

3000

B.P.C. 8654

ORIGINAL

ATTESTATION PAPER.

No. 226777

Depot Regiment, Canadian Mounted Rifles.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname? Lynn
- 1a. What are your Christian names? William Henry Campbell
- 1b. What is your present address? 791 Somerset St. Ottawa.
- 2. In what Town, Township or Parish, and in what Country were you born? Valcartier Quebec, Can.
- 3. What is the name of your next-of-kin? Annie Lynn
- 4. What is the address of your next-of-kin? 791 Somerset St. Ottawa, Ont.
- 4a. What is the relationship of your next-of-kin? Wife
- 5. What is the date of your birth? Dec. 4th. 1890.
- 6. What is your Trade or Calling? City Fireman.
- 7. Are you married? Yes.
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes
- 9. Do you now belong to the Active Militia? No. Yes.
- 10. Have you ever served in any Military Force? Yes. G.C.F.C. 3 yrs.
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement? Yes
- 12. Are you willing to be attested to serve in the } Yes
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

William H Lynn

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, William Henry Campbell Lynn, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the Canadian Over-Seas Expeditionary Force, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

William H Lynn (Signature of Recruit)

Date June 2nd. 191 6. Geo Bunn (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, William Henry Campbell Lynn, 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.

William H Lynn (Signature of Recruit)

Date June 2nd. 191 6. Geo Bunn (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 Ottawa this 2nd day of June 191 6

[Signature] (Signature of Justice)

Description of **William Henry Campbell Lynn** on Enlistment.

Apparent Age **26** 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.
 (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. **7³/₄** ins.

Scars:-

**one middle left leg,
 one base left little toe,
 one over right eye.**

Chest measurement { Girth when fully expanded **38** ins.
 Range of expansion **3** ins.

Wounds:-

one on left arm.

Complexion **med.**

Eyes **blue**

Hair **brown**

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

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 2nd 1916**

Approves

Place **Ottawa**

Cap

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.

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

W. L. B. Wood Lt. Colonel (Signature of Officer)
 O. C. Depot Regt., C. M. R.

Date **June 4** 191 **6**

REGIMENTAL DOCUMENTS

NAME

Lynn Henry Campbell

REGT. NO.

226777

UNIT

1st CMB

H. Q. FILE NO.

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)

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

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

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

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

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

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

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

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

MEDICAL EXAMINATION (M.F.W. 129)

