

Enlisted Jan 4/1916.
OK RA.

SPECIAL ATTESTATION PAPER.

B. Coy.

No. 72517

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? *Hutchins*
- 1a. What are your Christian names? *Frank Samuel*
- 1b. What is your present address? *129 Adelgade St. Toronto.*
2. In what Town, Township or Parish, and in what Country were you born? *London*
Midland Co. England.
3. What is the name of your next-of-kin? *Louisa Hutchins*
4. What is the address of your next-of-kin? *Sherbrooke Cottage, Devonshire*
- 4a. What is the relationship of your next-of-kin? *Mother*
5. What is the date of your birth? *11 July, 1873*
6. What is your Trade or Calling? *Labourer*
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*

Sherbrooke Cottage, Devonshire, Eng.
1 day near Exeter, Eng.
AWA

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Frank Samuel Hutchins* 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.

Frank S Hutchins (Signature of Recruit)

Date *Jan 5* 1916. *Chas Downey* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Frank Samuel Hutchins*, 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.

Frank S Hutchins (Signature of Recruit)

Date *Jan 5* 1916. *Chas Downey* (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 *6th* day of *January* 1916.

[Signature] (Signature of Justice)

61
RA

Description of Frank Samuel Hutchison on Enlistment.

Apparent Age.....40 years5 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.)

Small scars on buttocks

Height.....5 ft 8 1/2 ins.

Chest measurement { Girth when fully expanded.....36 ins.
 Range of expansion.....2 ins.

Complexion.....Fair

Eyes.....Blue

Hair.....Dark Brown

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

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him* fit for the **Canadian Over-Seas Expeditionary Force.**

Date.....Jan 5.....1916.

Place.....Lindsay

J. McCulloch Capt.
H. Boyd 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.

Frank Samuel Hutchison 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.

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

Date.....JAN 15 1916.....1916

REGIMENTAL DOCUMENTS

911-4-19

NAME Hutchins, Frank Samuel (Plc) REGT. NO. 725117 UNIT 109th Bn H. Q. FILE NO.

S

51

Handwritten scribble

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505 REFERENCE

NON-EFFECTIVE BY

DEATH

Category

DISCHARGE

Category

Demobilization

DESERTION

1 TESTATION PAPER (M.F.W. 23, 133, or 51)

3 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

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)

4 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

DENTAL HISTORY SHEET (M.F.B. 465)

MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

1 MEDICAL EXAMINATION (M.F.W. 129)

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)

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)

1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

1 AFW 3997

1 DMS-1375

1 ISC Form 132

1 Dental Certificate

1 M.F.W. 192

1 Misc

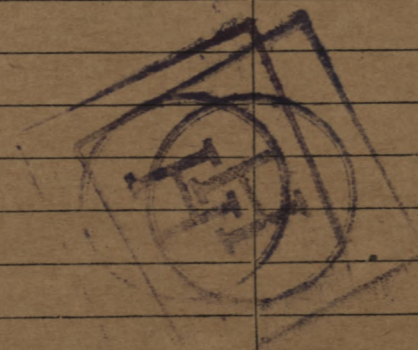
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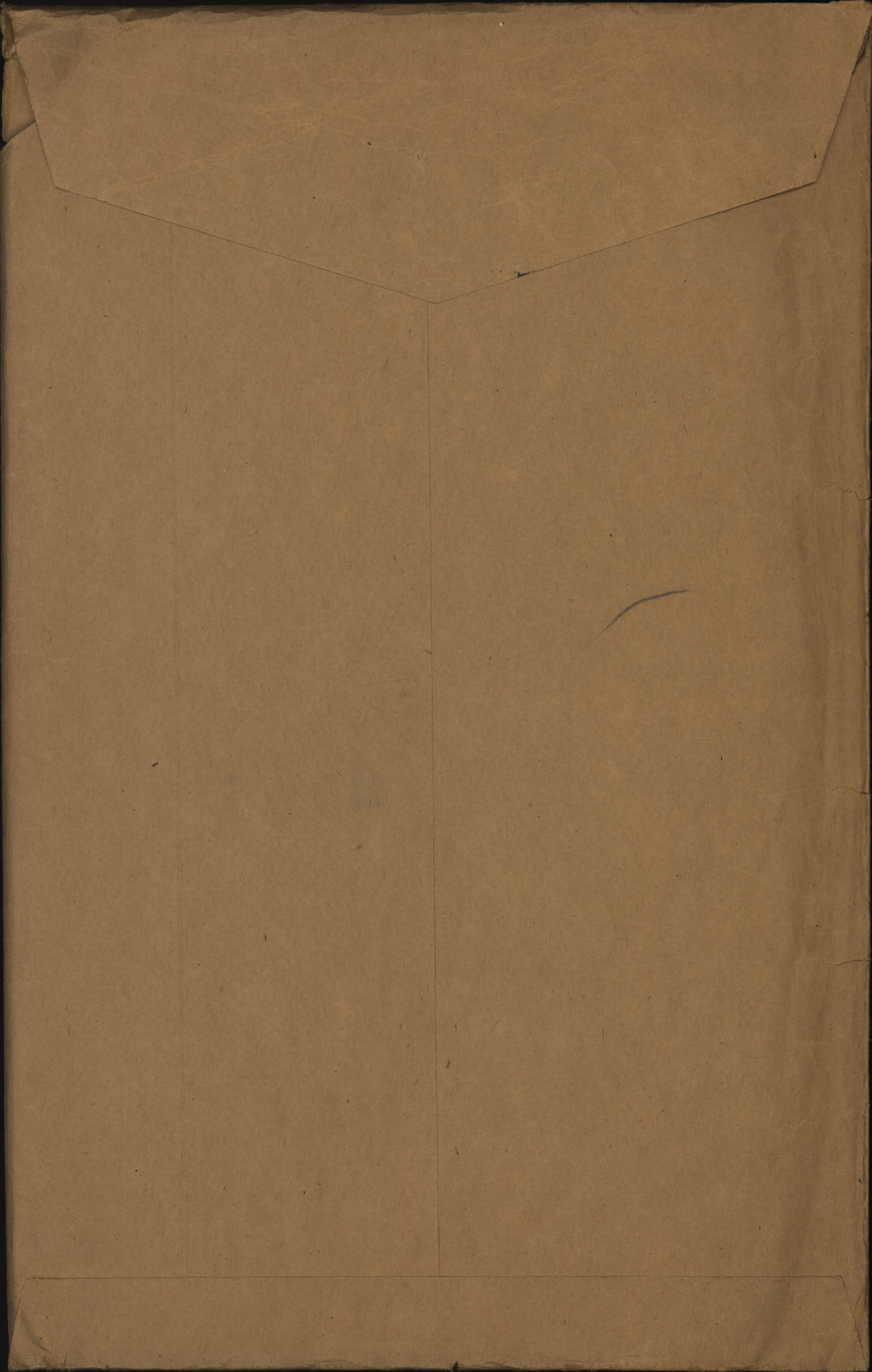
9 M.F.W. 18122

1 pay card

(2)

3-15
18-15
26-15





SURNAME

CHRISTIAN NAME OR NAMES

REG. NO.

