Regt No. 25009

ATTESTATION PAPER.

No. 1106

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? — Joseph Wilson
2. In what Town, Township or Parish, and in what Country were you born? — Ireland
3. What is the name of your next-of-kin? — Brother - William Wilson
4. What is the address of your next-of-kin? — General Post Office Saskatoon
5. What is the date of your birth? — 17 Sept 1885
6. What is your Trade or Calling? — Labourer
7. Are you married? — Single
8. Are you willing to be vaccinated or re-vaccinated? — O.K.
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

Joseph Wilson (Signature of Man).

A Bailey (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Joseph Wilson, 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.

Joseph Wilson (Signature of Recruit)

Date 23 / Sept — 1914. [illegible] (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Joseph Wilson, 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.

Joseph Wilson (Signature of Recruit)

Date 23 / Sept 1914. [illegible] (Signature of Witness)

CERTIFICATE OF MAGISTRATE or officer

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 23rd day of Sept 1914.

C.H. Clark Kennedy (Signature of Justice) or officer.

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

P C Buchanan (Approving Officer)

100 M.—8-14.
H.Q. 1772-1-13.

5 RHC

Description of Wilson J. on Enlistment.

Apparent Age 27 years 11 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 8 ins.

Chest measurement: Girth when fully expanded 39 ins.
Range of expansion 4½ ins.

Complexion Fair

Eyes Blue

Hair DK Brown

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

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).

2 Vacc. Left Arm
White scar ½" wide on front of Left knee

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 Aug 29 1914.

Place Valcartier

Lieut Capt R Wodehouse
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 or Company

J Wilson 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 H Hall Kennedy (Signature of Officer)

Date 23rd Septr 1914.

ATTESTATION PAPER.

No. 25009

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE. TRIPLICATE

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Wilson
1a. What are your Christian names?	Joseph
1b. What is your present address?	50 Mance St. Montreal, Que. Suf.
2. In what Town, Township or Parish, and in what Country were you born?	Ireland.
3. What is the name of your next-of kin?	Charles Wilson Suf.
4. What is the address of your next-of-kin?	County Caven Ireland
4a. What is the relationship of your next-of-kin?	Father
5. What is the date of your birth?	17th September 1887
6 What is your Trade or Calling?	Laborer
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?	No.
10. Have you ever served in any Military Force? If so, state particulars of former Service.	Yes. 3 years 5 months
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, Wilson Joseph, 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.

J. J. Wilson (Signature of Recruit)

Date January 23rd 1918. P. D. Lenault (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Wilson Joseph, 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.

J. J. Wilson (Signature of Recruit)

Date January 23rd 1918. P. D. Lenault (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 Montreal this 24th day of January 1918.

(Signature of Justice)

M. F. W. 23
750M—6-16
E. Q. 1772-39-341

Description of Wilson, Joseph on Enlistment.

Apparent Age 32 years 4 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 8 ins.

Chest measurement: Girth when fully expanded 38 ins.
Range of expansion 2½ ins.

Complexion Fair

Eyes Blue

Hair Dark Brown

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

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).

R. D. = 40
L. D. = 40
R. EAR OK
L. EAR

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* for the Canadian Over-Seas Expeditionary Force.

Date 191 .

Place

Medical Officer.

MOBILIZATION CENTRE, M. D. #4

MOBILIZATION CENTRE M. D. No. 4 JAN 23 1918

"C" Fit for Service in Canada only.

*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.

Wilson Joseph 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)

Lt.-Col.
Commanding 2nd Depot Bn., 2nd Quebec Reg't

Date January 22nd 191 8

REGIMENTAL DOCUMENTS

NAME Wilson Joseph REGT. No. 25009 UNIT 13 Bn 2 Dep. Bn 2 Ow Regt H. Q. FILE No.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
2	ATTESTATION PAPER (M.F.W. 23, 133 or 51)					DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					CATEGORY
	TRAINING HISTORY SHEET (M.F.W. 113)					
	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1	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)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					CATEGORY
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
	MEDICAL EXAMINATION (M.F.W. 129)					Medic Unfit
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	CARDS Cas					
	PAY-SHEETS					
1	A.F.B 122					
1	Index Card					

W. 2589
25M.—1-23
1772-39-1377

Reg - W - 3956

R 5-4-21

Number 25009 Rank Sgt

Surname WILSON

Christian Names Joseph

Unit 13th Bn Can Inf Theatre of War France

Dates of Service

Remarks Father Chas Wilson Co. Cavan, Ireland
Kellershandre
St Marie St
Montreal P.Q.
Canada

Latest Address

Roll No.

Page 124

No 25009. RANK Pte. NAME Wilson, J.

T. O. S. UNIT 5th Regt. "Royal Highlders of Can"

M. D. 4

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914.	1914.			
~~Aug. 5~~	Aug. 16.	✓.		
Aug. 19.	Aug. 24.	W.		
Aug 25	Sept 21	✓	Now shown on 13th. Bn. pay lists	
Sept 22	Oct. 31	✓		

UNIT SAILED
OCT 3 1914

R. 149.

Name Wilson Joseph Rank Cpl. Reg. No. 25009

1-13-26 Unit 13th Battalion

Next of Kin Canada —

Disch

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
10.5.16.	To 2 Can. Field Ambulance		Lumbago	367		
28.5.16.	To Duty.		do	379		
28.5.16	Reserve Unit		do	A434		
8.9.16	4 C.G.H.		Cont. Back	A468		
9.9.16	To Duty.		do	A468		
12.9.16	Reserve Unit		do	A476		
10-4-17	3 Can. G.H.	Boul.	Cont. R. Leg & Scalp Acc.	A637.		17-4 M2020
17-4	Merryflatts	W.H. Glasgow	Cont. R. Knee GSW. Head	B345		
11-6	P.P.C.R.X.	Ramsgate	do	B151		Rit
20-6	Disch to Canada		do	B.154		

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List

H. Q. FILE No. 649-

NAME Wilson Joseph

REGT'L. No. 25009

RANK AND CORPS Cpl 13th Battn

CABLE NO.	CABLE DATE	NATURE OF CASUALTY
		C.
03029	21-10-16	Rejoined Regt Sept. 12th 1916.
w.o.m. M2010	17-4-17	Adm. to No. 3. Gen. Hosp, Boulogne April 10th 1917. Contusion leg. Scalp! Acc.
7357	22-10-17	Sailed from Liverpool for Canada per the S.S. Grampian on the 18th Oct. 1917. Special authority.

L. L. Job 86907- -M. & D. 16065.

M. F. W. 42—50m.-10-15.
H. Q. 1772—39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 367	No. 2. Can. Fld, Amb	10-5-16	Lumbago
A 379	" " " "	28-5-16	To Duty
A 434	Reported from Base	28-5-16	Reported Unit
A 468	4 Can. Fld. Amb	8-9-16	Contusion back.
A 468 2	" " " "	9-9-16	" " (To Duty)
A 476	Reported from Base.	12-9-16	" "
A 637	3rd Can Gen. Boulogne	10-4-17	Cont. R leg scalp acc
D 245	Murryflatts War, Glasgow	17-4-17	" " & gsw. Head
B 151 (2)	PPCLI & Ramsgate	11-8-17	" " " "
B 151	Invalided to Can	20-9-17	" " " "

ADMITTING OFFICER.
P.P.C.R.C.H. SPL.

D.M.S. 1317

HOSPITAL.

A. & D. No. ..... Ward C-203-3

Unit 13th Bn. ..... Sick or Wounded.

Regtl. No. 25009 ..... Pl. of Act'n France

Rank Sgt Name Wilson J.

Age 28 Religion C of E

Service Compl'd 3/12 Time with Field Force 2/12

Diagnosis Chronic Knee

Admitted 12 JUN 1917 Discharged Aug 6 1917

Transferred 1st Central Convalescent Depot - W Sandling

RECORD FURTHER REMARKS ON BACK.

N.A.Q.

649-W-3956.

Wilson J. ~~Cpl.~~ Sgt. #25009-C.E.F. 1st. Q.R.D.

Medals & Dec. (father) (m) Chas. Wilson, Esq., Kelleshandre, Co. Caven, Ireland.

P.&.S. (father) ditto

Mem. Cross. (Nil) Mother, dead. (Not married)

Elig. for star Pte. / 3rd Bn

" " YM

M.J. " BWM

Death not due to Service

File 25 3/12

CARD NO. 4

D.O.S. Div. 4

FOLL. 102/1

10/4/18.

SURNAME. Wilson.

CHRISTIAN NAMES Joseph.

REGL. No. 25009. RANK Pte

UNIT 2nd Que Regt. 2nd Dpo. Bn.

FORMER CORPS Nil.

NEXT OF KIN.

NAMES IN FULL Wilson, Charles.

RELATIONSHIP TO SOLDIER Father.

ADDRESS Killeshandre, County Cavan, Ireland.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Ireland. DATE Sept. 17th 1887.

PLACE OF ATTESTATION Montreal, P. Q. DATE Jan. 23rd 1918.

MARRIED SINGLE WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
Wilson	J	25009

Rank	Unit	Co.	Troop	Batty.
Pte	13 Batt		1. Que Reg	

Hospital — Date of Admission

Transferred No 2 C F Amb. Hosp. 10.5.16
4 Can. Fld. Amb. Hosp. 8-9-16.
3 C Gen B'ogue Hosp. 10.4.17.
Merryflats War. Glasgow Hosp. 17.4.17

Diagnosis
(1) Lumbago
Later Diagnosis (if changed)
(2) Contusion Back
(3) (Contus. R. leg + scalp. acc.)
Additional Diagnosis: if more than one state present
(Contus R. Knee. G.S.W. Head.)

