

**80th Battalion, C. E. F.
ATTESTATION PAPER**

Original

No. *219749*

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

1. What is your name?..... *Alfred David Cross*
2. In what Town, Township, or Parish, and in what Country were you born?..... *Alford Essex England*
3. What is the name of your next-of-kin?..... *Wife Alice Cross*
4. What is the address of your next-of-kin?..... *63 Albert St Lindsay*
5. What is the date of your birth?..... *February 8th 1881*
6. What is your trade or calling?..... *Boatmaker*
7. Are you married?..... *Yes*
8. Are you willing to be vaccinated or re-vaccinated?..... *and inoculated A B C 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*

Alfred D Cross (Signature of Man.)

R. H. Anderson (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Alfred David Cross*, do solemnly declare that the above answers made by me to the above questions 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.

Alfred D Cross (Signature of Recruit.)

Date *August 9th 1915* - *R. H. Anderson* (Signature of Witness.)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Alfred David Cross*, 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.

Alfred D Cross (Signature of Recruit.)

Date *August 9th 1915* - *R. H. Anderson* (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 *9th* day of *August* 1915.

Geo. A. Balfour (Signature of Justice.)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

C. H. Jervis Capt (Approving Officer.)

DESCRIPTION OF Alfred David Cross ON ENLISTMENT.

Apparent Age 34 years 6 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.

Height 5 ft. 5 ins.

(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.)

Chest measurement { Girth when fully expanded 36 ins.
 Range of expansion 4 ins.

Tattoo-mark right arm part of anchor

Complexion Dark

Eyes Blue

Hair Black

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

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 August 3rd 1915

McCluskey

Place Lindsay

Lieut
 Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT

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

W. G. Hetherington (Signature of Officer.)
 COLONEL

Date OCT 6 1915

O. C. 80th Battalion, C.E.F.

"A" Coy.

ATTESTATION PAPER.

No. 724542

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio.

ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION. (ANSWERS.)

1. What is your name?..... Alfred David Cross.
2. In what Town, Township or Parish, and in what Country were you born?..... Ilford Essex England
3. What is the name of your next-of kin?..... Wife Alice Cross.
4. What is the address of your next-of-kin?..... 63 Albert St N Lindsay Ont.
5. What is the date of your birth?..... February 8th 1881
6. What is your Trade or Calling?..... Boilermaker
7. Are you married?..... Yes
8. Are you willing to be vaccinated or re-vaccinated?..... & innoculated Yes
9. Do you now belong to the Active Militia?..... No
10. Have you ever served in any Military Force?..... 45th Victoria Regiment 3 months
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

Alfred David Cross (Signature of Man.)
R.H. Anderson (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Alfred David Cross, do solemnly declare that the above answers made by me to the above questions 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 November 12th 1915. Alfred David Cross (Signature of Recruit)
R.H. Anderson (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Alfred David Cross, 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 November 12th 1915. Alfred David Cross (Signature of Recruit)
R.H. Anderson (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 12 day of November 1915.

[Signature] (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

[Signature] Lt. Col (Approving Officer)
 O. C. 109th Overseas Battalion, C. E. F.

Description of Alfred David Cross on Enlistment.

Apparent Age 34 years 6 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. 5 ins.

*Tattoo mark right arm
Part of anchor*

Chest measurement (Girth when fully expanded) 36 ins.
 Range of expansion 4 ins.

Complexion Dark

Eyes Blue

Hair Black

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

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 October 28 1915

Place Lindsay

J. McCulloch Capt
 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.

Alfred David Cross 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. A. Hill Lt. Col. (Signature of Officer)
 O. C. 109th Overseas Battalion, C. E. F.

Date DEC 29 1915 1915

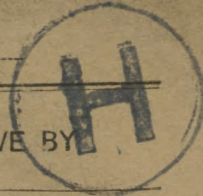
REGIMENTAL DOCUMENTS

NAME *CROSS ALFRED DAVID*

REGT. NO. *424542*
219749

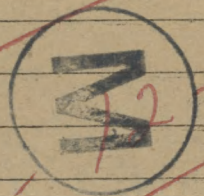
UNIT *109TH Bn*

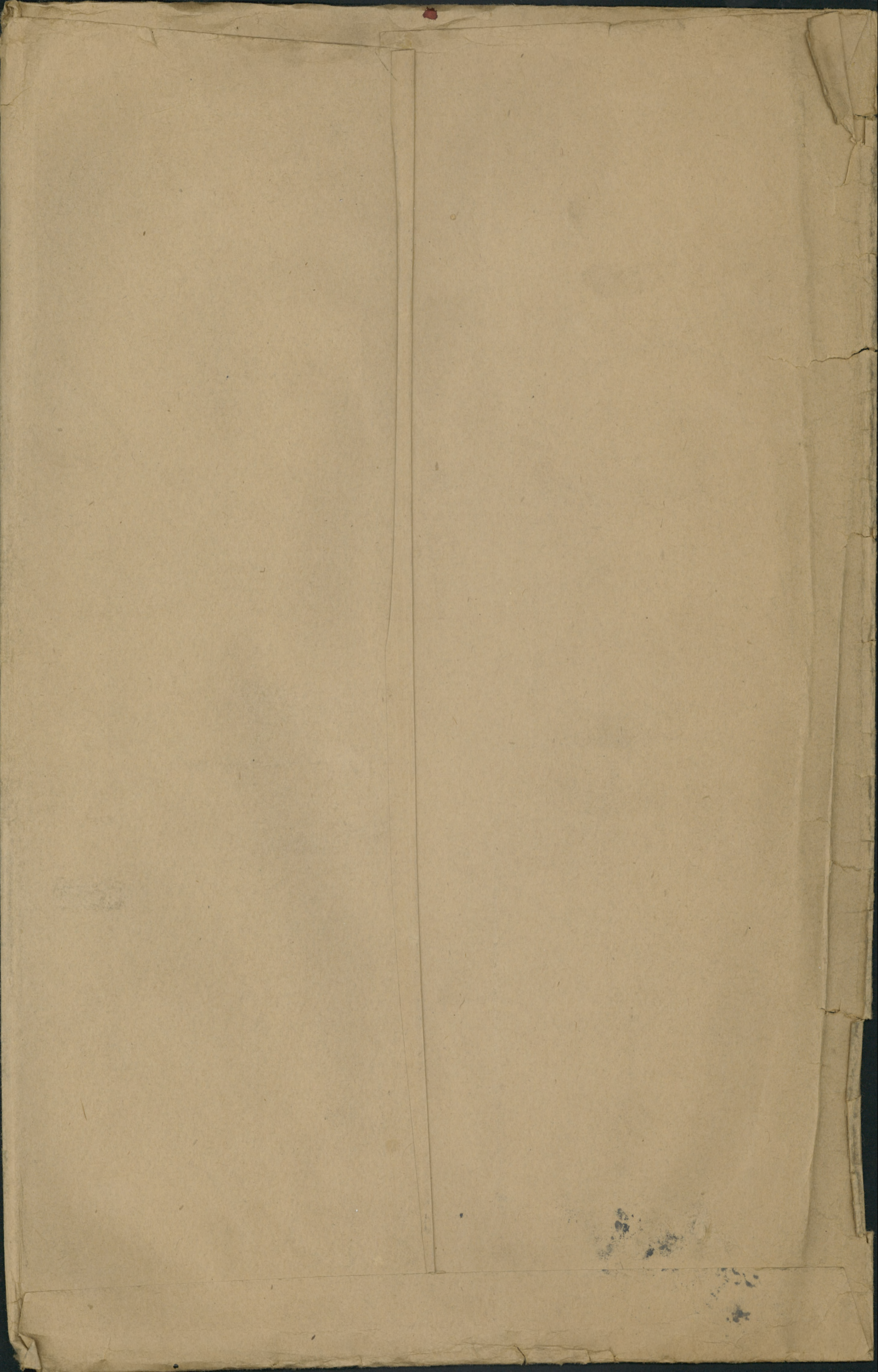
H. Q. FILE NO.



CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
21 ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
3 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
TRAINING HISTORY SHEET (M.F.W. 113)					
1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)				45839	
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1 COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1 DENTAL HISTORY SHEET (M.F.B. 465)					Category
1 MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					<i>Demot</i>
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)					
LAST PAY CERTIFICATE (M.F.W. 44)					DESERTION
11 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
2 <i>762#3</i>					
1 <i>79.7-1067</i>					
3 <i>J.M.S. 1394</i>					
2 <i>J.M.S. 1348</i>					
1 <i>127</i>					
<i>1/27</i>					
<i>2 pay cards</i>					

Deceased 3-51





No.

