (Army Form B. 120)
10. Company conduct sheet (Army Form B. 121)
11. Copies of convictions by Civil Power (if any)
12. Medical history sheet (Army Form B. 178)
13. Medical report on invalid (if any) (Army Form B. 179)
14. Copy of receipt for purchase money (if any)
15. Attestation of fraudulently enlisted man for corps in which he has not been held to serve (if any)
16. Detailed statement of former service allowed to reckon towards pension (if any)
17. Copy of 3rd page attestation (in the case of men from abroad entitled to deferred pay who go to Netley or the discharge depot for discharge)
18. Descriptive return (Army Form D. 400), where required
See section 11 on second page
19. Active service casualty form (Army Form B. 103)
20. Employment sheet (Army Form B. 2066)

In the case of recruits who are rejected before, or on, final approval, the discharge documents will consist of—

1. Duplicate attestation.
(On third page the date and cause of discharge will be entered and signed by the competent military authority)
2. Medical history sheet (if any)
(Army Form B. 178)

Instructions as to the preparation, despatch, and custody, of discharge documents.

1. When a soldier is to be discharged, the documents retained with the duplicate attestation will be placed inside this form. Should any of the documents be missing, an explanation of the deficiency, signed by the commanding officer, must be substituted for the missing document. The Officer in charge of records will then extract from the original attestation, any documents required to complete the list of discharge documents enumerated in the margin, which will then be placed in this form in the sequence given.

2. When men are discharged from the colours at home as medically unfit, or with claims to pension, Army Form B. 268 will be sent confirmed, together with the duplicate attestation and documents retained therein to the officer in charge of records 10 days in advance of the date for discharge in the case of invalids, and 14 days in other cases. This officer will then extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them in this form, and after carefully checking the duplicate attestation with the original forward the whole to the Secretary, Royal Hospital, Chelsea. When such men are discharged abroad, the same procedure will be adopted as above, with the exception that the discharge documents will be sent to the officer in charge of records immediately after discharge takes place (except in the case of men who are granted gratuities on discharge from local battalions or companies, Royal Artillery).

3. When soldiers are sent home from abroad for discharge, the documents retained with the duplicate attestation will be placed inside this form and sent home with the men for transmission to the officer who carries out the discharge together with the following additional forms:—

- (a) Discharge certificate (Army Form B. 2079 or Army Form B. 264).
- (b) Character certificate (Army Form B. 2067) if entitled.
- (c) Copy company conduct sheet (Army Form B. 121) when required under King's Regulations.

The duplicate attestation and documents retained therein will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin and place them in this form.

4. The discharge documents of re-enlisted pensioners, on re-discharge, will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them inside this form, and forward the whole to the Secretary, Royal Hospital, Chelsea, irrespective of the cause of discharge.

5. The original and duplicate attestations of recruits who are rejected before, or on, final approval will be retained by the approving officer for one year, when they will be destroyed.

6. In all other cases the discharge documents will be sent, directly the discharge is carried out, to the officer in charge of records of the unit concerned.

7. Postage need not be paid, and receipts are not required, in the case of documents sent to Chelsea or to the War Office.

8. When the discharge documents of men not entitled to pension are sent to the officer who will have final charge of them, they are to be accompanied by Army Form B. 279, and that officer will, if they are found to be correct, sign and return Army Form B. 279. Should any document be missing, he must at once apply for it.

9. The officers having final charge of the discharge documents will arrange them according to regimental numbers, and enter the names in the alphabetical index, Army Book No. 129.

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

M. OR S.

REGT. No.

246456

RANK

M

NAME (IN FULL)

Ginley, A.

NEXT OF KIN

RELATIONSHIP

PARTICULARS

EFFECTIVE DATE

AUTHORITY

ORIGINAL UNIT C.E.F.

C. A. M. C.

IF IN P.F. WHAT UNIT?

(BLOCK LETTERS SURNAME FIRST)

ADDRESS

To F. P.

1.12.18

80 # 10

PLACE OF ATTESTATION

TRANSFERRED TO

DATE

AUTHORITY

IS SEPARATION ALLOWANCE PAID?

DATE EFFECTIVE

Discharged

10-1-19

80 # 11

DATE OF ATTESTATION

TRANSFERRED TO

DATE

AUTHORITY

TO WHOM PAID

RELATIONSHIP

ADDRESS

PAYABLE TO

Mrs Annie Ginley

RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS

21 Gerard St.

To Miss May McRae

172 Elgin St, Ottawa Ont.

STOP PAYMENT FORM
ASSIGNED PAY
RENDERED, DATE

EFFECTIVE

DISCHARGED

10-1-19

PLACE

Victoria

DATE

10-1-19

REASON

M. Gen.

AUTHORITY

80 # 11

IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A.			OTHER CREDITS		TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT		COL. NO. 1		COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3	DEBIT				CREDIT	DEBIT	CREDIT		
			\$	C.		\$													C.	
Jan 4	41	10	45	10	35 25	11 20	57 87	149	42	249 67	10-1-19	249 67	9-1-19	169	42	50	30	149	42	
WAR GRATUITY																				
Service 2 years 9 months Jan 10 Feb 11 Mar 10																				
61 28 59 11 47 71 70 - 470 00 70 00																				
Apr 11 May 10 173 04 2																				
350 - 167 64 4 44 45 40 - 40 -																				
See attached sheet for Dr. Balance																				
P.S. named in January. Service rolls received.																				