DISPOSITION — To Duty — Date 9-9-16

	REMARKS
~~Con. 31.5.16 A367~~	To Duty 28.5.16
" 14.6.16 A349	Rej. unit. 28.5.16
17.8.16. A434	
C.L. 26-9-16 A468 (1) (2)	Rep. from Base.
" 5-10-16 A476 (2)	Rej. unit. 12-9-16
17.4.17. A637	
26.4.17 B34	Invalided to Canada. 20.9.17.
28.2.18 B101 (2)	

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

DM

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	Princess Pats. Can. Red Cross Ramsgate	11. 8. 17
2.		
3.		
4.		
5.		
6.		
7.		

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

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-9-20.

Casualty Form—Active Service.

Unit, Regiment or Corps 2nd DEPOT BN. 2nd QUEBEC REG'T.

Regimental No. 25009 Rank Private Name WILSON Joseph

Enlisted (a) 23-1-18 Terms of Service (a) C. E. F. CEF Service reckons from (a) 23-1-18

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

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

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				

(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				

(8915)—Wt. W4862—540.—600,000.—9-14.—G. A. T. & S., Ltd. Forms B. 103/1.

Army Form B. 103.

Sgt.

Casualty Form—Active Service.

Certified Correct, K.D. 101 Dep 1/13/19.

Regiment or Corps 13th Canadian Battalion, The Royal Highlanders of Canada.

Regimental No. 25009 Rank Pte. Name Wilson, Joseph

Enlisted (a) Aug. 29 1914 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				
		Arrived in France	The Field	15/2/15	
28/6/15	O.C. 13th Can Batt	Promoted Corporal	The Field	1/6/15	(K 3-25-13)
8/10/15	O.C. 13th Bn	Granted 7 days leave		30/9/15	(B213)
15/10/15	"	Returned from leave		7/10/15	(B213)
24/12/15	O.C. 13th Bn	To N.C.O's course	—	20/12/15	(B213)
21/1/16	"	Rejoined from N.C.O. course	—	14/1/16	(B213)
13/5/16	36 Amb	Lumbago	Adm. 36 F. Amb	9/5/16	A36 D.C.P. 327, 26/5/16
			Trans. to 2 C.F. Amb.	10/5/16	
14/5/16	2 C.F. Amb.	Lumbago	Adm. 2 C.F. Amb.	10/5/16	A36 D.C.P. 329, 28/5/16
4/6/16	"		Disc. to duty	28/5/16	A36 D.C.P. 340, 11/6/16
4/8/16	O.C. 13th Bn	Rejoined Unit	The Field	28/5/16	B213 D.C.P. 385, 12/8/16
4/8/16	O.C. 13th Bn	Appointed Acting Sergeant		1/7/16	B213 D.C.I. II Ord. 32, 14/8/16
1/9/16	"	Reverts to Rank at own		13/8/16	B213 D.C.I. II Ord. 37, 7/9/16

(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., special qualifications in technical Corps duties.

[P.T.O.

W 279. 13th Bn T.O.S 47. 17. 4. 17
Sick from 6. 8. 17 to now 18. 8. 17

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				
9/9/16	4 C Hosp.	Contin. Back	4 C Hosp.	9/9/16	A 36. D.C.P. 406, 21/9/16
		Disc. to duty		9/9/16	
15/9/16	O.C. 13 Bn	Rejoined Unit.	Field	12/9/16	B213 D.C.P. 410, 29/9/16
10/11/16	13/Bn	Promoted Corporal	Field	8/11/16	B213 Pt II Od 71: 20/11/16
27/11/16	13/Bn	Granted 10 Days leave. -		24/11/16	B213 Pt II Od. 76, 6/12/16
15/12/16	"	Returned from leave -		8/12/16	B213
26/12/16	13/Bn	Promoted Sergeant	Field	26/12/16	R.O. 97-570 Pt II Od. 2, 4/1/17
10/4/17	3 Can Gen	Accid. Contin. R. Leg	3 Can Gen	10/4/17	W3082
11/4/17	A.S. Princess Elizabeth	Invalided to England & Posted to 1st Quebec Regt. Depot. Shorncliffe.		11/4/17	W3083 - 2397 Pt II Od. 37, 21/4/17. Chas. D. Maxwell Lieut. for Major D.A.A.G.
28.4.17	1st ORD.	T.O.S. from 13th Bn.	Shorncliffe.	11.4.17	Pt II DO 47.

L. Niven Lieut.
for Colonel i/c Records, COMD

FORM OF WILL

I, Wilson Joseph (Name in full)

Regimental Number 25009 serving in 2nd. Depot Bn. 2 Quebec Regt

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I devise all my real estate unto

Wilson Charles
Caven, Ireland

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

absolutely, and my personal estate I bequeath to

Wilsons Charles
Caven
Ireland

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

NOTE
This space for the appointment of Executor if necessary.

IMPORTANT NOTE
This must be signed and Dated by THE SOLDIER HIMSELF.

this 23rd day of January A.D. 1918

J. Wilson Signature of Soldier.

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

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

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness: H. Perrier
Address of Witness: Peel Street Barracks
Occupation of Witness: Soldier
Signature of Second Witness: P. E. Demarce
Address of Witness: Peel St Barracks
Occupation of Witness: Soldier

M. F. W. 82.
300M.-12-16.
1772-39-983.

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 2nd Depot Bn. 2nd Quebec Regiment

(2) Regimental Number 25009

(3) Full Name of Soldier Wilson Joseph

(4) Place of Birth Ireland

(5) Are you married, or not? No.

(6) If married, state,
(a) Full name of your wife Nil.

(b) Present Postal Address Nil.

(7) Are you a widower? Nil.

(8) Have you any children? Nil.

If so, give number of boys and girls Nil.

Also their names and ages

NOT APPLICABLE

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

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

If so, state name and address ..... Chas. Wilson, County Caven Ireland

(10) Is your Mother alive ? ..... No.

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

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

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

(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.

..... Nil.

(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.

..... Nil.

(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.

..... Nil.

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

If so, in what Company ? ..... Metropolitan Life Ins Co.

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

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

NOT APPLICABLE

Lt.-Col.
Commanding 2nd Depot Bn. 2nd Quebec Regt.
Officer Commanding.

Date ..... Montreal, January 23rd 1918

Reference copy of original C.E.F. Discharge Certificate issued to the soldier shown hereon.

This copy is to be attached to a soldier's discharge documents and must contain the exact wording which appears on the original certificate, and must be signed by the Officer carrying out discharge.

This is to Certify that No. 25009 (Rank) Private

(Name in Full) Joseph Wilson enlisted in

2nd Depot Bn. 2nd Quebec Regiment.

Canadian Overseas Expeditionary Force, on the 24th of January

191 8, and accompanied said unit to Montreal, Que

~~was returned to Canada,~~ and discharged from the service at Montreal, Que

on the 10th of April 1918, in consequence of being

medically unfit (Auth. A.A.G. MD4 22-W-889)

DESCRIPTION ON DISCHARGE

Age	32---4	Marks or Scars	NIL
Height	5---8		
Complexion	Fair		
Eyes	Blue		
Hair	Dark Brown		
Trade	Laborer		

Signature of Man Joseph Wilson

Officer in charge Discharge Depot.

Place and Date Montreal, April 11th.1918 Lieut-Colonel, Comd'g 2/2nd Quebec Regiment.

M. F. W. 39 a.
50m.—8-17.
H. Q. 1772-39-882.

CANADIAN OVERSEAS EXPEDITIONARY FORCES

Discharge Certificate

No. 25009

Rank Private

Name Joseph Wilson

Unit 2nd Depot Bn. 2nd Quebec Regiment.

Address on Discharge

50 Mance Street

Montreal, Que

Canada

His conduct and character while in the Service have been : Good

Place Montreal, Que

Date April 11th.1918

Lieut-Colonel,
Commanding 2/2nd Quebec Regiment.

Campaigns NIL

Medals and Decorations NIL

Army Form B. 103. Regimental Number 25089

Casualty Form—Active Service.

Regiment or Corps 13th Bn

Rank Pte Surname Wilson Christian Name Joseph

Religion ..... Age on Enlistment ..... years ..... months.

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

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

Extended { ..... } Re-engaged { ..... } Qualification (b) .....

or Corps Trade and Rate .....

..... 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 ...			
		Disembarked...			
		TAKEN ON STRENGTH 1st. Quebec Regt'l. Depot SHOREHAM. Pt. II. D.O.		4. 7. 17	
20. 9. 17		1st. Que. Regt'l. Depot. ON COMMAND TO C.D.D. Buxton Pt. II. D.O.		20. 9. 17	
					Geo. Burke Capt. ADJUTANT. 1ST. QUEBEC REGT'L. DEPOT.
21 SEP 1917		TAKEN ON STRENGTH C.D.D, BUXTON Pt. II ORDER No. 224.			R. Vine Lt. Col.
		Commanding			Canadian Discharge Depot.
18 OCT 1917		EMBARKED FOR CANADA FROM LIVERPOOL			R. Vine Lt. Col.
		Commanding			Canadian Discharge 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) Signaller, Shoeing-Smith, &c.

[P.T.O.

[M1101] W6135/M768 1000m 9/16s 153 G & S Forms/B.103/4. E./354.

