

3181544

I.D. number  
No. d'identification

AVERY

Surname  
Nom de famille

WILFRED

Given names  
Prénoms

**PERSONNEL RECORDS CENTRE**  
**CENTRE DES DOCUMENTS DU**  
**PERSONNEL**

*DIED 20-6-51*

Location  
Lieu

315



NAME

AVERY WILFRED

REGT. NO.

3181544

UNIT

D. O. R.

H. Q. FILE NO.

0 7877



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TO WHOM FORWARDED

DATE FORWARDED

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ATTESTATION PAPER.

No. 3181544

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname? ..... Avery,
- 1a. What are your Christian names? ..... Wilfred.
- 1b. What is your present address? ..... Wellington Barracks, Halifax N.S.
- 2. In what Town, Township or Parish, and in what Country were you born? ..... Lawry River, Guys. Co., N.S.
- 3. What is the name of your next-of-kin? ..... Mr. Paul Avery, Address - M.C. St.
- 4. What is the address of your next-of-kin? ..... Lawry River, N.S.
- 4a. What is the relationship of your next-of-kin? ..... Father.
- 5. What is the date of your birth? ..... 8th June 1893.
- 6. What is your Trade or Calling? ..... Fisherman.
- 7. Are you married? ..... No.
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated? ..... Yes.
- 9. Do you now belong to the Active Militia? ..... Yes. 2 yrs 1 month. C.Bn.
- 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.

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Wilfred Avery, 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.

Wilfred Avery (Signature of Recruit)

Date 12/4/18. 191 1 Im [Signature] (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Wilfred Avery, 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.

Wilfred Avery (Signature of Recruit)

Date 12/4/18. 191 1 Im [Signature] (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act. The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath

before me, at Halifax, N.S. this 16<sup>th</sup> day of April 191 8.

[Signature] Lt.-Col. (Signature of Justice)  
~~Commanding 1st Depot Batt, N.S. Rgt.~~

Commanding 1st Depot Batt, N.S. Rgt.

Description of Willfred Ayrey on Enlistment.

Apparent Age.....years 20 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. 8 1/2 ins.

Chest measurement { Girth when fully expanded.....37 ins.  
 Range of expansion.....4 1/2 ins.

Complexion.....Dark

Eyes.....Grey

Hair.....Dark Brown

Religious denominations { Church of England.....  
 Presbyterian.....  
 Methodist.....  
 Baptist or Congregationalist.....  
 Roman Catholic.....R.C.  
 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.....16 4 18 191

J. M. Munday  
Callame  
 Medical Officer.

Place.....Halifax, N.S.

\*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:—

Category A1

J. Jankins Capt Comd  
R. F. Brim Esq

CERTIFICATE OF OFFICER COMMANDING UNIT.

.....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.

J. S. Bauld.....(Signature of Officer)

Date.....16 4 18 191

Comdg 1<sup>st</sup> Depot Bn. H.S. Regt

# CANADIAN EXPEDITIONARY FORCE

## DISCHARGE CERTIFICATE

War Service Badge  
Class "A" No. 233128

THIS IS TO CERTIFY that No. 3181597 (Rank) Plt

Name (in full) Avery Wilfred enlisted in  
the 1<sup>st</sup> Depot Bn N.S.R.

CANADIAN EXPEDITIONARY FORCE at Halifax N.S. on the 12<sup>th</sup>  
day of April 1918

HE served in R.C.R. in France

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

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

Age 25

Height 5' 8½"

Complexion Dark

Eyes Grey

Hair Dark Brown

W. Avery  
Signature of Soldier

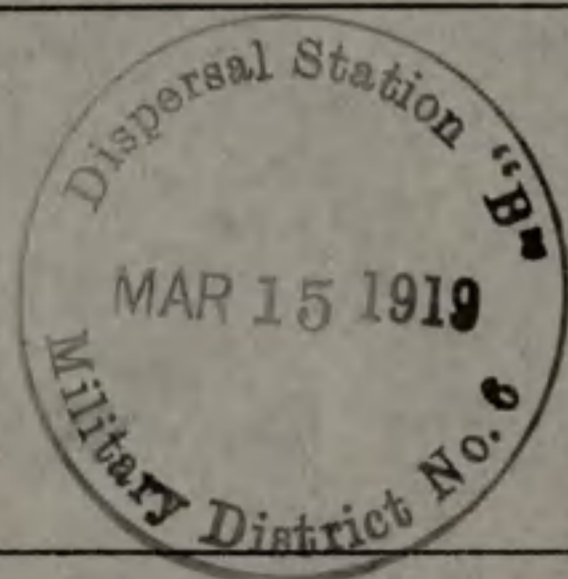
Marks or Scars Scar on top of

Left Foot

[Handwritten mark]

[Signature]  
O. C. Dispersal Station "B" **Major**  
Issuing Officer

Date of Discharge



Rank

Date MAR 10 1919 1919

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

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

Form No. 10  
1918

THIS IS TO CERTIFY that the

Name (in full) *W. J. ...*  
Rank *Private*

CANADIAN EXPEDITIONARY FORCE at

Station *...*

He served in

and is now discharged from the service by reason of

THE DESCRIPTION OF THIS SOLDIER OF THE DATE below is as follows:

Age *22*  
Height *5' 8"*  
Complexion *Fair*  
Eyes *Blue*  
Hair *Dark*

Signature of Soldier

Date of Discharge

Uniform not to be worn after  
Date of Discharge, unless author-  
ity has first been obtained from  
G. O. C. District.

