

ORIGINAL

ATTESTATION PAPER

No. 1276

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

110225

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

1. What is your name? *Thomas Harrington*
 2. In what Town, Township, or Parish, and in what Country were you born? *Montreal*
 3. What is the name of your next-of-kin? *Jemima Harrington*
 4. What is the address of your next-of-kin? *539 Workman St.*
 5. What is the date of your birth? *14th April 1879*
 6. What is your trade or calling? *Labourer*
 7. Are you married? *Yes J.A.*
 8. Are you willing to be vaccinated or re-vaccinated? *Yes*
 9. Do you now belong to the Active Militia? *No*
 10. Have you ever served in any Military Force?
If so, state particulars of former Service. *Prince of Wales Fus. 3 years 6 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*
- Thomas Harrington* (Signature of Man)
Lindsay (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Thomas Harrington*, 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.

Date *June 25th* 191*5* *Thomas Harrington* (Signature of Recruit.)
Lindsay (Signature of Witness.)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Thomas Harrington*, 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.

Date *June 25th* 191*5* *Thomas Harrington* (Signature of Recruit.)
Lindsay (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 *25th* day of *June* 191*5*

W. S. Hamilton (Signature of Justice.)

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

W. S. Hamilton (Approving Officer.)

79
37

DESCRIPTION OF Thomas Harrington ON ENLISTMENT.

Apparent Age 36 years _____ 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.

Height 5 ft. 8 ins.

(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.)

Chest measurement { Girth when fully expanded 36 1/2 ins.
 Range of expansion 35 ins.

*1 Vac mark Right arm
 Bust of Woman left fore arm
 J. N. S. Mark & X on right arm*

Complexion Fair

Eyes Blue

Hair Fair

Religious Denominations { Church of England Yes
 Presbyterian _____
 Methodist _____
 Baptist or Congregationalist _____
 Other Protestants _____
 (Denomination to be stated.)
 Roman Catholic _____
 Jewish _____

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 June 25th 1915

Place Montreal

[Signature]
 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

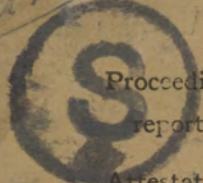
T. Harrington having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

Lt. Colonel (Signature of Officer.)

Date 15.6.15. 1915

O. C., 5th CANADIAN MOUNTED RIFLES

17-10-18

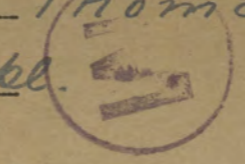


DISCHARGE DOCUMENTS

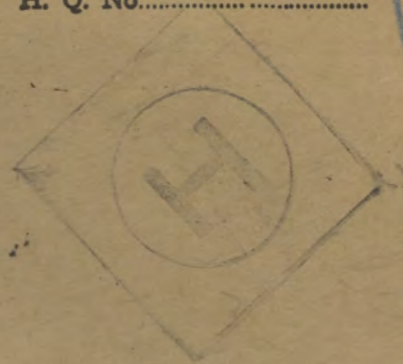
R. O. No.....
H. Q. No.....

- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers..... 123 3
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet..... 1
- Compulsory Stoppages..... 1
- Casualty Forms.....
- Proceedings on discharge.....
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- Parchment Certificate.....
- Medical Report for Invalids.....
- Medical History Sheet..... 1
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet..... 1
- Clothing Transfer Certificate.....
- Inventory of Kit.....
- Last Pay Certificate.....

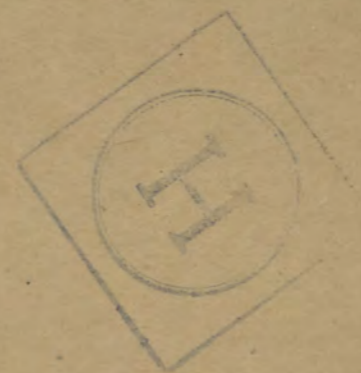
Name Harrington Thomas
 Regt. No. 110225 Rank S/cpl
 Corps 5th C. M. R.