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				

Forms
I. 1237
10

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
370 179	25009	Sgt.	Wilson	Joseph
Year	Unit.		Age.	Service.
1917	13th Canadians (B)		28	2 8/12

Station and Date. S3

Disease Scalp wound and bruised knee

Admitted to this Hospital on the 17th April 1917 from Rastleigh after being there about 4 days. Suffering from a Sprain of the Right Knee also I.C.J. thumb & Contused Scalp, which are practically better.

By a fall from a cart, a scalp wound of a superficial kind was made on the vertex behind & the right knee was contused or sprained

James Kerr Lover Major

22.4.17. Anti-tetanus injection 500 units (98 B)

28 V 1917 May go to convalescent home

McLeve

31.5.17 Approved

Richard Troy
Major R.A.M.C.

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

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S.

P.T.O.

Station and Date.	

S.111

Army Form B. 117.

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

114
Gen. No.
4269.

Certificate of Medical Officer.

No. 25009 Sgt. J. Wilson 13th Canadians

was admitted to hospital on the 19th day of April 1917 suffering

from Scalp wound and bruised right knee

†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 claims that he was in the performance of military duty at the time of the accident.

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

Station Newport Gosvan James Kirkpatrick Major

Date April 30th 1917 *Medical Officer in Charge.*

Certificate to be signed by soldier.

I, _____ hereby declare that the injury sustained by me on the _____ did not occur while I was in the performance of military duty.

_____ *Soldier's Signature.*

Station _____ _____ *Signature of Medical Officer.*

Date _____ _____

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.

(92261) W 3725—1772 300,000 6/15 J J K & Co. Form/B. 117

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. 25009 Rank Sgt Name Wilson J.

Corps Special Service M.D.No.4. who was* Discharged

On January 5th 1918 191..., to .....

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from January 1st 1918, to January 5th 1918, the inclusive date of transfer or discharge.

Dr.	$	c	Cr.	$	c
Bal. Dr. from prev. month			Bal. Cr. from prev. month	50	00
Advances by Cheques No.			Regt'l Pay 5 days at $ 1 c 35	6	75
Advances by Cheques No.			Field Allow. 5 days at $ c 15		75
Assigned Pay No.			Other Allowances*		
Other Charges* Q.M.S.	4	50	Other Credits* Civillian Clothing	15	00
Payment on transfer or discharge No. 21133	66	20			
Balance Cr. (to be paid by the new unit)	------	---	Bal. Dr. (to be deducted by new unit)	------	
Total	70	50	Total	70	50

*Give Particulars.

A monthly stoppage of $ ------ (†) has -------- (‡) been paid on account of Assigned Pay for the month of ---------- 191... to (Assignee) -------

(Address) ----------

(†) 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.

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

REMARKS:—

State (1) date of enlistment Not Known

(2) if married and if a Separation Allowance Card has been submitted No Record

(3) cause of discharge and authority G.L.240 & D.O.755

If discharged from the Contingent, state if Stop Payment advice for Assigned Pay has been forwarded, and date .....

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 7th 1918

Place Montreal P.Q.

Capt. *Paymaster*
Special Service M.D.No.4.

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

M. F. W. 44.

150m.—4-17.
H. Q. 1772-39-993.

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. 25009 Rank Private Name Wilson Joseph.

Corps 2nd Depot Bn 2nd Quebec Regt. Who was* Discharge

On 10-4-18 1918, to ——

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1st 1918., to 10th 1918., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Bal. Cr. from prev. month		
Advances by Cheques No.			Regt'l Pay 10 days at $ 1 c 00	10	00
Advances by Cheques No.			Field Allow. 10 days at $ c10	1	00
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges			Other Allowances*		
Payment on transfer or discharge No.	21	00	Other Credits* Clothing	10	00
Balance Cr. (to be paid by the new unit)	~~21~~	~~00~~	Bal. Dr. (to be deducted by new unit)		
Total	21	00	Total	21	00

*Give particulars.

A monthly stoppage of $ —— (†) has —— (‡) been paid on account of Assigned Pay for the month of 191.... and Sep'n Allce. for month of 191.... (to) Assignee ——

(Address) ——

(†) 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

Outfit Allowance of $ —— has been paid by Paymaster, Military District No. ——

REMARKS:—

State (1) date of enlistment 23-1-18

(2) if married and if a Separation Allowance Card has been submitted

(3) cause of discharge Medically Unfit. authority A.A.G. MD4 22-W-889.

(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 April 12th 1918

Place Montreal. Que.

J. A. Aubenault Capt.
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.

109M.—12-17.
H. Q. 1772-39-903.

Form R 122.
8750—15M—25-4-17.

Rank | Name WILSON, Joseph. | Reg'l No. 25009

Unit 13th Bn. | If in perm. Corps, What Unit? | Married or Single Single.

Place and Date of Enlistment Sept. 23rd 1914. | Place of Birth Ireland.

Name and Address, Next-of-Kin Mr. Wm. Wilson, G.P.O. Saskatoon, Canada.

Relationship Brother.

Assigned Pay Monthly $ | Payable to

Relationship

Separation Allowance $ | Payable to

Relationship

Discharge, Date and Place | Reason | Character

N/E. R.B. No 9803
File R.L.
Category M.U-CAN

H. W. V., Ld.—11319-1".

Report. Date.	Report. 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.
		Embarked for France		1.4.15	Nom. Roll
28.6.15	13th Bn.	To be Corporal	France	1.6.15	G.O. II D.O. 19
31.5.16	"	No 2 Can. Fld. amb.	Field	10.5.16	C&A. 367. Lumbago
14.6.16	"	To Duty	"	28.5.16	— A.379 ✓
17.8.16	"	Rejoined Unit	"	28.5.16	— A.434
14.8.16	"	app. Act Sergeant (with Pay)	"	1.7.16	G.O. II D.O. 32.
7.9.16	"	Reverts to Rank's own request	"	13.8.16	— 37
26.9.16	"	adm 4. Can. Fld. amb.	"	8.9.16	C&A. 468 Contusion Back
26.9.16	"	To Duty	"	9.9.16	C&A 468 ✓
5.10.16	"	Rejoined Unit	"	12.9.16	— 476 ✓

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.
20.11.16	13th Bn	Promoted Corporal	Field	8.11.16	Gr II D.O. 71.
4.1.17	"	Promoted Sergeant	"	26.12.16	— 2
21.4.17	"	Inv. Acc. Wd. posted to 1st QRD	"	11.4.17	— 37 Pr II D.O. 47. 28 4/17 of 1st Q.R.D.
17.4.17	"	adm: 3.C. Gen Hp.	Boulogne	10.4.17	C.L.A. 367 Cont. R. Leg. scalp. acc.
26.4.17	"	Merryflats War Hosp.	Glasgow	17.4.17	C.L.B. 345 Cont R Knee. G.S.W. head.
21.9.17	1st QRD.	o/comd at CDD Buxton for Disch'd to Canada	Sham.	20.9.17	Gr II D.O. 173.
26.10.17	"	Having proc. to Canada for Sgt Discharge, Cease of comd at CDD Buxton ex SOS	B'sholt	18.10.17	+ C.L. B151 7/28 2/18 " — 204.
	DD Dep	Fit for Duty	MD #4 Montreal	28/10/17	M.R. 388. Montreal Que.

P. 697.

25009 Sgt Wilson J.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS.

Date of Payment.	No of Acq. Roll	AMOUNT Francs	£	S.	$	¢	Place of Payment.	Name of Paymaster.	Remarks.
~~6.4.17~~		~~5~~				~~87~~	~~Fiscd~~	~~E P Farnham~~	~~Chgd October~~
15.6.17	373		1		4	86	Ramsgate	Inf Force and	
18.6.17	382		1		4	86	"	"	"
28.6.17	508		1		4	87	"	"	"
9.7.17	603		1		4	87	"	"	" Oct.
28.7.17	856		1		4	86	"	"	"
6.8.17	939		12		58	40	"	"	"
20.8.17	211		5		24	33	Shoreham	A G Law	
28.8.17	235		3		14	60	"	"	
8.9.17	246		2		9	73	"	"	
14.9.17	270		1		4	87	"	"	
17.9.17	273		7		34	07	"	"	

171.19

... ...													

HEAVY DRAFT HORSES.

	HAY	STRAW	OATS	MAIZE	* BRAN	* LINSEED	* CORN	* ROCK SALT			
...OVE ...											
... HAND ...											
... ...											

LIGHT DRAFT, RIDING HORSES AND MULES.

	HAY	STRAW	OATS	MAIZE	* BRAN	* LINSEED	* CORN	* ROCK SALT			
...OVE ...											
... HAND ...											
... ...											

* These issues are only Equivalents in lieu of Oats if demanded by Units.

...SE DELIVER THE ABOVE RATIONS ON.....DAY, THE.....DAY OF.....191

APPROVED

.....

QUARTER MASTER

.....

OFFICER COMMANDING

...UST BE DELIVERED TO THE O. I/C. SUPPLIES, ACCOMPANIED BY DAILY PARADE STATE, NOT LATER THAN 10 A.M. DAILY FOR DELIVERIES TO BE MADE ON THE FOLLOWING DAY

29247 THE MORTIMER SYSTEMS
OTTAWA, CANADA

NAME WILSON Joseph.

Regimental No. 25009

Unit 13th Battalion.

Date of enlistment 23rd Sept. 1914.

Place of birth. Ireland.

Married (yes or no) No

Amount of pay assigned monthly $ 28.00 S.P.R 28 4/16 eff. 1 4/16 a. Letter asp 65449 26/4/16

To whom payable Mr C J Wilson Killeshandra Ireland.

