

Guthrie, 6K PG

Staff

ATTESTATION PAPER.

109th OVERSEAS BATTALION, C. E. F.

No. *724015*

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... *Crane*
- 1a. What are your Christian names?..... *Arthur Patrick*
- 1b. What is your present address?..... *97 Neil St. Ottawa*
- 2. In what Town, Township or Parish, and in what Country were you born?..... *Chatham, England*
- 3. What is the name of your next-of-kin?..... ~~*Mr. Harry Crane*~~ *Mrs. Mary Crane*
- 4. What is the address of your next-of-kin?..... ~~*77th Battalion, Ottawa*~~ *31 Castle Rd. Luton, Chatham Kent, Eng.*
- 4a. What is the relationship of your next-of-kin?..... *Grandmother*
- 5. What is the date of your birth?..... *March 8th 1897*
- 6. What is your Trade or Calling?..... *Writer*
- 7. Are you married?..... *No*
- 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 P. Crane*, 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 *Feb 12th 1916* *A. P. Crane* (Signature of Recruit)
W. H. Roanick Lt (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Arthur P. Crane*, 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 *Feb 12th 1916* *A. P. Crane* (Signature of Recruit)
W. H. Roanick Lt (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 *Quincy* this *12* day of *February* 191*6*
J. J. Glass (Signature of Justice)

6
OK

Description of Arthur Patrick Crane Enlistment.

Apparent Age.....18.....years11.....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. 6 ins.

Chest measurement. { Girth when fully expanded.....36 ins.
 Range of expansion.....3 ins.

Complexion.....Fair

Eyes.....Blue

Hair.....Dark Brown

None.

Religious denominations. { Church of England.....
 Presbyterian.....
 Methodist.....
 Baptist or Congregationalist.....
 Roman Catholic.....RC
 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 Overseas Expeditionary Force.

Date.....February 12 1916.

Place.....Lindsay

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

*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 Patrick Crane.....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. H. Boyd Lt. Col. (Signature of Officer)
 O. C. 109th Overseas Battalion, C. E. F.

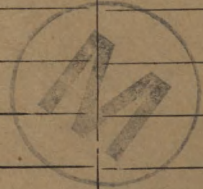
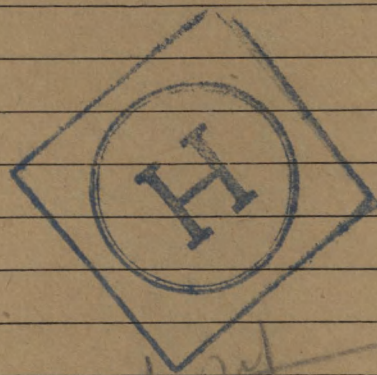
Date.....FEB 12 1916.....1916

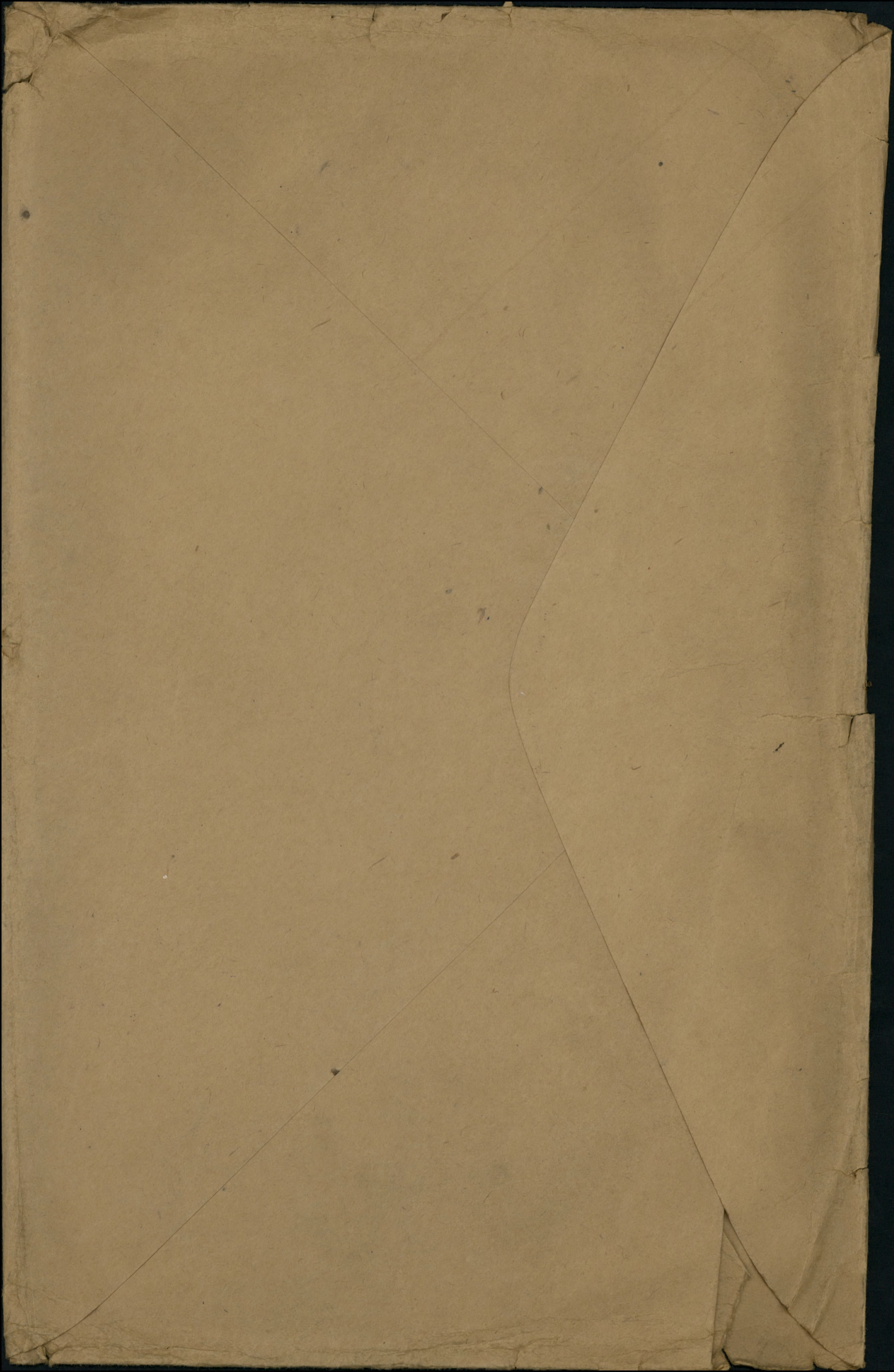
REGIMENTAL DOCUMENTS

NAME C. CRANE ARTHUR PATRICK REGT. NO. 724015 UNIT 109th Bn. H. Q. FILE NO. _____



CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)	<i>18/1/19</i>				DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)				43105	Category
TRAINING HISTORY SHEET (M.F.W. 113)					
2 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
1 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					Category <i>Demob</i>
1 MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
MEDICAL EXAMINATION (M.F.W. 129)					
1 TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
1 LAST PAY CERTIFICATE (M.F.W. 44)					
1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
2 <i>2001232</i>	<i>18/1/19</i>				
1 <i>107B.181</i>					
9 <i>1/22</i>					
1 <i>1/44</i>					
4 <i>1/15</i>					
1 <i>1/15</i>					
1 <i>1/17</i>					
1 <i>1/17</i>					





War Veterans Allowance

Name: *Arthur Patrick Crane.*

No: *724015*

1. THEATRES OF SERVICE

(1) South African War

Date and port of disembarkation:

(2) World War I *Canada U.K.*

IF CANADA) Date(s) disembarked in U.K. *31 July 1916.*
AND) Date(s) S.O.S. in U.K. ~~for Canada~~ *20 October 1919.*
U.K. ONLY) Period(s) of desertion in U.K.

(3) World War II

Date of embarkation:

(4) Korean War

Date of embarkation:

2. Date and place of all enlistments:

10 February 1916. Lindsay. Ont.

3. Date of all discharges and reason:

20 October 1919. Demob.

4. Date and place of birth as per attestation paper:

8 March 1897. Chatham. Eng.

5. Marital status: If married, name in full of wife:

Single

6. Any other military service:

Nil

7. Decorations, if any.

Nil

Clerk's Initials:

*#8 Ottawa
2/10/58*

1. THEATRE OF SERVICE

(1) World War I

Date and port of disembarkation:

(2) World War II

(Date(s) disembarked in U.K.)

IN CANADA ()

(Date(s) S.I.C.S. in U.K. for Canada)

OR ()

(Period(s) of description in U.K.)

(3) World War II

Date of embarkation:

(4) World War II

Date of embarkation:

2. Date and place of all engagements:

3. Date of all discharges and reasons:

4. Date and place of birth as per
attestations papers

5. Military service: If awarded
cite in full of citation

6. Any other military service:

7. Remarks: If any

8. Officer's initials:

Rank _____ Name **CRANE, ARTHUR. PATRICK.** Reg. No. **724015.**
 Unit **109th Bn.** If in Perm. Corps }
 What Unit? }
 Married or Single **Single**
 Place and Date of Enlistment **Lindsay, 12th Feb. 1916.** Place of Birth **Chatham**
England.
 Name and Address, Next-of-Kin **MRS. MARY. CRANE.**
31 Castle Rd. Luton. Relationship **Grandmother**
Chatham Kent
 Assigned Pay Monthly, \$ _____ Payable to **England.** Relationship **9241**
PAE
 Separation Allowance, \$ _____ Payable to _____ Relationship **X 235**
 Relationship _____

Discharge, Date and Place Reason Character

CANADIAN PRINTING AND STATIONERY SERVICES, LONDON

2nd SHEET OF RECORDS.