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

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

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

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

- 1. Christian names *Wilfred* 2. Surname *Arney*
- 3. Rank *Pt.* 4. Original Unit *Compositors* 5. Reg. No. *318 1544*
- 6. Address, in full to which future payments of gratuity are to be forwarded  
*Post Office, Larmerline, Quynhoo Co. N.S.*
- 7. Date of enlistment in the C.E.F. *11th March 1916.*
- 8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *Paul T. Arney.*
- 9. Relationship of such dependent *Father*
- 10. Address, in full, of such dependent *Larmerline, Quynhoo Co N.S.*
- 11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *No.*
- 12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—  
*Not applicable*
- 13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States?
- 14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service.  
*No*
- 15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served.  
*Compositors Bn. 11th March to 12th Depot Bn April 5. 1918 to P.C.R Aug 12. 1918*
- 16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department *No*
- 17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? *No*



18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments and under what regimental numbers and units.

*no.*

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid.

*no.*

20. Have you been issued with a War Service Badge? If so what class?

*no.*

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

*no.*

22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled.

*no.*

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England?

*no.*

(b) If so, was such reversion in consequence of misconduct or inefficiency?

*no.*

24. Are you now serving in the C.E.F.?

*no.*

If not, give:—(a) Date of discharge

*15-3-19.*

(b) Reason for discharge

*Demobilized*

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit.

*no.*

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit in which you served at the front, and dates of such service with that unit.

*R.C.R. Oct 6, 1918 to Feb 6, 1919.*

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?

(b) If so, are you in receipt of full pay and allowances from that Department?

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: *M. Murray*

Place of Residence: *7 Brampton*

Declared before me at: *Brampton*  
This *27<sup>th</sup>* day of *Feb* 19 *19*

*Beaulieu*  
*Mayor*

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

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
			<i>183 day</i>	<i>\$ 420.00</i>
			<i>Less W.B.G.</i>	<i>70.00</i>
				<i>\$ 350.00</i>

Certified Correct.

District Paymaster. *L.H.*

# MEDICAL HISTORY OF

ORIGINAL

Surname Avery

Christian Name Wilfred

Examined

on 14<sup>th</sup> day of March 1916  
at Halifax N.S.

Approved by

J. M. Murdoch

Birthplace

City or Town Carleton Place  
County Queens Co. N.S.

(Rank)

Captain  
Medical Officer.

Apparent age

23 yrs 7/12

Trade or occupation

Fisherman

Height

5 Feet 8 1/2 Inches.

Weight

133 1/2 Lbs.

Chest measurement

Minimum 32 1/2 inches  
Maximum expansion 37 inches.

Examined for re-engagement

day of \_\_\_\_\_ 1916

\*Considered

Physical Development

Good

Small-Pox Marks

Nil

(Signature)

Medical Officer.

Vaccination Marks.

Arm Right Left  
Number 1

\*If unfit, state disability.

When Vaccinated last

Childhood

(a) Marks indicating congenital peculiarities or previous disease Birthmark on outside of right thigh.

Re-vaccinated on 6 day of 7 1917

Left Arm, 28-29 April 18  
1 Number

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

Slight defect of left foot

Result Good

(Signature)

J. M. Murdoch  
Medical Officer.

Enlisted on 14 day of March 1916, at Halifax N.S.

	CORPS.	REGTL. NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>1st Coy</u>	<u>1455</u>		<u>14/3/16.</u>
Transferred to.....	<u>1st Depat Batta</u>	<u>3181544</u>		<u>16/4/18.</u>
	<u>A.S. Regt.</u>			<u>25/5/18</u>
	<u>17 Res Bn</u>			<u>3.10.18.</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Halifax N.S.</u>	<u>12/4/18</u>		<u>Category A I</u> <u>J. M. Murdoch</u> <u>Medical Officer.</u>

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.

acute typhoid termination 5/5/18 on J. M. Murdoch  
 20/4/18 2nd. J. M. Murdoch.  
 30/4/18



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

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

No. 3181544 Rank Platoon Leader Surname Aug. Guilford  
(Given name in full)

Unit or Corps Infantry Birthplace Long River

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

1. GENERAL DESCRIPTION:

Physique Fair Weight 140 lbs. Height 5 ft. 8 in. Colour of Eyes Blue  
 Nutrition Fair  
 Pulse 80 Regular  
 Condition of arteries Soft  
 Vision Rt. 6/9+ Left 6/9+  
 Hearing (conversational voice) Rt. 20 ft.  
 Left 20 ft.