Name and address of next-of-kin
Mr. Wm. Wilson, Brother.
G.P.O., Saskatoon, Canada.

Date and place discharged

Reason for discharge

Character on discharge Canada

PAY OFFICE, K.E. BRANCH, FEB 27 1918, CANADIAN CONTINGENT

Entered on N.E. Card Index 96

J J Gillotson

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
22.9.14	31.10.14	40	1.00	40	40	10¢	4		44			44			44	
1.11.14	30.11.14	30	1.00	30	30	10	3		33			15			15	
1.12.14	31.12.14	31	1	31	31	10	3 10	18	52 10			52			52	Carried forward to Large Ledger sheet
1.1.15	31.1.15	31	1	31	31	10	3 10	10	34 20			30			30	
1.2.15	28.2.15	28	1	28	28	10	2 80	4 20	35							
1/3/15	31/3/15	31	1	31	31	10	3 10	35	69 10			12			12	
1/4/15	30/4/15	30	1	30	30	10	3	57 10	90 10			6			6	
1/5/15	31/5/15	31	1	31	31	10	3 10	84 10	118 20			12	25		37	$5 add asb
1/6	30/6	30	1	30	30	10	3	84 20	114 20			4	25		29	
1/7	31/7	31	1	34 10	31	10	3 10	85 20	122 40			4	25		29	Ro 77 11.7.15 Aff to date 1/6/15
								96 40				179				
								Adjustment of Exchange 4 78								
1/8	31/8	31	1	34 10	31	10	3 10	101 18	138 38			114 25			36 44	
1/9	30/9	30	.	33	30	.	3	101 94	137 94			72 25			32 22	
1/10	31/10	31	.	34 10	31	.	3 10	105 72	140 28			122 25			37 21	7 day Ra Ro 154
1/11	30/11	30	.	33	30	.	3	109 07	145 07			80 06 25			105 06	
1/12	31/12	31	.	34 10	31	.	3 10	140 01	177 21			229 25			47 96	
1/1 1916	31/1	31	.	34 10	31	.	3 10	229 25	266 45			69 25			31 97	
								344 8								
		247		518 50			49 70	11 145 78	84 50			319 86 25			544 86	

over

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					
				51850			4970	11 14	57934			31986	225		54486	
Feb 1	Feb 29	29	1.10	3190	29	10	290	3448	6928			69825			3198	
Mar 1	Mar 31	31	.	3410	31	.	310	3730	7450			130825		336	281 44	Rd. 336 credit in error Oct. 12 ad. A/P. $20 to 3176 in error by Ottawa Letter A/P. 6549 76/4/16
													240			
															20694	Dr. Bal
				58450			5570	11 14	65134			339972	515	336	85828	

MILITIA AND DEFENCE

ASSIGNED PAY.

To whom Mr. C. J. Wilson.

Address Killeshandra
Co Cavan.
Ireland.

Rate $25 50

[redacted] Commence May 1st 1915.

By whom assigned Wilson. J.

Regtl. No. 25009

Rank Pte.

Corps, &c. 13th Batn.

PAYMENTS.

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June		11876	50	
July		22987	25	
Aug.		34142	25	
Sept.		47831	25	
Oct.		61984	25	
Nov.		63968	25	
Dec.		98659	25	
Jan.	1916			
Feb.				
March			$200	Carried Forward.

ASSIGNED PAY.

By whom assigned Wilson. J.

Regtl. No. 25009 Pte. 13th Battn.

Month	Year	Cheque No.	Amt.	Pay Sheet	REMARKS.
Jan.	1916	118446	25 —		
Feb.		141183	25 —		
March		153079	25 —		
Apl.	$275		$ 275	Payment stopped A. G. Toronto.	Overpaid payment Stopped See file 65 [redacted] 5/16
May.					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1917				
Feb.					
March					
Apl.					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					

L. L. Job 801 M. & D. 5683.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

120

M. F. W. 12.
20m.—5-15.
H. Q. 1772-39-819.

① Miss Ida Newton

To Whom ~~Mr. J. Wilson~~

① 25 Essex Ave

Address ~~Killestandia~~

Montreal

P.Q.

~~Co. Cavan~~

~~Ireland~~

Rate ~~5-00 May pt~~

① 25.00 Aug 1, 1917.

By Whom Assigned Wilson J.

Regtl. No. 25009

Rank ~~Pte.~~ ① Sgt.

Corps 13th Bttn H Co

2 Yu-8 6/15

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			Duplicate sent to England for payment.
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			~~ENGLISH~~
Feb.				
March				a/c Re-opened-
April				① 2M- 16 8/17 - CD- 23 8/17
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

CONSOLIDATED ACCOUNT

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
18m.—4-17.
1772—39—819.

Sheet No. 2 Miss Ida Newton (Assignee)

Name of Soldier Sgt Wilson J. #25009 – 13th Battn.

L. L. Job 19227—M. & D. 7814.

25.00 Remarks. Aug 1, 1917

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				% reopened in Canada – 2M-16 8/17 - Eff 1 8/17
Aug.	25 L	A 18927	25	25.00 Aug Chq & Future. mailed 24/8/17 CW - 23 8/17
Sept.		E 40660	25	6
Oct.		A 23129	25	
Nov.		~~K 54686~~	~~25~~	K 54686 Cancelled 31-10-17
Dec.				A/c Closed
Jan.	1918			Ret'd per Grampian
Feb.			75	Date 18/10/17 F. X. 6/11/17
March				
April				Clerk
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name Wilson J.
Surname Christian Name

Regimental Number 25609 Rank Sgt.

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Address (in full) Deceased.

Rates:—Regimental pay $ per diem; Field Allowance $ per diem. Separation Allowance $ per month.

L.L. 53961—M. & D. 9721

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

Remarks:

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

File No. 019 486. J-170

WAR SERVICE GRATUITY.

Register No. Spec Reg 72/2143

Reg. No. 25009

Name Wilson J.

Address 635 St Catherine St W.
Montreal Que.

Dependent Nil

Address

Pay Soldier $ Director of Records
Estates Br.
Ottawa

Clerk W H Edsell
1-3-23

Pay Dependent $

Days 183 Rate 70 Due 420.00

Less P.D.P. credited 136.50

Less further Dr. Bal. or overpayment.

Net $283.50

R 113 26.10.20

Date	Ck. Order	Ck. No.	Amount		Remarks.	Date	Ck. Order	Ck. No.	Amount.	
1-3-23		9704	283	50	136.50 P.D.P. paid by M.D. #4.	1				
2					Bal not payable under P.C. 2419.	2				
3						3				
4						4	A M Pitts			
5						5		13 10/20.		
6						6				

495-D.P.-100M-6-19 (10248).

GEN'L AUDITOR
Posting checked by
.....
Date.....

31308/625

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

019486-J-37

Name Wilson, J.
Surname Christian Name

Regimental Number 25009 Rank Sgt.

Address (in full) 50 Mance St.
Montreal, P.Q.

Unit 13th Bn.

Original Unit

District where paid M.D.4

Date of Discharge 5-1-18

P. D. P. Filing Number 10-72-4

Rates:—Regimental pay $ 1.35 per diem: Field Allowance $ .15 per diem. Separation Allowance $ per month.

L. L. 22573—M. & D. 800P.

Total Credits 91 days		FIRST PAYMENT Cheque No. A	Date	Amount 30 days		SECOND PAYMENT Cheque No. B	Date	Amount 30 days		FINAL PAYMENT Cheque No. C	Date	Amount 31 days		Balance Over-payments to be Recovered		Total Amount Paid	
136	50	1431	7-1-18	45	00	1414	21-2-18	45	00	1409	21-3-18	46	50			136	50

Remarks:

M. F. W. 127.
50M—6 17.
1772 39-1140.

Dec'n No 31308/645 W. S. G. File No 019486-J-170

Award 183 days at $ 70. per day $ 420.00

S. A. .....months at $ .... per mo. $..... $

Less P, D. P. Credited $136.50

$283.50

Less further debit balance $.....

Net due paid as below 283.50

TO SOLDIER				TO DEPENDENT			
Order No	Cheque No	Amount		Order No	Cheque No	Amount	
~~6549~~	~~30443~~	~~451174~~	~~210.00~~ ✓				
~~37049~~	~~18884~~	~~479297~~	~~73.50~~ ✓				
~~Total~~			~~283.50~~				
		283.50	Total				

GEN'L AUDITOR
Posting checked by
Date 30/10/19

Sol.
635 St. Catherine St. W.
Montreal, Que.

cheque 451174 for 210.00 cancelled 16-7-19 9-7-19

awaiting letter address. J.E.L. 7.8.19

A.B.B. 28-4-19.

Cheque 479297 cancelled to 15243

Make no payments of W.S.G.
"Soldier deceased"
P.A.B. ruling on file. J.E. Lowes 2.9.19.

Sgt Name Wilson Joseph.

M. F. W. 41
1 0M—7-16
1772-39 889.

L. P. C. No. W.2111

Regimental No. 25009

Unit 13th Bn.

Date of enlistment 23.9.14

Place of " Valcartier.

Married (yes or no) no.

Amount of pay assigned monthly $ 25.00 31 10/17 = 590.00

To whom payable Miss Florence Drummond 208 Olympia 14 11/17 University St Montreal Que.

Home

~~Name and~~ address of ~~next-of-kin~~ 15116 Park Ave Montreal Que.

M.B. 1.10.17. Duty.

