

Unit 147th Grey O.S. Bn. C.S.F. Rank Capt. Name Kyle

OFFICERS' DECLARATION PAPER

**147TH GREY O. S. BN., C. E. F.
CANADIAN OVER-SEAS EXPEDITIONARY FORCE**

147. BATT

*23-9-16
Encl
B. G.*

QUESTIONS TO BE ANSWERED BY OFFICER

(ANSWERS)

- 1. (a) What is your Surname? Kyle
- (b) What are your Christian Names? Edward Joseph
- 2. (a) Where were you born? (State place and country) Lindsay, Victoria County, Ontario
- (b) What is your present address? University of Toronto Toronto
- 3. What is the date of your birth? EM 19 1880
- 4. What is (a) the name of your next-of-kin? Richard Kyle
- (b) the address of your next-of-kin? Lindsay Ontario
- (c) the relationship of your next-of-kin? Father
- 5. What is your profession or occupation? Associate Professor of History
- 6. What is your religion? Roman Catholic
- 7. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes
- 8. To what Unit of the Active Militia do you belong? C. O. F. C. University of Toronto
- 9. State particulars of any former Military Service C. O. F. C. (Vol. 1914 - Dec 1915)
- 10. Are you willing to serve in the
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? Yes

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

Edward Kyle (Signature of Officer.)

CERTIFICATE OF MEDICAL EXAMINATION

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

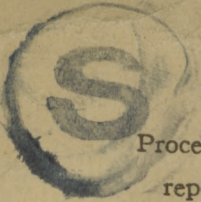
I consider him* Fit for the CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Date Feb 11 1916

Place Owen Sound

D. C. Hayes Capt
Medical Officer.

*Insert here "fit" or "unfit".



Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers 2.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms 1.....

Proceedings on discharge 1.....

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet 2.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate 1.....

1 Pay card

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name Kylie, Edward, Joseph.

Regt. No. _____ Rank Capt.

Corps 147 Grey O. S. Batt. C. C. H.

