

MAR 12 1916

ATTESTATION PAPER.

No. 724080

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio.

TRIPPLICATE

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... Jackson
- 1a. What are your Christian names?..... William Hector
- 1b. What is your present address?..... 47 Kent St. C. Lindsay, Ont
- 2. In what Town, Township or Parish, and in what Country were you born?..... Port Hope, Ontario
- 3. What is the name of your next-of-kin?..... Mrs. Lillian Orol Jackson
- 4. What is the address of your next-of-kin?..... 47 Kent St. C. Lindsay, Ont
- 4a. What is the relationship of your next-of-kin?..... Wife
- 5. What is the date of your birth?..... July 30th 1871
- 6. What is your Trade or Calling?..... Barricade Painter
- 7. Are you married?..... Yes
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... Yes
- 9. Do you now belong to the Active Militia?..... No
- 10. Have you ever served in any Military Force?..... Yes
If so, state particulars of former Service. 7th Regt
- 11. Do you understand the nature and terms of your engagement?..... Yes
- 12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, William Henry Jackson, 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.

W H Jackson (Signature of Recruit)

Date. MAR 12 1916 191 . Au Cassette (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, William Hector Jackson, 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.

W H Jackson (Signature of Recruit)

Date. MAR 12 1916 191 . Au Cassette (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act. The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath

before me, at Lindsay this MAR 12 1916 day of 191 .

(Signature of Justice)

Description of William Hester Jackson on Enlistment.

Apparent Age.....44 years 8 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height.....5 ft. 6 1/2 ins.

Chest measurement { Girth when fully expanded.....34 ins.
 Range of expansion.....3 ins.

Complexion.....Fair

Eyes.....Blue

Hair.....Brown

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

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer.)

Scar on right side of throat below chin
End of index finger of right hand off

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date.....MAR 12 1916.....191

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.

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

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

Date.....MAR 12 1916.....191

S

- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers..... *13*
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet.....
- Compulsory Stoppages.....
- Casualty Forms..... *2*
- Proceedings on discharge..... *2*
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- Parchment Certificate.....
- Medical Report for Invalids..... *1*
- Medical History Sheet..... *1*
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet.....
- Clothing Transfer Certificate..... *1*
- Inventory of Kit.....
- Last Pay Certificate..... *1*

DISCHARGE DOCUMENTS

R. O. No.....
H. Q. No.....

Name *JACKSON, WILLIAM. HECTOR*

Regt. No. *724090* Rank *Pte*

01390

Corps *Co. A. S. Co.*

med. Unfit.

~~M~~ *1919*

H

B.P.C. 11-20

1919

A.D. B 127-6
m7w67-1
R 122-1

1-1606 Card

pay order

Faint, illegible text, possibly bleed-through from the reverse side of the page.

Faint, illegible text, possibly bleed-through from the reverse side of the page.

M. P. W. 23
1861-62
2-11-20 23

B'

To be made out in duplicate.

H.C. 51-21-20-53

DUPLICATE

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins..... **103rd OVERSEAS BATTALION, C. E. F.**

(2) Regimental Number..... **7240 90**

(3) Full Name of Soldier..... **William Hector Jackson**

(4) Place of Birth..... **Little Britain**

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

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

(b) Present Postal Address..... **Lindsay ont'**

(7) Are you a widower?.....

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

If so, give number of boys and girls..... **1 boy 1 Girl**

Also their names and ages.....

..... **William Ernest 19 years**

..... **Hilda Florence 9 years**

(9) Is your Father alive?.....No.....

If so, state name and address

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

If so, state name and address.....Mrs. Edward Jackson.....

.....Lindsay Ont.....

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

Are you her sole support, or not?.....No.....

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

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

(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.....

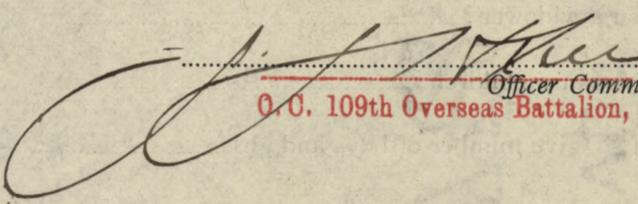
(15) Are you insured?.....yes.....

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

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 July 7th 1916.....


.....Lt. Col.
Officer Commanding.
C. O. 109th Overseas Battalion, C. E. F.

DEPARTMENT OF VETERANS AFFAIRS

To Copy for H.O. File

Attention of

NAME JACKSON, William Hector

SERVICE 724090 WW1
NUMBER

C.P.C. No. 28157
W.V.A. No. 5284

NAVY
ARMY XXXX
R.C.A.F.

Ottawa, Ont.,
Date Dec. 7, 1965

P.A.

The DEPARTMENT has received information from

S.T.M.O. Toronto, Ont. Tele-Memo d/Dec. 1, 1965

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death..... November 28, 1965.....

Cause of Death.....

Place of Death..... Sunnybrook Hospital, Toronto, Ont.

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

Copies to: W.S.R.
V. I.
~~PAYY~~
~~XXX~~
H.O.

} Destroy form if advice of death already received.

C.C. Richards
for
Chief, Central Registry

724090 pte Jackson W.H. 109th Batta C.E.F.

Will removed by Regt. Paymaster

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

76384

- 20 -

Perforated sheet for Will from Pay Book of Regt.

No. 724090

Name *W. H. Jackson*

Unit *109th Canadians*

Military Will.

In the event of my
death I give the
whole of my property
and effects to my
wife Mrs Lillian B. Jackson

Witness
J. J. Graydon

Kenil St East
Lindsay
Ont

Signature

W. H. Jackson

Rank and Regt.

Pte. 109th C.E.F.