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.				
26.6.19	5 Wing	Declared by Court of Inquiry to have illegally absent since 23.5.19. and to have deficiencies in his kit & equipment to the amount of one pound two shillings & ten pence (£1.2.10) & is S.O.S. with effect 18.6.18. Forfeits 27 days Pay & Allowances & is placed under stoppage of £1.2.10.	Spr.	18.6.18	DO87
24.7.19	R Wing	S.O.S. to H. Wing Pending R.T. Canada with dependants		23.7.19	Amended to read SOS to M Wing. DO.99.d/4 th of R Wing. W090
21.7.19	"	TOS pending R.T.C.	Rhyl Pte.	21.7.19	Do 87
8.8.19	M. Wing	AW.L.15.45.25.7.19 to 11.55.26.7.19 (1 day) Admonished. Forfeits 1 days pay under PTA Regs Can.	Witley Pte.	26.7.19	DO120

724015 Crane Arthur Patrick

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.				
9.8.19	M Wing	TOS pending R.T.C.	Witley Pto.	8-8-19	DO 121.
21-7-19	C.F.C.	T.O.S.	"	17-7-19	DO 202.
21-7-19	C.F.C.	S.O.S. to R. Wing.	"	20-7-19	DO 202.
28-8-19	CFCD	TOS from ^M R Wing Forfeits 4 days Pay P+AR	✓ ✓	27-8-19	- 240
16-8-19	✓	Forfeits 4 days Pay - AWL	✓ ✓	31-7-19	- 228
16.9.19	CD	TOS	Buxton ✓	16.9.19	- 215 & CFCD of 255 of 12/19
26-8-19	M Wing	SOS to R Wing	Witley Pto	26-8-19	DO 138
11.9.19	CFCD	Awd 33 days forfeiture of pay P+AR for AWL 23.5.19 to 25.6.19	✓ ✓		- 254.
20.10.19	CD	o/c 2nd CD pending dis in B.I.	Buxton ✓	20.10.19	- 244
21.10.19	2 CD	on off Command	London	20.10.19	- 2
3-11-19	1 bDD	bears o/c. 2 nd bDD & SOS on disc. in B. Isles.	Buxton	20-10-19	DO 256. (NR. 954)

Rank _____ Name **CRANE, Arthur Patrick** ✓ Reg'l No. **724015.** ✓
 Unit **109th Bn.** If in perm. Corps, }
 What Unit? } Married or Single **Single.** ✓
 Place and Date of Enlistment **Lindsay 12th Feb. 1916** ✓ Place of Birth **Chatham. England.** ✓
 Name and Address, Next-of-Kin ~~Mr. Harry Crane~~ **Mrs. Mary Crane**
31 Castle Rd., Luton Chatham Kent Eng. Relationship **Grandmother** ✓
~~77th Battalion. Ottawa.~~ ✓
 Assigned Pay Monthly \$ _____ Payable to _____ Relationship _____
 Separation Allowance \$ _____ Payable to _____ Relationship _____

Discharge, Date and Place

Reason

Character

H. W. & V., Ld.—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.				
	C.				
		Arrived in England per H. M. T. 2810 Aldershot		31-7-16	
26-9-16	109 th Bn	Admitted to Shortmill Iscol. Hosp	Bramshott	25-9-16	Measles. P.I. D.O. 270. C.L. 17
10-10-16	do	Discharged from Hospital	Aldershot	9-10-16	C.L. 19 D.O. 285
8-12-16	do	S.O. transferred to 124 th Bn.	Witley	8-12-16	P.I. D.O. 343
9-12-16	do	Obtained 100 th Bn. from 109 th	"	"	" E. 65.
1-2-17		Transferred to 124 th Bn.	"	1-2-17	" 32.
9-2-17	C.F.C.	T.O.S. from 124 th Bn.	London	1-2-17	" 35.
10-5-17	"	Adm. King George Hosp London	do	3-5-17	C.L. 87, P.I. D.O. 4 (73 Nov.)
12-5-17	H.R.	On strength	"	1-5-17	plus 1.
23-5-17	"	Trans. to C.C. H. Bromley.	"	17-5-17	Ch. 95.
23-5-17	C.F.C. H.Q.	Dis. from Hosp. Bromley.	"	21-5-17	P.I. D.O. 10. Trav. Manual.

R139
5-28

C.F.C.

Misc

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.				
4.7.17	HQ, C.F.C.	S.O.S. to C.F.C. Dist No 3 (Colg)	London	4.7.17	Dist # 3 C.F.C. Pr II D.O. 45. Pr II D.O. 57/17
2.8.17	Dist 3.	S.O.S. to Base Depot.	"	2.8.17	Pr II D.O. 80.
6.9.17	C.F.C. 9L	Dis. from C. Const Hoop.	Bromley.	21.5.17	Christ. C. 9. Increased Pay and Can't claim.
10.8.17.	" B.D.	T.O.S. from Dist. 3.	S. Dale.	6.8.17	Pr II D.O. 90.
4.12.17	"	Christ. Adm. C. Hoop. [unclear] to [unclear]	[unclear]	30.11.17	Christ C. 79 v. D. 9.
23.2.18	" B.D.	S.O.S. to Dist. 54	St. Dale.	21.2.18	Pr II D.O. 47
28.2.18	" Dist 54.	T.O.S. from B. Depot.	Pr II Hampton	21.2.18	" D.O. 9
6.12.18	BDCFC.	F.O.S. from 54 Dist.	" Sdale	5.12.18	" 291 (154 Dist. C.F.C. Pr II 55 d/12/18)
14.12.18	"	S.O.S. to 53 Dist.	" "	13.12.18	" 298 (153 Dist. C.F.C. No 53 d/20/18)
7.2.19	"	Awarded 28 days F.P. Forfeits 6 days pay	✓ Egham	15.1.19	✓ 5
14.2.19	53 Dist exc	S.O.S. to Pr II C.F.C.	✓ Sdale	7.2.19	✓ 6. Pr II 50 d/19.2.19 BDCFC 709
✓	✓	Placed on restricted pay.	✓ Egham	1-2-19	- 6
28.2.19	BDCFC	eos to ccc Rhyd Dist-5	- Sdale	22-2-19	✓ 59.
25-3-19.	S.M.C.W. per Cadre.	JOS of smocw per Cadre	✓ Rhyd	22-3-19.	- 14.
1-5-19.	S.M.C.Wing.	WOAS. A.W.L. from 10.30 hrs. 24-4-19 to 10.00 hrs. 26-4-19. (47 hrs 30 mins) Awarded 4 days F.P. Forfeits 2 days pay under R.A. Regs Can. Auth. A.F.D. 281 d/30-4-19.		30-4-19	DO 42.

SERVICE AND CASUALTY FORM (Part I).

Army Form B.103—I.
Part I.

Army Form B. 103 (II.) to be gummed on here, if required.

Nothing to be written in this margin.

Forms/B. 103/3

HWV(R1460)

3/19 HWV(R1460)

100,000 3/19

(6 28 19)

<p>(1)*Substantive rank <i>Plt</i></p> <p>*Acting rank *(To be entered in pencil to facilitate alteration.)</p> <p>(4) Surname <i>Crane</i></p> <p>(5) Christian Names <i>Arthur Patrick</i></p> <p>(6) Army Form, number of, Attestation } Form or Record of Service paper }</p> <p>(7) Whether of British or of Alien origin (<i>vide</i> A.C.I. 578 of 1918)</p> <p>(8) Date of birth as stated on enlistment</p> <p>(9) (a)</p>	<p>(2) Regiment or Corps</p> <p style="font-size: 2em; text-align: center;"><i>109th Bn</i></p>	<p>(3) Regtl. No.</p> <p style="font-size: 2em; text-align: center;"><i>724015</i></p>		
<p>(10) Enlistment (b)</p> <p>(11) Engagement (c)</p> <p>(12) Service reckons from (<i>date</i>)</p> <p>(13) Special conditions (if any) of enlistment (d)</p> <p>(14) Any subsequent variations (if any) } of conditions of service }</p>				
<p>(Authority) (date)</p>		<p>Initials and Rank of an Officer.</p>		
<p>(15) Category</p>	<p>Date</p>	<p>Medical Authority</p>	<p>Initials and Rank of an Officer</p>	<p>(16) Record of Occupation in Civil life (<i>vide</i> Army Order 93 of 1917)</p> <p>Industrial Group No.</p> <p>Trade or Calling</p> <p>Married or Single</p> <p>Particulars of Trade Test</p> <p>Occupation Cards despatched on (<i>date</i>)</p> <p>Second Occupation Card despatched on (<i>date</i>)</p>
<p>(17) Next of Kin</p> <p>(18) Demobilizer (<i>f</i>) (Place)</p> <p>(19) Pivotal-man (<i>f</i>) (Date)</p> <p>(20) Qualifications (<i>g</i>) or (21) Corps trade and rate</p> <p>(22) Extended { (23) Re-engaged {</p> <p>(24) Miscellaneous entries:—</p>				

Signature of
Posting Officer

NOTES.—(a) Here enter particulars of any subsequent claim as to actual age after verification by birth certificate (*vide* A.C.I. 470 of 1918). (b) Whether direct or voluntary enlistment, or called up under the Military Service Acts. (c) Whether for specified term of years or for duration of the war. (d) Whether "for Home Service only," or "not to be transferred without the soldier's consent," &c. (e) If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. (f) Required for demobilization purposes. (g) Signaller, Shoing-smith, &c.

