

OK 5-2-1915



ATTESTATION PAPER. 109th OVERSEAS BATTALION, C. E. F. CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

No. 724004

Folio. ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

- 1. What is your surname? J. Madden
1a. What are your Christian names? Thomas James Walter
1b. What is your present address? 43 Glenelg St., Lindsay, Ont
2. In what Town, Township or Parish, and in what Country were you born? Lindsay, County Victoria, Ontario
3. What is the name of your next-of-kin? Mr. James W. W. Madden
4. What is the address of your next-of-kin? 43 Glenelg St., Lindsay, Ont
4a. What is the relationship of your next-of-kin? Mother - Father
5. What is the date of your birth? Jan. 8th 1898
6. What is your Trade or Calling? Stenographer
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? 3 yrs 4th Regt (Voluntary Service)
11. Do you understand the nature and terms of your engagement? Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, J. Madden, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the Canadian Over-Seas Expeditionary Force, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Date Jan 1st 1915 (Signature of Recruit) (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, J. Madden, do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Date Jan 1st 1915 (Signature of Recruit) (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 1st day of January 1915. (Signature of Justice)

6 GA

Description of *Thomas J. W. McFadden* Enlistment.

Apparent Age... *16* years... *11* months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

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

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

Complexion... *Fair*

Eyes... *Blue*

Hair... *Dark Brown*

Religious denominations

Church of England.....

Presbyterian... *Presby*

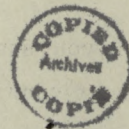
Methodist.....

Baptist or Congregationalist.....

Roman Catholic.....

Jewish.....

Other Denominations.....
(Denomination to be stated)



Index finger of right hand shortened.

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 declares that he is not subject to fits of any description.

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

Date... *January 1st* 191*5*

Place... *Lindsay*

J. McCulloch Capt
Horsford 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.

Thomas J. W. McFadden 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. McFadden Lt Col (Signature of Officer)
O. C. 109th Overseas Battalion, C. E. F.

Date... *January 1st* 191*5*

724004

SIN/NAS

Mc FADDEN

Surname/Nom

THOMAS JAMES Walter

Given names/Prénoms

CANADIAN FORCES
FORCES CANADIENNES

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

"CONTENTS CONFIDENTIAL"

"CONTENU CONFIDENTIEL"

6813
AO-264-~~480540~~

COMPONENT
ÉLÉMENT _____



No. 72400 1/2 RANK

Sgt.

NAME

Mc Fadden. J. J.

T. O. S.

UNIT

109th. Battalion.

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Nov 16	1915 Nov 20	✓		
	Dec.	✓		
1916 Jan.	1916	✓		
	Feb.	✓		
	Mar.	✓	Proc. App. R. O. Sgt.	D. O. 109. 27-3-16.
	April	✓		
	May	✓		
	June	✓		
	July	✓		

UNIT SAILED
JUL 23 1916



SURNAME.

Mc Fadden

CARD No. ✓

CHRISTIAN NAMES

Thomas James Walter

*S.O.S. 16/8/18 R.A.F.
FOLL
RT 299 of 16/12/18. O/S.*

REGL. No.

724004

RANK

Sgt.

UNIT

109th

FORMER CORPS

45th Regt.



Batt.

NEXT OF KIN.

NAMES IN FULL

Mc Fadden, James

RELATIONSHIP TO SOLDIER

Father

ADDRESS

*43 Glenely St., Lindsay,
Ont.*

CHANGE OF ADDRESS

COUNTRY OF BIRTH

Canada, Victoria Co, Ont.

DATE

Jan. 8th 1898.

PLACE OF ATTESTATION

Lindsay

DATE

Jan. 1st 1910.

Sailed from Halifax Per

*S.S.
"Olympic" 23-7-16 488
23*

MARRIED

SINGLE

Yes

WIDOWER

TRADE OR CALLING

Stenographer

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

16 YEARS

11 MONTHS

HEIGHT

5 FEET

8 1/2 INCHES

CHEST MEASUREMENT

36 INCHES

EXPANSION

4 INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

Dr. Brown

DISTINGUISHING MARKS

Index finger of right hand
sharked.

MEDICAL EXAMINATION.

PLACE

Lindsay

DATE

Jan. 1st. 1915.

78.

2/2
One form added 3.3.25

*B+V by Air Min
No mells by this Dept.*

649-M-22221

A/Script

3/25

Number *Y24004* Rank

Surname *Mc FADDEN* Deceased *5 Jun 56*

Christian Name *Thomas James Walter*

Units *C.F.C.* Theatre of War *France*
S.O.S. appointed Flight Cadet. R.A.F. 16.8.18

Date of Service *Pub. C.F.C.B.D. P# 00. 297. of 13.12.18.*

Remarks *air force roll # 1 page 43
AW 25226 of 20/15. 7 of 10. 7. 20*

Latest Address

Special Air Force

Roll No. *1. B. Page 22465*





724004 Sgt. McFadden, T.J.

109th Battalion, C.E.F.

Will detached by Regt. Paymaster.

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

77203

- 20 -

Perforated sheet for Will from Pay Book of Reg.

No. *724004*

Name *Thos. J. McFadden*

Unit *109th BATTALION CANADIAN INFANTRY.*

Military Will.

In the event of my death
I give all my belongings
to my mother -

Mrs. James W. McFadden
43 Grenville Street
Lindsay, Ont.
Canada.

