

MAR 7 1916

(A)

3790

ATTESTATION PAPER.

No. 724074

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... *Williams*
- 1a. What are your Christian names?..... *Charles Edward*
- 1b. What is your present address?..... *Lindsay Ontario*
- 2. In what Town, Township or Parish, and in what Country were you born?..... *Manchester England*
- 3. What is the name of your next-of-kin?..... *Annie Middleton*
- 4. What is the address of your next-of-kin?..... *222 Chancery Stays, Southport England*
- 4a. What is the relationship of your next-of-kin?..... *Mother*
- 5. What is the date of your birth?..... *24 August 1892*
- 6. What is your Trade or Calling?..... *Farmer*
- 7. Are you married?..... *No*
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... *Yes*
- 9. Do you now belong to the Active Militia?..... *No*
- 10. Have you ever served in any Military Force?..... *No*
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement?..... *Yes*
- 12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }..... *Yes*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Charles Edward Williams* 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.

Charles Ed. Williams (Signature of Recruit)

Date *MAR 7 1916* 191*6* *Wm. Warren Cape* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Charles Edward Williams*, 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.

Charles Ed. Williams (Signature of Recruit)

Date *MAR 7 1916* 191*6* *Wm. Warren Cape* (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 *13* day of *March* 191*6*

J. J. [Signature] (Signature of Justice)

3790

(A)

Description of Charles Edward Williams on Enlistment.

Apparent Age.....23 years6 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height.....5 ft. 5 1/4 ins.

Chest measurement. { Girth when fully expanded.....38 ins.
Range of expansion.....2 1/2 ins.

nil

Complexion.....Fair

Eyes.....Blue

Hair.....Light Brown

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date.....MAR 7 1916.....191 .

J. M. C. Crook Capt.....
Medical Officer

Place.....Windsor.....

109th Overseas Battalion, C. E. F.
Medical Officer.

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

Charles Edward Williams.....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.

MAR 7 1916

Date.....191 .

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

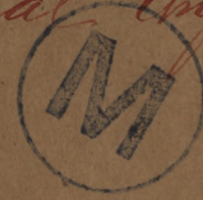
Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
 Attestation Papers.....
 Declaration of change of name.....
 Authority for special enlistments.....
 Documents of re-enlisted men.....
 Regimental Conduct Sheet.....
 Compulsory Stoppages.....
 Casualty Forms.....
 Proceedings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

DISCHARGE DOCUMENTS

R. O. No. *ASX*
 H. Q. No.

Name *Williams Charles Edward*
 Regt. No. *24074* Rank *Private*
 Corps *No 3 I.S. form 109th O.S. Bn.*

