

REGIMENTAL DOCUMENTS

NAME ALLIN. Arthur Wesley

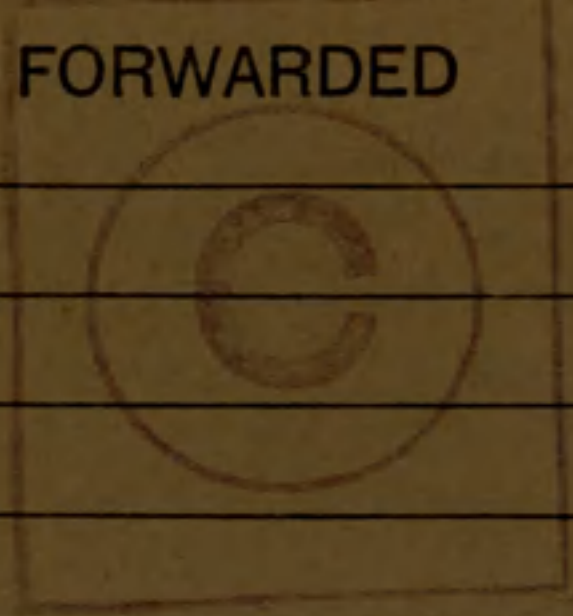

REGT. NO. 1084004

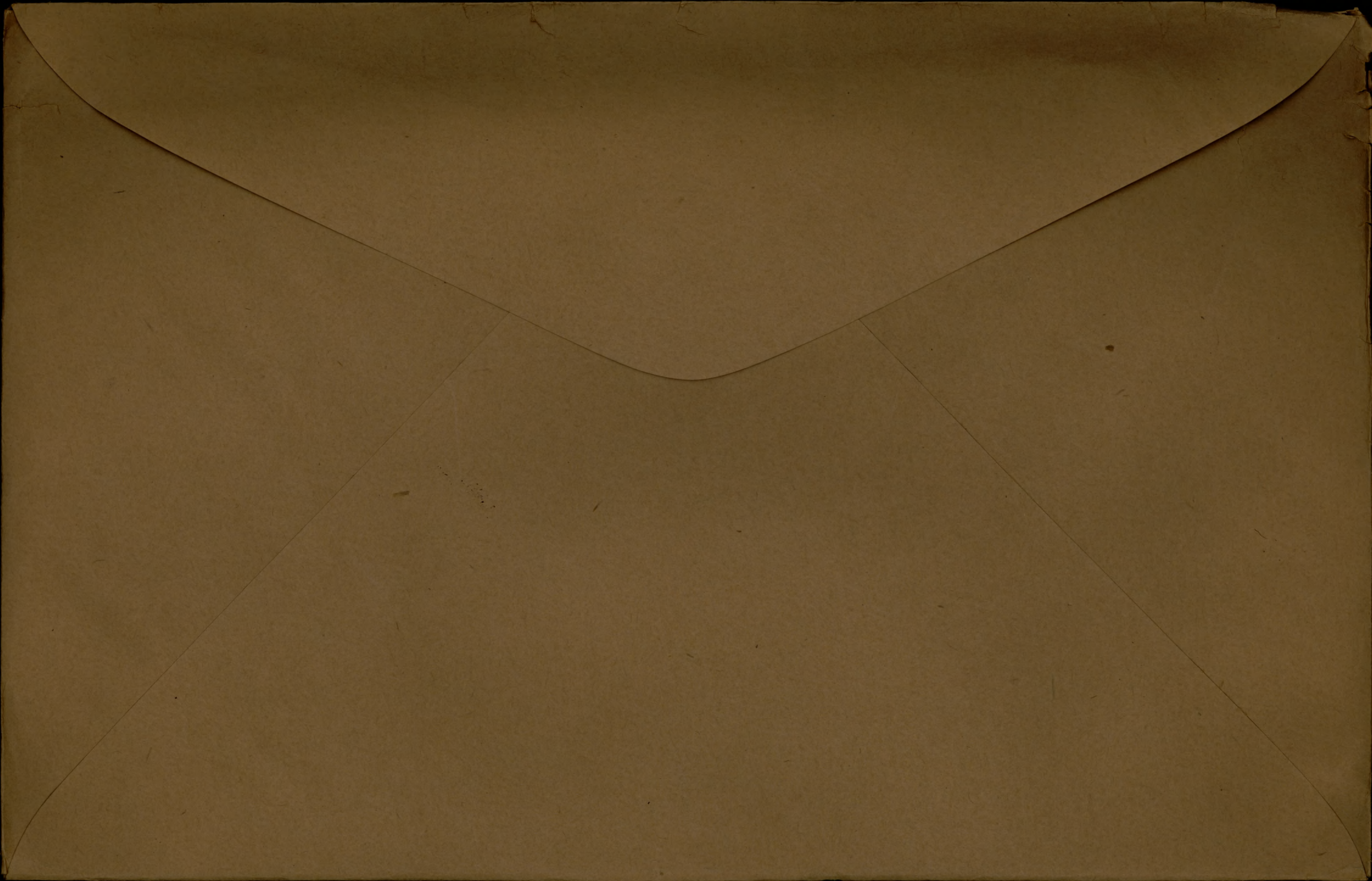
UNIT 252 Batta

H. Q. FILE NO. \_\_\_\_\_

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CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY	
5 ATTESTATION PAPER (M.F.W. 23, 133, or 51)					<b>DEATH</b>	
/ CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category	
TRAINING HISTORY SHEET (M.F.W. 113)						
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)						
/ REGT. CONDUCT SHEET (M.B.W. 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)						<b>DISCHARGE</b>
DENTAL HISTORY SHEET (M.F.B. 465)					Category	
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252nd O.S. Bn. C.E.F.

252nd O.S. BATTALION C.E.F.  
ATTESTATION PAPER.

No. 1087007

Folio. 1

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... *Allin*
- 1a. What are your Christian names?..... *Arthur Wesley*
- 1b. What is your present address?..... *Sundsey*
- 2. In what Town, Township or Parish, and in what Country were you born?..... *Magog, Que*
- 3. What is the name of your next-of-kin?..... *Sister, Arthur Allin*
- 4. What is the address of your next-of-kin?..... *Sister Sundsey*
- 4a. What is the relationship of your next-of-kin?..... *Sister*
- 5. What is the date of your birth?..... *1894 May 9<sup>th</sup>*
- 6. What is your Trade or Calling?..... *Hardware Mer.*
- 7. Are you married?..... *Single*
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... *yes*