"M" MINC. 6

(A) Report		(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
Date	From whom received					
26.9.16	109 ^d Bn		Arrived in England adm to Thornhill ^{adldshot} Sol Hosp BShot		31.7.16	Her HMT 2810
10.10.16	do		Discharged from Hosp Aldershot		25.9.16	PEII 80270 CL17
8.12.16	do		SOS on trans to 124 ^d Bn Wisley		9.10.16	CL19. 80285
9.12.16	OC 124 ^d		TOS from 109 ^d	"	8.12.16	PEII 80343
1.2.17	"		Yfd to Can For Corp	"	"	265.
9.2.17	CFC		TOS from 124 th Bn London		1.2.17	32
10.5.17	"		adm King George Hosp London	"	1.2.17	35
12.5.17	HQ "		on strength	"	3.5.17	CL87 PEII 04
23.5.17	"		Trans to CCH Bromley	"	1.5.17	PEII 1.
23.5.17	CFC HQ		Dis from Hosp Bromley	"	17.5.17	CL95.
4.7.17	" "		SOS to CFC Dist No 3 (Codi)	"	21.5.17	PEII 8010
2.8.17	Dist 3		SOS to Base Depot	"	4.7.17	PEII 8045 ^{PEII 80} 5.7.17.
6.9.17	CFC C/C		Dis from C Conr Hosp Bromley		2.8.17	PEII 8080
10.8.17	" BD		TOS from Dist 3	Sdale	21.5.17	CLC3
4.12.17	" C Link		adm C Hosp Elchinghill Lyminge		6.8.17	PEII 8090.
23.2.18	" BDC		SOS to Dist 54 Pte Sdale		30.11.17	CLC79
28.2.18	" Dist 54		TOS from B Depot "	S Hampton	21.2.18	PEII 8047
6.12.18	BDC CFC		TOS from 54 Dist	Sdale	21.2.18	809 ^{54 Dist CFC} ^{PEII 55} 12.12.18.
14.12.18	"		SOS to 53 Dist	"	6.12.18	299 ^{53 Dist CFC} ^{PEII 53} 2/20 17/8
7.2.19	"		awarded 28 day FP	Egham	13.12.18	298
			Forfeits 6 days pay		15.1.19	5
14.7.19	53 Dist CFC		SOS to BDC CFC	Sdale	7.2.19	6 (PEII 050 a/19.2.19 BDC CFC TOS)
			Placed on restricted pay	Egham	1.2.19	6

Nothing to be written in this margin

SERVICE AND CASUALTY FORM (Part I).

Army Form B.103—L
Part I.

Army Form B. 103 (II.) to be gummed on here, if required.

Nothing to be written in this margin.

Forms/B. 103/8

HWV(R1460)

3/19

100,000

P2151

(6 28 19) W10416—

(1)*Substantive rank <i>Pte</i> *Acting rank *(To be entered in pencil to facilitate alteration.) (4) Surname <i>Crane</i> (5) Christian Names <i>Arthur Patrick</i> (6) Army Form, number of, Attestation } Form or Record of Service paper } (7) Whether of British or of Alien origin (<i>vide</i> A.C.I. 578 of 1918) (8) Date of birth as stated on enlistment (9) (a)	(2) Regiment or Corps <i>109th Bn</i>	(3) Regtl. No. <i>Y 24015</i>
--	--	--------------------------------------

(10) Enlistment (<i>b</i>)	(11) Engagement (<i>c</i>)
(12) Service reckons from (<i>date</i>)	(13) Special conditions (if any) of enlistment (<i>d</i>)
(14) Any subsequent variations (if any) } of conditions of service }	

(Authority)

(*date*)

Initials and Rank of
an Officer.

(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) Record of Occupation in Civil life (<i>vide</i> Army Order 93 of 1917)
				Industrial Group No.
				Trade or Calling
				Married or Single
				Particulars of Trade Test
				Occupation Cards despatched on (<i>date</i>)
				Second Occupation Card despatched on (<i>date</i>)

(17) Next of Kin	
(18) Demobilizer (<i>f</i>)	(Place)
(19) Pivotal-man (<i>f</i>)	(Date)
(20) Qualifications (<i>g</i>)	or (21) Corps trade and rate
(22) Extended {	(23) Re-engaged {
(24) Miscellaneous entries :—	

NOTES.—(a) Here enter particulars of any subsequent claim as to actual age after verification by birth certificate (*vide* A.C.I. 470 of 1918). (b) Whether direct or voluntary enlistment, or called up under the Military Service Acts. (c) Whether for specified term of years or for duration of the war. (d) Whether “for Home Service only,” or “not to be transferred without the soldier’s consent.” &c. (e) If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. (f) Required for demobilization purposes. (g) Signaller, Shoering-smith, &c.

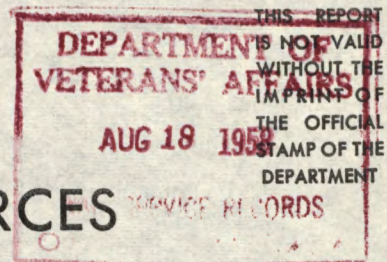
(A) Report		(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
Date	From whom received					
28.2.19	BACFC		SOS to ccc Rhyl Dist 5	S. Dale	22.2.19	- 59
25.3.19	SMDC W per cadre		TOS of 5MDC upper Cadre	Rhyl	1.2.19	- 14
1.5.19	SMDC Wing		was a WL from 10.30 hrs 24.4.19 to 10.00 hrs 26.4.19. (47 hrs 30 mins) Awarded 7 days SFP [#] Forfeits 2 days pay under R A Reg Can and AFD 281 d/30.4.19.			
			7.05 C.C.C. Kinmel Park for return to Canada. Part II Orders No. 20.14-25/3/19 - 11/2/19 C.C.C. Kinmel Park on ing for Canada, Part II Order No. _____			
			Commanding _____ Wing, Kinmel Park Camp.			
16.9.19	T.O.S.		C.D.D. Buxton for return to Canada, Part II Order No. 215.			
	S.G.S.		C.D.D. Buxton as proceeding to Canada, Part II Order No. 244			
20.10.19			On command to 2 CO. London pending discharge in the UK DISCHARGED IN ENGLAND, K.R. & O. PAR. 392, SEC. XXV.			
			<i>[Signature]</i> Captain Officer Commanding No. 2 Canadian Discharge Dept.			
			<i>[Signature]</i> CAPT. For OFFICER COMMANDING CANADIAN DISCHARGE DEPOT.			

Nothing to be written in this margin.



RECORD OF SERVICE
IN THE

CANADIAN ARMED FORCES



Service Rank and/or Number 724015 Name Arthur Patrick CRANE

- 1. Branch of Service: **CANADIAN EXPEDITIONARY FORCE**
- 2. Date and Place of Birth: **8th March, 1897** **Chatham, England.**
- 3. Date and Place of Appointment, Enlistment or Enrolment: **10th February, 1916** **M.D. 3**
- 4. Unit on Appointment, Enlistment, or Enrolment: **109th Battalion**
- 5. Theatres of Service: **CANADA - ENGLAND**
- 6. Date and Place of Retirement or Discharge: **20th October, 1919** **England.**
- 7. Reason for Retirement or Discharge: **"Demobilization"**
- 8. Rank on Retirement or Discharge: **Private**
- 9. Medals and Decorations: **BRITISH WAR MEDAL**
- 10. Remarks: **NIL**

136 Gloucester St. Ottawa, Ont

DESCRIPTION AT TIME OF RETIREMENT OR DISCHARGE

Sex: Male Height: 5 Feet 8 Inches.
 Eyes: Blue Hair: Brown Complexion: Medium
 Marks or Scars: Scar left side of chin.

Ottawa, Ont., Canada
August 18th, 19⁵⁸

for file
Director, War Service Records

DEPARTMENT OF
VETERAN AFFAIRS
AUG 18 1958

RECEIVED SERVICE

CANADIAN ARMY MEDICAL CORPS

DESCRIPTION AT TIME OF PRESENT DISCHARGE

TO: Director,
War Service Records, D.V.A.,
325 Slater Street,
Ottawa 4, Canada.

File Ref: _____

APPLICATION FOR RECORD OF SERVICE TO RE-
PLACE LOST OR DESTROYED SERVICE CERTIFICATE.

Date 18-8-58

Service Number 724015 Rank _____

Name CRANE ARTHUR Patrick
Surname Christian names in full.

Unit in which enlisted 109 Bell Band
Unit Navy, Army or Air Force

Place where enlisted Ottawa Date Feb 12-1916 Oct 20 1919

Theatres of Service England

Place where discharged Oct 20-1919. Date _____

Date of birth March 24-1892 Place of birth Chatham Kent-England

State why record of service is required Lost

If original service certificate was lost or destroyed, state under what
circumstances _____

Please NOTE

To ensure positive identification
service number must be given, all
questions answered fully, and this
form signed personally by the
veteran.

A P Crane

Signature of Veteran

136 Gloucester St

Street & Number or P.O. Box No.

Ottawa Ont

City or Town Province or State

THE STATE

FOR DIRECTOR
WAR SERVICE RECORDS
325 STATE STREET
SEASIDE, CALIF.

APPLICATION FOR RECORD OR SERVICE TO BE
MADE FOR OR DESTROYED SERVICE CERTIFICATE

Date

Service Number

Name

Christian names in full

Surname

Date on which created

Army, Navy, Air Force

Unit

Place where created

Date

Character of Service

Place where discharged

Date

Date of birth

State why record of service is required

If original service certificate was lost or destroyed, state when and
circumstances

Signature of veteran

Reader Note

To enable positive identification
service number must be given and
questions answered fully. This
statement is responsibility of the
applicant.