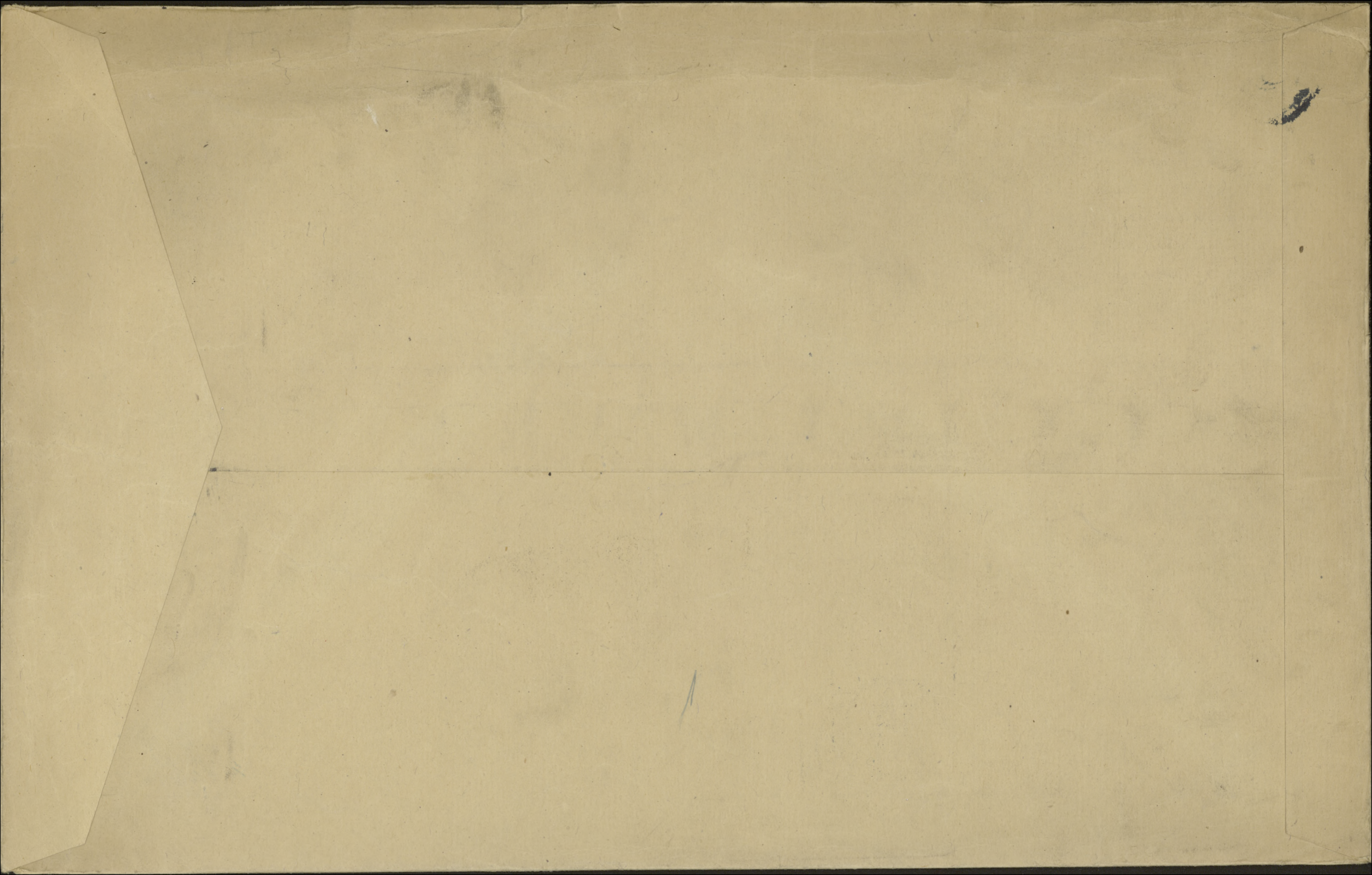
Deceased, 14 May 16



14875



1
2-8
2-8



(Canadian Death)

KYLIE, Edward Joseph, Capt. 147th Bn.

MEDALS &
DECORATIONS

Richard Kylie (Father)
265 Kent St., Lindsay, Ont.

PLAQUE &
SCROLL

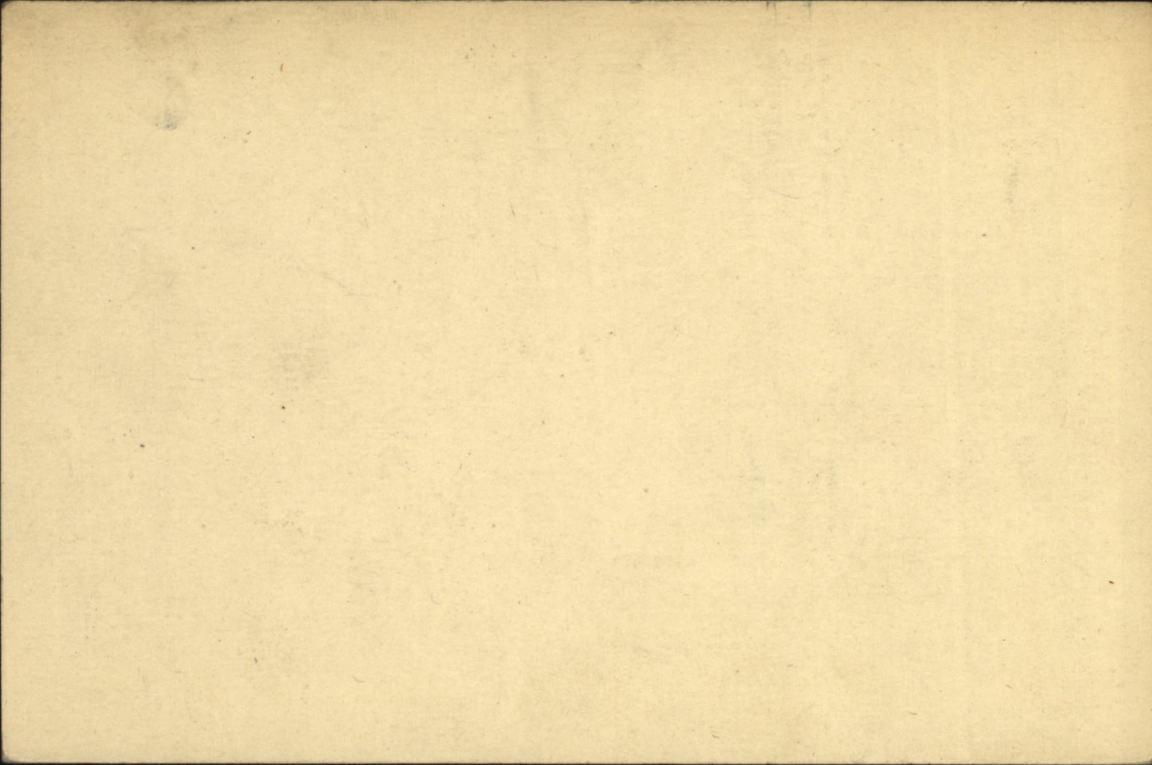
Father, as above.

