C.E.F. REGIMENTAL DOCUMENTS

NAME CHRISTIE, WM. Davidson Cairns REGT. No. LIEUT UNIT 157 BN H. Q. FILE No. 19867

H

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133 or 51)					DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					CATEGORY
TRAINING HISTORY SHEET (M.F.W. 113)					D.W.
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					17-9-18
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. 173)					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)					
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)					
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COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
CARDS					
PAY-SHEETS					

PUBLIC ARCHIVES RECORDS CENTRE

H

403624

M.F.W. 2589
20M-4-46 (9113)
H.Q. 1772-39-1377

Number ..... Rank a/Capt

Surname CHRISTIE

Christian Names WILLIAM DAVIDSON CAIRN

Unit 13th Bde Theatre of War FRANCE

Dates of Service 23.8.16 26.10.16

Remarks Brother & Executor

Latest Address Allan Cameron Christie
209 Aberdeen Ave
Hamilton, Ont

Roll No. B. Page 1728

D

APR 9 -
SEP 1 1 1921

C D

332-13-155

CARD NO.

SURNAME. Christie, D.S.O. & S.30997- 7-11-18

CHRISTIAN NAMES William Davidson C.

FOLL.

REGL. NO. RANK Lieut.

UNIT Officers Draft.

FORMER CORPS 15th Regt.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Christie, Mrs. C. T.

RELATIONSHIP TO SOLDIER Mother

ADDRESS 541 Victoria Ave., St. Lambert, Chambly Co., ~~Montreal~~, P.Q.

Unknown

auth. letter 20-9-18.

COUNTRY OF BIRTH Canada, Montreal, P.Q. DATE Dec. 25th, 1884.

PLACE OF ATTESTATION DATE

O O.R. 22-8-16 $\frac{\$27}{T}$

L. L. 94501. M. & D. 6512.

M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

MARRIED SINGLE WIDOWER

TRADE OR CALLING Banker RELIGION Presbyterian

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE Camp Borden, Ont. DATE Aug. 15th, 1916.

Present Address:- Orillia, Ont.

FORM R. 149.
106—250m—7/2/17.

Name CHRISTIE? *Rank* LIEUT. *Reg. No.*

Unit William Davidson Cairn
13th Bn.

Next of Kin Canada;

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
2.3.17.	10 S.H.	St.Omer.	Ametropia Slt.	618		
3.3.17	Dischd. to	Unit		619		

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

(W.S.O.) 3

CHRISTIE, Wm. Davidson Cairns, Lieut. 15th

MEDALS & DECORATIONS	Allan Cameron Christie (Brother & Executor 209 Aberdeen Ave., Hamilton, Ont.
PLAQUE & SCROLL	Chas. Thompson Christie (Father) 541 Victoria Ave., St. Lambert, P.Q.

(Serial no. 782000.)

CROSS OF SACRIFICE	Mrs. Jessie Christie (MOther) 541 Victoria Ave., St. Lambert, P.Q.

Dep. 2-3220 C 2266

FEB 18 1921

Scroll Disp. _____ Item No. 2.21123

JUN 13 1922

Plaque Disp. _____ Item No. P39886

81-1-00

11

Form R. 149.

Name CHRISTIE Rank LIEUT a/Capt Reg. No. 9 C 1482

Unit William Davidson Cairn

Next of Kin 13th Battn

Canada

AAB 104-93

over

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
2-9	Reported from G.H.Q. 1463 WOUNDED			1079	1177	7/9
5-9	Rept WO 7th Bttn					
	Dangerously Wounded			1085	01289	
13.9.5	Brit. Red X Hp. GSW L. hip. severe (WO 210)			1085		
	DANGEROUSLY ILL (WO 241)				01289	
17.9	now rep WO Pk					
	Died of Wounds			1088	01316	18/9

OVER

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
	Correct Rank Lt. A/Capt.			1114 ✓		

No. Rank Lieut. Name Christie, W. D. C.

T. O. S. 15-6-16 D.O.830 Unit 157th Battalion, C. E. F.
14-8-16.

M. D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 June 15	1916. Aug. 18	—	Trans. to Overseas draft. 18-8-16.	D.O.87 of 18-8-16.

