

ATTESTATION PAPER.

No. 4977

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

- 1. What is your name?..... *Rueval Alexandre Han*
- 2. In what Town, Township or Parish, and in what Country were you born?..... *Sault Ste Marie*
- 3. What is the name of your next-of-kin?..... *J. A. Han*
- 4. What is the address of your next-of-kin?..... *115 Kohler St Sault Ste Marie*
- 5. What is the date of your birth?..... *April 7th - 1897*
- 6. What is your Trade or Calling?..... *Chauffeur*
- 7. Are you married?..... *no*
- 8. Are you willing to be vaccinated or re-vaccinated?..... *yes*
- 9. Do you now belong to the Active Militia?..... *yes*
- 10. Have you ever served in any Military Force?.. *yes*
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*

..... *Rueval* (Signature of Man).
 *McGurg* (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *R. A. Han*, 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.

..... *Rueval* (Signature of Recruit)
 Date *Sept 22nd* 1914. *McGurg* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *R. A. Han*, 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.

..... *Rueval* (Signature of Recruit)
 Date *Sept 22nd* 1914. *McGurg* (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..... this..... day of..... 1914.

Valcartier, 22nd September 1914 *Edouard* (Signature of Justice)

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

..... (Approving Officer)

6th Battalion

25

Description of Percy Hand on Enlistment.

Apparent Age 20 years 5 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

Height 5 ft. 4 1/2 ins.

Chest-measurement (Girth when fully expanded 36 ins.
Range of expansion 3 ins.)

Complexion Dark

Eyes Hazel

Hair Dark

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

Small Mole left side of Neck

CERTIFICATE OF MEDICAL EXAMINATION.

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

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him* Fit for the Canadian Over-Seas Expeditionary Force.

Date Sept. 1 1914.

W.P. Dixon

Place Valcartier

W.P. Dixon 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:—

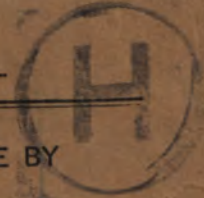
CERTIFICATE OF OFFICER COMMANDING UNIT.

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

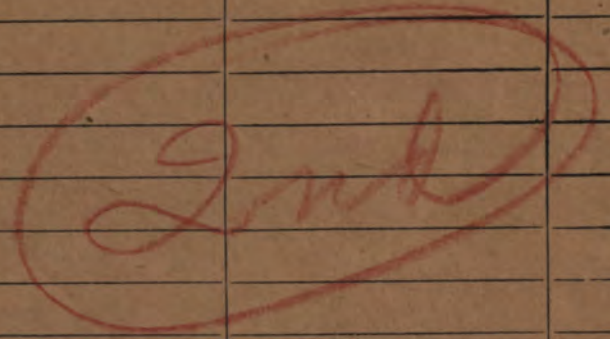
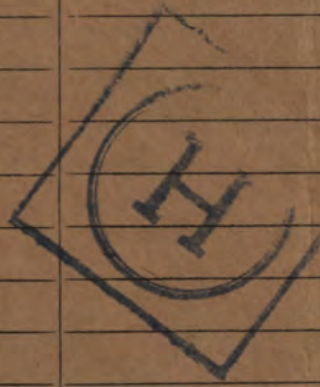
Date Valcartier, 22nd September 1914 1914. *W.P. Dixon* (Signature of Officer)