- 9. Do you now belong to the Active Militia?..... *no*
- 10. Have you ever served in any Military Force?..... *no*  
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*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Arthur Wesley Allin*, 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.

Date *Oct 12<sup>th</sup>* 1916, *Arthur W. Allin* (Signature of Recruit)  
*Left Hon. Capt* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Arthur Wesley Allin*, 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 *Oct 12<sup>th</sup>* 1916, *Arthur W. Allin* (Signature of Recruit)  
*Left Hon. Capt* (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 *Sundsey* this *12<sup>th</sup>* day of *Oct* 191*6*  
*J. J. [Signature]* (Signature of Justice)

# Description of Arthur Wesley Allen on Enlistment.

Apparent Age 22 years 4 months.  
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 8 1/2 ins.

Chest measurement { Girth when fully expanded 40 1/2 ins.  
 Range of expansion 3 1/2 ins.

Complexion Fair

Eyes Blue

Hair Brown

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

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.)

2 race marks on left arm, dark mole on front right leg under knee

## 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 13th Oct 1916

Place Lundsey

Capt. W. B. Jeffers, M.D.  
 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:—

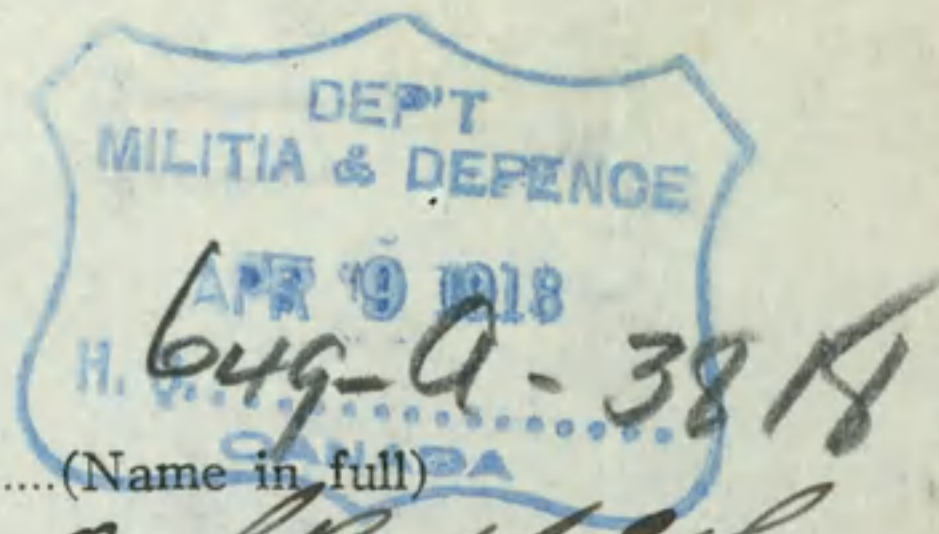
## CERTIFICATE OF OFFICER COMMANDING UNIT.

