

603

ORIGINAL

ATTESTATION PAPER.

No.

Folio.

86964

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... Frank Nutkins
2. In what Town, Township or Parish, and in what Country were you born?..... Trang. Eng.
3. What is the name of your next-of-kin?..... J ohn Nutkins (Father)
4. What is the address of your next-of-kin?..... Murrell Lane, Spring. Eng.
4 Goswells Cottage, Murrell Lane
5. What is the date of your birth?..... Oct. 15th. 1883
6. What is your Trade or Calling?..... Laborer
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?..... no
10. Have you ever served in any Military Force?.. none
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) yes
CANADIAN OVER-SEAS EXPEDITIONARY FORCE?)

Frank Nutkins (Signature of Man).

G. Fodun (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Frank Nutkins, 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.

Frank Nutkins (Signature of Recruit)

Date 4-12-1914 G. Fodun (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Frank Nutkins, 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.

Frank Nutkins (Signature of Recruit)

Date 4-12-1914 G. Fodun (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 Wimpy this 29 day of Sept 1914.

Stannion J.T. (Signature of Justice)

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

Lt Col. Comdg 5 Brigade (Approving Officer)

Artillery C.E.F

Description of Frank Nutkins on Enlistment.

Apparent Age.....31 years.....3 months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer).

Height.....5 ft. 6 ins.

Chest measurement { Girth when fully expanded.....35 ins.
 Range of expansion.....2 ins.

Complexion.....Fair

Eyes.....Fair

Hair.....Brown

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

none

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.....Dec 5th. 1914.

Place.....Winnipeg

H. J. Goodham

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.

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

Date.....4/12.....1914.

L. J. D. [Signature]
 Lt. Col. Comdg 5 Brigade
 Artillery C. E. F.

(Signature of Officer)

REGIMENTAL DOCUMENTS

NAME *Butkins*

REGT. NO. *86964*

UNIT

H. Q. FILE NO.

S

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

DEATH

Category

DISCHARGE

Category

DESERTION

ATTESTATION PAPER (M.F.W. 23, 133, or 51)

CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

TRAINING HISTORY SHEET (M.F.W. 113)

FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)

REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)

COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)

MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

DENTAL HISTORY SHEET (M.F.B. 465)

MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

MEDICAL EXAMINATION (M.F.W. 129)

TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)

PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)

DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)

LAST PAY CERTIFICATE (M.F.W. 44)

PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)

PARTICULARS OF CHARACTER (A.F.W. 3226)

COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

Cas card

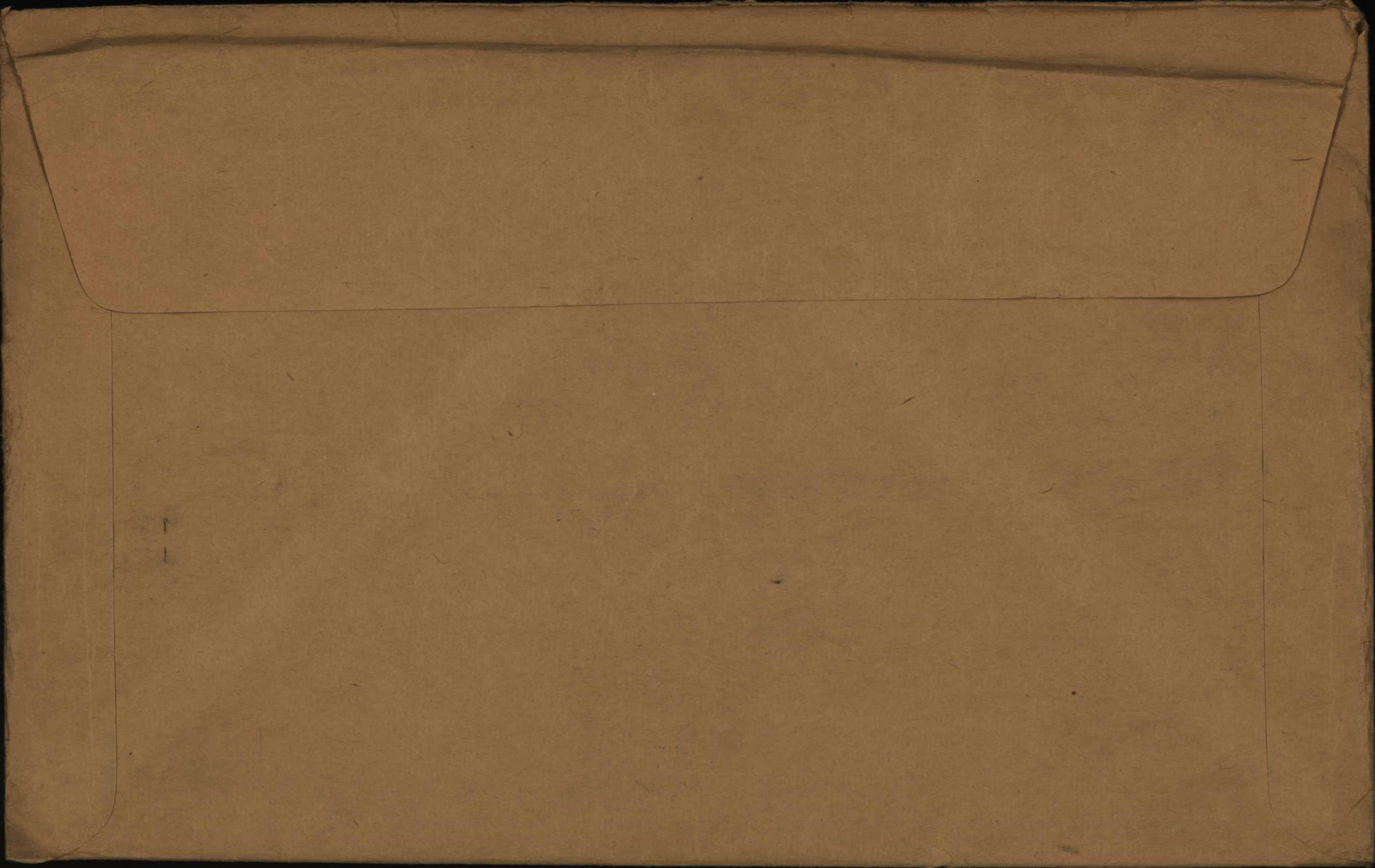
misc

DR 122



09366

2
38-28
14-29
11-29



low
86964
Number

86964

Rank

Cor

Surname

NOTKINS

Christian Name

Frank

Units

C. I. G.

Theatre of War

France

Date of Service

18-1-16

Remarks

Latest Address

*4 Goldfield Cottage
Tring Herts*

Roll No

B. Page 6925.

England

13

V

No.

RANK

NAME

T. O. S.

UNIT

M. D.

PAID
FROMPAID
TOSIG.
OR
REG'T

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS

AUTHORITY

DESP. NOV 30 1922
REGN. No. 41174689

NAME

Nutkins Frank

REGT'L No.

86964

RANK AND CORPS

Snr Lt Bde. 6. I. A. 1st R. D.

H. Q. FILE No. 649.

CABLE

NO.

DATE

Eng.

NATURE OF CASUALTY

FOLLOWS

No.

FOLLOWS

Q 357
2-5-

12-7-18

Wounded Accdly. May 7th 1918
GSW Hand. Just rept.

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

2290	Kept from Base wounded.	7-5-18	gsw hand SLV
9300	#42 Cas Clg stat ^{accidentally}	7-5-18	gsw hand acc'
9300	Disc	7-5-18	gsw " "

SURNAME

CHRISTIAN NAME OR NAMES

REG. NO.

NUTKINS $\frac{1}{4}$

F.

86964.

RANK

UNIT

Co.

TROOP

BATTY.

Gnr.

CA. 4B.

HOSPITAL

DATE OF ADMISSION

1. 42 C.C.S.

HOSP. 7-5-18

2. HOSP.

3. HOSP.

4. HOSP.

DIAGNOSIS

GSW. Hand. Sgt. *Acc.*

1.

2.

3.

RFB. WD. ACCID. 7-5-18.

DISPOSITION

CL. 11-7-18. A290.

Dis 7-5-18
REMARKS

" 23-7-18 9300(2)

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

2.

3.

4.

5.

6.

7.

Envelope # 25389

R-122.