UNIT SAILED
OCT 17 1916

REGT'L No.

NAME Christie, William Davidson Airn

H. Q. FILE No. 649-

RANK AND CORPS Lieut & Captain Trm Off

FOLLOWS No. Raff

FOLLOWS

CABLE No.	CABLE DATE	NATURE OF CASUALTY
Nofk.		Christie Mrs C. J. Mother 541 Victoria
2-10		Ave. St. Lambert. Montreal P.Q.
Q177	8-9-18	Rept wdd. Sept 2nd 18.
01287	14-9-18	Dang wda r/l c.s. Sept 5th 18
NBMS-8	18-9-18	#5 Gr. Red Cross Hosp Mimereux
1-1		Gsw. Left Hip.
O1318	18-9-18	Died St. Sept 17th 18.
1-1		
O1289	14-9-18	Dang ill to RCH Mimereux 13-9-18
1-4		Gsw left hip Sev. See O1318 for later
OHSM 72	6-10-18	Died of Wds Sept 17th 18. Confirmation

L. L. 12767—M. & D. 7390.

M. F. W. 42—50M.—12-16.
H. Q. 1772-39-893.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
618.	10 Stat. St. Omer	2-3-17	Ametropia Slt.
619.	" "Disc to Unit.	3-3-17	Ametropia
1079	Rept from Headquarters	2-9-18	wdd.
1085	7 Casualty Stn Dang	wd. 5-9-18	GSW L hip Sev
1085	5 B.R.&H. Wimereux	13-9-18	" " " " "
1088	Died of wds	17-9-18	" " " " "

Christie. W. D. C.

Lieut. 13th. Bn.
A/Capt.

No. 10. Sta.Hosp. St. Omer. 2-3-17.
No.7 Casualty Clearing Station. 5-9-18.
No.5 Brit.Red Cross Hosp.Wimereux 13-9-18.

Ametropia. slt.
Reported from G.H.Q.,Wounded:-2-9-18.
Dangerously Wounded:-5-9-18.
"G.S.W.lt.Hip severe
Dangerously ill:-13-9-18.
DIED of WOUNDS:-17-9-18.

Dis. to unit:- 3-3-17.

C.L. 8-3-17. 618.
9-3-17. 619-2.
6-9-18 1079-2.
13-9-18 1085.
17-9-18 1088-2.
17-10-18 1114-5.note.(Rank).

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

D. M. S. 1347.

Surname | Christian Name | Reg. No.

Rank | Unit

MEDICAL BOARD held at | Date | Serial No.

(1)

Other Medical Boards at | Date | Serial No.

(2)

(3)

(4)

(5)

Condition found by Board

Disposition Recommended

(1)

(2)

(3)

(4)

(5)

PENSIONS & CLAIMS BOARD held at | Date.....

Disposition

Remarks

Indicate by a P.T.O. if continued on other side.

H. W. & V., Ld.—7025-16.

Regimental Number.....

Casualty Form—Active Service.

Regiment or Corps 13th Lancs Battalion

Rank ..... Surname Christie ..... Christian Name W. D.

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.....

Occupation..... .....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			
15/12/17	13 Bns	To Co. O.C. Reinforcements Boulogne		11/12/17	B213
27/12/17	"	Reported Unit	Flt	16/12/17	"
29/12/17	"	14 days leave	Leave	24/12/17	Auth
12/1/18	"	Reported Unit	Flt	11/1/18	B213
16.2.18.	"	To 1st Army School		9.2.18.	B213.
28/3/18	"	Reported Unit	"	17/3/18	"
4/9/18	1st Army	Wounded	"	2/9/18	List 1463
5/9/18	7 CCS	GSW Arm Pen	7 CCS	2/9/18	47269 14/9/18
7/9/18	13 Bns	Evac to Hosp (Wded)		2/9/18	B213 Unofficial
2/9/18	3 CFA	SW L. Hip Pen & to	CCS	2/9/18	A8591
17/9/18	5 BRC	Died of Wounds	5 BRC	17/9/18	Gen T17980
13/9/18	5 BRC	received in Action GSW L Arm	5 BRC	13/9/18	H9415

(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.