Street & Number or P.O. Box No.

City or Town Province or State

To be made out in duplicate.

119.51-110-73
DUPLICATE

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 OVERSEAS BATTALION, C. E. F.

(2) Regimental Number..... *724015*

(3) Full Name of Soldier..... *Arthur Patrick Peter Crane*

(4) Place of Birth..... *Ireland*

(5) Are you married, or not?..... *No*

(6) If married, state,
(a) Full name of your wife..... *None*

(b) Present Postal Address..... *None*

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

(8) Have you any children?..... *No*

If so, give number of boys and girls..... *None*

Also their names and ages..... *None*

(9) Is your Father alive?..... *Yes*

If so, state name and address..... *None*

(10) Is your Mother alive?..... *Yes*

If so, state name and address..... *None*

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

Are you her sole support, or not?.....

(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.

*Mrs. Geo. A. Babcock.
Box 445 Lindsay
Ontario Canada*

(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?..... *None*

Have you made arrangements for payment of your Insurance premium.....

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Date..... *18/7/16*

[Signature]
Officer Commanding *1st* Col.
C. C. 109th Overseas Battalion, C. E. F.

REGT. No. *124015*

RANK *Pte*

NAME *Crowe J.P.*

ISSUE OF CLOTHING AND NECESSARIES.

Date of Attestation.....

	Date	Initials	Date	Initials	Date	Initials		Date	Initials	Date	Initials
Boots, Ankle, Can.							Badges, Cap				
„ Reg.	<i>6/18</i>	<i>MBB</i>					„ Shoulder				
Braces, prs.	<i>6/18</i>	<i>MBB</i>					„ Collar				
Breeches, D.C.							Bands, Body				
Caps, Balmoral							Brushes, Hair	<i>6/18</i>	<i>MBB</i>		
„ S.D.	<i>6/18</i>	<i>MBB</i>					„ Cloth				
Cloaks, Drab							„ Shaving	<i>6/18</i>	<i>MBB</i>		
Coats, Warm, M.S.							„ Tooth	<i>6/18</i>	<i>MBB</i>		
Drawers Winter	<i>6/18</i>		<i>6/18</i>				Chevrons				
„ „							Combs, Hair	<i>6/18</i>	<i>MBB</i>		
Glengarries							Caps, Comforter				
Gloves, Woollen							Discs, Idty., Red				
Greatcoats, S.D.	<i>6/18</i>						„ „ Green				
Jackets, Reefer							„ „ Cord				
„ S.D.	<i>6/18</i>	<i>MBB</i>					Dressings, 1st Field				
„ S.D. Highland							Flashings, prs.				
Kilt							Forks, Table	<i>6/18</i>	<i>MBB</i>		
Kilt Apron							Hosetops, prs.				
Pañtaloons, Service							Holdalls	<i>6/18</i>	<i>MBB</i>		
Puttees, prs.	<i>6/18</i>	<i>MBB</i>					Housewives	<i>6/18</i>	<i>MBB</i>		
Shirts, F. K.	<i>6/18</i>	<i>MBB</i>	<i>6/18</i>				Knives, Table	<i>6/18</i>	<i>MBB</i>		
„ „							„ Clasp				
„ Service							Lanyards, Clasp				
„ Winter	<i>6/18</i>		<i>6/18</i>				Laces, 30-in., prs.				
„ „							Pins, Kilt	<i>6/18</i>	<i>MBB</i>		
Socks, prs.	<i>6/18</i>	<i>MBB</i>	<i>6/18</i>	<i>MBB</i>			Razor in Case	<i>6/18</i>	<i>MBB</i>		
„ „							Spoons, Table	<i>6/18</i>	<i>MBB</i>		
Trousers, S.D.	<i>6/18</i>						Shoes, Canvas, prs.				
„ Service							Towels, hand	<i>6/18</i>	<i>MBB</i>		
Waistcoats, Card	<i>6/18</i>						Spurs, Jack				
Mitts, Leather							Belts, Waist, V.E.O.P.				
							Bags, Kit	<i>6/18</i>			

Signature of Soldier

J.P. Crowe

UNIT REGT. No. NAME

From To Date

From To Date

					TRANSFERRED OR ATTACHED			CLASS	
LEATHER EQUIPMENT 1916.	Date	Initials	Date	Initials	WEB EQUIPMENT	Date	Initials	Date	Initials
Belts, Waist - - -					Belts, Waist - - -				
Braces - - -					Braces, with Buckle -				
Carriers, W.B. - - -	8/18				Carriers, Cartridge, L. -				
Straps, Att. W.B. - -	8/18				" " R. -				
Haversacks - - -	8/18				" E. Tool, Heads -				
Pouches, Amm., 75 rds. -					" " Helves -				
Packs - - -					" W. Bottle - -				
Covers, Mess Tin - -					Frogs - - -				
Tins, Mess - - -	8/18				Haversacks - - -				
Bottles, Water - - -	8/18				Packs - - -				
Sheets, Ground - -					Straps, Supporting - -				
Blankets, G.S. - - -					Entrenching Tool, Heads				
Slings, Rifle - - -					" " Helves				
Rifles - - -					Boots, Knee, Rubber -				
Bayonets - - -					Coats, oil dressed - -				
Scabbards - - -					Gauntlets, prs. - -				
Tins, Oil, 1/8 pint - -					Hats, Sou'western - -				
Oil Bottle - - -					Jackets, Oilskin - -				
Pull-through - - -					Trousers, Oil-dressed -				
Curtains, Sun - - -					Caps, Dowlas - - -				
Bags, Ration - - -					Trousers, Dowlas - -				
Bandoliers - - -					Frocks, Dowlas - -				
Leggings - - -					Trousers, Blue Jean -				
Straps, Gt. Coat - -					Jackets, Blue Jean - -				
" Mess Tin - -									

ISSUES WILL BE ACCOUNTED FOR ON THIS CARD.

Other Ranks will initial for each Article required.
 Quartermaster or Representative will initial over entries, on Articles returned to Stores, such Representative will sign their Name and Unit, as well as Q.M., on bottom of form.
 The Soldier will be held responsible for the Articles remaining on his charge, as shown on this card.

Q.M. Q.M. Q.M.
 Unit Unit Unit

Report on Wounds or other Injuries, received otherwise than in Action.

114
Gen. No.
4269.

Certificate of Medical Officer.

11580
11 MAY. 1917

No. 724015 Pte Crauc A.P. Can Forest. Co.

was admitted to hospital on the 2.5.17 suffering from a cut of left ear. left side of scalp r.h. chin

The disability is of a † trivial nature, and in all probability

† will not interfere with his future efficiency as a soldier.

*He claims that he was in the performance of military duty at the time of the accident.

(If the soldier makes no claim that he was on duty at the time, the certificate below should be signed by him.)

Station K. G. H.
Date May 11. 17.
Geo. J. Morrow
Medical Officer in Charge.

Certificate to be signed by soldier.

I, _____ hereby declare that the injury sustained by me on the _____ did not occur while I was in the performance of military duty.

(Soldier's Signature.)

(Signature of Medical Officer.)
Station _____
Date _____

Certificate of Commanding Officer.

(This certificate will be completed only in cases of trivial injury where the soldier claims to have been injured while on duty.)

I certify that the injury to the above-named soldier † occurred while he was in the performance of military duty.

† About 2 P.M. on the second day of May 1917 near Charing Cross Embankment, London; He is a Dispatch Rider conveying mail between H.Q. Canadian Forestry Corps, 54 Victoria Street & their Warehouse @ Stewart's Lane Station. Rothersea District.

The soldier is now in hospital, but the case will be investigated on his discharge.

The soldier has been so informed.

Station London. S.W.1
Date 15th May 1917.
James W. White
Commanding

This Army Form will be attached to the Medical History Sheet, on which it will be recorded whether the soldier was on duty, and whether he was to blame.