Date

Oct. 10th 1916

MEMORANDUM

From

From

To

To

ANSWER

.....19

.....19

Next of Kin (Fiancée)

Miss Agnes Riney

West. Winterdon

Near Salisbury

Wilts

R.L. 29

C.T.T.



Name Jackson Enl. 12-3-16.

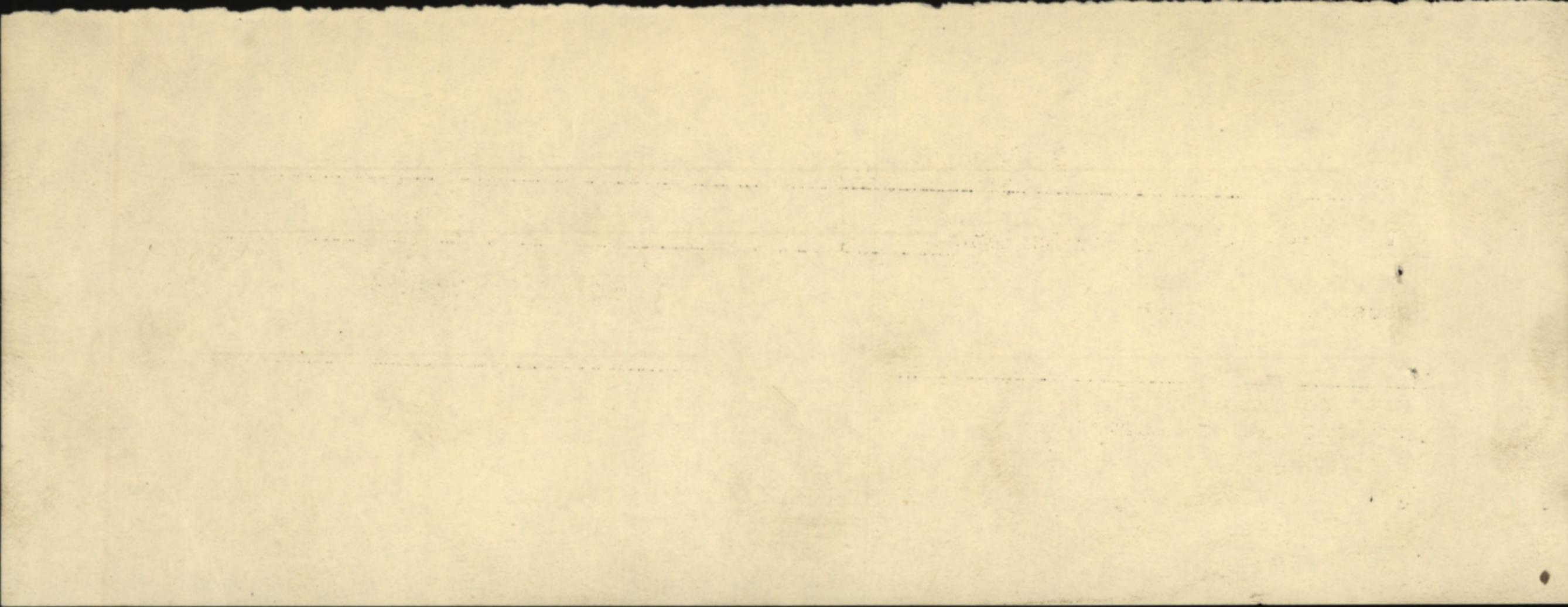
Date of Embarkation for England 24-7-16.

Proceeded to France No. Returned to England

Date returned to Canada 13-9-17.

P.R.2855.

"Oh Kid"
26-3-20



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

Casualty Form—Active Service.

M. F. W. 54.
150M. 10-15.
H.Q. 1772-59-920.

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

Regimental No. 124090 Rank Private Name Jackson William Hector

Enlisted (a) 12.3.16 Terms of Service (a) D. O. W. Service reckons from (a) 12.3.16

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) Carriage Painter

Date	Report From whom received	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.
	<u>Embarked Canada</u>		<u>Halifax</u>	<u>24.7.16</u>	
	<u>Disembarked England.</u>		<u>Liverpool</u>	<u>31.7.16</u>	
<u>8-12-16</u>	<u>O. P. 109 Bn</u>	<u>Transferred to 124 Bn</u>	<u>Witley</u>	<u>8-12-16</u>	<u>D. O Part II 643.</u> <u>3</u>
<u>19.12.16</u>	<u>124 Bn.</u>	<u>Transferred to ccaac</u>	<u>Witley</u>	<u>12.12.16</u>	<u>Part II Orders 276</u> <u>MAJOR ADJUTANT,</u> <u>124th BATTALION C.E.F.</u>

(990)

(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties. (P.T.O.)

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				
9:1:17	Ob. 124 th	attached from 124 th to no. 3 depot Base Witley	Witley	8.1.17	Part II 09. Heating CAPT. & ADJ. NO 3 DEPOT, C.A.S.C., WITLEY.
31-1-17	Ob. 61st Witley	Transferred to 61st	Bramshott	31-1-17	Part II #31 Heating
31-1-17.	OCCASC	Attached to C.A.S.C.	Bramshott.	31-1-17.	Part II 129 30-5-17
17-2-17.	A.G. London.	m T.O.S. C.A.S.C.	Bramshott.	20-2-17.	Part. 11. D.O. 42. 25-2-17. Auth. A.G. 20-1-4. 17-2-17. D.S.T. 5-2-9. 19-2-17.
30-5-17	Ob. 61st Witley	SOS on reporting to 61st. R.H.	Shorncliffe	30/5/17	Part II 129 30-5-17 Auth. 61st 8-8-3 24/5/17
11-6-17	Ob. 61st Witley	T.O.S. from 61st Bramshott.	Shorncliffe	30-5-17	Part II order 28
18 AUG 1917	O.C., C.A.S.C. D.D.	Tsfrd. to 61st. Corps Depot having been boarded for Canada.	Shorncliffe,	18 AUG 1917	PART II. ORDER No. 96 Salisbury for O.C., C.A.S.C. D.D.
18.8.17	Comd Depot C.A.S.C.	T.O.S. from 61st, D.D. and on command to int. C.D. Buxton	Shorncliffe	18.8.17	Pt II D.O. 162. Alchstone LIEUT. & ADJ. CORPS DEPOT, C.A.S.C.