Arthur Wesley Allen 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.

J. J. [Signature] (Signature of Officer)

Date 12th Oct. 1916

# FORM OF WILL



I, Arthur Wesley Allin (Name in full)

Regimental Number 1084007 serving in 25<sup>th</sup> Mal Bn C.F.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I devise all my real estate unto

my Sister Alice Allin  
Lindsay Curran

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

absolutely, and my personal estate I bequeath to

my Sister Alice Allin  
as above

Name and Address of person or persons to receive personal estate\* (See note).

### NOTE

This space for the appointment of Executor if necessary.

*[Handwritten line through the space]*

### IMPORTANT NOTE

this 8<sup>th</sup> day of May A.D. 1917

This must be signed and Dated by THE SOLDIER HIMSELF.

Arthur W. Allin Signature of Soldier.

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

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.

Signature of First Witness J. K. Roberts  
Address of Witness 16. Nelson St. Birkhead.  
Occupation of Witness Stenographer. England.  
Signature of Second Witness Geo W Dawson  
Address of Witness 144 Alexander Ave. Montreal  
Occupation of Witness Shipper

FORM OF WILL

THE  
WILL  
OF  
THE  
TESTATOR  
BRIEF  
STATEMENT  
OF  
THE  
TESTATOR'S  
WILL

I, *John Doe*, of the County of *Albany*, State of *New York*, do hereby certify that the following is a true and correct copy of the will of *John Doe*, as the same appears from the original thereof, as the same is now on file in the office of the County Clerk of the County of *Albany*, State of *New York*.

*John Doe*  
County Clerk

*John Doe*  
County Clerk

*John Doe*  
County Clerk

*John Doe*  
County Clerk

*John Doe*  
County Clerk

*John Doe*  
County Clerk

# CANADIAN CONTINGENT EXPEDITIONARY FORCE

## LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 1087007 Rank Bn. Q.M.S. Name Allin, A.W.

Corps 252nd. Battalion, C.E.F. who was\* Discharged

On May 30th, 1917. 1917, to \_\_\_\_\_

\*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from May 1st, 1917 1917, to May 30th, 1917, the inclusive date of transfer or discharge.

Dr.	\$	c	Cr.	\$	c
Bal. Dr. from prev. month.....			Bal. Cr. from prev. month.....	10	00
Advances } No.....			Regt'l Pay <u>30</u> days at \$ <u>1</u> c <u>80</u>	54	00
by } No.....	5	00	Field Allow. <u>30</u> days at \$ c <u>20</u>	6	00
Cheques } No.....			Other Allowances* <u>Subsistence</u>	9	00
Assigned Pay No.....			<u>15 Days.</u>		
Other Charges*.....			Other Credits*.....		
Payment on transfer or discharge No.....	74	00	Bal. Dr. (to be deducted by new unit).....		
Balance Cr. (to be paid by the new unit).....					
Total.....	79	00	Total.....	79	00

\*Give Particulars.

A monthly stoppage of \$ NIL (†) has ----- (‡) been paid on account of Assigned Pay for the month of \_\_\_\_\_ 1917 to (Assignee) \_\_\_\_\_  
 (Address) \_\_\_\_\_

(†) Insert amount to be assigned, whether it has been paid or not.  
 (‡) Insert "not" if amount has not been paid for period of account.

### On Transfer of an Officer.

Outfit Allowance of \$ \_\_\_\_\_ has been paid by Paymaster, Military District No. \_\_\_\_\_

**REMARKS:—**

State (1) date of enlistment 12/10/16.  
 (2) if married and if a Separation Allowance Card has been submitted Single  
 (3) cause of discharge and authority D.A.A. & Q.M.G. # 3, 44-A-96 of 9/5/17

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 May 16th, 1917.

Place Lindsay, Ont.

*L. Ridgway*

Paymaster

N.B.—For purposes of transfer this form is to be made out in quadruplicate. One copy to Paymaster of new unit; one to District Paymaster; one to accompany the pay-list at the end of the month, and; one for retention as a record.

For purposes of discharge it is to be made out in triplicate. One copy to accompany discharge papers; one copy to accompany pay-list at the end of the month, and; one for retention as a record.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

The rate to be used for all ranks is the rate in effect on 1st January 1917.

Regulation No. 200 of the War Office, dated 1st January 1917, shall apply.