RANK

Pte

NAME

Cross A. D.

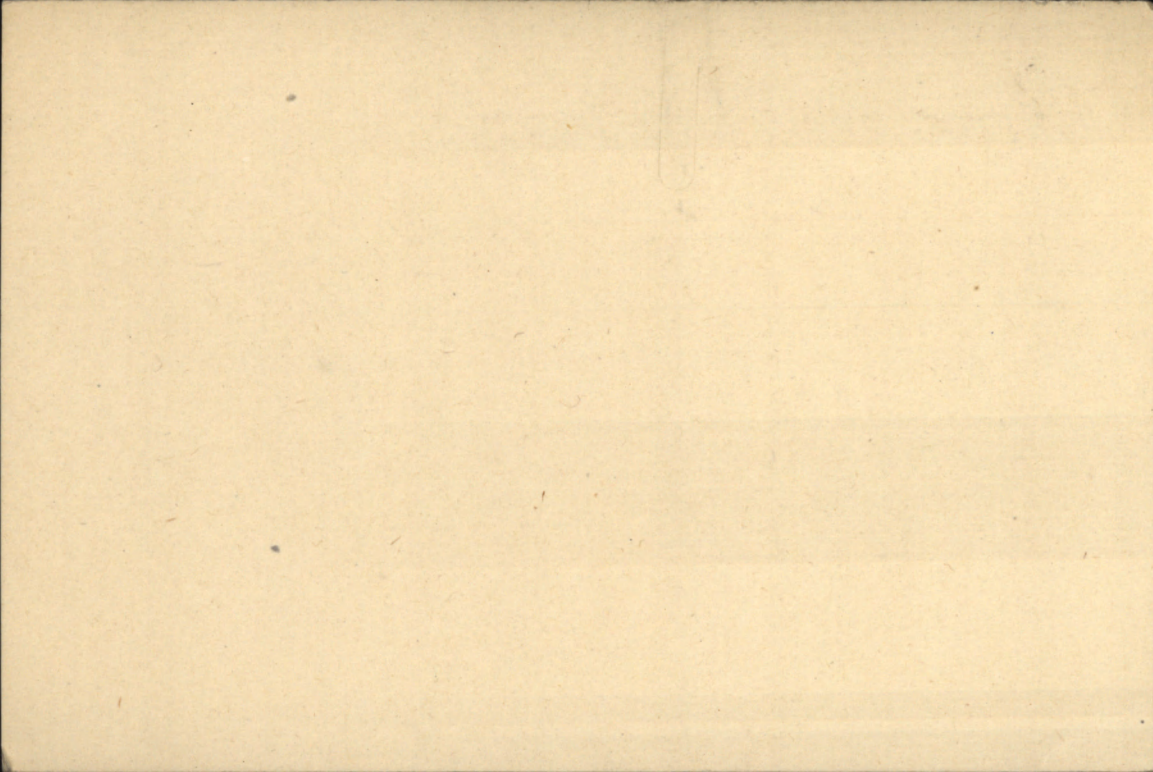
T.O.S. 6-11-15

UNIT *93rd Battalion C. I. F.**D.O.#12-12-11-15*

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915- Nov. 6</i>	<i>1915- Nov. 24</i>	<i>✓</i>	<i>Late 45th Regt</i>	<i>D.O.#12-12-11-15</i>

UNIT SAILED
JUL 15 1916



No. 724542 RANK

Pfc
L. Harph

NAME

Cross. A.

D.

T. O. S.

UNIT

109th. Battalion.

Transferred from 93rd Bn.

25-11-15. D. O. S. 25-11-15.

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Nov 25	1915 Nov. 30	✓		
	Dec.	✓		
1916	Jan. 1916	✓		
	Feb.	✓		
	Mar.	✓		
	April.	✓		
	May.	✓		
	June.	✓		
	July	✓		
			Pvt. 1. / Corp. 12-5-16.	S.O. 149 of 12-5-16.

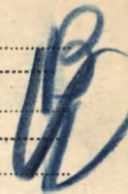
UNIT SAILED
JUL 23 1916



azt.
D
Number

724542

Rank

Spr. 

Surname

CROSS

Christian Name

Alfred David

Units

^{td.} Can Rly Tps Theatre of War France

Date of Service

25-3-18

Remarks

97 Pottinger St

Latest Address

Box 451 Lindsay, Ont.

Roll No.

"B" Page 21501

200m. - 6-21.M.

DATE AND PLACE OF ORIGIN

* DUE TO SERVICE
* NOT DUE TO SERVICE

HOSPITAL AS AN ADMISSION

WHERE FROM)

UNIT

IN CATEGORY

INVALID

WHERE TO)

CONDITIONS DIAGNOSED

ADDRESS

HOSPITAL

STATION

* CROSS OUT CONDITION NOT APPLICABLE.

DESP NOV 28 1920
REG 11
3656

(OVER)

Surname *Cross* H. Q. *649.C-3962*

Christian names *Alfred David* M. D. No. *92*

Regtl. No. ~~219949~~ *724542* Rank *Pl. Lt. Col.* T. O. S. *19*

Unit ~~88th~~ *109th* Reason *"Demob"*

original enlistment: *9-5-15*
A. U. S. No. 77-7-26-10-15-3 Auth. *100950 of 5-11-19*
21010

Next of kin *Cross Mrs. Alice* Relationship *Wife*

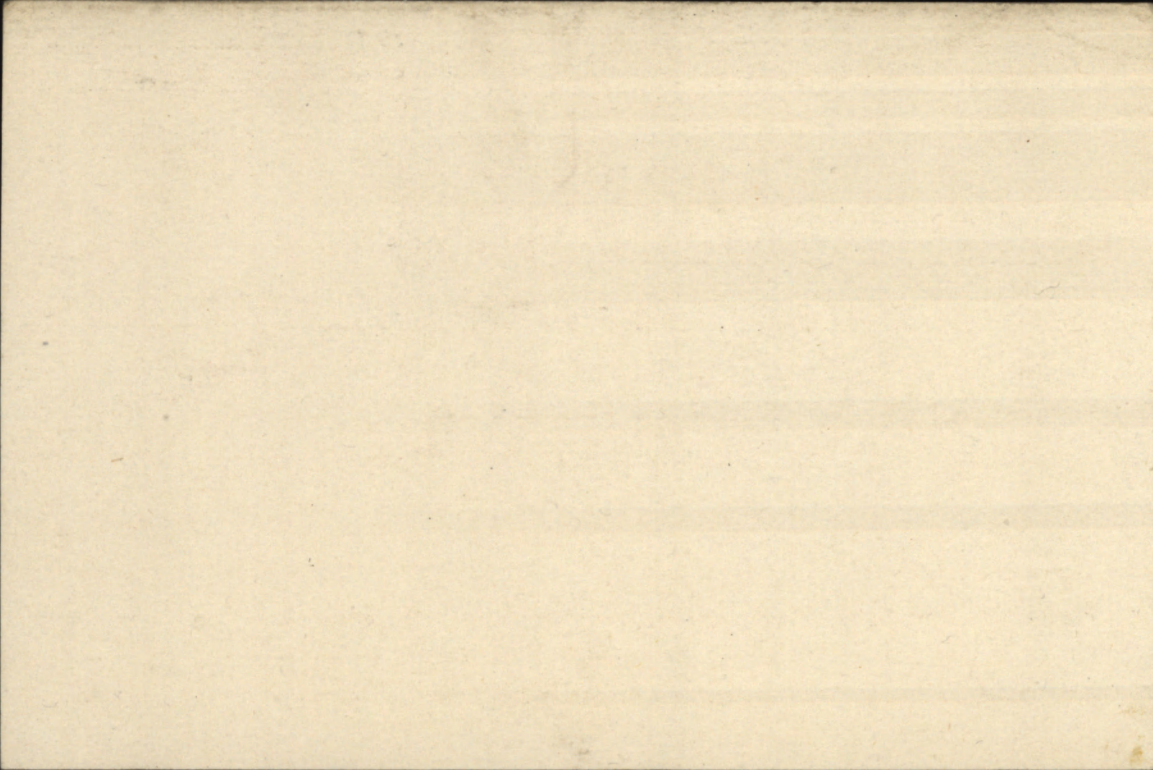
Address *Rattinger St. W.* Also notify:

Box 451, Lindsay, Ont.