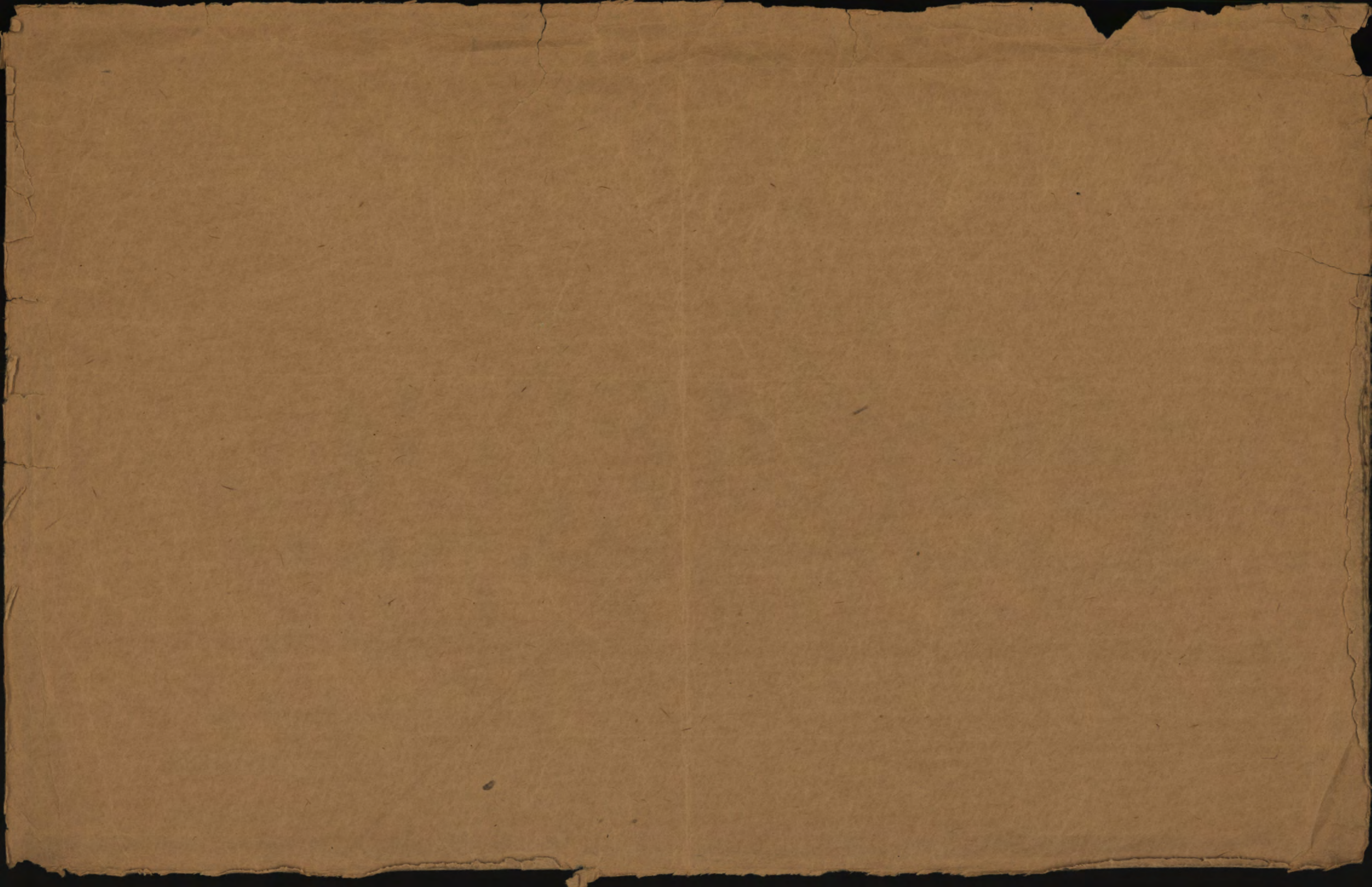
REGIMENTAL DOCUMENTS

NAME *Hand Percival Alexander* REGT. NO. *7977* UNIT *2nd Bn* H. Q. FILE NO. _____



CONTENTS 2	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
IDENTIFICATION PAPER (M.F.W. 23, 133, or 51)		<i>med 27/7-20</i>	<i>u</i>		DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
TRAINING HISTORY SHEET (M.F.W. 113)					<i>2 M. R. M.</i>
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)				05959	<i>K. G. J. 18</i>
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)		<i>changed to</i>			
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)		<i>H. A. J.</i>			DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					Category <i>Demoted</i>
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					<i>Comm Pa</i>
MEDICAL EXAMINATION (M.F.W. 129)					
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)		<i>mess. 30/10</i>	<i>20</i>		
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 393 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)					
<i>ess cards</i>					
<i>R 122</i>					
<i>42 Mis</i>					<i>15-27</i>
<i>cas card R149</i>					<i>18-27</i>
					<i>29-27</i>
					<i>2</i>