HUTCHINS

F.S.

725117

RANK

UNIT

Co.

TROOP

BATTY.

Pte.

38th Bn.

HOSPITAL

DATE OF ADMISSION

13 C.F.AMB

24-8-17.

1. *Reading Warth Berks.*

HOSP. 7.9.18

2. *Woodcote Park Epsom*

HOSP. 21.9.18

3.

HOSP.

4.

HOSP.

DIAGNOSIS

GSW Rt. Buttock Slit.

1.

gsw Chest. R.

2.

3.

DISPOSITION

DATE

CL.31-8-17 A285--1-2. to duty 24-8-17.

10.9.18

B313-2

REMARKS

Drsch 14 10 18

24.9.18

B325-3

16.10.18

B 844 2

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

2.

3.

4.

5.

6.

7.

Name **L HUTCHINS Frank Sameul** Rank **Pte.** Regtl. No. **725117 LH**

Fyle Depot **24-HU-253**

Original unit **109th Bn** Present unit **109th Bn** M. or S. **M.** Age **42** Religion **CE** Ref. H.Q.

Port, ship and date of arrival **Scotian St. John 1-3-19**

Next of kin **Mother Louisa Hutchins, Sherbrooke Cottage, Devonshire, England.**

Address on leave **Same**

Address on discharge **c/o Bank of Montreal Yonge & Queen Sts. Toronto, Ont**

Transportation issued **Yes** No **No** Date **18-3-19** Character on discharge **Demobilization**

Previous occupation **Labourer.** Date and place of enlistment **Lindsay Jan 6-16**

Diagnosis **Demob lization** Date of Medical Boards **18-3-19**

Date.	Remarks.	Pt. 2 Order No.
TOS 19-2-19	posted to Cas ^o ExCamp 1-3-19	
	leave with sub from 3-3-19 to 17-3-19	64
21-3-19	S.O.S. DISCHARGED "DEMOB'N" (ENTITLED TO W.S.G)	78

Date

Remarks

Pt. 2 Order No.

M. F. W. 192

150m.-5-18

1772-39-1243

NAME

Hutchins Frank James

REG'T L NO.

725-117

HQ FILE NO. 649.

RANK AND CORPS

Ory. 38th Sn. (Farm)

FOLLOWS

NO.

FOLLOWS

CABLE

NO.

DATE

NATURE OF CASUALTY

M 5981
74-4
67-7

1-9-17

Adm. Co #13. Old. Amb. Aug 24th
1917. GSW. Rt. buttock.Q 520
H.L. B 313

12-9-18

Adm Reading War N. Reading
sept 7 - 1918. GSW chest.

~~7014~~
P

B

pti.

Number 725117 Rank

Surname HUTCHINS ✓

Christian Name Frank Samuel.

Units 38th Bn Can Inf Theatre of War France

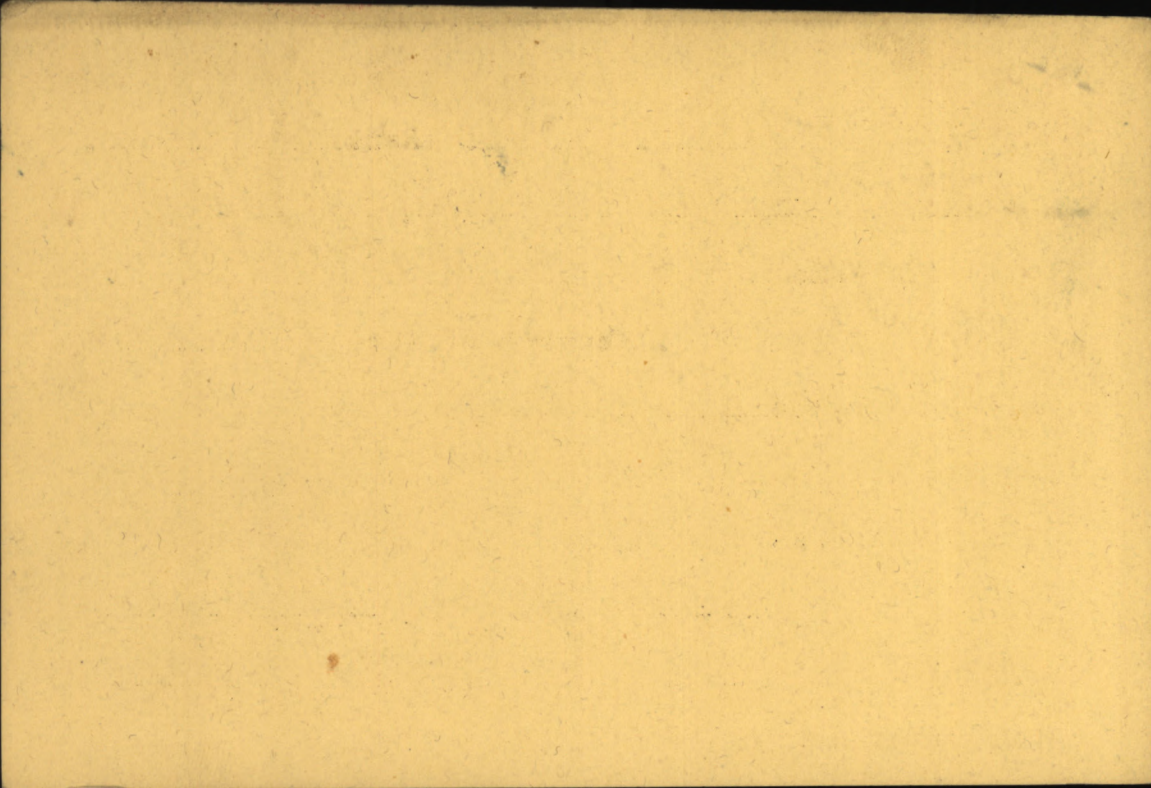
Date of Service 4-12-16.

Remarks

Latest Address 90 Bank of Montreal
Yonge & Queen St.
Toronto, Ont.

Roll No. B Page 12725

200m.-2-21.M.



No. 725 117 RANK Pte

NAME Hutchins Frank S.

T. O. S. 4-1-16

UNIT

109th. Battalion

D.O.S. 5-1-16

M. D. 16

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PAID
FROM

PAID
TO

SIG.
OR
REC'T

PARTICULARS

AUTHORITY

1916 1916

Jan 4 Jan 31

Feb.

Mar.

April.

May.

June.