05920



Deed of wounds 9.6.16



*2 LB 178-1
 1 record 2*

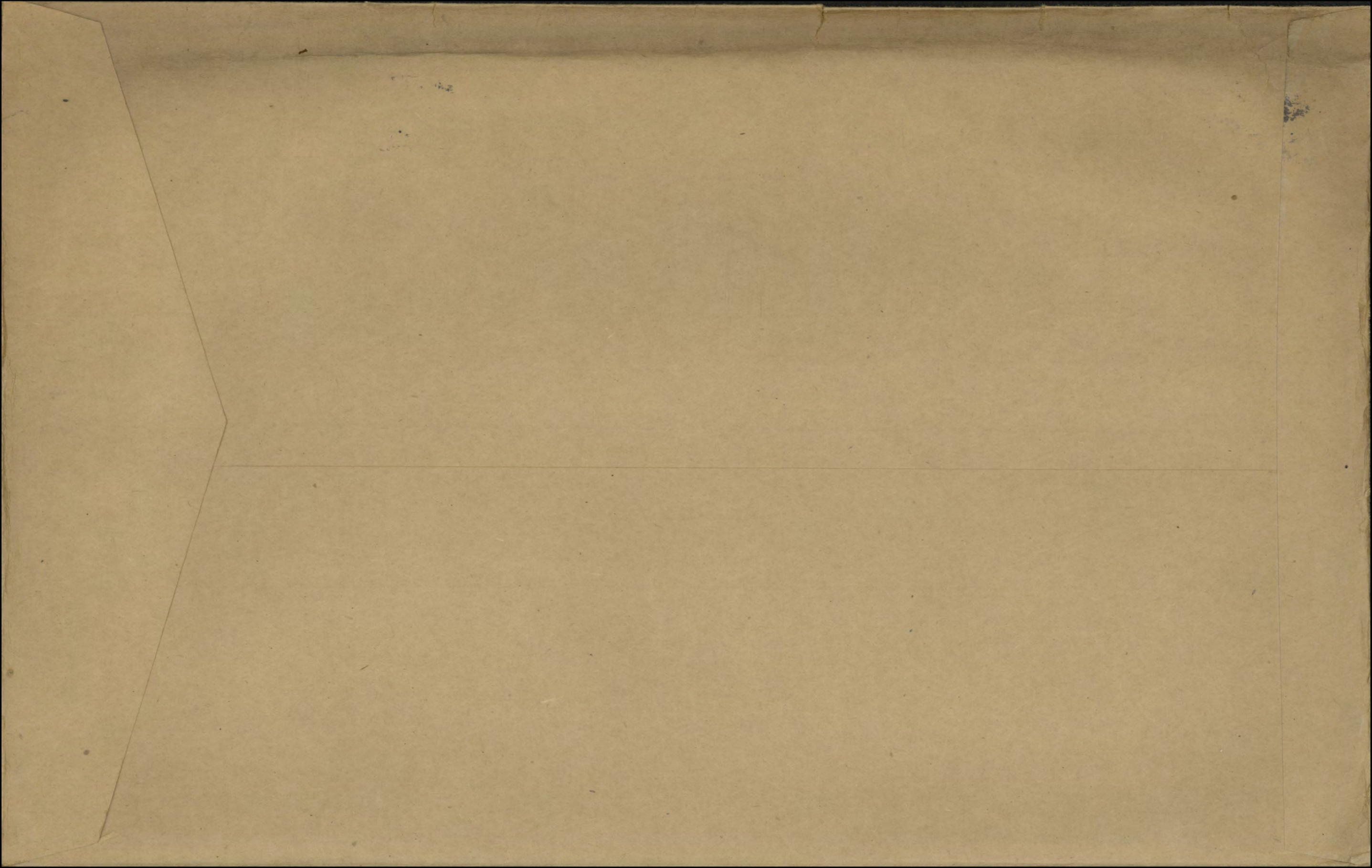
*will
 (copy) will*

M. F. W. 62.
 50m.-9-16.
 H. Q. 1772-39-935.

*mt 15.4
 20.*

*16-1
 24-1
 303*

2



A. E. F.

110223 L. Corp J. Harrington

14

WILL Dec. 10/5-

In the event of my
 death I give the
 whole of my
 property and
 effects to my wife
 Mrs Thomas Harrington
 Linton apartments
 Sherbrooke St
 West Montreal
 L. Corp Thomas
 Harrington 110223