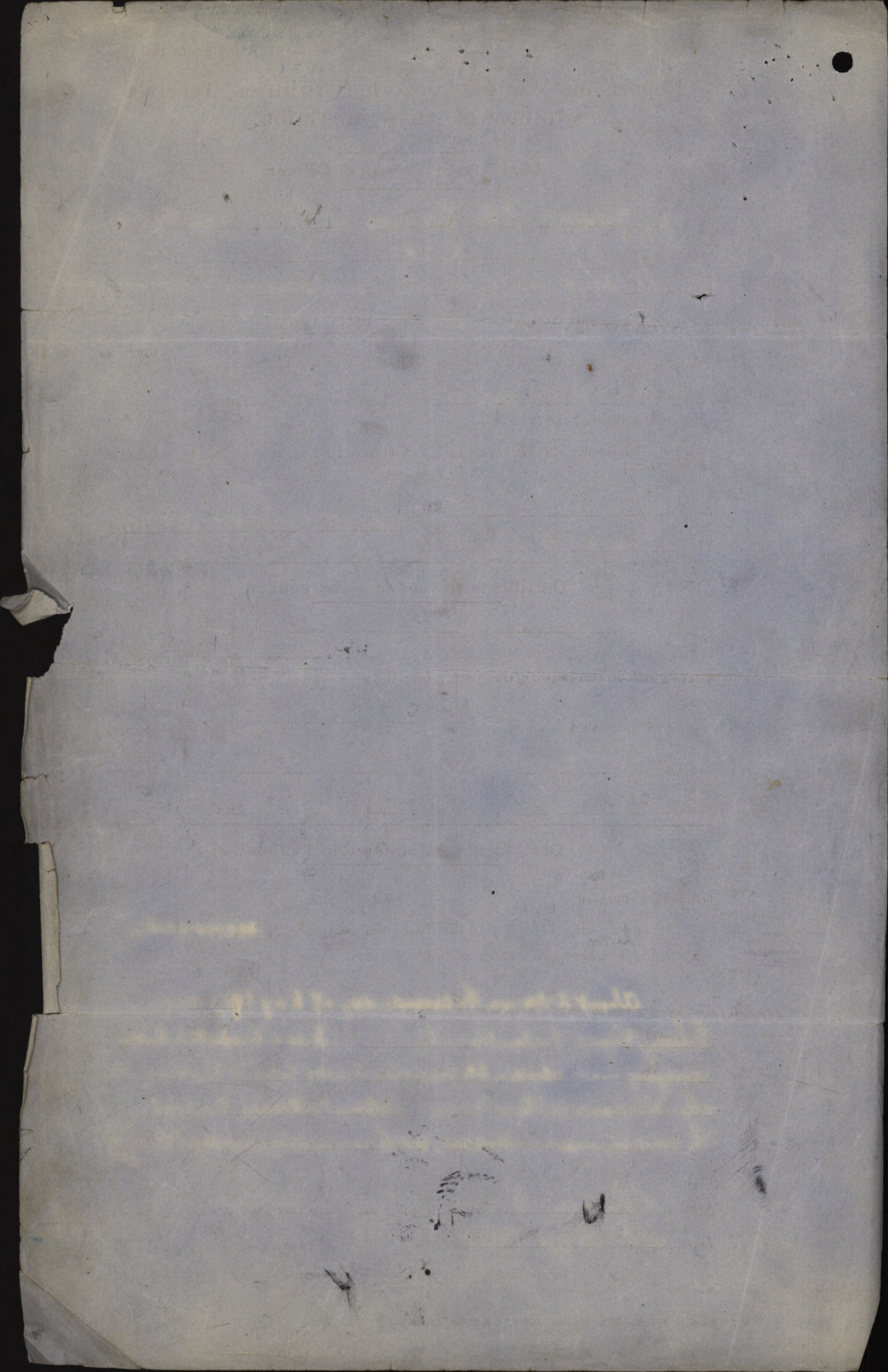
†Here insert "trivial" or "serious."

†Here insert "will" or "will not."

*Here insert "claims" or "does not claim."

†Here insert "occurred" or "did not occur."

†If on duty, state (a) The date of the injury. (b) The place where it occurred. (c) The nature of the duty. (d) Whether the soldier was in any way to blame.



"M" WING C.C.C.

----- "M" Wing, C. C. C. -----

CANADIAN GENERAL LABORATORY.

PARTICULARS OF CASE FOR WHICH WASSERMANN TEST IS REQUIRED.

The particulars below are required for statistical purposes and future reference. Unless these are furnished, the test will not be carried out.

Name *Cramer, A.P.* Regtl. No. *724015* Rank *Pte*

Unit *B. group* Date of first sore if T Pallidium found

..... Secondaries if any
 Other Symptoms Treatment if any
 Arsenical Mercury
 Station and date

----- ● ● ● ● ● ● ● ● ● ● -----

RESULT OF WASSERMANN (ORIGINAL) QUARTER SYSTEM.

Date Serial No. Result

**WASSERMANN
NEGATIVE**

83 Hutchinson

Hall Major.
Officer Commanding Can. Gen. Laboratory.

Witley, Surrey.

..... *6-8* 1919.



3



.....

.....

Handwritten scribble

.....

.....

.....

.....

.....

.....

.....

.....

.....

CLINICAL CHART.

Army Form B. 181

Corps _____

(To be attached to Case Sheet.)

Military Hospital _____

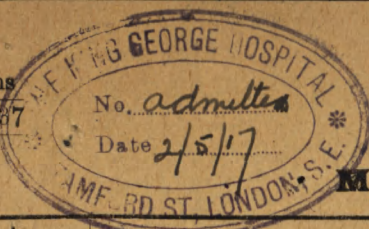
No. _____ Rank and Name Pte Crane

Age _____ Service _____

Disease _____ Date of admission _____ Date of discharge _____ Result _____

Dates of Observation	Days of Disease																												
	<u>May</u>																												
	2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18																												
Temperature Fahrenheit	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time
	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.
107°																													
106°																													
105°																													
104°																													
103°																													
102°																													
101°																													
100°																													
99°																													
98°																													
97°																													
Pulse per Minute	64																												
Respirations per Minute																													
Motions per 24 hours																													

Forms
I. 1237
12



MEDICAL CASE SHEET.*

No. in
Admission
and
Discharge
Book.

Regimental No.

Rank.

Surname.

Christian Name.

424015

Pte

Crane

A. P.

Unit.

Age.

Service.

Canadian Forestry Batt

19

1 yr 3 mths

1917

Station
and Date.

Disease

Injured by accident

K. G. H.

3.5.17.

Patient met with an accident
on embankment. being thrown
from a motor cycle, on May 2
17. in London. cutting his left
ear, left side of skull, and left
side of lower jaw.

May 11. 17.

Wounds are healed

16.5.17

To Bromley Bowel Hospital

Dr. [Signature]

Lieut. Col. R. M. S.

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

Station
and Date.

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

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) CRANE Arthur Patrick
REGIMENT C.F.C RANK Pt No. 724015

Date of Examination in England 7-819 Date of Examination in France _____



DIRECTIONS TO DENTAL OFFICERS

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.

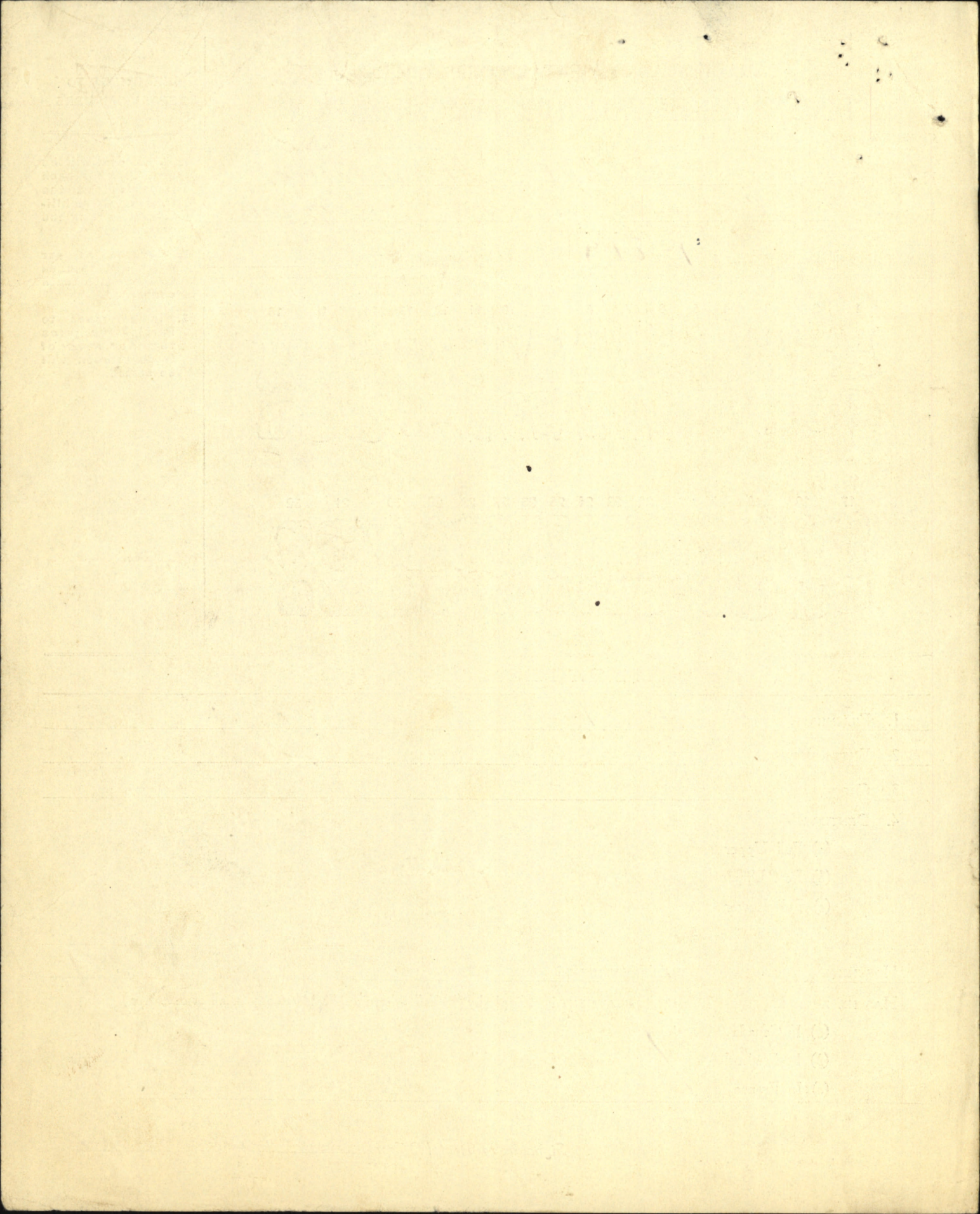
PRESENT DENTAL REQUIREMENTS

1. FILLINGS 4.14.21.
2. EXTRACTIONS _____
3. CROWNS _____
4. DENTURES
 - (a) Full Upper _____
 - (b) Part Upper repair
 - (c) Full Lower _____
 - (d) Part Lower _____

HAS HE EVER REFUSED DENTAL TREATMENT? No

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 _____
(c) In France _____

Signature of Dental Officer R. Crosby Capt



Name

Arthur Patrick
Crane

Rank

Pl.