7977

HAND

PERCIVAL ALEXANDER

I.D. number
No. d'identification

Surname
Nom de famille

Given names
Prénoms

~~REDACTED~~

ATIA. Killed in action:
9 July 1918 WITH RAF

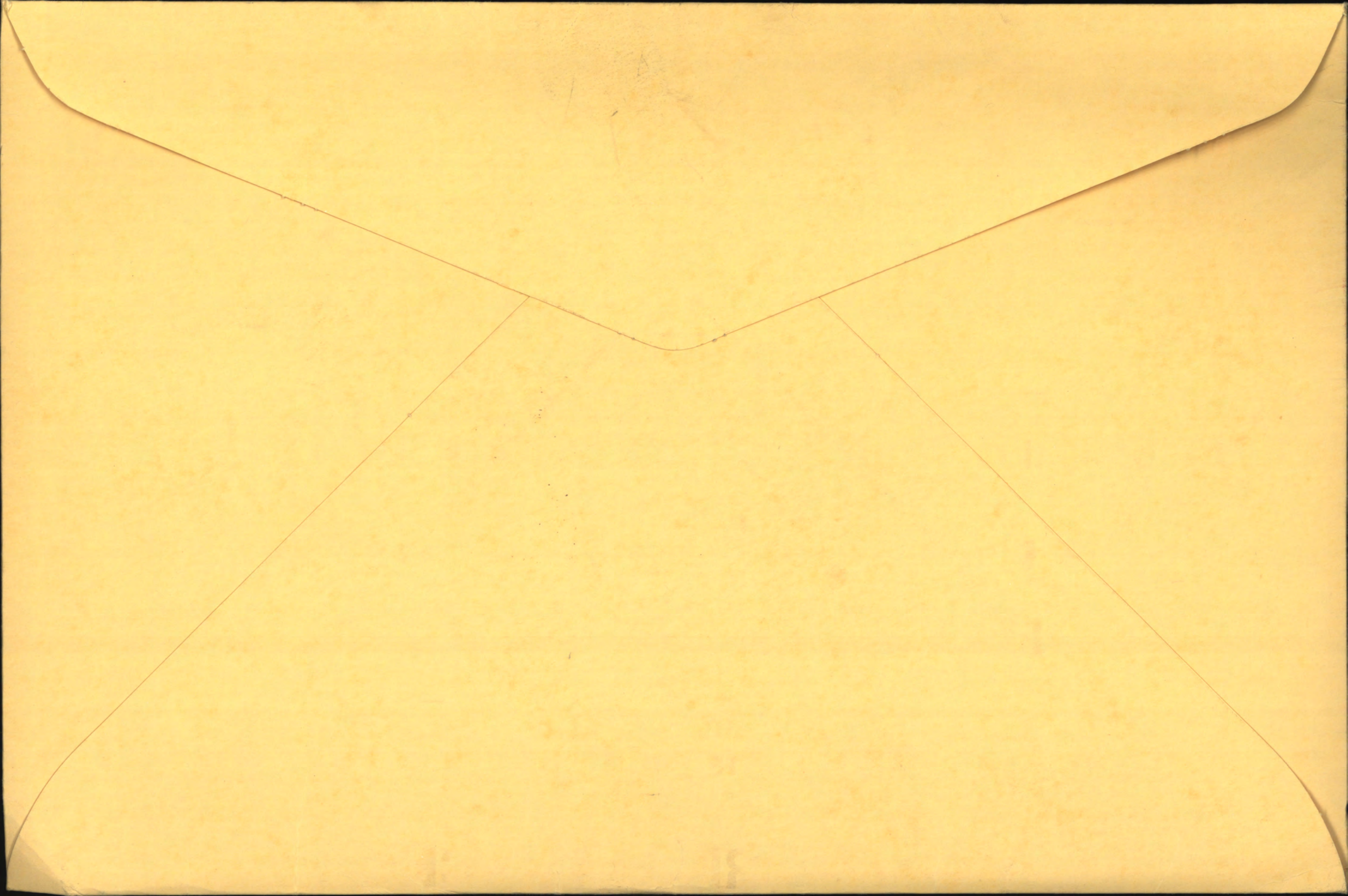
OPEN
ATIP

PERSONNEL RECORDS CENTRE

**CENTRE DES DOCUMENTS DU
PERSONNEL**

Location
Lieu

4007



Memorial Cross. Imperial

Lieut - Hand, Percival Alexander
R. A. F.

Applicant - Mrs. J. A. Hand - (m)

115 Kohler St

Sault Ste Marie

Ont

[Signature]

File no -
Date Recd.

KIA
9 July 18.

M 6.35611 DEC 9 - 1920

665

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
H.E. 10/20/20 Number	air min auth by 49-H-2004 as 4944	Rank	Pte <i>ranked for firm</i>
Surname	H A N D.		
Christian Name	Percival Alex.		
Unit	2 nd Baltn Can Coy Theatre of war France S.O.S. Commission Royal Flying Corp. 29.1.18		
Date of Service	Auth. EORD P. 00. 7. of 12. 3. 18 air Force. Roll no 1. Page 9.		
Remarks	A.M. 252361/20/S. 7. of 10. 7. 20		
Latest Address	<i>mk for medals</i> T.A. Hand Esq., 115 Kohler St., Sault Ste Marie, Ont.		
Roll No.	B Page 4413		



NAME

REGT. No.

RANK AND UNIT

NEXT OF KIN

CABLE

NATURE OF CASUALTY

No.

DATE

NAME

Hamd. P.

RANK AND CORPS

Pte

REG'TL No.

7977

H. Q. FILE No. 649.

A

East. Ont. Regt.

FOLLOWS

No.

FOLLOWS

CABLE

NO.

DATE

NATURE OF CASUALTY

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

B 347	King George Stamford St. S.	9-10-17	Adenoids
B112 ⁽¹⁾	Discharged	12-12-17	Adenoids

SURNAME.

Hand

CARD NO.

CHRISTIAN NAMES

Percival Alexander

FOLL.

SOS Dia 0/8. and 0/12 21/11

REGL. No.

7977

RANK

Pte.

UNIT

2nd

FORMER CORPS

*Nil.**Bn*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Hand, T. A.

RELATIONSHIP TO SOLDIER

Not Stated

ADDRESS

*115 Kohler St., Sault Ste. Marie
Ont.*

COUNTRY OF BIRTH

Canada, Sault Ste. Marie, Ont.

DATE

April, 4th, 1894

PLACE OF ATTESTATION

Valcartier, P. Q.

DATE

*Sept. 22nd, 1914**0/8. 7-10-14 ²/₁₁*

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

Lehauffeur

RELIGION

Church of England

DESCRIPTION.

APPARENT AGE

20 YEARS

5 MONTHS

HEIGHT

5 FEET

4 1/4 INCHES

CHEST MEASUREMENT

36 INCHES

EXPANSION *3* INCHES

COMPLEXION

Dark

EYES

Hazel

HAIR

Dark

DISTINGUISHING MARKS

Small mole left side of neck.

MEDICAL EXAMINATION.

PLACE

Valcartier P.Q.

DATE

Sept. 1st 1914

Present Address, Not Stated.

Surname

Christian Name or Names

Reg. No.

Hand

J. D.

4977

Rank

Unit

Co.

Troop

Batty.

P. E.

2nd Batt

(6. O. Reg.)

Hospital

#1 Gen

Date of Admission

12-12-14

King G. Hosp. Stanford St

Transferred

Hosp.

9.10.17

Hosp.

Hosp.

Hosp.

Diagnosis

Gono adenoids

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnoses: If more than one state present

DISPOSITION

Date

Asst Post #1 Gen
L. 12.10.17 B34(1)
15.1.18 B112.

To Duty *4-1-15*
REMARKS
D.O. 12-12-17

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

Unit 7

Temporary

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

MEDICAL HISTORY of

Surname

Hand

Christian Name

P.A.

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—
.....
.....

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

TABLE III.—Boards; Courts of Enquiry, 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
<i>Oct. 1914</i>	<i>Vacc Sec Original B. 178</i>
<i>3/1/18</i>	<i>[Signature]</i>
	<i>[Signature]</i>
	CAPT. R.A.M.C.
	M.O. 1/c No. 5 R.F.C. CADET WING.
<i>1.3-18</i>	<i>transferred to R 4 C</i> <i>44. [Signature]</i>

Approved by

Rank

Medical Officer.

Enlisted { at.....
on..... day of..... 191.....

Joined on enlistment { Corps *2 Squadrons*
Regtl. No. *Altford R 76 9/1914*


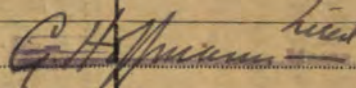
Transferred to {

Became non-effective by.....
on..... day of..... 191.....
(Signature).....
(Rank).....