Casualty Form—Active Service.

Regiment or Corps _____

Regimental No. 724090 Rank Private Name Jackson W^m S.

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

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

Extended _____ Re-engaged _____ Qualification (b) _____

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 AUG 1917		TAKEN ON STRENGTH C.D.D, BUXTON Pt. 11 ORDER No. 196.			<i>W. S. Jackson</i> Lt. Col. Commanding Canadian Discharge Depôt.
13 SEP 1917		EMBARKED FOR CANADA FROM LIVERPOOL			<i>W. S. Jackson</i> Lt. Col. Commanding Canadian Discharge Depôt.

(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.]

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				

15
724090.

May 22/17 - 7 C 11 ages

MEDICAL HISTORY SHEET.

ORIGINAL

Surname Jackson Christian Name William Hector

Examined { on 12th day of March 1916.
{ at Sunday
Birthplace { City or Town Port Huron
{ County Ontario

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

DEPT. MILITIA & DEFENCE
APR 22 1920
CANADA

Apparent age 44 years
Trade or occupation Carnage Painter
Height 5 Feet 6 1/2 Inches.
Weight 118 Lbs.
Chest measurement { Minimum 31 inches.
{ Maximum expansion 34 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 None Left Two
{ Number Two

Date.	Result.	VACCINATIONS.
<u>15-3-16</u>	<u>Good</u>	<u>J McCulloch</u> M.O.
		M.O.
		M.O.

When Vaccinated last March 15th 1916
(a) Marks indicating congenital peculiarities or previous disease 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.
<u>2/10/16</u>		<u>J Mac Farlay</u>

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

Enlisted on 12th day of March 1916 at Sunday

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Bn. C.E.F.</u>	<u>724090</u>		<u>12-3-16</u>
Transferred to	<u>656 Bn. Bramshott</u>			<u>31-1-17</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>APPROVED</u> <u>11 DEC 1916</u> <u>Bramshott Camp, Hants.</u>	<u>11-12-16</u>	<u>Amoebic Dysentery</u>	<u>Class A fit</u>
<u>Shamcliffe</u>	<u>8-8-17</u>	<u>Bronchitis</u>	<u>Class B fit</u> <u>Medical Board, Bramshott.</u> <u>G. J. Jamesworth</u> <u>J. E. House</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.

88-2-40

MEDICAL HISTORY OF AN INVALID.

1. Station. Q.M.H. 8. General remarks on his:—
2. Regiment or Corps. 109th Batt. (a) Conduct.
3. Regimental No. and Rank. 724090 pte. (b) Habits.
4. Name. W.H. Jackson (c) Temperance.
5. Age last Birthday. 46 (For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)
6. Enlisted on March 12/16
- at Lindsay Address;— Lindsay, Ont.
7. Former trade or occupation painter Date. Nov. 5th 1917.

9. Service.	Years.	Days.	
		FROM	To
109th Batt.	March 12/16	Jan. 1917.	
Army service Corps.	Jan. 1917	present $\frac{3}{4}$	

10. (a) Disease or disability. Bronchial asthma.
- (b) Date of origin. Oct. 1916.
- (c) Place of origin. Man, England.
- (d) Cause. Man says exposure.

11. Present condition. (Most Important.) Man says had severe attack of bronchitis about 2 yrs. ago. but never had any further trouble. till Oct 191, when caught cold through getting wet. This condition kept getting worse & he frequently has asthmatic attacks. At present complains of attacks of coughing and shortness of breath at night. This wakes him & he has to go to window to get his breath. They last 2-3 hrs. says he has too weak to do any hard work. Does not cough much in the day time cannot attribute spells to any special exciting cause. they come on about every week or two, if weather is wet. Examination shows well nourished man with slight cough, raised very little sputum, lungs show very few scattered dry rales at basis of both lungs, heart normal. Pulse, 76, B.P.S. 120, B.P.D. 80, Urine, S.G. 1020, R.-acid, alb.-nil sugar nil.

12. (a) Is the disability the result of service or climate? Service.
- (b) Has it been aggravated by intemperance, vice or misconduct? No.

MEDICAL HISTORY OF AN INVALID

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.)

Small scar 1" long under angle of jaw, right side.

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action was a Court of Inquiry held?

Not applicable.

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

Not exceptional.

14. Treatment.

Medium and light duty in England. Queen's Military Hospital.

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent?

Not applicable.

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes?

6 months, possibly permanent.

17. To what extent will it prevent his earning a full livelihood in the general labour market? Please state in fractions. When more than one disabling condition is present, the extent of the disability due to each should be stated.

30% re-examination at end of 6 mos.

18. State if for discharge on account of unfitness for Service.

Yes.

S.M. Asselstine Capt. AMC
Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

Does the Board concur with the preceding report? If not, give differing opinion.

10. YES

11. "

12. "

15. "

16. "

17. "

18. Is he unfit for Military Service. Yes.

Recommendations: On account of disability resulting from bronchitis
asthma, this man should be placed in category "E". Man requires no further
treatment, able to pass under his own control.

Signatures:—

Wm. Gibson Capt. AMC President.

E.C.D. MacCallum Capt. AMC

Station. Kingston.

Members.

Date. Nov. 20/17

L.N. Armstrong Lieut. AMC

Date.

E.E. Hatta Major. AMC
Asst. Director of Medical Services.

Approved.

Date.

Director-General of Medical Services.