Physical Unfitness



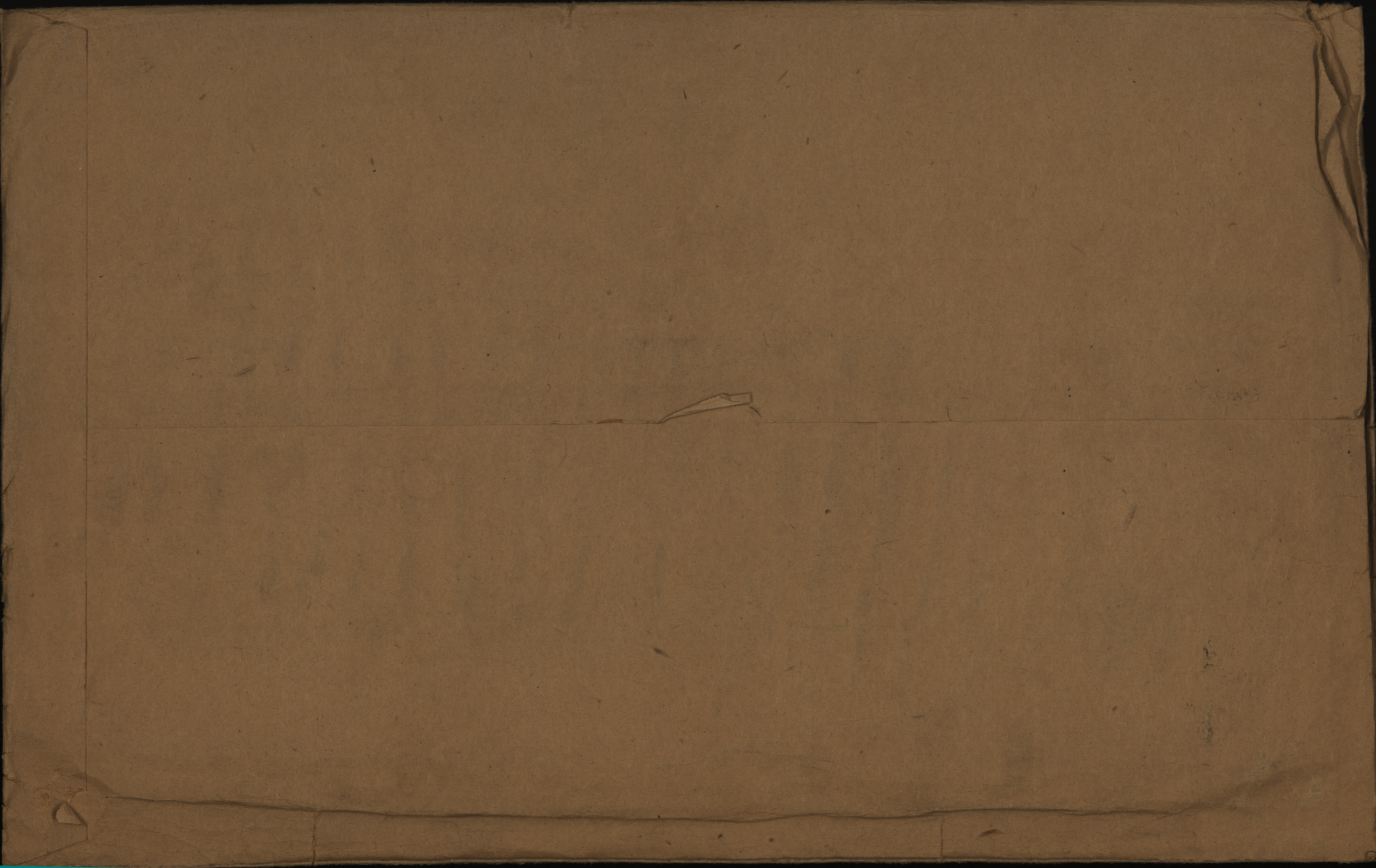
~~*W.S.G. 10/11/1927*~~
Ret 23-7-19.

22805



A. F. B 122-1
717W 67-1

P 122-1
Index Card
Rtd Will



SURNAME.

Williams,

CHRISTIAN NAMES

Charles Edward

REGL. No.

724074

RANK

Pfc.

UNIT

109th.

FORMER CORPS

Nel.

CARD No. ✓

80.8. Div 3/1/18.3
FOLL.

Bn

NEXT OF KIN,

NAMES IN FULL

Middleton, Mrs. Annie

RELATIONSHIP TO SOLDIER

Mother

ADDRESS

*2 Chase Hayes, Southport,
Eng*

CHANGE OF ADDRESS

COUNTRY OF BIRTH

England, Manchester

DATE

Aug. 24th 1892

PLACE OF ATTESTATION

Lindsay, Ont.