MEMORIAL
CROSS

Mrs. Norah Kylie (Mother)
265 Kent St., Lindsay, Ont.

Per # 807684

AT THE PARTICULAR REQUEST OF
THE MOTHER MEMORIALS ARE NOT TO
BE FORWARDED. SEE FILE 558-14-4
LETTER 23-2-21.



No.

RANK

Capt. & Adj.

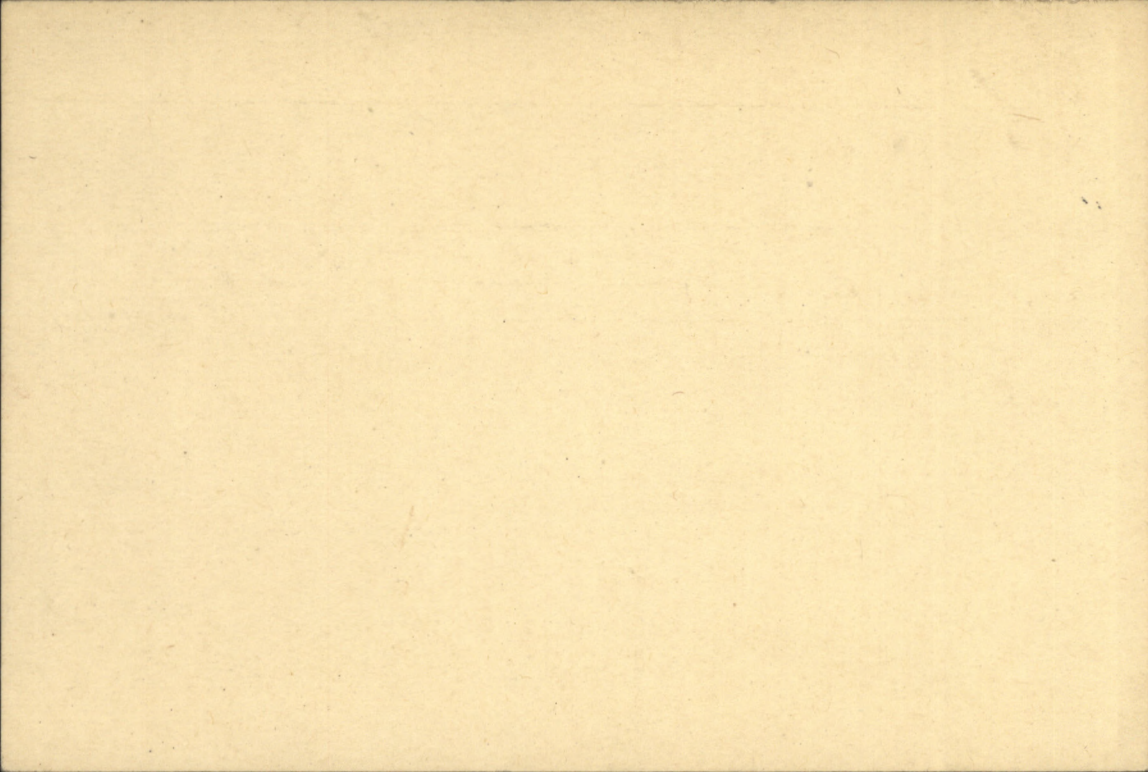
NAME

Kylie, E.

T. O. S.

UNIT *147th (Grey) Battalion, C. E. F.*M. D. *2.*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916</i> <i>Jan. 1</i>	<i>1916</i> <i>Jan. 31</i>	<i>✓</i>	<i>Formerly 31st obs. Quota of Recruits</i>	
	<i>Feb.</i>	<i>✓</i>		
	<i>Mar.</i>	<i>✓</i>		
	<i>April</i>	<i>✓</i>		
<i>May 1</i>	<i>May 14</i>	<i>✓</i>	<i>Admitted to hospital Owen Sound 22-4-16</i>	<i>May Paylist.</i>
			<i>Died 14-5-16</i>	<i>NO. of 24-4-16.</i>
			<i>ak closed by payment do.</i>	UNIT SAILED NOV 13 1916



SURNAME.

Kylie

CARD NO. ✓

CHRISTIAN NAMES

Edward Joseph

FOLL.

REGL. NO.

RANK

Capt.

UNIT *147th*

Bn

FORMER CORPS

C.D.T.C. University of Toronto

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Kylie Richard

RELATIONSHIP TO SOLDIER

Father

ADDRESS

Lindsay Ont.

COUNTRY OF BIRTH

Canada Lindsay Victoria Co

^{Ont}
DATE

Apr 19th 1880

PLACE OF ATTESTATION

DATE

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING *Associate Professor* RELIGION *Roman Catholic*
of History

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION.

PLACE

Queen's Sound Unit

DATE

Feb 11th 1916

Present Address