Date and place discharged

Reason for discharge

Character on discharge

Cat. C III H.Q. 649—W—3956

L. 4. Job 5351—M. & D. t.880.

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
	29.9.17							10934 ✓								E. L. P. C.
30.9.17	30.11.17	61	135	83.70	62	15	9.30		20234					9000		C.P. Que.
													✓	487		A.R. 10932
													✓	1460		" 12578
														973		Boat.
													2500		14420	Oct. 17.
												Cr Bal			5814	L.P. Grand out 8 11/17
									20234						20234	showing of credits 30 11/17
Cr Balance								5814								and f'd M.D. No IV
3/1/18	Eng Sup L P 6 "Sick Furlough"							✓ 876	6690	Cr Balance		6690			6690	Eng Sup L P 6 M & D 4 4/1/18
	Cr Balance							6690		Eng Sup L P 6		23/18		101		Railway Warrant " 8/17
									6690	Cr Balance				6589	6690	Sup L.P.6 M & D 4. 3/18

J.O'M.
17.12.17

Eng A.A.C. — 1 4/15 - 30 9/17 = 575.00

M. F. W 41
1 0M—7-16
1772-39 889.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

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					

L. L. Job 70481—Req. 5220.

126

M. F. W. 12.
10m. 11 14.
H. Q. 1772 39-819.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

To Whom Miss Florence Diamond,
Address 208 University St.,
Montreal, Canada.

Rate $20.00 April 1/15.

By Whom Assigned J. Wilson,
Regtl. No. 25009.
Rank Pte.
Corps 13 Battn. H. Co.
2nd.

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April		J24556	20	
May		H8310	20	
June		G9798	20	
July		F9142	20	
Aug.		E10462	20	
Sept.		D12794	20	
Oct.		C13252	20	
Nov.		A18241	20	
Dec.		J10848	20	
Jan.	1916	J12533	20	
Feb.		H18442	20	
March		G18695	20	Stopped Apr 1. 16. 4 m. of apr 20. 16.

11

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
60m.—12-15.
1772—39—819.

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Sheet No. 2. Miss Florence Diamond

Name of Soldier Wilson J. Pte

#25009

L. L. Job 89002.—Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
			$20.00	13th. Battn
Cancelled, April	1916	~~H957~~	~~20~~	Stopped Apr. 1. 1916. 4 M. lable of Apr. 20. 1916. HAM
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

Month.	Year.	Cheque No.	Amt.		Remarks.
Aug.	1918				
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1919				
Feb.					
March					
April					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1920				
Feb.					
March					
April					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					

P. 60

Married or Single: Single

Place of Birth: Ireland,

Name and Address of Next of Kin: Mr. Wm Wilson
G.P.O. Saskatoon. Canada

Relationship of Next of Kin: Brother

Name and Address of Next of Kin:

Relationship of Next of Kin:

Separation Allowance Monthly $ Effective (Date)

Payable to

Relationship of Dependant

Casualties, Promotions, &c.

Particulars	Effective Date	Authority
Appd Sgt.	1/7/16	AO 32. 14/8/16
Reverted to Ranks	13/6/18	

Admissions to Hospital, &c

Date Admitted	Date Discharged	V. or A.	Name of Hospital

Reg'l. No. 25009 Rank Cpl. Sgt. Name Wilson Joseph

If in Perm. Corps What Unit Unit 13th Battn

Permanent Force Allowances

Place of Attestation

Date of Attestation 22nd Sept. 1914

Transferred to C. C. A. C. Date 29.4.17 Authority C.L. 3345 26.4.17

Transferred to But Hosp Date 31.5.17 Authority AR

Transferred to Pay 2 L Date 27.9.17 Authority B.G.O. Shoreham 3/9

Discharge to Canada

Transferred to N.B.D. Date 30.9.17 Authority

Assigned Pay Monthly $ 25.00 Date Effective 1/8/17

Payable to Miss Ida Murton. 25 Essex Ave. Montreal. Que. Relationship Friend

Assigned Pay Monthly $ Date Effective

Payable to B Relationship

Stop-Payment Form (Assigned Pay) Rendered (Date) Stopped Effective 1.10.17 Reason Dis to Canada

Discharge Date and Place Canada 29/9/17 Reason and Authority B.G.O. Shoreham 3/9/17

Account Transferred to Non-Effective Branch (Date) Med unfit

Account Transferred to Officers' Pay Branch (Date) H.F. Gillotson B C 29

Date	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
			584	50			55	70						11 14	651	34											33992	515 –	3 36	858	28		206	94		
Apl/30	30	1.10	33		30	10	3								36									698	349					10	44		181	41		
May/31	31	1.10	34	10	31	10	3	10							37	20	1317	9/–	1359	38/5				341	341					682			151	03		
June/30	30	–	33	–	30	–	3	–							36	–			1389	18/6					256				~~256~~	2 ~~44~~ 56			117	59		
July/31	31		34	10	31		3	10							37	20			1421	3/7					349					3 49	956		83	88		
Aug/31	31	1.35	41	85	31	.15	4	65						9 30	55	80	1458	21/7	1508	15/8				543	436					~~979~~ 47			37	67		App. Aug. 1/7/16 BO 32 14/8/16
Sept	30	1.00	30		30	10	3	00							33 –		1539	23/8	1588	17/9				760	761				760	1283			17	50		
Oct	31		31		31		3	10							34	10	1604 7/10 1608 27/10							761 761						5 24	11 36					
Nov	30		40	50	30		4	50						24 40	69	40	1697 28/11 1667 20/10							761 761						5 23	75 53					Underwritten pay Sept. Oct. 1916
Dec	31		41	85	31		4	65							46	50	1751 21/12 1775 16/11				7G 918 30/11		Cash 5/12/16	872 349		1460	2433			5 14	70 89					
			87	80			87	80																											
Jan	31	1.50	46	50											46	50	1795 31/12 1853 11/1							593 1281	872					26 16	91 23					
Feb.	28.	1.50	42												42		1882 25/1							523						5 23	128					
	331		1050	20										44 84	1125	04								6359	2864	14 60	364 25	875	10 96	9970	4					

Smith Ledger Sheet.

25009 Sgt Wilson, J.

Deferred Pay to be figured from 1/4/17 only.
see letter on file re $240.00 can. A.P. charged

DATE 1917	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits
			1080	20										44 84	1125 04
Mar	31	1.50	46	50											46 50
Apl 28	28	1.50	42	-											42 -
Apl 29-30	2		8	00										44 84	1213 52 / 3 00
May 30	30		45												45
May 1	1		1	50											1 50
June 30	30		45												45
July	31		46	50											46 50
Aug	31		46	50											46 50
Sept 27	26	1.50	39	-	2										39 -
29	3	1.50	4	50										44 84 - 62	1400 04 / 5 12
														21	21

Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date
		7105 / 1980	8/3 / "				
1927	17/4						
		42	6/4				

Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue
63 59	28 64	14 60	364 25	515	10 96 / 88 88	7 04 / 99 88	128			
10 46	10 46 / 5 23					26 15	148 35		231 75	
	5 23					5 23	185 12		7	
				—		1030 98	188 12		20 25	
							233 12		40 50	
							234 62		60 75	
							279 62		81 00	
							326 12			
			1947 / 2434	125		6881	303 81		101 75	
				25		25	317 81		81	
74 05	49 56	14 60	408 06	565	10 96 / 1 01 / 3 36 / 24 40 / 5 20 / 7 50	1122 23 / 101 92 / 3710	284 82			
					4 50	4 50	280 32			
						—	280 53			

Cash 14 8
RR #60 9 gals
199 C.P.M. 7/9

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLOE. ENG.
Oct 1	Balance	~~280 53~~							280 53		
				A.R. 273 6.4.17. O.S.B.	87				279 66		
				D.N.A.R. 603 P.P. Rd T.	4 87				274 79		
				" " 211 1st Rec R.D. 20/8/17	24 33 / 30 07				250 46		
Nov.	B.O. 135 5/9/17 12th C.R.D. 87. 6/5 to 15/5/17	876 / 876		A/R. 1278 Buston 19/10/17	14 60						
				" 10932 " 24/9/17	4 87						
				D/n A.R. 246 1st C.R.D. 5/9/17	9 73						
				D/n A.R. 235 do 28/8/17	14 60						
				" 273 do 19/9/17	34 07						
				" 382 C.B.C. Accl. Hosp 24/6/17	4 87						
				" 373 P.P. Rd x Hosp 15/6/17	4 87						
				" 508 do 28/8/17	4 87						
				" 938 do 7/8/17	58 40						
				" 856 do 28/7/17	4 87						
				" 270 do 14/9/17	4 87				9860 / ~~9860~~		
					160 62						

MONTH	PARTICULARS	Dr. 1	Cr. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE
	Bal forwd			Rj Warrant 1660 11.8.17 for tadoussac Ston	101 / 101				9860 / 9759

Balance transferred to N. E. Branch. Nil

Sailing List #40. Oct 18/17. Cr 89 87

Transfer CCAC ff 297, CLB 345 26/4/17

Def Pay 2 L Eff 27.9.17 Auth
B.O. Shoreham 39 Dis to Can.
62 net ayd Def Pay 1.4.17 to 31.9.17
Rj. Warrant 1660 dt. 28/5/19
5.06 4 days N.A. Bkdy Oct 1916
24 40 Ques to P.A. Sept and Oct 1916
5 50 " " " Nov. 1916
7 " " " Dec. 1916
4 50 " " " Nov. 1916

CAN. FORM REND. Spd. EFFEC. 1/10/17
DISCHARGED TO Can. DATE 29/9/17
PAYROLL VERIFIED Ex
BALL 109 34 E.P.O. REND 7/10/17
AUTHY. B.O. Shoreham 3/9/17

Def Acc Int on Def Pay 31.9.17
Sup L. Pel 3/1/18 Cr $98.63
(incl. Endorsement)
Sup L.P.O. 3.1.18
Cr 97.62

6 90
2 50
9 40

This space to be for numbers

21-5-40

DGQ

WB.