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

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

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

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

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

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

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

*Misc
original will - 1
B/22
Card*

M

*BPC
Ret 14-4-20*

2-4-20 spec 3080

11

DEATH

Category

Deed of goods

DISCHARGE

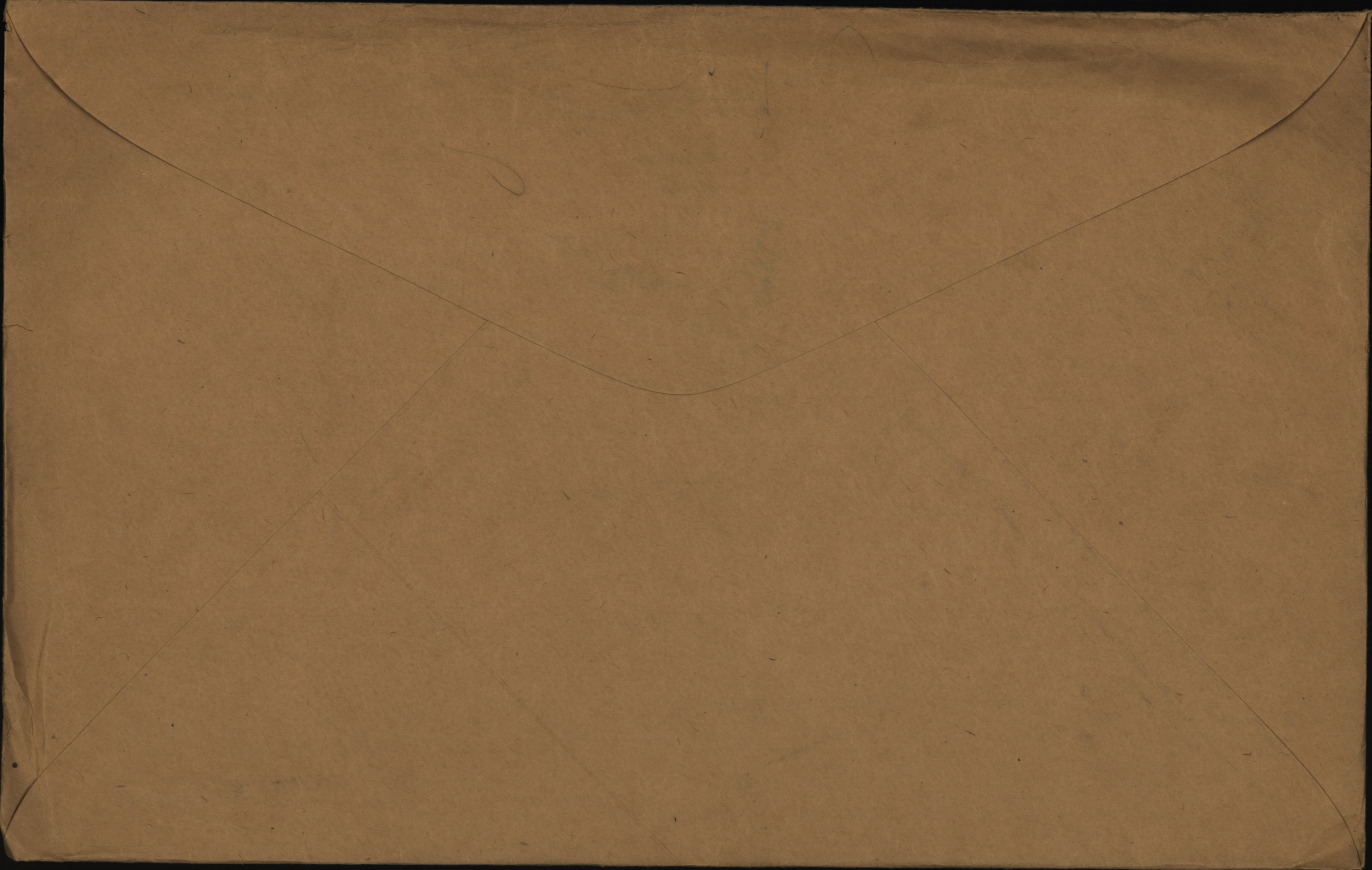
Category

35834

DESERTION

H

*(1)
31-27
31-27
1 27*



m. W
Number. 2. 2. 6. 7. 7. 7. Rank *P. 1st Lt.*
Surname. LYNN
Christian Name. *William Henry*
Unit *1st Lt. M. R.* Theatre of *France*
Date of Service. *3-11-16* *D.*
Remarks.

Latest Address *Mrs. Geo. Larkin (w)*
670 Sabre St. 214 Patterson Ave.
Montreal 10²³ *Ottawa Ont.*
Roll No. *Page - 5386*

44887
OCT 4 1923

B. J. M. Br 6/10 21

DESP. MAR 16 1923

REG. NO. 40296

Not eligible for Star

H.Q. 649-L-114985

LYNN, Wm. Henry Campbell, Pte. No. 226777, 1st CMR.

Medals (Widow) Mrs. Geo. Larkin,
& Dec. ~~214 Patterson Ave.,~~

~~Ottawa, Ont.~~

*251 B/addington dr,
Notre Dame de Grace,
Montreal, P.Q.*

P. & S. (widow) (Same as above)

Auth. L. G. 16/2/22

(Serial no. 752755.)

only resp. 2+

where to 21631

Memorial Cross

Plague Desp.

Reqa. No.

(Widow) (Same as above)

(mother) Mrs. J.D. Lynn,
11 Morris Street,
Ottawa, Ont.