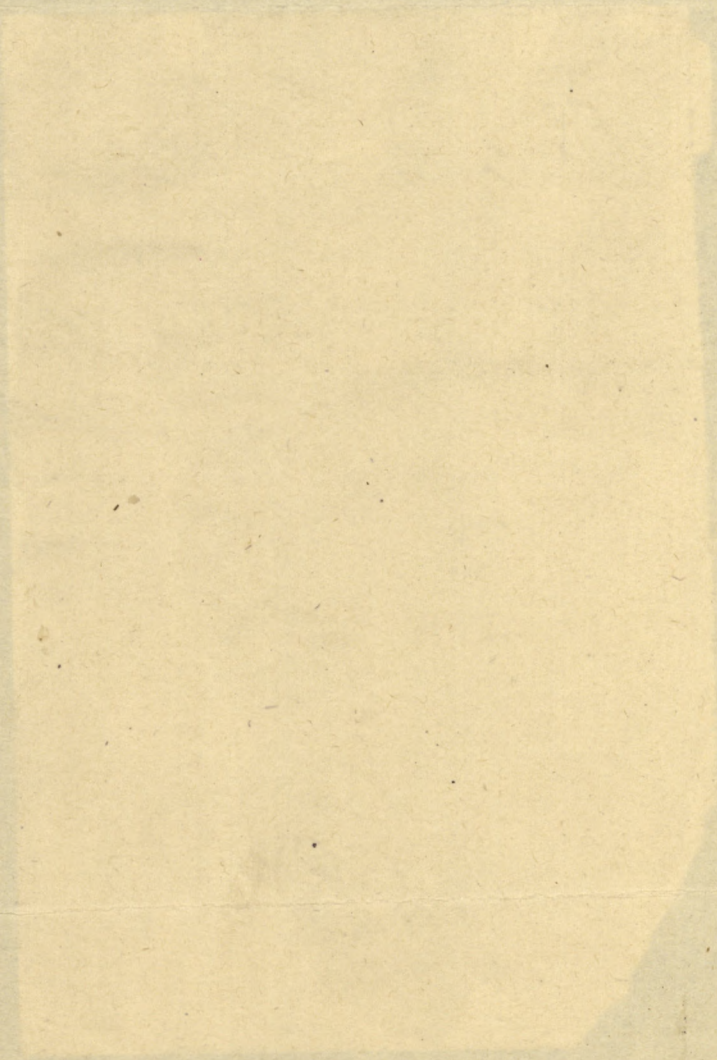
Witness
J. J. McFadden

Signature *T. J. McFadden*

Rank and Regt. *O.P. Supt - 109th Bn*

Oct. 13/16.

Joseph B. ...
...



CANADIAN ARMY DENTAL CORPS.

DENTAL CERTIFICATE.

NOTE:- This form will be attached to the Medical History sheet of each Other Rank being returned to Canada for disposal.

REGTL. No. *724004** NAME *McFADDEN, K.F.W.* RANK *Sgt.* UNIT *C.F.C.*
to R.A.F.

Date of Examination	<i>Oct 12/18.</i>
Present Dental Condition	<i>Good</i>
In case of loss, or decay of teeth, is the loss due to wounds, injury, or disease, directly attributable to Active Service?	<i>No</i>
Has he ever declined Dental Treatment?	<i>No</i>
Recommendation	<hr/>

Date *Oct 12/18.*

Station *London.*

Signature of Examining Officer *O. Hase* Capt.
 C.A.D.C.

* Name should be entered in block letters.

CANADIAN ARMY DENTAL CORPS

DENTAL CERTIFICATE

This form will be returned to the Medical Director of the Canadian Army Dental Corps.

NAME: W. J. HODGINS
RANK: CAPTAIN
REGIMENT: 10th BATTALION

Date of Examination	
Present Dental Condition	
Amount of loss of teeth or decay	
Is the loss due to accident, disease, or decay?	
To Active Service	
Is the condition well?	
Special Treatment	
Recommendation	

Station: _____
Date: _____

Signature of Examining Officer: _____
CAPTAIN
* Name should be entered in block 1 only.

Forestry

LAST PAY CERTIFICATE.

No. 724004 Rank Pte Name Mc Fadden Thos. W. J. OF Imp. Cats Unit Imp. Cats

Reason Account closed * (Discharged) off Date 17-8-18 Authority Sch #25/11/18
* (Transferred) off
* (To Canada)

App. Flight Cadet

CR.	\$	¢	DR.	\$	¢
EARNINGS.			Total		
From <u>1-5-18</u> To <u>16-8-18</u>			Cash Payments <u>148 02</u>		
<u>108</u> days at Pay <u>\$1.00</u>			Assigned Pay for period <u>1/5/18</u> to <u>31/5/18</u> at <u>\$20.00</u>		
F.A. <u>10</u>			per month in favour of		
W.P. <u>10</u>			Name <u>Mr M. Mc Fadden</u>		
Daily Total <u>\$1.10</u>			Address <u>Lindsay</u>		
<u>118 80</u>			Relationship <u>mother</u> <u>20</u>		
From..... To.....			* This assignment has been stopped effective <u>1-6-18</u>		
..... days at Pay.....			or		
F.A.....			* Is being continued in England pending advice of final discharge of soldier,		
W.P.....			or		
Daily Total.....			* Being a Canadian Payment, cancellation or otherwise of future payments will be dealt with by Ottawa.		
From..... To.....			* (Strike out whichever inapplicable).		
..... days at Pay.....			Other Charges.		
F.A.....				
W.P.....				
Daily Total.....				
Any other Credits. <u>Bal @ 30/4/18</u>			<u>39 88</u>		
Interest on Deferred Pay <u>nil</u>					
Cash Effects.....					
<u>Debit Bal 16/8/18</u>			<u>9 34</u>		
<u>£1-18-5</u>					
I hereby certify that I am satisfied that the balance of my account as shewn on this statement is correct.			Balance.....		
Signature of soldier.			<u>168 02</u>		
			Note. This Balance is subject to deductions of all amounts endorsed on back hereof. P.T.O.		
			<u>168 02</u>		