TABLE IV.—Service Table.

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

TABLE II.—Only for admissions to Hospital or to the Sick List in case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks 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
	Day	Month	Year	Day	Month	Year				
 Admitted Date 8 ¹⁰ / ₁₇	8	10	17	12	12	17	Reflected Septum	66	Operation - Septum removed M.M. 29.10.17 Sloughing & Septic granulation P. Side 29.10.17 Foot inflamed Several superficial pustules 4.11.17 General condition improved Operation - Extended abscess and redness of jaw to side 8.12.17 Mouth bleed 12.12.17 Discharged Hosp Fit to Repair Arms	

ORIGINAL

1st Lieut

7977

MEDICAL HISTORY SHEET.

Surname *Hand* ~~Hand~~ Christian Name *Perez*

Examined { on *23* day of *Sept* 191*4*
at *Valcartier Camp*
Birthplace { City or Town *Sault Ste Marie* Rank *Capt Amb* M.O.
County *Ont* *1913*

Approved by *G. G. Guer*
Apparent age *20 yrs 5 months*
Trade or occupation *Chauffeur*
Height *5* Feet *4 1/4* Inches.
Weight _____ Lbs.
Chest measurement { Minimum *33* inches. M.O.
Maximum expansion *36* inches. M.O.
Physical development _____ M.O.
Small-Pox Marks _____ M.O.

Vaccination Marks { Arm Right Left.
Number _____
When Vaccinated last _____ M.O.
(a) Marks indicating congenital peculiarities or previous disease _____ M.O.

(b) Slight defects but not sufficient to cause rejection
Date Result ANTI-TYPHOID INOCULATIONS, ETC.
Apr 1914 *Pos* *500 million* M.O.
3/1/18 *SCUS* *1 Billion* M.O.
M.O.

Enlisted on _____ day of _____ 191*1* at _____

	CORPS.	REG'T NUMBER.	HABITS.	DATE.
Joined on enlistment		<i>7977.</i>		
Transferred to..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<i>Surdun</i>	<i>1-3-18</i>	<i>Transferred to R & C</i>	<i>Fit - G. H. Withers and Co.</i>

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.

Entries in Red Ink made from Attestation Sheets.

P. M. Shaw
for D. D. M. S.

AUG/12 1915

CANADIAN

Surname *Harris*

Christian Name *Henry*

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease : how induced : if mild or severe : if completely recovered from ; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
<i>1501 Ft. Aurb</i>		<i>10</i>	<i>Dec</i>	<i>1914</i>	<i>10</i>	<i>Dec</i>	<i>1914</i>	<i>Gonorrhoea</i>		<i>sent to west down North 1102 S.H.</i>	<i>J. D. W. Capt</i>

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

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

Rank Pt ME Name PERCIVAL ALEXANDER Surname HAND
Unit or Corps 2nd BN (If a soldier) Regtl. No. 4944
Born at Sault Ste Marie on, date 4th April 1894
Signature (for identification) R. Hand

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

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe. no

Weight 150 lbs.
Height 5-4 1/4 in.

2. NUTRITION AND DIATHESIS? Good

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

3. NERVOUS SYSTEM? no

4. RESPIRATORY SYSTEM? no

5. HEART?

Abnormal Sounds? no
Abnormal Size? no
Pulse Rate? 80 Intermittence or irregularity? no

6. ARTERIES.—Any hardening? no

7. DIGESTIVE SYSTEM? no

8. GENITO-URINARY SYSTEM?

Urinalysis—s.g.? 1018 Reaction? acid Albumen? none Sugar? none

9. SKIN, MIDDLE EAR, EYE or any other part? no

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so describe. no

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

Examined at Londrina } Signed W. J. Murray Maj. Can. M.O.
Date 1-3-18 } Signed G. H. Wilson Maj. Can. M.O.

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

Medical Examination upon leaving the Service

of an Officer in for general service or a Soldier in for duty

The purpose of this examination is to determine the physical condition of the individual and to report the results to the proper authorities. The individual being examined should be in the uniform of the service to which he is attached, and should be accompanied by a commanding officer or other authorized person.

REGIMENTAL ALEXANDER

1877

1877

1877

The following is a list of the organs and systems of the body which are to be examined:

1. PHYSICAL - General appearance, height, weight, and build.

2. HEAD AND NECK

3. EYES

4. EARS

5. NOSE

6. THROAT AND LARYNX

7. CHEST

8. ABDOMEN

9. LIMBS

10. SKIN

11. MENTAL

12. SPECIAL SENSES

13. GENITALS

14. DENTITION

15. VISION

16. HEARING

17. SMELL

18. TASTE

19. TOUCH

20. PAIN

21. TEMPERATURE

22. PULSE

23. BLOOD PRESSURE

24. RESPIRATION

25. HEART

26. LUNGS

27. DIGESTION

28. URINARY

29. REPRODUCTIVE

30. OTHER

31. GENERAL

32. SPECIAL

33. OTHER

34. OTHER

35. OTHER

36. OTHER

37. OTHER

38. OTHER

39. OTHER

If the individual is found to be physically unfit for service, the commanding officer should be notified immediately, and the individual should be placed in a hospital or other suitable place for treatment. The results of this examination should be reported to the proper authorities in the form of a report, which should be filed in the individual's service record.