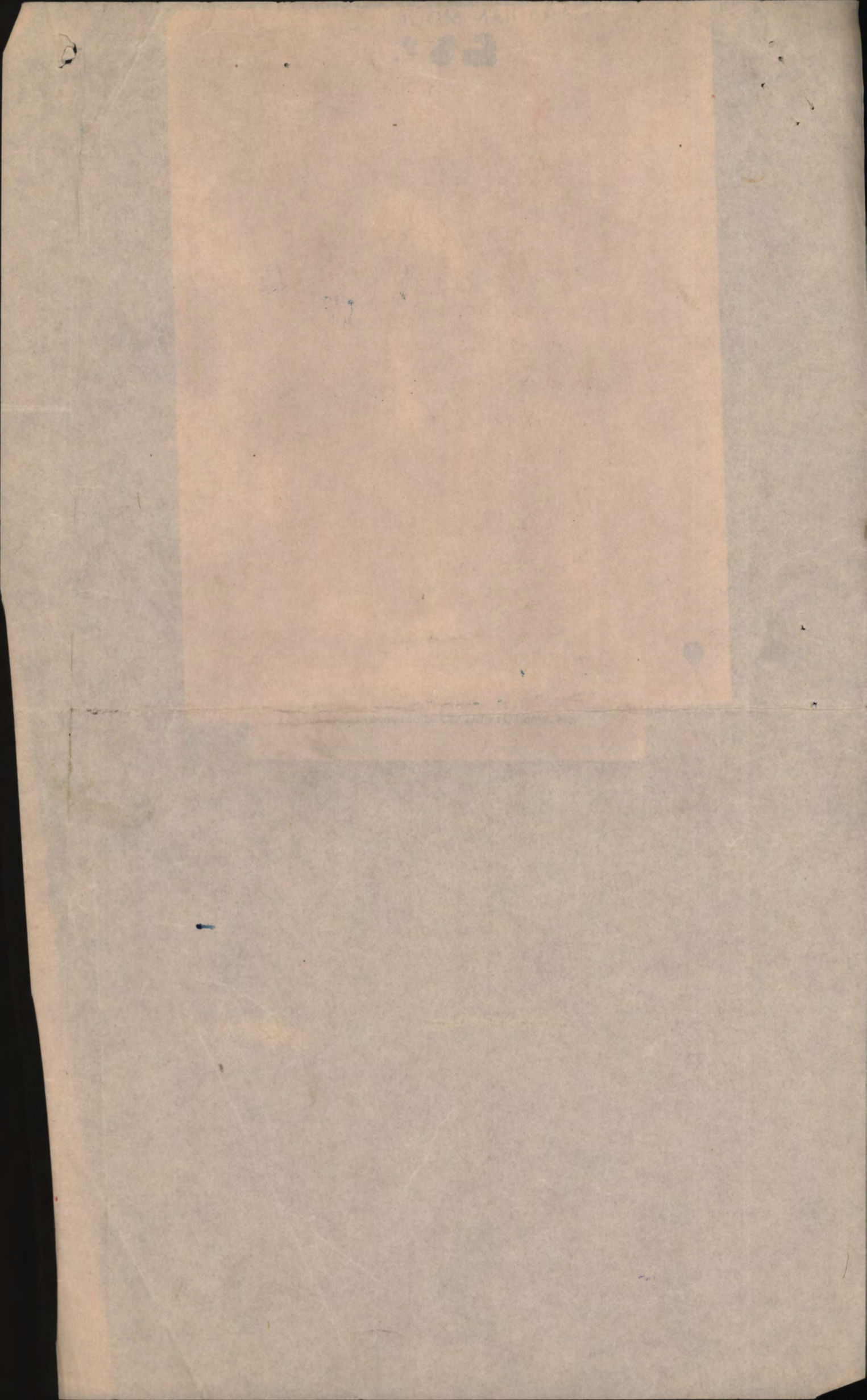
97

This is to certify that the handwriting
 in the will attached hereto was compared with
 the signature in the

Paybook and has been found similar.

H. W. Collis
 for Lieut.

Officer i/c Estates 111.



MEDICAL HISTORY SHEET.

Surname Harrington Christian Name Thomas

Examined { on 25th day of June, 1915 at Montreal
 Birthplace { City or Town Montreal County Prov. Quebec

Approved by [Signature]
 Rank _____ M.O.

Apparent age 36 years
 Trade or occupation Laborer
 Height 3 Feet 8 Inches.
 Weight _____ Lbs.
 Chest measurement { Minimum 33 1/2 inches.
 Maximum expansion 36 1/2 inches.
 Physical development _____
 Small-Pox Marks _____

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vision 4/5
 Vaccination Marks { Arm Right Left
 Number 1

Date	Result	VACCINATIONS.
<u>5-7-15</u>	<u>Capt. J. R. Goodall</u>	M.O.
		M.O.
		M.O.