DATE

Mar. 7th 1916

Sp. 23.7.16 $\frac{488}{38}$

R/c. 5/1/18. up

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

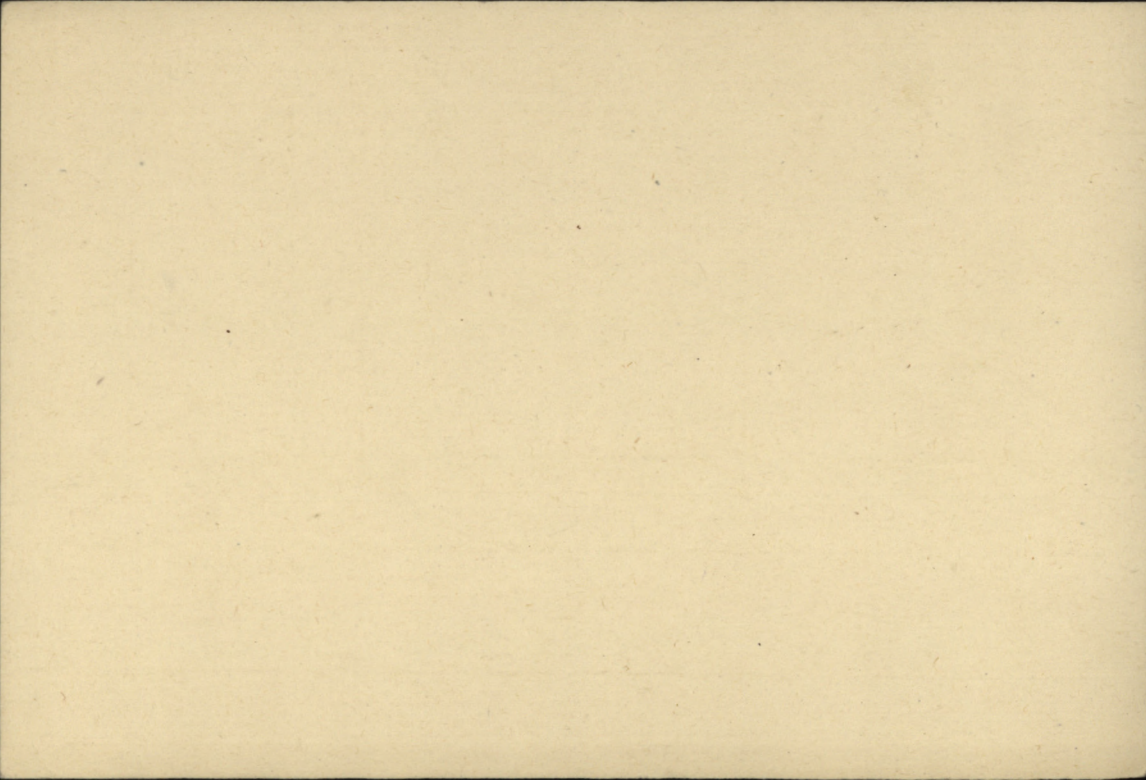
EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE



No. 724074 RANK Pte

NAME Williams, C. E.

T. O. S.


UNIT

Special Service Battalion
2109Transfd from Casualties 10-1-18
no 12 of 12-1-18

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917 Dec. 1	1918 Jan 31	U	Let Dischd 31-1-18	no 31 of 31-1-18
He closed by payment S.				



J.R. 



Number, 724074 Rank Pte.

Surname WILLIAMS

Christian Name Charles Edward

Unit 109th. Ton Can. Inf. Theatre of War England

Date of Service 31-7-16 285. Dalhousie

Remarks Peterborough

Latest Address ~~Lundsey Ant.~~

Roll No. A Page 436.

G. A. 10715' Surf

MAY 28 1924

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

19432-0-9.

Name Williams, Charles E.
Surname Christian Name

Regimental Number 724074

Rank Pte.

Address (in full) Lindsay, Ont.

Unit # 3 S.S.C O.

Original Unit

District where paid M.D.3.

Date of Discharge 31-1-18.

P. D. P. Filing Number 5-59-3.

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

L. L. 22573—M. & D. 800R.

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		
100 10	1176	31-1-18	33 00	1155	28-2-18	33 00	1152	30-3-18	34 10		100 10

Remarks:

M. F. W. 127.
 50M-617.
 1772 39-1140.

File No. 019432-6-68

15/7/19

WAR SERVICE GRATUITY.

Register No. W. 575

Reg. No. 724874. 109th Br

Name Williams, Charles E.

Address 38 Glendy St. E.

Box 135 Lindsay Ont

Dependent *Nil*

Address

Pay Soldier \$ 280.00

Pay Dependent \$ *Nil*

J. N. Goldsmith

G. A. Sylvain

B. Hill

Days 122 Rate 70 Due 280

Less P.D.P. credited 100.00

Less further Dr. Bal or overpayment.

Net 179.90

R
N 129
23 10
19

Date	Ck. Order	Ck. No.	Amount	Remarks	Date	Ck. Order	Ck. No.	Amount
1 29/7/19	3236	495796	140.00		1			
2	-		-		2			
3 29/8/19	12439	501990	39.90		3			
4					4			
5					5			
6					6			

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

GEN'L AUDITOR
 Posting checked by

 Date 28-7-19

33920

MILITIA AND DEFENCE ASSIGNED PAY.

Ref. No. NR
88To whom Mrs. Annie Middleton,Address 2 Chase Hays,Southport, Eng.
LancashireRate \$15.00D to Commence August 1st., 1916.By whom assigned Williams, C. E.Regtl. No. 724074Rank Pte.Corps, &c. 109th. Battalion

A. M. Moyner P.S.

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Pay Sheet Deduction.	REMARKS.
Jan.	1916				
Feb.					
March					
April					
May					
June					
July					
Aug.		150316	15	- X	
Sept.		180858	15	X	
Oct.		218367	15	X	
Nov.	60	259694	15	X	
Dec.		301547	15	X	
Jan.	1917	343195	15	X	
Feb.		384399	15	X	
March		433538	15.	X	
April					
May					
June					
July					
Aug.					