Identification marks, scars, or deformities.  
 (Give cause and date of origin.)

Opinion as to general health and physical condition 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.

# EXAMINATIONS.

## THIS SECTION FOR USE OVERSEAS—

Examined at. Bombay (Overseas)

Date 8 2 19

Signed [Signature] 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 [Signature]

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

## THIS SECTION FOR USE IN CANADA—

Examined at,..... (Canada)

Date .....

Signed ..... M.O.

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

Signature .....

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

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

LTR

Rank Name AVERY, Wilfred ✓ Reg'l No. 3181544 ✓  
 Unit *Dft Comp Bn to N.S.* If in perm. Corps, }  
 What Unit? } Married or Single Single. ✓  
 Place and Date of Enlistment Halifax, 12th April 1918. ✓ Place of Birth Lawry River ✓  
 Name and Address, Next-of-Kin Mr Paul Avery ✓ M.S.  
 Lawry River N.S. ✓ Relationship Father. ✓

Assigned Pay Monthly \$ Payable to Relationship *D.A. "B"*

Separation Allowance \$ Payable to Relationship *pt*

Discharge, Date and Place Reason Relationship *pt*

N/E. R.B. No. *7975*  
 File R.L. **OR CAN**  
 Category Character

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
	<i>Arrived in England</i>				
<i>3.5.18</i>	<i>17 Ro</i>	<i>Tof from Canada</i>	<i>S/S VALACIA</i>	<i>28.5/18</i>	<i>40128</i>
<i>4.10.18.</i>	<i>17 Per</i>	<i>S.O.S. to R.C.R.</i>	<i>Ph. B'Shatt</i>	<i>3.10.18.</i>	<i>NO. 235. TR.C.R. NO. 1134/8/1018.</i>
<i>9 2 19</i>	<i>R.C.R</i>	<i>Proc. to ENG.</i>	<i>Field</i>	<i>6.2.19</i>	<i>PH 1013</i>
		<i>Sailing No. 25 date 1.3.19</i>			
		<i>Dispersal Area - R</i>			
<i>30.4.19</i>	<i>R.C.R</i>	<i>S.O.S to Canada</i>	<i>pt</i>	<i>1-3-19</i>	<i>-5</i>



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.

Unit, Regiment or Corps.....

Regimental No. 3181544 Rank Pte Name Avery Wilfred  
C. E. F.

Enlisted (a)..... Terms of Service (a)..... Service reckons from (a).....

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				
30-4-19	L. C. C.	S. O. S. of Om No. to Canada.		1-3-19	90.5 <i>[Signature]</i> for D. of C.

(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.



# Casualty Form - Active Service

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				

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) AVERY W.  
 REGIMENT HERK RANK Pte No. 3181544  
 Date of Examination in England \_\_\_\_\_ Date of Examination in France 12/1/19.

DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.