When Vaccinated last _____
 (a) Marks indicating congenital peculiarities or previous disease Tattoo marks (various) left & right fore arm.
 (b) Slight defects but not sufficient to cause rejection

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>1-9-15</u>	<u>Capt. J. R. Goodall</u>	M.O.
<u>17-9-15</u>		M.O.
<u>23-9-15</u>		M.O.

Enlisted on 25th day of June, 1915 at Montreal

	CORPS	REG'T NUMBER	RANK	DATE
Joined on enlistment	<u>5th C.M.R.</u>	<u>110225</u>		
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.

Casualty Form—Active Service.

Regiment or Corps 5th Canadian Mounted RiflesRegimental No. 110225 Rank Lie-Corpl Name Harrington, ThomasEnlisted (a) 25-6-15 Terms of Service (a) Duration of war Service reckons from (a) 25-6-15Date of promotion to } 1-9-15 Date of appointment } 1-9-15 Numerical position on }
present rank } to lance rank } 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				
		L/Corporal.	Shorncliffe	1-9-15	
			LANDES IN FRANCE		
			24 St. 10. 15		
31/3/16	O.B. Unit.	Severely Reprimanded for "neglect of duty when orderly corporal."	Field	26/7/16	B2069 1/3/16 Pt. 111 No. 14.
24/5/16	10 C.P.A.	Scabies adm	10 C.P.A.	5/5/16	A36 14/5/16 O.C.S. 130
31/5/16	"	Eczema adm	D.R.S.	17/5/16	A36 20/5/16 O.C.S. 130
9/6/16	O.B. Unit.	Rejoined Unit.	Field.	23.5.16	B213 27/5/16 O.C.S. 133
12.6.16	3 C.C.S.	S.W. Thigh R. adm	3 C.C.S.	3/6/16	A36 4/6/16 O.C.S. 137
13.6.16	14 Gen.	Died at Wounds	14 Gen	9/6/16	Tel., N.A.G. No. 137/153 Pt. 111 14/6/16

(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., also special qualifications in technical Corps duties.

[P.T.O.]

Lieut.
for Lt. Col., A.R.C.

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				

E

Rank _____ Name **HARRINGTON, Thomas** Reg'l No. **II0225**
 Unit **5th C.M.R.** If in perm. Corps, }
 What Unit? } Married or Single **Married**

Place and Date of Enlistment **Montreal P.Q. 25th June, 1915** Place of Birth **Montreal**

Name and Address, Next-of-Kin **Jermiho Harrington,**
539 Workman St, Montreal. Relationship _____

Assigned Pay Monthly \$ _____ Payable to _____
 Relationship _____

Separation Allowance \$ _____ Payable to _____
 Relationship _____

Discharge, Date and Place _____ Reason _____ Character _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
Date	From whom received				
		<i>Embarked for France.</i>		2.4 OCT 1915	
22.9.15	OC5th.	<i>To be kept from 1/15</i>	<i>Shoncliffe</i>	22 9/15	PT-II D.O. 123 ✓
31.3.16	---	<i>Severely Rep: Neglect of duty</i>	<i>Field</i>	26 7/16	" 14
31.5.16.	<i>5th Bn Camb. #10 Cam: Fld. Amb:</i>		---	5 5/16	6L A132. Serbia. 21.
5.6.16	---	<i>3rd Divil Rest St</i>	---	17 5/16	Eczema.
7.6.16.	---	<i>#14 Gen Hosp. No report</i>			
		<i>Dang: ill</i>			
12.6.16	---	<i>Rep from Base.</i>			
		<i>#14 Gen Hosp. Wied</i>			
14.6.16	---	---			
				6 6/16	6L A. 137. SMC High 23 0/14
				9 4/16	6L A141. 9/14
					PT-II 0.24.

Rank *Lt Col* Name **HARRINGTON, Thomas**

Reg'l No. **110225**

P-56 ✓

Unit **5th C.M.R.**

If in perm. Corps, What Unit?

