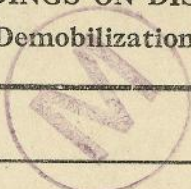


10-11-36

War Service Badge Class. **A+B.**

No. **299151-55616** Issued

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)



P

1. No. **724170**

2. Rank **Private**

3. Name **BATT, Harry**

4. Unit **No. 3 District Depot.**

5. Date of Discharge **29-4-19** Place **Kingston, Ont.**

6. Reason for Discharge **being medically unfit for further War Service.**

7. Authority **Med. Board D/ 21-4-19 R.O. 1420**

8. Proposed Residence after Discharge **Box 1031 Lindsay, Ont.**

9. **CERTIFICATE TO BE SIGNED BY SOLDIER.**
I hereby acknowledge that at the undernoted place and date I received my discharge Certificate
M. F. W. ? **39**

x *Harry Batt*
Signature of Soldier.

10. **CONFIRMATION.**
The discharge of the above named man is hereby confirmed.

Place **Kingston, Ont.**

Date **29-4-19**

Signature *R. Rapph* **Lieut.**
for O. C. Discharge Section
No. 3 District Depot

Medical Documents
Forwarded to
~~S. C. R.~~ **B. P. C.**
on
Date **MAY 7 1919**

K.K.
29-4-19
com.

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate.....	Militia Form W. 23
or Particulars of Recruit.....	Militia Form W. 133
Field Conduct Sheet.....	Militia Form W. 178 or A.F.B. 122
Casualty Form.....	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate.....	Militia Form W. 44
Certificate that missing documents are unobtainable.....	
Medical History Sheet.....	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board.....	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet.....	Militia Form B. 465
Medical Report.....	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet.....	Militia Form B. 263
Company Conduct Sheet.....	Militia Form B. 263a

Harry

Name *Batt*

Rank *124* *1st Pm BN*

Pte

Reg. No. *724170*

Unit

Next of Kin *Canada*

CR

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
<i>1914</i>						
<i>20-11</i>	<i>No 11 Can F Amb</i>	<i>Myalgia L. leg</i>		<i>A77</i>		<i>8546</i>
<i>20-11</i>	<i>No 3 Cavalry C.C. Str.</i>		<i>do</i>	<i>A76</i>		<i>8873</i>
<i>27-11</i>	<i>3 Co. 4th Mouleque</i>		<i>do</i>	<i>A81</i>		<i>16796</i>
<i>15-12</i>	<i>4th B. Co. H. Dudley Rd Bham</i>		<i>do</i>	<i>B83</i>		<i>7652</i>
<i>1915</i>	<i>1st Con Co. Epsom</i>		<i>do</i>	<i>B103</i>		<i>9449</i>
<i>18-1</i>	<i>Can RC Str. Beaton</i>		<i>do</i>	<i>B108</i>		<i>10713</i>
<i>3-4</i>	<i>Discharged</i>		<i>do</i>	<i>B179</i>		<i>4145</i>

No. 724170 RANK Pte

NAME Rast. J. H.

T. O. S. 27-3-16.
D.O. 113. 31-3-16

UNIT 109th Battalion

M. D. 13

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 March	1916. Mar 31	v		
	April	v.		
	May	v.		
	June	v.		
	July	v.		

UNIT SAILED
JUL 23 1916

NAME

RANK AND CORPS

CABLE

NO.

DATE

NATURE OF CASUALTY

REGT'L No.

H. Q. FILE NO. 649.

FOLLOWS

No.

FOLLOWS

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

A 72	116. Fr. G.	20-11-17	Myalgia L Leg
A 76-3	#3 Aust. Cas. Ch. St.	20-11-17	" " " " "
A 81	No 3 ban Gen Boulogne	27-11-17	" L ..
B 83	1st Locat Gen Bermin ^{ne}	5-12-17	" " " "
B 103-3	mil " com. Epsom ^{gran}	4-1-18	Myalgia L Leg
B 118-2	Can Red x Spec. Ruxton	18-1-18	" " " "
B 172	Discharged	3-4-18	" " "

SURNAME.

Batt

CARD NO.

3 / 12 M

CHRISTIAN NAMES

Harry.

SOS. Disc 29.44
Med. Dept. 20 126
30-4-1911 30 22

REGL. NO.

724140

RANK

Pte

UNIT

109th

Batt

FORMER CORPS

Nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Batt, Mrs Catherine Ellen

RELATIONSHIP TO SOLDIER

Wife

ADDRESS

Elgin St., Lindsay, Ont.

COUNTRY OF BIRTH

England, London

DATE

Mar 1st, 1884

PLACE OF ATTESTATION

Lindsay, Ont.

DATE

Mar 27th 1916

Sailed from Halifax 23/7/16 per S.S. "Olympic"

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

488
5

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

RIC 2-2-19 2/19

MARRIED

Yes

SINGLE

WIDOWER

TRADE OR CALLING

shoemaker

RELIGION

Church of England

DESCRIPTION.

APPARENT AGE

32.

YEARS

-

MONTHS

HEIGHT

5

FEET

7 ³/₄

INCHES

CHEST MEASUREMENT

34 ¹/₂

INCHES

EXPANSION

3

INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

St. Red

DISTINGUISHING MARKS

Small scar on outer side of left forearm.

MEDICAL EXAMINATION.

PLACE

Lindsay, Ont.

DATE

Mar 27th 1916

Present Address.

Elgin St. Lindsay.

LEDGER No. 986

SERIAL No. 18515 27

REG. No. 724170 NAME Batt Harry

RANK Pte CORPS 3 Casy Co AGE 40 SERVICE $\frac{42}{12}$

HOSPITALS

DATE OF ADMISSION

1 Queens Mil Kingston

19-2-19

2

3

DIAGNOSIS Myalgia

TRANSFERRED TO

DISPOSITION 24-4-19. Cas Co

CATEGORY

M.F.W. 2553.

1126-D.P.-50M-12-18.

1772-39-1332.

P.T.O.

Number *724170*

Rank

Spr.

Surname

BATT

Christian Name

Harry

Units

C.C.

Theatre of War

France

Date of Service

3-4-17.

Remarks

13 William St., South,

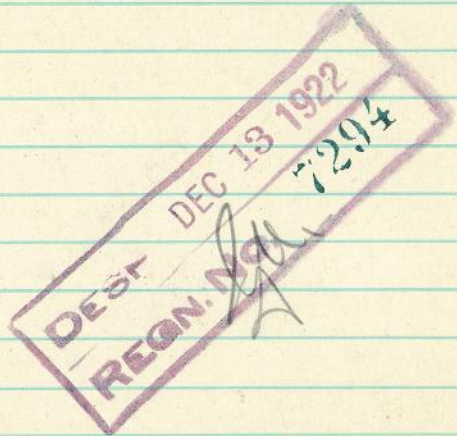
Latest Address

~~*Box 1031 Lindsay*~~
Ont.

Roll No.

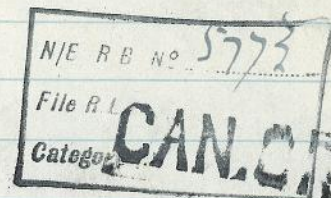
B. Page 21494.

200m.-6-21.



A.G.R. Rank Name BATT, Harry Reg'l No. 724170
 Unit 109th Bn. If in perm. Corps, }
 What Unit? } Married or Single Married
 Lindsay,
 Place and Date of Enlistment 27th March, 1916. Place of Birth London, England.
 Name and Address, Next-of-Kin Catherine Ellen Batt,
 Elgin St., Lindsay, Ont., Canada. Relationship Wife.
 Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship
 Discharge, Date and Place Reason Character

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.				
		Arrived in England per H. M. T. 2810		31-7-16	✓
8-12-16	106109 ⁴ Bn	SO on tsn to 124 ⁴ Bn	Drifley	8-12-16	B II D.O. 343 ✓
9-12-16	06124 ⁴	20.8. fe 109 ⁴	"	"	265.1
29-3-17	12 Res.	Attached from 124 ⁴ Bn	Edinburgh	29-3-17	-81
29-3-17	124 ⁴ Bn	SO 10 12 Res to 124 ⁴ Bn	do	29-3-17	-83 705 Base Coy 1-4-17 P# 20 85-d 3-4-17
8-4-17	124 ⁴ Bn	LOS from Base Coy	Field	4-4-17	-78 G. 2. B. 103 etc. 9/5/17 MSB
24-11-17	1600. 124.	# 11 can Field amb.	"	20-11-17	6h 0.72
29-11-17	"	# 3. Aust Gas Chem Stat.	"	20-11-17	6h 0.76 Myalgia
30 ⁵ -12-17	"	# 3 can Gen Hosp	Chaples	27-11-17	6h 0.81
7-12-17	"	1st South Gen Hosp	Cham	5-12-17	6h 0.83-1

1600
 100
 600

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.				
11-2-17	I.C.O.R.D.	T.O.S. from 124 Am.	Sandring	28-11-17	Pf ^{no} 277 (1247101530/20'17)
30-3-18	-	S.O.S. to C.E.R.D. St. Witley		10 22-3-18	Amend. in N.O. 96/8 1/8 N ^o 188
3-4-18	E.R.D.	T.O.S. from 1 st C.O.R.D.	St. Seaford	9-3-18	D.O. 92
26-4-18	"	Offcom. to C.T.S. for duty	Gn.	26-4-18	N.O. 115
28-11-18	"	Comm from C.T.S.	"	26-11-18	D.O. 310.
3-2-19	"	S.C.S. to Canada M.D.3.	"	24-1-19	D.O. 34.