Rank *Sm* Name NUTKINS Frank
 Unit 1st Res. Bat. 5th Bde If in perm. Corps, }
 What Unit? } Married or Single Single
 Place and Date of Enlistment Winnipeg. 29th Dec. 1914 Place of Birth Trang. Eng.
 Name and Address, Next-of-Kin John Nutkins.
 4 Goldfield Cottage. Mirwell Lane. Tring. Relationship Father.
 Herts. Eng.
 Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship

Artillery
Art. Dept
July 1915

Discharge, Date and Place Reason Character

Report	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS
Date	From whom received			Taken from Official Documents
12.7.15	JCR. Bde	Taken on 1 st R. Bty from 5 th Bde	Schorrelife	10.7.15 Part II O
27.9.15	"	Trans to 8 th Howitzer Bde	"	1.10.15 " 164
1.10.15	O.G. 8 How.	Taken on the 29 th Batty	Otterpool	1.10.15 " 1.
25-10-15	Merl. Ind.	Will be known as 21 st Batty	6 th How. Bde.	6. Feb. R. O. 3218
28-12-15	O.G. 6 How	A. U. h. 1 day Pay R. W.	St Martin Pl	28-12-15 Part II O. 77.
16-3-16	" "	Embarked for France		18.1.16 Hom. Roll. 16.3.16
7-6-16	6 th Bde Cra	S.O.S. posted to 7 th Bde Cra	Field	21-5-16 Part II O. 31-
" "	7 th Bde Cra	S.O.S. from 6 th Bde. Cra	"	22/5/16 " " 36
3-4-17.	do.	S.O.S. on being posted to 4 th Bde.	do.	19-3-17. " " 53.
3-4-17.	4 th Bde.	S.O.S. on Trans from 7 th Bde.	do.	20-3-17. " " 50.

A.F.B. 103 CHECKED
 REMARKS
 Taken from Official Documents
 18 DEC 1935

86964 Nutkins F.

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				
29.4.19	H Bde.	Proc. to Eng.	Gen. Field	25.4.19	B 45
30.4.19	B. Wing CCG.	T.O.S. from H Bde.	B'st	26.4.19	- 13
6.6.19	" "	SOS to C.C. Pool	" "	20.5.19	- 19
CANADIAN ARTILLERY,					
4-9-19	B. Wing	Pr 11	Do 19 d 6 b 19	is amended to read	
		SOS on being disc.		10/5	80
		British Isles		19	6
Not discharge in B. Dec 20. 5.19 Auth K R 10 Par 392 Sec X 11 v					

Casualty Form—Active Service.

Regiment or Corps

6th Howitzer Brigade. C.

Regimental No.

86964

Rank

ENR

Name

Kutkinis F.

Enlisted (a) 4-12-14 Terms of Service (a)

Service reckons from (a)

Date of promotion
to present rankDate of appointment
to lance rankNumerical position on
roll of N.C.Os.

Extended

Re-engaged

Qualification (b)

CERTIFIED CORRECT
Officer's Records

R.L. 2-10-91 K.T. 101/606

R.S. 221216

CERTIFIED CORRECT
Canadian Record Office,
Westminster House,
7, MILLBANK, W.

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 France W. S. B. CLASS. A		18/1/16	From roll d/16.3.16. for Lt. Col. & Co. Records.
20/5/16	C.R.A. 2nd Gen Div.	Posted to 7th Brig. G.F.A. Taken on strength do		21/5/16 22/5/16	Ausby 12074. C.Y. 8484. G.M. 52 Pt 2 O.7/6/16. do
19-3-17	of Unit	S.D.S. on being posted to 4th Bde C.F.A.	Field	19-3-17	G.H.Q. OB/1866/1 9-3-17. B213 Pt 0 No 53 d/3-4-17
24-3-17	"	J.O.S. of 4th. Bde. C.F.A.	"	20-3-17	B213 Pt 0 No 50 d/3-4-17
25-8-17	"	Granted leave of absence	"	19-8-17	" " 148 d/8-9-17
6-9-17	"	Rejoined from do	"	31-8-17	" " 151 d/17-9-17
11-5-18	of 4th Bde	Accidentally injured. (G.S.W. Hand slight) Rejoined	"	7-5-18 7-5-18	B213 42000. W 3428
3-6-18	G.O.C. 2nd Army	Injured (accidentally)	"	7-5-18	W3428 K.D. 18/13805
28-9-18	4th Bde C.F.A.	Granted leave of absence from 28-9-18 to 12-10-18	"	28-9-18	B213 Pt II 140 d/8-10-18
26-10-18	---	Rejoined from leave	"	20-10-18	B213

(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				
		<p><i>proceeded to England</i></p> <p><i>as on proceeding to Canada H. #104</i></p> <p><i>Cancelled Pmk of</i></p> <p><i>[Signature]</i></p> <p><i>for Lt. Col. A.G. 4th Bde 979</i></p> <p>DISCHARGED IN ENGLAND, K. R. & O. PAR. 392, SEC. XXV.</p> <p><i>[Signature]</i> Captain Officer Commanding, No. 2 Canadian Discharge Depot,</p>		<i>25/4/19</i>	<p><i>[Signature]</i> Lieut. for Lt. Col., AAG., Canadian Section</p>

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters)

NUTKINS, F.