Proceedings on Discharge.

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

MILITARY DISTRICT No. 4
APR 19 1918
M.D.4

No.	25009
Rank	Private
Surname	Wilson
Christian Name	Joseph

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company)	2nd Depot Bn. 2nd Quebec Regiment.
Date of Discharge	10.4.18
Place of Discharge	Montreal, Que

1. DESCRIPTION AT THE TIME OF DISCHARGE.

		Descriptive Marks
Age	32 years 4 months.	
Height	5 feet 8 inches.	
Complexion	Fair	
Eyes	Blue	
Hair	Dark Brown	
Trade	Laborer	
Intended place of residence (To be given as fully as practicable.)	50 Mance Street Montreal, Que Canada	

2. The above-named man is discharged in consequence of being medically unfit (Auth. A.A.G. MD4 22-W-889)

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.

Good

N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers 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.—1-17.
H. Q. 1772-39-113.

(OVER)

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

NIL

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

6. Medals and Decorations..... NIL

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) Montreal, Que.....

(Date) April 11th.1918.....

Lieut-Colonel,
Commanding 2/2nd Quebec Regiment.

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) Montreal, Que *(Signature of Soldier.)*

(Date) April 11th.1918 *(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.

(76 Days)

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

11. **Confirmation of Discharge.**

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

(Place) Montreal, Que.....

(Signature) .....

Lieut-Colonel,

(Date) April 11th.1918 O.C. 2nd Depot Bn. 2nd Quebec Regiment.

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.)

Joseph Wilson

(OVER)

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.		
Med. Hist. Sheet,	Militia Form B. 313		
Medical Report for Invalid*	" B. 227.		
Statement of Man's Account on Transfer and Last Pay Certificate,	" D. 877.		

*Only if discharged "Medically unfit."

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.)

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.

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. 25009

Rank Sgt.

Surname Wilson.

Christian Name Joseph

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) 13th Battalion C.E.F.

Date of Discharge January 5th 1918

Place of Discharge Montreal, Canada.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

		Descriptive Marks
Age 32 years months.		
Height 5 feet 8½ inches.		
Complexion	Fair	
Eyes	Blue	Sprain Right Knee.
Hair	Dk.Brown.	
Trade	Labourer	
Intended place of residence (To be given as fully as practicable.)	50 Mance St. Montreal P.Q. Canada	

2. The above-named man is discharged in consequence of

of being medically unfit (Wounds) C.L.240 D.O.733

H.Q. 16-1-75

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.

Very good

N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

Labourer

M. F. B. 218.

100M.—1-17.
H. Q. 1772-39-113.

(OVER)

Stat. 18/10/19 Jas.
Disch. Bet. 26-1-18 Jas

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).....Montreal.....(*Signature of Soldier.*)

(Date).....January 5th 1918.....(*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).....Montreal.....

(Signature).....Lt.Col.

(Date).....January 5th 1918.....

O.C.Composite Regiment C.E.F.

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.)

J Wilson

(OVER)

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.		
Med. Hist. Sheet,	Militia Form B. 313		
Medical Report for Invalid*	" B. 227.		
Statement of Man's Account on Transfer and Last Pay Certificate,	" D. 877.		

*Only if discharged "Medically unfit."

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.)

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.

(Medical Officers will please read this Form carefully before using it. See instructions, page 4.)

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O'S, AND MEN

MEDICAL HISTORY OF AN INVALID

STATION Peel St. Barracks Montreal DATE March 30th 1918

1. (a) Unit 2/2nd Que. Regt (b) Regimental No. 25009 (c) Rank Pte

(d) Surname WILSON (e) Christian name Joseph

2. Age last birthday 32 Date of birth Sept. 17th 1885

3. Enlisted at Montreal on 23/1/18

4. Personal description :—

(a) Height 5.8 (b) Weight 141 (stripped) (c) Complexion

(d) Colour of hair Brown (e) Colour of eyes Blue (f) Identification marks Nil

5. Address after discharge (for the use of the Board of Pension Commissioners.)

50 Mance Street Montreal Que. Canada

6. Former trade or occupation Laborer

7. (a) Service

Years	Days
5	215

	Periods From	Periods To
13th Battalion	August 18th14	Jan.5th 1918
2nd Depot Battalion/2nd Quebec Regiment	23/1/18	30/3/18

(b) Has he been Overseas? Yes

8. Present disease or disability (use authorized nomenclature if possible). Old injury of knee

(a) Date of origin a year ago (b) Place of origin Vimy Ridge

(c) Cause* Accidental

*(Here include original disease or injury)

9. Present condition. (Important, to be a full description of the present disabling condition or conditions).

Fairly well nourished man

Pulse and temperature normal.

Right knee.

Tender at the least movements.

Gets easily sore at walking.

Other systems apparently normal.

[After describing all abnormalities, anatomical and functional, contributing to present incapacity (see section 11) state whether such incapacity is directly due to (a) weakness, (b) loss (complete or partial) of an organ or member or of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

M. F. B. 227.

150M.-6-17.
1772-39-117.

43

10. History ;

Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination

Injury happened one year ago while patient was in trenches. He says that he was buried with earth and stayce there quite a long time before being attended to. He is now feeling pains in knee and claims he cannot walk any long distance.

11. To what extent, state in percentages, is capacity to earn a livelihood in the untrained labour market reduced? If there is more than one disabling condition, estimate the incapacity due to each, and that due to all combined.

20%

12. Did the disability arise on or off duty? on duty

13. Was a Court of Inquiry held? no

14. If the disabling condition had its origin before enlistment, has it been aggravated on service?

Yes..... No.....

(If the answer is in the affirmative, state in percentages, to what extent the soldier is incapacitated by that aggravation.)

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? .....

(If the answer is in the affirmative, state in percentages to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

16. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? permanent

17. Treatment (Case reports, general or special, should be secured and attached where possible).

none reported

18. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

no

19. Can the former trade or occupation be resumed? yes

20. Recommendations .....

Cat. " C " fit for service in Canada only.

E Palouck M.

Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier.)

I, the undersigned.....have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of

J Wilson

Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

21. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticized.

Yes, except -

No. 20. Category E. as he is not able to carry on in Category C owing to chronic synovitis, right knee.

22. Is the soldier fit for

(a) General service, (Category A) (~~Yes or~~ No).
(b) Service abroad, not general service, (" B) (~~Yes or~~ No).
(c) Home service, (Canada only), (" C) (~~Yes or~~ No).
(d) Temporarily unfit, (" D) (~~Yes or~~ No).
(e) Unfit for service in Categories A, B and C, (" E) (~~Yes or No~~). yes

23. It is certified that the soldier

(a) ~~Does require treatment~~.
(b) Does not require treatment.
(c) Should pass under his own control.
(d) ~~Should not pass under his own control~~.
(Strike out condition not applicable).

24. It is recommended that the soldier be discharged. (When not for discharge add special recommendation).

Category "E".

F. R. Spurr Lt Col — President.

J. A. Emerson Capt — Members.

ASSISTANT DIRECTOR MEDICAL SERVICES M.D. No. 4 APPROVED APR 3 1918 MONTREAL, Que.

MAJOR For A.D.M.S.

Station Montreal, P.Q.

Date April 1, 1918.

APPROVED BY

Date

Assistant Director of Medical Services.

APPROVED BY

Date

Director-General of Medical Services.

47

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned,.....understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....

Should the refusal of the soldier to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

INSTRUCTIONS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
3. In answering the questions, Medical Officers will carefully obtain and record the soldier's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the soldier concerned, from witnesses, or from documents.
4. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space on this page.
5. The nomenclature of diseases to be followed is that described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London, (1915), by Messrs. Harrison and Sons.

2nd DEPOT BN. 2nd QUEBEC REGT. ORIGINAL

MEDICAL HISTORY SHEET

Surname Wilson Christian Name Joseph DRB 26556

Examined on 23rd day of January 1918 at Montreal Canada.

Birthplace City or Town ~~Ireland~~ County Caven Ireland

Apparent age 42 years

Trade or occupation Laborer

Height 5' feet 8 Inches

Weight 141 lbs.

Chest measurement Minimum 34 1/2 inches Maximum expansion 38 inches

Physical development Good

Small-pox Marks None

Vaccination Marks Arm Right Left Number 1

When Vaccinated last Child

(a) Marks indicating congential peculiarities or previous disease —

(b) Slight defects but not sufficient to cause rejection

R. D. 40
L. D. = 40
R. EAR OK
L. EAR

MOBILIZATION CENTRE M. D. No. 4 JAN 23 1918 MONTREAL, P.Q.

Approved by G F Shaw Rank Major M.O.

Declared FIT by MEDICAL BOARD MOBILIZATION CENTRE, M. D. #4 President, S. M. B.

CR 486

Date	Fit or Unfit	Examined for Re-Engagement	
"C" Fit for Service in Canada only C3			
			M.O.
			M.O.
			M.O.
			M.O
			M.O.
			M.O
			M.O.

Date	Result	Vaccinations	
2/2/18		J N E Premt Capt	M.O.
		—	M.O.
		—	M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
2/2/18		J N E Premt	M.O.
9/2/18		J N E Premt	M.O.
16/2/18		J N E Premt	M.O.