Married or Single **Married**

Place and Date of Enlistment **Montreal P.Q. 25th June, 1915** Place of Birth **Montreal**

Name and Address, Next-of-Kin **Jermiho Harrington,**

539 Workman St., Montreal

Relationship

Assigned Pay Monthly \$ **17⁰⁰** **1-11-15** Payable to **Mrs. J. Harrington, Linton Apts. Montreal, Sherbrooke St, west**

Relationship

Separation Allowance \$ Payable to

Discharge, Date and Place **9/6/16**

Reason **Died of wounds**

Relationship

Character **40.24(7)**



Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						
Aug 1	Aug 31	31	1.00	31 -	31	10	3 10	27 85	61 95			48 66			48 66	13 29	bal. for. P.Q. 183 490 19
Sep 1	30	30	1.05	31 50	30	10	3		47 79			34 07			34 07	13 72	
Oct 1	31	31	1.00	31	31	10	3 10		47 82			22 13			22 13	25 69	
Nov 1	30	30	1.05	31 50	30	10	3	155	61 74			2 68	17 -		10 68	42 06	31 days not credited
Dec 1	31	31	1.05	32 55	31	10	3 10	155	79 26			16 84	17 -		33 84	45 42	1 day not credited
Jan 1	31	31		32 55	31		3 10		35 65			5 23	17 -		22 23	58 84	
Feb 1	29	29		30 45	29		2 90		33 35			5 24	17 -		22 24	69 95	
Mar 1	31	31		32 55	31		3 10		35 65			4 62	17 -		19 62	85 98	

Checked *[Signature]*

BALANCE TRANSFERRED TO NEW LEDGER.

Statement of
CCT 25 1916
Account rendered

Error of crediting Lt Col's pay for Feb. twice (1.15) adjusted fully pay kept.

Cash found in effects *no Rep*

Settled.

253 10

24 40 30 95 308 45

137 47 85

222 47 85 98

SEPARATION ALLOWANCE

Sheet No. 2.

Sarah, Harrington OVERSEAS CONTINGENTS
wife
 PAYMENTS. #110275

Name of Soldier

Harrington J.
pte

L. L. Job 89002.—Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	1145	20	
May		353	20	
June		4521	20	
July		9747	20	
Aug.		17939	20	
Sept.				Acct closed Pension granted 10 ⁶ / ₁₆
Oct.				
Nov.				34 ⁰⁰ Recovered as per Pensions List for Oct. 1916. by S. 11/4/17.
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

ACCOUNT CLOSED

DATE _____ PER _____

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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.				

From 11/15

MILITIA AND DEFENCE

57

SEPARATION ALLOWANCE

Name *Sarah Harrington*

Name of Soldier *Harrington J.*

Address *Linton Apts,
Shurbrooke St,
Montreal*

Regtl. No. *110225*

Rank *Pte.*

Corps *5th C.M.R. Base details*

Relation to Soldier } *wife.*
wife, child or mother }

To what Corps belonging }
when called out }

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.		<i>713894</i>	<i>20</i>	<i>20.</i>
Dec.		<i>716268</i>	<i>20</i>	<i>20.</i>
Jan.	1916	<i>25564</i>	<i>20</i>	<i>20</i>
Feb.		<i>26883</i>	<i>20</i>	<i>20</i>
March		<i>32759</i>	<i>20</i>	<i>20</i>

ACCOUNT CLOSED
DATE..... PER.....

acct closed

1900
1901
1902
1903
1904
1905
1906
1907
1908
1909
1910
1911
1912
1913
1914
1915
1916
1917
1918
1919
1920

1921
1922
1923
1924
1925
1926
1927
1928
1929
1930

1931
1932
1933
1934
1935
1936
1937
1938
1939
1940

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.

L. L. Job 89002.-Req. 6213.

Mrs.
J. Harrington

PAYMENTS.

Name of Soldier

Harrington, J.#1102252/ep.5th C.M.R.base.\$17.00

Remarks.

Month.

Year.

Cheque No.

Amt.

April

1916

2165317

May

NH45917

June

~~14953~~~~17~~

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

CasualtiesNot closed yet.Pension granted June 10/16 OK119⁰⁰ 7 X 16^{2/17} 2116ref. toCancelled.

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier.....

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1913			
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.				

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

Mrs. (John)

To Whom

Address

J. Harrington
Dinton Apts
Sherbrooke St. W.
Montreal

Rate

17 00 Nov

By Whom Assigned

Regtl. No.

Rank

Corps

Harrington J.
110 225
P/O
Base 5 C M R.
24m 20 10/15 TIR

PAYMENTS

Casualties

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916	217595	34 -	
Feb.		Q 13543	17 -	
March		13963	17 -	
		114523	17 -	

Died of wounds June 9/16 Lt. 11/6/16
R.Also 3 M - July 6/16
J.H.