REGIMENT

21st Bn = C.F.A

RANK

Bomb.

No.

86964

Date of Examination in England

24-4-19

Date of Examination in France

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

19-I



PRESENT DENTAL REQUIREMENTS

1. FILLINGS

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

BRAMSHOTT CAMP
HANTS.

Signature of Dental Officer

*R.H. Agie
capt*

NOTKINS F
S. B. C. & C.
8864

NOTKINS F
S. B. C. & C.
8864

NOTKINS F
S. B. C. & C.
8864

I - P

NOTKINS F
S. B. C. & C.
8864

NOTKINS F
S. B. C. & C.
8864

No. 2 Canadian Discharge Depot,
133, Oxford Street, London, W. 1.

.....1919.

I HEREBY CERTIFY that I desire to secure my discharge in
England and waive all claim on the Canadian Government for transportation
to Canada for myself and dependents.

I ACKNOWLEDGE RECEIPT OF:- Certificate of Discharge.

Witness.....

Mitchell

SIGNATURE.....

J. Ruthen

Handwritten text, possibly a signature or name, located in the lower left quadrant of the page. The text is dark and appears to be written in ink or a similar dark pigment. It is somewhat illegible due to fading and the texture of the paper.

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. 86964 Rank Bombardier Surname Nutkins
(Given name in full)

Frank

Unit or Corps 21st C.F.A Birthplace Tring, Herts, Eng.

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

1. GENERAL DESCRIPTION:

Physique fair Weight 155 est lbs. Height 5-7 ft. in. Colour of Eyes Brown

Nutrition good

Pulse 72 regular

Condition of arteries soft

Vision Rt. 6/12 + Left 6/12 +

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

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

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 Sytem no Cardio-Vascular System no

Special Senses no Integumentary System no Respiratory System no

Disturbance of mentality no Muscular System yes Digestive System no

Osseous and Joint System no Any other general condition yes

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.

Left Varicocele - no disability
Diphtheria - 6.1.1915 - 30.1.1915.
G.S.W. Hand R. Slight - 11.5.18.

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS--

Examined at *Braniff* (Overseas)

Date *30.4.19*

Signed *C. Wells Capt* 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 *Frank Rutkins*

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

THIS SECTION FOR USE IN CANADA--

Examined at(Canada)

Date

SignedM.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.)

[Handwritten scribble]

990

ORIGINAL.

MEDICAL HISTORY SHEET.

Surname Nutkins Christian Name Frank

Examined { on 4th day of Dec. 1914
at Winnipeg, Man.

Birthplace { City or Town Living.
County Hertford Eng.

Apparent age 31 3/4

Trade or occupation Laborer.

Height 5 Feet 6 Inches.

Weight _____ Lbs.

Chest measurement { Minimum 33 inches.
Maximum expansion 2 inches.

Physical development Good

Small-Pox Marks _____

Vaccination Marks { Arm Right Left
Number 3

When Vaccinated last 3/2/15

(a) Marks indicating congenital peculiarities or previous disease _____

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

Approved by H. H. Hocking

Rank Capt 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.
<u>3/2/15</u>	<u>positive</u>	<u>MM Triple Left Arm</u>
		M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
		M.O.
		M.O.
		M.O.

Enlisted on 4th day of December 1914 at Winnipeg, Man

	CORPS.	REG'L NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>19th Battery</u>	86964		<u>4/12/14</u>
Transferred to..	<u>1st Reserve C.F.A.</u>	<u>86964</u>	<u>CofE</u>	<u>10/7/15</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.

Frank

Christian Name

Stevens

Surname

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
Winnipeg	4/12/14	6	1	1915	30	1	1915	Diphtheria	25	(complete recovery)	<i>[Signature]</i>

[Signature]
 Duplicate Medical History Sheet
 posted to here. 8/1

MILITIA AND DEFENCE
ASSIGNED PAY.