AP checked 31/8/17 E. Rockley

ASSIGNED PAY.

By whom assigned *Williams, C. E.*

Regtl. No. *424044 - Ple - 109th Batt.*

Month.	Year.	Cheque No.	Amount.	Pay Sheet.	REMARKS.
Sept.	1917				
Oct.					
Nov.					
Dec.					
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1919				
Feb.					
March					

724074

3790

ORIGINAL
B

MEDICAL HISTORY SHEET.

Surname Williams Christian Name Charles Edward

Examined { on 7th day of March 1916.
at Sunday
Birthplace { City or Town Manchester
County England

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

Apparent age 23 years
Trade or occupation Farmer

Height 5 Feet 5 1/4 Inches.
Weight 134 Lbs.
Chest measurement { Minimum 35 1/2 inches.
Maximum expansion 38 inches.

Physical development Good
Small-Pox Marks None

Vaccination Marks { Arm Right None Left Five
Number Five

When Vaccinated last March 13th 1916
(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection
Slightly flat footed
Fractional scurvy
Slightly deaf

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

Date.	Result.	VACCINATIONS.
<u>13-3-16</u>	<u>Good</u>	<u>J. McCulloch</u> M.O.
		M.O.
		M.O.

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>22-9-16</u>		<u>H. H. H. H.</u>

Enlisted on 7th day of March 1916 at Sunday

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Bn. C.F.F.</u>	<u>724074.</u>		<u>7.3.16.</u>
Transferred to	<u>124th Bn. C.F.F.</u> <u>C.C.A.C. - 18.1.17</u> <u>Mytchett Range - 6.2.17</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Bramshott Camp, Hants.</u> <u>10 JAN 1917</u> <u>APPROVED</u>	<u>10/1/17</u>	<u>Of this media Sup</u>	<u>C (ii) Cooper Cole</u> <u>Category altered from C to B</u> <u>(Under new system of Categorization)</u> <u>R.O. 2799.</u>
<u>Fort Henry</u>	<u>Jan 28/18</u>	<u>G. M. S. C.</u>	<u>E. W. Laxton</u> O.C.

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.

3790

Surname Williams

Christian Name Charles E. F. ...

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
	NOT CHARGED U.S. FEB 7 1918										

FEB 8 1918

320
8/2/18

NOT CHARGED FEB 7 1918

3790

(6)

J.M. Rank *Pl* Name WILLIAMS, Charles Edward. Reg'l No. 724074 ✓

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

Place and Date of Enlistment Lindsay, 7th March 1916. ✓ Place of Birth Manchester, England. ✓

Name and Address, Next-of-Kin Annie Middleton. ✓
 2 Chace Hays, Southport, England. ✓ Relationship Mother.

Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No. 10529
 File R.L.
 Category *Canon*

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					
8.12.16	06109 th Bn	S.O.S. to 124 th Bn	Witley	8.12.16	Px D.O. 343
9.12.16	06109 th Bn	S.O.S. to 109 th Bn	"	"	" 265.
18.1.17	"	S.O.S. on offer to C.C.A.C. + att'd to 124 th Bn.	"	10.1.17	" 18.
6-2-17	cccc	J.O.S. att'd to 124 th Bn	Strotings	10-1-17	" 67
14-3-17	"	S.O.S. to 1st C.O.R.D. + att'd to 12 th Res. Bn.	"	10-3-17	" 120) <i>1st C.O.R.D.</i> <i>Px D.O. 11-4/20-3-17</i>
20-7-17	160R.D.	beas on com. 12 th Bn. + on com. Mychett Camp.	W Sandj	10-3-17	" 134
23-10-17	"	beas on com. Mychett Camp.	PB	22-10-17	" 228
28-11-17	160R.D.	On Com. to 160R.D.	"	28-11-17	" 264
31-12-17	"	beas on com. 160R.D. + S.O.S. to Canada for disp. of A.G.	" E "	23-12-17	Px D.O. 796.

3790

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

Casualty Form—Active Service.