724170

Staff 21325
724170

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Batt Christian Name Harry

Examined { on 27 day of March 1916
at Lindsey

Approved by J. McCulloch Capt.
Medical Officer
Rank 109th Overseas Battalion, C.E.F.

Birthplace { City or Town London
County England

Apparent age 32 years

Trade or occupation Shoe maker

Height 5 Feet 7 3/4 Inches

Weight 147 Lbs.

Chest measurement { Minimum 34 1/2 inches
Maximum expansion 37 1/2 inches

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right Yours Left None
Number Four

When Vaccinated last March 30th 1916

(a) Marks indicating congenital peculiarities or previous disease None

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

Date	Fit or Unit	EXAMINED FOR RE-ENGAGEMENT
<u>7-6-18</u>	<u>Bin</u>	<u>Sh. Lea Capt</u> M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	VACCINATIONS
<u>30.3.16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>25.4.16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>2.5.16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<u>10.5.16</u>	<u>"</u>	<u>J. McCulloch</u> M.O.
<u>28.9.16</u>	<u>"</u>	<u>J. McCulloch</u> M.O.

Enlisted on 27 day of March 1916 at Lindsey

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Bn. C.E.F.</u>	<u>724170.</u>		<u>27.3.16</u>
Transferred to	<u>124th OVERSEAS BATTALION C.E.F.</u>			
	<u>P O-S</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Wiby</u>	<u>March 27th 17</u>	<u>Debility</u>	<u>A 2 Ph. Cook Capt</u>
<u>Canadian Red Cross Special Hospital</u>	<u>20/3/18</u>	<u>Myalgia.</u>	<u>Bill Likely to be raised within 6 months.</u>
<u>BUXTON, DERBY.</u>	<u>2-12-18</u>	<u>Myalgia</u>	<u>J. W. Machin Capt. C.A.M.C.</u>
<u>Benfield out</u>	<u>19-2-17</u>	<u>Myalgia</u>	<u>"D" E. B. ...</u>
			<u>A. A. Lewis Capt</u>

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

Mary

Christian Name

Bath

Surname

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
21st. Southern General Hospital Budley Road, Birmingham.		4	12	17	31	12	17	Sciatica	27	Transferred to Canadian Conv. Hospital Exeter	<i>Mulland</i> Captain R.A.M.C.
M.C.H. Exeter		31	12	17	16	1	18	Myalgia etc.	17	On admission Pain in Knees & Ankles. Has had them since Jan. 1917. All joints become painful at times. Requires active treatment transfer to Boston Calverton	
Canadian Red Cross Special Hospital BUXTON, DERBY.		16	1	18	3	4	18	Myalgia	47	Pain in lumbar region, legs and left hip. There is no limitation of movements at these joints. All symptoms are sub- jective. Lungs are normal. Kidneys- Negative. Heart is accelerated. No murmur.	<i>Ogden</i> Capt. C.A.M.C.
Q.A.M.H. Kingston		19	2	19	24	4	19	DO	64	Boarded 2-4-19 unfit	<i>Stevenson</i> Capt. H.M.C.

*Name BATT Harry Rank Pvt. Regtl. No. 724170

Original unit 1090th Present unit M. CS Age 35 Religion Cath. Fyle Depot 3-B-801 Ref. H.Q.

Port, ship and date of arrival Campain² Halifax 2-2-19

Next of kin wife) Ellen Batt Lindsay Ont.

Address on leave same

Address on discharge

Transportation issued ^{Yes} No Date Character on discharge

Previous occupation Shemiker Date and place of enlistment 27-3-16 Lindsay

Diagnosis Date of Medical Boards

Date.	Remarks	Pt. 2 Order No.
<u>4-2-19</u>	<u>T.O.S. Casualty Company No. 3 District Depot.</u> <u>for Disposal, Part Two D.O. 38</u> <u>Leave & Sub. 5-2-19 to 18-2-19.</u>	<u>From ofs.</u> <u>Eff 4-2-19</u>
<u>26-2-19</u>	<u>S.O.S. to Hoop Dec. 19-2-19</u>	<u>cc 57</u>

*—Name will be given in full ; surname first.

Date

Remarks

Pt. 2 Order No

19-2-19	T.O. from Connally Coy & posted to Connally Hoop Sect. Queens	HS 59
8-4-19	Overstay my leave from 9/30 from 8-4-19 until 9/30 from 9-4-19 Perkins: 2 days pay by R.W.	HS 103
14-4-19	Transferred to Cas Coy	HS 115
28-4-19	T.O. from H.S. Queens 22-4-19	CC 115
29-4-19	S. G. S. D.D. #3 Demob. R.O. 1420.	HQ 130

THIS FORM WILL BE USED FOR ALL RANKS
MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Kingston Ont. DATE Nov. 14/19

1. 1 (a) Unit 203^{1MC} DD (b) Regimental No. 74470 (c) Rank 1st Lt.

(d) Surname BAGG (e) Christian name Henry

(f) Home address Box 1001 Lindsay Ont.

(g) Next of Kin Mr. J. Bagg (h) Relationship wife

(i) Address of Next of Kin Box 1001 Lindsay Ont.

2. Age last birthday 40 Date of birth Mar. 1876

3. Enlistment, or Appointment (if an Officer) (a) Place Lindsay Ont. (b) Date Mar. 27/16

4. Personal description:

(a) Height 5'7-3/4" (b) Weight 160 lbs (c) Complexion Tan
(stripped)

(d) Colour of hair Brown (e) Colour of eyes Blue (f) Identification marks, Scars, etc. Small scar on right thigh (2 on each)

5. Former trade or occupation Surveyor

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years		Days	
	PERIODS			
		From		To
Canada <u>4 mos.</u>	<u>Mar. 27/16</u>	<u>July 24/16</u>		
England <u>8 mos.</u> <u>15 mos.</u>	<u>July 22/16</u>	<u>Mar. 1917</u>		
France or other theatres of War <u>8 mos.</u> <u>3.3.18</u>	<u>Dec. 15/17</u> <u>Mar. 1917</u> <u>Feb. 19/19</u>	<u>Jan. 16/19</u> <u>1900. 15/17</u>		

7. Original disease, or injury Myelitis

(a) Date of origin Jan. 1917 (b) Place of origin England

(c) Cause Active Service Conditions

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

severe pain in back on lifting

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

subj. stiffness in thighs & small of back. No pain at present. Appetite poor. Sleeps rather poorly. Man complains of severe pain in back on lifting.

obj. Heart & lungs - normal. Metatarsal phalangeal joint of right great toe enlarged & painful to movement. Movement 60% normal. Knees joints crack when moved. No limitation of movement of any other joints. Fine tremor of extended fingers. Face jerks normal. Wasserman negative.

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above? (Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

- Nervous System..... No Cardio-Vascular System..... No Genito-Urinary System..... No
(If pulse rate is abnormal, B. P. will be taken.) (Albumen and Sugar will be excluded.)
- Special Senses..... No Respiratory System..... No Integumentary System..... No
- Disturbances of Mentality..... No Digestive System..... No Muscular System..... No
- Osseous and Joint Systems..... No Any other general condition..... No

10. (a) History (of the condition referred to in Section 9 (a).)

Man has been in and out of hospital repeatedly since having myalgia Jan. 1917. Both knees & both ankles have been swollen occasionally. Man states, according to his papers (M.H.S.) his symptoms have been all subjective & that has been the case here. In fine weather he is pretty well and in damp weather he complains of more or less pain in muscles. Treatment does not appear to affect it much.