To whom Mrs. Mary Nutkins.,

By whom assigned Nutkins., Frank.

Address 4 Goldfield Cottage.,
Tring,
Herts

Regtl. No. 86964.

Rank Gunner.

Corps, &c. 6th Howitzer Brigade.

Rate \$15.00 per month.

C.F.A.

Date to Commence 1st February 1916.

PAYMENTS.

Month	Year	Cheque No.	Amt.	REMARKS
Aug. Jan.	1916			
Sept. Feb.		136243	15	
Oct. March		163522	15	
Nov. Apl.		16850	15	
Dec. May		42791	15	
Jan. June	1916	73241	15	
Feb. July		111007	15	
March Aug.		140866	15	X
Apr. Sept.		175884	15	X
May Oct.		212270	15	X
June Nov.	1916	150 438706	15	X
July Dec.		264548	15	X
Aug. Jan.	1917	353911	15	X
Sept. Feb.		372963	15	
Oct. March		399310	15	X
Nov. Apl.				
Dec. May				
Jan. June	1917			
Feb. July				
March Aug.				

*all cheques are
forwarded to
W.K. Wood*

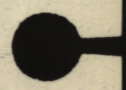
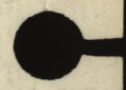


ASSIGNED PAY

TO THE ORDER OF
THE UNITED STATES
TREASURY

IN FULL PAYMENT OF

NO. 1000



WAR SERVICE GRATUITY and SEPARATION ALLOWANCE

Payable to NUTKINS Frank ⁸⁶⁹⁶⁴

Dependent

Address 4 Goldfield Cottage
Tring. Herts.

Address

Date	Cheque No.	Gratuity			Payments			Balance Due.			Remarks
May 20	17581				14	7	8	14	7	8	
June 12		86	6	0							
20	30854				14	7	8	57	10	8	Gratuity 2 nd Install
July 17	55746				14	7	8	48	3	0	do 3 rd "
Sept 9	91205				14	7	8	28	15	4	do 4 th " (Aug Install)
Sept. 15	99704				14	7	8	14	7	8	do 5 th "
Oct 14	115516				14	7	8	0	0	0	Final
		86	6	0	86	6	0				

FILE NO.

WAR SERVICE GRATUITY and SEPARATION ALLOWANCE

Presented

Address

Remarks

Balance Due

Payable

Order

Certificate No.

Date

Rank

Gr

Name

NUTKINS Frank

Reg'l No. 86964

P-56

Unit

1st Res. Bat. 5th Bde

If in perm. Corps,
What Unit?

Married or Single

Single ✓

Place and Date of Enlistment

Winnipeg. 29th Dec. 1914

Place of Birth

Tring. Eng. ✓

Name and Address, Next-of-Kin

John Nutkins.

4 Goldfield Cottage. Mirwell Lane. Tring.
Herts. Eng.

Relationship

Father. ✓

Assigned Pay Monthly \$15⁰⁰ from 1/2/16

Payable to Mrs. Mary Nutkins, 4 Goldfield Cottage, Tring, Herts.

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason

Character

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						
1915																	
10 July	31 Aug.	53	1.	53.	53	10	5 30		58 30			43 80			43 80	14 50	
	1 Sept. 30	30	.	30	30	.	3.		33.			29 20			29 20	18 30	
	1 Oct. 31	31	.	31.	31	.	3 10		34 10			29 20			29 20	23 20	
	1 Nov. 30	30	1 ⁰⁰	30	30	"	3		33	56 20	34 07				34 07	22 13	
	1 Dec. 31	31	"	31	31	"	3 10	990	44	66 13	58 40		1 10		59 50	66 3	1-9 July not credited 1 day Ret # 74 28/1/15
1916																	
	1 Jan'y 31	31	1 ⁰⁰	31	31	"	3 10		34 10	40 7 3	17 22				17 22	23 51	
	1 Feb'y 29	29	1 ⁰⁰	29	29	"	2 90		31 90	55 4 1	5 22 15				20 22	35 19	
	1 March 31	31	1 ⁰⁰	31	31	"	3 10		34 10	69 2 9	2 62 15				17 62	51 6 7	checked 4/6
				266			266 0	990	302 50			219 7 3	30	1 10	7 50 8 3		
				266			2660	990	302 50			219 7 3	30	1 10	250 8 3		

BALANCE TRANSFERRED TO NEW LEDGER.