FILE NO. 1140AT
 MILITARY HOSPITALS
 HEAD OFFICE OTTAWA
 RECEIVED

DEC 3 11 04 AM '17

REFERRED TO NOTED
 REFERRED TO ANS'D

(At Station or Hospital where finally disposed of.)

Station and Hospital } Arrived from }

Date

If admitted. Index No.	If under treatment.		Disease.	How fully disposed of.	Date of Discharge, &c.
	From	From			
Date					

Summary of Causes of invaliding, or remarks as to remand to Regiment, Station or Depôt.

.....

Date of final Medical Board or decision. } Administrative Medical Officer.

DETAILED MEDICAL HISTORY OF INVALID.

Militia Form B. 227.
 2000m. 8-16.
 H. Q. 1772-89-117.

Station	Regimental No.	Rank
Corps		
Name		
Disability		
Date		
Hospital or Station transferred to for final disposal.		
Date of final disposal		
How finally disposed of		

The original Report is invariably to accompany the discharge documents of Invalids.

28157

125748

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Bramshott. 11-12 1916.

No. 724090 Rank Plt Name Jackson, W. H.

Local Unit 124 Overseas Unit _____ Age 45 ⁴/₁₂

Examination held at Bramshott.

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

Charge
Plt

PRESENT CONDITION.

*Is the applicant and suffers from
recurrent attacks of dizziness so
severe that he cannot carry on full
duty.*

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..... Class C VII
- 5. Discharge.....

Signatures:—

Members

C. S. Cooper, Plt President.
H. MacLaren, Capt

APPROVED

Dated at Bramshott. 11-12 1916. H. A. Stewart, Maj.

For A.D.M.S. 400

PROCEEDINGS OF A MEDICAL BOARD

Form 100-10-1

1916

Dated at _____ 1916

No. _____ Rank _____ Name _____

Local Unit _____ Overseas Unit _____ Age _____

Examination held at _____

DISABILITY
Overseas—Local
(rotation one out)

PRESENT CONDITION

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—

..... President

Members

APPROVED

Dated at _____ 1916

For A.D.M.S.

.....

QUEEN'S MILITARY HOSPITAL—REPORT ON ADMISSION.

Date Oct. 6 / 17

No. 724090 Rank Private Name Jackson William Hector

Corps 109th Battalion

Address Lindsay, Ont.

Next of Kin Wife, Lillian G. Jackson

Occupation Painter

Age 26 yrs 3 mths.

Enlisted March 12, 1916.

Examined by Dr. McCulloch

Height 5' 8"

Chest 37

Complexion light

Hair brown

Eyes blue

Religion Presbyterian

History:— Man says he reported sick while at Witley Camp (Nov. 1916) suffering from a cold, and was treated for Bronchitis, being kept on duty in the orderly room until Dec. 7th. when he was boarded, and again returned to medicine duty, until ~~Jan.~~ ^{Aug.} 1917. when he again reported sick and was again boarded being sent to Baston, remaining three weeks, when he was returned to Canada aboard S.S. Vestris arriving Halifax Sept. 25. 17. Kingston Oct. 4. 17. Eng. July 31. 1916. left Eng. Sept. 13. 1917.

Observation:— a well nourished man with slight cough worse in the mornings, Heart normal and lungs free of rales

Fit for leave.

Dis:— Bronchial Asthma. N. A. 6 mos. possibly perm. 30% Re-examination at end of 6 mos. Capt. E. Discharged Apr. 6th 18

Pay On Boat
At Quebec
Cheque

2 M
12/

Received A38805
J. M. Cannon
Capt.

This space to be for numbers.

2030

Proceedings on Discharge.

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

No. <u>724090</u>	
Rank <u>Pte.</u>	
Name <u>Jackson, W.H.</u> <small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company) <u>109th Battalion.</u>	
Date of Discharge <u>1-4-18</u>	
Place of Discharge <u>Kingston Ont</u>	
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age..... <u>46</u>years..... <u>6</u>months.	Descriptive Marks <u>i Vaccination mark left arm.</u>
Height..... <u>5</u>feet..... <u>8</u>inches.	
Complexion <u>Fair</u>	
Eyes <u>Blue</u>	
Hair <u>Medium brown.</u>	
Trade <u>Painter</u>	
Intended place of residence <u>Lindsay, Ont.</u> <small>(To be given as fully as practicable.)</small>	
2. The above-named man is discharged in consequence of <u>Being medically unfit for further service with 3rd Bn. 88-G. 43 29/3/18</u>	
<small>N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.</small>	
To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.	3. Conduct and character while in the service have been, according to the records, etc. <u>Very good</u>
	<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.)	

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.....

Three horizontal dashed lines for recording 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) Kingston.....

Stuart CAPT. & ADJUTANT
"G" Unit, M. H. C. C.

(Date) 1/4/18.....

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) Kingston W. H. Jackson..... (Signature of Soldier.)

(Date) Jan 8th 1918 *Gudryce*..... (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) 2 years 19 days.

Total 2 years 19 days.

11. Confirmation of Discharge.

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

(Place) Kingston.....

Stuart CAPT. & ADJUTANT
"G" Unit, M. H. C. C.

(Date) 1/4/18.....

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.)

None.

W. H. Jackson

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. Med. Hist. Sheet, Militia Form B. 313 Medical Report for Invalid* " B. 227. Statement of Man's Account on Transfer and Last Pay Cer- tificate, " D. 877. *Only if discharged "Medically unfit."	<p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <ul style="list-style-type: none"> (a) Proceedings on Discharge. (b) Attestation. (c) Medical History Sheet (in the event of such having been prepared.)

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.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

TRIPLICATE LAST PAY CERTIFICATE

CASUALTIES, C. E. F.

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

Regimental No. 724090 Rank Pte. Name Jackson, W.H.