10.—(b) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (a).)

Section 4/22/17 Myalgia 21/12/17 evacuated from France with chronic rheumatism June 1917 leaving Jan. 1917

(c) (Here give a description of wounds, scars, and deformities.)

11.—(a) Did the disabling condition have its origin before enlistment?

(b) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment?

The regimental documents will be referred to.

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one?

14. Treatment (Case reports, general or special, should be secured and attached where possible.)

Hospital in England
Feb. 19/18

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? (If the answer is "yes" state nature of treatment required and probable duration)

16. Can the former trade or occupation be resumed? (If not, briefly state why)

Yes, with limitations (due to pain & stiffness in back)

17. Recommendations

That man be discharged as unfit with disability due to service.

W. White Capt. Chanc.
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned, have heard the description of my disability and present condition read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.)

I complain in addition of

Henry Batt Sapper Rank.
Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticised.

19. Is the invalid fit for

- | | | |
|---|--------------|--------------|
| (a) General service, | (Category A) | (Yes or No.) |
| (b) Service abroad, not general service, | (" B) | (Yes or No.) |
| (c) Home service (Canada only), | (" C) | (Yes or No.) |
| (d) Temporarily unfit. | (" D) | (Yes or No.) |
| (e) Unfit for service in Categories A, B and C. | (" E) | (Yes or No.) |

20. It is certified that the invalid

(a) Does require treatment. (Give the nature of the condition and of the treatment required and its probable duration.)

- (b) Does not require treatment.
 (c) Should pass under his own control.
 (d) Should not pass under his own control.
 (~~Strike out condition not applicable.~~)

21. It is recommended that the invalid be discharged. (When not for discharge add special recommendation.)

~~as medically unfit - disability due to service~~

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

Wm Gibson *Commandant* President.

PLACE..... *21 April 1919*

Im Assehatine *Capt. A.M.S.*

} Members

DATE..... *APR 25 1919*

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned..... understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....

Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

..... President.

PLACE.....

} Members

DATE.....

APPROVED BY

APPROVED BY

W. H. Craig *Captain A. M. S.*
 Assistant Director of Medical Services.

..... Director-General of Medical Services.

DATE *APR 25 1919*

DATE.....

94/6

MEDICAL CASE SHEET.*

No. in
Admission
and
Discharge
Book.

61325

Year

1914

Regimental No.

124170

Rank.

Pte

Surname.

Bath.

Christian Name.

H.

Unit.

124 Cav. Bn.

Age.

38

Service.

1 year 10/12

Station
and Date.

Dudley 120
9.12.14

Disease

Sciatica

Left leg from thigh to knee.

Rx Aspirin gr. 7 TDS

Dec 20

Better. still some pain in left leg - stiff in
mornings

To auxiliary Hosp N 3 or 4.

* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

CASE SHEET.*

No. in Admission and Discharge Book.

Regimental No. Rank. Surname. Christian Name.
 724170. Pte. BATT Harry.

1b-T1701.

Year 1918

Unit. Age. Service.
 124th Can. Battn. 38. 22/12

Disease MYALGIA (Hips)

ENLISTED. March 1916

ARRIVED IN ENGLAND. Aug. 1. 1916

FRANCE. Five months - Since March 1917

COMPLAINT. Pain in left thigh & back.

DURATION OF PRESENT ILLNESS. Since Nov. 30 1917

PAST ILLNESSES. Has been troubled with pains in hips & back for years.

FAMILY HISTORY. good

HISTORY: PRESENT ILLNESS. Had been in light duty since Vimy Ridge Engagement - due to working in water - Sent to No 3 Base Hospital about Nov 30 then to Dudley Rd Hpl Birmingham on Dec 15 1917 - then to Epsom Dec 31 then here.

CONDITION ON ADMISSION.

Teeth require dental treatment. No objective symptoms - Complaint of pain in muscles of anterior aspect of left thigh - No signs of venation.



1st Lt. J. J. Jones
 Dec 14 1917
 1st Lt. J. J. Jones
 Dec 16 1917
 4. 12. 17
 & 21. 12. 17

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

Station
and Date.

TREATMENT.

Massage daily to
affected parts U.S.

2. 3. 18.

imprond

3. 3. 18.

imprond

CONDITION ON DISCHARGE.

Pain in lumbar region & legs
~~right~~ left hip. All symptoms subjective
Heart accelerated. Lungs normal.

L. H. Francey

Capt.

Bin likely to be raised in category within 6 mos

L. H. Francey

Capt.

CLINICAL CHART.

Army Form B. 181

Corps 124 Cal. Bn.

(To be attached to Case Sheet.)

Military Hospital _____

No. 724170

Rank and Name Pte Batt. H.

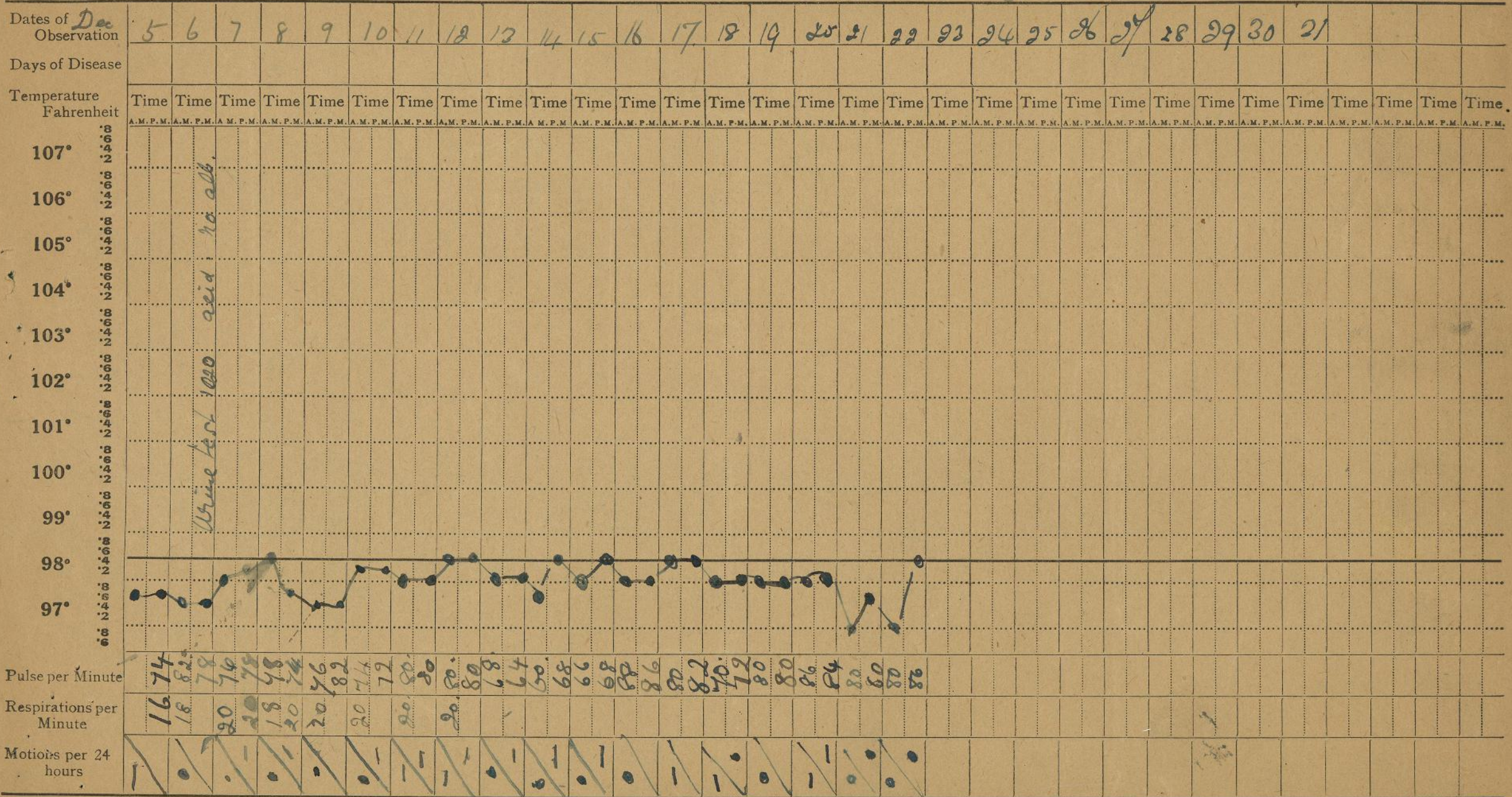
Age 38

Service 1 year 10/12

Disease _____ Date of admission 4/12/17

Date of discharge 31 DEC 1917

Result _____



Signature _____ In charge of case.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