M. F. W. '54.
FORM 10-15
H.C. 1772-39-920Unit, Regiment or Corps 109th OVERSEAS BATTALION, C. E. F.Regimental No. 1240/4 Rank Private Name Williams Charles EEnlisted (a) 4.3.16 Terms of Service (a) D of U Service reckons from (a) 4.3.16

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) Farmer

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	
8-12-16	O.C. 109th Bn.	Transferred to 124th Bn.	Whitby	8-12-16	D.O. Pt. II # ³ 43, <u>A.W. Eastmure</u> Capt. ADJUTANT 100th Overseas Battalion, C. E. F.
9-12-16	124th Bn.	Taken on strength of 124th Bn., C.E.F.	Witley Camp	8-12-16	Part III Orders 265 <u>A.W. Eastmure</u> MAJOR ADJUTANT, 124th BATTALION C.E.F.
18.1.17	124th Bn.	Transferred to C.C.A.C.	Witley	10.1.17	Part II Orders 18 <u>A.W. Eastmure</u> ADJUTANT, 124th BATTALION C.E.F.
23.1.17	124th Bn.	Attached to Garrison Duty Battalion	Witley Camp	18.1.17	Part II Orders # 23 <u>A.W. Eastmure</u> ADJUTANT, 124th BATTALION C.E.F.

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

(b) e.g. Signaller, Shoing Smith, etc., etc., also special qualifications in technical Corps duties.

124th BATTALION C.E.F. [P.T.O.]

3790

(D)

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
6.2.17	124th Bn.	Attached to Mytchett Ranges	Witley Camp	6.2.17	Part II Orders 37 <i>R. Beechey</i> Capt ADJUTANT, 124th BATTALION C.E.F.
20-3-17	1st C.O.R.D.	T.O.S. 1st C.O.R.D.	West Sandling	20-3-17	Pt. II D.O. No. 11
21-7-17	- do -	Att to Mytchett Camp	- do -	10-3-17	- do - 134
23-10-17	- do -	Caused to be attached to Mytchett Camp.	- do -	22-10-17	- do - 228
28-11-17	- do -	Att to 1st Co D Buxton	- do -	28-11-17	- do - 265
NOV 29 1917	TAKEN ON STRENGTH C.D.D. BUXTON Pt. 11 ORDER No. 283		Commanding		<i>H. Cleaveland</i> Lieut. & Assist. Adjt. for C. C. 1st C. O. R. D.
23 DEC 1917	EMBARKED FOR CANADA FROM LIVERPOOL		Commanding		<i>H. W. L.</i> Lieut.-Col. Canadian Discharge Depôt.
			Commanding		<i>H. W. L.</i> Lieut.-Col. Canadian Discharge Depôt.

724074
Ph Williams C.E
DENTAL CERTIFICATE. *P.P*

The following Certificates will
be attached to the Medical History Sheets of all
1st C.O. R.D
Other Ranks being returned to Canada for disposal.

Date of Examination.	Present Dental Condition.	In case of loss or decay of teeth. Is the loss due to wounds, injury or disease directly attributed to Active Service?	Has he ever declined Dental Treatment.	Recommendation.
<i>29/11/17.</i>	<i>fit.</i>			<i>J. Williams Cipl. C.A.D.C.</i>

11/11/11

[Handwritten scribbles]

Examination
Date of

Condition
Dental
History

Vertical dentures;
attributed to
discharge of saliva
through the
the loss due to
of 1881 is
loss of 1881
in case of

Vertical
Dental
Condition
History

Condition
Dental
History

other parts being returned to charge for postage.
The following dentures will

DENTAL SERVICE

DEPARTMENT OF VETERANS AFFAIRS
MINISTÈRE DES AFFAIRES DES ANCIENS COMBATTANTS

DEATH NOTIFICATION
AVIS DE DÉCÈS

17.12.76

TO:
À:

DATE

NAME WILLIAMS, CHARLES W.

Service No. 724074-Army-W.W.1

CPC No. 225974

NOM

Matricule No

CCP No

(A.K.A.: WILLIAMS, CHARLES EDWIN)

WVA No.

AAC No 237379

Information Received from:

Information reçue de: Letter from Solicitors-Lindsay, Ont., 15.10.76

Date of Death

Date du Décès 12.10.76 ..

Place

Endroit N.K.

Distribution: WSR-DASG

VI - ASS

DO - BD

HO - BC

Pour le chef,

for Chief, Central Registry Division.

Dépôt central des dossiers.



Proceedings on Discharge.