Enlisted on 23rd day of January 1918 at Montreal Canada.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	2nd Depot Bn			
Transferred to	2nd Quebec Rgt.	25009		23.1.18

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
Montreal	1/4/18	Chron. Synovitis Rt. Knee	E J R Spence Lt Col

MOBILIZATION CENTRE M. D. No. 4 APR 1 1918 MONTREAL, P.Q.

Declared UNFIT by MEDICAL BOARD MOBILIZATION CENTRE M. D. #4 President, S. M. B.

"E" Unfit for Service in Categories A. B. or C.

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.

M. F. B. 313.
300M.—1-17.
H. Q. 1772-39-439.

Surname McLean Christian Name Joseph

STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			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
		Day	Month	Year	Day	Month	Year				

Montreal, P.Q. 11th January, 1918.

There is an exostosis on the outer side of the right femur, a few inches above the lower end, of which no note has been made in the X-ray examination. This is evidently the cause of the pain which he complains of on the outer side of the knee joint.

(Sgd) C.G.Geggie, Major
for Lieut-Colonel.
President, S.M.B.,
M.D. #4.

(Medical Officers will please read this Form carefully before using it. See instructions, page 4.)

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O'S, AND MEN

MEDICAL HISTORY OF AN INVALID

STATION Montreal. DATE 10th Dec.1917

1. (a) Unit Special Service Batt (b) Regimental No. 25009 (c) Rank Sgt.

(d) Surname WILSON. (e) Christian name Joseph.

2. Age last birthday 32 years Date of birth 17th Sept 1885

3. Enlisted at Valcartier on 29th Aug.1914

4. Personal description :—

(a) Height 5ft 8½" (b) Weight 150 lbs. (stripped) (c) Complexion Fair

(d) Colour of hair D Brown (e) Colour of eyes blue (f) Identification marks

White scar ½" wide, front left knee.

5. Address after discharge (for the use of the Board of Pension Commissioners.)

50 Mance St. Montreal.

6. Former trade or occupation Labourer

7. (a) Service

	Years	Days

	Periods	
	From	To
13th Batt. C.E.F.	29th Aug.1914	3rd Nov.1917
Special Service Batt.	3rd Nov.1917	10th Dec.1917

(b) Has he been Overseas? YES.

8. Present disease or disability (use authorized nomenclature if possible). Bruised right knee.

(a) Date of origin 6th April 1917 (b) Place of origin Vimy Ridge.

(c) Cause* Buried.

*(Here include original disease or injury)

9. Present condition. (Important, to be a full description of the present disabling condition or conditions).

At the knee there is no swelling but dull pain, very slight hyper extension and lateral movements. He can walk one mile when he must stop because of pain referred chiefly to the outer side of knee joint. He walks with a slight limp. No other disability.

[After describing all abnormalities, anatomical and functional, contributing to present incapacity (see section 11) state whether such incapacity is directly due to (a) weakness, (b) loss (complete or partial) of an organ or member or of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

M. F. B. 227.

150M -6-17.
772-39-117.

10. History ;

Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination

There was a scalp wound which has healed and causes no disability.

11. To what extent, state in percentages, is capacity to earn a livelihood in the untrained labour market reduced? If there is more than one disabling condition, estimate the incapacity due to each, and that due to all combined.

25%

12. Did the disability arise on or off duty? On duty.

13. Was a Court of Inquiry held? No.

14. If the disabling condition had its origin before enlistment, has it been aggravated on service?

Nott applicable.

Yes..... No.....

(If the answer is in the affirmative, state in percentages, to what extent the soldier is incapacitated by that aggravation.)

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? No.

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

16. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 6 months.

17. Treatment (Case reports, general or special, should be secured and attached where possible).

No. 2 C.F. Ambulance	10-5-16	to	28-5-16
Merry Flat's War Hosp. Govan.	17-4-17	to	11-6-17
P.P.C.R.S.C. Hosp. Ramsgate.	11-6-17	to	18-8-17

18. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

No.

19. Can the former trade or occupation be resumed? Yes.

20. Recommendations

Discharge - Cir. letter 240 Para b dated 6-11-17.

Wesley Bourne Capt.

Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier.)

I, the undersigned man have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of nothing.

J. Wilson

Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

21. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticized.

The Board concurs.

"Strain of Knee - peri-articular tissues"

Sgd Med. Bd.

22. Is the soldier fit for

(a) General service, (Category A) (~~Yes or~~ No).
(b) Service abroad, not general service, (" B) (~~Yes or~~ No).
(c) Home service, (Canada only), (" C) (~~Yes or~~ No).
(d) Temporarily unfit, (" D) (~~Yes or~~ No).
(e) Unfit for service in Categories A, B and C, (" E) (Yes ~~or No~~). **UNFIT.**

23. It is certified that the soldier

(a) ~~Does require treatment~~.
(b) Does not require treatment.
(c) Should pass under his own control.
(d) ~~Should not pass under his own control~~.

(Strike out condition not applicable).

24. It is recommended that the soldier be discharged. (When not for discharge add special recommendation).

It is recommended the soldier be placed in class E. for discharge.

A A Mahood Capt *President.*
W S Barlow Capt
E B Chagnon
Members.

STATION **Montreal.**

DATE **December 11/1917.**

ASSISTANT DIRECTOR MEDICAL SERVICES
M.D. No. 4
APPROVED
JAN 5 1918
MAJOR
FOR A.D.M.S.
MONTREAL, QUE.

APPROVED BY

DATE

Assistant Director of Medical Services.

APPROVED BY

DATE

Director-General of Medical Services.

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned,.....understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....

Should the refusal of the soldier to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

INSTRUCTIONS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
3. In answering the questions, Medical Officers will carefully obtain and record the soldier's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the soldier concerned, from witnesses, or from documents.
4. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space on this page.
5. The nomenclature of diseases to be followed is that described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London, (1915), by Messrs. Harrison and Sons.

Duty

C.

Proceedings of Medical Board at Discharge Depot,
QUEBEC, Que.

No. 25009 Rank Sgt Name and Corps of disabled Soldier:— Wilson Joseph 13th Batt.

649-W3956

Previous civilian occupation:—

Cause of Disability:— Internal Derangement Right Knee due to service

Condition, in detail, which prevents the soldier earning a full livelihood:—

Was wounded in scalp & knee on Apr 6. 1917
He now walks with a limp.
General condition good.
He has much lateral movement in right knee joint and hyperextension.
The scalp wound has healed without any disability

OPINION OF THE BOARD.

Degree of incapacity. (Please state in fractions) 2/3

Probable duration of incapacity:— permanent

Does it render him permanently unfit for Military Service? no

Would operation, Special treatment, or use of appliances, etc., lessen incapacity? no

Signature:— E A Robertson Capt
President.

Station:— Quebec

Date Nov 1. 1917

W L Grant Capt
R Martin Burns Capt
Members

APPROVED.

Date 1/11/17

W. M. Carruthers Major
Asst. Director Medical Services.

Date

Director General Medical Service.

Dire. Sect
25-1-18

Form R. & O. 6045
1238-130M-29/11/16.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at 28th. July. 1917. 1916.

No. 25009 Rank Sgt. Name Wilson. J.

Local Unit 20th. Res. Overseas Unit 13th. Bn Age 31

Examination held at P.P.C.R.C.S. HOsp. Ramsgate.

DISABILITY.
Overseas—~~Local.~~
(scratch one out)

SCALP WOUND & BRUISED KNEE. (RIGHT)

PRESENT CONDITION.

Scalp wound completely healed. Feels no effects from scalp wound. Has some pain in right knee which seems worse at night. Good function in knee joint. Slight lameness in rt. knee on walking. Has had some ear trouble, but ear report marks him an A man. General condition not quite up to the normal. Twenty six months in France. Some rocking on lateral movements. Passive motion at knee, was hurt April 6th.

1

BOARD RECOMMENDS:— C 111 for 4 months.

1. Fit for Duty
2. Fit for duty after ..... weeks' physical training.
3. Fit for Temporary Base Duty ..... weeks.
4. Fit for Permanent Base Duty
5. Discharge

Signatures:—

G.B.Peal. Major. — President.

Members: F.H.H.Mewburn. Capt.

B.

APPROVED
30 JUL 1917

Dated at ..... 1916.

For A.D.M.S.

203-2
203-2

13 - 1 - 0.

WEST CLIFF CANADIAN EYE & EAR HOSPITAL.

FOLKESTONE July 17 1917.

SPECIAL REPORT ON EARS

NO. 25009 RANK Sgt

NAME Wilson J Princess Pat: Hosp:

UNIT 13th Canadians Ramsgate

FROM: OFFICER COMMANDING

TO: O.C. 13th Canadians

NOSE: NA SO-PHARYNX: Septum deflected to Rt

PHARYNX: normal

LARYNX: normal

EARS:

RIGHT	HEARING	LEFT
21 ft	VOICE	21 ft
+	SCHWA BACH	+
	WEBER	>
—	RINNE	+
2048	UPPER LIMIT	2048
32	LOWER LIMIT	32

REMARKS: Cerumen impacted removed by syringing Rt S.V.R.

HE IS ..... FIT FOR OVERSEAS SERVICE. CONDITION WAS ..... PRESENT PRIOR TO ENLISTMENT AND HAS ..... BEEN CAUSED BY SERVICE.

WOULD RECOMMEND PATIENT FOR CATEGORY ....A.....