ASSIGNED PAY. ENGLAND or CANADA ON CE. ENGLAND or CANADA.

NAME:- **Nutkins** Frank

EFFECTIVE DATE:- 1-2-16

NUMBER:- 86964

AMOUNT: 15.00

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 Mary Nutkins
4 Goldfield Cottage
Tring. Herts.

stop 1-5-19

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

UNIT AND TRANSFERS

ORIGINAL UNIT:- 5th Bde C.F.A

DATE ACCOUNT FIRST OPENED:-

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'P'D	UNIT TRANSFERRED TO
			4th Bde C.F.A

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
		May	15.00				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1	10		

PARTICULARS OF RENDERING NON-EFFECTIVE: *Dis in England 20/5/19 Auth 2 COO 9/5/19 C/Bde 8/30/18*

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
But forward from March									231 93	15	
April	31	33		A 38122 £ 3-1-8			15				
				Rd. 23 + Bde 2/4/18	3 57						
				" 80 " 22/4/18	8 03						
		33			11 60		15		238 33		
May	"	34 10		B 0920 £ 3-1-8			15				
				Rd. 149 4 Bde 8/5/18	8 03					15	
		34 10			8 03		15		249 40		
June	"	33		B 28518 £ 3-1-8			15				
				Rd. 148 4 Bde 2/6/18	3 57						
				" 211 " 17/6/18	4 46				259 37	15	
		33			8 03		15				
July	"	34 10		B 87919 £ 3-1-8			15				
				" 283 " 1/7/18	4 46						
				" 364 " 19/7/18	3 57				270 44	15	
		34 10			8 03		15				
Aug	"	34 10		C 39589 £ 3-1-8			15				
				" 414 " 1/8/18	3 57						
				" 471 " 18/8/18	3 57				282 40		
		34 10			7 14		15		300 40		
Sept	"	33		C 87512 " 3-1-8			15		293 26		
				593 " 15/9	3 57				286 12		
				524 " 8/9	3 57				282 12		
				642 " 20/9/18	7 14				274 12		
				C.P. 39309 " 28/9/18	170 33				10 74	15	
				Rd 957 " 27/9/18	97 33				19 46		
		33			281 94		15				

NUMBER	RANK	NAME	MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
		Balance Forward										18 46		
Oct		Guro Pay			34 10		D3124970			15		37 56		
Nov					33		282465			15				
							895 2/11 4 C 5a	13 06						
							789 8/11	7 16						
							841260			15				
							999 7/12	3 73				93 76		
Dec					68 20		884458			15		69 51		
1919					101 20			24 25		45				
Jan					30 80		ap 38968			15				
							1095 2/12	3 72						
Feb							1222 4/1	14 93						
							1582 4/2	18 66						
							" "	3 73						
							ap 2516			15				
							1720 14/2	3 73						
							1871 3/3	3 65						
							2049 18/3	3 65						
							2049 18/3	14 60				37 73		
					64 90			66 68		30		55		
Apr					33		Alay a 41248			15		92 73		
							ab 29 2/4	3 49				69 43		
							ab 146 9/4	3 49						
							ab 383 2/4	3 65						
May					22 00		ab 876 1/5	4 38				23 30		
							Alay a 81639	54 43		15		8 30		
					55			54 43		30				
June							SR 82692 of 4913 full settlement	8 30						
								8 30						

NON EFFECTIVE. ACT.

DUPLICATE.

For use of A.P. and S.A. Branch, Ottawa.

P. 851 A.

LAST PAY CERTIFICATE.

Military District.....

Dispersion Area.....

No. 86964 Rank Ser Name Murkins F Unit Arty.

Nominated for embarkation to Canada: Date 20/5/19 with 2 CDD 19/5/19

CREDIT.

\$ ¢

BALANCE FORWARD

as at 31-3-19 191

37 73

EARNINGS:—

From 1-4-19 to 20-5-19

50 days at \$ 110

5500

..... days at \$

..... days at \$

ANY OTHER CREDIT:—

Interest on Deferred Pay NIL

DEBIT.