Corps 109th Battalion who was* Discharged

On April 1st 1918, to Class 3, Medically unfit
 *Insert "discharged" or "transferred."

The following is a statement of the account of the above named from April 1st 1918
 to April 1st 1918, the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month			Bal. Cr. from prev. month		
Advances by Cheques } No.			Reg't Pay <u>1</u> days at \$ <u>1</u> c.	<u>1</u>	<u>00</u>
Assigned Pay and Sep'n Allee. No. <u>399</u>	<u>1</u>	<u>00</u>	Field Allow. <u>1</u> days at \$ <u>10</u>	<u>10</u>	<u>00</u>
Other charges			Separation Allowances* (Monthly)	<u>1</u>	<u>00</u>
Payment on transfer or discharge No. <u>399</u>	<u>9</u>	<u>10</u>	Other Allowances*		
Balance Cr. (to be paid by the new unit)			Other Credits* <u>Clothing</u>	<u>8</u>	<u>00</u>
Total	<u>10</u>	<u>10</u>	Bal. Dr. (to be deducted by new unit)		
			Total	<u>10</u>	<u>10</u>

* Give particulars.

A monthly stoppage of \$ 15.00 (†) has (‡) been paid on account of Assigned
 { Pay for the month of March 1918 } (to) Assignee Mrs. L.O. Jackson,
 { and Sep'n Allee. for month of 191... }
 (Address) Lindsay, Ont.

(†) 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 March 12th, 1916
 (2) if married and if a Separation Allowance Card has been submitted pd to date of disch.
 (3) cause of discharge authority 3MD 38-J-43
 (4) authority for transfer

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date April 2nd, 1918
 Place Kingston, Ont.

Whebers } Capt.
 Paymaster, "C" Unit M. H. C. C.
 Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay-list at the end of the month, and quadruplicate for retention as a record.
 For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record.
 If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.

100M.—1-18.
 H. Q. 1772-31-903.

Cheque Attached

399

WB

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LEWIS MCAPPE LAST PAY CERTIFICATE

THE FOLLOWING IS A SUMMARY OF THE PAY AND ALLOWANCES PAID TO THE ABOVE NAMED SOLDIER DURING HIS SERVICE IN THE CANADIAN CONTINGENT EXPEDITIONARY FORCE

NAME: LEWIS MCAPPE GRADE: PRIVATE NO. 123456789

REGIMENT: THE CANADIAN INFANTRY (CENTRAL) BATTALION

COMPANY: THE CANADIAN INFANTRY (CENTRAL) BATTALION

PLATOON: THE CANADIAN INFANTRY (CENTRAL) BATTALION

DATE OF ISSUE: 1914

DATE OF EXPIRY: 1918

AMOUNT PAID: \$100.00

PAID TO: LEWIS MCAPPE

BY: THE COMMANDING OFFICER

THE CANADIAN CONTINGENT EXPEDITIONARY FORCE

1918

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A.S.B.
me

Number 724090. Rank *Pte.*

Surname JACKSON.

Christian Name *William Hector.*

Units *109th Bn. Can. Inf.* Theatre of War *England.*

Date of Service *31-7-16.*

Remarks

Latest Address *King St. Lindsay. Ont.*

Roll No *Page 3737.*

200m.-2-21.M.

DESP. JUL 9 1923

REGN. NO. 3687

SURNAME.

Jackson

CARD NO.

✓

CHRISTIAN NAMES

William Hector

FOLL.

REGL. No. *724090*

RANK *Pte*

UNIT *109th*

Batt

FORMER CORPS

7 yrs. 45th Regt.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Jackson, Mrs. Flean Aiol

RELATIONSHIP TO SOLDIER

Wife

ADDRESS

47 Kent St., E. Lindsay, Ont.

*also notify: - Mrs. Jackson,
Record Office.*

COUNTRY OF BIRTH

Canada. Pt. Hope, Ont.

DATE

July 30th 1871

PLACE OF ATTESTATION

Lindsay, Ont.

DATE

Mar. 15th 1916

1/8 23-7-16 ⁴⁸⁸/₇₈

R/C 25/9/17

Sailed from Halifax 23-7-16 per SS Olympic

MARRIED *yes*

SINGLE

WIDOWER

TRADE OR CALLING *carriage painter* RELIGION *Presbyterian*

DESCRIPTION.

APPARENT AGE

44 YEARS

8 MONTHS

HEIGHT

5 FEET

6 1/2 INCHES

CHEST MEASUREMENT

34 INCHES

EXPANSION

3 INCHES

COMPLEXION

fair

EYES

blue

HAIR

brown

DISTINGUISHING MARKS

Scar on rt. side of throat below chin. End of index finger of right hand. off.

MEDICAL EXAMINATION.

PLACE

Lindsay, Ont.

DATE

Mar. 12th 1916

Sailed for Canada per S.S. Transport 8261 13-9-17 with Y. 349.

No. 724090 RANK

Pte

NAME

Jackson. W.

24.

T. O. S. 12-3-16.

UNIT

109th. Battalion.