PRESENT DENTAL REQUIREMENTS

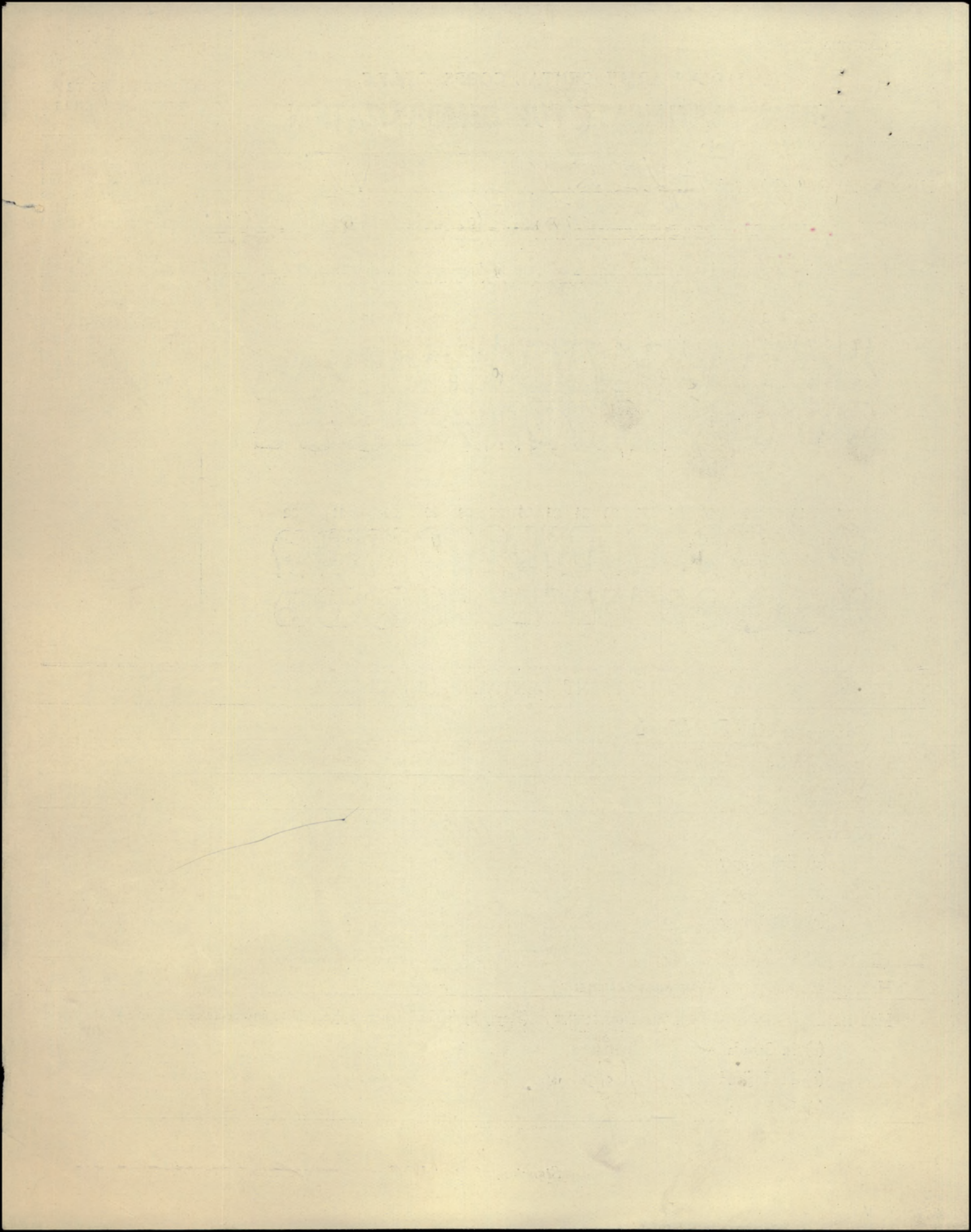
1. FILLINGS 2, 9, 8, 10, 6
2. EXTRACTIONS
3. CROWNS
4. DENTURES
  - (a) Full Upper
  - (b) Part Upper
  - (c) Full Lower
  - (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)

- (a) In Canada
  - (b) In England
  - (c) In France
- Yes.

Signature of Dental Officer [Signature]



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

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

500M.—2-16

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

# Casualty Form—Active Service.

War Service Record  
Class "A" No. 12418

Unit, Regiment or Corps *Camp.* 1st. Depot Battalion, N.S. Regt.

Regimental No. 3181544, Rank Private Name Avery, Wilfred.

Enlisted (a) <sup>12.4.18</sup> ~~16-4-18~~ Terms of Service (a) War & 6 months. Service reckons from (a) <sup>12.4.18</sup> ~~16-4-18~~

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

Extended ..... Re-engaged ..... Qualification (b) Fisherman.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		Embarked for open seas	Halifax N.S.	16/5/18	<i>Adj. 1st. Depot Bn. N.S. Regt.</i>
		Disembarked	Halifax N.S.	27/5/18	<i>A.M.T. Valance</i>
		<b>31-5-18 O.C. 17th T.O.S. and shown on command to Segregation Camp Frensham Pond.</b>	Bramshott	28-5-18	PT. II. O. 128
		<b>26-6-18 O.C. 17th Reported off Command.</b>	Bramshott	25-6-18	PT. II. O. 150
		PROCEEDED OVERSEAS FOR SERVICE WITH <u>PCR</u> BATTN.	do	3/10/18	PT II 235
					<i>Mauckay</i> Lieut., Asst. Adj., 17th Canadian Res. Batt.

CERTIFIED CORRECT.  
4/10/18  
MIL. RECORDS, LONDON.

(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.]

Date	Report		Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
	From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case			
6.10.18.	CMD	T.O.S. R.C.R.	Field,	4.10.18.	1415 Pt 113 4/8.10.18.
7.10.18.	"	To C.C.R.C.	"	7.10.18.	1784.
9.10.18.	CORC	To Unit.	"	19.10.18.	1768.
12.10.18.	R.C.R.	Joined Unit.	"	11.10.18.	B.213.
5/19	O.C. Cdn. Conc. Cmp. Le Havre	S.O.S. for demobilisation to NSR Depot	C.F.C. Depot	5/2/19	N/R. P.O.B. 17/19
5/2/19	do	Proceeded to England	do	6/2/19	Lieut. for Lt. Col A.I.G Cdn. Sect. G.H.Q. N.B. 17, II 13/19
1/3/19	Embark Liverpool	S.O.S. proceeded to	Canada	1/3/19	N.B. 17, II 24/19
1/3/19	T.O.S. No. 6 D.D. from	ops	and posted	9/3/19	Do 70 Do 70 H.C. Jones Lt for officer if records Collect re- % records
12/3/19		S.O.S. on discharge			

Date of Enlistment 11/3/18.