University of Toronto, Toronto Ont

ABSTRACT FROM PAY-LIST

REGIMENTAL No. _____ RANK *Capt. Ray* NAME *E. Logie* UNIT *147th Bn.* TAKEN ON STRENGTH _____

AUTHORITY DAILY ORDER No. _____ DATE _____ TRANSFER FROM _____ TRANSFER TO _____ DAILY ORDER No. _____ DATE _____

SERIAL No. _____ M.D. _____ STRUCK OFF STRENGTH. DAILY ORDER No. _____ DATE _____

CREDIT

DEBIT

MONTH	FROM	TO	PAY			FIELD ALLOWANCE			CR. FROM PR. ACCT.	ANY OTHER CREDITS	TOTAL	ADVANCE PAYMENTS			REGI-MENTAL CHARGES	ASSIGNED PAY	OTHER CHARGES	CR. BAL. FORWARD	DR. BAL.	FINAL PAY	TOTAL
			NO. OF DAYS	RATE	AMOUNT	NO. OF DAYS	RATE	AMOUNT				FIRST PAYMENT	SECOND PAYMENT	THIRD PAYMENT							
<i>1916</i>																					
<i>Jan</i>	<i>1</i>	<i>31</i>		<i>3⁵⁰</i>	<i>108 50</i>		<i>75^d</i>	<i>23 25</i>		<i>46 50</i>	<i>178 25</i>	<i>75 -</i>							<i>103 25</i>	<i>Low</i>	
<i>Feb</i>	<i>1</i>	<i>29</i>		<i>"</i>	<i>101 50</i>		<i>75</i>	<i>21 75</i>		<i>43 50</i>	<i>166 75</i>	<i>75 -</i>							<i>91 75</i>	<i>"</i>	
<i>Mar</i>	<i>1</i>	<i>31</i>		<i>"</i>	<i>108 50</i>			<i>23 25</i>		<i>46 50</i>	<i>178 25</i>	<i>75 -</i>							<i>103 25</i>	<i>"</i>	
<i>April</i>	<i>1</i>	<i>30</i>		<i>"</i>	<i>105 -</i>			<i>22 50</i>		<i>31 50</i>	<i>157 -</i>	<i>75 -</i>							<i>84 -</i>	<i>ck. 4844</i>	
<i>May</i>	<i>1</i>	<i>14</i>		<i>3⁰⁰</i>	<i>42 00</i>			<i>10 50</i>		<i>32 50</i>						<i>4 50</i>			<i>48 -</i>	<i>" 8666</i>	

MARGINAL NOTATIONS:

MONTH

MONTH

April *Adm No. 22-4-16 D.O. Apr 24 1916*
May *Adm No. over June 22 Dec. May 14 1916*

MEDICAL HISTORY SHEET

DUPLICATE

Surname Kylie Christian Name Edward Joseph

Examined { on 11th. day of February 191 6.
 at Owen Sound.

Approved by

D. E. Hines

Birthplace { City or Town Lindsay
 County Victoria.

Rank Capt M.O.

Apparent age 36

Trade or occupation Associate Professor of History. M.O.

Height 5 feet 10 Inches M.O.

Weight 155 lbs. M.O.

Chest measurement { Minimum 33 inches M.O.
 Maximum expansion 35½ inches M.O.

Physical development Good. M.O.

Small-pox Marks None M.O.

Vaccination Marks { Arm Right Left 1
 Number One.

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT

When Vaccinated last In childhood. M.O.

(a) Marks indicating congenital peculiarities or previous disease None. M.O.

Date	Result	VACCINATIONS

(b) Slight defects but not sufficient to cause rejection None. M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
		<i>D. E. Hines</i> M.O.
		<i>D. E. Hines</i> M.O.

Enlisted on 11th. day of February 191 6. at Owen Sound.

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>147th. O's. Bn.</u> <u>C.E.F.</u>	<u>Captain</u>		<u>11/2/16.</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.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Article 71, Financial Instructions C.E.F., 1914).

Regimental No. Rank Captain. Name Edward Joseph Kylie.
 Corps 147th. Battalion. who was * "Struck Off" (Deceased)
 On May 14th., 1916. 1915, to

* Insert "discharged" or "transferred."

The following is a statement of the account of the above-named to date of transfer or discharge inclusive:—

	DR.	\$	c.		CR.	\$	c.
To	Bal. Dr. from previous month.....			To	Regimental pay <u>14</u> days at \$ <u>3</u> c.....		<u>42.00</u>
	Total payments during period				Field allowance <u>14</u> " \$ <u>75</u> c.....		<u>10.50</u>
	from.....				Other allowances.....		
	Assigned Pay.....				Other Credits (give particulars).....		
	<u>9 days Adjutant Pay.</u>	<u>4.50</u>					
	Other Charges (give particulars).....						
	Bal. Cr. on discharge or transfer.....	<u>48.00</u>			Bal. Dr. on discharge or transfer.....		
From	TOTAL.....	<u>52.50</u>		From	TOTAL.....		<u>52.50</u>

The amount shewn as Balance Cr. due on discharge or transfer has † been paid.

Monthly stoppage on account of assignment of pay is nil, and has been charged in Pay-list for month of.....

† Insert "been" or "not been" as case may be

REMARKS:—

State (1) date of enlistment..... January 17th., 1916.

(2) if married and if a Separation Allowance Card has been submitted Not Calimed.

(3) cause of discharge and authority C.E.F. Order # 2 (Admin. Staff)
Dated 19 - 6 - 16.

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

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date June 19th., 1916.

Place Niagara Camp, Ont.

H. J. D. D. CAPT.
 PAYMASTER, 147th O. BN., C. E. F.

Paymaster.