V. Chadwick Capt C.A.M.C.
FOR O.C. WEST CLIFF CANADIAN EYE & EAR HOSPITAL.

O/C.

Princess Pats Red & Hosp.

Ramsgate.

B.R.C. 265-5-6, C.R. 482.
Temporary.

Army Form B. 178.

To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Wilson *Christian Name* J.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish _____ County _____

Examined ... ... on _____ day of _____ 191 .
at _____

Declared Age ... ... _____ years _____ days.

Trade or Occupation ... _____

Height ... ... _____ feet, _____ inches.

Weight ... ... _____ lbs.

Chest Measurement { Girth when fully Expanded. _____ inches.
Range of Expansion _____ inches.

Physical Development ... _____

Vaccination Marks { Arm ... Right _____ Left _____
Number _____

When Vaccinated ... _____

Vision ... ... R.E.—V= _____
L.E.—V= _____

(*a*) Marks indicating congenital peculiarities or previous disease ... (*a*) _____

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

Approved by (*Signature*) _____

(*Rank*) _____

Medical Officer.

Enlisted ... ... at _____
on _____ day of _____ 191 .

	Corps.	Regtl. No.
Joined on Enlistment ...	13 Bar Inf	25009
Transferred to		

Became non-effective by _____

on _____ day of _____ 191 .

(*Signature*) _____

(*Rank*) _____

The Morgan Reeve Co. Ltd., Printers, 20/22, Goldsmith St., Kingsway, W.C.
(25289) Wt.W13871/604. 300m. 4/15.

Forms B. 178.

P.T.O.

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Rema
	Day	Month	Year	Day	Month	Year			
Clearing Hospital Eastleigh	11	4	17.				Sprained Knee R. G.S.W. Head.		
Merryflat's War Hospital Epsom	17	4	17	11	6	17.	Scalp Wound & Bruised Knee	55.	
P.P.C.R.C.S. Hosp Ramsgate.	11	6	17.				Scalp wound & Bruised Knee.		

List in the case of Warrant Officers treated in quarters.

rks 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
Inoculated 500 Units Tetanus Antitoxin Serum 12/4/17. Transferred to ADMS Glasgow	F. Deane Capt RAMC COMMANDING CLEARING HOSPITAL EASTLEIGH 7/1/19
Gd-well here	James Kerr Lowe Major
Improved. Wound healed. Cur.	A. J. Godfrey. Capt.

1

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

469-6--3-18

Table IV.—Service Table.

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

DENTAL HISTORY SHEET

CANADIAN ARMY, DENTAL CORPS

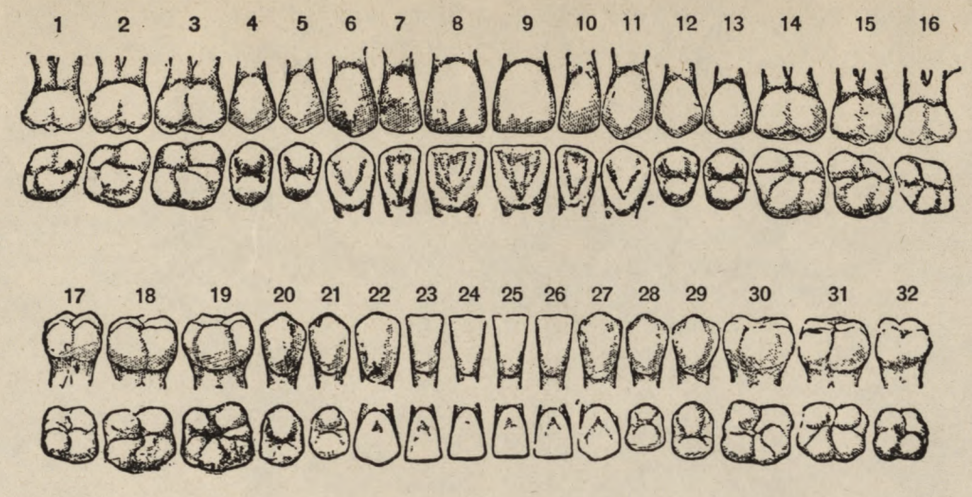
DISTRICT 4

NAME OF SOLDIER Wilson Joseph

RANK

REGIMENT 2nd DEPOT BN. 2nd QUEBEC REG'T Pte

No. 25009



INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show :

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

	Date		Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	Dentures			Gold Clasp	Gold Filling	Crowns		Bridge Work	OPERATOR	Military Dist.	REMARKS
													U	L	P			Gold	Porcelain				
Condition on first Examination																							

M.F.B. 465. 2-18. (39-950).

44105

Rank and Name	WILSON, Joseph Cpl		
Regimental No.	25009	Name and Address of Next-of-kin	
Unit	13th Battalion	Mr. Wm. Wilson - Brother,	
Date of enlistment	Sep. 23rd, 1914	G.P.O., Saskatoon, Canada.	
Place of birth	Ireland		
Married (Yes or No)	No	Date and place of discharge	
If in Permanent Force		Reason for discharge	
		Character on discharge	C

Promotions or appointments

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 to	France	7.2.15	Nom Roll 1.4.15
28.6.15	OC 13	To be Cpl.	France	1.6.15	Bttn O. Pt II O. #19(28)
16.10.15	OC 13	Granted 7 dys leave	France.	30.9.15	Part II DO 33
31.5.16	C.L. 13th	No 2 Can. Field Amb.	Field	10.5.16	Lumbago C.L. A367
14.6.16	" "	To Duty	"	28.5.16	C.L. A379
17.8.16	"	Rejoined Unit		28.5.16	C.L. A434
14.8.16	"	Appt acting Sergeant with pay		1.7.16	Pt II O 32
7.9.16	O/C 13th	Reverts to ranks at own request		13.8.16	—"— 37
26.9.16	13th	Adm. 4 Can. Fld. Amb.		8.9.16	C.L. A468 Contusion Back.
26.9.16	"	To Duty		9.9.16	C.L. A468 "
5-10-16	"	Rejoined Unit.		12.9.16	C.L. A476
20.11.16	O/C 13th	Promoted Corporal	Field	8.11.16	Pt II O 71.

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					
4.1.17	Je 13th	Promoted Sergeant	Field	16.12.16	Pte = O 2 pn 47 4/28 4/17	
21.4.17	"	Inv. (accidentally injured) posted to 1st Que Reg Depot		11.4.17	" 37. 1st Q.R.D.	
17.4.17	"	Adm 3 Can Genl. Hosp.	Boulogne	10.4.17	CL A637. Cont. R. leg & scalp acc.	
26.4.17	"	" Merryflats War Hosp.	Glasgow	17.4.17	CL B345 Cont. R knee. GSW head.	
21.9.17	1st Q.R.D.	o/comd at CDD Buxton for Dis. to Bdq.	Sham.	20.9.17	Pte DO 170.	

Duty

This space to be left blank for the Chelsea Number.

A

Army Form B. 268.

Proceedings on Discharge.

DELTA 15
OCT 28 1917

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

No. 25009 Army Rank Sergt

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

Corps 1st Que 13 Bn

Battalion, Battery, Company, Depôt, &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

Place of discharge

1. *Description at the time of discharge.*

Age 32 years months

Height 5 feet 8½ inches

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

Complexion

Eyes

Hair

Trade Lab 4

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

Descriptive marks.

Sprain R Knee

(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

(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.)

To be filled in on the soldier quitting the Colours.

3. Military character :—

4. 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*

* Strike out if not applicable.

D. D. & L., London, E.C.
A4508 Wt. W17176 M291 500,000 8/16 Sch. 39 Forms B. 268 40

[OVER.

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

2 yrs 2 mos. Transvaal

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) _____ _____

(Date) _____ *Commanding* _____ *Battn.* _____ *Regiment.*

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

I 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*) _____ _____ (*Signature of Soldier.*)

(*Date*) _____ _____ (*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 ... _____ " _____ "

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for (date)

(Place) _____

Signature _____

(Date) _____

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.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment Aug 1-1917

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

25.			

H Liz W 30
S.K.

PARTICULARS OF SEPARATION ALLOWANCE

No. 25009

Rank Sgt. Promoted Reverted Discharge

Soldier's Name J. Wilson

Battalion 13th Battn. H. Co.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Miss Ida Newton

Address 25 Essex Ave Montreal Que

Change of Address

1

2

3

4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Dec 31	—	✓	75	75	A/c closed. Retd "Grampian" 18/10/17. E.X. 6/11/17

M. F. W. 128.
400M.—A-17—1772-39-1141
L. L. 22330—ML. & D. 7863.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

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.
400M.—5-17—1772 39-1141.
L. L. 22329—M. & D. 7993.

SURNAME. Wilson

CARD NO.

CHRISTIAN NAMES Joseph

S.O.S. Div 5-1-18 4

FOLL.

REGL. No. 25009 RANK Pte Cpl.

UNIT 13th Bn.

FORMER CORPS

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Wilson William

RELATIONSHIP TO SOLDIER

ADDRESS General Post Office, Saskatoon, Sask

COUNTRY OF BIRTH Ireland, DATE

PLACE OF ATTESTATION Valcartier, P. Q. DATE Sept. 23rd 1914

O/S. 7-10-14 13/22

R/C 28/10/17

L. L. 6945. M. & D. 6994.

M. F. W. 22. 100M.—8-16. H. Q. 1772-39-339.

J. McD

From Quebec per S.S. Alaunia 4-10-14

MARRIED SINGLE WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

Pro. to Cpl. 1-6-15 Pt II O. in the field 19.11.7/15