July 1 July 17

✓
✓
✓
✓
✓
✓
✓

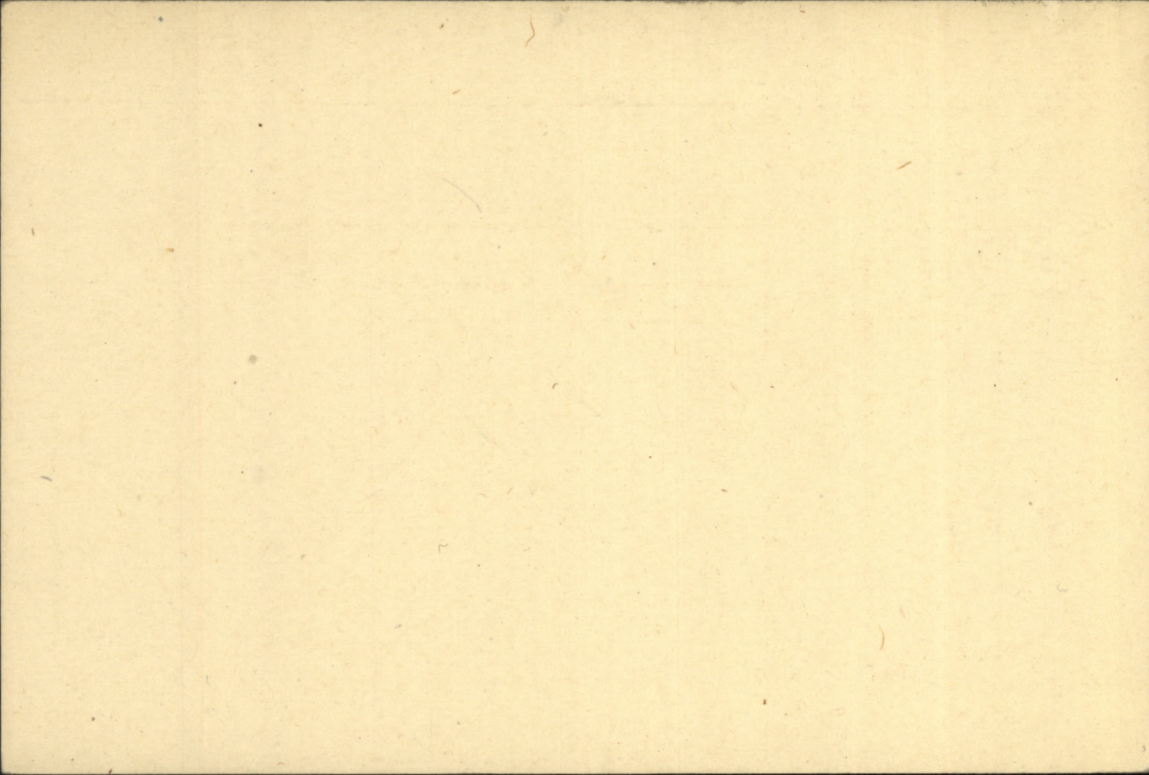
Disch'd.

D.O. 210.

UNIT SAILED

JUL 23 1916

of closed by payment



Frank Samuel

Name Hutchins

Rank Plt

Reg. No. 725117

Unit 38th Bn.

Devonshire.

Next of Kin

(Mother) Maria Hutchins, Sherbrooke Cottage, Ide, W^{est}-Exeter

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1911						
7-9	Reading W. of Reading	Reading	B.W. Chest	B.338	1520	26030
27-9	W. of (ca) W. of Epson	Epsom	B.W. Chest	B.338		27052
14-10	Discharge		Do	B.344		8715
14-10	enl from Jan 24-10-15 to	1 st P.O. W. of				4.2557

No. 725117 RANK *Pls*

NAME *Hutchins, J. S*

T. O. S.

UNIT *Special Service Battalion
#3460y*

M. D. *3*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916 July 22</i>	<i>1916 July 31</i>	<i>✓</i>		
<i>Aug</i>		<i>✓</i>		
<i>Sept 1</i>	<i>Sept 8</i>	<i>n</i>	<i>trans. to 109th Bn 8-9-16</i>	<i>Do. 44 of 9-9-16</i>

400

100

125-

110

110

845

C
SURNAME.

Hutchins.

2.

CARD NO.

CHRISTIAN NAMES

Frank Samuel.

S.O.S. in. demot 213-19

FOLL.

no 78 of 19-3-19

REGL. No.

725117

RANK

Pte.

UNIT

109th # 2 D.D.

Batt.

FORMER CORPS

Nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Hutchins Mrs. Louisa.

RELATIONSHIP TO SOLDIER

Mother.

ADDRESS

*Sherbrooke Cottage, Devonshire
Eng.*

COUNTRY OF BIRTH

England. London, Medland Co.

DATE

July 11th. 1875.

PLACE OF ATTESTATION

Lindsay.

DATE

Jan. 6th 1916.

1/8 23-7-16 $\frac{488}{18}$

R/C. 1-3-19 $\frac{272}{20}$ Pte

MARRIED

SINGLE

Yes.

WIDOWER

TRADE OR CALLING

Labourer.

RELIGION

Church of England

DESCRIPTION.

APPARENT AGE

40.

YEARS

5.

MONTHS

HEIGHT

5.

FEET

8 1/2.

INCHES

CHEST MEASUREMENT

36.

INCHES

EXPANSION

2.

INCHES

COMPLEXION

Fair.

EYES

Blue.

HAIR

L. Brown.

DISTINGUISHING MARKS

Small scar on buttocks.

MEDICAL EXAMINATION.

PLACE

Lindsay.

DATE

Jan. 5th. 1916.

ORIGINAL ORIGINAL
MEDICAL HISTORY SHEET.

H 19

Surname Hutchins Christian Name Frank Samuel

7607/8/c

Examined { on 5 day of January 1916
 at Lindsay
 Birthplace { City or Town London
 County England

Approved by J. McCulloch
J. McCulloch Capt.
 Rank 109th Overseas Battalion M. O. E. F.

Apparent age 40 years
 Trade or occupation Labourer
 Height 5 Feet 8 1/2 Inches.
 Weight 140 Lbs.
 Chest measurement { Minimum 34 inches.
 Maximum expansion 36 inches.
 Physical development good
 Small-Pox Marks none

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
<u>7/10/18</u>	<u>DI</u>	<u>J. Moody</u> 9 SEP 1918 M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right none Left Sic
 Number Sic
 When Vaccinated last January 26 1916
 (a) Marks indicating congenital peculiarities or previous disease none

Date	Result	VACCINATIONS.
<u>26.1.16</u>	<u>nil</u>	<u>J. McCulloch</u> M.O.
<u>3.3.16</u>	<u>good</u>	<u>J. McCulloch</u> M.O.
		M.O.

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

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.