Pension granted June 10/16 A.K.

Re M.R. 19/3/16 Pmk

W

1845

Register No. OH 119

WAR SERVICE GRATUITY

A.P. File No. 8049-7-11

TO
DEPENDENTS OF DECEASED SOLDIERS

Regt'l No. 110225 Name Thomas Harrington
(Christian Name) (Surname)
 Unit 5th C. M. P. Rank L/cpl Date of enlistment.....
 Date of casualty 9-6-1916 B.P.C. File No. 5429
 Was service performed overseas? yes.

DEPENDENT

Name Ms. S. Blanchard (nee Harrington) Relationship Widow
 Address 63 Jeanne D'Arce St
Montreal
P.Q.

Amount of Special Pension Bonus \$ 64 Abstracted by J Maher

Eligible for Gratuity \$ 180.00
 Less amount of Special Pension Bonus paid \$ 64.00
 Less Debit Balance of S. A. or A.P. \$

Total deductions \$ 64.00

Balance due \$ 116.00

Cheque No. 91894381 Date issued 19-7-20

REMARKS: Remarried - Hold payment
until address is verified.

Clerk ATM

Audited by
Leslie Howard
 Date 15.7.20

M.F.W. 2652
 25M-6-20.
 H.Q. 1772-39-1473

20/17

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		

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

Remarks:

Surname *Harrington J.* Christian Name or Names
 Rank *Lt.* Unit *S^r B. M. R.* Co. Reg. No. *110225*
 Hospital *#10 Can. Fd. Dep.* Troop Batty.
 Date of Admission *S. S. B.*

Transferred *9 Div. Royal Scots* Hosp. *17.5.16*
14 Gen. Hospital Hosp. *6.6.16*
 Hosp.
 Hosp.

Diagnosis *Scabies*
 (1) Later Diagnosis (if changed) *Eczema*
 (2) *G.S.W. Thigh R.*
 (3)

Additional Diagnosis: if more than one state present
Died (G.S.W. R. Thigh) 9-6-16

DISPOSITION

Date

<i>6.7.31.5.16.</i>	<i>A132</i>	
<i>5-6-16</i>	<i>D135</i>	
<i>7.6.16</i>	<i>A137</i>	
<i>C.L. 12-6-16</i>	<i>A141</i>	<i>seriously ill Reptd from Base.</i>

REMARKS

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

W.B.

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

NAME Parrington, Thomas

H. Q. FILE No. 649-

RANK AND CORPS Lieut/Cpl. 5th C.M.R.REG'TL. No. 110225

CABLE

NATURE OF CASUALTY

NO.

DATE

4m7483	6-6-16	Dangerously ill No. 14 General Hosp. Wimereux, June 6th, 1916 (wounded right thigh) ✓
also		
R1680	8-6-16	With reference to your telegram June 8 th
M.7841	10-6-16	Died of wounds at No 14, Gen. Hosp. Wimereux, June 9th, 1916. ✓
A.F.B2090a	Renew 14 th June 1916	- Died of wounds received in action s.w. thigh R. 9 th June 1916 -

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A132	No 10 C. F. A.	2-2-16.	Scabies.
A135	3rd Div. P. S.	14-5-16.	Eczema.
A134	O.C. No 14 Gen. Wimeraw Reports	6-6-16.	G.S. W. P thigh (dangerously ill)
A141	Reported from Base	9-6-16.	" " (died)

Name Harrington Rank L/C

Reg. No. 110225

Thomas
Unit 5th. C.M.R.

Next of Kin Canada

File R.L. 25-N-854.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
5-5-16	No. 10 Can. F. Amb.		Scabies	A132		
17 -	3rd D.R.S.		Eczema	A135		
June 6.	O.C., no. 14 Gen. Hosp. Wimeroux.		S.D.W.R. High			
			<u>DANGEROUSLY ILL</u>	A137		m. 74.8
9.	<u>DIED</u> (of Wounds).			A141		m. 76 78.4 10-6.

5m Number 110 225- Rank *Lt Col* B

Surname HARRINGTON

Christian Name *James* V

Units *56 In R* Theatre of War *France*

Date of Service *24-10-15* D

Remarks *(Widow)*

Latest Address *Mrs. Sarah Blanchard*
63 Jeanne D'Arc St.