barling 32679

MAY 31 1920

W/89556

MAY 31 1920

m/89562

*7939 - Henri Julien St
Montreal.
3 11/27*

M 10 3/23

Re 7187

8-1921

*E 184
P 5948*

334

Maque returned 12-9-21

Scroll. Dep. 27-10-27. 3041

Scroll. Ps Dep. 3-11-27. 3063

S. 2957 W

S. 6537 W

No. 226777 RANK *Spr.*

NAME *Lynn Wm Henry Campbell*

T. O. S. *2-6-16*

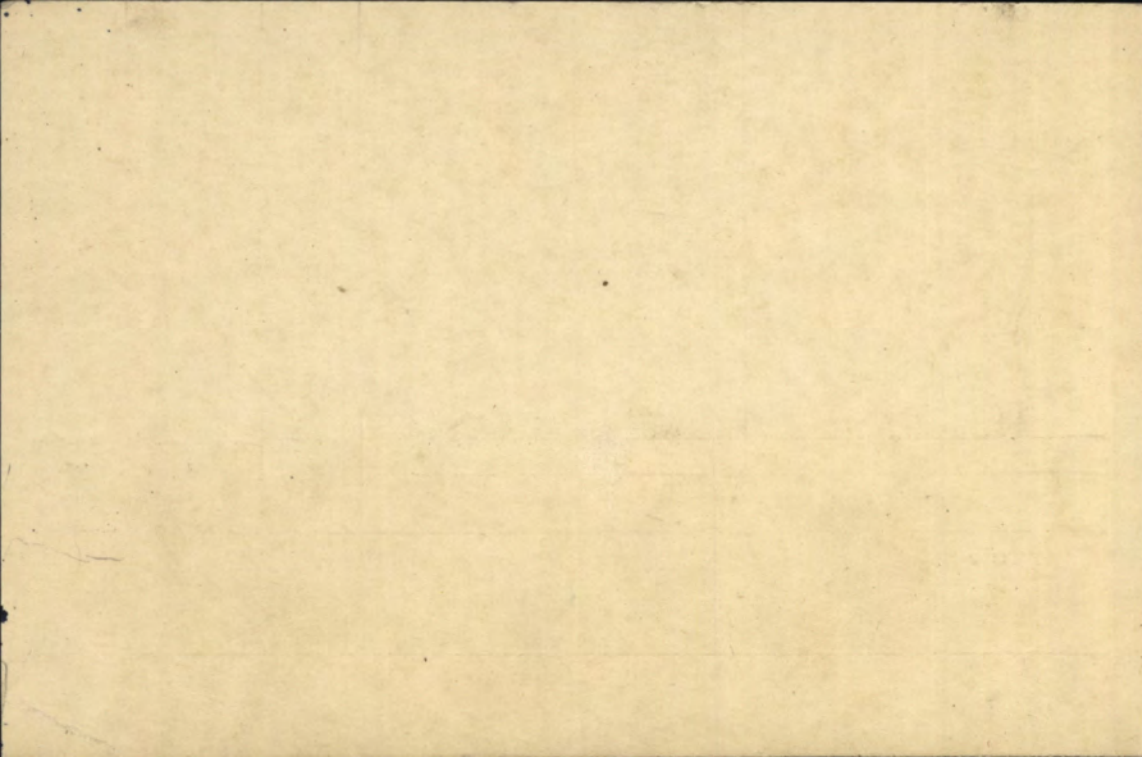
UNIT

Can. Mounted Rifles Depot

Ad. 146. 19-6-16

M. D. *2.*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916 June 2</i>	<i>1916. June 30</i>	<i>✓</i>	<i>5-th Co's Draft.</i>	
<i>July</i>		<i>✓</i>		
<i>Aug. 1.</i>	<i>Aug. 12</i>	<i>✓</i>		



REGT'L NO 226777

NAME

Lynn, William Henry Campbell

H. Q. FILE NO. 649-

RANK AND CORPS Plē

1st Regt. C. M. R.

FOLLOWS

NO.

FOLLOWS

CABLE

No.

DATE

NATURE OF CASUALTY

07221 5-1-17.

C

Reported wounded Dec 20th 1916 ✓

07323 8-1-17

Prev. Rept wounded, now died of wounds Dec. 20th 1916. ✓

A.F.B. 2090a

Died of wounds Received in action

Rouen 12-30-16

France or Belgium

Received. 21-3-17

LIST No

HOSPITAL

DATE OF
ADMISSION

REMARKS

a 342. Rep. from Base. 20-12-16. wounded:
A 343 Prev. Rep. wounded now reported
Healed of wounds

CARD NO.

D

SURNAME.

Lynn

CHRISTIAN NAMES

William Henry Campbell

FOLL.

REGL. NO.

226777

RANK

Sgt.

UNIT

Depot Regt. C. M. R. (5th R. D.)

FORMER CORPS

3 yrs. S. S. F. G.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Lynn, Mrs. Annie

RELATIONSHIP TO SOLDIER

wife

AD

214 Patterson Ave.
Ottawa

auth. Exp. 16. 29-11-19

COUNTRY OF BIRTH

Canada Valcartier P.Q.

DATE

Dec. 4th 1890.

PLACE OF ATTESTATION

Ottawa Ont.

DATE

June 2nd 1916O.L. 15. 8-16. $\frac{5-11}{4}$

L. L. 94504. M. & D. 6512.

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

MARRIED

yes

SINGLE

WIDOWER

TRADE OR CALLING

City Fireman

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

26 YEARS

MONTHS

HEIGHT

5 FEET

7 3/4 INCHES

CHEST MEASUREMENT

38 INCHES

EXPANSION

3

INCHES

COMPLEXION

Medium

EYES

Blue

HAIR

Brown

DISTINGUISHING MARKS

Scars: - One middle left leg. One base left little toe; one over right eye. One vaccination left arm.