W. 5527—M2093 1000m 7/17 (25686) C. P. & S., Ltd. Forms B./103 E/1555.

[P.T.O.

French 10 D C

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	
Date	From whom received				
13/9/18	7 C C S	S/D Hsp L. Pen & to	14 A T	13/9/18	H 9220
7/9/18	5 BRC	Died of Wounds received on Ach	5 BRC	17/9/18	Fgm T 17980
					Ah II O 115 19/9/18

R. W. Walter Capt.
for Lt.-Col., A. A. G.
Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

Fatalities 1914-1919

H

Original

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.

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(1) Name of Overseas Unit which Soldier joins 157th Bn O/S C.E.F.

(2) Regimental Number

(3) Full Name of Soldier William Davidson Cairns Christie

(4) Place of Birth Montreal PQ.

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

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

(b) Present Postal Address ✓

(7) Are you a widower? No

(8) Have you any children? No

If so, give number of boys and girls ✓

Also their names and ages ✓

M. F. W. 67.

200M.—3-16.
I772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes

If so, state name and address Charles J. Christie 541. Victoria Ave St Lambert. Montreal Que

(10) Is your Mother alive? Mrs Jessie Christie

If so, state name and address 541 Victoria Ave St Lambert. Montreal Que.

(11) If your Mother is a widow No

Are you her sole support, or not? No

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

✓

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

✓

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

✓

(15) Are you insured? Yes

If so, in what Company? Sun Life 2nd Mf. Life 1st

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.

G. E. Wheaton Major
Officer Commanding.

Date 15/8/16

Unit 157th Bn Rank Lieut. Name N. D. C. Christie

OFFICERS' DECLARATION PAPER

card N.L. 12-9-16

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE ANSWERED BY OFFICER

(ANSWERS)

1. (*a*) What is your Surname? Christie

   (*b*) What are your Christian Names? William Davidson Cairns

2. (*a*) Where were you born? (State place and country) Montreal PQ.

   (*b*) What is your present address? Orillia Ont

3. What is the date of your birth? Dec 25th 1884

4. What is (*a*) the name of your next-of-kin? Mrs C. T. Christie

   (*b*) the address of your next-of-kin? St Lambert Montreal Que. 541 Victoria Ave.

   (*c*) the relationship of your next-of-kin? Mother

5. What is your profession or occupation? Banker

6. What is your religion? Presbyterian

7. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes.

8. To what Unit of the Active Militia do you belong? 13th Regt.

9. State particulars of any former Military Service none

10. Are you willing to serve in the

    CANADIAN OVER-SEAS EXPEDITIONARY FORCE? Yes

The undersigned hereby declares that the above answers made by him to the above questions are true.

N D C Christie (*Signature of Officer.*)

CERTIFICATE OF MEDICAL EXAMINATION

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider him* fit for the CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Date Aug 15 1916

Place Camp Borden

F W Authridge *Medical Officer.*

*Insert here "fit" or "unfit"

M. F. W. 51

40m.—12-15.
H. Q. 1772-39-917.

ORIGINAL.

Original

MEDICAL HISTORY SHEET.

Surname Christie Christian Name William Davidson Pairs

Examined { on 15 day of Aug 1916 / at Camp Borden

Approved by J. C. Cambridge

Rank Capt. M.O.

Birthplace { City or Town Montreal / County Quebec.

Apparent age 31.

Trade or occupation Bank Mgr.

Height 5 Feet 7½ Inches.

Weight 140 Lbs.

Chest measurement { Minimum 34 inches. / Maximum expansion 37 inches.

Physical development Good.

Small-Pox Marks 0

Vaccination Marks { Arm Right. 0 Left. 2 / Number 2

When Vaccinated last Childhood.

(a) Marks indicating congenital peculiarities or previous disease appendix scar.