BORN—Place *England Ilford Essex* Date

ATTESTED—Place *Lindsay, Ont.* Date *Nov. 12th 1915*

O/S *23-7-16 1510* R/C *27-3-19 291 Sgt.*
10 25



No. 219749 RANK

Pte

NAME ~~Cross A. D.~~
Cross A. D.

T. O. S. 1-8-15
5060 1-8-15-

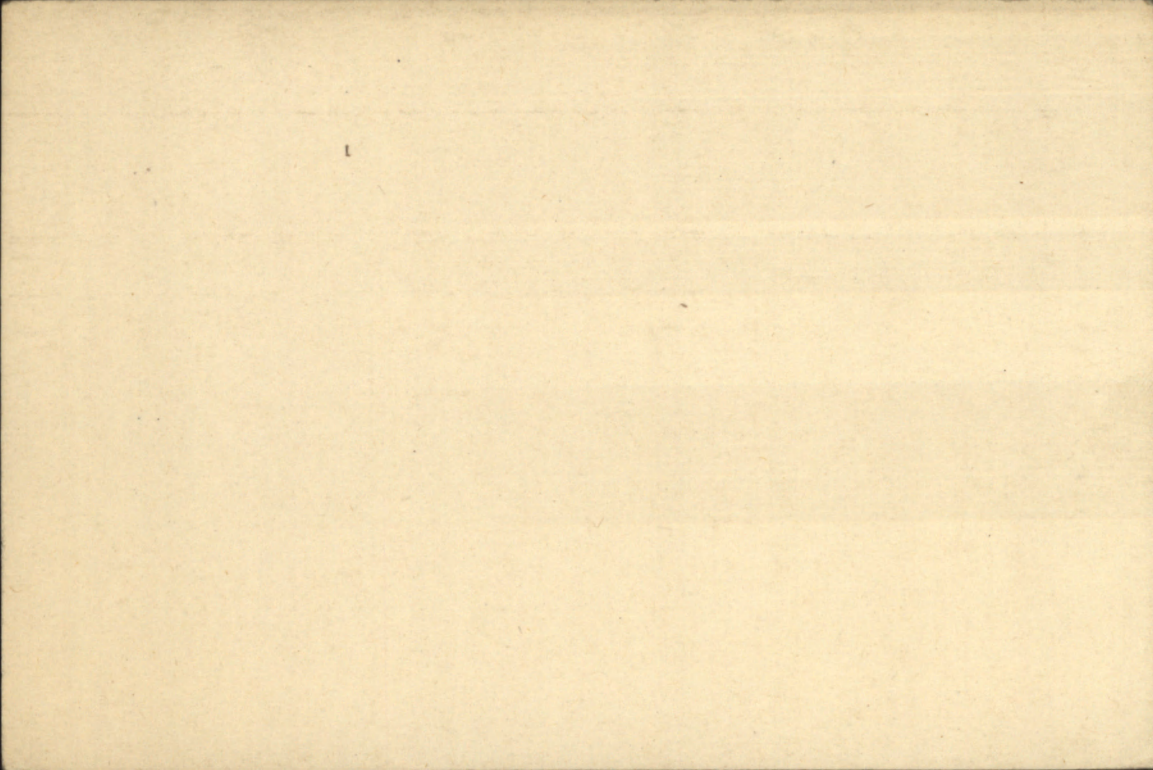
UNIT 45th Victoria Regt
O. S. Cont

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Aug 1	1915 Aug 31	✓	Transferred to 80th Bn 25-9-15.	00 92 25-9-15-
Sept 1	Sept 28	✓	Charon on 80th Bn paybook	
Sept 29	Sept 30	✓	Dischd. (M. U.) 26-10-15	D. O. 45. 26-10-15.
Oct 1	Oct 26	✓		

UNIT SAILED
MAY 16 1916

a/c closed by payment. S.



Temp. Rec. Sheet

724542

~~119~~ Bin

Receipt Cross A.S.

6⁸/₁₇ 5 Div. at S/S Ngk. Willey 3.8.17 Str. C. 218 R₁₁ N₁₁ M.

3/3/18. do. bears atia from do 16/2/18 Plat of
to. now atia from 119. Wm

17/3/18. Ng. S. Div. bears to be Willey 15/3/18. Plat 011.
ata. Prudential. Wm
C.R.S.

file in Enw
2COR

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12
50m.--7-16
H. Q. 1772-39-819

To Whom *Mrs Alice Cross*
Address *Box 451
Lindsay Ont*
Rate *15⁰⁰ Aug 1916
2M 8⁹/₁₆ 27¹⁰/₁₆*

By Whom Assigned *Cross A. D.*
Regtl. No. *Sept. 724548 9721543*
Rank *L cpl*
Corps *109th Battery*

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				



11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60
61
62
63
64
65
66
67
68
69
70
71
72
73
74
75
76
77
78
79
80
81
82
83
84
85
86
87
88
89
90
91
92
93
94
95
96
97
98
99
100

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 50m.-6-16.
 1772-39-819

Sheet No. 2.

Mrs Alice Cross

Name of Soldier

Cross A. D. R/cpl.
724548 - 109th Battalion

PAYMENTS.

L. L. Job 4503. -Req. 6332.

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>15⁰⁰ Aug 1-16</i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		<i>023909</i>	<i>45</i>	
Nov.		<i>829488</i>	<i>15</i>	
Dec.		<i>M35264</i>	<i>15</i>	
Jan.	<i>1917</i>	<i>E37868</i>	<i>15</i>	
Feb.		<i>E44300</i>	<i>15</i>	<i>15P</i>
March		<i>848846</i>	<i>15</i>	<i>15-CH</i>
April	<i>1916</i>	<i>891</i>	<i>15</i>	<i>15-15. D 891 Can 28/3/17. 91M</i>
May		<i>B7247</i>	<i>15</i>	<i>15-R</i>
June		<i>R14045</i>	<i>15</i>	<i>15-BW</i>
July		<i>F21185</i>	<i>15</i>	<i>C</i>
Aug.		<i>L28276</i>	<i>15</i>	<i>L</i>
Sept.		<i>N34978</i>	<i>15</i>	<i>O</i>
Oct.		<i>A25869</i>	<i>15</i>	
Nov.		<i>A37135</i>	<i>15</i>	<i>25-E</i>
Dec.		<i>K55750</i>	<i>15</i>	<i>25-F</i>
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

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

SEPARATION ALLOWANCE

Name *Mrs. Alice Cross* Name of Soldier *Cross, Alfred Davis*
 Address *63 Albert St. W.
 Lindsay Ont.* Regtl. No. *124542*
 Rank *Pts.*
 Corps *109th Battⁿ*
 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				



11

11

11

11

11
11
11
11
11

11
11
11
11

11
11
11
11
11

11

11

•



SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

Mrs Alice Cross

PAYMENTS ^{wife} *Pls*

Name of Soldier

Cross, Alfred Davis

724542

L. L. Job 89002.-Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	M 644	40.	40
May		J 5374	20	20
June		M 8239	20	20
July		W 9211	20	20
Aug.		M 13072	20 -	20
Sept.		J 15230	20	20
Oct.		J 17658	20 -	20
Nov.		M 22517	20	20
Dec.		J 1589	20	20
Jan.	1917	M 26833	20	20
Feb.		M. 30591	20	20
March		M 33818	20	20
April		M 628	20	20
May		J 3938	20	20
June		Q 7274	20	20
July		P 10787	20	20
Aug.		T 14061	20	20
Sept.		J 16964	20	20
Oct.		Y 22525	20	20
Nov.		O 25760	20	20
Dec.		A 17600	20	20
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

5300

440

MILITIA AND DEFENCE
SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

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



A.G.R. Rank Name **CROSS, Alfred David** ✓ Reg'l No. **724542** ✓
 Unit **109th Bn.** If in perm. Corps, }
 What Unit? } **Lindsay,** Married or Single **Married** ✓
 Place and Date of Enlistment **12th Novr., 1915.** Place of Birth **Ilford, Essex,** ✓
England.
 Name and Address, Next-of-Kin **Alice Cross,** ✓
63 Albert St., N. Lindsay, Ont. ✓ Relationship **Wife.** ✓

Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship

N/E. R.B. No. **17260**
 File R.L. **Can OR**
 Category

Discharge, Date and Place Reason Character

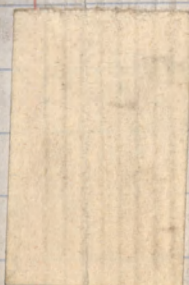
H. W. & V., Ltd.—7165-16.