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

A

5178

1<sup>st</sup> May 1918.

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

20 <sup>00</sup>	15		
------------------	----	--	--

1-10-18  
R29M.

PARTICULARS OF SEPARATION ALLOWANCE

No. 3181544  
 Rank Pte. Promoted Reverted Discharge  
 Soldier's Name Wilfred Avery  
 Battalion Special Dfl from Comp B<sup>n</sup> at 'd. 1<sup>st</sup> Dep't 13<sup>th</sup> h.S. Regt  
 Beneficiary  
 Relationship  
 Address

PARTICULARS OF ASSIGNMENT

Name Miss Sayde Fougere  
 Address 27 Duncan St., Halifax, N.S.  
 Change of Address  
 1 MISS SAYDE FOUGERE,  
 27 DUNCAN ST.,  
 2 HALIFAX, N.S. 20 20.00  
 3 A-C 3181544 PTE WILFRED AVERY  
 TWENTY DOLLARS  
 4 Paul Avery, Larry's River,  
 Nova Scotia, Guysboro Co.

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
May 1918	I 5233		20	20	R (7708) 6-6-18. PA
June	B 12711		20	20	D. A.P. for October at rate of 20 to go forward to present payee, father, auth. P.M.G.'s. ltr of 20/12/18. 7/19. MGA
July	M 30728		20	20	b
July	S 33206		20	20	b
SEP	Q 40148		20	20	b A.P. suspended 30-9-18. auth. ruling, Cameron's 4 <sup>th</sup> 7/19. MGA
10/1/19. OCT	Q 3502		20	20	a P.M.G. informed re transfer of A.P. to mother - awaiting reply 5 <sup>th</sup> 10/19. MGA
NOV	M 5830		15	15	a M.R.O. imp. *18001 - 5 <sup>th</sup> 12/19. MGA
DEC	B 65726		15	15	-
Jan/19	B 73949		15	15	a A.P. transferred to father, effective 1-10-18 at 15 per month.
Feb.	A 80715		15	15	auth. A.M. dated M.R.O. 18081 rendered 13 <sup>th</sup> 3/19. MGA
MAR	D 86236		15	15	M.R.O. = 77159 = 13/3/19.

A/c Closed 31-3-19  
 Ret'd per *Adraite*  
 Date 2/3/19 M.F.W. 187 13/3/19  
*P. Brown*

AUDITED.

M. F. W. 128  
400M-6-17-172-59-114  
L. L. 2320-M. & D. 7563.

AUTHORITY: NR.  
 FOR M.D. 6 B. 3.  
 NEW ACC. M. Shibly 4/6/18.







**FLAGS**

MAIL

REQ.

B.F's

CHARGE TO

CLERK

OUT

IN

DATE

NAME.

*Avery Wilfred*

RANK.

*Pte*

*505100 15-3-19 M.D. 6.  
No. 700 11-3-19 REC. FILE.*

NO.

*318 15-44*

*T.O.S. Apr. 30 1918*

CORPS.

*N.S. Regt. 1st. Dep. Bn.*

*H.Q. FILE NO. 118.*

ENLISTMENT, PLACE.

*Halifax, N.S.*

DATE.

*Apr 16<sup>th</sup> 1918*

BIRTH

DISCHARGE, PLACE.

*Canada Larry's River N.S.*

DATE.

*June 8<sup>th</sup> 1893*

REASON.

ADDRESS ON DISCHARGE.

DOCUMENTS.

NEXT OF KIN

*Avery, Paul*

ADDRESS

*Larry's River, N.S.  
Guysboro' Co.*

RELATIONSHIP

*Father*

*Saa P. 29/1/19.*

*1/8. 16/5/18  $\frac{251}{2}$*

*R/b. 9-3-19.  $\frac{279}{23}$*

CHARGED OUT

RETURNED

CHARGED OUT

RETURNED

TO

DATE

BY

RECEIVED  
BY

DATE

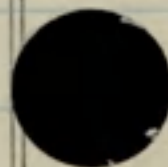
TO

DATE

BY

RECEIVED  
BY

DATE



*Haver*

Number 3181544 Rank pte

*[Handwritten signature]*

Surname EVERY

Christian Name Wilfred

Units R.C.R. Theatre of War France

Date of Service 3-10-18

Remarks

Latest Address Larroy's River n.s.

Roll No. R. Page 22361

10m.-8-21.M.