(b) Slight defects but not sufficient to cause rejection 0 -

Date.	Fit or Unfit.	Examined for Re-engagement.
		M.O.
		M.O.
		M.O
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
23/10/16		C C Schlichter M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
23/10/16	+	TAB 2 C C Schlichter M.O.
		M.O.
		M.O.

Enlisted on 15th day of June 1916 at

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	157 Bn	Lieut		
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

M. F. B. 313.

400M.—1-16.
H. Q. 1772-39-439.

Surname ..... Christian Name .....

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				
10.Sty Hsp.	St Omer	2	3	17	3	3	17	Armetropia Slt.		Discharged to Unit Duplicate Medical History Sheet pasted to here.	618. 619. EP

R. 150 A.G.R.

Surname CHRISTIE DSO

Christian Names William Davidson Cairn

Rank Lieut.

Name and Address of Next-of-Kin Mother.

Mrs. C.T. Christie,
541 Victoria Ave., St. Lambert,
Montreal, P.Q., Canada.

Promotion

Unit 157th Bn.

Place of birth Montreal, P.Q.

Married (Yes or No)

Appointments

M.R. 13 Bn. 1-4-17, 1-5-17, 1-6-17, 1-7-17

-SAILED 23-8-16 H Q 593-6.1

Date of leaving Canada

Date and Cause of Resignation

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
	G.O.C.		Gen List		DO 4663
2-9-16	C.T.D.	Taken on strength and Posted to ~~C.M.R.~~ 30-8-16. D.O. 4635.			
			T.O.S.	28-10-16 Pt. II Orders 70 (13th Bn)	A.F.B. 103
				26-10-16 Appt. to D.O. 5656	7-NOV. 1916
31.10.16	"	Proceeded to 13th Bn.			
8-3-17	C.R.6.	Adm. to 10 Stat. Hosp., St. Omer.		2-3-17	C.L. 618 anesthesia Slt.
9-3-17	C.R.6.	From 10 Stat. Hosp. St. Omer. — Discharged to Unit		3-3-17	C.L. 619 do do.
2-9-17	13th Bn	Granted 10 days leave to England		20.8.17	Pt II Ord 84
5.1.18	-do-	Granted 14 Days leave to U.K.		24.12.17	Pt II of I
6.9.18	AMS	Reported from GHQ "Wounded"		2.9.18	CL1079
13.9.18	-do-	Adm. No 7 Cas. Clg. Station "Dangerously Wounded"		5.9.18	CL1085 G.S.W. L. Hip & Severe
13.9.18	-do-	Adm. No 5 Brit Red X Hosp Wimereux "Dangerously Ill"		13.9.18	CL1085 — do —
17.9.18	AMS	— do — "Died of Wounds"		17.9.18	CL1088 + CL 1114
7.11.18	WO	Awarded the DSO			Lon Gz 30997
15.9.18	GHQ	To be Act Capt (Vice T Capt R.L. Calder Wounded)		24.8.18	ACR 205 LG 30943 8-9-10-18
10-11-18	GHQ	~~Relinquishes actg rank of Capt (wounded)~~		~~2.10.18~~	A.F.B. 1043-2096 A ACR 213. Gazette. 3-12-18.
		8613		Cancelled by A.C.R. 216a/1-12-18	

P.T.O.

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				
22.12.18	G.H.Q	Relinquishes the Actg Rank of Capt (W.O.) (rank for notif. only) this officer ceased appr. in List 213		17.9.18	ACR 219
31.12.18	W.O	Mentioned in Despatches			L.G 31089

Register No. OC 1358

WAR SERVICE GRATUITY
TO
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. 3189 - W - 15

Regt'l No. — Name William Davidson Cairns Christie.
(Christian Name) (Surname)

Unit 13 Bn. Rank Lieut Date of enlistment

Date of casualty 17-9-18 B.P.C. File No. 121 787.

Was service performed overseas? Yes.

DEPENDENT

Name Mr. Chas. T. Christie Relationship Father.

Address 541 Victoria Ave.,
St Lambert.
P. Q.

Amount of Special Pension Bonus $ Nil Abstracted by M. Ross.