Enlisted on 5 day of January 1916 at Lindsay

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Batt.</u>	<u>725117.</u>		<u>5</u> <u>1.16.</u>
Transferred to.. ..	<u>C.E.F.</u>			
	<u>88th Bn.</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>In Camp</u>	<u>18-3-19</u>	<u>nil</u>	<u>AG</u> <u>Geo A Russell Capt.</u>

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

CANADIAN

Surname *Hutchins* Christian Name *Frank Samuel*

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge f. om Hospital.						
		Day	Month	Year	Day	Month	Year				
13 Q.F.A.		24	8	17	24	8	17	G.S.W. R. Buttock.		To Duty. A285 EK.	
Reading War		7	9	18.	20	9	18	Shall w. d. noc.	13	EPB. wound. l. side of chest. - superficial practically healed. 2. 9. 18. A.T.S. 1500. 12. 9. 18. A.T.S. 500.	
<i>McH. E. Evans</i>		<i>20</i>	<i>9</i>	<i>18</i>	<i>14</i>	<i>OCT</i>	<i>1918</i>	<i>Do</i>	<i>25</i>	<i>Wound healed. Heart & Lungs negative</i> <i>703</i> <i>2</i> <i>9.10-18</i>	

J. Moody Capt. C.A.M.C.
No. 1 Division.

CENTRAL HISTORICAL ARCHIVE
CALIFORNIA STATE ARCHIVES

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1900

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 25117 Rank pte Surname HUTCHINS
(Give name in full)
Frank Samuel
Unit or Corps 2nd LD Birthplace London Eng

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer.)

1. GENERAL DESCRIPTION:

Physique good Weight 143 lbs. Height 5 ft 8 in Colour of Eyes blue
Nutrition good
Pulse 72
Condition of arteries normal
Vision Rt. 20/20 Left 20/30
Hearing (conversational voice) Rt. 21 ft.
Left 21 ft.

Identification marks, scars, or deformities.
(Give cause and date of origin.)
1 scar. L. arm.
Small scar on Buttock childhood
Scar f wd. below L. arm pit
4"

Opinion as to general health and physical condition A 4

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)

Nervous System no no alb. no sugar. Genito Urinary System no Cardio-Vascular System no
Special Senses no Integumentary System no Respiratory System no
Disturbance of mentality no Muscular System no Digestive System no
Osseous and Joint System no Any other general condition no

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

no hernia, haemorrhoids, varicocele
varicose vein now gone
E.S.W. R. Buttock. Aug 1917. slight. Healed
E.S.W. L. side Sept. 1918. Healed. no disability
Scar 4" long below L. arm pit

APPROVED
MAR 19 1919
J. Chuteau CAPT.
FOR A. D. M. S. M. D. 2

(If space is insufficient, continue on back of form.)

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at.....(Overseas)

Date SignedM.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at.....(Canada)

Date SignedM.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

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..... 725717

(3) Full Name of Soldier..... Frank Samuel Hutchins

(4) Place of Birth..... Devonshire

England

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

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

(b) Present Postal Address.....

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

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

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

Also their names and ages.....

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

If so, state name and address *Sidney Hutchins Ide W Exeter Devonshire England*

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

If so, state name and address *Louise Hutchins Ide W Exeter Devonshire England*

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

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.

(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?..... *No*

If so, in what Company?.....

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 *July 10th 1916*

[Signature] Lt. Col.
O. C. 109th Officer Commanding C. E. F.

SPECIAL

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.

109th OVERSEAS BATTALION, C. E. F.

Unit, Regiment or Corps

Regimental No. *425-114* Rank *Private* Name *Hutchins Frank. Samuel*

Enlisted (a) *5-1-16* Terms of Service (a) *D of W* Service reckons from (a) *5-1-16*

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) *Laborer*

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				
	<i>Embarked Canada</i>		<i>Halifax</i>	<i>13-9-16</i>	
	<i>Disembarked England</i>		<i>Liverpool</i>	<i>23-9-16</i>	
<i>4-12-16</i>	<i>O.C. 109th.</i>	<i>Proceeded overseas for service with 38th.Btn.</i>	<i>Witley</i>	<i>4-12-16</i>	<i>D.O.Pt.11 339</i>

CERTIFIED CORRECT.
12 DEC 1916
CAN. RECORDS, LONDON.

A. W. Aslett
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.

725117

Pt. HUTCHINS, F.S.

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				
6 12 16	C.B.D.	TAKEN ON STRENGTH 38 th Havre		6 12 16	N. R. P. 110-742-12.12.16
7 12 16	"	Left for Unit	FIELD	7 12 16	N. R.
16 12 16	Unit	Joined Unit	FIELD	9 12 16	B. 213. DCS. 69-31 12 16
27.3.17	38th	SENTENCED TO FORFEITURE OF 4 DAYS PAY, 2133.17, B.2069, Pt.2.Orders, for DEFICIENT OF KIT, ie- P.H. HELMET, value 39, dated. 31 MAR 1917 3s.7d. and PLACED UNDER STOPPAGE OF PAY TO MAKE GOOD VALUE OF ARTICLE LOST, 3s.7d.			
26.4.17.	38th	SENTENCED TO 28 DAYS F.P.No.1 22.4.17. B.2069 Pt.2.Orders, for Neglect of duty Field 53 d- 10.5.17.			
12. 7. 17.	"	28 days F.P. No.1 for (1) Absent from par. (2) Neglecting to comply with an order. 8.7.17. B.2069 P. 110.73 d- 1917.			
26. 8. 17	13 C.A.D. Unit	Joined Unit FIELD		24 8.17	a 36/7109 B. 213. DCS. 152
-1 SEP 17	"	13 days F.P. No.1 for leaving working party without permission 21.9.17			B. 2069 P. 110.95 d- 10 OCT 17
27 9 17	"	14 days leave. 12 DEC 17			B. 213 P. 110.1 - 5 JAN 18
15 DEC 17	"			28.12.17	B. 213.
29 DEC 17	Unit	Joined Unit FIELD			
8.9.18	29 CCS	awd to 38th. 3.9.18			2944
3.9.18	22 Gen.	ysw. side chest. 22 Gen. 3.9.18			W 2692
6.9.18	"	do. to Eng. 6.9.18			W 3277
6.9.18.	do	WOUNDED-Posted E.Ont.Reg.Dep.Seaford, 6.9.18.			W3083/5939, DO-90-19 SEP 18
	Prin. Elizabeth				Lieut. for Lt Col. A. A. G.
					Canadian Section, G. H. Q. - 3 rd , Ech.

214
14
41

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

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

350M.—5-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps. 6th Can Reserve

Regimental No. 725117 Rank Pt Name Nutkins Frank Samuel
C. E. F.