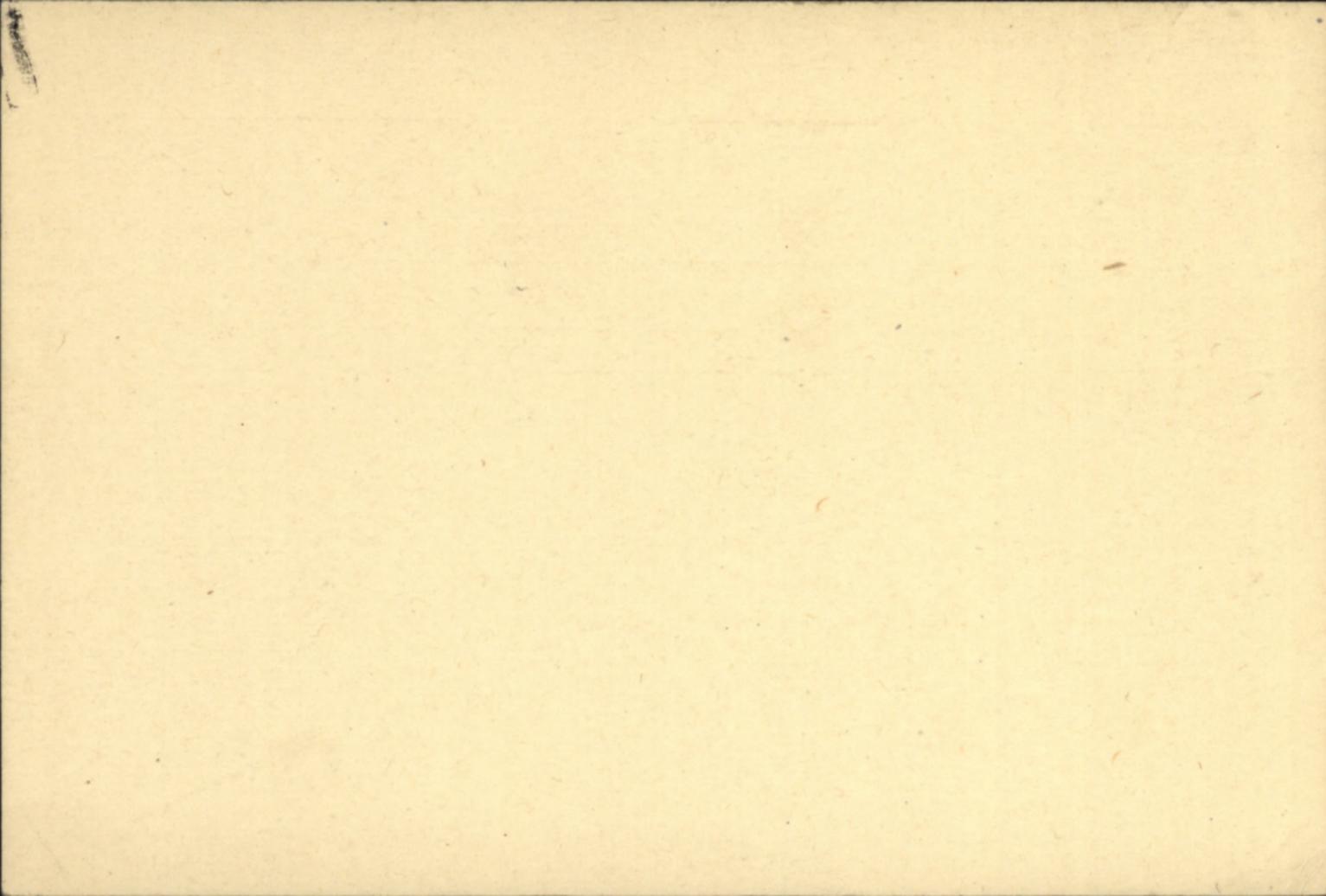
D.O. 104. 21-3-16

M. D. V

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916.			
Mar 12	Mar. 31	✓		
April.		✓		
May.		✓		
June.		✓		
July.		✓		

UNIT SAILED

JUL 23 1916



A.C. Rank _____ Name **JACKSON, William Hector.** ✓ Reg'l No. **724090** ✓
 Unit **109th. Bn.** If in perm. Corps, }
 What Unit? } Married or Single **Married.** ✓
 Place and Date of Enlistment **Lindsay. March. 12th. 1916.** ✓ Place of Birth **Port Hover,** ✓
Ontario.
 Name and Address, Next-of-Kin **Mrs. Lilian Oriole Jackson.** ✓
47, Kent St.E. Lindsay, Ont., ✓ Relationship **Wife.** ✓
 Assigned Pay Monthly \$ _____ Payable to _____ Relationship _____
 Separation Allowance \$ _____ Payable to _____ Relationship _____
 Discharge, Date and Place _____ Reason **PK** Character _____

N/E. R.B. No. **1339.**
 File R.L. _____
 Category **Plan**

Leash

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. 3310 31-7-16					
8-12-16	Ob 109 th Bn	SOS on trans. to 124 th Bn	Witley	8-12-16	PI DD 343
11-12-16	Ob 124 th	SOS on trans. for 109 th	"	"	" 267.
19-12-16	"	SOS on trans. to CAC + att'd to 124 th for S.S.P. + C	"	12-12-16	" 276.
16-1-17	Ob 124 th	TOS on trans. from 124 th for 124 th	Hastings	11-12-16	" 26
9-1-17	124 th	trans. att'd 124 th + att'd 3 rd Regt CASC	Witley	8-1-17	" 9
9-1-17	C.A.S.C. #3	att'd for R.L.C.E.D. is + Pay	"	8-1-17	" 9
31-1-17	"	Cease to be att'd	"	31-1-17	" 31
2-2-17	" #2	att'd for R.L.C.E.D. is Duty + Pay	Beckett	31-1-17	" 29
25-2-17	"	Cease to be att'd + is T.O.S.	"	20.2.17	" 49 (S.O.S. CAC PI 242 d/16/17)

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.				
30-5-14	6156 Bramshott.	305. to 6156 ^① Rec Tpt S. Cliffe Bramshott	Bramshott	30.5.14.	Pt II. D.O. 129. } case 80 Pt 28d/11 1/2 }
18.8.17	— — —	DD. S.O.S. to C.A.S.C. C.D. (for Canada)	S'cliffe Pte	18.8.17	— — — 96.
18.8.17	— — —	C.D. T.O.S. from C.A.S.C.D.V	— — —	18.8.17	— — — 162.
17.9.17	"	" On Com" C.D.D. Buxton for Canada " Comm'n com. C.D.D. Buxton and D.O. D. to Canada services no longer req'd	"	13.9.17	" " 192
	Disch Depot To General Home	m.p. 110.3 Kungster		25 917	NR 352.