~~.....~~
~~.....~~
~~.....~~

Particulars of Sep. Allce. payable in England.
Name.....
Address.....
Relationship.....
Monthly Amount.....

* Payment discontinued Date..... Reason.....
* or Payments being continued by Paymaster General, O.M.F.C., pending advice of final discharge of soldier in Canada.
* (Strike out whichever inapplicable).

COMPILED BY H. Lovejoy
CHECKED BY H. Williams

Certified Correct,
[Signature]
For Brigadier-General,
Paymaster General, O.M.F.C. Bapt

ENDORSEMENTS.

Payments, Issues on repayment etc. made subsequent to issue of L.P.C.

Date	Unit	A.R. No. or Other Particulars	Amount	Paymasters Signature
		Total		

Note: This balance is subject to deductions of all amounts entered on that period.

I hereby certify that I am satisfied that the balance of my account as shown on this statement is correct.

Q4 341. 2 MC-399. of 12-16-18

Medical Examination upon leaving the Service

35214

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 A/SQT Name THOMAS JAMES WALTER Surname MCFADDEN

Unit or Corps C.F.C. (If a soldier) Regtl. No. 724004

Born at Lindsay Ont. on date Jan. 8. 1898

Signature (for identification) T.M. McFadden

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

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe. none,

Weight 140 lbs. Height 5'8" (Note: stripped)

2. NUTRITION AND DIATHESIS? Good.

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? normal. Abnormal Sounds? none. Abnormal Size? no. Pulse Rate? 68 Intermittence or irregularity? none.

6. ARTERIES.—Any hardening? none.

7. DIGESTIVE SYSTEM? normal.

8. GENITO-URINARY SYSTEM? normal. Urinalysis—s.g.? 1024 Reaction? Acid Albumen? nil Sugar? nil.

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? Fit.

Examined at 13 Bemers St. W.C. Signed Harold Buck M.O. Date 12-10-18 Signed S.R. D... 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.

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 unfit for duty by a Medical Board, are not to be reported on this Form.

Name: Thomas James White

Unit or Organization: 1st Cavalry Division

Board of: Medical

Signature (for identification): [Signature]

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

1. PHYSIQUE: Any deformity, malunion or tumor, if so describe.

Weight: 150 lbs

Height: 5 ft 10 in

Build: Medium

2. NUTRITION AND DIETETICS

After searching for any and thorough examination of any visible form of disease or impairment of the parts indicated.

3. NERVOUS SYSTEM

4. RESPIRATORY SYSTEM

5. HEART

Abnormal sounds: None

Abnormal rhythm: None

ECG: Normal

6. ARTERIES: Any abnormality?

7. DIGESTIVE SYSTEM

8. GENITO-URINARY SYSTEM

9. SKIN, MIDDLE EAR, EYE

10. Is there any evidence of impairment of health by physical condition not mentioned above, if so describe.

11. Give an account of the nature, extent, and duration of the eye examination.

Date: 10/10/1918

Signature: [Signature]

If any disease or impairment of health or physical condition is discovered, this report should be sent to the U.S. Department for the Office of Soldiers to be sent to a Medical Board for regular handling.

Sheet Two



Casualty Form—Active Service.

Rank *Pte* Surname *W. S. Laidler* Christian Name *J. W.*
 Regiment or Corps *109th Bn Coy. R.E.F.*
 Religion _____ Age on Enlistment _____ years _____ months
 Enlisted (a) *1.1.15* Terms of Service (a) *5000* Service reckons from (a) *1.1.15*
 Date of promotion to present rank _____ Date of appointment to lance rank _____
 Extended { _____ } Re-engaged { _____ } Qualification (b) *Stenographer*
 or Corps Trade and Rate _____
 Occupation _____ Signature of Officer _____

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked...			
<i>24.5.18</i>	<i>O.C. C.S.C.</i>	<i>On command to RAF S' Dale Depot for purpose of being granted a commission</i>	<i>S' Dale</i>	<i>5.5.18</i>	<i>Pte W. S. Laidler</i>
					<i>Major O.C. C.S.C.</i>
		DISCHARGED IN ENGLAND,			
		K. R. & O. PAR. 392, SEC. XXV.			
		<i>G. S. Loughton</i>			
		Captain			
		Chief Commanding,			
		No. 2 Canadian Discharge Depot,			

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoeing-Smith, &c.

35214

R-122

J.M. Rank Name McFADDEN, Thomas James Walter. Reg'l No. 724004

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

Place and Date of Enlistment Lindsay, 1st Jan 1916. Place of Birth Lindsay, County
Victoria, Ontario

Name and Address, Next-of-Kin James W. McFadden.
43 Glenelg St, Lindsay, Ont, Canada. Relationship Father.