Rank, Name, and Number of the holder of this certificate.

Company, Battalion, and Regiment to which attached.

Date of discharge or termination of service.

The following is a statement of the amount of the holder's pay and allowances due to him on the date of discharge or termination of service, viz:—

Description of Pay or Allowance	Amount
Pay	10 00
Gratuities	20 00
Travel Expenses	5 00
Medical Expenses	10 00
Death Gratuity	200 00
Unpaid Leave	20 00
Arrears of Pay	10 00
Unpaid Allowances	20 00
Total	315 00

On Transfer of an Officer

Quota Allowance has been paid by the War Office, Military Division No. 1000000.

REMARKS

His Majesty's Commission is hereby renewed.

He is appointed to the rank of Captain and to the position of Adjutant-General in the Canadian Expeditionary Force.

Given at Ottawa, Canada, this 1st day of January 1917.

John Andrew, Secretary.



252nd O. S. BATTALION, C.F.E. ORIGINAL  
**MEDICAL HISTORY SHEET**

Surname William Wesley Christian Name Allen

Examined { on <sup>12/18/16</sup> ~~18th~~ day of Oct 1916  
 at Lindsay

Approved by N. B. Jeffers  
 Rank Captain M.O.

Birthplace { City or Town Magog  
 County Quebec Prov

Apparent age 22 - 4 mos

Trade or occupation Hardware Merchant

Height 5 feet 8 1/2 Inches

Weight 188 lbs.

Chest measurement { Minimum 37 in inches  
 Maximum expansion 3 1/2 inches

Physical development Good

Small-pox Marks None

Vaccination Marks { Arm Right Left 2  
 Number 2

When Vaccinated last 10 years ago

(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection

In front + below right  
breast, a mole

Enlisted on <sup>12/18/16</sup> ~~18th~~ day of Oct 1916 at Lindsay

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment				
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.



MEDICAL HISTORY SHEET

Surname *Arthur Wealey* Christian Name *Allinburg*

Examined on <sup>12<sup>th</sup> R.M.B.</sup> ~~18<sup>th</sup>~~ day of *Oct* 1916 at *Lindsay*

Approved by *H. B. Jeffers*

Birthplace { City or Town *Maple* County *Quebec Prov*

Rank *Captain* M.O.

Apparent age *22*

Trade or occupation *Hardware Merchant* M.O.

Height *5* feet *8 1/2* Inches M.O.

Weight *188 lbs* lbs. M.O.

Chest measurement { Minimum *37 1/2* inches M.O. Maximum expansion *39 1/2* inches M.O.

Physical development *good* M.O.

Small-pox Marks *none* M.O.

Vaccination Marks { Arm Right Left *2* Number *2*

Date Result VACCINATIONS

When Vaccinated last *10 yrs ago* M.O.

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

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

*Dark mole under Right Knee & in groin?*

Date Result ANTI-TYPHOID INOCULATIONS, ETC.

Enlisted on *12<sup>th</sup>* day of *October* 1916 at *Lindsay*

Table with columns: CORPS, REG'T L NUMBER, HABITS, DATE. Rows for 'Joined on enlistment' and 'Transferred to'.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Table with columns: 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.



# 252nd O. S. BATTALION, C. E. F.

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

M. F. W. 54. (A. F. B. 103.)

350M.—5-16  
H. Q. 1772-39-920.

## Casualty Form—Active Service.

Unit, Regiment or Corps. 252nd Overseas Battalion C.E.F.

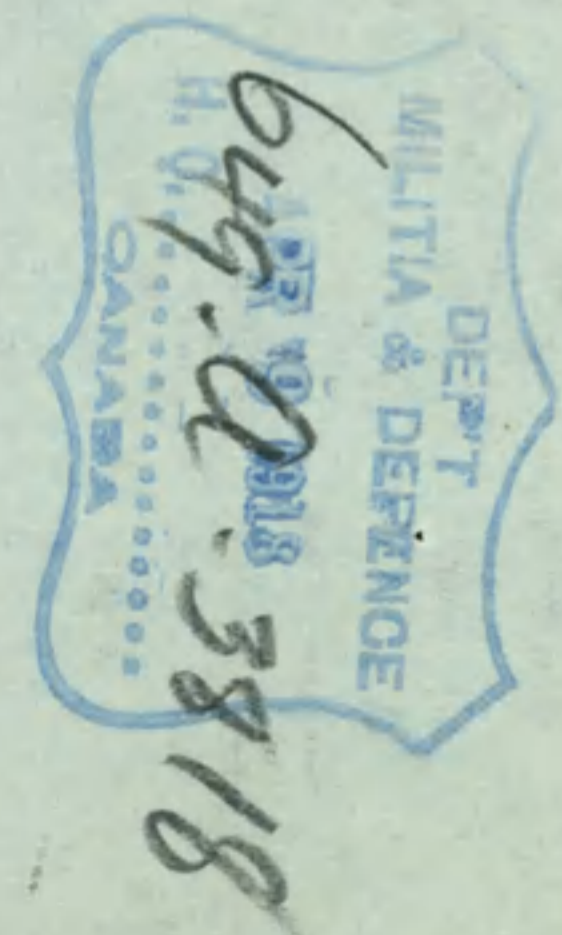
Regimental No. 1087007. Rank Private Name ALLIN Arthur Wesley,  
C. E. F.