-----724170-----Private-----

This is to Certify that No. (Rank)

-----BATT, Harry-----

Name (in full) enlisted in
the-109th Overseas Battalion-----
..... Lindsay, Ont.-----27th-----
CANADIAN EXPEDITIONARY FORCE at on the
day of -----March----- 16.
..... 19
-----Canada, England and France.-----

HE served in
being medically unfit for further
and is now discharged from the service by reason of
War Service. Authority Med. Board D/ 21-4-19 R.O. 1420-----

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows:—

<p>Age -----35 years-----</p> <p>Height -----5 ft. 7 1/2 ins.-----</p> <p>Complexion -----Fair-----</p> <p>Eyes -----Blue-----</p> <p>Hair -----Straw-----</p>	<p>Marks or Scars -----small scar one on each thigh.-----</p>
--	---

Harry Batt
Signature of Soldier

D. C. Papp
Issuing Officer
O. C. Discharge Section
No. 3 District Depot
Rank

Date of Discharge -----29-4-19-----

Signed at -----Kingston, Ont.-----29th-----19
-----3----- day of -----April----- 19

in Military District No. 300-3-B-801

File Reference No.

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. (Rank) Name

Unit

Address on Discharge

Character and Conduct

Former Occupation

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks

Signed at this day of 19

.....
Name of Officer

.....
Rank

.....
Appointment

On demobilization the
particulars called for on
the back of this cer-
tificate will not be com-
pleted.

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..... *109th Batta*

(2) Regimental Number..... *724170*

(3) Full Name of Soldier..... *Harry Batt*

(4) Place of Birth..... *London, Eng.*

(5) Are you married, or not?..... *yes*

(6) If married, state,
 (a) Full name of your wife..... *Catherine Ellen Batt*

(b) Present Postal Address..... *Box 1031 Lindsay, Ont*

(7) Are you a widower?..... *no*

(8) Have you any children?..... *yes*
 If so, give number of boys and girls..... *Two girls*
 Also their names and ages..... *Rosina May Batt 6 years*
Catherine Violet Batt 4 "

(9) Is your Father alive?..... *no*
If so, state name and address.....

(10) Is your Mother alive?..... *yes*
If so, state name and address..... *Jane Ann Batt*

Broadwall, Blackheath, London, S.E. England

(11) If your Mother is a widow..... *yes*
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.
.....
.....
yes

(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.
.....

(15) Are you insured?..... *yes*
If so, in what Company?..... *Prudential*
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..... **JUL 18 1916**.....

[Signature]
.....
Officer Commanding. Major
109th Overseas Battalion, C. E. F.

SURNAME

CHRISTIAN NAME OR NAMES

REG. NO.

Batt.

N.

724170

RANK

UNIT

Co.

TROOP

BATTY.

Pfc.

160 124 P.

HOSPITAL

DATE OF ADMISSION

11 C. F. Amb.

20.11.17

1.

3 Aust. Cas. Cl. Station

HOSP. 20-11-17

2.

3 Can Gen Hosp

HOSP. 27-11-17

3.

1 S. G. Hosp Dnd. B'kane

HOSP. 5-12-17

4.

Mil Hosp Epsom

HOSP. 1-1-18

DIAGNOSIS

Myalgia h. Leg. 40

1.

2.

3.

DISPOSITION

DATE

Ch. 26.11.17 A72.

30-11-17 @ 76 (3)

6-12-17 A 81-2

8-12-17 B 83-1

3-1-18 B. 103 (3)

21-1-18 B112 - 2

4-4-18 B179 - 11

Dis 3. 4. 18
REMARKS

A.M.D. & DEPT.

Dep. of D.R.M.S. O.M.F.C. London.

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1. *San Red Cross Spc, Buxton*

18.1.18

2.

3.

4.

5.

6.

7.

[Faint, illegible text in the bottom right corner, possibly bleed-through from the reverse side of the page.]

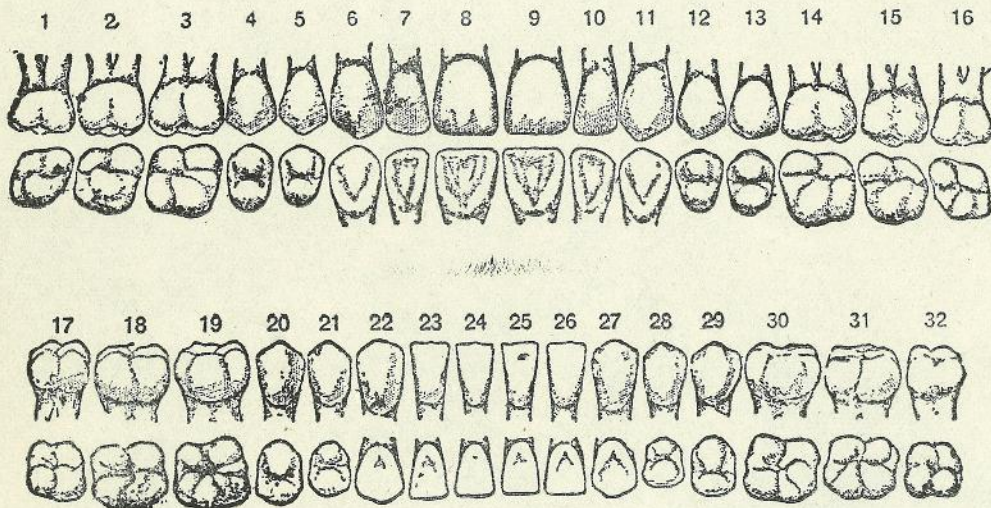
CANADIAN ARMY DENTAL CORPS, O.M.F.C. DENTAL CERTIFICATE FOR DEMOBILIZATION

DIRECTIONS TO DENTAL OFFICERS

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) BATT. H.
 REGIMENT CBRD RANK Sgt No. 724170
 Date of Examination in England 5-12-18 Date of Examination in France _____

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.



PRESENT DENTAL REQUIREMENTS

1. FILLINGS Nil

2. EXTRACTIONS Nil

3. CROWNS Nil

4. DENTURES

(a) Full Upper Nil

(b) Part Upper Nil

(c) Full Lower Nil

(d) Part Lower Nil

HAS HE EVER REFUSED DENTAL TREATMENT? _____

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)

(a) In Canada Yes

(b) In England Yes

(c) In France Yes

Signature of Dental Officer Chas H. Moore

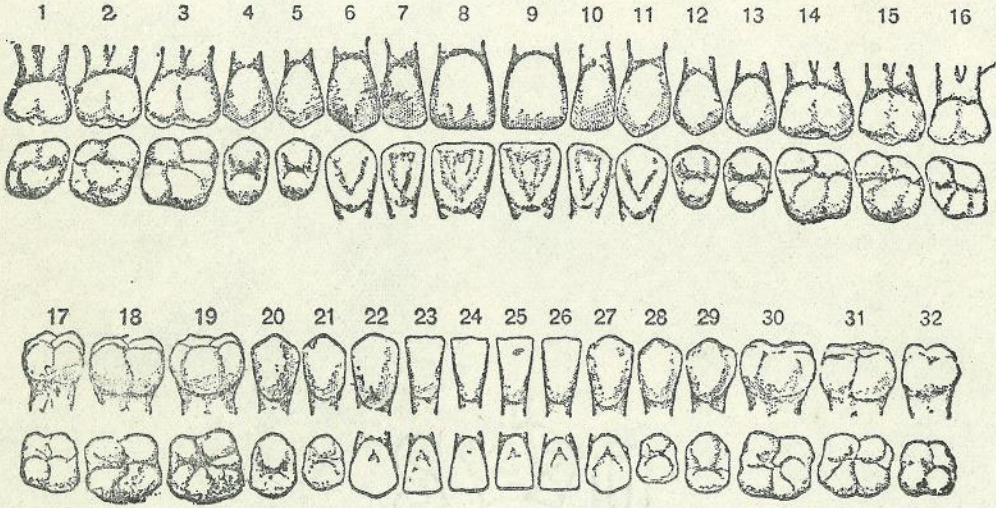
CANADIAN ARMY DENTAL CORPS, O.M.F.C. DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block Letters) Batt. Ho.
 REGIMENT 6th R.D. RANK Sapper No. 924170
 Date of Examination in England 15-12-18 Date of Examination in France _____

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.