MEDICAL EXAMINATION.

PLACE

Ottawa Ont.

DATE

June 3rd. 1916.

Present Address, 791 Somerset St. Ottawa Ont.

Name LYNN, William Rank Pte.
Henry Campbell

Unit 1st. Can. Mtdv Rifles

Reg. No. 226777

25-2-1368

Next of Kin Canada.

1916	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
20-12	Reptd from Base: →	WOUNDED		A342	07221	
20-12-16	Now Reptd: -	<u>Died of Wounds</u>		A343	07323	6-1 9/1
	(Ex Part II Orders I) dated 2-1-17	Erratum re Number		A350		

Surname

Christian Name or Names

Reg. No.

Lynn W. A. C. *226777*

Rank

Unit

Co.

Troop

Batty

Hospital

162R.

Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

Recd of WA. 20.12.16

DISPOSITION

Date

REMARKS

6.1.17 342
9.1.17 343

Rep from Base Hd 20.12.16

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.

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

WRK
M. F. W. 54.
150/M. 10-15.
H.Q. 1172-39-929.

Casualty Form—Active Service.

Unit, Regiment or Corps 6 M R (Depot Hamilton)
 Regimental No. 226777 Rank Tpr. Name Ignn, William Henry Campbell.
 Enlisted (a) 2/6/16 Terms of Service (a) D of W Service reckons from (a) 2/6/16
 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) Freeman

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 38, 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. 38, or other official documents.
Date	From whom received				

		Embarked Halifax } Debarkeed Liverpool }	15/8/16 } 24/8/16 }	per S. S. <u>Campbell</u>	
<u>28/8/16</u>	<u>RCDRR</u>	Taken on strength R. G. D. Res. Regt.	<u>S/diffe</u>	<u>25/8/16</u>	<u>R.O. 78. Pt. II 28/8/16.</u>
<u>6/10/16</u>	<u>RCDRR</u>	Trans. to 11th Res. Bn.	<u>Shorncliffe</u>	<u>7/10/16</u>	<u>Pt. II-118 d/ 7/10/16.</u>

CERTIFIED CORRECT.
 7 NOV 1916
 CIV. REC'DS LONDON.

<u>7-10-16</u>	<u>O.C. 11th</u>	Taken on strength 11th Bn	<u>Shorncliffe</u>	<u>7-10-16</u>	<u>Pt. II. Bn. 0.240</u>
<u>27.10.16</u>	<u>O.C. 11th Bn.</u>	Trans. to <u>6 M R. Batt.</u>	<u>Overseas</u>	<u>27.10.16</u>	<u>Pt. II. B.O. 251</u>

Stewart
 CAPT.
 ADJUTANT, ROYAL CANADIAN DRAGOONS
 RES. REGT.

Guinness
 Captain & Adjutant,
 11th (Res.) Battalion.

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

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
24.12.16	O.C. Bn	O. C. C. B. D. Landed in France. Taken on strength 52nd ^{1 Cdn} MP Bn. - do - Left for Unit. O.C. ^{1 Cdn} 52nd Bn. Arrived Unit for duty Wounded since died of Wounds Field	France	3-11-16 3-11-16 19-11-16 22-11-16 20-12-16	Nom. Roll d/ 3-11-16 Pt II D.O.Yod/ 11-11-16 Nom. Roll d/ 19-11-16 B. 213 d/ 25-11-16 KD 137-2612 ptt. a 90 Q 30/12/16
					Lieut. for Lt.-Col., A. A. G. Section, G. H. Q. 3rd Echelon, B. E. F.

[Handwritten signature]
Canadian

TLH. Rank _____ Name LYNN, William Henry Campbell, Reg'l No. 226777.
 Unit Dft. Depot Regt. C.M. What Unit? } If in perm. Corps, }
 Married or Single Married.
 Place and Date of Enlistment Ottawa, June 2nd. 1916. Place of Birth Valcartier, Quebec, Can.
 Name and Address, Next-of-Kin Annie Lynn,
791, Somerset Street, Ottawa, Ont. Canada. Relationship Wife.