B. V. rec'd 5<sup>12/25</sup>

DESP. NOV 12 1925

REGN. NO. 18031

No. 3181544

RANK

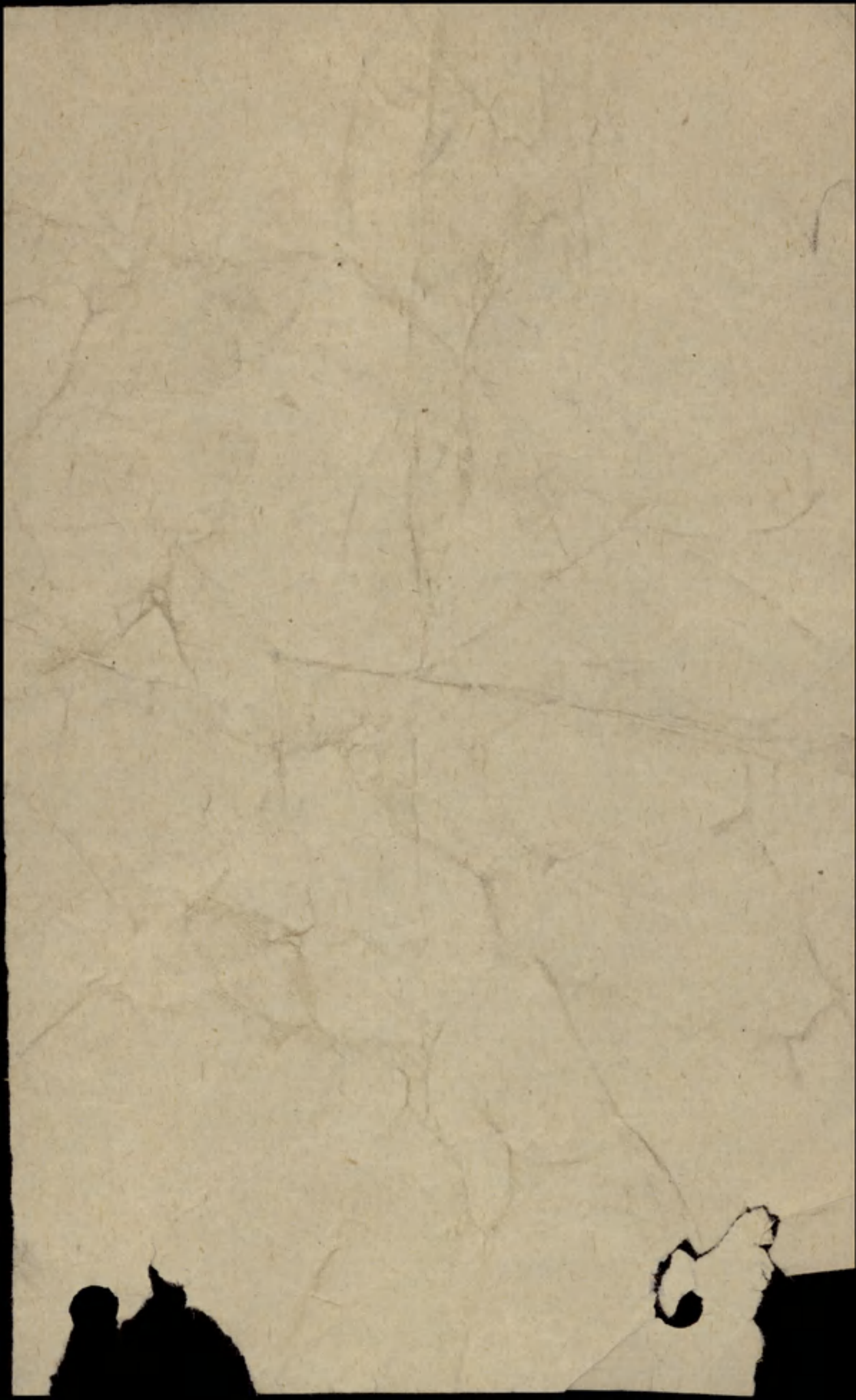
NAME

UNIT

Pt  
Avery - W.  
R CR

- ✓ Full web
- ✓ Mess Tent
- ✓ 20 at Bottle
- ✓ Blanket 7
- ✓ 1st Sheet
- ✓ Rifle
- ✓ Bayonet + Scabbard

R I I O R W O



LIST OF DISCHARGE DOCUMENTS.