Roll No. *B, Page 152 14.* *Montreal,*

200m.-2-21.M. *P.Q.*

DESP. JUL 20 1922

REGN. NO. GA28157

H.Q.R.

Exhibit for 14/15 Star. April 5th 6 A.C.P.

HARRINGTON, Thomas, L/Cpl. #110225, 5th C.M.R.

Blanchard

Medals (Widow)
&
Dec.

63 Jeanne D'Arc St

Mrs. Sarah Harrington,
~~Linton Apartments,~~
~~Sherbrooke St,~~
Montreal, P.Q.

7516

P. & S. " " " "

Serial No 767238

C. of S. " " " "

Resp MAY 22 1920 Cf 632.

(2)

Scroll Rel

JAN 14 1921

Scroll Desp.

Reqr. No.

" Reading 2/4-21. " 710301
" " B312

Plague Desp.

DEC 3 1921

Reqr. No.

819727.

c M

No. 5374

RANK

Pte

NAME

Harrington J.

T. O. S. 25-6-15

UNIT

5th Canadian Mounted Rifles

July payroll.

M. D. 4.

PAID
FROMPAID
TOSIG.
OR
REC'T

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS

AUTHORITY

1915

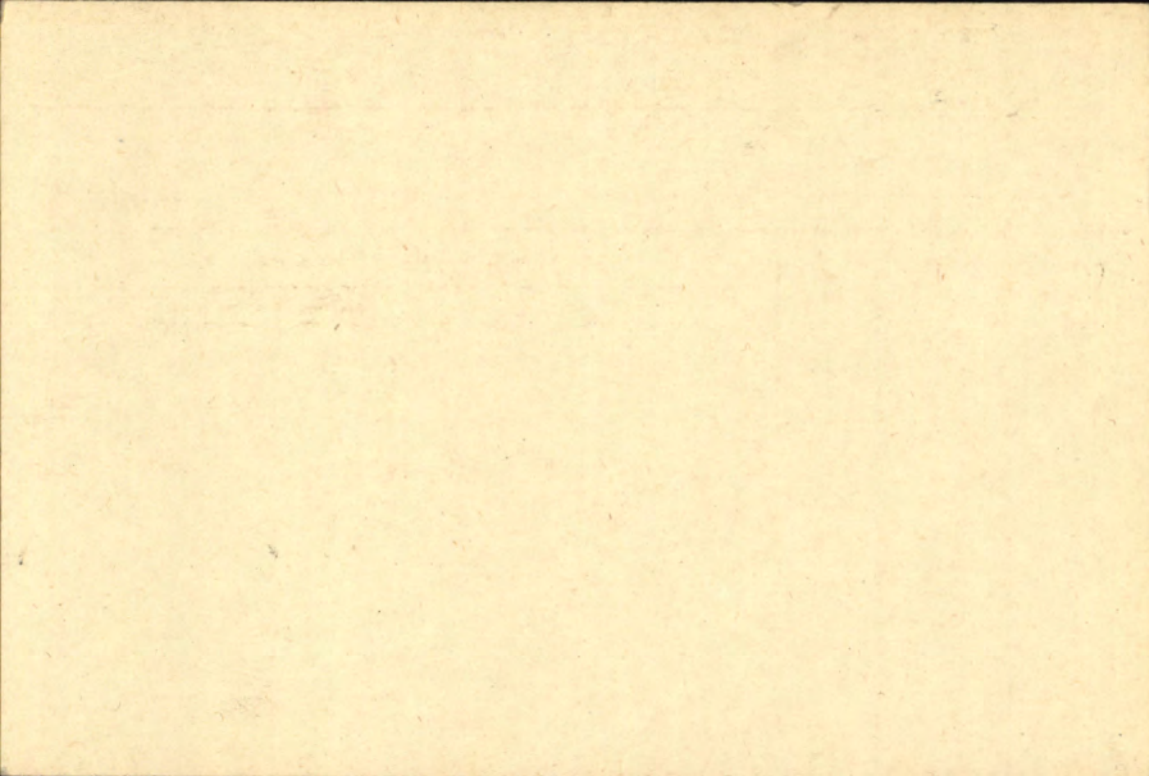
1915

July 1

July 31

✓

UNIT SAILED
JUL 18 1915



649-H-2601.