\$ ¢

CASH PAYMENTS:—

Date	A.R. No.	Paying Unit	Amount
<u>1/4</u>	<u>29</u>		<u>349</u>
<u>1/4</u>	<u>145</u>		<u>349</u>
<u>2/4</u>	<u>353</u>		<u>363</u>
<u>1/5</u>	<u>21</u>		<u>4383</u>

5443

OTHER CHARGES:—

WAR LOAN INSTALMENTS CHARGED:—

"VICTORY" WAR LOAN

Amount Subscribed - \$

Amount Paid - \$

Balance due - \$

ASSIGNED PAY for period

from 1-4-19 to 31-5-19 at \$ 13

3000

per month in favour of:

Name Mrs M Murkins

Address 45 Ashfield Rd

201g. Herts

Relationship M

SEPARATION ALLOWANCE, if any, in favour

of same party as Assignment at

\$ NIL per month

BALANCE DEBIT

BALANCE CREDIT

9273

2 Pay NIL

830
9273

BALANCE GIVEN IS SUBJECT TO ANY CHARGES AND/OR CREDITS ENDORSED ON THE REVERSE HEREOF.

THESE PAYMENTS TO DEPENDENTS:—

(Strike out whichever inapplicable.)

Have been stopped. Effective 1-6-19 and will only be re-opened on receipt of instructions from P.M.G., Ottawa, or Military District Paymaster, Canada.

or

Being a Canadian payment, cancellation or otherwise of future payments will be dealt with by Ottawa.

COMPILED BY Edmond

CHECKED BY [Signature]

CERTIFIED CORRECT

Capt.

Lieut.

Date 20-5-19 191

FOR BRIGADIER GENERAL
PAYMASTER GENERAL, O.M.F.C.

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)

1. No. <i>86964.</i>	
2. Rank. <i>Bdr.</i>	
3. Name. <i>Nutkins Frank.</i>	
4. Unit. <i>Q.F.A. 1st Bn</i>	
5. Date of Discharge <i>20/7/19</i>	Place <i>Edinburgh</i>
6. Reason for Discharge..... <i>K. R. & O. Para. 392 Sec. XXV</i> <i>(Being Demobilized in England-C.R.O. 5222)</i>	
7. Authority. <i>D.B.</i>	<i>19.5.19</i>
8. Proposed Residence after Discharge..... <i>4 Goldfield Cottage</i> <i>Tring Hert'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>CAFB 2079</i>	
<i>F Nutkins</i> Signature of Soldier.	
10. CONFIRMATION. The discharge of the above named man is hereby confirmed.	
Place <i>Edinburgh</i>	Date <i>20/7/19</i>
<i>A. Highton</i> Signature..... (O. C. Discharging Unit.)	

SHORT FORM NO. 1011

PROCEEDINGS ON DISCHARGE

(Demobilization)

1. Name	[Handwritten Name]		
2. Grade	[Handwritten Grade]		
3. Branch	[Handwritten Branch]		
4. Date of Discharge	[Handwritten Date]	[Handwritten Place]	[Handwritten State]
5. Reason for Discharge	[Handwritten Reason]		
6. Proposed Residence after Discharge	[Handwritten Address]		
7. Certificate to be signed by Soldier	<p>I hereby acknowledge that at the indicated place and date I received my discharge Certificate</p> <p>[Handwritten Signature]</p> <p>Signature of Soldier</p>		
8. Confirmation	<p>The discharge of the above named man is hereby confirmed.</p> <p>[Circular Stamp]</p> <p>[Handwritten Signature]</p> <p>Discharge Unit</p>		

K. R. & O. Para 302 Sec. XXV
(Date Demobilized in England (A.R. 0.222))

LIST OF DISCHARGE DOCUMENTS

Attestation Paper, Physicians	Medical Form W. 33
or Particulars of Record	Medical Form W. 133
Field Contact Sheet	Medical Form W. 17 or A.F.B. 132
Causality Form	Medical Form W. 54 or A.F.B. 108
Last Day Certificate	Medical Form W. 64
Certificates that listing documents are unobtainable	
Medical History Sheet	Medical Form B. 212 or A.F.B. 178
Proceedings of Medical Board	M.R.B. 327, A.F.B. 179 or A.F.A. 45
Personal History Sheet	Medical Form B. 242
Medical History	M. F. W. 122 or D. M. 2, 1935
Regimental Contact Sheet	Medical Form B. 269
Company Contact Sheet	Medical Form B. 282

THESE DOCUMENTS ARE AVAILABLE TO THE PUBLIC

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