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					
22-9-16	109 th Bn	Transfers Loc. Cas. C.C.A.C. Braunsdott		7-9-16	Part II D.O. 266 } PT II D.O. 396 X D.O. 288 } C.C.A.C. 16-9-16
22-9-16	do	Attached from C.C.A.C. ^{for R.B. P.E. C.A.}	"	8-9-16	Part II D.O. 266. } 16-9-16
14-9-16	6606	For as Loc Cas and shown on com at 109 th Bn for P.B.D. Pay Rat Arts cltd		8-9-16	PT # 0396
8-12-16	109 Bn	attached to 124 Bn	Witley	8-12-16	343
9-12-16	ob. 124	Attached for all purposes	Witley	8-12-16	" 265
17-1-17	H2 Witley	Attached to H2	Witley	18-12-16	- 17
22-2-17	H2	H2 Witley now known as 2 nd 5 th Can Division	"	14-2-17	" 52
4-5-17	P st CORP.	T.O.S. from C.C.A.C.	W. Sandberg	10-3-17	" 56
29-5-17	✓	S.O.S. to 12 th Res.	✓	17-5-17	" 81 (P st No. 1754/16, 17) ^{12th Res.}

STOP
#12

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.				
16.7.17	12 th Bn.	In Command A.Q. Willey	8 handling	26.6.17	Pt II - 175
6-8-17	—	S.O.S. on transfer to 185 Bn.	Et Sandling	3-8-17	Pt II - 193 + Pt II 219 of 8/17 185 th Bn
8.8.17	185 th Bn.	In Comm. 3 Can Div No. 1 for RQ & S.	A. J. Key	3-8-17	79. (5 Div Hqrs 202182/68/17)
18.9.18	.	Sos on trans to 119 th Bn	"	16.2.18	300. 12. (119 Bn 202182/20/2/18)
3-3-18	Hqrs 5 Div	bease to be atch from 185 th Bn			
		Re atch from 119 th Bn	Willey	16-2-18	209.
17-3-18	Hqrs 5 Div	bease to be atch	—	15-3-18	2011.
15-3-18	119 Bn	SOS to L.R. Troops	"	15-3-18	110 1096 R.I.D. 44 th / 15-3-18
23-3-18	C.R.T.D.	SOS to 6 th C.R.T.D. / Seas.	Sp. Purfleet	22-3-18	Pt II 082 + 6 th C.R.T.D. 3195-4-18
15-3-18		Revised to 4 from being 103	4/6 pl	15-3-18	Deleted by Pt II 116/26/18 Pt II 07/11.
30-1-19	6 th C.R.T.	R.O.S. posted to C.R.T.D. for dem	Sp. Field	25-1-19	Pt. II: 6. (C.R.T.D. Pt II 27)
27.2.19	C.R.T.D.	S.O.S. to M.D. 2. Rhyl	" K. Ash	26-2-19	Pt. II 53 (In D. 2. 70. 51. 1-2-19 8/1-3-19)
		27-15-82		19.3.19.	
22-3-19	MD ₂ W	SOS to Canada	" Rhyl	19-3-19	— 69

RECORDED
 15-3-18



SEPARATION ALLOWANCE

Name *Mrs. Alice Cross.*Name of Soldier *Cross. A.D.*Address *63 Albert St N^o.*Regtl. No. *219749.**Box 451. Lindsay
Ont*Rank *Pte*Corps *PO - B.A.M.*

Relation to Soldier

To what Corps belonging

wife, child or mother

when called out

Wife

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.		<i>07663</i>	<i>54</i>	<i>58 Discharged 26/10/15 (P.M.S. 28/10/15) ap closed.</i>
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) CROSS. A.D.
 REGIMENT 6th B.R.T. RANK Sapper No. 724542
 Date of Examination in England 22/2/19 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 20. 14.
2. EXTRACTIONS 19.
3. CROWNS _____
4. DENTURES _____
 - (a) Full Upper _____
 - (b) Part Upper _____
 - (c) Full Lower _____
 - (d) Part Lower _____

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 _____
- (c) In France _____

KNOTTY ASH CAMP,
LIVERPOOL,

Signature of Dental Officer [Signature]

C.R. 22 A.D.

2542

2/1/19

H. R. J.

2542

20.14
19

2/1/19

SERVICE AND CASUALTY FORM (Part I).

Army Form B. 103-I.
Part I.

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

(10) Enlistment (b) (12) Service reckons from (date) (14) Any subsequent variations (if any) of conditions of service	(11) Engagement (c) (13) Special conditions (if any) of enlistment (d) (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 (vide Army Order 93 of 1917)
				Industrial Group No. Trade or Calling Married or Single Particulars of Trade Test Occupation Cards despatched on (date) Second Occupation Card despatched on (date)

(17) Next of Kin (18) Demobilizer (f) (19) Pivotal-man (f) (20) Qualifications (g)	(Place) (Date) or (21) Corps trade and rate	(Signature of Posting Officer)
(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, Shoem-smith, &c.

Army Form B. 103 (II.) to be gummed on here if required.
Nothing to be written in this margin.

W1889—PP 1150 1M 5/18 G.W.P. Co (34/90)

(A) Report*		(B)	(C)	(D)	(E)	(F)
Date.	From whom received	Authority of Part II. of Orders	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.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer

Attached C.C.C. Kinmel Park for return to Canada. Part II Order No. _____ Ceases to be attached C.C.C. Kinmel Park on embarking for Canada. Part II Order No: 69-22-3-19
Ed Terman Capt
 for Commanding 2 Wing, Kinmel Park Camp.

26 FEB 1919

R.M.T. MINNEKAND
 EMBARKED 19 MAR 1919
 DISEMBARKED 28 MAR 1919

Nothing to be written in this margin.

MAR 19 1919 O.S. T.O.S. No. 2 DISTRICT DEPOT, TORONTO. 1919

MAR 29 1919 S.O.S. (DISCHARGED FROM H. M. S.) No. 2 DIS. DEPOT, PART II O.S.

PART II O.S. 55

R.W. Shuid

Lieut.

For O. C. No. 2 District Depot

Casualty Form - Active Service.

Second Sheet

Regiment or Corps *Can Ry. Troops. 109th Bn*
 Rank *Sapper* Surname *Cross* Christian Name *Alfred David*

Religion *D* Age on Enlistment *20* years *12* months

Enlisted (a) *25/11/15* Terms of Service (a) *5y 6m* Service reckons from (a) *25/11/15*

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

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

Occupation 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...			
<i>15/3/18</i>	<i>L.R.S Depot</i>	<i>Taken on strength</i>	<i>Flu fleet</i>	<i>15/3/18</i>	<i>Part II DO 74</i>
<i>15/3/18</i>	<i>do</i>	<i>Reverts Sapper on being T.O.S.</i>	<i>do</i>	<i>15/3/18</i>	<i>Part II 74</i>
<i>23/3/18</i>	<i>do</i>	<i>S.O.S to 109th Bn C/W</i>	<i>do</i>	<i>22/3/18</i>	<i>Sept 17 82</i>
					<i>W.S. Williams Capt. R.C.</i>
					DEPT CAN. RLY. TROOPS.
<i>22.9.16</i>	<i>109th Bn</i>	<i>Attached from C.C.A.C.</i>	<i>B Shott</i>	<i>8.9.16</i>	<i>Pres + 266 1556P</i>
<i>14.9.16</i>	<i>C.C.A.C.</i>	<i>Taken on strength of 9 Sappers beginning to 109th Bn for P.B.D + Vay Nat. Res. Clo & D.</i>	<i>Yolkestone</i>	<i>8.9.16</i>	<i>— 396</i>
<i>8.12.16</i>	<i>109th Bn</i>	<i>Att to 124th Bn</i>	<i>Hutley</i>	<i>8.12.16</i>	<i>— 343</i>
<i>9.12.16</i>	<i>124th Bn</i>	<i>att for all purposes</i>	<i>do</i>	<i>8.12.16</i>	<i>— 265</i>

(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				
22.2.17	405 th Can Dis	H.A. Witley now known as H.A. 5 th Can Dis	Witley	14.2.17	RA # 53
16.7.17	12 th Res.	6 th comm. H.A. Witley	E Sandling	26.6.16	175. WSP
					LIEUT. FOR LT: COL: I/C RECORDS, C.O.M.F.
5-4-18.	6 CRT Arrived in France as Rein. & TOS Unit			25-3-18.	D.O.31
26-3-18.	CGBD	Left for Unit	Field	26-3-18.	N.R. 1093
30-3-18.	6 CRT	Joined Unit	do	27-3-18.	B.213
24.1.19	68 B.D.	Transp. being posted to 6 R.I. Depot for purpose near of demobilisation	Knolly Ash Ripool	25.1.19	WR H-6-1919 Chapwell
					Lieut. for Lt.-Col., A. A. G. Canadian Section, G. H. O. 3rd Echelon, B. E. F.
-1 FEB 1919	CRTD	Taken On Strength	Knolly Ash	31/19	part 27
27 FEB 1919	CRTL	5 CRT to King's	ACTIVE ASST		PART 21 23
		Para. MID. WIL 2			
					Compton Lewis Canadian Record Troops

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

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

250M.—1-16.