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

No. <i>724074</i>	
Rank <i>Private</i>	
Surname <i>Williams</i>	
Christian Name <i>Charles Edward</i> <small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company) <i>No 3 Spec. Serv Co.</i>	
Date of Discharge <i>Jan. 31st, 1918</i>	
Place of Discharge <i>Fort Henry.</i>	
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age <i>25</i> years..... months.	Descriptive Marks <i>nil</i>
Height <i>5</i> feet..... <i>2</i> inches.	
Complexion <i>Medium</i>	
Eyes <i>Blue</i>	
Hair <i>Brown</i>	
Trade <i>Farmer</i>	
Intended place of residence <i>Lindsay.</i> <small>(To be given as fully as practicable.)</small>	
2. The above-named man is discharged in consequence of <i>physical unfitness for further service. Auth 3mn 88 W- 516 dated 27-1-18</i>	
<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. <i>Good</i>
	<small>N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.</small>
To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.	4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.) <i>Farmer</i>

M. F. B. 218.

100M.-1-17.
H. Q. 1772-39-113.

(OVER)

620966

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

nil

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

6. Medals and Decorations.....

nil

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) *Fort Henry*

A. B. Buxton MAJOR

(Date) *31-1-18*

O. C. No. 3 Special Service, C. E. F.
Commanding

8. Certificate to be signed by the Soldier on Discharge

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

(Place) *Fort Henry* *L. E. Williams* (Signature of Soldier.)

(Date) *31-1-18* *[Signature]* (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.

L. E. Williams (Signature of Soldier.)

10. Statement of Service.

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

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

11. Confirmation of Discharge.

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

(Place) *Fort Henry*

(Signature) *A. B. Buxton* MAJOR

(Date) *31-1-18*

O. C. No. 3 Special Service, C. E. F.

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.)

nil

L. E. Williams

W. J. J. J.

List of Discharge Documents.

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

21-2

This space to be left blank for the Chelsea Number.

Army Form B. 268.

Proceedings on Discharge.

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

No. <u>724074</u>	Army Rank <u>Pte.</u>
Name <u>Williams B.R.</u> <small>(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)</small>	
Corps <u>160 R S</u>	
Battalion, Battery, Company, Depot, &c. <small>(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.)</small>	
Date of discharge _____	
Place of discharge _____	

1. *Description at the time of discharge.*

Age <u>25</u> years _____ months	Descriptive marks. <u>2 Vac. L arm</u>
Height <u>5</u> feet <u>10</u> inches	
Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins.	
Complexion _____	
Eyes _____	
Hair _____	
Trade <u>Painter</u>	
Intended place of residence (To be given as fully as possible) <u>Lindsay</u>	(1)

Returned to Canada, - Authority - Combatant Board held at
West Sandling Date d. 10-11-1917.
 Category..... B III

3. Military character:—

4. Character awarded in accordance with King's Regulations:—

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* _____

* Strike out if not applicable.

[OVER.]

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).

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

Local casualty

Certificate of education

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

(Place) _____

(Date) _____ Commanding _____ Battn. _____ Regiment. _____

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) _____ (Signature of Soldier.) _____

(Date) _____ (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.

_____ (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 " " _____ (the date of confirmation of discharge) " " _____

Total " " _____

11. Confirmation of discharge.

The discharge of the above-named man is hereby confirmed for _____ (date)

(Place) _____

Signature _____

(Date) _____

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.)

LIST OF DISCHARGE
DOCUMENTS.

1. Proceedings on discharge.
(Army Form B. 268.)
2. Proceedings on transfer to re-serve (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, dispatch,
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.

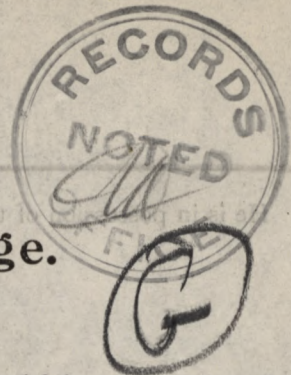
5. The original and duplicate attestations of recruits who are rejected before, or on, final approval will be retained by the approving officer for one year, when they will be destroyed.

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 space to be for numbers

Proceedings on Discharge.

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

No. 724074

Rank Private

Surname Williams

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

Corps (Squadron, Battery or Company) No. 3 Spec. Serv. Co.

Date of Discharge Jan 31st, 1918.

Place of Discharge Fort Henry.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

	Age.....	Height.....	Complexion	Eyes	Hair	Trade	Intended place of residence	Descriptive Marks
	<u>25</u> years..... months.	<u>5</u> feet..... <u>2</u> inches.	<u>medium</u>	<u>Blue</u>	<u>fair</u>	<u>Farmer</u>	<u>Lindsay, Ont.</u>	<u>Nil</u>

(To be given as fully as practicable.)