PRESENT DENTAL REQUIREMENTS

1. FILLINGS

nil

2. EXTRACTIONS

3. CROWNS

4. DENTURES

- (a) Full Upper
- (b) Part Upper
- (c) Full Lower
- (d) Part Lower

nil

HAS HE EVER REFUSED DENTAL TREATMENT?

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)

(a) In Canada

(b) In England

Yes

(c) In France

Signature of Dental Officer

H. Cowan Capt

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT *3*

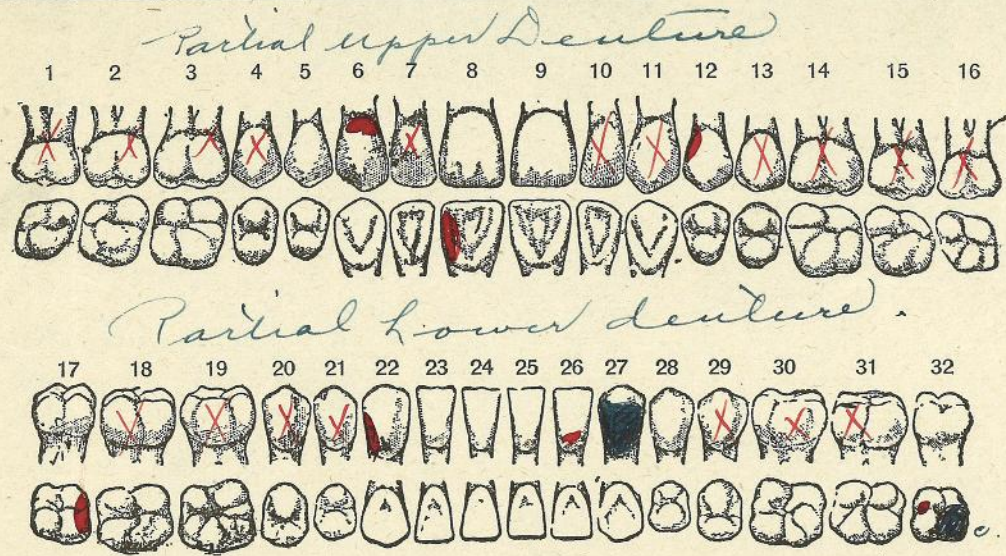
NAME OF SOLDIER *Batt J.*

REGIMENT *6th*

RANK *Pte.*

No. *724710*

No. *724710*



INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

Condition on first Examination	Date	Amalgam Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhoca	Synthetic Porcelain	Extracting	DENTURES			Gold Clasp	Gold Filling	CROWNS		Bridge Work	OPERATOR	Military District	REMARKS
											U	L	P			Gold	Porcelain				
	<i>1919.</i> <i>Apr. 14.</i>	<i>1/2</i> <i>6/8</i> <i>2/6</i>	<i>2</i> <i>17-22</i>							<i>1-2, 3, 4, 7</i> <i>10, 11, 12, 13</i> <i>14, 15, 16, 21</i> <i>28, 29, 30, 31</i>									<i>Major Simpson</i>	<i>3</i>	<i>Complete</i>
	<i>"</i> <i>14</i>		<i>2</i> <i>27-32</i>							<i>2</i> <i>upper</i> <i>lower</i>									<i>"</i>	<i>3</i>	

CASE HISTORY SHEET.

Q.U.M.H. Hospital. Kingston, Station.
No. 724170 Rank Pte. Name Batt. Harry Age 40
Unit D.D. Completed years of service ^{Where and how long} 47/12 Overseas
Date of admission Feb. 19/19. Date of discharge April 24/19.
Diagnosis Myalgia. Place of origin

CONDITION ON ADMISSION AND PROGRESS OF CASE Onset January 1917. Complaint - stiffness & soreness in muscles all over ^{body} Previous health - Quinsy & myalgia Jan. 1917. Pleurisy June 1917. Evac. from France with chronic rheumatism in 1917 (joints swelled & feverish) Health good in civil life. Present illness - Man has been in and out of Hospital ever since Jan. 1917 when he had myalgia. Pain is worse in lumbar region on movement. Gets pains in muscles of legs & arms in wet weather Right foot swells after much walking. Appetite not as good as usual. ~~xsm~~ Some loss of weight. Physical examination:- Heart - normal. Lungs - Right apex retracted a bit. No rales (old lesion) Metatarso-phalangeal joint, right., Great toe enlarged, painful & motion limited. No redness Knee joints creak on bending them.
Specialist's report on eyes as follows:- Hyperopic. OM V - 6 not improved. Plus .50 D OM to read ~~ixix~~ ¹⁸ J 4. Glasses ordered. No eye disability.

FAMILY HISTORY Negative.

(Tuberculosis, mental or nervous diseases.)

TREATMENT Massage & radiant heat, Gymnasium.

(Especially any specific or special form.)

CONDITION ON DISCHARGE Improved. Feels pretty fit at present. Discharge to (and disposal made of case.) Depot.

Date April 24/19.

A. S. Stevenson Capt. A.M.C.
Medical Officer i/c case
18515

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				
5-5-17.	OC 124 Bn.	Arrived Unit.	Field	1-5-17.	B.213 DCS 15 d/14-4-17. ⁵
8.9.17	do.	Granted 10 days Leave to	Nice	3.9.17	B.213 DO 131 d.18.9.17.
15.9.17	do.	Rejoined Unit	Field	14.9.17	B.213
21.11.17	11 C.F.A.	Myalgia Lt. Leg. adm.	11 C.F.A.	20.11.17	A.36/A.2897
		To	3 A.C.C.P.	20.11.17	
20.11.17	3 A.C.C.P.	do. Do. adm.	3 A.C.C.P.	20.11.17	A.36/B.6256
24.11.17	OC 124 Bn.	Sick evac.	Field	20.11.17	B.213
27.11.17	3 Can. Gen.	Myalgia adm.	3 Can. Gen.	27.11.17	W.3034/B.7935
29.11.17	3 A.C.C.P.	do. To	34 F.T.	27.11.17	W.3034/B.9929
4.12.17	O.S.F.T. "Princess Elizabeth"	Chs. Rheumatism To England Posted to 1st. Gen. Out. Regt. Depot, Shorncliffe		4.12.17	W.3083/4517 D.O.153 d. 20.12.17
					<i>for Lt. Col. G.D.G., Gen. Sec. G.H.Q. 3rd. Ech.</i>
11.12.17	1 C.O.R.D.	T.O.S. from 124 th Bn.	Sandling	28.11.17	DO 277
30.3.18		S.O.S. to 6. C.F.T.D.	Witley	30.3.18	DO 88
3-4-18	C.E.R.D.	T.O.S. of the C.E.R.D. Adm to Hospital.	Seaford	9-3-18	Part. II. DO. 92
					<i>W. J. P. Roberts</i>
					LIBUT RECORDS, C.O.M.
				Capt & Adj for O.C. C.E.R.D.

Casualty Form—Active Service.

Regiment or Corps.....

Rank **Sapper** Surname **Batt** Christian Name **H.**

Religion..... Age on Enlistment..... years..... months.

Enlisted (a)..... Terms of Service (a)..... Service reckons from (a).....

Date of promotion to present rank..... Date of appointment to lance rank.....

Extended { } Re-engaged { } Qualification (b).....
 or Corps Trade and Rate.....

.....Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		Embarked .. Disembarked.....			
9-4-18	C.E.R.D.	Discharged from G.S.Hosp. Buxton. Shewn on sick furlough from 3-4-18 to 13-4-18.	Seaford.	3-4-18	Pt. D.O. 97
		<i>Shewn on sick</i> Capt. & Adjt. for O.C. C.E.R.D.			
14-4-18	C.E.R.D.	Having reported from sick Furlough. Detailed to Depot Company.	Seaford	14-4-18	PT.II.DO. 103
		Lieut C.E. for O.C. C.E.R.D.			

(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) Signaller, Shoeing-Smith, &c.