Attestation Paper, Triplicate.....	Militia Form W. 23
or Particulars of Recruit.....	Militia Form W. 133
Field Conduct Sheet.....	Militia Form W. 178 or A.F.B. 122
Casualty Form.....	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate.....	Militia Form W. 44
Certificate that missing documents are unobtainable.....	
Medical History Sheet.....	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board.....	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet.....	Militia Form B. 465
Medical Report.....	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet.....	Militia Form B. 263
Company Conduct Sheet.....	Militia Form B. 263a

- 1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
- 2. Casualty Form (M.F.W. 54).
- 3. Medical History Sheet (M.F.B. 313 or A.F.B. 178), Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
- 4. Dental Certificate (C.A.D.C. 5009a).
- 5. Field Conduct Sheet (A.F.B. 122)
- 6. Proceedings on Discharge (M.F.B. 218a)
- 7. Discharge Certificate (M.F.W. 39) (Enclosed in special envelope (260M)).
- 8. Copy of Discharge Certificate (M.F.W. 39a).
- 9. Dispersal Certificate (C.D.S.)
- 10. Equipment Statement Q.M.G. Form (D.O.S. 2), and Clothing
- 11. Last Pay Certificate (P. 851). *and duplicate*
- 12. Pay Book (P. 64)
- 13. War Service Gratuity (Form M.F.W. 2595).
- 14. Sundry Documents.

Group.....  
 Checked by No. *2319*  
 Date *10-3-19*

SHORT FORM.  
 PROCEEDINGS ON DISCHARGE.  
 (Demobilization.)

*Aspirin 1/2 - B*  
*recept G*  
*R-6*  
 War Service Badge  
 Class "A" No. *233128*

1. No.	<i>3181544</i>	
2. Rank.	<i>PTE</i>	
3. Name.	<i>AVERY</i>	<i>WILFRED</i>
4. Unit.	<i>R.C.R.</i>	
5. Date of Discharge	<i>10/3/19</i>	Place <i>Larrys River, N.S</i>
6. Reason for Discharge	<i>Demobilization</i>	
7. Authority.		
8. Proposed Residence after Discharge	<i>Larrys River, N.S</i>	
9. CERTIFICATE TO BE SIGNED BY SOLDIER.	I hereby acknowledge that at the undernoted place and date I received my discharge Certificate M. F. W. ?	
	<i>W. Avery</i> Signature of Soldier.	
10. CONFIRMATION.	The discharge of the above named man is hereby confirmed.	
	Place <i>Halifax</i>	
	Date <i>10-3-19</i>	
	<i>W. Hunt</i> Signature..... Major O. C. Dispersal Station "B" (O. C. Discharging Unit.)	



*Adriatic 8-3-19*  
 PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING  
 DAILY RATE OF PAY AND ALLOWANCES

REGT. No. *3181544* RANK *Pt.* NAME (IN FULL) *Avery, Wilfred*  
 ORIGINAL UNIT *N. D.* IF IN P.F. WHAT UNIT (BLOCK LETTERS SURNAME FIRST)

M. OR S.	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	PLACE OF ATTESTATION	TRANSFERRED TO	DATE	AUTHORITY
NEXT OF KIN								
ADDRESS		<i>Don D.</i>	<i>1-3-19</i>	<i>Lo. 70</i>				
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				DATE OF ATTESTATION	TRANSFERRED TO	DATE	AUTHORITY
TO WHOM PAID	RELATIONSHIP				ASSIGNED PAY \$ <i>15.80</i>			
ADDRESS					PAYABLE TO <i>Paul Avery</i>			
					ADDRESS <i>Harry's River</i>			
					<i>Guantanamo Co., N. D.</i>			
					STOP PAYMENT FORM			
					ASSIGNED PAY RENDERED, DATE <i>14-3-19</i>	EFFECTIVE DATE <i>1-3-19</i>		
					DISCHARGED <i>Haltford</i>	REASON <i>Demob.</i>	AUTHORITY <i>Lo. 70</i>	IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A.		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY		REGIMENTAL CHARGES		OTHER CHARGES		TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT		\$	C.	NO.	DATE	NO.	DATE	NO.	DATE	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	
			\$	C.																			
<i>28-2-19</i>																							<i>Reg. Exp. 10.00</i>
<i>Mar</i>	<i>15</i>	<i>1.19</i>																					<i>Ad. 1-3-19 to 15-3-19</i>
																							<i>Lo. Allow.</i>
																							<i>Ado. War Ser. Grat.</i>
																							<i>Ass. Pay, March</i>
																							<i>On Boat</i>
																							<i>Choppe No. 27523</i>
																							<i>1st Regt War. Ser. Grat.</i>
																							<i>157329 15/4/19</i>
																							<i>584380 9-5-19</i>
																							<i>594484 10-6-19</i>
																							<i>58375 11-7-19</i>
																							<i>898160 7/8/19</i>
																							<i>Completed 420 112000</i>

BALANCE FROM PREVIOUS ACCOUNT

Certified that all pay moneys due on this account have been paid.  
*[Signature]*  
 For Senior Officer Pay Services, M. D. 6

\* Strike out whichever inapplicable.

ASSIGNED PAY ~~ENGLAND OR CANADA.~~ CANADA. SEPARATION ALLOWANCE. ENGLAND OR CANADA.