2. The above-named man is discharged in consequence of physical unfitness for further service
3MD 88-W-216 dated 27-1-18

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

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

Good

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

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

Farmer.

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

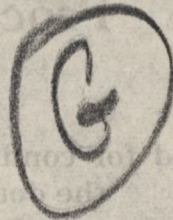
M. F. B. 218.

100M.-1-17.
H. Q. 1772-39-113.

W. S. G. Complete 18/7/1918

(OVER)
Dis. Sec.
16-2-18.

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

nil 

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

6. Medals and Decorations.....

nil

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) *Fort Hare*

Al Buxala MAJOR
O. C. No. 3 Special Service, C. E. F.
Commanding

(Date) *31-1-18*

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) *Fort Hare* *C. E. Williams* (Signature of Soldier.)

(Date) *31-1-18* *C. E. Williams* (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.

C. E. Williams (Signature of Soldier.)

10. Statement of Service.

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

11. Confirmation of Discharge.

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

(Place) *Fort Hare*

(Signature) *Al Buxala* MAJOR
O. C. No. 3 Special Service, C. E. F.

(Date) *31-1-18*

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.)

Kail

G. E. Williams

W. J. Munn

<p>Medical History Sheet in the event of such having been prepared.</p>	<p>Medical Report for Justice</p>
<p>Proceedings on Discharge</p>	<p>Statement of Man's Account on Transfer and Last Pay</p>
<p>Proceedings on the charge</p>	<p>Copies of Convictions by C. R.</p>

List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263.</p> <p>Squadron } Battery } Conduct Sheet, " B. 263a. Company }</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia Form B. 313</p> <p>Medical Report for Invalid* " B. 227.</p> <p>Statement of Man's Account on Transfer and Last Pay Cer- tificate, " D. 877.</p> <p>*Only if discharged "Medically unfit."</p>	<p>Attestation Paper, Militia Form B. 235.</p> <p>Proceedings on Discharge " B. 218.</p> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p style="padding-left: 40px;">(a) Proceedings on Discharge.</p> <p style="padding-left: 40px;">(b) Attestation.</p> <p style="padding-left: 40px;">(c) Medical History Sheet (in the event of such having been prepared.)</p>
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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.

No card CR 478 3790
19551
E

EXAMINATION BY STANDING MEDICAL BOARD, BRAMSHOTT.

No. 724074 Rank *ppr* Name *William C. E.* 191 *7*
Local Unit *124* Overseas Unit _____ Age *24*

Examination held in Bramshott area.

DISABILITY. *Otitis media Sup*

Overseas—Local.
(scratch one out)

Specialist report PRESENT CONDITION.

*Can hear conversation 20 ft
both ears. Does not hear whispered
voice.
Deafit*

*Signed W. E. Ainsley
Capt. C.M.C.*

*Poor physique. Has difficulty carrying
the pack.*

Board recommends :

1. Fit for Duty.
2. Fit for duty after _____ weeks physical training.
3. Fit for Base duty _____ weeks.
4. Fit for Permanent Base Duty. *C.(ii)*
5. Discharge.

Signatures :

Members { *C. Cooper Cole Pres.*
H. Brachman Capt.

Approved.

Bramshott *10-1-* 191 *7*
R. Stewart Maj
for A.D.M.S. and G.O.C.,
Canadian Troops, Bramshott.

EXAMINATION BY STANDING MEDICAL BOARD, BRAMSHOTT

101

No. _____ Rank _____ Name _____

Local Unit _____ Overseas Unit _____

Examination held in Bramshott area.

DISABILITY.

Overseas—Local.
(Scratch one out)

PRESENT CONDITION.

Board recommend—

1. Fit for duty.

2. Fit for duty after _____ weeks physical training.

3. Fit for Base duty after _____ weeks.

4. Fit for Permanent Base Duty.

5. Discharge.

Signature _____

Pres.

Members

Approved _____

Bramshott

for A.D.S. and C.O.C.
Candidate: _____

88-W-216

3790

AP.

(Medical Officers will please read this Form carefully before using it. See instructions, page 4.)

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O'S AND MEN
MEDICAL HISTORY OF AN INVALID

ORIGINAL
F

STATION Fort Henry. DATE Jan. 28th/18.

1. (a) Unit #3S.S.CO. (b) Regimental No. 724074. (c) Rank Pte.

(d) Surname Williams. (e) Christian name Charles E.