Enlisted (a) 5-1-16 Terms of Service (a) 20 Y. Service reckons from (a) 5-1-16

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) Labourer

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				
20-11-18	Ob. 6th Res	J.O.S. 6th Res on posting from C.O.R.D.	Witley	14-11-18	Pt II B0 273.
10-2-19	Ob. 6th Res	Sent in transport to M.D. Wing No 2 Kinmel Park	Seaford	8-2-19	Pt II B0 # 31
9 FEB 1919		Attached C.C.C. Kinmel Park for return to Canada. Part 11 Orders No. Ceases to be attached C.C.C. Kinmel Park on embarkation for Canada, Part 11 Order No. <u>50 28.2.19 M.D. Devine</u>			
		Job Commanding <u>2</u> Wing, Kinmel Park Camp,			

[Signature]
14 OFFICER in CHARGE of RECORDS 6th CAN. RES. BN

(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. (P.T.O.)

ET

725117 R-122

Rank HUTCHINS, Frank Samuel. ✓ Reg'l No.

Unit 109th Battn If in perm. Corps, } Married or Single Single. ✓
What Unit? }

Place and Date of Enlistment Lindsay. Jan 5th 1916. ✓ Place of Birth London. England. ✓

Name and Address, Next-of-Kin Louisa Hutchins. ✓
Sherbrooke Cottage, ^{IDE. NEAR EXETER} Devonshire, England. (Rank A.P.) Relationship Mother. ✓

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.				
26-9-16	^C 109 th Bn.	J.O.S. on arrival in England	Bramshell	9-9-16	Pt II D O 270 <i>Oslem.</i>
4-12-16	"	S.O.S on tfr. to 38 th Bn	Witley	4-12-16	Pt II D O 339
13-12-16	38th Bn	T-O-S on tfr from 109th	^{Field.} Emsht	6-12-16	Pt II D O 247.
31-8-17	"	Adm'd M3 can field Ambul.	Field.	24-8-17	Class 285 GSH. Buttock St.
31-8-17	"	Dischg to Duty ex above.	"	24-8-17	(" ")
		Wounded	"	3-9-18	3879-54 11-9-18 <i>26th Field Coy</i>
14-9-18	E O R D	Posted from 38th Bn	Seaford	7-9-18	Pt II D O 232. <i>38th Bn D/1090.</i>
17-10-18	"	On Comd ^{1st} Sacc'd Witley	"	14-10-18	260. <i>D/19-9-18.</i>
15-11-18	1st CCD	Ceases on Comd prot to 6th Res	Witley	16-11-18	316 <i>1st CCD D/0290.</i>
26-11-18	E O R D	Posted to 6 th Res	"	"	" 293 <i>6th Res D/0273.</i>

N/E. R.B. No. 15290

File R.L.

Category *Can OR*

A.F.B. 103 CHECKED
9 DEC 1916

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.					
207/1/19	6 th Res.	Forfeit 15 days pay for St. Mark overstaying leave from 31/1/18 till 4/1/19. (3 day 18 hrs) Forfeit 4 day pay under P.A.R.		16-1-19	P. 11 00.16	
10-2-19	MD-2	SOS to McDW & Rhye	" Seaford	8-2-19	— 31	MD 2 71 00 46 24. 2. 19
28-2-19	RHYL	SOS to Canada	" Rhye	19-2-19	- 50	

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 725117 (Rank) Pte.

Name (in full) HUTCHINS. FRANK SAMUELS enlisted in
the 109th Bn.

CANADIAN EXPEDITIONARY FORCE at Lindsay, Ont. on the 5th
day of January 16
19

HE served in England and France

and is now discharged from the service by reason of Demobilization

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

Age 43 yrs.

Height 5' 8½"

Complexion Fair

Eyes Blue

Hair D. Brown

Marks or Scars Vacc. scars on left arm
G.S.W. L. Side & chest..2-9-18

F. S. Hutchins
Signature of Soldier

H. Sargeant Coy
Issuing Officer

Date of Discharge March 21st, 1919

Rank

Signed at Toronto, Ont. 21st
this 21st day of March 19

Appointment March 19

in Military District No. 2 MAR 21 1919

File Reference No. DISTRICT DEPOT

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

CANADIAN EXPEDITIONARY FORCE
Discharge Certificate

No. (Rank) Name

Unit

Address on Discharge

Character and Conduct

Former Occupation

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks

Signed at this day of 19

.....
Name of Officer

.....
Rank

.....
Appointment

Uniform is not to be worn after
expiration of one month from
date of discharge, except by special
permission of G. O. C. district.

ORIGINAL

M. D. 2

CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44.
1188 (D.P. 250M-12-18.
1772-89-903.

LAST PAY CERTIFICATE

No. 56

Regimental No. 925119 Rank. Oce Name. Hutchins J S
(Surname first)
Unit No. 2 DISTRICT DEPOT who was* DISCHARGED
On MAR 21 1919 191....., to.....
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from..... to MAR 21 1919 191...
the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month.....		314 51
Regimental Pay..... <u>21</u> days at \$..... /c. <u>10</u>		2340
Field Allowance..... days at \$..... /c.		
Separation Allowance.....		35 -
Clothing Allowance.....		70 -
Post Discharge Pay.....		12 -
*Other Credits..... <u>Quar. 3/3-17/3</u>		
Advances..... <u>131471</u>	325 -	
Separation Allowance and Assigned Pay Cheque No.....		
*Other Charges..... <u>ap March 132857</u>	15 -	
Balance on transfer or on discharge, cheque No.....	114 61	
Total.....	4524 61	4524 61

*Give particulars.

A monthly stoppage of \$..... 1500 (†) has..... Ches 5 (‡) been paid on account of
Assigned Pay for the month of..... March 191..... }
and Separation Allice, for month of..... 191..... } (to) Assignee Mr. Sidney Hutchins
(Address) Idc. no. Exeter Devon England
(†) Insert amount to be assigned, whether it has been paid or not. (‡) Insert "not" if amount has not been paid for period of account.

ON TRANSFER OF AN OFFICER.

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

REMARKS:—

State (1) date of enlistment..... married or single.....
(2) Separation Allowance, entitled or not..... (3) Reason for discharge..... Quar
(4) Authority for discharge or transfer..... roy 8

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer or soldier.

Date MAR 20 1919
Place TORONTO, ONT.

[Signature] CAPT.
PAYMASTER, No. 2 Paymaster DEPOT

- N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916.
- (B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.
- (C) For purposes of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record-record. As payment of the balance will have been made, the words "on transfer or" will be deleted.
- (D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificate will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.

WAR SERVICE GRATUITY and SEPARATION ALLOWANCE

Payable to F. S. HUTCHINS

Dependent 725117 F. S. HUTCHINS

Address Shobbrook Cottage,

Address Pb-

Idle nr. Exeter, Devonshire, Eng.