NAME HAND, Percival Alexander

Regimental No. 7977

Name and address of next-of-kin

Unit 2nd Bat'n

T.A. Hand,

Date of enlistment 22nd Sept., 1914

115 Kohler St., Sault Ste. Marie, Ont

Place of birth, Ontario

Married (yes or no) No

Date and place discharged

Amount of pay assigned monthly \$

Reason for discharge

To whom payable

Character on discharge

Date		PAY		Field Allowance		Other Credits		Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount		No.	Date					
22/9/14	31/10/14	10	10	10	10	10	10	10			1250			1250	
1/11/14	30/11/14	30	10	30	30	10	30	150	34		3250			3250	
Dec 1	31	31	10	31	31	10	310	2	36		1750			1750	
Jan 1	31	31	10	31	31	10	310	18	60		45			345	48.45, 23 Days No Act
Feb 1	Feb 28	28	10	28	28	10	280	4	25						
Mar 1	Mar 31	31	10	31	31	10	310	3	5		10			10	
Apr 1	Apr 30	30	10	30	30	10	300	3	15		3			3	
May 1	May 31	31	10	31	31	10	310	8	15		6			6	
Jun 1	Jun 30	30		30	30		2	11	25		6			6	
July 1	July 31	31		31	31		3	10	144		56			56	
										583 Exchange adjustment					
										122 25					
Aug 1	Aug 31	31	10	31	31	10	310	128	18		2			2	92
Sep 1	Sep 30	30	10	30	30	10	300	15	36		8			8	16
Oct 1	Oct 31	31		31	31		3	10	184		184			184	34
Nov 1	30	30		30	30		3		23		96			2	68
Dec 1	31	31		31	31		3	10	64		28			16	84
Jan 1	31	31		31	31		3	10	81		54			5	24
Feb 1	29/2/16	29		29	29		2	90	110		40			10	10
										526					
										5260					
										132 25					
										584 43					
										448 78					
										345					
										452 23					

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
				526			5260	583	584	113	448	78	345	448	78	
May 1	-31	31	1.00	31	31	10d	132 310	132	20	166	30	5	24	5	24	
							16106									
		557					5570	583	618	53	454	02	345	457	47	

Balance Trans. to New Ledger.

MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

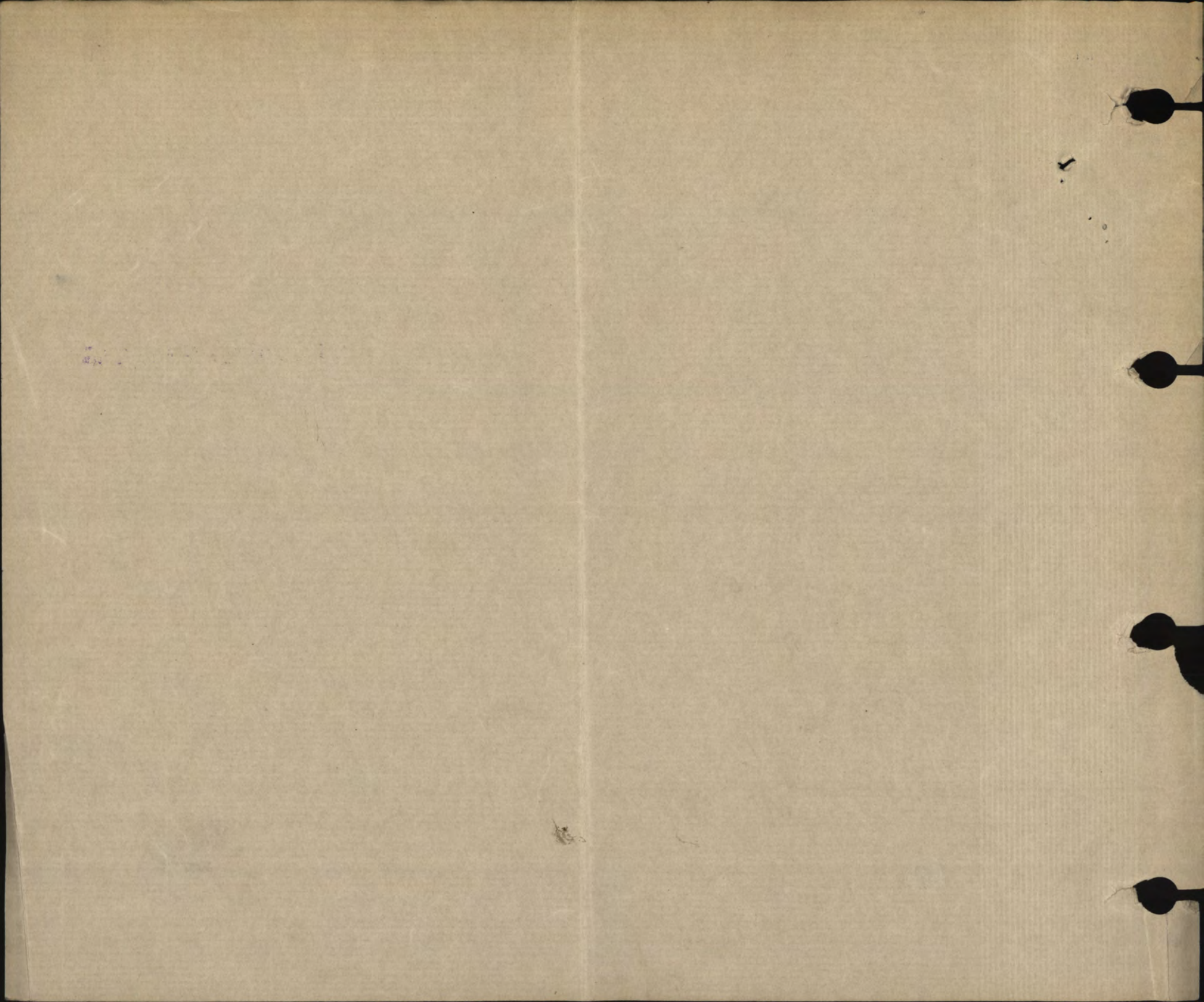
To Whom *Mrs T.A. Naud* By Whom Assigned *Naud. P.*
 Address *115 Kohler Street* Regtl. No. *7977*
Saint-Basile Rank *PT*
Que. Corps *2nd BU*
 Rate *\$ 100 00*

SPECIAL REMITTANCE

Schedule # 174. 24.8.16 PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.	1916	N. 16649	100.	
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				





Casualty Form—Active Service.