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 109th OVERSEAS BATTALION, C. E. F.

Regimental No. 424542 Rank Private Name Cross Alfred David

Enlisted (a) 25-11-15 Terms of Service (a) 2 of W. Service reckons from (a) 25-11-15

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

Extended _____ Re-engaged _____ Qualification (b) Boiler Maker.

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				

		Embarked Canada	Halifax	24.4.16	
		Disembarked England	Liverpool	31.7.16	Secas P. No 396
22.9.16		Transferred to C.C.A.C.	Bramshott	13.9.16	Part II Order 266. 109th Overseas Battalion, C. E. F.
2/12/16.	Oct 09	Transferred to 124th Bn.	Witley	2/12/16	No. Pt II No. 413.
16.1.17	124th Bn.	Attached to H.Q. C. M.P. Witley Camp	Witley	11.1.17	Part II Order 16 ADJUTANT, 124th BATTALION C.E.F.
17.1.17 18.12.16	R.O. 217 Witley	att'd S.S. No 2 Canadian Troops	Witley	17.1.17 18.12.16	Part II #17

W. Aslett Capt.
ADJUTANT
109th Overseas Battalion, C. E. F.

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

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				
4.5.17 10.3.17	RECORD OB 12th Bn	Taken on Strength 1st B.O.R.D.	Sandling	10.3.17	Part II D.O. # 56 - 4517 ✓
29. #5.17.	OB 1st B.O.R.D.	Transferred to 12th Res. Bn.	- do -	17.5.17	Part II D.O. # 788126517 ✓
16/7/17	12th Bn.	T.O.S. 12th Res. Bn.	E. Sandling	26/6/17	Part II B.O. # 175
6.8.17	12th Bn	S.O.S. to 12th Bn 185th Bn	do	3.8.17	Part II 193 ✓ Lieut i/c Records 12th Res. Bn. C.M.F.
8/8/17	OC 185th Bn	Taken on Strength	Witley	3-8-17	Part II D.O. 219 J. Macdonald Major & Adj 185th Canadian Infantry Bn. (Cape Breton Light Infantry)
8/8/17	OC 185th Bn	on command to 5th Canadian Divisional H. Qrs for Rations quarters duty & discipline	Witley	3-8-17	Part II D.O. 219 J. Macdonald
18/8/18	OC 185th Bn	S.O.S. of 185th Bn on transfer to the 119th Bn	Witley	16-2-18	Part II D.O. # 12 J. Macdonald Major & Adj 185th Canadian Infantry Bn. (Cape Breton Light Infantry)
20/2/18	119th Bn	Taken on strength	Witley	16/2/18	Part 2 D.O. # 9
3-3-18	5th Can. Div. HQ Cdn Troops	Attached HQS. 5th Can. Div. Begs to be attached to HQS Canadian Troops	Witley	16.2.18	Part II # 9
17-3-18	119th Bn	Transferred to Bn. Railway Troops	Witley	15.3.18	Part II # 11 Lieut Commandant
15/3/18	119th Bn	Transferred to Bn. Railway Troops	Witley	15/3/18	Part 2 D.O. # 11 Lieut Commandant

Continued - Second Sheet

J. Macdonald
Lieutenant
Adjutant
for C.O. 119th Canadian Infantry Battalion

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge.

Class A
 No. 151243
 issued.

THIS IS TO CERTIFY that No. 724542 (Rank) Spr.

Name (in full) Alfred David Wood enlisted in
 the 109 Bn.

CANADIAN EXPEDITIONARY FORCE at Lindsay on the 12
 day of Nov. 1915

HE served in 6th B.T.

and is now discharged from the service by reason of Demobilization.
Medical Unfitness.

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

Age 38

Height 5-8"

Complexion Dark

Eyes Blue

Hair Black

Cross A W

Signature of Soldier

Marks or Scars

Tattoo mark R arm
"Heart + anchor"

Date of Discharge

No. 2 DISTRICT DEPOT
 MAR 29 1919
 TORONTO

Issuing Officer

For O.C. No. 2 District Depot.

Rank

Date MAR 29 1919 1919

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

THIS IS TO CERTIFY THAT NO.

(Rank)

enlisted in

Name (to full)

the

CANADIAN EXPEDITIONARY FORCE at

on the

day of

HE served in

Organization

and is now discharged from the service by reason of
Medical Reasons

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

Mark or Stars

Age

Height

Complexion

Eyes

Hair

Signature of Soldier

Issuing Officer

Date of Discharge
MAY 2 1918
TORONTO

C. C. No. 2111111111

Name

Date

18

A fee of 25 cents on this certificate will be applied, any person holding same is requested to forward it in an
envelope addressed to the Secretary, Military Council, Ottawa, Canada.

1111111111
1111111111
1111111111

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 724542.....

(3) Full Name of Soldier Alford David Cross.....

(4) Place of Birth Barking Road, London, Eng......

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

(6) If married, state,
(a) Full name of your wife Alice Cross.....

(b) Present Postal Address 13 Albert St. Lindsay Ont. Box 451.....

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

(8) Have you any children? 2.....

If so, give number of boys and girls 2 Boys.....

Also their names and ages.....

William Cross, 14
Alfred " " 19

(9) Is your Father alive? *No*

If so, state name and address *nil*

(10) Is your Mother alive? *No*

If so, state name and address *nil*

(11) If your Mother is a widow *no*

Are you her sole support, or not? *no*

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

nil

(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.

nil

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

yes

(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*

J. J. Cannon
Officer Commanding Major
109th Overseas Battalion, C. E. R.

724542.

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Cross Christian Name Alfred David

Examined { on 28th day of October 1915
at Lindsay
Birthplace { City or Town Ward Essex
County England

Approved by J. McCulloch Capt.
Medical Officer
Rank 109th Overseas Battalion, M.O.-F.

Apparent age 34 years
Trade or occupation Boilermaker
Height 5 Feet 5 Inches.
Weight 135 Lbs.
Chest measurement { Minimum 32 inches.
Maximum expansion 36 inches.
Physical development Good
Small-Pox Marks None

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
<u>21-2-16</u>	<u>Fit</u>	M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm None Right None Left None
Number Five

Date	Result	VACCINATIONS.
<u>9-9-15</u>	<u>Nil</u>	<u>J. McCulloch</u> M.O.
<u>25-1-16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
		M.O.

When Vaccinated last Sept 9th 1915
January 25th 1916
(a) Marks indicating congenital peculiarities or previous disease Mark of operation for varicella
(b) Slight defects but not sufficient to cause rejection Slightly flat foot

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>18-4-16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
<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.

Re-enlisted on 28th day of October 1915 at Lindsay

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>Overseas Conty Regt</u> <u>45th Wick Regt.</u>	<u>724542.</u>		<u>28.10.15.</u>
Transferred to..	<u>109th</u> <u>1 CRT</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Bramshott</u> <u>Bramshott Camp, Hants.</u>	<u>8/9/16</u>	<u>Flat feet</u>	<u>permanent base</u> <u>St. Stewart Maj</u> PRESIDENT, MEDICAL BOARD, BRAMSHOTT.
<u>Bramshott</u> <u>Bramshott Camp, Hants.</u>	<u>28/11/16</u>	<u>flat feet</u>	<u>Class. C (ii)</u> <u>C. Cooper Col</u> PRESIDENT, MEDICAL BOARD, BRAMSHOTT.

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.