Date	Cheque No.	Gratuity	Payments	Balance Due.	Remarks
1919		57 10 8 ✓			
9 July	22933		28 15 4 ✓	28 15 4 ✓	
July 21	525994		14 7 8 ✓	14 7 8 ✓	
v 26	43479		14 7 8 ✓	- - - ✓	
		57 10 8 ✓	57 10 8 ✓	0 ✓	

Колонка

Служба

Служба

Служба

Служба

Служба

Служба

СЛУЖБА СЛУЖБЫ И СЛУЖБЫ СЛУЖБЫ

ЛИТЕРАТУРА

ЛИТЕРАТУРА

ASSIGNED PAY and/or SEPARATION ALLOWANCE

Payable to Mrs. S. Hutchins
Address Side, No. Exeter,
Devon

Name HUTCHINS F.S.
From Canada: No. 725117 Rank Pte Unit 109th B. of P.

Rank	Authority	Unit

ASSIGNED PAY AND SEPARATION ALLOWANCE BEING PAID IN ENGLAND UNDER ADVICE FROM OTTAWA OF DISCHARGE OF SOLDIER NAMED BERRIN.

Noted on L.P.B.

ASSIGNED PAY

Authority	Dol.	Effect
ASSIGNED PAY	"	"
SEPARATION ALLOWANCE	"	"
<u>15</u>	"	"
<u>1.3.19</u>	"	"

Month	Cheque No.	Assigned Pay	Amount Separation Allice.	Total A.P. and S.A.	REMARKS
DEC.	<u>191</u>				
JAN.					
FEB.					
MARCH	<u>9.33170</u>	<u>15</u>			
APRIL	<u>9.43727</u>	<u>15</u>			
MAY					
JUNE					
JULY					
AUG.					
SEPT.					
OCT.					
NOV.					
DEC.					
JAN.					
FEB.					
MAR.					
APRIL					
MAY					
JUNE					
JULY					
AUG.					

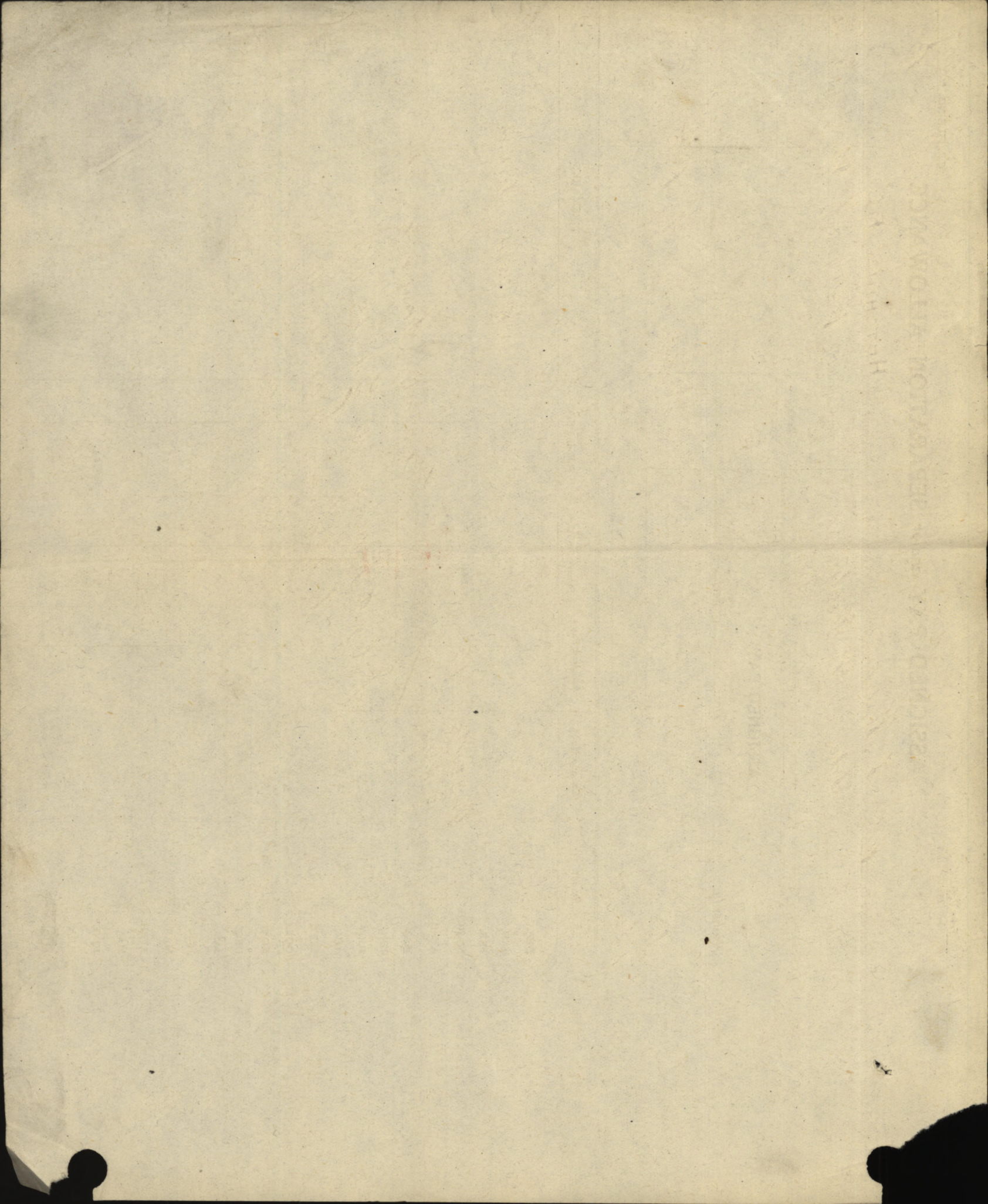
Final Payment

Discharged 21.4.19.

Ottawa cable 11.

3/4/19.

DISCHARGED TO CANADA
NR 2594 Seaford



* Strike out whichever inapplicable.

ASSIGNED PAY. <i>2.</i>	ENGLAND OR CANADA	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.
EFFECTIVE DATE: <i>1/10/19</i>		EFFECTIVE DATE: -	
AMOUNT: <i>15⁰⁰</i>		AMOUNT: -	

NAME: **HUTCHINS, Frank Samuel**
NUMBER: **725117**

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. Sidney Hutchins
mother. Ide. Nr. Exeter, Devon.