M.F.W. 2652
25M—6-20.
H.Q. 1772—30-1473

Eligible for Gratuity $

Less amount of Special Pension Bonus paid $

Less Debit Balance of S. A. or A.P. $

Total deductions $

Balance due $

Cheque No. Date issued

Clerk W. Mitchell

REMARKS Not eligible under P.C. 1486
No SA paid

Audited by

Date

Noted
12-8-20
26

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname Christian Name

Regimental Number Rank

Address (in full)

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

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

L.L. 53961—M. & D. 9721

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

Fill in only.—Unit, Numbe

CERTIFIED CORRECT
7 - NOV. 1916 by
CANADIAN RECORD OFFICE

Casualty Form—Active Ser

Unit, Regiment ~~or Corps~~ 157th Bn

Regimental No. ..... Rank Lieut. C. E. F. Name William Davidson Ca

Enlisted (*a*) ..... Terms of Service (*a*) ..... Service reckons from (*a*) 23-8-16

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				
		Embarked	Halifax	23-8-16	S.S. Olympic
		Disembarked	Liverpool	30-8-16	
		Amended to go last D.O. 4663			
		Posted to ~~C.M. School~~	Shorncliffe	30-8-16	D.O.CTD.No.4635 d/2-9-16.
		Proceeded Overseas to 13th Bn	France	26-10-16	D.O. Pt II. 83 d/31-10-16
					Capt. & Adjutan Canadian Military School
28/10/16	Can. Base	Arrived in France for Depot. 13th Canadian Battn.	C/B Depot	28/10/16	AR Pt II Ad. 70, 16/11/16
29/10/16	"	Left for Unit.	Field	29/10/16	AR
3/11/16	13th Bn.	Joined Unit.	"	31/10/16	B213

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

[P.T.O.

A W D C Christie

	...from received	...ecord 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
7	36 Hosp.	Defective Vision Cam	36 Hosp	1/3/17	} A36 DCS 267, 20/3/17
		Tran	O.C. 6 Hosp	1/3/17	
2/3/17	10 Staff	Ametropia Cam	10 Staff	2/3/17	W3034
3/3/17	"	Disc. to Unit		3/3/17	W3034
19/5/17	13 Bn	To Can Corps School - Field		12/5/17	B213
9/6/17	"	Rejoined 13 Bn		1/6/17	B213
1/6/17	13 Bn	To Div. School,	Terfay	1/6/17	B213
30/6/17	"	Rejoined 13 Bn	Fields	27/6/17	B213
30/6/17	13 Bn	To 3rd Bde School.	Fields	27/6/17	B213
25/8/17	"	Rejoined 13 Bn		20/8/17	B213
25/8/17	13 Bn	Granted 10 days leave to Eng.		20/8/17	B213 Pt II Ord. 83
8/9/17	"	Returned from leave -		1/9/17	B213
8/9/17	13 Bn	To 3rd Brigade School	Fields	2/9/17	B213
29/9/17	"	(Adjutant.) Returned to Unit		23/9/17	B213

P—15.

ASSIGNED PAY.	UNIT. NAME OF	DATE	AUTHORITY	RANK.	DATE	AUTHORITY	NAME.
Beneficiary	Gen. List			Lieut	30.8.16	Wtes D.O. #4635 C.J.D.	Name Christie
Address							Initials W.D.C.
						d/ 2.9.16	Bank of Montreal
Amount. $							
Separation Allowance issued. Yes or No.....							

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS.
Sept 15	Bank	7713.		143 80				
19	Pay 19/8 - 30/9/16 R.		143 80			0		
Oct 19	Oct. Pay R.		111 60					
25		Bank 10998		111 60		—		
Nov 21	Nov Pay R.		108					
24		Bank 14190		108		—		
Dec 13	Dec Pay		111 60					
20		Bank		111 60		0		
1917 Jan 20	Jan Pay		111 60					
26		Bank 19288		111 60		0		
Feb 18	Feb Pay		100 80					
23.		Bank		100 80		0		
Mch 12	Pay March		111 60					
23		Bank		111 60		0		
				799 00				

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ASSIGNED PAY.	UNIT. NAME OF	DATE	AUTHORITY	RANK. Mess	~~DATE~~	AUTHORITY	NAME.
Beneficiary	13th Bde		Pay 2.00	Lieut	30-8-16	D.O. # 4635	Name Christie
Address			F.A. .60			C.J.D.	Initials W.D.C.
			Mess 1.00			d/2/9-16	Bank of Montreal.
Amount. $			3.60 p.d.				
Separation Allowance issued. Yes or No.....							