LAST PAY CERTIFICATE

This form to be used for all ranks (vide Article 17, Financial Instructions (E.F. 1914))

Rank: ... Name: ... Date: ...

The following is a statement of the amount of the above-mentioned pay and allowances:

Basic Pay	...
Assignment Pay	...
Other Pay (give particulars)	...
Total Pay	...
Less: On discharge or transfer	...
Balance due on discharge or transfer	...

The amount shown as balance due on discharge or transfer has been paid.

Month of assignment on account of pay is ...

Month of ... "been" or "not been" as case may be

REMARKS

State (1) date of enlistment

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

(3) cause of discharge and authority

If discharged from the Contingent state if any Report advice for assigned for his next tour of duty

I have examined this statement of account and find it to be correct except from the PAY file

Signature: ...

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

Casualty Form—Active Service.

M. F. W. 54.
150M. 10-15.
H.Q. 1772-39-920.

Unit, Regiment or Corps 147TH GREY O. S. BN. C. E. F.

Regimental No. _____ Rank Capt. & Adj. Name Kylie Edmund Joseph


Enlisted (a) 16/12/15 Terms of Service (a) Director of War Service reckons from (a) 16/12/15

Date of promotion to present rank. } 16/12/15 Date of appointment to lance rank } _____ Numerical position on roll of N. C. Os. } _____

Extended _____ Re-engaged _____ Qualification (b) University Professor

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				
		Deceased 14/5/16	Owen Sound Ont	14/5/16	Riot Kerr Capt. Adjutant 147th Grey O. S. Bn., G. E. F.

Pleura-Pneumonia



(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.

120

This space to be for numbers.

Proceedings on Discharge.

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

No.	
Rank <i>Captain</i>	
Name <i>KYLIE, Edward Joseph</i> <small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company) <i>147th Grey O.S., Bn., C.E.F.,</i>	
Date of Discharge <i>14th May 1916</i>	
Place of Discharge <i>Owen Sound Ont.</i>	
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age..... <i>36</i>years.....months.	Descriptive Marks <i>147th Grey</i>
Height.....feet.....inches.	
Complexion <i>Fair</i>	
Eyes	
Hair	
Trade	
Intended place of residence } (To be given as fully as practicable.)	
2. The above-named man is discharged in consequence of <i>Deceased</i>	
<small>N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.</small>	
To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.	3. Conduct and character while in the service have been, according to the records, etc.
	<small>N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:</small>
	4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

M. F. B. 218.

50m.—3-16.
H. Q. 1772-39-113.

(OVER)

Handwritten signature and initials in blue ink.

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

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

6. Medals and Decorations.....

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (*Squadron or Battery*), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place) Owen Sound Ont.

G. J. McFarland Lieut. Col.

O. C. 147th Grey O. S. Bn., G. E. F.

(Date) June 15th 1916.

Commanding

8. Certificate to be signed by the Soldier on Discharge

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place) Owen Sound Ont.

(Deceased)

(Signature of Soldier.)

(Date) June 15th 1916.

(Signature of Witness.)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

(Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to.....(the date to which the Record of Service is completed).....years.....days.

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

11. Confirmation of Discharge.

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

(Place) Owen Sound Ont.

G. J. McFarland Lieut. Col.

O. C. 147th Grey O. S. Bn., G. E. F.

(Date) June 15th 1916.

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.)

(OVER)

List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263.</p> <p>Squadron } Battery } Conduct Sheet, " B. 263a. Company }</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia Form B. 313</p> <p>Medical Report for Invalid* " B. 227.</p> <p>Statement of Man's Account on Transfer and Last Pay Cer- tificate, " D. 877.</p> <p>*Only if discharged "Medically unfit."</p>	<p>Attestation Paper, Militia Form B. 235.</p> <p>Proceedings on Discharge " B. 218.</p> <hr/> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p>(a) Proceedings on Discharge.</p> <p>(b) Attestation.</p> <p>(c) Medical History Sheet (in the event of such having been prepared.)</p>
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N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.