Assigned Pay Monthly \$ Payable to

Relationship

Separation Allowance \$ Payable to

Relationship

N/E. R.B. No 3431

File R.L. 23-M-707

Category Comm. S.A.

Discharge, Date and Place

Reason

Character

H. W. & V., Ltd. - 7165-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
Date.	From whom received.				
Arrived in England per H. M. T. 2810 31-7-16					
5.8.16	O.C. 109 th Bn.	App'd O.R.S. (Prov.)	Odney	5-8-16	Pl. II S.O. 21 + 20.285
22.12.16	"	Trans to HQ CTD B's hq.	"	14.12.16	" " " 848
14.12.16	HQ CTD	T.O.S. from 109 th Bn.	B's hq.	15.12.16	Pl. 128
1.2.17	"	S.O.S. to be in Forestry Corps	"	28.2.17	Pl. 65/16.3.17
16.3.17	C.F.C.	REVERTS to P. GRADE PTE	London	28.2.17	" " 60. (B. 14 C.F.C. 28.2.17)
29.3.17	"	S.O.S. to C.F.C. & France (Co. 14)	"	27/3/17	" " 76. (Pl. 244 23.5.17)
5-7-17	1/4 Coy C.F.C.	Awarded one Good Conduct Badge	Field	11-6-17	" 32
5-10-17	"	S.O.S. to HQ C.F.C.	"	12-9-17	" 45
6-10-17	20 Coy C.F.C.	T.O.S. from 14 Coy C.F.C.	"	13-9-17	" 36
7-12-17	Hq 7 Div C.F.C.	T.O.S. from 20 Coy C.F.C.	"	15-10-17	" 19 / 20 Coy C.F.C. Pl. 47 7-12-17.

103 CHECKED
 APR 1917





Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
11.5.18	Mr. Ward C.C.C.	in probation for Comm ⁿ in R.A.F. Trans to Eng. postn to C7C depot, S'dale	No 16 Field	5.5.18	dup entry. T.O.S.B.S.C.C.E. 578 P.I.C. 124 7/54/18 76
24-5-18	B.D.C.F.C.	TO S from HQ 9 th Liaison France	S'dale	5-5-18	111124.
"	"	an Comm to R.A.F. depot for Commission	"	5-5-18	"-124.
16.12.18	"	(having been discharged from SOS. (OMFC. British Isles K.R.V.O. para 392 Sec 25 Cathy CPO. RAF. Working Squadron 24 High Squad)	S'dale	16.12.18	- 299
13.12.18	B.D.C.F.C.	Appointed as Sgt with pay	S'dale	7.9.18	P.I.C. 297.

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

M. F. W. 54.
100m. 10.15.
H.Q. 1772-33-020.

Casualty Form—Active Service.

Unit, Regiment or Corps 109th OVERSEAS BATTALION, C. E. F.Regimental No. 24004 Rank Private Name Mcadden, Thomas James WalterEnlisted (a) 1-1-15 Terms of Service (a) D of W. Service reckons from (a) 16-11-15

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

Extended _____ Re-engaged _____ Qualification (b) Stenographer

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
	Embarked Canada		Halifax	24.7.16	
	Disembarked England		Liverpool	31.7.16	
5/8/16	Appointed A.B. O. R. Sergt.		Osney	5.8.16	Part II Order # 216 + 255
22/12/16	109th Bn. Trsd to H.Q. Sub Staff Bramshott. as O.R.S.		Witley	14. ✓ 15.12.16.	D.O. Pt II 348 / H.Q. 128
28-2-17	O.C. HQSS Transferred to Can. Forestry corps.		Bramshott.	28-2-17.	D.O. Part. 11.60
16-3-17	D. of T.O. T.O.S. Can. Country Corps		London	28-2-17	Pt. II. Co. no. 65. ✓ Lt. + Asst. Adj. C.F.C.
16-3-17	D. of T.O. Reverts to rank Pte. on transport		London	28-2-17	Pt. II. D.O. no 65. ✓
29.3.17	D. of T.O. Proceeded Overseas to C.F.C. France.		London	27.3.17	D.O. Pt. II No. 76. Lt. & Asst/Adj. C.F.C.
11.6.17	Disembarked. Granted one good Conduct Badge.		Harve	24/3/17	L.R 7980, Pt. II. O. # 24, d/23/sp/1
			Badge. Fixed	11.6.17	B.213. Pat 2. order * 32.

(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.]



25214

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				
16/9/17	14 Co.	Struck off strength in trans to HQ in 10 District.		12/9/17	B 213 Part 2 ord #
23/9/17	O.C. 20 Co.	J.O.S. on Transfer from 14 Coy		13/9/17	213. Pt 2. ord #36.
24-11-17.	1 Dist Hqs	J.O.S. from 20 Coy.		15/10/17	B. 213 Pt 2 ord 19.
25/11/17.	20 Coy.	J.O.S. to 1 Dist Hqs.		15/10/17	B 213. H 2 Ord 47.
24-11-17.	1 Dist Hqs C.F.C.	To draw clerks pay at the rate of 1 dollar & 20 cents per diem and 50 Cents Field Allowance with effect from 15/10/17.	Field	16/10/17	K.G. 18/12/74. B 213 Part 2 O. No. 3, d/19/1/18.
27-4-18.	C.G.B.D.	Taken on strength of C.G.B.D for disposal.		26-4-18.	N.R. 798.
27-4-18.	1 Dist Hqs	leaves to demer pay as clerk.		23-4-18	B 213. 22
5-5-18.	A.A.G. Can Sect. G.H. 2.	To England for commission in R.A.F. and posted to Canadian Forestry Corps Depot Lunningdale		5-5-18.	File K.E. 25714/29. Part 11 Ord. 23. of "5. 18.
5-5-18.	C.G.B.D.	J.O.S. of C.G.B.D. to England.		5-5-18.	N.R. 318.