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
1917.				199.00				
Apr 26	Pay R		108					
27	Bank	3010		108		0		
May 22	Pay R		111 60					
✓ 26	Bank	6029		111 60		0		
June 18	June Pay R		108					
✓ 20	Bank	7998		108		0		
July 12	Adv F. Cashier St Omer 100 frcs 5 107 List 15 Gen	No 983		17 84				
✓ 19	July Pay R		111 60					
✓ 25	Bank	13009		93 76		0		
Aug 17	Aug pay R		111 60					
✓ 22	Bank	17080		111 60		0		
Sep 17	Sept Pay R		108					
✓ 25	Bank	21813		108		0		
Oct 10	Pay (R) Oct		111 60					
✓ 22	Bank	26114		111 60		0		
Nov 17	Pay (R) Nov		108					
21	Bank	30734		108		0		
Dec 11	Pay (R) Dec		111 60					
13	Bank	35096		111 60		0		
1918 Jan 16	Pay (R) Jan		111 60					
23	Bank	39441		111 60		0		
Feb 16	Pay (R) Feb		100 80					
21	Bank	41013		100 80		0		
Mch 12	Pay (R) Mch		111 60					
21	Bank			111 60		0		
				2113.00				

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ASSIGNED PAY.	UNIT. NAME OF	DATE	AUTHORITY	RANK.	DATE	AUTHORITY	NAME.
Beneficiary							Name
Address							Initials
							Bank
Amount, $							
Separation Allowance issued. Yes or No.....							

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS

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Estates Br. file 3-202 to Canada 27/1/19.

18 JAN 1919 1.

ASSIGNED PAY.	UNIT.	RANK.	NAME.
Beneficiary	NAME OF: 13 Bn	Lieut 30/8/16	Name Christie
Address	DATE / AUTHORITY: Rates Pay. 2.00; F.A. to; Mess. 1.00; 3.60	a/Capt 24/8/18 ACR 205 d 15/9/18	Initials W. D. C.
Amount. $			Bank Montreal
Separation Allowance issued. Yes or No.....	Died of Wounds 14/9/18 C.L. 1088 d/ 14/9/18		

DATE 1918	PARTICULARS		CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
					2113.00				
Apl 19	Pay R.			108					
23		Bank	1173		108		0		
May 21	Pay R.			111 60					
24		Bank	2645		111 60		0		
June 20	Pay R.			108					
24		Bank	4047		108		0		
July	Pay R.			111 60					
23		Bank	5586		111 60		0		
Aug	Pay R.			111 60					
23		Bank	7207		111 60		0		
Sep 16	Pay R			108		Cr	108	Pat Cease	
Oct 21	Diff bet Lts + Capts rates fr 24/8/18 - 30/9/18 auth ACR 205 d/15/9/18	Bank	No 12164	43 70			151 70	Tfd. to N.E. Ledger 21/9/18 No deposit	
Nov 20	Add Outfit Allce			100 -				Died of Wounds 14/9/18. Pat. Cease	
22	Adjst FA fr 12-30/9/18			4 75			256 45	30/9/18 c/f L 1088 d 14/9/18 No. 12503	
1919 Feb 19	C.I.E.	List 5 Feb	No 137	15 13			271 58	Statement accounted 21/5/19	
June 24	Cr Bal trans to Ott list 125 June No 1306				271 58			Cr Bal 271.58 Deb form to Actg Deb 30/5/19	
					2.663 80				

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ASSIGNED PAY.	UNIT. NAME OF	DATE	AUTHORITY	RANK.	DATE	AUTHORITY	NAME.
Beneficiary							Name
Address							Initials
							Bank
Amount. $							
Separation Allowance issued. Yes or No.....							

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS