

6025

8 Re. 1269

6025

Unit 109th OVERSEAS BATTALION, C. E. F. Rank Major Name Hutchins, Horace

OFFICERS' DECLARATION PAPER

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

ORIGINAL

QUESTIONS TO BE ANSWERED BY OFFICER

(ANSWERS)

1. (a) What is your Surname? Hutchins
- (b) What are your Christian Names? Horace
2. (a) Where were you born? (State place and country) Kemptville Ontario
- (b) What is your present address? Fenelon Falls
3. What is the date of your birth? 28th Jan. 1868
4. What is (a) the name of your next-of-kin? Mrs H. Hutchins
- (b) the address of your next-of-kin? Fenelon Falls Kemptville, Ont
- (c) the relationship of your next-of-kin? wife
5. What is your profession or occupation? Livery man
6. What is your religion? Presbyterian
7. Are you willing to be vaccinated or re-vaccinated and inoculated? yes
8. To what Unit of the Active Militia do you belong? 56th Regt.
9. State particulars of any former Military Service. 8 years in 56th Battalion
10. Are you willing to serve in the
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? yes

The undersigned hereby declares that the above answers made by him to the above questions are true.

H. Hutchins (Signature of Officer.)

CERTIFICATE OF MEDICAL EXAMINATION

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider him* Fit for the CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Date Feb. 23rd 1916

Place Fenelon Falls, Ont

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

*Insert here "fit" or "unfit".

OFFICERS' DEBILITATION PAPER

CANADIAN OVERSEAS EXPEDITIONARY FORCE

CONFIDENTIAL

QUESTIONS TO BE ANSWERED BY OFFICER

(ANSWER)

1. State your name, rank, and service number.

2. State your current assignment.

3. State your present address.

4. State your present telephone number.

5. State the address of your next of kin.

6. State the name of your commanding officer.

7. State the name of your unit.

8. State the name of your parent or guardian.

9. State the name of your spouse or partner.

10. State the name of your children.

11. State the name of your previous commanding officer.

12. State the name of your previous unit.

13. State the name of your previous parent or guardian.

14. State the name of your previous spouse or partner.

15. State the name of your previous children.

16. State the name of your previous commanding officer.

17. State the name of your previous unit.

18. State the name of your previous parent or guardian.

19. State the name of your previous spouse or partner.

20. State the name of your previous children.

CERTIFICATE OF MEDICAL EXAMINATION

I, the undersigned, being a duly qualified medical officer, do hereby certify that the above named officer is/are fit/unfit for service.

Signed: _____

Rank: _____

Service Number: _____

Date: _____

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
 Attestation Papers..... 23
 Declaration of change of name.....
 Authority for special enlistments.....
 Documents of re-enlisted men.....
 Regimental Conduct Sheet.....
 Compulsory Stoppages.....
 Casualty Forms..... 2
 Proceedings on discharge.....
 Corps History Sheet.....
 Date and No. of Deposit Receipt for Purchase Money and Amount.....
 Parchment Certificate.....
 Medical Report for Invalids.....
 Medical History Sheet..... 2
 Proceedings of Regt. Court Martial.....
 Copies of Convictions by Civil Power.....
 Company Conduct Sheet.....
 Clothing Transfer Certificate.....
 Inventory of Kit.....
 Last Pay Certificate.....

Officer's
DISCHARGE DOCUMENTS

Name **HUTCHINS, HORACE**
 Regt. No. _____ Rank *Major*
 Corps *21st Bu. (109th Bu.)*

K.I.A. 9-4-17



R. O. No.....

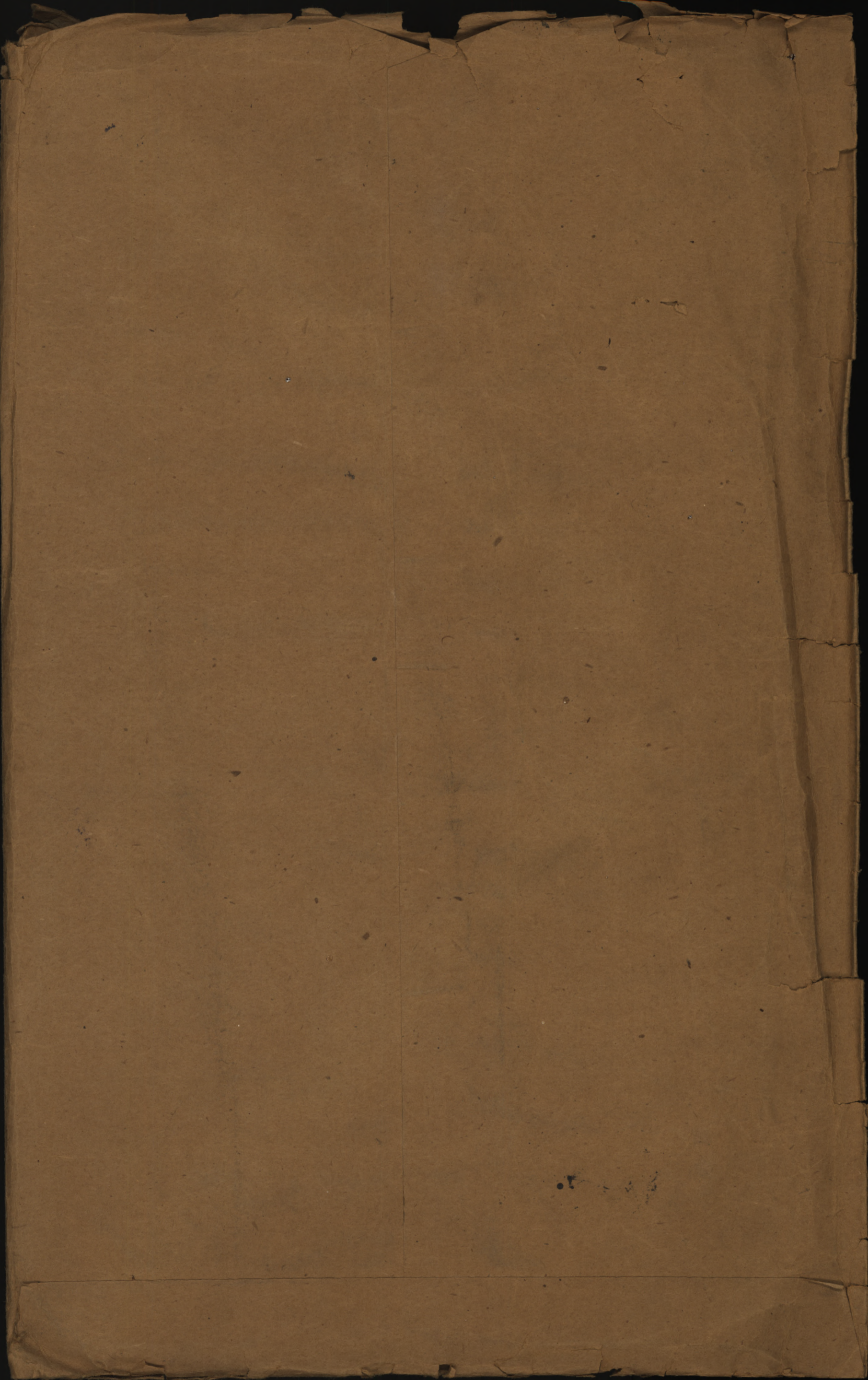
H. Q. No.....

41390

*20 B.P.C.
 26/4/20.
 Spec - 6025.
 m.H.*



*1
 2-1
 2-1*



Number..... Rank **MAJOR**

Surname **HUTCHINS**

Christian Names **HORACE**

Unit **21st Bn** Theatre of War **FRANCE**

Date of Service **29 4 16** **20 3 17** **9 4 17**

Remarks

Latest Address **Mrs. Eliza Martin**
Kemptville, Ont.

Roll No. **D**
Page 4029

94 N 223 40000

MAY 25 1991

No

RANK

Capt

NAME

Nutchins H

T. O. S.

UNIT

59th Battalion

M. D. 3

PAID
FROMPAID
TOSIG
OR
REC'T

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS

AUTHORITY

1915

1915

Aug 7

Aug 31

✓

Sept

✓

Oct

✓

Nov 1

Nov 22

✓

Trans to 109th Ba 22-11-15

AO 152 22-11-15-

21

HUTCHINS, Horace, Major, 21st. Bn.

Not eligible for star.

MEDALS & DECORATIONS

Mrs. Eliza Martin,
Kemptville, Ont.

Scroll Des. ~~SEP 19 1921~~ 15426 221470
Re 7-2-4-21

PLAQUE & SCROLL

Levi Hutchins (Brother)
2081 ~~Second Ave. West,~~
~~Vancouver, B. C.~~

B252
Change of Add.
13750
Suite 34,
Trafalgar Mans.

Serial No 782761

MEMORIAL CROSS

Brother, as above.
Widow, died subsequently.
Mother, predeceased.

820 Nelson St
Vancouver B.C.

Dep. JUL 21 1920 (Brother) C. 15715.

Auth. Letter 1
July 28/1920.

E.F. 13/7/20.

B

166

Name

HUTCHINS

Rank

Major

Reg. No. 9 A 345

Unit

Horace

Gen. List att. 21st Bn.

Next of Kin

Canada

A.F.B. 104-93.

WSTH

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
10.4.17. Rep. from G.H.Q.		WOUNDED & MISSING	648M1834	14.4		
10.4.17.	Correct unit Now killed in action Correct date	9-4-17		650 648M1834 701.	M.H.S.H. 18/5	
9-4-17	Pl. 291 Miss. Beladlan					
9-4	Pl. 302n Kld	9-4-17				

REGT'L NO

H. Q. FILE NO. 649-

NAME

Kutchins Horace

RANK AND CORPS

Major. Gen. List Att. to 21st Br. (Form 109th)

CABLE

NATURE OF CASUALTY

FOLLOWS

FOLLOWS

No.

DATE

M 1834

13-4-17

Rept. Wounded & Missing
Apr. 10th. 1917 ✓

M 4454

15-5-17

Revised Rept's wounded & missing

M 4736

20-5-17

now Rept's killed in action
April 10th. 1917 ✓

A.P.B. 2190

←

Killed in action in the field
France April 9th. 1917

Rec'd 17/7/17

LIST No

HOSPITAL

DATE OF
ADMISSION

REMARKS

648

Rept'd from Gen Hdqtrs

10-4-17

Wounded & Missing

674'

Prev. " Wd. & Missing.

10-4-17

now. Killed in Action.

701^b

Correct date of death

9-4-17

No.

RANK

Capt.

NAME

Hutchins D.

T. O. S.

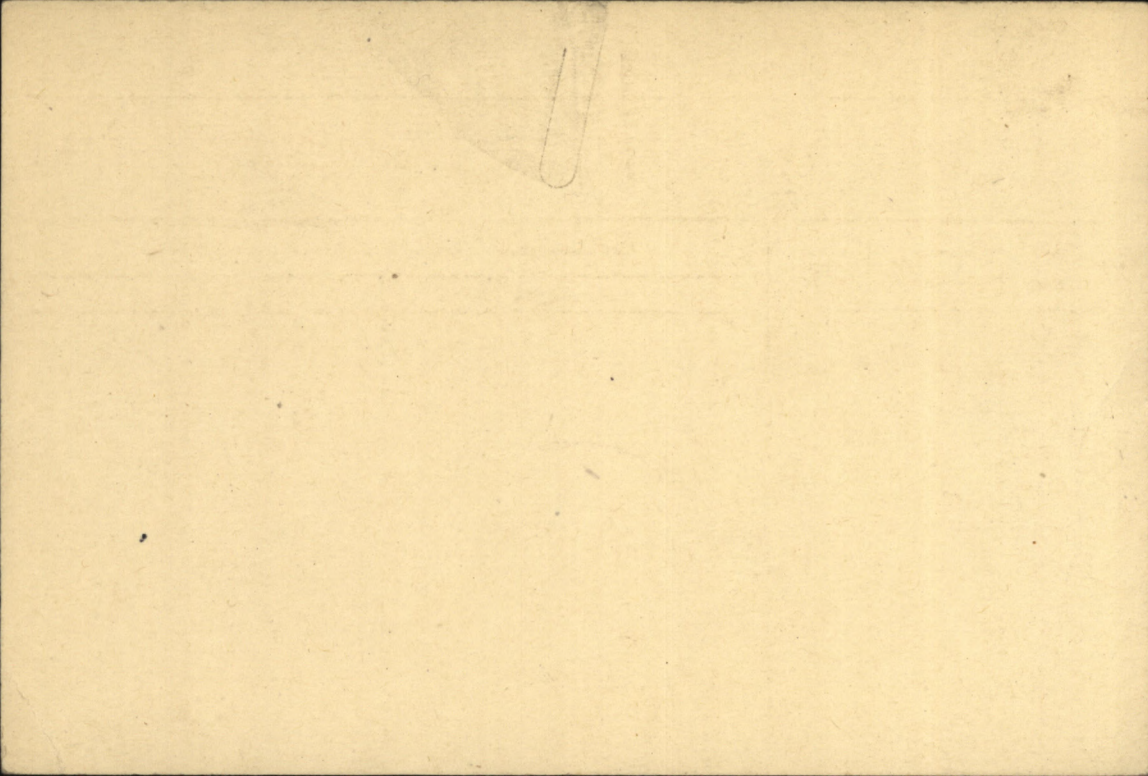
UNIT

Transferred from 57th Bn.
23-11-15. D.O. 3. 23-11-15.

109th Battalion.

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Nov 23	1915. Nov 30	✓		
	Dec.	✓		
1916.	Jan. 1916	✓	Prom. Major. 1-2-16.	D.O. 62 1-2-16.
	Feb.	✓		
	Mar.	✓		
	April.	✓		
	May.	✓		
	June.	✓		
	July.	✓	Prov. app. o. l.	D.O. 171 of 7-6-16.
			UNIT SAILED	
			JUL 23 1916	



SURNAME. *Hutchins*

(2856-1)

CARD NO.

D

CHRISTIAN NAMES *Horace.*

FOLL.

REGL. No. RANK *Major.*

UNIT *109th. Gen. List, attached to 21st*

Bn.

FORMER CORPS *56th. Regt. (8 yrs.)*

NEXT OF KIN.

NAMES IN FULL *Hutchins, Mrs. H.*

RELATIONSHIP TO SOLDIER

ADDRESS

*deceased wife
auth letter
Kemptrille, Ont.*

CHANGE OF ADDRESS

*also notified
Levi Hutchins
Suite 34 Trafalgar
Transitions
auth letter 26-7-20 870 Nelson St
Vancouver B.C.*

COUNTRY OF BIRTH *Canada, Kemptrille, Ont.*

DATE

Jan. 28th. 1868


PLACE OF ATTESTATION

DATE

488

Sailed from Halifax 23/7/16 per S.S. "Olympic"

auth for Irano M 1834-13-4-17

Sailed *Pl. S. S. Olympic.*  *July 53rd 1916.*

MARRIED

Yes.

SINGLE

WIDOWER

TRADE OR CALLING

Everyman

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION.

PLACE

Fenelon Falls, Ont.

DATE

Feb. 23rd. 1916

Present Address: Fenelon Falls, Ont.

Hutchins.

H.

Gen. list. att.

Major.

21st. Bn.

Wounded & MISSING:-. 10-4-17.

Now reported **KILLED IN ACTION:-10-4-17** R

Correct **date** of Death:- 9-4-17.

C.L. 14-4-17. 648-2.

19-4-17. 652-5.(Change of Unit.).

15-5-17 674

15-6-17 701-6. note.

A.M.D. 2 DEPT.

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

R

Surname

Christain Name

Reg. No.

Rank

Unit

MEDICAL BOARD held at

Date

Serial No.

(1)

Other Medical Boards at

Date

Serial No.

(2)

(3)

(4)

(5)

Condition found by Board

Disposition Recommended

(1)

(2)

(3)

(4)

(5)

PENSIONS & CLAIMS BOARD held at

Date

Disposition

Remarks

ORIGINAL MEDICAL HISTORY SHEET.

Original

Surname Hutchins Christian Name Harace

Examined { on 23 day of Feb 1916
 at Fulton Falls

Birthplace { City or Town Ampville
 County Ontario

Apparent age 47 years

Trade or occupation Sway Man

Height 5 Feet 8 Inches

Weight 142 Lbs.

Chest measurement { Minimum 32 1/2 inches
 Maximum expansion 35 1/2 inches

Physical development good

Small-Pox Marks none

Vaccination Marks { Arm Right none Left one
 Number one

When Vaccinated last July 11th 1916

(a) Marks indicating congenital peculiarities or previous disease none

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

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

Date	Result	VACCINATIONS.
<u>11-7-16</u>	<u>Good</u>	<u>J. McCulloch</u>
		M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>9-10-15</u>	<u>Good</u>	<u>J. McCulloch</u>
<u>18-10-15</u>	<u>"</u>	<u>J. McCulloch</u>
<u>25-10-15</u>	<u>"</u>	<u>J. McCulloch</u>
<u>29-9-16</u>	<u>"</u>	<u>Not sayd</u>
		M.O.
		M.O.

Enlisted on 23 day of February 1916 at Fulton Falls

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Bn C.E.F.</u>	<u>Major</u>		<u>23-2-16</u>
Transferred to.. ..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

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

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 ~~Horace Hutchins~~ 21491

(3) Full Name of Soldier Horace Hutchins

(4) Place of Birth Kemphville, Ontario, Canada.

(5) Are you married, or not? Yes

(6) If married, state, (a) Full name of your wife Mary Jane Hutchins

(b) Present Postal Address Kemphville, Ontario, Canada

(7) Are you a widower? No

(8) Have you any children? Yes one adopted son

If so, give number of boys and girls one boy

Also their names and ages Dewey Walter Wellman age 17 years 3 months

(9) Is your Father alive? *No*
If so, state name and address *Nil*

(10) Is your Mother alive? *No*
If so, state name and address *Nil*

(11) If your Mother is a widow *No*
Are you her sole support, or not? *Nil*

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

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

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

Yes

(15) Are you insured? *No*

If so, in what Company? *Nil*

Have you made arrangements for payment of your Insurance premium? *Nil*

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

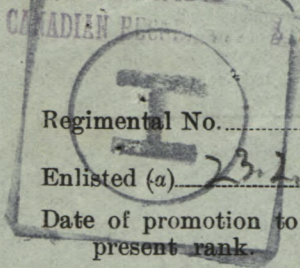
Date *13th July 1916*

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

24/12
 G. L. W. & Mining
 10/4/17

CERTIFIED CORRECT

29 NOV 1918



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

M. F. W. 54. (A. F. B. 103.)
 250M.—1-16.
 H. Q. 1772-39-920.

Casualty Form—Active Service.

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

Regimental No. _____ Rank Major Name Hutchins Horace
 C. E. F.

Enlisted (a) 23.2.16 Terms of Service (a) _____ Service reckons from (a) 23-7-16

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) _____

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				
	<u>Embarked Canada</u>		<u>Halifax</u>	<u>24.4.16.</u>	
	<u>Disembarked England</u>		<u>Liverpool</u>	<u>31.7.16.</u>	<u>E. F. LeCraw Capt. 109th O. C. 109th Overseas Battalion, C. E. F.</u>
		<u>NE</u>			

(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, Shooing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier.....

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

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2
(Assignee)

Name of Soldier

L. L. Job 5470—Req. 6888.

PAYMENTS.

Hutchins H.
Major 109th Bu

Month.	Year.	Cheque No.	Am ^t .
April	1916		
May			
June			
July			
Aug.			
Sept.			
Oct.			
Nov.		<i>P24584</i>	<i>150</i>
Dec.		<i>V35477</i>	<i>75</i>
Jan.	<i>be</i> <i>1917</i>	<i>038941</i>	<i>75</i>
Feb.		<i>044944</i>	<i>75</i>
March		<i>L50764</i>	<i>75</i>
April		<i>H2500</i>	<i>75</i>
May		<i>H8901</i>	<i>75</i>
June		<i>M15396</i>	<i>75</i>
July			
Aug.			
Sept.			
Oct.			
Nov.			
Dec.			
Jan.	1918		
Feb.			
March			
April			
May			
June			
July			

75⁰⁰ Oct 1/16 Remarks.

Pension Granted... *1/7/17*
B.P.C. to Recover \$.....
Clerk... *J. G. G.* Date... *15/4/17*

75 R \$225 C.F.X. 23-4-19
75 ch

*Assigned dependent. all
to remain open till pension granted
M-15396 Remitted 28th May*

~~F.X. Remd. Date~~ *10/10/17* By *6.75.00*
E.F.X. " Date... *25/10/17* By *...*

30/11/17

675

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.				

7-8-15

MILITIA AND DEFENCE

M. F. W. 11.
10m.-9.15.
H. Q. 1772-1-13.SEPARATION ALLOWANCE **364**Name *Mary Jane Hutchins*Name of Soldier *Hutchins Horace*

Address

*Kemptville
Ont*

Regtl. No.

Rank

Capt.

Corps

59th Batta

Relation to Soldier

} Wife

To what Corps belonging

wife, child or mother

when called out

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>#2. overpaid</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.		<i>07828</i>	<i>112</i>	<i>(E 24057 cancelled) Struck off strength 28/11/15 Jan 24/11/15</i>
Nov.		<i>010217</i>	<i>40</i>	
Dec.		<i>024057</i>	<i>40</i>	
Jan.	1916			
Feb.				<i>Account closed</i>
March				

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

207

To Whom *Mrs H Hutchins*
Address *Keuptville Ont*

By Whom Assigned *Hutchins H*
Regtl. No.
Rank *Majors*
Corps *109 W/Bn*

Rate *7500 Oct '16*
27m. Oct 25/16 of W 27 "16 PAYMENTS

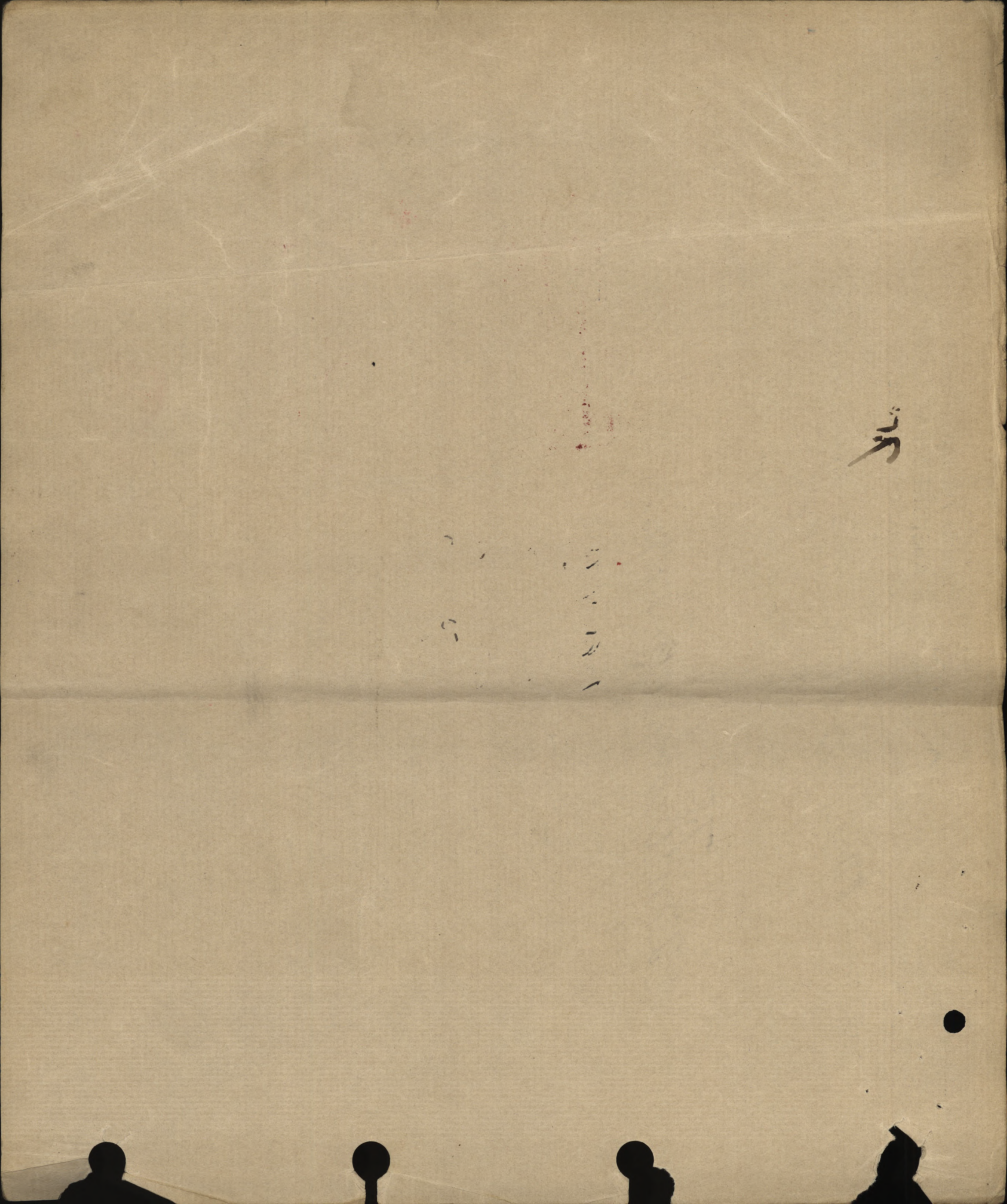
Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.				
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

PENSION
1915
APPROVED
OVER PAYT.
RECOVERED
BY

Pensions Notified Date *1-6-17*
Killed in Action
Died of Wounds } Date *10-4-17*
Missing }
C. L. 29) 16-5-17 Clerk *W. A. Tawcett*
Date Noted *1-6-17* 191

Pensions Notified DATE *23-4-17*
Moving to
Killed in Action DATE *10-4-17*
C. L. 14-4-17 *Quinn*

13-4-17



SEPARATION ALLOWANCE

Sheet No. 2. *Mrs. M. J. Hutchins.* OVERSEAS CONTINGENTS
Wife.
PAYMENTS.

Name of Soldier *Hutchins, N.*
Private. *109th C. S. Bn.*

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

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.		<i>2 #18762</i>	<i>350 - 350</i>	
Oct.		<i>19965</i>	<i>50</i>	<i>50</i>
Nov.		<i>22752</i>	<i>50</i>	<i>50</i> <i>422752 Cancelled</i>
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

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

23-11-15

129

MILITIA AND DEFENCE

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

SEPARATION ALLOWANCE

CJ

Name *Mrs Mary Jane Hutchins*
Address *Kemptville
Ont.*

Name of Soldier *Hutchins A.*

Regtl. No.

Rank *Promoted Major 1/2/16 (D.P.M.R. 3/8/16)
~~Capt.~~*Corps *109 Batts*

Relation to Soldier

wife, child or mother

} *Wife*

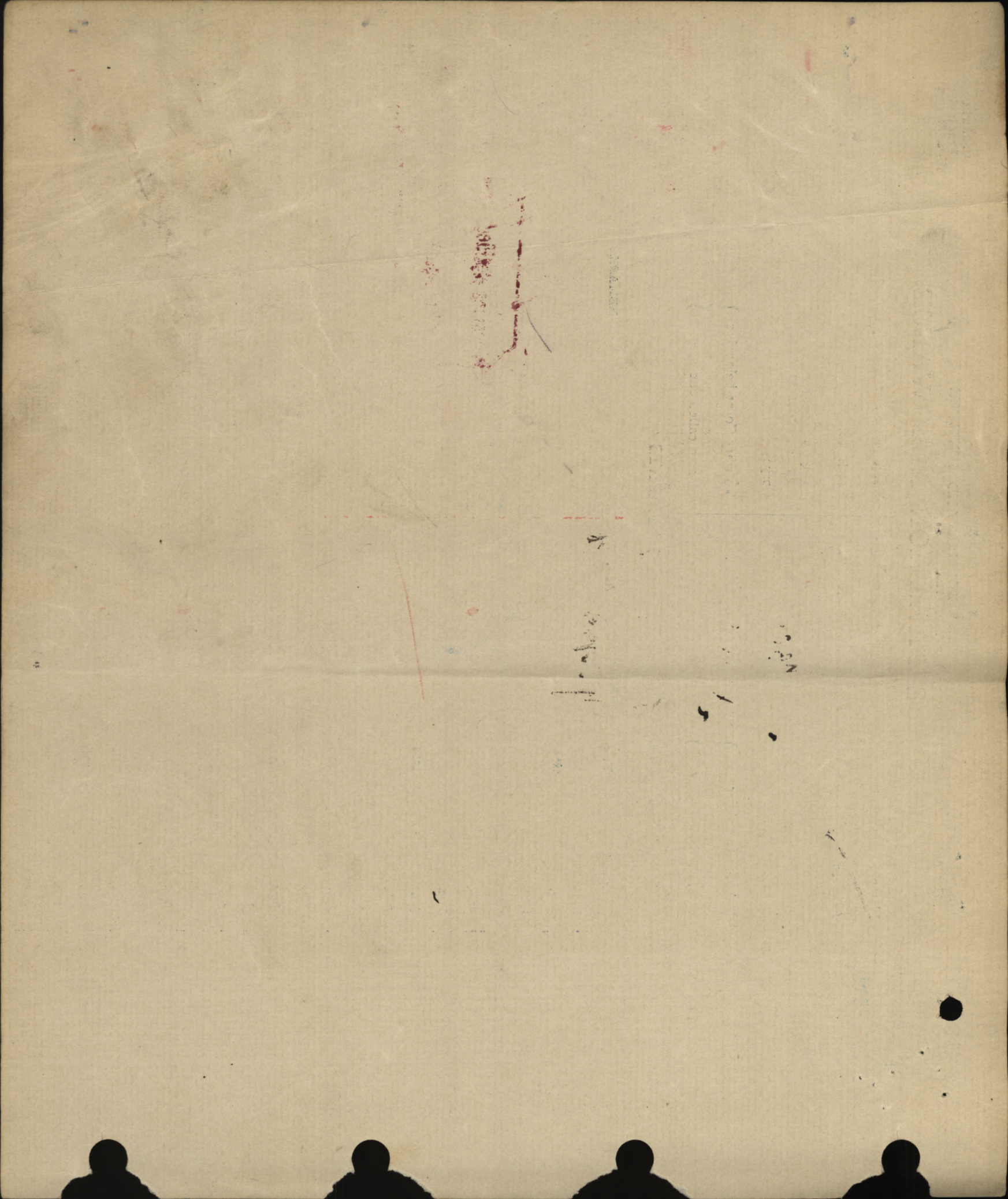
To what Corps belonging

when called out

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.	X			
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.	✓	<i>K 23577</i>	<i>130 - 130</i>	
March		<i>K 26224</i>	<i>40 - 40</i>	

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



A.2.M.
22-9-16.

Assignment as at
OCTOBER 1 1916

Hutchins

Major H.

109th Battalion

~~\$45.00~~
Payment Stopped
Killed in Action

Mrs H. Hutchins

\$75.

1 ⁵/₁₇

Stumptville

Ont.

Remarks,
Casualties, etc.

Balance

Total
Debits

Other
Charges

Assigned
pay

Cash
Payments

Voucher
No Date

Total
Credits

Other
Credits

Amount

Field Allowance

Amount

PAY

Rate

No.
of
Days

To

Date

From

Nov. 23 / 15

1316

MILITIA AND DEFENCE

M. F. W. 11.

50m.-6-16.

H. Q. 177-30-818.

SEPARATION ALLOWANCE

Name *Mrs. Mary Jane Hutchins,* Name of Soldier *Hutchins, Norace*
 Address *P. O. Box 12,* Regtl. No.
Kemptville, Ont. Rank *Major.*
 Corps *189th O. S. Bn.*
 Relation to Soldier } *wife.* To what Corps belonging }
 wife, child or mother } when called out }

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

Debit

1954
1955
1956
1957
1958
1959

ASSIGNED PAY.

UNIT.

RANK.

NAME.

Beneficiary *W. H. Hutchins*

NAME OF UNIT *109th Bn.*

DATE

AUTHORITY

RANK *Major*

DATE

AUTHORITY

Name *Hutchins, W.*

Initials

Bank *of Montreal.*

Address

Canada

Amount. \$ *75⁰⁰ 1¹⁰/₁₆*

Canada

From Canada

W.R.O.#1225 C.J.D.

d/7-8-16.

Entered on N.E. Card Index

Separation Allowance issued. Yes or No.....

Checked by

DATE
1916

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

SPECIAL AUTHORITIES
To be initialed by P.M. in every case.

INITIALS.

Aug 16 Cred Bal 31³/₁₆ Bank

4870

18 Pay Aug (R)

187

7870

28 Bank

187

Sept. 19 Pay. sept. (R)

180

26 Bank

180

Oct. 20 Pay Oct. (R)

186

Oct 23 A.P. Can

75

26 Bank

111

Nov 22 A.P. Can

75

" 24 Pay Nov (R)

180

" 28 Bank

105

Dec 11 A.P. Canada

75

" 12 Pay Dec (R)

186

" 15 Bank

111

1917
Jan 19 A.P. Canada

75

22 Pay Jan (R)

186

23 Bank

111

Feb 26 A.P. Can.

75

22 Feb Pay (R)

168

23 Bank

21932.

93

Mar 19 A.P. Can.

75

23 Mar pay (R)

186

26

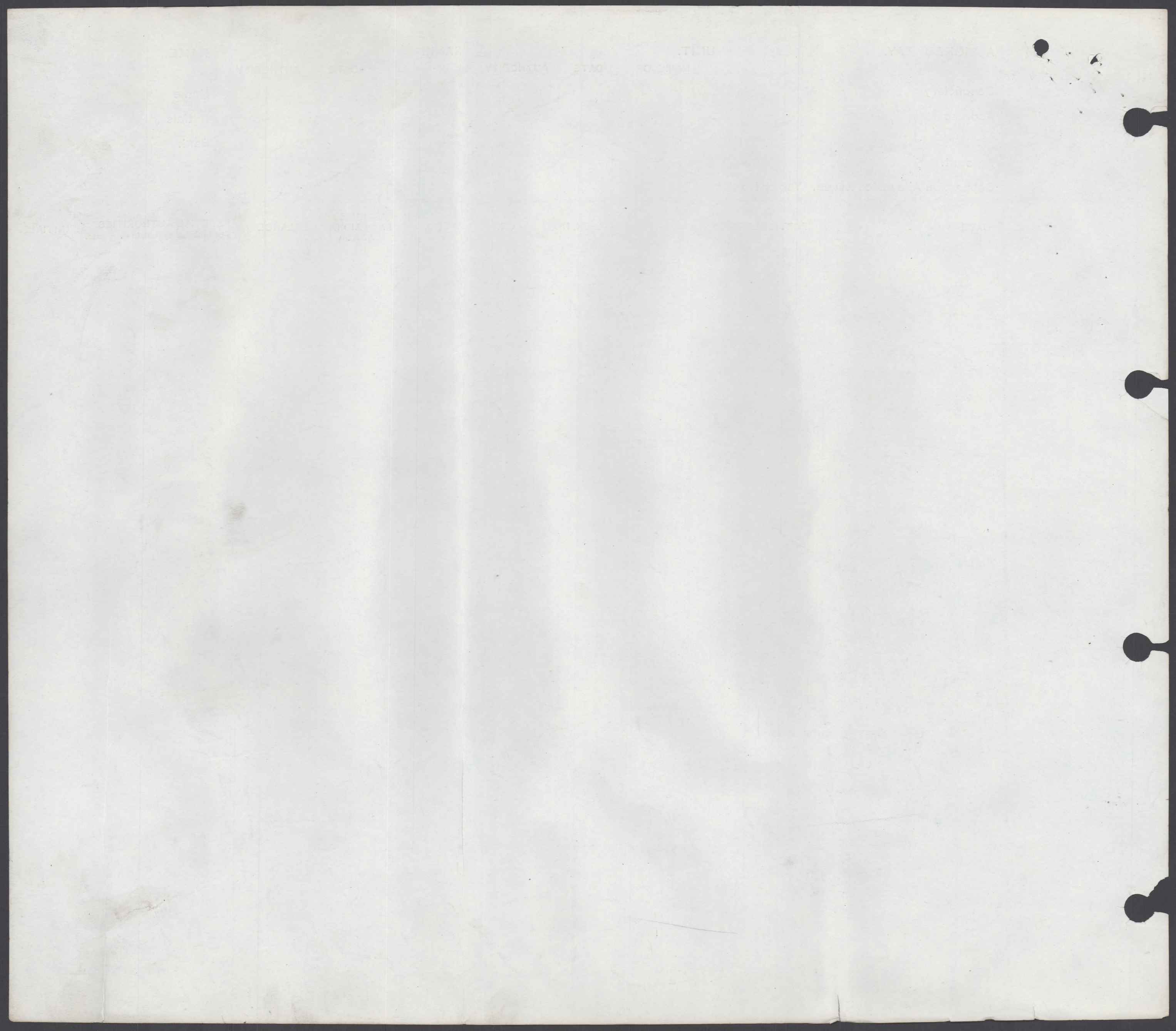
Bank

21937

111

108770

Statement of
SEP 19 1917
Account rendered
Statement of
SEP 19 1917
Account rendered



ASSIGNED. PAY.

UNIT. *Copy*

RANK.

NAME.

Beneficiary *Mrs. H. Hutchins*

Address

Canada

Amount. \$ *75⁰⁰ 1¹⁶*

Separation Allowance issued. Yes or No.....

NAME OF DATE AUTHORITY

109 Bn.

4. List at 12¹⁷ a G.O. 129

21st Bn.

Wounded in Action 10⁴⁷ C.A. 648. 14⁴⁷

Now Rptd Killed in action 10⁴⁷ C.A. 674. 15⁵⁷

A.D.A. 9⁴⁷ C.A. 701. 15⁴⁷

DATE AUTHORITY

31⁷⁶ Dr. Canada

D.R.O. 1225. C.T.D.

7¹⁶

Name *Hutchins*

Initials *H*

Bank of Montreal

DATE

1916

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

SPECIAL AUTHORITIES
To be initialed by P.M. in every case.

INITIALS

Aug 14 lend Bal 31⁷⁶ Bank

18 Pay Aug.

187

7870

7870

28 Bank

187

Sept 19 Pay Sept

180

26 Bank

180

Oct 20 Pay Oct.