2. Age last birthday 25. Date of birth 24/8/92.

3. Enlisted at Lindsay. on 7/3/16.

H.Q. CANADA
JAN 31 1918
District No. 8
Kingston, Ont.

4. Personal description :-

(a) Height 5' 4". (b) Weight 150. (c) Complexion fair.

(d) Colour of hair brown. (e) Colour of eyes blue. (f) Identification marks None.

5. Address after discharge (for the use of the Board of Pension Commissioners) Lindsay, Ont.

6. Former trade or occupation Farmer.

7. (a) Service

	PERIODS	
	From	To
109th, B'n.	7/3/16.	Nov. 1916.
124th, B'n.	Nov. 1916.	Feb. 1917.
# 3 S.S.CO.	Jan. 1918.	Present.

(b) Has he been overseas? England.

8. Present disease or disability (use authorized nomenclature if possible) Double chronic suppurative otitis media.

(a) Date of origin Childhood (b) Place of origin England.

(c) Cause* Scarlet Fever.

*(Here include original disease or injury)

If further space is needed for this or other answer, use page 4

9. Present condition. (Important to be a full description of the present disabling condition or conditions).

Subjective:-

Man complains of being deaf at times and having a discharge from ears.

Objective:-

Man well nourished. Lungs normal. Apex heart just inside nipple line. No murmurs. A slight irregularity.

Specialists

Report on ears. "O.M.S.C. both-perforations, free purulent discharge Hearing voice aggravated by service".

(SG) J.C. Connell, Ltj-Col.AMC

[After describing all abnormalities, anatomical and functional, contributing to present incapacity (see section 11) state whether such incapacity is directly due to (a) weakness, (b) loss (complete or partial) of an organ or member or of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

10. History :

Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination.

Nil.

11. What is the extent (state in percentages) of the disability in earning a livelihood in the untrained labour market? If there is more than one disabling condition, estimate the disability, due to each, and that due to all combined.

25%.

12. Did the disability arise on or off duty? No.

13. Was a Court of Inquiry held? No.

14. If the disabling condition had its origin before enlistment, has it been aggravated on service?.....

If the answer is in the affirmative, state in percentages, to what extent the soldier is incapacitated by that aggravation.

Not aggravated.

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? No.

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

16. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? Permanent.

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

Nil.

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

No.

19. Can the former trade or occupation be resumed? Yes.

20. Recommendations

For discharge.

W. S. Sneyd

Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier.)

I, the undersigned..... have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of

C. E. Williams

Signature of soldier examined.

(F)

OPINION OF THE MEDICAL BOARD

21. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticized.

Yes.

22. Is the soldier fit for

- (a) General service, (Category A) (Yes or No). **No.**
- (b) Service abroad, not general service, (" B) (Yes or No). **No.**
- (c) Home service, (Canada only), (" C) (Yes or No). **No.**
- (d) Temporarily unfit, (" D) (Yes or No). **No.**
- (e) Unfit for service in Categories A, B and C, (" E) (Yes or No). **Yes.**

23. It is certified that the soldier

(a) ~~Does not require treatment.~~ (Give the nature of the condition and of the treatment required and its probable duration).

- (b) Does not require treatment.
- (c) Should pass under his own control.
- (d) ~~Should pass under his own control.~~
(Strike out condition not applicable).

24. It is recommended that the soldier be discharged. (When not for discharge add special recommendation).

W. A. Jones Capt. AMC. President
W. J. ... Capt. AMC. } Members.
A. Macdonald " " }

STATION... Fort Henry.

DATE... Jan. 28th/18.

APPROVED BY

DATE... JAN 29 1918

APPROVED BY

DATE

J. A. ... A.M.C.
 D/ A. D. M. S. Assistant Director of Medical Services.
 For A.D.M.S. Mil. District No. 3

Director-General of Medical Services.

Case 124

Mr. Williams,

Ch. Cup other medium both can.
- Conversation voice 20 ft both can.
Does not hear whispered voice.

Unfit

Treat syringe both can with
hot water lot. clearly

at Amby

Morris

Ophthalmic Department,
Bramshott.

Date.....

To H.O.Battn.

Rank & Name.....No.....

Unit.....Battn.

Visual acuity	R.E.....	L.E.....
" " with glasses	R.E.....	L.E.....

Unfit. Fit.

Glasses not ordered.

Remarks:-

Sig.....

Captain C.A.H.O.

Charles,

Lindsay

2/6