*By H. Leonard
K. 2101/2/9*

Regiment or Corps 2nd Battalion C.E.F.

Regimental No. 7977 Rank Pte Name Stand Percival Alexander

Enlisted (a) 22/9/14 Terms of Service (a) Period of War Service reckons from (a) 22/9/14

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

Extended Re-engaged Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B, 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
17.10.15	2 Bn	Granted 7 days leave Rejoined from leave Attend 1st Can Inf Bde as Sec'd. Auth 400 1st Can Inf Bde 30-119d/22.8.16.	Field	12.10.15	B217
24.10.15	do			19.10.15	B213
27.8.16	do			22.8.16	B213
26.11.16	2nd Batta	Granted leave of absence from 22.11.16 to 2.12.16.	X.X.	26.11.16	B213. Part #. 0.84 of 4 ¹⁴ / ₁₆ .
10.12.16	do			Returned from leave	2.12.16
13-4-17.	AG. GHQ	Transferred to England & posted to Eastern Out Regt'l Depot, Seaford. for discharge from the Canadian Forces and			(Quitting W.O. letter 100/ Flying Coy 294. (S.D. 3.C) d/30-12-16. AG letter D/2538/631, 633, 645 & 647 d/13-4-17. AAG Com Sec GHQ 3rd Echelon KE 15044.

(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, Shoening Smith, etc., etc., also special qualifications in technical/Corps duties.

Date	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.
		re-enlistment with the Royal Flying Corps	Field,	11-1-14 21-4-14	PT II Ord 102 d/23-18-14 <i>J. H. ...</i> Lieut. for Lt. Col. A.A.G.
19 ¹¹ / ₁₇	CORR.	Posted from 2 nd Lt. Bn. Seaforth shown on Comm. No. 2. R. F. C. Winchester. Comm.	Seaforth.	9 ⁸ / ₁₇	Pt. II No. 252. <i>W. M. ...</i> LIEUT. FOR LT: COL: I/Q RECORDS, C.O.M.F.
		DISCHARGED IN ENGLAND, K. R. & O. PAR. 392, SEC. XXV.			
12 ³ / ₁₈	CORR	Cases to be shown on Comm. & S.O.S. on being dischgd. in British Isles.	Seaforth.	29 ¹⁸ / ₁₈	<i>J. H. ...</i> Lieut. for Lt. Col. i/c Records. Comm.

MARRIED OR SINGLE *S*

PLACE OF BIRTH *Ontario*

NAME AND ADDRESS OF NEXT OF KIN *J. A. Sand*
115 Kohler St. Sault Ste Marie Ont

RELATIONSHIP OF NEXT OF KIN

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	
<i>App'd to command 21/30/11/18</i>			
ADMISSIONS TO HOSPITAL &c.			
DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L No. *4944* RANK *Pte.* NAME *Hand Percival Alexander*

IF IN PERM. CORPS | UNIT *2nd Bn* TRANSFERRED TO *1st Bn* DATE *21.7.17* AUTHORITY *Det'd notes*

PERMANENT FORCE ALLOWANCES TRANSFERRED TO *WORK D* DATE *1.11.17* AUTHORITY *WR*

PLACE OF ATTESTATION TRANSFERRED TO *Cadet's Camp* DATE *1/3/18* AUTHORITY

DATE OF ATTESTATION *22nd Sep 1914* TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE *Int on cadet course*

PAYABLE TO RELATIONSHIP

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE *1.30* RELATIONSHIP

PAYABLE TO RELATIONSHIP

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

DISCHARGE DATE AND PLACE *29-1-18 England* REASON AND AUTHORITY *Commission Imperial Army*