186

23 A.P. leave

75

26 Bank.

111

Nov 22 A.P. leave

75

24 Pay Nov.

180

28 Bank.

105

Dec 11 A.P. leave

75

12 Pay Dec

186

15 Bank

111

*1917
Jan 18 A.P. leave*

75

22 Pay Jan

186

23 Bank.

111

Feb 20 A.P. leave

75

22 Feb. Pay

168

23 Bank

24837

93

Mar 19 A.P. leave

75

23 Pay Mar

186

26 Bank.

24837

111

Apr 17 A.P. leave

75

23 Pay apr 10 days

60

May 26 Reopened Bofm. No 785 P.C.

15

DR 15

Drawn

*Hold Ptd
Tfr to Dr Ledger
Dr. L. 18-12. May 1917*

Hold for Debit

ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF

DATE

AUTHORITY

DATE

AUTHORITY

Beneficiary

VI Bn.

Major

Name *Hutchins*

Address

Initials *H.*

Bank *of Montreal*

Amount. \$

Separation Allowance issued. Yes or No.....

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
<i>1917</i>	<i>Balance forward</i>					<i>—</i>		
<i>July 17</i>	<i>Pay April 11-30th 17</i>		<i>170</i>			<i>—</i>		
<i>17</i>	<i>Transferred to Branch #1156</i>			<i>170</i>		<i>—</i>		

ASSIGNED PAY.

UNIT.

RANK.

NAME.

11 9 JUN 1917

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.....

NAME OF DATE AUTHORITY

DATE AUTHORITY

Name *Stachins*

Initials *H*

Bank *of Montreal*

Entered in N.E. Card Index

Checked by

109th Bn.

Major

31st 7/16

Canada

Canada

Gen. Kistall

12th 17.

also 129

DR 1225

21st Bn. K 2/A 9th 17. BR 701. 15th 17

CR 7th 16

Wounded & Missing 10th 17. C.R. 648. 14th 17

Wounded & Missing 10th 17. C.R. 674. 15th 17

DATE

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED PAY PAID IN CANADA

BALANCE

SPECIAL AUTHORITIES
To be initialed by P.M. in every case.

INITIALS

1917

*Apr 17
23*

*at Canada
Pay apr. £ (1st - 10th)*

60-

75-

DR 15-

Hold P. 9

May 26

Quorum Report. n=785. P.C.

15

T. P. to G. R. Ledger

McBeth June

C. P. on basket

6

DR 6

*Transferred to Ledger
to Ledger. 12. May 1917*

July

Kit storage charges. 18/26

6 50

A.A. 10-30th 17 R. M. Bin. 10th 17

126

B. N. 113 50

Oct

Trans to Can for sett. 10th 17 20/34.

113 50

Statement of
SEP 19 1917
Account rendered

*Major's Latus
Date of Pay 4⁰⁰
" " H. Allen 1⁰⁰
" " Mrs 1⁰⁰*

ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF

DATE

AUTHORITY

DATE

AUTHORITY

Beneficiary

Address

Amount, \$

Separation Allowance issued. Yes or No.....

Name

Initials

Bank

DATE

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

SPECIAL AUTHORITIES
To be initialled by P.M. in every case.

INITIALS

ET.

Rank and Name

HUTCHINS, Horace, Major. ✓

25-5-16 ✓

Regimental No.

Name and Address of Next-of-Kin Wife. ✓

Unit 109th Battn.

Mrs H. Hutchins. ✓

Date of enlistment

Kemptville. Ontario. Canada. ✓

Place of birth Kemptville. Ontario. Canada ✓

Married (Yes or No)

Yes. ✓

Date and place of discharge

If in Permanent Force

Reason for discharge

Character on discharge

Promotions or appointments

LEFT CANADA 23-7-16

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				
10-1-17	C. C. Bran	On Command o/s.	E Ont Reg	24.12.16 29.12.16	RO 128-081 amended by 80149. A.G. R.O. 78
12-1-17	A. G.	Transferred to Gen List		24.12.16	R.O. 129
17-2-17	27 th Bn	Attchd from England for Instnl purposes		29/12/16	Pt II No 9
29-3-17 3.4.18.	21 st Bn 21 Bn.	Attchd for Instntional purposes with offer T.D.S. carried supernumerary		8/3/17 20.3.17.	Pt. II O. 35. P. II 34.
14-4-17	C.K.O.	Reported from Gen H. Qrs Wounded & Missing		10-4-17	C.R. 648, C.L. 652
15-5-17	do	Mr. Repts Wounded & Missing was Repts. killed in action		9.4.17 10-4-17	Pt II O. 55. 21 st Bn C.L. 674
					A.F.B. 2690 & 704-93 Esch's 19/1/17

A.F.B. 168,

29 NOV. 1918

2 auts
Register No. *DA 1473*

WAR SERVICE GRATUITY
TO
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. *9248-H-1*

Reg'tl No. Name *Horace Hutchins*
(Christian Name) (Surname)
Unit *109 Bn* Rank *Major* Date of enlistment
Date of casualty *10-4-17* B.P.C. File No. *1269*
Was service performed overseas? *Yes*

DEPENDENT

Name *Mrs Mary J Hutchins* Relationship *Widow*
Address *Kempville*
Ontario

M.F.W. 2652
25M-6-20
H.Q. 1772-39-1473

Amount of Special Pension Bonus \$ *168* Abstracted by *P. Parlow*

Eligible for Gratuity \$
Less amount of Special Pension Bonus paid \$
Less Debit Balance of S. A. or A.P. \$

Total deductions \$
Balance due \$ *✓*

Cheque No. Date issued

Clerk *P. J. Levier*

"Noted" Dy 17
24/8/20.

REMARKS : *Pensioner died 25-10-18*
no beneficiary stated
Re-alow remark - no
payments necessary

Audited by
Date

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname

Christian Name

Regimental Number

Rank

Address (in full)

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

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		

Remarks:

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