L. A. Hewett

Lieut. for Lt.-Col., A. A. G.
Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

26.5.18

O.C. C.F.C. T.O.S. Base Depot, C.F.C. Sunningdale

23.5.18 Pt. 11 D.O. 124
5-5-18

724004



35219 24004

ORIGINAL MEDICAL HISTORY SHEET ORIGINAL

Surname McFadden Christian Name Thomas James Walter

Examined { on 20th day of January 1916
at Lindsay
Birthplace { City or Town Lindsay
County Victoria Ont

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

Apparent age 18 years
Trade or occupation Stenographer
Height 5 Feet 8 1/2 Inches.
Weight 137 Lbs.
Chest measurement { Minimum 32 inches.
Maximum expansion 36 inches.
Physical development Good
Small-Pox Marks none
Vaccination Marks { Arm Right none Left Two
Number Two

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		<u>16 MAY 1918</u>
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

When Vaccinated last Dec. 29th 1914
(a) Marks indicating congenital peculiarities or previous disease None
(b) Slight defects but not sufficient to cause rejection none

Date	Result	VACCINATIONS.
<u>29.12.14</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>3.9.15</u>	<u>inj</u>	<u>inoculated</u> M.O.
<u>6.9.15</u>	<u>"</u>	<u>inoculated</u> M.O.
<u>12.9.15</u>	<u>"</u>	<u>inoculated</u> M.O.
<u>16.10.16</u>	<u>"</u>	<u>H. Boyd</u> M.O.

Enlisted on 17th day of October 1914 at Lindsay

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>45th M. W. Regt Overseas Coy.</u>	<u>724004</u>		<u>1.1.16.</u>
Transferred to.....	<u>H.Q. Sub Staff Bramshott</u>			<u>15.12.16.</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION:	DATE.	DISEASE.	RESULT.
<u>Bramshott Camp, Hants.</u>	<u>12 JAN. 1917</u>	<u>None</u>	<u>Classified</u>
APPROVED	<u>P. Stewart</u> Major, B.A.D.M.S. for A.D.M.S., Canadian Troops, Bramshott Camp		<u>Medical Board, Bramshott</u>

CANADIAN

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.



To be made out in duplicate.

H.Q. 54-21-23-53

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.....
109th OVERSEAS BATTALION, C. E. F.

(2) Regimental Number..... **724004.**

(3) Full Name of Soldier..... **Thomas James Walter McFadden.**

(4) Place of Birth..... **Lindsay. Ontario. Canada.**

(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?..... **No.**

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

Also their names and ages.....

MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

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

To Whom *Mrs Jas. Mc Fadden*
 Address *43 Glenely Ave
 Lindsay ont*

By Whom Assigned *T. J. Mc Fadden*
 Regtl. No. *724004*
 Rank *O.R. Sgt*
 Corps *109 Battr*

Rate *25 August 14* ~~*10 FEB 16*~~
2 m. 8⁷/₁₆ m. 14¹/₂ 27¹/₂

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				

make envelope





MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 60m.-6-16.
 1772-39-819.

Sheet No. 2.

L. L. Job 4503. - Req. 6832.

Mrs
Jas Mc Fadden

PAYMENTS. #

Name of Soldier

OR Sgt T. J. Mc Fadden
109 Battalion

Month.	Year.	Cheque No.	Amt.	Remarks
				<i>25.00 August 16.</i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		<i>024164</i>	<i>25</i>	
Nov.		<i>N 29434</i>	<i>75</i>	<i>75.00 for cheque to airport</i>
Dec.		<i>X 33191</i>	<i>25</i>	<i>25.00 future</i>
Jan.	<i>1917</i>	<i>340579</i>	<i>25</i>	
Feb.		<i>745921</i>	<i>25</i>	
March		<i>751647</i>	<i>25</i>	<i>25 60</i>
April		<i>03133</i>	<i>25</i>	<i>25 B.O 3133. Can. 57B</i>
May		<i>09539</i>	<i>25</i>	
June		<i>M 15946</i>	<i>25</i>	<i>D</i>
July		<i>0 23617</i>	<i>25</i>	<i>D</i>
Aug.		<i>Z 32391</i>	<i>25</i>	
Sept.		<i>V. 36473</i>	<i>25</i>	<i>D</i>
Oct.		<i>6 43661</i>	<i>25</i>	
Nov.		<i>W 49473</i>	<i>25</i>	
Dec.	<i>T 60488</i>	<i>M 60700</i>	<i>25</i>	<i>Cancelled AC 29/11/17</i>
Jan.	<i>1918</i>			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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

* Strike out whichever inapplicable.