CARD NO. ✓

SURNAME. *Harrington*CHRISTIAN NAMES *Thomas.*REGL. NO. *110225* RANK *S/cpl.*UNIT *5th. C. M. R.*FORMER CORPS *Prince of Wales Fus (3 yrs. 6 mos.)*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL *Harrington, Jermiho*RELATIONSHIP TO SOLDIER *R. N. S.*ADDRESS *539 Workman St. Montreal
P. Q.*COUNTRY OF BIRTH *Canada, Montreal P. Q.* DATE *Apr. 4th. 1879.*PLACE OF ATTESTATION *Montreal, P. Q.* DATE *June 25th. 1915.**0/S. 17-7-15 156
5*

MARRIED

yes.

SINGLE

WIDOWER

TRADE OR CALLING

Labourer.

RELIGION

Church of England

DESCRIPTION.

APPARENT AGE

36 YEARS

MONTHS

HEIGHT

5 FEET

8 INCHES

CHEST MEASUREMENT

36 1/2 INCHES

EXPANSION

3 1/2 INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

Fair

DISTINGUISHING MARKS

1 vacc. mark on right arm.

Bust of woman on left fore arm. "J.H.S"

Heart ^{dx} on right arm.

MEDICAL EXAMINATION.

PLACE

Montreal, P. Q.

DATE

June 25th 1915.

Present Address. Not Stated.

MARRIED OR SINGLE *Married*

PLACE OF BIRTH *Montreal, Que.*

NAME AND ADDRESS OF NEXT OF KIN *Jerniko Harrington
539 Workman St. Montreal Que.*

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

ADJUSTMENT OF A.P. FROM OTTAWA
 Authority #2649-A-2601
 Amount \$17 Reason Credit
 June 16 not paid
 Statement #20.

CASUALTIES, PROMOTIONS, &c.	PARTICULARS	EFFECTIVE DATE	AUTHORITY
	Died of wounds.	9/6/16.	Of wounds 24(17) 14/6/16

ADMISSIONS TO HOSPITAL &c.			
DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L No. 110225 RANK *Lt. Col.* NAME *Harrington, Thomas.*

IF IN PERM. CORPS | WHAT UNIT *5th C.M.R.* TRANSFERRED TO *6. Co.* DATE *9/6/16* AUTHORITY *B/24/16.16*

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION *Montreal, Que.* TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION *June 25th, 1915.* TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY \$ ~~17.00~~ DATE EFFECTIVE *1.11.15.*

PAYABLE TO *Mrs J. Harrington, Canton Apts. Montreal Que.* RELATIONSHIP

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *4-7-16* EFFECTIVE *1-7-16* REASON *R.W.* *D.O. 24. 14-6-16*

DISCHARGE DATE AND PLACE *9/6/16* REASON AND AUTHORITY *Died of wounds. Action received in action of 6/16. Auth OC. No 14. Gen Hosp. R.A. & Bander. No 2 137/153.*

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) *9-6-16 "Died of Wounds" B.O. 24 14-6-16.*

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)



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 \$	C.	NO. OF DAYS	RATE	AMOUNT \$	C.	NO. OF DAYS	RATE	AMOUNT \$	C.				NO. OF DAYS	RATE	AMOUNT \$	C.	1	2	3	4				1	2				3	4	CREDIT	DEBIT		
<i>1916</i>																																					
<i>inc. lat.</i>																																					
<i>1/30/16</i>	<i>30</i>	<i>1.05</i>	<i>31 50</i>	<i>30</i>	<i>10</i>	<i>3</i>	<i>10</i>																														
<i>1/31.5.16</i>	<i>31</i>	<i>1.05</i>	<i>32 55</i>	<i>31</i>	<i>10</i>	<i>3</i>	<i>10</i>																														
<i>June 30</i>	<i>30</i>	<i>1.05</i>	<i>31 50</i>	<i>30</i>	<i>10</i>	<i>3</i>	<i>10</i>																														
<i>July</i>																																					

Checked *R. Hegge*

Checked *R. Hegge*

Statement of
 OCT 25 1916
 Account rendered

Cash found in effects *no Rep*

*29 90 Overpd 27 dyl
 Transfer off: 4/16/16*

*Capl pay for Oct then credit
 27 dyl 101 over credited June.*

*2990 Back chgd in Error
 now adjusted.*

101.04

In Ottawa for Sett 29/1/17

*101.04 rec'd by Ottawa
 adjust at pay (B/17 see
 stamp)
 118.04 pd by Ottawa.*