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
26-4-18	C. B. P. S.	Leaves Depot Coy, Seaforth On Comm. to C. I. S. Bechhill	Seaforth	26-4-18	Pt 11. D. O. 115

W. W. W. W.
Lieut for O.C. CERD
Lieut for O.C. CERD

26-9-18	of CTS	Attach'd CTS from CERD	Bechhill	26-9-18	Pt 11 D/O 26
26-11-18	" "	Ceases to be attached on return to C. E. R. D.	"	26-11-18	" " 278

A. P. P. P.
Asst. Adjt.
Canadian Training School.

28-11-18	C. B. P.	Leave Coy CTS Bechhill Detailed Depot Coy	Seaforth	26-11-18	No 310
----------	----------	--	----------	----------	--------

16.12.18		Attached C.D.D. Buxton for 28-11-18 to 16-12-18 Ceases to be attached C.D.D. Buxton on 16-12-18			294
----------	--	--	--	--	-----

Staff Lock.
Lt. for Lt. Col.
Commanding Canadian Discharge Depot.

24-1-19		Embarked Liverpool R.M.S. <i>Symplicity</i> Eastyady #16. S. A. C. Staff			
---------	--	---	--	--	--

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				

MAR 27 1916

Staff Band
No. 724170

ATTESTATION PAPER.

No. 724170.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio.

ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... *Batt*
- 1a. What are your Christian names?..... *Harry*
- 1b. What is your present address?..... *Edwin St. Reading*
2. In what Town, Township or Parish, and in what Country were you born?..... *Randon, England*
3. What is the name of your next-of-kin?..... *Wife Ellen Batt*
4. What is the address of your next-of-kin?..... *Edwin St. Reading Ont*
- 4a. What is the relationship of your next-of-kin?..... *Wife*
5. What is the date of your birth?..... *March 1884*
6. What is your Trade or Calling?..... *Mr. Miller*
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*
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, *Harry Batt*, 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.

H. Batt (Signature of Recruit)

Date *MAR 27 1916* 191 . *W. Aseltine Lewis* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Harry Batt*, 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.

H. Batt (Signature of Recruit)

Date *MAR 27 1916* 191 . *W. Aseltine Lewis* (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 *Lindsay* this *MAR 27 1916* day of..... 191 .

J. J. Miller (Signature of Justice)

Description of Harry Batt on Enlistment.

Apparent Age.....22 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 7 3/4 ins.

Chest measurement { Girth when fully expanded.....37 1/2 ins.
 Range of expansion.....3 ins.

Small scar on outside of left fore arm

Complexion.....Fair

Eyes.....Blue

Hair.....Light Red

Religious denominations. { Church of England.....C. of E.
 Presbyterian.....
 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.....MAR 27 1916.....191

J. McCulloch Capt.
 Medical Officer
 109th Overseas Battalion, C. E. F.
 Medical Officer.

Place.....Sunday

*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.

.....Harry Batt.....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]*..... Lt. Col. (Signature of Officer)
 O. C. 109th Overseas Battalion, C. E. F.

Date.....MAR 27 1916.....191

P. 878.

Extract D.O. No.

Unit

C. E. R. D

Date:-

Reg. No.

Rank

Name

~~*A. J. S. [unclear]*~~
42nd BATT. Canada

Struck off Strength of O.M.F. of C.
on transfer to C.E.F. Canada.

Acted on

24. 1. 19

Ledger Ck.

DEPARTMENT OF VETERANS AFFAIRS

To ● Copy for H.O. File

P.A.

Ottawa, Ont.

Date..... May 18, 1965.....

Attention of

NAME BATT, Henry

SERVICE 724170 WW1
NUMBER

C.P.C. No. 123142
W.V.A. No. 16192

NAVY
ARMY XXXX
R.C.A.F.

The DEPARTMENT has received information from

.....Mrs. Catherine Batt, (widow) 10 Elgin Street, Lindsay, Ontario letter d/April 29, 1965
(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death..... April 25, 1965.....
Cause of Death.....
Place of Death..... not stated.....

Name and Address of next of kin (if known).....
.....

Copies to: W.S.R.
V. I.
~~RAM~~
~~BOX~~
H.O.

} Destroy form if advice of death already received.

E.C. Richards

for
Chief, Central Registry

PUBLIC ARCHIVES RECORDS CENTRE

War Veterans Allowance District Authority

Toronto

Address _____

Mark your reply:

For Attention of:

Head,
Reference Section,
Public Archives Records Centre,
Ottawa 3, Ontario.

Re: BATT Harry Service No. 724170
(Surname) (Christian Names)

Veteran is stated to have served during WW1 (State War or Wars)

in the following units 109 Bn

To enable this WAR VETERANS ALLOWANCE DISTRICT AUTHORITY to determine the eligibility of the above-named, will you kindly furnish the following particulars concerning his services:



1. THEATRES OF SERVICE

(1) South African War

Date and port of embarkation for S.A. _____

Date and port of disembarkation in S.A. _____

(2) World War I -- (If Canada only, state if with territorial limitations).

Canada - Britain - France
Date(s) embarked for U.K. _____

Date(s) disembarked in Canada _____

Period(s) of desertion in U.K. _____

(3) World War II -- (If Canada only, state if with territorial limitations).

Date of embarkation _____

2. Date and place of all enlistments. 27 March 1916 - Lindsay, Ont

3. Date of all discharges and reason. 29 April 1919 - Demob

4. Date and place of birth as per attestation paper. 1 March 1884 - London, Eng.

5. Marital status; if married, name in full of wife. Married - Catherine Ellen Batt

6. Any other military service. Nil

7. Decorations, if any. Nil

Change -

Head, Reference Section

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom *Wife*
Mrs. Catherine E. Batt.

Address *Elgin St.,
 Lindsay, Ont.*

Rate *\$ 15-00*

AUG 1 1916

By Whom Assigned *Batt. Harry*

Regtl. No. *724170*

Rank *Plt.*

Corps *109th Batt.*

PAYMENTS

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			
Feb.				
March				



MILITIA AND DEFENCE
ASSIGNED PAY

M. F. W. 12a.
 50m.-4-16.
 1772-39-819.

Sheet No. 2. Mrs. E. E. Batt. *Wife*
 OVERSEAS CONTINGENTS
 PAYMENTS.

Name of Soldier Batt. Harry.
Pvt.

L. L. Job 310.—Req. 6574.

424170
~~\$15.00~~

AUG 1916

109th Batt.

Month.	Year.	Cheque No.	Amt.	Remarks
April	1916			
May				
June				
July				
Aug.		D 15250	15	
Sept.		R 17353	15	
Oct.		R 22072	15	
Nov.		A 24818	15	
Dec.		A 35765	15	
Jan.	1917	B 36992	15	
Feb.		B 42662	15	15 R
March		B 49599	15	15 L
April		C 591	15	15 Ch
May		R 6305	15	
June		F 13257	15	15 Ch
July		C 19663	15	15 Ch
Aug.		F 27176	15	6
Sept.		E 33960	15	6 \$210.00 H.D.
Oct.		M 47600	15	Q
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

Handwritten initials

Handwritten initials

MILITIA AND DEFENCE
ASSIGNED PAY
 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.				

27-3-16.

MILITIA AND DEFENCE

M. F. W. 11.
15m.—3-16.
H. Q. 1772-39-818.

193.

SEPARATION ALLOWANCE

Name *Catharine E. Batt.*Name of Soldier *Batt. Harry.*Address *Edgim St.
Lindsay.
Ont.*Regtl. No. *724 170.*Rank *Plt.*Corps *109 Btt.*

Relation to Soldier

wife, child or mother

} *wife.*

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				



SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 1.

Catherine E. Patt.

PAYMENTS.

wife.

Name of Soldier

Patt. Harry.

L. L. Job 95618-M. & D. 6555.

*724170**pl.*

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	T 1482	22	✓✓
May		R 6337	20	20
June		K 7758	20	20
July		W 6128	20	20
Aug.		C 12022	20	20
Sept.		O 15716	20	20
Oct.		O 18517	20	20
Nov.		P 21433	20	20
Dec.		P 24886	20	20
Jan.	1917	M 27800	20	20
Feb.		W 31374	20	20
March		N 34520	20	20
April		O 198	20	20
May		M 3510	20	20
June		P 7068	20	20
July		O 9722	20	20
Aug.		Q 13860	20	20
Sept.		P 16008	20	20
Oct.		R 22998	20	20
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

*282**\$362.00*

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.				