Assigned Pay Monthly \$ _____ Payable to _____

Relationship _____

Separation Allowance \$ _____ Payable to _____

Relationship 16

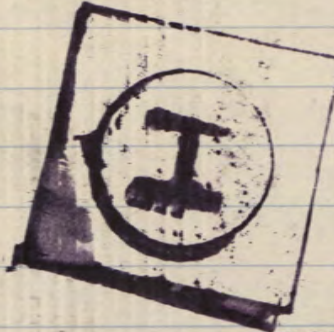
Discharge, Date and Place _____

Reason R.R. 25-L-1368
19.2.17

Character _____

1
 File # 25-L-1368
 Category K.A.

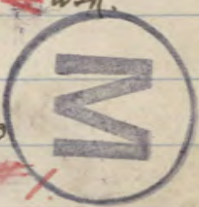
N.E.R.B.I.



H. W. & V., Ltd.—7165-16.

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>Arrived in England.</i>	<i>Ys</i>	<i>24.8.16</i>	
<i>28.8.16</i>	<i>RCIPRR</i>	<i>TAKEN ON STRENGTH, S, Clife</i>		<i>25, 8, 16.</i>	<i>P.H. D. O-78</i>
<i>7-10-16</i>	<i>" "</i>	<i>Soft to 1st R.B.M.</i>	<i>"</i>	<i>6-10-16</i>	<i>" " 118.</i>
<i>7.10.16</i>	<i>17th Bth</i>	<i>Taken on strength.</i>	<i>"</i>	<i>6.10.16</i>	<i>" 240</i>
<i>27.10.16.</i>	<i>" "</i>	<i>S.O.P. to 1st C.M.R. O. Seas.</i>	<i>"</i>	<i>27.10.16.</i>	<i>" 257.</i>
<i>11.11.16</i>	<i>1st C.M.R.</i>	<i>Taken on strength.</i>	<i>Field</i>	<i>3-11-16</i>	<i>Pt # 6 # 70</i>
<i>6.1.17</i>	<i>"</i>	<i>Wounded</i>	<i>"</i>	<i>20.12.16</i>	<i>Ch. a. 342.</i>
<i>2.1.17</i>	<i>"</i>	<i>Pulled in action</i>	<i>"</i>	<i>20.12.16</i>	<i>Pt # 1</i>
<i>9.1.17</i>	<i>"</i>	<i>" " "</i>	<i>"</i>	<i>do</i>	<i>Ch. a. 343.</i>

A.F.B. 103 CHECKED
3 NOV. 1916



PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins.....Depot Regiment C.M.R......

(2) Regimental Number226777.....

(3) Full Name of Soldier.....LYNN. William Henry Campbell.....

(4) Place of Birth.....Valcartier. Quebec.....

(5) Are you married, or not?Yes.....

(6) If married, state,

(a) Full name of your wife.....Mrs. Annie Lynn.....

(b) Present Postal Address.....2 Oak St. Ottawa. Canada.....

(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.....

(9) Is your Father alive?..... Yes
If so, state name and address..... Mr. James Dickson Lynn, 11 Morris St.,
Ottawa, Ont. Canada

(10) Is your Mother alive?..... Yes
If so, state name and address..... Mrs. Mary Ann Lynn,
#11 Morris St., Ottawa, Ont., Canada

(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.
Yes and receiving same.

(15) Are you insured?..... Yes
If so, in what Company?..... The Independant Order Of Foresters,
The Metroplitan Life Ins Co.
Have you made arrangements for payment of your Insurance premium..... Yes
If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Date..... August 8th 1916
R. J. Hall Colonel
for O. C. Depot Regt, Officer in Charge

ORIGINAL ORIGINAL MEDICAL HISTORY SHEET.

Surname Lynn LYNN Christian Name William Henry Campbell

Examined { on ^{17th} 2nd day of June 1916
at Skawa

Approved by A. P. Davis

Birthplace { City or Town Valcartier
County Que

Rank Capt. M.O.

Apparent age 26

Trade or occupation City Fireman

Height 5 Feet 7 3/4 Inches. M.O.

Weight 160 Lbs. M.O.

Chest measurement { Minimum 35 inches. M.O.

{ Maximum expansion 38 inches. M.O.

Physical development fair M.O.

Small-Pox Marks no M.O.

Vaccination Marks { Arm Rightt. Left. X

{ Number one

When Vaccinated last child

(a) Marks indicating congenital peculiarities or previous

disease Scars, 1 middle left leg, 1 base

1st little toe, 1 over r.c. eye

(b) Slight defects but not sufficient to cause rejection

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

Date	Result	VACCINATIONS.
22/7/16	✓	H W Martin Capt M.O.
15/7/16		H W Martin Capt M.O.
		H W Martin Capt M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
8/7/16	✓	H W Martin Capt M.O.
15/7/16	✓	H W Martin Capt M.O.
22/7/16	✓	H W Martin Capt M.O.