M. F. B. 313.
100M.—5.15.
H. Q. 1772-39-439
APPROVED.
Wiley 23.4.17. Flat feet A2. Stewart Capt

2013 6-9-17. 100M

EXAMINATION

BY

STANDING MEDICAL BOARD, BRAMSHOTT.

8 SEP 1916 1916.

No. 724542 Unit 109th Battalion, Rank L/Cpl.

Name CROSS, Alfred David, Age 35

Examination held at Bramshott, Hants.

DISABILITY. Flat feet.

~~Overseas~~—Local.
(scratch one out)

Present Condition: Otherwise fit.

Board recommends:

1. Fit for Duty.
2. Fit for duty after.....weeks physical training.
3. Fit for Base duty.....weeks.
4. Fit for Permanent Base Duty. Yes.
5. Discharge.

Signatures:

R. Stewart Maj Pres.

Members { *H. Mackenzie Capt*

H. Macfarlane Capt

Approved.

Bramshott 8 SEP 1916 1916.

[Signature] Major.
D.A.D.M.S. for A.D.M.S. & for G.O.C.
Canadian Troops, Bramshott.

EXAMINATION

STANDING MEDICAL BOARD BRANSHOTT

DISABILITY

H. Branshott

EXAMINATION BY STANDING MEDICAL BOARD, BRAMSHOTT.

28-11-1916.

No. 724542 Rank Lieut Name Cross, Alfred D.

Local Unit 109th Overseas Unit _____ Age 35

Examination held at Bramshott, Hants.

DISABILITY.

Flat feet

~~Overseas~~ Local.
(scratch one out)

PRESENT CONDITION.

Reboard

Board recommends:

Class. C. (iii)

1. Fit for Duty.
2. Fit for duty after _____ weeks physical training.
3. Fit for Base duty _____ weeks.
4. Fit for Permanent Base Duty.
5. Discharge.

Signatures:

Members { *C. E. Cooper* ^{*Major*} *Pres.*
J. A. Nicholson ^{*Major*}
H. King ^{*Capt*}

Approved.

Bramshott Nov. 28 1916.

P. Stewart ^{*Major*}
for A.D.M.S. + G.O.C.
Canadian Troops, Bramshott.

EXAMINATION

BY

STANDING MEDICAL BOARD, BRAMSHOTT

18-11-1910

Noted by the Standing Medical Board, Bramshott, that the following person has been reported as being unfit for service.

Name of the person: _____

Examination held at Bramshott, Hants.

DISABILITY

Over _____
(entered one only)

PRESSENT CONDITION

Board of the Standing Medical Board, Bramshott, Hants.

1. Mr. J. H. Day

2. Mr. J. H. Day

3. Mr. J. H. Day

4. Mr. J. H. Day

5. Mr. J. H. Day

Signature: _____

Members

Approved

1910

General Inspector

PROCEEDINGS OF A MEDICAL BOARD

Dated at Witley 23. 4 1917.

No. 724542 RANK A. Cpl NAME CROSS A D

LOCAL UNIT 5th Div Ho Qrs OVERSEAS UNIT _____ AGE 36

Examination held at Witley

DISABILITY.
~~Overseas~~ - Local.
(strike out one)

Flat feet

PRESENT CONDITION

Reboars - feet moderately flat - but
Should be able to carry on

A 11

BOARD RECOMMENDS:-

1. Fit for duty _____
2. Fit for duty after _____ weeks' physical training.
3. Fit for Temporary Base Duty _____ weeks.
4. Fit for Permanent Base Duty _____
5. Discharge _____

Signatures:-

J. G. ... Capt. ... President.

Members.

C. B. ... Capt. ...

APPROVED

Dated April 23rd 1917. J. H. Cook

for A.D.M.S.,

Witley

12-2-1911

(15-300)

1911

1911

1911

1911

1911

1911

1911

1911

1911

1911

1911

1911

1911

2

FIRST PAYMENT OF SEP. ALICE. W. S. G.
DATE TORONTO, ONT. APR - 9 1919 P. 880.
CHEQUE No. 242587

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

1. Christian names Alfred David 2. Surname Cross
3. Rank Spr. 4. Original Unit 109th Bn 5. Reg. No. 724542
6. Address, in full, to which future payments of gratuity are to be forwarded
7. Date of enlistment in the C.E.F. 12.11.15
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Alice Cross
9. Relationship of such dependent wife
10. Address, in full, of such dependent Mrs Alice Cross
Box 451 Lindsay, Ontario
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? no.
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States?
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service.....
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served.....
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department no.
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.?

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments and under what regimental numbers and units. *no.*
19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid. *no.*
20. Have you been issued with a War Service Badge? If so what class?
21. Have you, during the present war, served in the Imperial Forces? *no.*
22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled. *no.*
23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *yes*
- (b) If so, was such reversion in consequence of misconduct or inefficiency? *no.*
24. Are you now serving in the C.E.F.? If not, give:—(a) Date of discharge
MAR 2 1919 (b) Reason for discharge
DEMOBILIZATION
25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit.....
26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit in which you served at the front, and dates of such service with that unit.....
27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?.....
- (b) If so, are you in receipt of full pay and allowances from that Department?.....

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: *Alfred David Cross*

Place of Residence: *Lindsay Ontario*

Declared before me at: *K.P.C.*

This *16th* day of *March* 19*19*

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths under P.C. 2767, dated 11th Nov., 1918.

D. Graham
Mag.

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....
.....

Certified Correct

District Paymaster.

MEDICAL HISTORY SHEET.

219749

Surname *Cross* Christian Name *Alfred David*

Examined { on *3rd* day of *August* 1915
at *Rundsay*

Approved by *J McCulloch*
Rank *Lieut* M.O.

Birthplace { City or Town *Ilford*
County *Essex England*

Apparent age *34 years*
Trade or occupation *Boiler-maker*
Height *5* Feet *5* Inches.
Weight *128* Lbs.
Chest measurement { Minimum *32* inches.
Maximum expansion *36* inches.

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

Physical development *Good*
Small-Pox Marks *None*

Vaccination Marks { Arm Right *One* Left *Two*
Number *Two*
When Vaccinated last *Sept 9 1915*

Date	Result	VACCINATIONS.
<i>9.9.15</i>		M.O.
		M.O.
		M.O.

(a) Marks indicating congenital peculiarities or previous disease *Mark of operation for varicocela*

(b) Slight defects but not sufficient to cause rejection *Slightly flatfooted*

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
		M.O.
		M.O.
		M.O.

Enlisted on *3rd* day of *August* 1915 at *Rundsay*

	CORPS.	REG'T NUMBER.	HABITS.	DATE.
Joined on enlistment	<i>Overseas Contingent</i>	<i>45 Victoria Regt.</i>		
Transferred to.. ..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

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

MARRIED OR SINGLE *Married*
 PLACE OF BIRTH *Ilford, Essex, Eng*
 NAME AND ADDRESS OF NEXT OF KIN *Alice Cross*
63 Albert St. N. Lindsay Ont
 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

REG'L. No *724512* RANK *Pte* NAME *Cross Alfred David*
 IF IN PERM. CORPS / WHAT UNIT UNIT *109th Bn* TRANSFERRED TO *C.C.A.C.* DATE *1/10/16* AUTHORITY *80266*
 PERMANENT FORCE ALLOWANCES TRANSFERRED TO *Brit Nos.* DATE *31.5.17* AUTHORITY
 PLACE OF ATTESTATION *Lindsay Ont.* TRANSFERRED TO *185th Bn* DATE *1-11-17* AUTHORITY *Jon Roll*
 DATE OF ATTESTATION *Nov 12 - 1915* TRANSFERRED TO DATE AUTHORITY
 ASSIGNED PAY MONTHLY \$ *15 00* DATE EFFECTIVE *Aug 1 - 1916 m.d.*
 PAYABLE TO *Alice Cross Lindsay Ont* RELATIONSHIP *wife*

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

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)