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

W. B. L.

09399-W-9.

Name **Jackson, William H.**
Surname Christian Name

Regimental Number **724090** Rank **Pte.**

Address (in full) **Gen. Del.,
Lindsay, Ont.**

Unit **109th Bn. Trans. to C.A.S.C.**

Original Unit

District where paid **M.D. 3.**

Date of Discharge **1-4-18.**

P. D. P. Filing Number **1-95-3.**

Rates:—Regimental pay \$ **1.00** per diem; Field Allowance \$ **.10** per diem. Separation Allowance \$ **25.00** per month.

L. L. 22573—M. & D. 8009.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over- payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
175 10	1861	6-4-18	58 00	1817	6-5-18	58 00	1701	6-6-18	59 10		175 10

M. F. W. 127.
50M -6 17.
1772 89-1140.

Remarks:

File No. 09399-W-62

WAR SERVICE GRATUITY.

Register No. 2641

Reg. No. 13-8-19
724090

Dependent Lillian A Jackson (wife)
Address (Same)

Name Jackson Wm H.

Address 28 [unclear] W.S.G.

Dec'n No. <u>W.S.G.</u>	File No.
Award ... days at \$... per day \$	
Less P.D.P. Credited	\$
Less further debit balance not due paid as below	\$
TO SOLDIER TO DEPENDENT	
0 Ag No Ch No Amount	Av No Ch No Amount
1 <u>W.H. Smith</u>	Days <u>153</u> Rate <u>100⁰⁰</u> Due <u>500⁰⁰</u>
2 <u>Starkins</u>	Less P.D.P. credited <u>175¹⁰</u>
3 <u>Starkins</u>	Less further Dr. Bal. or overpayment. <u>0</u>
4	
5	
6	
Total	Net <u>324⁹⁰</u>

Pay Soldier \$ 174⁹⁰

Pay Dependent \$ 150⁰⁰

Clerk W.H. Smith

R.
W102
23/10/19

Date	Ck. Order	Ck. No.	Amount	Remarks	Date	Ck. Order	Ck. No.	Amount
1 27-8-19	8038	50125	140 00		127-8-19	8039	50125	60 00
2					2			
3 17-9-19	22684	518905	34 90		3	22683	518906	30 00
4					4	90 ⁰⁰		30 00
5					5			30 00
6					6			

495-D.P.-100M-6-19 (10248).

174 90

150 00

GEN'L AUDITOR
Posting checked by
J.P. Green
Date 9-1-8-19

MILITIA AND DEFENCE
ASSIGNED PAY

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

Sheet No. 2. *Mrs Lillian O. Jackson (Wife)*
 OVERSEAS CONTINGENTS
 PAYMENTS.

Name of Soldier *Jackson W. Hector*
 # *724090* "*B Coy*" Pte.

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

Month.	Year.	Cheque No.	Amt.
April	1916		
May			
June			
July			
Aug.		<i>F 15371</i>	<i>15⁰⁰</i>
Sept.		<i>X 18029</i>	<i>15-</i>
Oct.		<i>X 23103</i>	<i>15</i>
Nov.		<i>E 26808</i>	<i>15</i>
Dec.		<i>M 32898</i>	<i>15-</i>
Jan.	1917	<i>T 39297</i>	<i>15-</i>
Feb.		<i>T 45237</i>	<i>15-</i>
March		<i>P 51113</i>	<i>15-</i>
April		<i>L 2652</i>	<i>15</i>
May		<i>K 9054</i>	<i>15</i>
June		<i>M 16720</i>	<i>15</i>
July		<i>L 23035</i>	<i>15</i>
Aug.		<i>U 28533</i>	<i>15</i>
Sept.		<i>J 37173</i>	<i>15-</i>
Oct.		<i>J 42794</i>	<i>15</i>
Nov.		<i>Q 48620</i>	<i>15-</i>
Dec.			
Jan.	1918		
Feb.			
March			
April			
May			
June			
July			

15⁰⁰
 Remarks. *109 Batt*
AUG 1 1916
\$30⁰⁰ overpayment for Sept + Oct / 17
Recovered by Cas Adm H.Q. L
649-J-6194 on file 9399-W-62
E.H. 3/12/17

mc

mc

15 *(W)*
15-CL

240

Mc
W.

S

..... A/c Closed
 Ret'd per *Tps. 82.61*
\$225⁰⁰ Date *13-1-14* F. X *30-10-14*
 Clerk *E.H. Huson*

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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

Pfc Name *Jackson W.H.*

M. F. W. 41
1 OM-746
1772-39 680. P. C. No. 703

Regimental No. *724090*

Armed.
Name and address of next of kin *Russay Oct.*

Unit *109th Bn*

Date of enlistment *Mar 16*

MP-28-9-17 - Kingston Ohio - Armed.

Place of " *Russay*

Na 20⁰⁶ 12-3-16-31-10-17 = \$392⁰⁰

Married (yes or no) *Yes*

Date and place discharged

Amount of pay assigned monthly \$ *15⁰⁰ 1-8/16-31-10-17*

Reason for discharge

To whom payable *Mrs William D. Jackson*

Character on discharge

Justitia 26⁹ 17. Russay Oct. Oct 2.3. H.Q. 649-J-6194.