NAME: *AVERY Alfred*  
NUMBER: *3181524*

EFFECTIVE DATE: *MAY 1 1918* *1. Nov 19* EFFECTIVE DATE: -

AMOUNT: ~~2000~~ *1500* AMOUNT: -

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

*Mrs. Sayde Langere*  
*27 Duncan St. B.*  
*Halifax N.S.*  
*Mr. Paul Avery.*  
*Lower River, Gaspere Co.*  
*N.S. Fisher*

*Stopped 1-3-19*

PARTICULARS OF RANK OR APPOINTMENT		
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
<i>P.O. from Law</i>	<i>MAY 1 1918</i>	<i>Pte</i>

UNIT AND TRANSFERS			
ORIGINAL UNIT	DATE ACCOUNT FIRST OPENED	DATE LEDGER SHEET T OF	UNIT TRANSFERRED TO
<i>Draft Composite Bn</i> <i>1st Det. of Bn N S Rgt</i>	<i>May 1 1918</i>		<i>17th Re. Bn</i>
			<i>Canada Section</i>

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
<i>8/2/19</i>		<i>Bramshott</i>	<i>48.67</i>				

DAILY RATES OF PAY AND ALLOWANCES				
AUTHORITY	PAY	F.A.	P.F.A.	SUBSCE ALL'CE
<i>P.O. from Law</i>	<i>1</i>	<i>=</i>	<i>10</i>	<i>18.00</i>

PARTICULARS OF RENDERING NON-EFFECTIVE: *Dischg to Canada 1/1/19 to 28/1/19 Bramshott Ledger 67*

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
<i>1918</i>	<i>BALANCE FROM CANADA</i>								<i>Nil</i>		
<i>May</i>	<i>pp May</i>	<i>24/10</i>		<i>Cap - May</i>				<i>20</i>			
	<i>" June</i>	<i>33</i>		<i>" June</i>				<i>20</i>			
				<i>AR 1000 30/5 17 Re</i>	<i>4.87</i>						
				<i>1062 15/6</i>	<i>4.87</i>						
				<i>1178 27/6</i>	<i>2.43</i>				<i>14.97</i>		
		<i>67/0</i>			<i>12.17</i>			<i>40</i>			
<i>July</i>		<i>24/10</i>		<i>Cap</i>				<i>20</i>			
				<i>AR 1396 12/7</i>	<i>4.87</i>						
				<i>1484 20/7</i>	<i>9.74</i>				<i>14.42</i>		
		<i>34/10</i>			<i>14.60</i>			<i>20</i>			
<i>AUG</i>		<i>34/10</i>		<i>Cap</i>				<i>20</i>			
				<i>R 4005 11/7/18 17 Re</i>	<i>6.7</i>						
				<i>AR 1856 13/8/18 17 Re</i>	<i>7.30</i>						
				<i>2013 128/8/18</i>	<i>2.43</i>				<i>18.18</i>		
		<i>34/10</i>			<i>10.35</i>			<i>20</i>			
<i>SEP</i>		<i>33</i>		<i>C.A.P</i>				<i>20</i>			
				<i>2367 14/9 14 Re</i>	<i>4.87</i>						
				<i>2491 27/9</i>	<i>4.87</i>				<i>21.42</i>		
		<i>33</i>			<i>9.74</i>			<i>20</i>			
<i>Oct</i>		<i>34/10</i>		<i>Cap</i>				<i>20</i>			
				<i>AR 2808 2/10/18 17 Re Bn</i>	<i>4.87</i>						
				<i>AR 2201 7/10/18 7 C.A.P</i>	<i>3.73</i>				<i>26.94</i>		
		<i>34/10</i>			<i>8.60</i>			<i>20</i>			

NUMBER

RANK

NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
	<i>Blk for</i>										
<i>Nov</i>	<i>9</i>	<i>33-</i>		<i>AK 2701 1/18 76SB</i>	<i>373</i>				<i>2694</i>		
<i>Dec</i>	<i>—</i>	<i>3410</i>		<i>cab</i>				<i>15</i>			
<i>Jan</i>	<i>—</i>	<i>3410</i>		<i>cab</i>				<i>15</i>			
				<i>AK 3135 1/11/18 76SB</i>	<i>1306</i>						
				<i>AK 3961 1/17/18 76SB</i>	<i>373</i>						
				<i>AK 11524 12/17/18</i>	<i>373</i>						
				<i>cab</i>	<i>2425</i>			<i>15</i>			
									<i>5889</i>		
<i>Feb</i>	<i>18</i>	<i>10120</i>			<i>2425</i>			<i>15</i>			
		<i>3080</i>		<i>cab</i>				<i>15</i>			
				<i>AK 5100 7/10/19 76SB</i>	<i>373</i>						
				<i>" 6006 5/19</i>	<i>373</i>				<i>6723</i>		
				<i>" 3688 8/14/19 CEN</i>	<i>4867</i>				<i>1856</i>		
		<i>3080</i>			<i>5618</i>			<i>15</i>			
				<i>S.O.S. - Canada 1-3-19</i>							
				<i>Shipping List</i>							