Enlisted (a) 12/10/16. Terms of Service (a) C.E.F. Service reckons from (a) 12/10/16.

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

Extended ..... Re-engaged ..... Qualification (b) Hardware Merchant.

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				


  
 MILITIA & DEFENCE  
 DEPT  
 647-02918  
 3818  
 OANABRA

(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.



No. 1087007 RANK Pte

NAME Allin, A. W.

T. O. S. 12-10-16.  
DD 11 of 19-10-16.

UNIT 252<sup>nd</sup> Battalion

M. D. 3.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916; Oct 10	1916. Oct 31	L		
	Nov Dec	L L		
1917 Jan 1	1917, Jan 31	L		
	Feb Mar	L L		
	Apr May	u u		
			Dischrgd 10-day from this date D. O. 115 of 16-5-17 15-5-17	
			a/c closed by payment u	





## List of Discharge Documents.

✓ Reg. Conduct Sheet, Militia form B. 263.	✓ Attestation Paper, Militia Form B. 235.
✓ Squadron } Battery } Conduct Sheet, " B. 263a.	✓ Proceedings on Discharge " B. 218.
Copies of Convictions, by C. P. in MS.	In the case of recruits who are rejected on final approval, the discharge documents will consist of
✓ Med. Hist. Sheet, Militia Form B. 313	
Medical Report for Invalid* " B. 227.	
✓ Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.	(a) Proceedings on Discharge.
	(b) Attestation.
	(c) Medical History Sheet (in the event of such having been prepared.)

\*Only if discharged "Medically unfit."

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.

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. <i>1087007</i>	
Rank <i>Quarter Master Sergeant.</i>	
Name <i>Arthur Wesley Allin</i> <small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company) <i>252<sup>nd</sup> O.S. Batt. C. E. F.</i>	
Date of Discharge <i>15<sup>th</sup> May 1917.</i>	
Place of Discharge <i>Lindsay. Ontario</i>	
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age <i>23</i> years <i>0</i> months.	Descriptive Marks <i>2 Wacs on left arm. Dark mole on front right leg under knee.</i>
Height <i>5-</i> feet <i>8<sup>1</sup>/<sub>2</sub></i> inches.	
Complexion <i>Fair</i>	
Eyes <i>Blue</i>	
Hair <i>Brown</i>	
Trade <i>Hardware Merchant.</i>	
Intended place of residence } <i>Lindsay. Ontario</i> (To be given as fully as practicable.)	
2. The above-named man is discharged in consequence of <i>being</i> <i>"Medically Unfit": Authy; L.a.a + 2 m. G.</i> <i>M. D. 3. / 44- A. - 96. - dated 9/5/17.</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>	
<small>To be in the handwriting of the Commanding Officer, who will sign himself, and initial these, certificate and initial these.</small>	3. Conduct and character while in the service have been, according to the records, etc.  <i>Good</i>
	<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.)  <i>Hardware Merchant</i>	

M. F. B. 218.

100m.-6-16.  
H. Q. 1772-39-113

(OVER)

*Noted  
1-1-17  
16-7-17  
P.S.*

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) *Lindsay, Ontario* *H. J. Thomsen Major*  
(Date) *15<sup>th</sup> May 1917* Commanding *252<sup>nd</sup> O.S. Bn. C.F.*

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) *Lindsay Ont. Arthur W. Allen* (Signature of Soldier.)  
(Date) *May 15/17* *J. J. [unclear]* (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 *15/5/17* (the date to which the Record of Service is completed).....years.....*2*14 days.  
Total.....years.....*2*14 days.

11. Confirmation of Discharge.

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

(Place) *Lindsay, Ontario* *H. J. Thomsen*  
(Date) *15<sup>th</sup> May 1917* (Signature) *H. J. Thomsen*  
*acting as Major*  
*252<sup>nd</sup> Bn*

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.)