ASSIGNED PAY	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.
EFFECTIVE DATE:-		EFFECTIVE DATE:-	
AMOUNT:-		AMOUNT:-	
NAME: M^cFADDEN <i>Walter Thomas James</i>			
NUMBER: 724004			

PARTICULARS OF RANK OR APPOINTMENT		
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		<i>Plt</i>
<i>Course to Draw Clerk's Pay. Do. 22 7/5/18. m. Dist.</i>	<i>23-4-18.</i>	

UNIT AND TRANSFERS			
ORIGINAL UNIT:- <i>109 Bw</i>			
DATE ACCOUNT FIRST OPENED: <i>1/8/18</i>			
AUTHORITY	DATE EFFECTIVE	DATE LEGER SHEET T'S F D	UNIT TRANSFERRED TO
			<i>626 Franc</i>
<i>Do 124.</i>	<i>5/5/18</i>	<i>1-6-18</i>	<i>626. Eng</i>
<i>N. R.</i>	<i>1-7-18</i>	<i>23-7-18</i>	<i>Imp. Cadets</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>Dec 31st</i>	<i>5/5/18th</i>	<i>16/5/18 10 days @ 1⁰⁰</i>	<i>23 57 113 50</i>

PARTICULARS OF RENDERING NON-EFFECTIVE:- *app. Ft. Cat. eff. 17/8/18* *Sec #25 1/1/18*

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
<i>Mar 31</i>	<i>Balance Forward</i>								<i>44 85</i>		<i>Tul</i>
<i>April</i>	<i>Clerk's Pay</i>	<i>51 00</i>		<i>Can ad.</i>				<i>20 -</i>			
				<i>all 37 6/4/18. #1. Dist.</i>	<i>12 49</i>						
				<i>all 20 20/4/18.</i>	<i>30 34</i>						
				<i>error in Feb balance. Item as #3675 should be #3575. authy V. #80.</i>	<i>1 00</i>						
				<i>all 1816. 30/4/18. G. G. B. R.</i>	<i>7 14</i>				<i>24 88</i>		<i>Tul</i>
<i>May</i>	<i>Ptes Pay</i>	<i>57 00</i>		<i>Can ad.</i>				<i>20 -</i>			
	<i>graded as Clerk. Schedule D. while employed at #1 Dist from 1/9/17 to 14/10/17. 32 days @ 60⁰⁰</i>	<i>34 10</i>		<i>over credited 8 days @ 60⁰⁰ from 27/4/18 to 7/4/18. Ceases to Draw Clerk Pay 27/4/18</i>		<i>4 50</i>		<i>20 -</i>			
		<i>19 80</i>		<i>all 24 47. 8-5-18. #1 Dist.</i>	<i>4 46</i>						
				<i>6.5068. 8-5-18.</i>	<i>34 07</i>				<i>15 45</i>		
		<i>53 90</i>			<i>38 53</i>	<i>4 80</i>		<i>20 -</i>			
<i>June</i>	<i>Pte Pay</i>	<i>33</i>		<i>D. N. A. R. 9886 Imp. Cad. Bath 5-6-18</i>	<i>9 73</i>						
		<i>33</i>		<i>" R124 " " 22-6-18</i>	<i>9 73</i>				<i>28 99</i>		
		<i>34 10</i>		<i>AR 15095 6/7/18 Bath.</i>	<i>7 30</i>						
<i>July</i>	"			<i>AR 18075 Bath 20.7.18</i>	<i>38 93</i>				<i>16 86</i>		
		<i>34 10</i>			<i>46 23</i>						
<i>Aug</i>		<i>34 10</i>		<i>Cl 20803 London 3-8-18</i>	<i>19 47</i>				<i>31 49</i>		
		<i>34 10</i>			<i>19 47</i>						
<i>Sept</i>		<i>33</i>							<i>64 49</i>		
		<i>33</i>									
<i>Oct.</i>	<i>overov. 17/8-30/9/18</i>			<i>B.P. 47952 London 16-10-18</i>	<i>24 33</i>						
				<i>overov. 17/8-30/9/18 45</i>			<i>49 50</i>		<i>9 34</i>		
					<i>24 33</i>	<i>49 50</i>			<i>9 34</i>		
<i>Nov & Dec.</i>											
<i>Jan.</i>											
<i>1919</i>											
<i>Feb-Mch</i>											
<i>April</i>									<i>9 34</i>		<i>Tul</i>

115 EFFECTIVE 1/6/18
 app. flight cadet eff. 17/8/18
 PAY BOOK VERIFIED 4/11
 \$9.34 4/11
 Sel #25 1/1/18
 9 34
 9 34

1005

Letter written

R. L. 10-2-49

R2A3/1228. dy-18-5-18



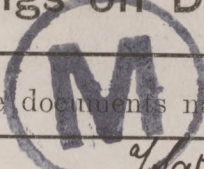
This space to be left blank for the Chelsea Number.

23. M. 404.

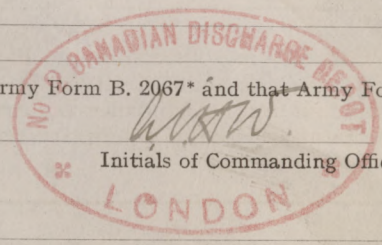
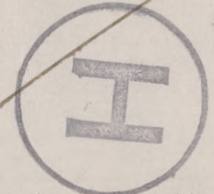
Proceedings on Discharge.