Checked *Edward*

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS					
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1	2	3	4	1	2	3	4				CREDIT	DEBIT								
			\$	C.			\$	C.			\$	C.																				No.	DATE	No.	DATE	No.
July 31															4 10																					
Aug 31	31	1 00	31		31	10	3 10								34 10	79816								973		15		2473	13474							
Sept 30			30				3								33	4031816								730		15	770	30	16474					80259 78# 27 days 7 20 80266 Trans C.A.C. 13-9-16		
Oct 31	31		31		31		3 10								34 10				112 21-9-16 149 15-10-16				2 44 7 30		15		5473 24 44	2883								
Nov 30	30		30		30										34 10				177 31-10-109# Bn.				973		15		2473	3410								
Dec 31	31		31		31		3 10								34 10				223 15-11 regd Bn. 211 30-11 109# Bn.				7 30 487		15		2717	4103								
1917 Jan 31	31	1 00	34 10				15 30								34 10				17 12/1 2nd. W. indy				7 30		15		15 00	6013								
Feb 28			30 80												30 80				484 21-12 124 Bn.				24 33		15		4663	4430								
Mar 31			34 10												34 10				131 13/2 5th. W. indy				7 30				6367	1473								
Apr 30			33 00												33				80 24/1				7 30				15	15	3273							
May 30			33												33				263 26/2				12 70				15	15	5073						Trans Brit Hosp. 31.5.17.	
31	1		1 10												1 10				237 26/2				7 30				15	15	5783							
June 30			33												33				255 26/2				487				15	15	6983							

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

NAME: **CROSS. Alfred David.**

EFFECTIVE DATE: **August 1st 1916**

EFFECTIVE DATE: -

NUMBER: **724 542.**

AMOUNT: **\$15.⁰⁰**

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 DATE EFFECTIVE RANK OR APPOINTMENT

Alice Cross (Wife)
Lindsay, Ont.
Stopped 1-3-19

Private.

*Kash
L 31 39
L R Ash
M 2*

UNIT AND TRANSFERS

ORIGINAL UNIT: **109th Bn.**

DATE ACCOUNT FIRST OPENED: **August 1st 1916.**

AUTHORITY DATE EFFECTIVE DATE LEDGER SHEET T'S'F'D UNIT TRANSFERRED TO

G.R.T. 1/4/5/3/14 1-4-18 31-3-14 C.R.T., dl. 185th BATTⁿ CAN

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

1/1/19 3554 C.R.T. 9/33

DAILY RATES OF PAY AND ALLOWANCES

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

1 - 10

PARTICULARS OF RENDERING NON-EFFECTIVE **Disch. to Canada 24/1/18 31/3/18 1/4/18 Kash in D. 2. L.P.C. Balance 162.37**

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
Mar.	Balance Forward.								34 68		
Apr.	L.P.	33		AR 35 28/4/18 6cd. 3/	7 14			15	45 54		
		33			7 14			15			
May	"	34 10		" 102 31/5 "	7 14			15	57 50		
		34 10			7 14			15			
June	"	33		" 247 22/6 "	3 57			15	71 93		
		33			3 57			15			
July	"	34 10		" 335 8/7 "	3 57			15			
		34 10		" 457 18/7 "	3 57			15	83 89		
		34 10			7 14			15			
Aug.	"	34 10		" 574 5/8 "	3 57			15			
		34 10		" 672 21/8 "	3 57			15	95 85		
		34 10			7 14			15			
Sept	"	33		" 789 1/9 "	3 57			15			
		33		" 898 25/9 "	3 57			15	106 71		afsd
		33			7 14			15			
Oct.	"	34 10		" 992 12/10 " (9)	3 73			15	122 08		
		34 10		" 1094 31/10 " (40)	3 73			15	118 35		
		34 10			7 46			15			
Nov	"	33		" 1222 15/11 " (1)	16 79			15	155 45		
Dec	"	34 10		C.A.S.				15	138 66		
Jan	"	34 10		"				15	157 76		
		161 20			16 79			45			

COMPILED BY *[Signature]*
CHECKED BY *[Signature]*

NUMBER 724542 RANK Sapper. NAME CROSS A.D.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1919	Balance forward								157 76		
Feb	P.P.	30	80	AR 1306 26/12 6CRS (6)	7 46				181 10		
				b. a. P.				15	166 10		
				" 1449 18/1 " (24)	3 73				162 37		
				" 5554 8/2 CRSD (67)	97 33				65 04		
				24005 19/2 End. (111)	4 02				61 02		
				" 5873 6/3 CR (112)	9 73				51 29		
		30	80					15	122 27		
				<i>Sts 19/3 Lt 27.</i>							

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..... DATE 24 Feb 1919

1. 1 (a) Unit CRTD (b) Regimental No. 724542 (c) Rank Spr
 (d) Surname Cross (e) Christian name Alfred David
 (f) Home address Lindsay, Ont. P.O. Box #451
 (g) Next of Kin Mrs Alice Cross (h) Relationship Wife
 (i) Address of Next of Kin P.O. Box #451, Lindsay, Ont

2. Age last birthday 38 Date of birth 8 Feb. 1880

3. Enlistment, or Appointment (if an Officer) (a) Place Lindsay, Ont (b) Date 28 Oct. 15

4. Personal description:
 (a) Height 5' 3" (b) Weight 135 (c) Complexion Dark
(stripped)
 (d) Colour of hair Dark (e) Colour of eyes Brown (f) Identification marks, Scars, etc. Mark of operation for varicose

5. Former trade or occupation Boilermaker

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.	117

	PERIODS	
	From	To
Canada <u>109th B In</u>	<u>28-10-15</u>	<u>24-7-16</u>
England <u>12th Res Bn.</u>	<u>31-7-16</u>	<u>25-3-18</u>
France or other theatres of War <u>6th CRJ.</u>	<u>25-3-18</u>	<u>28-1-19</u>

7. Original disease, or injury FLAT FEET

(a) Date of origin Prior to enlistment (b) Place of origin Canada
 (c) Cause Natural

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.)

marked weakness of arches both feet.

Occupation restricted to work not necessitating long standing & walking.

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.)

Objective General health & nutrition good
Both arches down. no fibrosis and full movements of joints.

Subjective Both states feet give him considerable pain if he has to walk more than five miles five miles taking his own time.

(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... as above Any other general condition... no

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

Had flat feet when enlisted. Was turned down from 80th B.T. prior to enlistment with 139th B. ordered B. Bramshott. Eng. 8-9-16 Flat feet - P. B. Taggart et Bramshott 25-11-16 Class C ii
At Westley Camp - 23-7-17 Flat feet Cat A ii and transferred to C B 3. Has been able to carry on in this unit.

10. (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).)

nil

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

no

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

(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.)

yes

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

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?

Life

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

nil

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)

no

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

yes

17. Recommendations. Cat B+

W. H. ...
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. D. Cross* 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

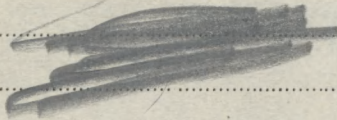
Spr. A. D. Cross Rank.
Signature of invalid examined.

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.

We concur except.

11 (b) no



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.)

137

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.)

Boards for return to Canada.

Auth. A.S. Let. 1/9083-11/11/18.

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.

na.

KNOTTY ASH CAMP, LIVERPOOL

Geo. F. Fuller Capt Comm President.

W. J. ... Capt Comm.

PLACE

DATE 21st Feb 1919

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

APPROVED BY

[Signature of Assistant Director]

Director-General of Medical Services.

DATE 21st Feb 1919

DATE

Proceedings on Discharge.

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

No. <i>219749</i>	
Rank <i>Private</i>	
Name <i>Alfred David Cross</i> <small>NOTE.—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company) <i>86th "Overseas" Battalion</i>	
Date of Discharge <i>26/10/15</i>	
Place of Discharge <i>Barriefield Camp.</i>	
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age <i>37</i> years <i>6</i> months.	Descriptive Marks. <i>Tattoo mark right arm Part of anchor.</i>
Height <i>5</i> feet <i>5 1/2</i> inches.	
Complexion <i>Sark.</i>	
Eyes <i>Blue.</i>	
Hair <i>Black.</i>	
Trade <i>Boilermaker</i>	
Intended place of residence. } <i>Pudsey</i> (To be given as fully as practicable.) } <i>Dist</i>	
2. The above-named man is discharged in consequence of <i>Being medically unfit.</i>	
<small>N.B.—The causes of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.</small>	
<small>To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.</small>	3. Conduct and character while in the service have been, according to the records, etc. <i>Very Good.</i>
	<small>N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company.</small>
4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.) <i>Boilermaker</i>	

*Noted -
EB
19.7.16.*

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

None

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

6. Medals and Decorations.....

None

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

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

(Place) *Barriefield Camp*
(Date) *26/10/15*

W G Ketcheron
COLONEL
D.G. 80th Battalion, C.E.F.
Commanding

8. Certificate to be signed by the Soldier on Discharge.

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

(Place) *Barriefield Camp* *A D Cross* (Signature of Soldier.)
(Date) *26/10/15* *A D Cross* (Signature of Witness.)