Enlisted on 2 day of June 1916 at Skawa

	COPTS.	REG'L NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>Depot Regt</u>	<u>226777</u>	<u>Good.</u>	<u>June 2, 1916</u>
Transferred to.....	<u>CMR</u>			<u>27/10/16</u>
	<u>11th BATTALION</u>			
	<u>(CANADIANS)</u>			
	<u>1st BATT</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

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

FORM OF WILL.

I, Lynn, William Henry Campbell (Name in full)
Regimental Number 226774 serving in Depot Bty. C.M.R.
of the Canadian Expeditionary Force, do hereby revoke all former Wills by me
made and declare this to be my last Will.

I bequeath all my real estate unto my wife

Mrs Annie Lynn,
2 Oak St.
Ottawa Ont

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

absolutely, and my personal estate I bequeath to my wife

Mrs Annie Lynn
2 Oak St.
Ottawa Ont

Name and Address
of person or
persons to receive
personal estate*

(See note).

I hereby appoint Alex. Newlands of 63 Fifth Ave, Ottawa Ont. Hardware
Merchant ~~to be executor of this my will.~~
this 15th day of August A. D. 1916

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

William Henry Campbell Lynn
Signature of Soldier.

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

done

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

THE TWO
WITNESSES
MUST
SIGN HERE

Signature of First Witness Harold Lemow Serjt.

Address of Witness Dept Agriculture, Ottawa

Occupation of Witness Patent Examiner

Signature of Second Witness C. H. Wickerson Serjt

Address of Witness Byron Ont

Occupation of Witness Salesman

WAR SERVICE GRATUITY

A.P. File No. 11509 W 4

Register No.

TO

DEPENDENTS OF DECEASED SOLDIERS

Regt'l No. 226777 Name Wm Henry G. Lynn
 (Christian Name) (Surname)
 Rank Pte Date of enlistment.....
 Date of casualty 20-12-16 B.P.C. File No. 8654
 Was service performed overseas? yes

DEPENDENT

Name Mrs Annie Larkin ne hynes Relationship remarried widow
 Address 251^B Addington Rd.
Notre Dame de Grace
Montreal Que

Amount of Special Pension Bonus \$ 64 Abstracted by.....

Eligible for Gratuity \$ 180

Less amount of Special Pension Bonus paid..... \$ 64

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

Total deductions \$ 64

Balance due \$ 116

Cheque No. 1931080 Date issued.....
 MILITIA DEPT
 FEB 15 1924
 OTTAWA

Clerk B. Blaine 1472

REMARKS: Supplac 1892173
red cancelled.

Audited by
[Signature]
 Date 15/2/24 \$ 116.00

M.F.W. 2652
 25M-6-20.
 H.Q. 1773-89-1473

2

Register No. D L 118

WAR SERVICE GRATUITY

A.P. File No. 11509

TO
DEPENDENTS OF DECEASED SOLDIERS

Reg't No. 226777 Name William Henry Campbell Lynn
(Christian Name) (Surname)
Unit Infantry Rank Pvt. Date of enlistment.....
Date of casualty 20-12-16 B.P.C. File No. 865-4
Was service performed overseas? yes

DEPENDENT

Name Mrs Annie V. Larkins (nee Lynn) Relationship Widow
Address 2 Oak St - Ottawa Ont.

Amount of Special Pension Bonus \$ 64.- Abstracted by (Mrs) E. G. Ross

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. 9-1892173 Date issued 19-7-20 memo

REMARKS: No payments to be made until address verified
ck. G. 18192173 re/bd care Tr. 17613
Credit Dep. W.S.G. 116.00 1/6/21
3-12-21

Clerk J. Sheleart

Audited by [Signature]
Date 10/7/20

See pp #2

Latest address

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

wife
MILITIA AND DEFENCE 55
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12.
 50m.—6-16.
 H. Q. 1772-39-819.