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) *25.2.18-1682*

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE) *6.1.18*

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1	2	3	4	1	2	3	4				CREDIT	DEBIT			
			\$	c.			\$	c.			\$	c.																			
			<i>557</i>				<i>5570</i>								<i>583.61853</i>					<i>45402</i>							<i>345 457.47</i>	<i>161 06</i>		<i>6th Bat from pres etc</i>	
<i>Apr 30</i>	<i>30</i>	<i>100</i>	<i>30</i>	<i>30</i>	<i>100</i>	<i>3</i>									<i>33</i>	<i>895 14/4</i>	<i>912 27/4</i>					<i>2 61</i>	<i>2 61</i>				<i>5 22</i>	<i>188 84</i>			
<i>May 31</i>	<i>31</i>	<i>31</i>	<i>31</i>	<i>31</i>	<i>31</i>	<i>310</i>									<i>34 10</i>	<i>494 12/5</i>	<i>470 6/5</i>					<i>2 55</i>	<i>2 55</i>				<i>5 10</i>	<i>217 84</i>			
<i>June 30</i>	<i>30</i>	<i>30</i>	<i>30</i>	<i>30</i>	<i>3</i>										<i>33</i>												<i>250 84</i>				
<i>July 31</i>	<i>31</i>	<i>31</i>	<i>31</i>	<i>31</i>	<i>3 10</i>										<i>34 10</i>		<i>1145 1/7</i>					<i>2 61</i>				<i>2 61</i>	<i>282 33</i>				
<i>Aug 31</i>	<i>31</i>	<i>31</i>	<i>31</i>	<i>31</i>	<i>3 10</i>										<i>34 10</i>	<i>164 16/1</i>	<i>1221 4/8</i>	<i>7/108</i>	<i>Remd 15/8</i>			<i>2 62</i>	<i>2 61</i>	<i>100</i>		<i>105 23</i>	<i>211 20</i>				
<i>1930</i>	<i>30</i>	<i>30</i>	<i>30</i>	<i>3</i>											<i>33</i>	<i>1268 18/8</i>						<i>3 49</i>			<i>3 49</i>	<i>240 71</i>					
<i>1931</i>	<i>31</i>	<i>31</i>	<i>31</i>	<i>3 10</i>											<i>34 10</i>		<i>1378 14/10</i>	<i>417 3/10</i>	<i>13855</i>			<i>2 61</i>	<i>5 23</i>				<i>14 82</i>	<i>259 99</i>			
<i>Nov 30</i>	<i>30</i>	<i>30</i>	<i>30</i>	<i>3</i>											<i>33</i>			<i>434 12/10</i>	<i>1699 bank</i>				<i>3 49</i>			<i>14 82</i>	<i>259 99</i>				
<i>1932</i>	<i>31</i>	<i>31</i>	<i>31</i>	<i>3 10</i>											<i>34 10</i>	<i>1434 21/11</i>		<i>7/108</i>	<i>Remd 15/8</i>			<i>2 61</i>	<i>14 60</i>			<i>17 21</i>	<i>275 78</i>	<i>165 00</i>			
<i>1917</i>	<i>31</i>	<i>100</i>	<i>8370</i>				<i>8370</i>								<i>34 10</i>			<i>910 22 7. P. 21/11/16</i>	<i>523</i>			<i>97 33</i>			<i>109 54</i>	<i>250 34</i>	<i>180</i>				
<i>Jan 31</i>	<i>31</i>	<i>31</i>	<i>34 10</i>												<i>34 10</i>			<i>9844</i>	<i>187 14/12</i>				<i>10 46</i>		<i>10 46</i>	<i>223 98</i>	<i>105</i>				
			<i>949 30</i>												<i>583 955 13</i>							<i>473 07</i>	<i>10 44</i>	<i>129 59</i>	<i>114 60</i>	<i>3 45</i>	<i>731 15</i>				

7917 Pke Island Pa

Main ledger table with columns: DATE, PAY, FIELD ALLOWANCE, WORKING OR SPECIAL PAY, ASSIGNED PAY CREDITS, OTHER CREDITS, TOTAL CREDITS, ACQUITTANCE ROLLS (1-4), CASH PAYMENTS (1-4), ASSIGNED PAY, OTHER CHARGES, TOTAL DEBITS, BALANCE (CREDIT/DEBIT), PAY WITHHELD OR DEFERRED, PAY AVAILABLE FOR ISSUE, REMARKS.

MONTH PARTICULARS table with columns: MONTH, PARTICULARS, CR.1, CR.2, PARTICULARS, DR.1, DR.2, DR.3, DR.4, BALANCE, DEFERRED, SER. REGR. ALLOC. PAY ENG.

19-6-16. Date adm. (Handwritten note)

Stamp: A3 M. FOR R. nil EFFECTUAL DISCHARGE DATE 29/1/18 PAY BEG. unavalable AUTH. 103 08 W. 28 20-28 1682

4866 and his balance cannot be certified correct owing to receipt of Active Service Pay book.

Handwritten notes: Dr Bal based to amp. 9c Pa. Bond Rules 653 Pa. 10 932

Rank and Name **HAND, Percival Alexander**
 Regimental No. **7977** Name and Address of Next-of-kin **T. A. Han,**
 Unit **2nd Battn.** **115 Kohler St., Sault Ste. Marie Ont.**
 Date of enlistment **Sept. 22, 1914**
 Place of birth **Ontario**
 Married (Yes or No) **No** Date and place of discharge
 In Permanent Force Reason for discharge
 Character on discharge
 Promotions or appointments

N/E: R.B. No. ~~1510~~
 File R.L. 23-2-390
 Category **Com**

En 27666
6570

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				
31-7-15	OC 2 nd	On Your Roll	In the Field	31-7-15	
23-10-15	"	Granted proceeded on 7 days leave Trans. to be reported to S.O.R. for Disch. from C.F.F. & Re-enlistment with R.F.C.	"	12-10-15	PTI-35
23-10-14	"	"	"	21-11-14	102
9-8-17	No. 2. R.F.C. Cadets wing	Attached for pay, ration & accommodation.	Winchester	9-11-17	75.
11-10-17	S.O.B.	Adm. King George Hosp.	Stamford St. S.S.	9-10-17	C.S. B. 314 Adenoids.
19-11-17	S.O.B.	Posted from 2 nd Bn. of Seaforth Comps. to No. 2. R.F.C. Winchester	Seaforth.	9-8-17	Ph. No 252. 1. P. 2053 of 24/18
15-10-17	No. 2. R.F.C.	ceases to be on Comm. to No. 2. R.F.C. Having proceeded to School of Mil. Aeronautics (Cadets Sect.) Norton Barracks, Worcester, as S.O.S. accordingly.	"	9-10-17	217.
4-1-18	Cadet wing	"	"	4-1-18	H.
26-2-18	S.O.B.	ceases to be on Comm. R.F.C. Co. Winchester & return on Comm. to School of Mil. Aeronautics, Worcester.	"	4-1-18	57.

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

12 3/18.
1 3/18.

Col. D.
his report

ceases to be on Comm. of 4.
a. ~~not~~ on being discharged
from Can. S. F. in the O. Sales.