Date of Enlistment

27-3-16

MILITIA AND DEFENCE

Date of Assignment

3103

Aug. 1, 1916

Separation and Assigned Pay Branch **B**

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

20	1/12/15	30 = 1/9/15
----	---------	-------------

PC 3257 P.C. 2753 M.O. 48406

RATE OF ASSIGNMENT

15		
----	--	--

ANOTHER ACCOUNT IN
Special Rem. Ledger
 Ledger
 Ledger
 Ledger

PARTICULARS OF SEPARATION ALLOWANCE

No. 724170
 Rank Pte. Promoted Reverted Discharge
 Soldier's Name Harry Batt
 Battalion 109 Bn.
 Beneficiary Catherine E. Batt,
 Relationship Wife
 Address 2554 28th St.
O.T. 2013

PARTICULARS OF ASSIGNMENT

Name Mrs. Catherine E. Batt (Wife)
 Address Elgin St. Lindsay, Ont.
 Change of Address

- 1
- 2
- 3
- 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Sep. 30/1917		362	210	572	
Oct	K-22992	20	15	35	
Nov.	M-47600	20	15	35	
Dec.	B 54514	20	15	35	m
Jan.	F 56836	20	15	35	c
Feb.	M 65468	25	15	40	
Mar	B 91967	25	15	40	
Apr	A 94299	25	15	40	
May	K 7078	25	15	40	
June	C 12454	25	15	40	
JUL	B 20712	25	15	40	
Aug	Y 33793	25	15	40	
Sep	B 32105	25	15	40	
Oct.	B 36932	25	15	40	
Nov.	B. 41909	25	15	40	
Dec.	A 58139	25	15	40	
Jan.	A 65018	45	15	60	
FEB	D 69581	30	15	45	
	D 77738	30	15	45	
		807	465	1272	

Alc Closed 28-7-19
 Ret'd per Grampian
 Date 2-2-19 M.F.W. 187 5-2-19
 Clerk cur and failed

M.D. 3.
MO-67936



M. F. W. 128
 400M-6-17-1772-89-141
 L. L. 22220-M. & D. 7588.

W.P.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No. *207*

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
------	------------	------------	------------	-------	---------

M. F. W. 128
 400M-6-17-1772-58-1141
 L. L. 22220-M. & D. 7493.

* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.
EFFECTIVE DATE: 1. 9. 16		EFFECTIVE DATE: -	
AMOUNT: 15 ⁰⁰		AMOUNT: -	

NAME: BATT, Harry
NUMBER: 724170

NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

Catherine E. Batt WIFE NR
Elgin St.
Lindsay, Ontario
Handwritten: 2/11/19

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		<u>Pt</u>

UNIT AND TRANSFERS

ORIGINAL UNIT: 109th
DATE ACCOUNT FIRST OPENED: 1. 8. 16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
<u>B092</u>	<u>2/3/18</u>	<u>4/4/18</u>	<u>124th BATTALION</u>
<u>B092</u>	<u>2/2/18</u>	<u>26/4/18</u>	<u>C. E. J. D.</u>
<u>R.R.</u>	<u>7/9/18</u>	<u>1/9/18</u>	<u>C.J.S. Beachill</u>

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
<u>9/10/18</u>	<u>720</u>	<u>Seaford</u>	<u>9 73</u>				
				<u>13/12/18</u>		<u>Ledger bal</u>	<u>\$ 47 44</u>
						<u>R.P.C</u>	<u>37.71</u>

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	<u>1</u>	<u>10</u>		

PARTICULARS OF RENDERING NON-EFFECTIVE: Dis to Canada 3/12/18 NR 103/963 12/14/18 Eng¹⁰

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
Mar 31	Balance Fwd								<u>53 74</u>		
April	Sick Pay 2/4/18 to 13/4/18 DO 91.9/4/18	<u>7 30</u>		<u>Cap.</u>				<u>15</u>			
"	Spr Pay	<u>33</u>							<u>79 04</u>		
May	Spr Pay	<u>40 30</u> <u>34 10</u>		<u>Cap.</u>				<u>15</u> <u>15</u>			
				<u>AR 14 GCSH Bunkin 2/4/18</u>	<u>48 67</u>						
				<u>NR 326 GCS Beachill 2/4/18</u>	<u>4 87</u>						
				<u>NR 444 C.J.S. 14/5/18</u>	<u>4 87</u>				<u>39 73</u>		
June	Spr Pay	<u>34 10</u> <u>33</u>		<u>Cap.</u>				<u>15</u> <u>15</u>			
				<u>DR 621 C.S.</u>	<u>28 5</u>	<u>9 73</u>					
				<u>" " 927 "</u>	<u>11 6</u>	<u>4 87</u>					
				<u>" " 804 "</u>	<u>12 6</u>	<u>61</u>					
				<u>" " 1083 C.S.</u>	<u>25 6</u>	<u>9 73</u>			<u>32 79</u>		
		<u>33</u>						<u>15</u>			
July	Pay	<u>34 10</u>		<u>Cap.</u>				<u>15</u>			
				<u>DR 1336 C.S.</u>	<u>13 7</u>	<u>4 87</u>					
				<u>" " 1455 C.S.</u>	<u>27 7</u>	<u>9 73</u>			<u>37 29</u>		
		<u>34 10</u>						<u>15</u>			
Aug		<u>34 10</u>		<u>C.A.P.</u>				<u>15</u>			
				<u>DR 1814 14 8 1/2 "</u>	<u>5</u>	<u>4 87</u>					

*banada
24/11/19*

UNIT AND TRANSFERS

ORIGINAL UNIT:- *109th*
DATE ACCOUNT FIRST OPENED:- *1.8.16*

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
<i>B092</i>	<i>2/3/18</i>	<i>4/4/18</i>	<i>124th BATTALION</i>
<i>B092</i>	<i>2/3/18</i>	<i>26/4/18</i>	<i>C. E. J. D.</i>
<i>R.R.</i>	<i>7/9/18</i>	<i>11/9/18</i>	<i>C.P. Beehill</i>

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
<i>9/2/18</i>	<i>720</i>	<i>Seaford</i>	<i>9 73</i>	<i>13/12/18</i>		<i>Ledger bal</i>	<i>\$ 47 44</i>
						<i>R.P.C</i>	<i>37 71</i>

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	<i>1</i>	<i>10</i>		

PARTICULARS OF RENDERING NON-EFFECTIVE:- *Dis to banada. 3/12/18. NR 113/963. 12/1/18. Eng 10*

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
<i>Feb 31</i>	<i>Balance Fwd</i>								<i>53 74</i>		
<i>April</i>	<i>Sick Pay. 3/4/18 to 13/4/18. DO. 91. 9/4/18</i>	<i>7 30</i>		<i>Cap.</i>				<i>15</i>			
<i>"</i>	<i>Spr Pay</i>	<i>33</i>							<i>79 04</i>		
<i>May</i>	<i>Spr Pay</i>	<i>40 30</i>		<i>Cap.</i>				<i>15</i>			
		<i>34 10</i>		<i>DR 326. C.S. Beehill 29/4</i>	<i>4 87</i>						
				<i>NR. 444 C.S. 14/3/18</i>	<i>4 87</i>				<i>39 73</i>		
<i>June</i>	<i>Spr Pay</i>	<i>34 10</i>		<i>Cap</i>	<i>58 41</i>			<i>15</i>			
		<i>33</i>		<i>DR 621 C.S. 28/5</i>	<i>9 73</i>						
				<i>" " 927 "</i>	<i>11 6</i>	<i>4 87</i>					
				<i>" " 804 "</i>	<i>12 6</i>	<i>61</i>					
				<i>" " 1083. C.S. 25/6</i>	<i>9 73</i>				<i>32 79</i>		
		<i>33</i>			<i>24 94</i>			<i>15</i>			
<i>July</i>	<i>Pay</i>	<i>34 10</i>		<i>Cap</i>				<i>15</i>			
				<i>DR. 1336 C.S. 13/7</i>	<i>4 87</i>						
				<i>" " 1455 C.S. 27/7</i>	<i>9 73</i>				<i>37 29</i>		
		<i>34 10</i>			<i>14 60</i>			<i>15</i>			
<i>Aug</i>		<i>34 10</i>		<i>C.A.P.</i>				<i>15</i>			
				<i>% N 1814. 14 7/8</i>	<i>5 4 87</i>						
				<i>% N 2013. 29 7/8</i>	<i>7 14 60</i>				<i>36 92</i>		
		<i>34 10</i>			<i>19 47</i>			<i>15</i>			
<i>Sep</i>	<i>PP</i>	<i>33</i>		<i>2538 13/9/18 C.T.S.</i>	<i>4 87</i>			<i>15</i>			
				<i>2879 24/9/18</i>	<i>9 73</i>						
				<i>2942 27/9/18</i>	<i>4 2</i>				<i>39 90</i>		<i>PR50 OK.</i>
		<i>33 50</i>			<i>15 02</i>			<i>15 00</i>			
<i>Oct</i>	<i>PP</i>	<i>34 10</i>		<i>C.A.P.</i>				<i>15</i>	<i>59 00</i>		
				<i>(17) 3104 15-10-18 C.T.S.</i>	<i>9 73</i>				<i>49 27</i>		
				<i>(29) 3344 28-10-18 "</i>	<i>24 33</i>				<i>24 94</i>		
		<i>34 10</i>			<i>34 06</i>			<i>15</i>			