592

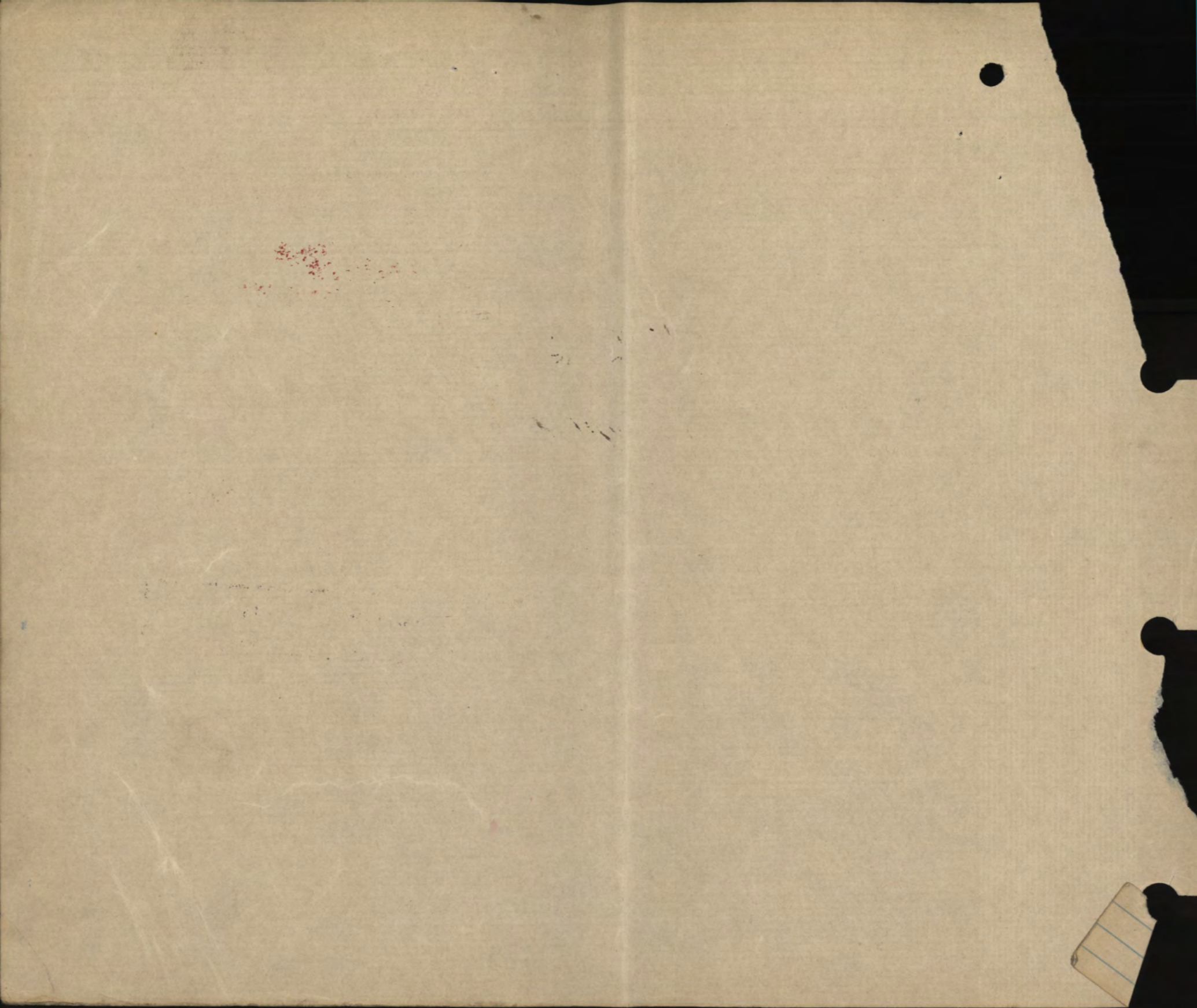
To Whom *Mrs. Annie Lynn*
 Address *2 Oak. St.*
Ottawa Ont.
 Rate *\$15.00 Aug. 1st 1916*

By Whom Assigned *Lynn Wm Henry C.*
 Regtl. No. *226777*
 Rank *Plt.*
 Corps *C.M.R. Depot. Reg. C.E.F.*

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<div style="border: 2px solid red; padding: 5px; display: inline-block; margin-bottom: 10px;"> Casualties </div> Died of wounds 3rd M 18th 1914 Died of wounds Dec 20th 1916 C.E.F. 9/1/17 J.A.S.
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

F.X. 17/1/17 J.A.S.



MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

593

M. F. W. 12a.
 50m.—7-16
 1772—39—819.

Sheet No. 2. *Mrs Annie Lynn*
 (Assignee)

Wife
 PAYMENTS.