PARTICULARS OF RANK OR APPOINTMENT		
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		<i>Pte E</i>

Stopped off 1-3-19

ASSIGNED PAY AND SEPARATION ALLOWANCE BEING PAID IN ENGLAND UNTIL ADVICE FROM OTTAWA OF DISCHARGE OF SOLDIER NAMED HEREIN

UNIT AND TRANSFERS			
ORIGINAL UNIT: <i>109th Bn</i>			
DATE ACCOUNT FIRST OPENED: <i>9/9/16</i>			
AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
			<i>38th Bn.</i>
<i>1-4-19</i>	<i>15-4-19</i>		<i>Canada Ser.</i>

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

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
<i>23/19</i>	<i>8210</i>	<i>Witley</i>	<i>243</i>				
<i>1/19</i>	<i>8366</i>	<i>Seaford</i>	<i>1713</i>				
<i>9/19</i>	<i>7632</i>	<i>Witley</i>	<i>730</i>				
			<i>2676</i>				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	<i>100</i>	<i>10</i>		

PARTICULARS OF RENDERING NON-EFFECTIVE: *Transferred to Canada 1 3/4 Anthe Seaford NR 2594 Seaford 4 2/3 MD 2 P.M. 314*

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
<i>31 March</i>	<i>Bal Fwd</i>								<i>291 42</i>	<i>243</i>	
<i>April</i>	<i>P.P.</i>	<i>33</i>		<i>AR 75. 5/4/18. 38th</i>	<i>803</i>				<i>312 82</i>	<i>258</i>	
<i>May</i>	<i>P.P.</i>	<i>3410</i>		<i>AR 347. 4/5. 38th</i>	<i>1160</i>				<i>338 89</i>	<i>273</i>	
<i>June</i>	<i>P.P.</i>	<i>33</i>		<i>" 537 18/6 -</i>	<i>357</i>				<i>364 75</i>	<i>288</i>	
<i>July</i>	<i>P.P.</i>	<i>33</i>		<i>AR 718. 1/6. "</i>	<i>357</i>				<i>389 93</i>	<i>303</i>	
<i>Aug</i>	<i>P.P.</i>	<i>33</i>		<i>" 823. 15/6 "</i>	<i>357</i>				<i>416 89</i>	<i>318</i>	
<i>Sept</i>	<i>P.P.</i>	<i>3410</i>		<i>AR 919. 1/7 "</i>	<i>446</i>						
<i>Oct</i>	<i>S.F. 14/10/18 to 24/10/18 (10 days) 20.29. 10/10/18 1880</i>	<i>730</i>		<i>" 997 5/7 "</i>	<i>446</i>				<i>416 89</i>	<i>318</i>	
<i>Nov</i>	<i>P.P.</i>	<i>33</i>		<i>" 1078. 7/8 "</i>	<i>357</i>				<i>473 13</i>	<i>333</i>	
<i>Dec</i>	<i>P.P.</i>	<i>3410</i>		<i>" 1160 19/8 "</i>	<i>357</i>						
<i>Jan.</i>	<i>"</i>	<i>33</i>		<i>" 5842. 13/9 Bearwood</i>	<i>243</i>						
<i>Feb.</i>	<i>"</i>	<i>33</i>		<i>" 5039. 2/2 Epsom</i>	<i>973</i>						
<i>March</i>	<i>"</i>	<i>33</i>		<i>" 6029. 24/9 "</i>	<i>1460</i>				<i>4206 7 333</i>		
<i>April</i>	<i>"</i>	<i>33</i>		<i>P. 61585 £ 3. 1. 8</i>			<i>15</i>				
<i>May</i>	<i>"</i>	<i>3410</i>		<i>A.R. 3344. 14/10/18. Epsom</i>	<i>4867</i>						
<i>June</i>	<i>"</i>	<i>33</i>		<i>A.P. 5223 29/10/18 1CED</i>	<i>993</i>						
<i>July</i>	<i>"</i>	<i>33</i>		<i>E 3189 £ 3. 1. 8</i>	<i>5840</i>		<i>15</i>				
<i>Aug</i>	<i>"</i>	<i>3410</i>		<i>AR 5967. 18/11/18. 6th Rec.</i>	<i>972</i>						
<i>Sept</i>	<i>"</i>	<i>3410</i>		<i>S 67789 - "</i>			<i>15</i>				
<i>Oct</i>	<i>"</i>	<i>3410</i>		<i>6214 28/11/18 "</i>	<i>973</i>						
<i>Nov</i>	<i>"</i>	<i>3410</i>		<i>A.P. 6701 12/12/18 "</i>	<i>930</i>						
<i>Dec</i>	<i>"</i>	<i>3410</i>		<i>F 12569 - £ 3. 1. 8</i>	<i>2676</i>		<i>15</i>				
<i>Jan.</i>	<i>"</i>	<i>3080</i>		<i>A.R. 7228 23/1/18 6th Rec.</i>	<i>3893</i>						
<i>Feb.</i>	<i>"</i>	<i>2460</i>		<i>Forfeit 15 days pay 6/1/19 overlapping leave from 23/1/18 till 18/60 4/1/19. Do. 16. 20/1/19 6th Rec.</i>	<i>2090</i>						
<i>March</i>	<i>"</i>	<i>5540</i>		<i>A.P. cheque # 67744 £ 3-18</i>	<i>3393</i>		<i>15</i>				
<i>April</i>	<i>"</i>	<i>5540</i>		<i>AR 7635 9/1/19 6th Rec.</i>	<i>730</i>						
<i>May</i>	<i>"</i>	<i>5540</i>		<i>" 8210 23/1/19 "</i>	<i>4866</i>		<i>243</i>	<i>3090</i>	<i>15</i>		

Checked *4/2/19*

NUMBER	RANK	NAME		MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
									48.66						
July					Jord.	5540			2090	15			420 57	333 -	
								WR 8367 1/2/19 6 hrs	17 03	-			374 38	475 97	
						5540			6569	20 90	15			101 59	
														374 38	
					<i>W of Canada 18/1/19 80. 1/2/19</i>										

This space to be for numbers.

Proceedings on Discharge.

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

No. **725117**

Rank **Pte.**

Surname **HUTCHINS. FRANK SAMUEL**

Christian name

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) **109th Bn. (#2 D.D.)**

Date of discharge **MAR 21 1919**

Place of discharge **TORONTO, ONT.**

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age **43** years..... months.

Height **5** feet **8½** inches.

Complexion **Fair**

Eyes **Blue**

Hair **D. Brown**

Trade **Labourer**

Intended place of residence **% Bank of Montreal,**

(To be given as fully as practicable.) **Yonge & Queen St.,
Toronto, Ont.**

Descriptive marks

Vacc. scars on left arm

G.S.W. L. Side & Chest..3-9-18

2. The above-named man is discharged in consequence of

ON GENERAL DEMOBILIZATION

Authority for discharge..... **D.O.....D.D.#2 Pt.11 #78**.....

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

3. Conduct and character while in the service have been, according to the records, etc.

N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

M. F. B. 218.

200M.—5-18.

H. Q. 1772-39-113.

(OVER)

2-11-19
10-4-19

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

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

6. Medals and Decorations.....

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

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

(Place).....

(Date).....

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, and that I have received my permanent discharge certificate.

(Place) **TORONTO, ONT.** *Frank P. Hutchings* (Signature of Soldier.)

(Date) **MAR 21 1919** *James McPeck* (Signature of Witness.)