D. P. Job 5351-M. & D. 6880.

Date		No. of Days	PAY		Field Allowance		Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.	
From	To		Rate	Amount	No. of Days	Rate			Amount	No.						Date
<i>19⁶ 17</i>	<i>18⁸ 17</i>															
	<i>31¹⁰ 17</i>	<i>74</i>	<i>1-</i>	<i>74</i>	<i>10</i>	<i>740</i>		<i>786</i>								<i>Eng R.P.C.</i>
								<i>8926</i>					<i>973</i>			<i>A.R. 8470</i>
													<i>973</i>			<i>" 10044</i>
													<i>487</i>			<i>" 20</i>
													<i>25-</i>			<i>b D Holman</i>
												<i>30-</i>				<i>a.P. Sept Oct/17</i>
														<i>7933</i>		
														<i>993</i>		
								<i>8926</i>						<i>8926</i>		<i>Pensioned</i>
								<i>8926</i>								<i>R.P. bound on 16-11-17.</i>
																<i>Showing Adj 31¹⁰ 17</i>
																<i>Trfd to C. unit</i>
																<i>16-11-17</i>
																<i>S.A. Recovery of</i>
																<i>15⁰⁰ p.m. Sept. Oct/17</i>

12/11/17 hand

Eng R.P.C. 1-8-16-31-8-17 = \$195⁰⁰

12-3-16

MILITIA AND DEFENCE

M. F. W. 11.
20m.—11-15.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name *Lillian O. Jackson*Name of Soldier *Jackson W. M. H*Address *47 Kent St E
Lindsay
Ont*Regtl. No. *724090*Rank *Plt*Corps *109th Batt*

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.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



ACCOUNT CLOSED
DATE..... PER. *W*

3
X 502175
11/11/11

00 12

11/21/11

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom *Mrs. Lillian ^{Wife} Jackson*
 Address *Lindsay
 Ontario.*
 Rate *15⁰⁰ per m.* **AUG 1 1916**

By Whom Assigned *Jackson, W. Hector*
 Regtl. No. *724090.*
 Rank *Pte.*
 Corps *109 Batt. "B" Co.*

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				



1773
1774
1775

1776
1777

1778

12-3-16

MILITIA AND DEFENCE

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

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

L. O. Jackson

Wife
PAYMENTS.

Name of Soldier

Jackson Wm H.

L. L. Job 95618—M. & D. 6555.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	S679	32	32
May		R 5536	20	20
June		P 7761	20	20
July		M 11958	20	20
Aug.		A 12266	20	20
Sept.		R 16350	20	20
Oct.		W 19416	20	20
Nov.		B 22409	20	20
Dec.		D 25759	20	20
Jan.	1917	G 29273	20	20
Feb.		G 32399	20	20
March		G 35544	20	20
April		I 1329	20	20
May		H 4517	20	20
June		G 7540	20	20
July		A 11014	20	20
Aug.		T 14359	20	20
Sept.		S 17674	20	20
Oct.		B 21891	20	20
Nov.		F 24420	20	20
Dec.				A/c Closed
Jan.	1918		392	Ret'd per. 31-10-17
Feb.				Date 13-9-17 F. X. 31-10-17
March				Clerk W. Peterkin
April				
May				
June				
July				

B 24420 Cancelled
31-10-17
700 8261
29.

ACCOUNT CLOSED
 DATE.....PER.....
W

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier.....

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

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

12-3-16

Separation and Assigned Pay Branch

Aug 1/16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

20			
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RATE OF ASSIGNMENT

15			
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PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

25584
84

No. ~~724027~~ (724090.)
 Rank *Pte* Promoted Reverted Discharge
 Soldier's Name *W. E. Jackson*
 Battalion *109 Battrn A. Co*
 Beneficiary *Lillian C. Jackson*
 Relationship *Wife*
 Address *47 Kent St. E. Lindsay Ont.*

Name *Mrs Lillian Jackson*
 Address *Lindsay Ont.*
 Change of Address
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917					
Dec 31	—	392	225	617	
					<i>A/c Closed 31/10/17 Returned P.S. 8261. F.K. 31/10/17</i>
					<i>A.P. \$30. overpaid for Sept + Oct 1917 recovered by Cas Auth H. 2, L. 649-8-6194. on file 9399-W-62</i>

724090. The Jackson William Hector

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		1	2	3	4	1	2				3	4				CREDIT	DEBIT						
			\$	C.						\$	C.	NO.	DATE	NO.	DATE	NO.	DATE				NO.	DATE											
			346	40					346					41	35	14	60	68	13	150	7	70	281	78	64	62							
May 1				110					110											15		15			65	72							
June 30				33					33											15		15			83	72							
July 31				34	10				34	10										15		15			102	82							
Aug 17				18	70				18	70										15		15			106	52							
18	1			110					110											195		195			107	62							
Sept																																	

Left to pay 28.2. 18.8.17
 A.S. 5-1-93. 26.7.17

33M. FORM REND. STOPPED
 DISCHARGED TO: Can DATE: 1.8/8/17
 PAYR. VERIFIED: 18/8/17
 Cr. BAL. 7.86 L.P.G. REND. 18/8/17
 PAY. 12.51.33 DATE: 26/7/17

For Disposal
 Checked S. Keyte H.C.
 CN. 11.60

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	EALANCE	SEP. PAY	SEP. END.
1917											
	Oct Balance Forward								97	89	
	DR										
	Apr 25/17 base 13.50				4	30					
	Apr 20/17 " " "				4	86					
	Apr 10/17 base 13.50				9	73					
	Apr 7/17 base 13.50				7	30			68	70	
	Apr 23/17 " " "				9	74					
	Apr 9/17 base 13.50				9	73					
	Apr 30/17 " " "				4	87					
	Apr 17/17 " " "				9	73					
	Apr 15/17 base 13.50				24	33			10	30	
					58	40					
	May 16/17 base 13.50				4	87					
	May 20/17 base 13.50				7	30			1	84	
					12	17					
1918											
June	Apr No 6458 base 13.50		11	60.					9	73	
Oct	Dr. 11/17 10/17 base 13.50				9	73					
					9	73					