Name of Soldier *Lynn W^m Henry*

L. L. Job 5470—Req. 6888.

226777 *Jpr. G.M.R. Depot Reg.*

Month.	Year.	Cheque No.	Amt.	Remarks.
			<i>15 00</i>	
April	1916			<i>Casualties</i>
May				
June				
July				
Aug.		<i>16098</i>	<i>15</i>	
Sept.		<i>F18428</i>	<i>15</i>	
Oct.		<i>22924</i>	<i>15</i>	
Nov.		<i>27308</i>	<i>15</i>	<i>Acct closed Cas.</i>
Dec.		<i>235491</i>	<i>15</i>	
Jan.	1917			<i>Pension granted Dec 21/16</i> <i>FG</i>
Feb.				
March				
April				
May				
June				
July				
Aug.				<i>Total 75</i> F. X. Rend. Date ... By ... E.F.X. " Date <i>16/8/17</i> By <i>[Signature]</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

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

2-6-10,

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

323

M. F. W. 11.
50m.—4-16.
H. Q. 1772-39-818.Name *Annie Lynn*

Address

*2 Oak St.,
Ottawa,
Ontario,*

Relation to Soldier

wife, child or mother

Wife.

Name of Soldier

Lynn, Wm. H. C.

Regtl. No.

226777

Rank

Pvt.

Corps

C. M. R.

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.				
Dec.				
Jan.	1916			
Feb.				
March				

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

CO X

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

Annie Lynn, Wife

Name of Soldier

*Lynn Wm. A. C.
Pte.*

PAYMENTS.

L. L. Job 310.-Req. 6574.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July		A 9648	39	39.
Aug.		E 13564	20	20
Sept.		X 16332	20	20
Oct.		J 20161	20	20
Nov.		Z 22475	20	20
Dec.		Z 25974	20	20
Jan.	1917	G 29680	20	20
Feb.				20
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

Pensions Notified DATE *12-3-14*
Killed in Action DATE *20-12-16*

*w/c closed pension granted
21-12-16.*

ACCOUNT CLOSED

DATE PER *W*

*\$27¹⁰ Recovered as per
Pensions list Jan 1917 entry 27/17*

MILITIA AND DEFENCE *not checked*
SEPARATION ALLOWANCE
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

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

EFFECTIVE DATE 20/12/16
 AUTHORITY BO-1-2/1/17
 9-1-17
 2343

REG'L. NO. 226777 RANK Pte NAME Lynn, William Henry Campbell. ✓ O
 IF IN PERM. CORPS WHAT UNIT UNIT C.C.D. TRANSFERRED TO 11th Res. Bn. DATE 11.10.16 AUTHORITY Ro. 118
 PERMANENT FORCE ALLOWANCES TRANSFERRED TO 1st. C.M.R. DATE 11/11/16 AUTHORITY BQ25727/10/16
 PLACE OF ATTESTATION Ottawa, Ont. TRANSFERRED TO W.B.Sch DATE 21/12/16 AUTHORITY BO-1-4/1/17
 DATE OF ATTESTATION June 2nd 1916. TRANSFERRED TO DATE AUTHORITY
 PB10327

ASSIGNED PAY MONTHLY \$ 15.00 DATE EFFECTIVE 1-8-16.
 PAYABLE TO Mrs. A. Lynn, 2 Oak St, Ottawa, Ont, Can. RELATIONSHIP Wife.
 ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP
 STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) 8/1/17 EFFECTIVE 1/2/17 AB. REASON Died of Wounds 20/12/16 BO-1-4/1/17
 DISCHARGE DATE AND PLACE REASON AND AUTHORITY Entered on N.E. Card Index, J.F.
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) 21/12/16 Checked by F.H. Murray

HOSPITAL & C.
 NAME OF HOSPITAL

ACQUITTANCE ROLLS
 2 3 4
 No. DATE No. DATE No. DATE
 1946.9.16
 3215.9.16
 28 1910
 2436 17/9/16
 C.C.D.
 C.C.B.
 9357 8/11
 C.C.B.
 20 9/12 8572 19/11

ACQUITTANCE ROLLS						CASH PAYMENTS				BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS	
2	3	4	1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	CREDIT	DEBIT				
							15.			15.					Bal from Canada
							15.		4461	2429					A.R. Aug. & Sept.
							15.		2443	10.56					11 th Res. Bn. 11.10.16 Ro. 118
									730	7636					
							15.	.92	2808	9284					Q4005-127-19/10/16 - Transf to 1st C.M.R. 11/11/16 BQ25727/10/16
									436	2692					
							15.		3070	3032					
							15	12.10	2710	3225					Died of Wounds 20/12/16 BO-1-4/1/17 Trans. to W.B.Sch
							90								
							Balance transferred to N. E. Branch.			322.					
										1822					15.00 A.P. Rereditied Jan/17. H.Q. 593-1-12 D 26/1/17.
										1919					C. 974 C. J.E. Sch. 7.
									1919	1919					Ottawa for Settlement 16/7/17 & 12/17

Ottawa slip.
 D. 26/1/17.