(When forwarded for confirmation the documents named on page 4 should be enclosed.)



No.	724004.	Army Rank	2nd Lt.
Name	Mc. Fadden, Thomas James Walter.		
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)			
Corps	109 th Bn.	C.F.C.	
Battalion, Battery, Company, Depot, &c.	C.F.C. Depot.		
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)			
Date of discharge	16/8/18		
Place of discharge	#2. C.D.D. London.		
1. Description at the time of discharge.			
Age	20. years	9. months	Descriptive marks. Mutilated index finger of right hand.
Height	5. feet	9. inches	
Chest measurement	girth when fully expanded		36. ins.
	range of expansion		3. ins.
Complexion	Medium.		
Eyes	Blue.		
Hair	Brown.		
Trade	Stenographer.		
Intended place of residence	8. Springfield Place. Bath. Somerset.		
(To be given as fully as practicable)			
(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)			
2. The above-named man is discharged in consequence of being apptd Flight Cadet in R.A.F. 17/8/18. Autho = C.P.O. R.A.F. - sched. 25 H. R. O. 392 XXV			
(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)			
3. Military character :-		VERY GOOD	
4. Character awarded in accordance with King's Regulations :-		MILITARY CHARACTER. VERY GOOD	
Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.			
			Initials of Commanding Officer.
Army Form B. 2088 has been issued to*			



187-41



5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Not applicable.

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay Class _____

6. Campaigns, Medals and Decorations

France - 15 mos.

Certificate of education *Not available.*

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me in accordance with Regulations.

(Place) _____

(Date) *16/8/18*

Commanding _____ Battn. _____ Regiment.

A. Houghton Esq.

8. Certificate to be signed by the soldier on discharge.

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(Place) _____

(Date) *16/8/18*

J.M. Gadden (Signature of Soldier.)
J. Sanders (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 at his own request.

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

J.M. Gadden (Signature of Soldier.)

10. Statement of service.

Service towards engagement to _____ (the date to which the record of service is completed) _____ years _____ days.

Further service ,, ,, *16/8/18* (the date of confirmation of discharge) *3* ,, *227* ,,

Total ... *3* ,, *227* ,,

11. Confirmation of discharge.

The discharge of the above-named man is hereby confirmed for *16/8/18* (date)

(Place) _____

(Date) *16/8/18*

Signature *A. Houghton Esq.*

Commanding officers (or the Paymaster, if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital, Chelsea, a descriptive return of the man on Army Form D. 400.



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.)

Bal. of pay not rec'd

[Handwritten signature]

before me

[Handwritten signature]

Regiment.

), and all

Soldier.)

Witness.)

signature, a

Soldier.)

days.

27 "

27 "

[Handwritten signature]

claim to
a Board,
Secretary,

LIST OF DISCHARGE DOCUMENTS.

1. Proceedings on discharge. (Army Form B. 268.)
2. Proceedings on transfer to reserve (if any). (Army Form B. 2056.)
3. Duplicate attestation.
4. Army Form B. 97 (if any).
5. Declaration of change of name (if any).
6. Re-engagement paper (if any). (Army Form B. 136.)
7. Authority for continuance, or extension, of service (if any). (Army Form B. 221.)
8. Court of Inquiry on an injury (if any) (Army Form A. 2.)
9. Regimental conduct sheet. (Army Form B. 120.)
10. Company conduct sheet. (Army Form B. 121.)
11. Copies of convictions by Civil Power (if any).
12. Medical history sheet. (Army Form B. 178.)
13. Medical report on invalid (if any). (Army Form B. 179.)
14. Copy of receipt for purchase money (if any).
15. Attestation of fraudulently enlisted man for corps in which he has not been held to serve (if any).
16. Detailed statement of former service allowed to reckon towards pension (if any).
17. Copy of 3rd page attestation (in the case of men from abroad entitled to deferred pay who go to Netley or the discharge depot for discharge).
18. Descriptive return (Army Form D. 400), where required. See section 11 on second page.
19. Active service casualty form. (Army Form B. 103.)
20. Employment sheet. (Army Form B. 2066.)

In the case of recruits who are rejected before, or on, final approval, the discharge documents will consist of—

1. Duplicate attestation. (On third page the date and cause of discharge will be entered and signed by the competent military authority.)
2. Medical history sheet (if any). (Army Form B. 178.)

Instructions as to the preparation, despatch, and custody, of discharge documents.

1. When a soldier is to be discharged, the documents retained with the duplicate attestation will be placed inside this form. Should any of the documents be missing, an explanation of the deficiency, signed by the commanding officer, must be substituted for the missing document. The officer in charge of records will then extract from the original attestation, any documents required to complete the list of discharge documents enumerated in the margin, which will then be placed in this form in the sequence given.

2. When men are discharged from the colours at home as medically unfit, or with claims to pension, Army Form B. 268 will be sent confirmed, together with the duplicate attestation and documents retained therein to the officer in charge of records 10 days in advance of the date for discharge in the case of invalids, and 14 days in other cases. This officer will then extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them in this form, and after carefully checking the duplicate attestation with the original forward the whole to the Secretary, Royal Hospital, Chelsea. When such men are discharged abroad, the same procedure will be adopted as above, with the exception that the discharge documents will be sent to the officer in charge of records immediately after discharge takes place (except in the case of men who are granted gratuities on discharge from local battalions or companies, Royal Artillery).