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

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

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

A D Cross (Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to..... (the date to which the Record of Service is completed)..... years *78* days.
Total..... years *78* days.

11. Confirmation of Discharge.

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

(Place) *Barriefield Camp*
(Date) *26/10/15*

(Signature) *W G Ketcheron*

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

List of Discharge Documents.

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

N.B. In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

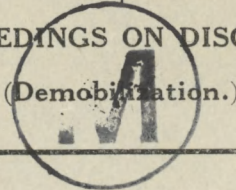
Service Badge
Class "A" No. 151243

M.D.2

TORONTO
Wife
RAILWAY - MAN

SHORT FORM.

SERVICE GROUP PROCEEDINGS ON DISCHARGE.
OCCUPATIONAL GROUP 21 (Demobilization.)



A.

1. No. 724542

2. Rank. Spr

3. Name. CROSS Alfred David

4. Unit. CRTD. 6th C.R.T. 109.

5. Date of Discharge MAR 29 1919 Place TORONTO, ONT.

6. Reason for Discharge DEMOBILIZATION
R.M.T. MINNEKAHDA
EMBARKED 19 MAR 1919
DISEMBARKED 20 MAR 1919

7. Authority. No. 2, D.D., Part II, D.O. No. 1000

8. Proposed Residence after Discharge Rossinger St.
Lindsay David

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.?

Cross A.D.

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place TORONTO, ONT.

Date MAR 29 1919

For [Signature]
O.C. No. 2 District Depot.
Signature (O. C. Discharging Unit.)



1911
 1912
 1913
 1914
 1915
 1916
 1917
 1918
 1919
 1920
 1921
 1922
 1923
 1924
 1925
 1926
 1927
 1928
 1929
 1930
 1931
 1932
 1933
 1934
 1935
 1936
 1937
 1938
 1939
 1940
 1941
 1942
 1943
 1944
 1945
 1946
 1947
 1948
 1949
 1950
 1951
 1952
 1953
 1954
 1955
 1956
 1957
 1958
 1959
 1960
 1961
 1962
 1963
 1964
 1965
 1966
 1967
 1968
 1969
 1970
 1971
 1972
 1973
 1974
 1975
 1976
 1977
 1978
 1979
 1980
 1981
 1982
 1983
 1984
 1985
 1986
 1987
 1988
 1989
 1990
 1991
 1992
 1993
 1994
 1995
 1996
 1997
 1998
 1999
 2000

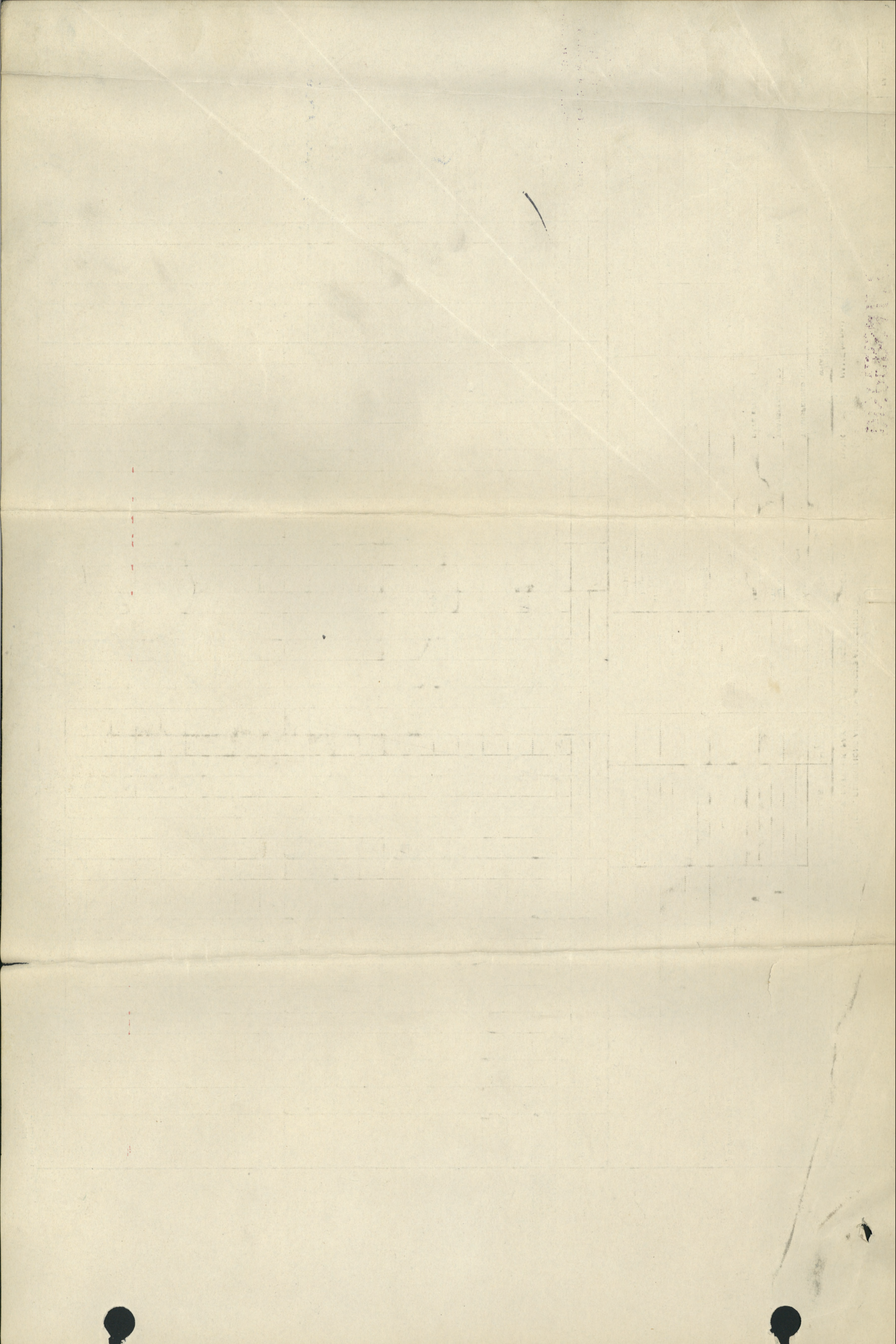
LIST OF DISCHARGE DOCUMENTS.

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

Group.....

Checked by No. *A 20*
777

Date *17 MAR 1918*



Date of Enlistment

1-3-16

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

C

12788

Date of Assignment

Aug. 1/16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

20	25 ⁰⁰ / ₁₀₀	30	1-9-18
	P.C. 3257		P6 2759
			MO 22013

RATE OF ASSIGNMENT

15.			
-----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. ~~724548~~ (724542) M120, 12 8-7-18
 Rank ~~L/cpl.~~ Promoted Reverted Discharge
 Soldier's Name A. D. Cross
 Battalion 109th Battn.
 Beneficiary Mrs Alice Cross
 Relationship Wife
 Address 63 Albert St N. Lindsay Ont

PARTICULARS OF ASSIGNMENT

Name Mrs. Alice Cross.
 Address Box 451 Lindsay Ont.
 Change of Address

- 1
- 2
- 3
- 4

Mfev 2554
 20-7-17
 Pet 214

Both addresses verified Va 7/8/17

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917					3991-a-1
Dec 31 1918		440	255	695	
Jan D	63422	30	15	45	mc
Feb E	90283	25	15	40	
Mar A	119410	25	15	40	JA
Apr B	1919	25	15	40	
May M	18629	25	15	40	
June L	21693	25	15	40	
July S	32933	25	15	40	
Aug J	38421	25	15	40	
Sept L	44819	25	15	40	
Oct B	52756	25	15	40	
Nov D	60815	25	15	40	
Dec D	66690	45	15	60	
Jan M	73128	30	15	45	
Feb P	78490	30	15	45	
Mar H	90700	30	15	45	
		855	480		

M. F. W. 128
 400M. 6-17-1772-39-141
 L. L. 22320-M. & D. 1933.

A/c Closed 31-3-19
 Audited by *Prinichakda*
 Date 25/3/17 M.F.W. 1873-4-19
 Clerk *W. J. Brown*
 M.D. 2 M. No. 83492



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

No.

Rank

Promoted

Reverted

Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
40001-637-1772-88-1141
L. L. 22820-M. & D. 1983.