Seaford.

29 1/18.
29 7/18

Pl. T. S. 7/11.
W. R. 27a



This space to be left blank for the Chelsea Number.

[Blank box for Chelsea Number]



23 H 390

Army Form B. 268.

Proceedings on Discharge.

2348

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

No. <u>4944</u>	Army Rank <u>Plt.</u>
Name <u>Hand Percival Alexander</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>	
Corps <u>2nd Batt.</u>	<u>6th Res.</u>
Battalion, Battery, Company, Depôt, &c. <u>S. O. R. S.</u> <small>(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.)</small>	
Date of discharge <u>29th January 1918</u>	
Place of discharge <u>No. 2. S.O.S. London</u>	
1. Description at the time of discharge.	
Age <u>24</u> years <u>5</u> months	Descriptive marks. <u>Nil</u>
Height <u>5</u> feet <u>5</u> inches	
Chest measurement { girth when fully expanded <u>38</u> ins. range of expansion <u>3</u> ins.	<u>work.</u> <u>Mrs. J. A. Hand.</u> <u>115 Kohler St.</u> <u>Sault Ste Marie.</u>
Complexion <u>Fresh</u>	
Eyes <u>Grey</u>	
Hair <u>Dark</u>	
Trade <u>blaffer</u>	
Intended place of residence (To be given as fully as practicable) { <u>ban. bon.</u> <u>19 Victoria St.</u>	
<small>(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.)</small>	
2. The above-named man is discharged in consequence of <u>Having been appointed to</u> <u>commission in Imperial Army. R. F. S. 30/1/18</u>	
<u>Auth. London Gazette 19/2/18 P. 21922. RR 20. 392. XXII</u> (Deceased)	
<small>(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.)</small>	
3. Military character:—	VERY GOOD
4. Character awarded in accordance with King's Regulations:—	MILITARY CHARACTER. VERY GOOD
<u>14/15: Stan</u> <u>30-11-20</u> <u>R.R.</u>	
Certified that the above is an accurate copy of the character given by me on Army Form <u>2007*</u> and that Army Form <u>D. 280</u> was awarded in this case.	
Initials of Commanding Officer. LONDON	
Army Form B. 2088 has been issued to*	

Handwritten notes in a circle: Handwritten notes

To be filled in on the soldier quitting the Colours.

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?

Not Applicable

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

6. Campaigns, Medals and Decorations

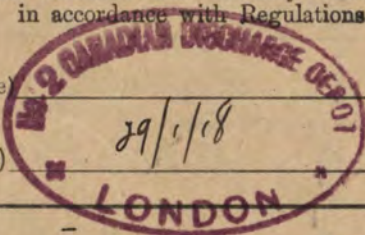
France 29 months

Certificate of education *S. Anderson Not available*

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

(Place)

(Date)



Commanding *J. J. J.* Batta. Regiment.

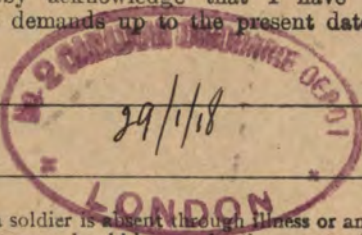


8. Certificate to be signed by the soldier on discharge.

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)

(Date)



S. Anderson (Signature of Soldier.)

S. Anderson (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 *29/1/18* (the date to which the record of service is completed) years days.

Further service " " *29/1/18* (the date of confirmation of discharge) 3 " 130 "

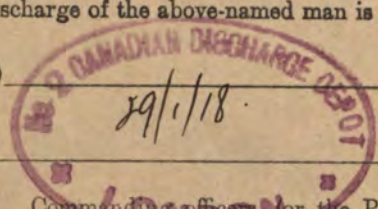
Total ... 3 " 130 "

11. Confirmation of discharge.

The discharge of the above-named man is hereby confirmed for *29/1/18* (date)

(Place)

(Date)



Signature *J. J. J.*



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

RESERVATIONS REFERRED TO AT PARA. 8.

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

Subject to Bal. of Pay.
Retained

LIST OF DISCHARGE
DOCUMENTS.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

M. OR S. _____ REGT. NO. **7977** RANK **O/C** NAME (IN FULL) **Perovich Alex Paul**

NEXT OF KIN _____ ORIGINAL UNIT C.E.F. **2nd Batt.** IF IN P.F. WHAT UNIT? _____ BLOCK LETTERS SURNAME FIRST

ADDRESS _____ PLACE OF ATTESTATION _____ TRANSFERRED TO _____ DATE _____ AUTHORITY _____

DATE OF ATTESTATION _____ TRANSFERRED TO _____ DATE _____ AUTHORITY _____

ASSIGNED PAY \$ _____ DATE EFFECTIVE _____

IS SEPARATION ALLOWANCE PAID? _____ DATE EFFECTIVE _____

PAYABLE TO _____ RELATIONSHIP (ANY CHANGE IN ASSIGNEE OR ADDRESS) _____

ADDRESS _____

STOP PAYMENT FORM RENDERED, DATE _____ EFFECTIVE _____

DISCHARGED _____ PLACE _____ DATE **30-1-18.** REASON _____ AUTHORITY _____ IF ENTITLED TO POST DISCHARGE PAY _____

*Director of Records (Legal Section)
Dept of Nat. Defense, Ottawa
for credit of Alex Paul Perovich*

BALANCE FROM PREVIOUS ACCOUNT

MONTH	PAY AND F.A.		OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS	
	NO. OF DAYS	RATE			AMOUNT	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2					COL. NO. 3	DEBIT		CREDIT
18-2-24	91	110		100.10									4866	100.10		###	Ch# 4229 20/2/24	