3. When soldiers are sent home from abroad for discharge, the documents retained with the duplicate attestation will be placed inside this form and sent home with the men for transmission to the officer who carries out the discharge, together with the following additional forms:—

- (a) Discharge certificate (Army Form B. 2079 or Army Form B. 264).
- (b) Character certificate (Army Form B. 2067) if entitled.
- (c) Copy company conduct sheet (Army Form B. 121) when required under King's Regulations.

The duplicate attestation and documents retained therein will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin and place them in this form.

4. The discharge documents of re-enlisted pensioners, on re-discharge, will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them inside this form, and forward the whole to the Secretary, Royal Hospital, Chelsea, irrespective of the cause of discharge.

5. The original and duplicate attestations of recruits who are rejected before, or on, final approval will be retained by the approving officer for one year, when they will be destroyed.

6. In all other cases the discharge documents will be sent, directly the discharge is carried out, to the officer in charge of records of the unit concerned.

7. Postage need not be paid, and receipts are not required, in the case of documents sent to Chelsea or to the War Office.

8. When the discharge documents of men not entitled to pension are sent to the officer who will have final charge of them, they are to be accompanied by Army Form B. 279, and that officer will, if they are found to be correct, sign and return Army Form B. 279. Should any document be missing, he must at once apply for it.

9. The officers having final charge of the discharge documents will arrange them according to regimental numbers, and enter the names in the alphabetical index, Army Book No. 129.

This sp
for the

(When

No.

Name

Corp

Batt

(If at

Date

Place

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To be filled in on the soldier quitting the Colours.

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Army

Wt. W. 13

187-41

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

12329-J-6.

Name *Mc Fadden, Thomas, James, Walter.*
Surname Christian Name

Regimental Number *724004* Rank *1st Lieut*

Unit *San. Tro. Coy.*

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Address (in full)

Rates:—Regimental pay \$ per diem; Field Allowance \$ per diem. Separation Allowance \$ per month.

L.L. 53961—M. & D. 9721

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments 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		

M. F. W. 127
 300M-1-19
 1772-39-1140

Remarks:

*ledger sheet made for reference only.
 Copy taken from Award. RM. 2/9/19.*

File No. 12329-76WAR SERVICE GRATUITY.M^c 1609Register No. M 24Reg. No. 72 4004 2nd Lieut DependentName Mr Fadden J. J. W. AddressAddress 43 Glenelg St. East,Lindsay,Ont.Pay Soldier \$ 232.19. Pay Dependent \$Days 183 Rate 3.00 Per Day. Due 549.00Less P.D.P. credited 316.81Clerk Entered by R. M. Johns 3/9/19. Less further Dr. Bal. or overpayment.Net 232.19.

Date	Ck. Order	Ck. No.	Amount	Remarks	Date	Ck. Order	Ck. No.	Amount.
<u>2/9/18.</u>	<u>aco</u>							
<u>1 4/9/19.</u>	<u>18578</u>	<u>512906</u>	<u>232.19</u>		<u>1</u>			
<u>2</u>					<u>2</u>			
<u>3</u>					<u>3</u>			
<u>4</u>					<u>4</u>			
<u>5</u>					<u>5</u>			
<u>6</u>					<u>6</u>			

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

GEN'L AUDITOR

Posting checked by

m. id.Date 7.9.19

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

1st. Apr. 1918 *Aug. 1/1916*

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

<i>25</i>	<i>20</i>		
-----------	-----------	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. *724004*
 Rank *C.R. Sgt* Promoted Reverted *Pte. date not stated on 2nd.* Discharge
 Soldier's Name *T.J. Mac Fadden*
 Battalion *109th Batta.*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *Mrs. Jas Mac Fadden*
 Address *43 Glenelg Ave Lindsay*
 Change of Address
 1
 2
 3
 4

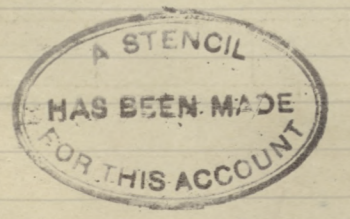
Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>1917</i>					
<i>Dec 31</i>			<i>425</i>	<i>425</i>	
<i>Jan 18</i>	<i>61303</i>		<i>25</i>	<i>25</i>	
<i>Feb.</i>	<i>72198</i>		<i>25</i>	<i>25</i>	
<i>Mar.</i>	<i>94861</i>		<i>25</i>	<i>25</i>	
<i>Apr.</i>	<i>2529</i>		<i>20</i>	<i>25</i>	
<i>May</i>	<i>17429</i>		<i>25</i>	<i>175</i>	
<i>6/5 May</i>	<i>4643</i>		<i>15</i>	<i>15</i>	
			<i>15</i>	<i>15</i>	<i>cancel 5/16/18</i>
					<i>order to N17429 cancelled</i>

MR. O. 213.31/18 R12559 - 9.1-

(1) \$20.00 From 1st. Apr. 18
Authy: - 2 M 12/18 J.H.

**(2) A.P. pay closed 1st. June 1918*
Cause "Commission in Imperial
Forced" Authy: Cable P7764
J.H. 16/18

M. F. W. 128
 400M. -6-17-1772-89-1141
 L. L. 22320-M. & D. 7593.



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

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PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
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M. F. W. 128
 400MG-6-17-1772-38-1141
 L. L. 22320-M. & D. 1383.