Reg. No.

724015

Unit

Can. Forestry Corps. Base Depot.

Next of Kin

Mrs Mary Crane
3/ Castle Road, Luton, Chatham, Kent, Eng.

Date

Movement

Place

Casualty

List
No.Notified
N/K O.

W.O. List

1917.

3-5 King George Hosp. Stamford St. N.Y. No. 89

17-5 Can. C. Hosp. Broadway, Injured

21-5 Discharged
Rent (Wd. Car & Child) 95 ✓
-do- C3.

R. 226, Ser 14

NAME

Crawe A J

H. Q. FILE No. 649-

REGT'L. No.

742015

RANK AND CORPS

Plt. 109 Batta.

CABLE

NO.

DATE

NATURE OF CASUALTY

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

17.	Mil. Ho. Aldershot -	28.9.16	Rubella
19	" " Dist.	9-10-16	"

REGT'L. No. 724015
H. Q. FILE No. 649

NAME Crane Arthur P.

RANK AND CORPS Pte. Can. Forestry

FOLLOWS
No. _____
FOLLOWS

CABLE

NO. 14 DATE

NATURE OF CASUALTY

6924 30-9-19

Ref. your cable 3482 with
Canadian discharge Depot Boston

S. 2123 29-8-19 29-8-19 Eng. Harry Crane
402 1/2 Bank St. Ottawa

LIST NO.

HOSPITAL

DATE OF
ADMISSION

REMARKS

87

King Geo. Stamford
St. Lon. S.C.

3-5-17

B. y. w.

#95-

Can. Con. Bromley, Kent

17-5-17

Incised wound, Ear & chin.

C.3

Discharged

21-5-17

" Ear " " (Can. for. Conf.)

679 "

ban. to Chinghi, Ymring

30/11/17

V. D. S. (L. F. L.)

6126 "

Discharged

29-1-18

" " " (" ")

Name *Crane* Rank *Arthur Patrick pie.* Reg. No. *742015*
 Unit *109 Battalion*
Mrs. Mary Crane 31 Cosile Rd. Luton
 Next of Kin *Chatham Eng.*

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
9/16 289 9-10-16	Col Aldershot - Dis	Rubella	179.			

SURNAME.

Crane,

o/s. CARD NO.
SOS Dis *o/s* 20-10-19
FOLL.
Do 256 3-11-19 *Christpo*

CHRISTIAN NAMES

Arthur Patrick

REGL. NO.

724015

RANK

Pte.

UNIT

109th

Batt.

FORMER CORPS

Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Crane, Pte. Harry

RELATIONSHIP TO SOLDIER

Brother

ADDRESS

77th Batt. Ottawa, Ont.

COUNTRY OF BIRTH

England, Chatham

DATE

Mar. 5th 1897.

PLACE OF ATTESTATION

Rindsay

DATE

Feb. 12th 1916.

o/s. 23-7-16. 488
10

27/7/16 per [unclear]

MARRIED

SINGLE

Yes

WIDOWER

TRADE OR CALLING

waiter

RELIGION

Roman Catholic

DESCRIPTION.

APPARENT AGE

18

YEARS

11 MONTHS

HEIGHT

5

FEET

6 INCHES

CHEST MEASUREMENT

36

INCHES

EXPANSION

3

INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

Dark Brown

DISTINGUISHING MARKS

Nil.

10 10 10 10

MEDICAL EXAMINATION.

PLACE

Rindsey

DATE

Feb. 12th 1916.

No 724015 RANK Pte

NAME Crane A.

P.

T. O. S. 10-2-16

UNIT

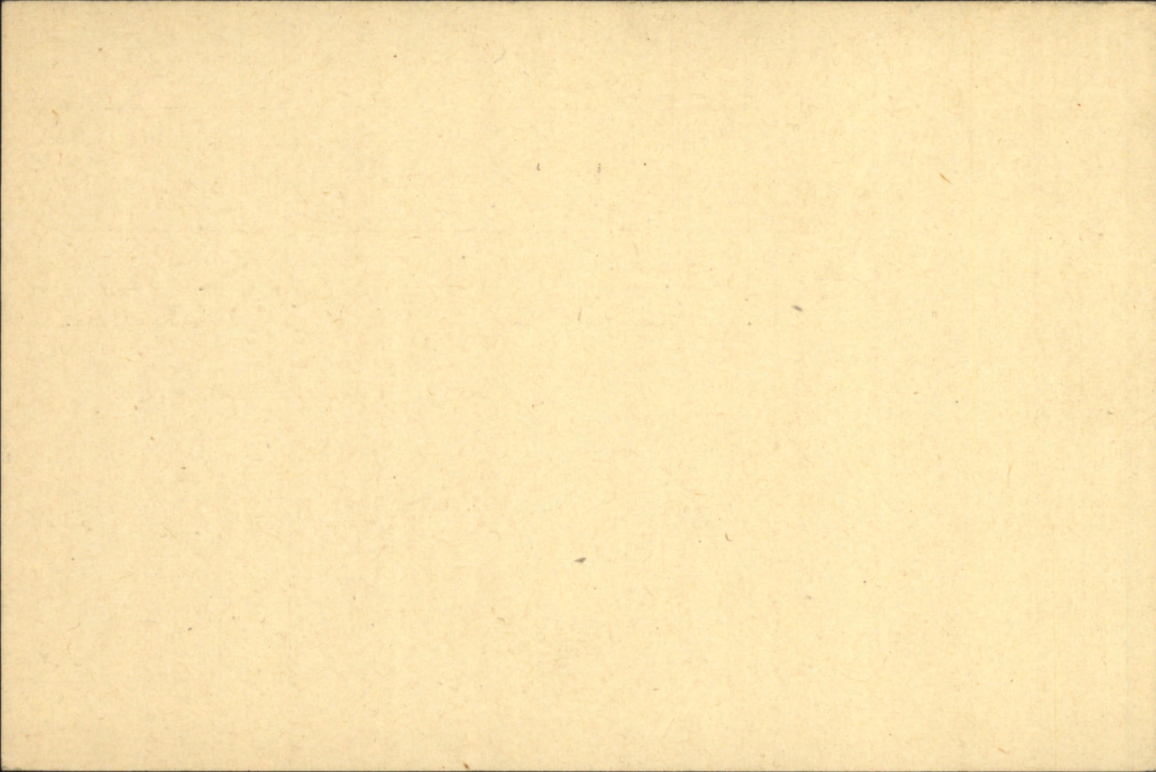
109th Battalion

D.O. 73. 14-2-16

M. D. 3

PAID FROM	PAID TO	SIG OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Feb. 10	1916. Feb. 29	✓		
Mar.		✓		
April.		✓		
May.		✓		
June.		✓		
July.		✓		

UNIT SAILED
JUL 23 1916



att.

649-C-81064

Number 724015 Rank Sde

Surname CRANE

Christian Name Arthur Patrick

Units 109th Bn Can Coy Theatre of War England.

Date of Service 31-7-16

Remarks

Latest Address 63 Harvey St

~~Luton, Bedfordshire Eng.~~

Roll No. A Page 4890 c/o B. Thomas, Esq. Service Bureau, Can. Leg., B.E.S.L., Dominion H.Q.'s Ottawa, Ont. H. 2. 29.

200m.-6-21....

(This form to be filled in by all ranks on voyage to Canada.)

RANK

SURNAME

INITIALS

UNIT

address.....

(Street)

(City or Town)

(Province)

one person to be notified of arrival.....

station in Military District to which a furlough warrant is required.....

Railway.....

, is your wife on board..... Number of children on board.....

ination.....

(Sgd.).....

REC'D. NO. 42578

DESP. FEB 8 1929

2502.

Surname
Crane.

Christian Name or Names
A.P.

Reg. No.
724015.

Rank

Unit

Co.

Troop

Batty.

Pte.

Can. Forr. Corps.

Alkot

Date of Admission

Hospital

King. Geo. Stamford. St. 3-5-17.

Transferred

Hosp.

Bromley Convalescent

Hosp. 17-5-17.

Can. Etchinghill, Lymington

Hosp. 30-11-17.

Hosp.

Diagnosis

Incised Wd. Ear & Chin. J^o

(1)
Later Diagnosis (if changed)

J. D. S. J^o

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

C.L. 10-5-17. 87.

23-5-17 # 95

7-9-17 63

5-12-17 C. 790

2-2-18 C126

Dis. 21-5-17

Date

Disch 29-1-18

REMARKS

A.M.D. 2 Dept.

Beh. of D.G.M.S. O.M.F.C. London

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

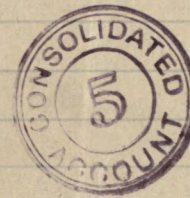
7.

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom Gen. Babcock By Whom Assigned Crane, A.P.
 Address 74 Russell St. Regtl. No. 724015
Box 445 Lindsay Rank Pte
Ont. Corps 109th Battrn. Band
 Rate \$15.00 AUG 1 1916

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				



19

1881

5



MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

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

Sheet No. 2. Geo. Babcock

Name of Soldier Crane, G. P.
724016 Pl. 109th Baltn

PAYMENTS.