NUMBER 724170 RANK

NAME B A T T

H

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	RATION
				Forward					24 94		
Nov.	P.P.	33		b.a.p.				15	42 94		
				⑧ 3511 15-11-18 b.T.S.	4 87				38 07		
				⑮ 3707 25-11-18 "	9 73				28 34		
Dec	PP	34 10		b.a.p.				15	47 44		
				66 720 9-12-18 Deputy Y.	14 60				37 71		
		67 10			9 73						
					24 33			30			
Feb				8536 7-1-19 b.D.Denon mtl	9 73				27 98		
				6837 23-12-18. " "	4 87				23 11		
					14 60						

8536	7-1-19	6 D Denmouth	9 73
6837	23-12-18	" "	4 87
			14 60

27 98
23 11

34.06
 14 60
 9.73

 58 39

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom *Mr. E. Batt* | By Whom Assigned *Batt, N.*
 Address *Box 1031* | Regtl. No. *724170*
Leidsay | Rank *Plt.*
Ont. | Corps *124th Bn.*
 Rate *\$ 50⁰⁰*

SPECIAL REMITTANCE

P523, D-112 2.4.18. PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April		<i>Z 657</i>	<i>50 -</i>	<i>Mailed 26, 4, 18.</i>
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

MARRIED OR SINGLE, *Married*
 PLACE OF BIRTH *London Eng.*
 NAME AND ADDRESS OF NEXT OF KIN *Catherine Ellen. Bath*
Lindsay Out
 RELATIONSHIP OF NEXT OF KIN *Wife*
 NAME AND ADDRESS OF NEXT OF KIN
 RELATIONSHIP OF NEXT OF KIN
 SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)
 PAYABLE TO
 RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.		
PARTICULARS	EFFECTIVE DATE	AUTHORITY

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

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1		2		3				
			\$	c.			\$	c.			\$	c.				No.	DATE	No.	DATE	No.	DATE			
<i>July 31</i>														3	10	3	10							
<i>Aug 31</i>	31	1 ⁰⁰	31		31	10	3	10							34	10	4	98	16					
<i>Sept</i>	30		30				3								33		37	31-8-16	68	15-9-16	37	31-8-16		
<i>Oct</i>	31		31		31		3	10							34	10	108	30-9-16	146	15-10-16	108	30-9-16		
<i>Nov</i>	30		30		30		3								33		176	30-10-16						
<i>Dec 1917</i>	31		31				3	10							34	10	222	30-11-16						
<i>Jan 1918</i>	20	1 ¹⁰	22												22									
<i>Jan</i>	11	1 ¹⁰	12	10											12	10	436	15-1-17	472	31-1				
<i>Feb</i>	28	1 ⁰⁰	30	80											30	80	537	15-2	593	26-2				
<i>Mar</i>	31		34	10											34	10							804	23-15-17
<i>Apr</i>	30		33												33									
<i>May</i>	31		34	10											34	10	135	5-5					344	24-4
<i>June</i>	30		33												33		207	4-6					344	"
			367	40											3	10	370	50						

ONS, &c.
 EFFECTIVE DATE
 AUTHORITY

REG'L. No. *724170* RANK *Pte* NAME *Bath Harry*
 IF IN PERMT. CORPS | UNIT *109th Bn* TRANSFERRED TO *124th Cn.* DATE *21-1-17* AUTHORITY *10343 8.12.16.*
 PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY
 PLACE OF ATTESTATION *Lindsay Ont* TRANSFERRED TO DATE AUTHORITY
 DATE OF ATTESTATION *Mar 29th 1916* TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY \$ *15⁰⁰/₁₀₀* DATE EFFECTIVE *Aug 1/16*
 PAYABLE TO *Catherine Ellen Bath Lindsay Ont* RELATIONSHIP *Wife*
Elgin St as per 13340. Effect 1/4/17

ITAL, &c.
 NAME OF HOSPITAL
 STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON
 DISCHARGE DATE AND PLACE REASON AND AUTHORITY
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)
 ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE
 PAYABLE TO RELATIONSHIP
 STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON
 DISCHARGE DATE AND PLACE REASON AND AUTHORITY
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)
 ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

QUITTANCE ROLLS
 2 3 4
 DATE NO. DATE NO. DATE

CASH PAYMENTS					ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
1	2	3	4	CREDIT				DEBIT				
<i>Bal. from Canada</i>								<i>310</i>				
	<i>973</i>				<i>15</i>		<i>2473</i>	<i>1247</i>				
<i>15.9.16</i>	<i>730</i>	<i>730</i>			<i>15</i>		<i>2960</i>	<i>1587</i>				
<i>31.8.16</i>	<i>487</i>	<i>730</i>			<i>15</i>		<i>2717</i>	<i>2280</i>				
<i>15/10/16</i>	<i>973</i>				<i>15</i>		<i>2473</i>	<i>3107</i>				
	<i>487</i>				<i>15</i>		<i>2717</i>	<i>38</i>				
					<i>15</i>		<i>15</i>	<i>45</i>				<i>10343-8.12.16</i>
<i>3/11</i>	<i>487</i>	<i>1460</i>					<i>1947</i>	<i>3763</i>				
<i>26/12</i>	<i>486</i>	<i>973</i>			<i>15</i>		<i>2959</i>	<i>3884</i>				
<i>804 27/12/16</i>			<i>17 03</i>									
<i>385 27/12</i>			<i>21 90</i>		<i>15</i>		<i>5393</i>	<i>19 01</i>		<input checked="" type="checkbox"/>		<i>8/11. 12th Pm.</i>
	<i>26</i>				<i>15</i>		<i>15</i>	<i>37 01</i>		<input checked="" type="checkbox"/>		
<i>344 24/4</i>	<i>268</i>		<i>4 36</i>		<i>15</i>		<i>2640</i>	<i>44 71</i>				
<i>344 "</i>			<i>4 36</i>									
	<i>268</i>				<i>15</i>		<i>2036</i>	<i>57 35</i>		<input checked="" type="checkbox"/>		
	<i>268</i>											
	<i>61 57</i>	<i>38 93</i>	<i>47 65</i>		<i>165</i>		<i>313 15</i>					

#724170

Private, Batt. Harry.

a/10

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS					
	NO. OF DAYS	RATE	AMOUNT \$	C.	NO. OF DAYS	RATE				AMOUNT \$	C.	NO.	DATE	NO.	DATE	NO.	DATE	NO.	DATE
1917																			
Forward			367	40					3 10	370 50						61 57	38 93	47 65	
July	31	1 ⁰⁰ / ₁₀	34	10						34 10							2 67		
Aug	31		34	10						34 10	267 18/6						268		
Sept	30		33							33	466 4/8 298 16/9	538 18/8	466 4/8	24/9 44/91			267	268	17 84

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SER. ALLOC. ENG.	MONTH	PARTICULARS	CR. 1	CR. 2
									79 66						
Oct	P/Pay	34 10	113 76	ban 2/2				15 00							
				A/R 2267 3/9 + 15 Sept	53 53				45 23						
Nov	"	34 10	33	ban a/Pay				15 00							
Dec		34 10		A/R 744 5/10	3 57										
				" 477 17/9	2 68										
				" 808 18/10	4 46										
					10 71				71 62						
Jan		34 10		cap											
									15 90 72						
									15						
Feb		30 80		cap											
				3864 29/1 let.	2 43				104 09						
					2 43				15						
Mar		34 10		cap											
				A/R 3121 15/1 balt	9 73										
				4181 18/2 balt	2 43										
				4487 5/3 balt	2 43										
				4574 14/3 balt	2 43										
				GR 17/3 62369	50 00										
				4810 28/3 let	2 43										
					69 45				15 53 74						

a/Pay 15⁰⁰

PAYMENTS		ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
3	4				CREDIT	DEBIT			
3	47 65	165		313 15	57 35		Nil	57 35	
7		15		17 47	73 78		"	73 78	
		15		17 68	90 20		"	90 20	
	17 84	15		43 54	79 66 ✓				

CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER- REQ. PAY	SEP. ALLCE. ENG.
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