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

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

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

.....(Signature of Soldier.)

10. Statement of Service.

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

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

11. Confirmation of Discharge.

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

(Place) **TORONTO, ONT.**

(Date) **MAR 21 1919**

(Signature) *H. Sargeant Coyt*

O. G. No. 2

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

<p>Reservations referred to at Para. 8.</p> <p>(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)</p> <p>List of Discharge Documents</p>	<p>Reg. Conduct Sheet Military Form B. 361</p> <p>Squadron Battery Company Field Conduct Sheet W. 173</p> <p>Copies of Conditions, by P. in MS.</p> <p>Med. Hist. Sheet Military Form B. 411</p> <p>Casualty Form W. 24</p> <p>Medical Report for Invalids B. 397</p> <p>Dental History Sheet B. 403</p> <p>List Pay Certificate W. 44</p> <p>Duplicate Discharge Certificate W. 102</p> <p>Form of Will W. 83</p> <p>Only if discharged medically unfit</p> <p>Only if man has not been overseas</p>
<p>In the case of reserves who are referred on this list approval of the medical documents will be given by the Medical Director of the Army.</p>	<p>Documents not accompanying this form should be crossed out.</p>

I hereby certify that the following documents are unobjectionable:

Officer Commanding

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.

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.

<p>Reg. Conduct Sheet, Militia form B. 263</p> <p>Squadron } Battery } Conduct Sheet, " B. 263a Company } or Field Conduct Sheet " W. 178</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia form B. 313</p> <p>Casualty Form " W. 54</p> <p>Medical Report for Invalid§ " B. 227</p> <p>Dental History Sheet " B. 465</p> <p>Last Pay Certificate " W. 44</p> <p>Duplicate Discharge Certificate " W. 39A</p> <p>‡Form of Will " W. 82</p> <p>§Only if discharged "Medically unfit."</p> <p>‡Only if man has not been overseas.</p>	<p>Attestation Paper Militia Form W. 23 or Particulars of Recruit " W. 133</p> <p>Proceedings on Discharge " B. 218</p> <hr/> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p style="text-align: center;">(a) Proceedings on Discharge</p> <p style="text-align: center;">(b) Attestation.</p> <p style="text-align: center;">(c) Medical History Sheet.</p>
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Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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.

725117 Pte. Hutchins, F.S. 109th Battalion, C.E.F.

Will detached by Regt. Paymaster.

Red Triangle Club

76332

J. J. Williams
Paymaster, 109th Overseas Battalion, C.E.F. CAPT.

- 20 -

Perforated sheet for Will from Pay Book of Reg.

No. 725117

Name Frank S. Hutchins

Unit 109th Bn. C.E.F.

Military Will.

In event of my death
I bequeath all my real
and personal effects
unto my Father Mr.
Sidney Hutchins at
Lode near Exeter Devonshire
England.

witness

(Dte Q. Sergeant
109th Bn.)

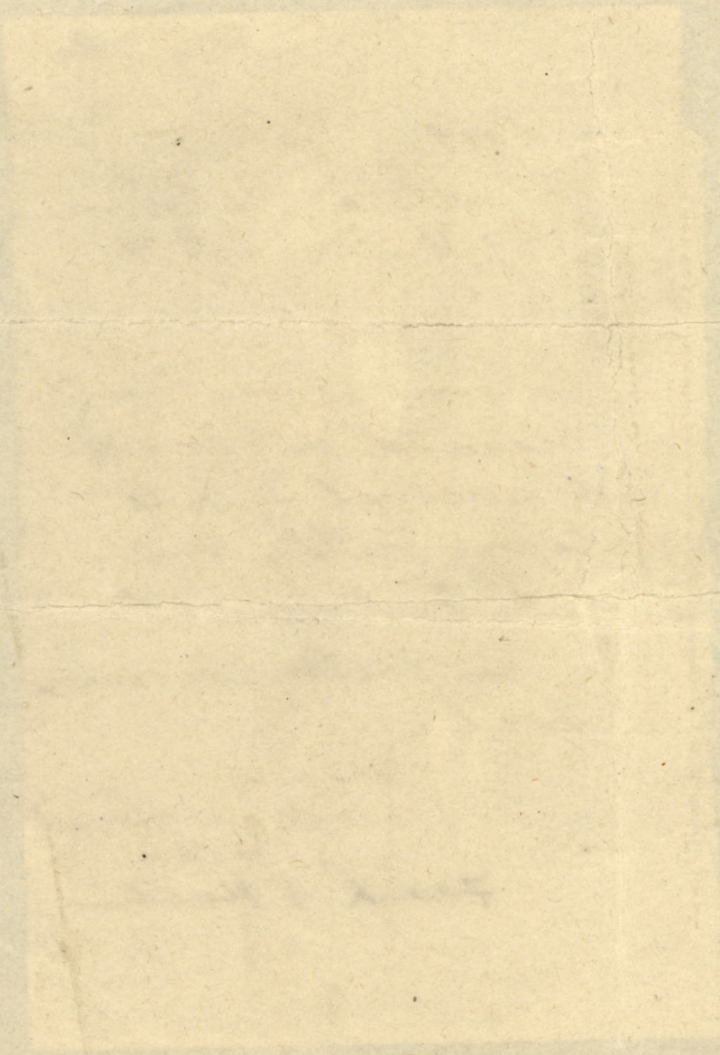
Signature Frank S. Hutchins

Rank and Regt. Pte 109th Bn. C.E.F.

Date 13/11/16

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**Medical Examination upon leaving the Service
of an Officer fit for general service or a Soldier fit for duty.**

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank PTE. Name FRANK S. Surname HUTCHINS
 Unit or Corps 1st RES. (If a soldier) Regtl. No. 725/17
 Born at ENGLAND on, date 11/7/1878
 Signature (for identification) F S Hutchins

The examination is to be made jointly by two Medical Officers.

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe.

Weight 140 lbs. sm 98. W Sides Lh. No Disease
 Height 5 ft. 5 ins.

2. NUTRITION AND DIATHESIS ?

normal

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. NERVOUS SYSTEM ?

normal

4. RESPIRATORY SYSTEM.

normal

5. HEART ?

Abnormal Sounds ?

Abnormal Size ?

Pulse Rate ? 76

Intermittence or irregularity ? no

6. ARTERIES.—Any hardening?

pulse

7. DIGESTIVE SYSTEM ?

normal

8. GENITO-URINARY SYSTEM ?

Urinalysis—s.c. ? 1010 Reaction ? acid Albumen ? Neg. Sugar ? Neg.

9. SKIN, MIDDLE EAR, EYE
or any other part ?

normal

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe.

no

11. Opinion as to the health and physical condition of the one examined ?

good

Examined at Seaford Signed Dr. Macdonald M.O.

Date 5-2-15 Signed Dr. Byers Capt M.O.

If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.

100-1001

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