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

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.		N 15222	15 -	
Sept.		Y 17174	15	
Oct.		Z 17155	15	
Nov.		N 26053	15	
Dec.		Z 32599	15	
Jan.	1917	C 39116	15	
Feb.		C 44814	15	Cancelled (A. J. M.)
March		D 49850	15	
April		B 1246	N	15-B.
May		Y 7774	N	0
June		P 14068	15	15.00
July		D 21198	15	B.
Aug.		J 28390	15	B.
Sept.		I 35078	15	W
Oct.		Y 47102	15	
Nov.		Z 52602	15	
Dec.		J 55702	15	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

\$15.00

Band
 AUG 1 1916

Red

Be

AG

255 ges.

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.				

* Strike out whichever inapplicable.

ASSIGNED PAY	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.	NAME:-- CRANE A.P.
EFFECTIVE DATE:--		EFFECTIVE DATE:--		NUMBER:-- 724015.
AMOUNT:--		AMOUNT:--		PARTICULARS OF RANK OR APPOINTMENT
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.		AUTHORITY
		0/2/25 4. Carson Ave Wrightsville, Hull P.Q.		DATE EFFECTIVE
				RANK OR APPOINTMENT
				UNIT AND TRANSFERS
				ORIGINAL UNIT:--
				DATE ACCOUNT FIRST OPENED:--
				AUTHORITY
				DATE EFFECTIVE
				DATE LEDGER SHEET T'S' D
				UNIT TRANSFERRED TO
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	
1/10	Q4005/919		578	
DAILY RATES OF PAY AND ALLOWANCES				
AUTHORITY		PAY	F.A.	P.F.A.
				SUBS'CE ALL'CE

PARTICULARS OF RENDERING NON-EFFECTIVE:-- *Dis England 20.10.19.*

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
1919				Balance fwd					46 50		
Oct.	Forward	22	-	Forward	12 17			15			
				Amk 1545 25/7/19 to 1155 26/7/19							
				10/15 1 day pay		1 10			52 77		
				20 20 mce 8.8.19							
				Pg 68 Amk 13.11.19							
				Amk 2359 1/7/19 to 1315 19/7/19							
				1/5 4 days pay 2nd 46 47		8 80			61 57		
				00228 etc 16.8.19							
				Feb 8 fwd. 17.11.19							
		22	-		12 17	9 90		15			
				Q4005-d.1.10.19 #919		578			67 35		
24.10.19	Recovered from W.S. (11.16.1)								8 80		
17.11.19	do do 4/6.1)		5855								
3.2.25	D' Bce.			D' Bce as above.		8 80			8 80		
"	A.P. Oct 1919 charged			1500 paid by chq N° 9929		620					
	not paid			1500		620					
						620					NIL

46 50
12 17
8 80
15 80

82 22
60 47
47

ASSIGNED PAY. ENGLAND or CANADA. SEPARATION ALLOWANCE. ENGLAND or CANADA.

NAME: **CRANE** Arthur Patrick
NUMBER: **724015**

EFFECTIVE DATE: **1-8-16** 1/8/18
AMOUNT: **15⁰⁰**

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte.

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.

Mrs Geo. Babcock (friend)
Kindsay out Can
Stop Payment off 1/1/18.
1/1/19 Slipped off 1.11.19

UNIT AND TRANSFERS
ORIGINAL UNIT: **109th Bn.**
DATE ACCOUNT FIRST OPENED: **1-8-16**

1/10 24005 919 5-78
4/10 354. 4-87
12/10 776 7-30
agreement of after 30/18. \$11.57

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T SP D	UNIT TRANSFERRED TO
L.P.C.	5/4/15		C.F.C. Eng
Ledger Bal	39.50		

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
28/4	72225	R.P.K.	1189				
8/9	14566	R.Wing	38.43				
18/7	114005	PP	8.50				
			52.60				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	100	10		

PARTICULARS OF RENDERING NON-EFFECTIVE **Discharged England 20.10.19.** **2800 21.10.19 D.S.C.** **Restricted pay 1-2-19 for 4 months 20.6.14 53 812 35274**

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	SALANCE	DEFERRED	SEPARATION
31/3/18	Bal fwd								34.21		
April	PP	33		C.A.P.				15			
				Q11005, 309, 20/2/18	16.81						
				\$8, 6/4/18, 114 Co	4.87						
				16/4/18, Awarded 10 days F.P.#2 for W.O.A.S. AWL							
				11:30pm 13/4/18 to 1:30pm 15/4/18 total forfeiture							
				13 days pay by R.W. 20/6/19, 5/4 Dec	21.68	14.30		15	52.19		
May	PP	34	10	C.A.P.				15			
				\$162, 17/5/18, 114 Co	2.43			15	35.52		
June	PP	33		C.A.P.				15			
				\$314, 7/6/18, 114 Co	2.43						
				10/6/18 AWL 10pm 10/6/18 to 7am 11/6/18 forfeiture							
				10 days pay by R.W. 20/6/18, 20/6/18, 20/6/18	2.43	1.10		15	21.05		
July	PP	34	10	C.A.P.							
				\$497, 5/7/18, 114 Co	4.87				8.18		
Aug	P.P.	34	10	C.A.P.				15			
				Q14005, 374, 15/7, 114 Co.	1.27						
				\$657, 9/8, 114 Co	12.17			15	13.94		
Sept		33		C.A.P.				15			
				Q14005, 374, 15/7, 114 Co.	1.27						
				At 11/9, 10/9/18	14.60						
				26.9.18. Am 3 days F.P.#2. 29/9.2. from 12.01 am							
				23.9.18. 10 days pay by R.W. 20/6/18, 20/6/18, 20/6/18							
				23.9.18. 10 days pay by R.W. 20/6/18, 20/6/18, 20/6/18							
				Sheet 10. Part 14.							
									11.57		
									15.87	4.40	

Red Hatched
At Home

NUMBER 724015

RANK Pfc

NAME CRANE A.P.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1918				Bal brot ford.					11 57		
Oct	Plas Pay	34 10		b. a. P				15			
				\$1756 114 62 10.10.18	12 17						
		34 10		\$4005/193. 114 62 30.7.18	6 37			15	12 13		
					18 54						
Nov	Deat.	67 10		b. a. P				15			
1919				\$2095 114 62 11.11.18	12 17						
Jan		34 10		b. a. P. Deat				15			
				b. a. P. Jan.				15	56 16		
		101 20			12 17			45			
Feb		30 80		\$3265 126 62 53 Deat. 20.12.18	17 03						
				b. a. P. Feb				15			
				\$3359 126 62 7-1-19	12 17						
				31/12/18 awarded 4 days P.P. adk 500 30/18							
				6/23 30/18 awarded 5 days P.P. 3.53 Adk 249 31008		5 50					
				15/1/19 28 days P.P. adk 2300 7/19							
				6/10 15/1/19 34 days P.P. 2 5 7/19 53 Adk 35243		37 40					
				unpaid 40 to Brandon							
				Rail Yonkers 719. Ref 4/7/16 15-1-19	2 66						
Mar		34 10		b. a. P.				15			
		64 90		\$3569 109 Bn. Kimmel Pk. 26/2/19	4 87						
					13 41						
		64 90		\$4347. Kimmel 109 Bn 11.3.19	4 87				6 56		
					41 60	42 90		30			
April		33		b. a. P.				15			
				\$5494 Kimmel 25.3.19	4 87						
				\$651 ✓ 11.4.19	4 87						
				\$4005/242 b. P. 18.12.18	- 50						
May		34 10		\$4005/259 ✓ 7-2-19	85						
				adk 10 30 24/19. 15 1100 26/19. 7 days 20							
				20 45 1/5/19. 5 wing 15 P. 57885							
				adk 10 30 24/19. 15 1100 26/19. 7 days 20		9 90		15			
				20 45 1/5/19. 5 wing 15 P. 57885							
				\$3129 Kimmel 13.5.19	4 87						
				\$4078 do. 18.5.19	4 87				12 93		
		67 10			20 83	9 90		30			
June	July			S.O.S. 18/6/19 See gary adk							
				of cr. 9 days @ 1.10.							
				since 23/5/19. 60 87 24/5. 514 25/19		9 90			3 00		
						9 90					
				\$2992 20/7/19. See gary adk	38 93				35 90		
					38 93						
				Awarded 33 days forfeit P.A.W.L.							
				23/5-25/6/19 P.A.W.L. 254 11/9/19							
				9 days already paid - 24 days @ 1.10		26 40			62 30		
Sept	June July Aug Sept	134 20		b. a. P. June				15	56 90		
				July Aug Sept				45	11 90		
				1456 8/9	38 93				24 03		
				8788 18/9 Post End	4 87				31 90		
				9141 22/9 b. P. "	14 60				46 50		
		134 20			58 40	26 40		60			
Oct	1/10 to 20/10.	32-33		b. a. P.				15			
				354 Bny 6.10. 1	4 87				43 37		
				776 ✓ 12.10 2 5	7 30				50 67		

Name

Crane

Enpl. 12-2-16.

Date of Embarkation for England

Apr. 31-7-16.

Proceeded to France.

No.

Returned to England.

Date returned to Canada.

P. O. Line B. I.

P.R. 2855.

"Chitid
4-5/25"

.....

.....

.....

.....

.....

.....

.....

Original

THIS FORM WILL BE USED FOR ALL RANKS

"M" WING, C.C.O.

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

H. O.

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 Witley Camp DATE Aug 18th 1919

1. 1 (a) Unit C.F.C. (b) Regimental No. 924015 (c) Rank Plt

(d) Surname CRANE (e) Christian name ARTHUR PATRICK

(f) Home address Lindsay Ont

(g) Next of Kin Mr Starob Crane (h) Relationship Brother

(i) Address of Next of Kin Compuj Ont

2. Age last birthday 21 Date of birth Mar 28 1898

3. Enlistment, or Appointment (if an Officer) (a) Place Lindsay (b) Date 18 Feb 1916

4. Personal description:

(a) Height 5' 8" red (b) Weight 148 red (c) Complexion medium

(d) Colour of hair brown (e) Colour of eyes blue (f) Identification marks, Scars, etc. Curved scar left side of chin extending down from lower lip

5. Former trade or occupation Clerk

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
	3.	189.

	PERIODS	
	From	To
Canada	19/2/16	31/7/16
England	3/17/16	Present
France or other theatres of War	- 91	J

7. Original disease, or injury V.D.

(a) Date of origin 30/4/17 (b) Place of origin England

(c) Cause infection

C.R. B.P.C.
 REFERRED TO
 30 OCT 1919
 REPLIED TO

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.)

Nil - Had HSA

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.)

No signs or symptoms of VD now.
Wassermann neg 8/8/19
Cargen Lab Witten
syd Murtlians Carr

(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).)

Just had primary sore and got treatment immediately

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).)

25/9/16 in hosp measles.

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

nil

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

no

(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.)

n.a.

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

(a) caused by (b) no

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?

Re-examine in 6 months

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

says he had 2 1/2 courses of 600 & 4g.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

suggested

(If the answer is "yes" state nature of treatment required and probable duration)

that he be dealt with on arrival in Canada in accordance with PEO 47 of 30/1/19

16. Can the former trade or occupation be resumed?

yes

(If not, briefly state why)

17. Recommendations.

nil

[Signature]

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 *A. P. Crane* 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

W.P.G.

Crane A.P.

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.

yes we concur.

Original A.F.B. 103 and 178 not produced.

auth D.P.G. 14.1.48 of 13-1-19.

19. Is the invalid fit for

- (a) General service, (Category A) (Yes or No.) **yes A.**
- (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.)

Suggested to be dealt with on arrival in Canada in accordance with P.C. 47 of 20-1-19

- (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.)

R.T.C. auth A.G. tel. 9083 of 11.11.19.

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.

u B a

PLACE Witley Camp

DATE 18-8-19

[Signature] President.
[Signature] Members

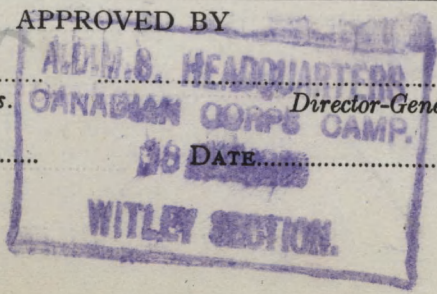
TO BE COMPLETED WHEN TREATMENT IS REFUSED

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.....
DATE..... Members

APPROVED BY *[Signature]* Assistant Director of Medical Services. APPROVED BY *[Signature]* Director-General of Medical Services.
DATE.....



SYPHILIS CASE-SHEET.

Regtl. No. *724015* Rank and Name *Crane Pte* Corps *C. F. C.*

Placed on Syphilis Register at *CANADIAN HOSPITAL*, on *29-11-17* No. in Register

Disease contracted at *ETCHINGHILL, LYMINGE. London*. Primary sore appeared on (date) *15-11-17*

CONDITION WHEN PLACED ON REGISTER.

Primary sore—character and site *Complete Phimosis with profuse mucous purulent discharge penis indurated area felt all about glands through prepuce*

Lymphatic glands *Inguinal adenitis, all others shotty*

Skin (nature and distribution of rash) *Macular papular rash on trunk syphilitic*

Mucous membranes *Negative*

Other symptoms *Phimoses with balanoposthitis scabies*

Examination of exudate from sore—Spirochaeta Pallida (present or absent)

Examination of blood serum—(Method employed (original or modification)

Wassermann reaction (Result (positive or negative)

Station *CANADIAN HOSPITAL, ETCHINGHILL, LYMINGE.* Date *29-11-17* Signature of M.O.

Struck off Syphilis Register at _____ on _____

Cause of being struck off Register { (a) Recovered (b) Transferred to Army Reserve (c) Discharged from Army }

Station _____ Date _____ Signature of M.O.

N.B.—On completion of a course of treatment a red line to be drawn across the page, and the date when the next blood test is due to be entered in red ink below the line, e.g., "Blood test due 15.5.14."

The date and result of the blood test to be entered; and if negative, the date on which the next blood test is due to be also entered.

CANADIAN HOSPITAL
ETCHINGHILL, LYONS AVE.

Station	Date	Symptoms and progress (Date of admission to hospital, and date of discharge from hospital, to be entered in red ink.)	Weight clothed, without boots—lbs.	Urine		Wassermann Reaction		Treatment			Signature of M.O. (Each M.O. will sign his name in full on the first occasion; subsequent entries may be initialled)	
				Normal (N.) Albumen (Alb.)	Method (Original (O.) Modification (M.))	Result (Positive (+) Negative (-))	Arsenical		Intravenous Injection. Dose in grammes	Mercurial		Other Methods
							Salvarsan	Neo-Salvarsan				
	9.9.17	Admitted to Hospital (W.O.)										
		Full Special Course.										
	30-11-17										.4	
	1-12-17										.4	
	4-12-17										.4	
	8-12-17										.5	
	15-12-17										.4	
	22-12-17										.5	
	29-12-17										.4	
	5-1-18										.5	
	12-1-18										.4	
	19-1-18										.5	
	14-1-18	Wassermann Positive +++									.5	
	25-1-18	Recurrent Course.									.5	
	25-1-18										.5	
	1.2.18										.5	

Disorder
Lauryol

25-1-18

Recurrent Course

25-1-18

N

T

.5

1-2-18

N

T

.6

WAR SERVICE GRATUITY and SEPARATION ALLOWANCE

Payable to CRANE Arthur Patrick
Address 63. Henry Street.
Luton Chatham Kent

2/24015.

Dependent
Address

Date	Cheque No.	Gratuity	Payments	Balance Due	Remarks
Oct 20	107470		18 7 8		Seat & c/c
" 24	L.P.C.		11 16 1		
24	e/c	4 =			
24	108368		5 0 0		on a/c & lunch with Mr. Flepau.
Nov 6	Grat	86 6 =	35 3 9	55 2 3	
" 13	135205	90 6 =	11 19 3	43 3 =	2 nd & 3 rd less £11.16.1, & £5. Seaborn
" 17	P868		= 4 6	42 18 6	awd 25-26/7. For 1 Day PVA.
Dec Nov 25	136865		14 32	28 15 4	4 th less 4/6 see above) withy
" 25	136866		28 15 4	0	Final & 5 th Capt Buncher
		90 6 =	90 6 =		

15
44
10
w w
w w

90 6 0
Dr Bce Record - 12 0 7 = 58 55
78 5 5
Dr 67 35
58 55
8 80
15 00
6 20
1919

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

C 16303

Aug 1/14

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

15-			
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X 1937
BNX

PARTICULARS OF SEPARATION ALLOWANCE

No. **724013**

Rank **Pte** Promoted Reverted Discharge

Soldier's Name **A.P. Crane**

Battalion **109 Battr Band**

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name **Mr Yes: Crane Babcock**

Address **Box 445 - 74 Russell St. Lindsay**

Change of Address **Out**

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total
DEC. 31 1918			255	255
Jan.	D 66375		15	15
Feb.	D 100277		15	15
Mar.	A 118612		15	15
Apr.	B 1111		15	15
May	M 17196		15	15
June	S 20900		15	15
4813 Aug	L 4055		15	15
Sept	L 43764		13	13
Oct	M. 51916		15	15
Nov	D 59969		15	15
Dec	R 64420		15	15
Jan	CM 42348		15	15
Feb	B 77787		15	15
Mar	N 90087		15	15
Apr	N 2735		15	15
MAY	H 7990		15	15
JUN	G 9260		15	15
JUL	D 12102		15	15
Aug	E 13499		15	15
Sept	A 14884		15	15
			555	555

File 3871-a-15

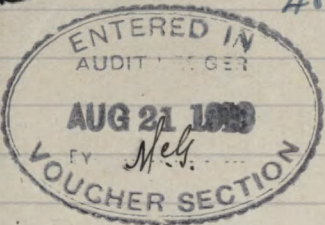
A.P. reopened 1-8-18 Auth
A 2m. 23 7/8. Auth.

8207-22 8/18

Auth stopped 20-4-18. Auth 3m 14 6/18
cause left balance 82 15
MRO 2 B. 14 6/18

Applied 30/9/19 for cable P 4626
Applying for disch in England
M R O History. used 10/10/19

AUDITED.



M. F. W. 128
400mc-6-17-1772-38-1141
L. L. 22320-M. & D. 7583.

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)

1. No. 724015

2. Rank Pvt

3. Name Crane Arthur Patrick

4. Unit C. I. Co.

5. Date of Discharge 20/10/19 | Place 2nd C.D.S.

6. Reason for Discharge

K. R. & O. Para. 392 Sec. XXV
(Being Demobilized in England-C.R.O. 5222)

7. Authority D.B-2-B 882 17-10-19.

8. Proposed Residence after Discharge 63 Henry St
Luton
Bedfordshire

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. ? 20/10/19
Crane, A.P.

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

Date 20/10/19

Signature W. H. C. [unclear]
(O.C. Discharging Unit.)

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