

ATTESTATION PAPER.

No. 619

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

- 1. What is your name?..... Charles H. Morrison.
- 2. In what Town, Township or Parish, and in what Country were you born?..... Amclown Quebec. P.
- 3. What is the name of your next-of-kin?..... D. W. Morrison. father.
- 4. What is the address of your next-of-kin?..... Beaharnois. P.Q.
- 5. What is the date of your birth?..... Feb 12. 1891
- 6. What is your Trade or Calling?..... Teacher.
- 7. Are you married?..... no.
- 8. Are you willing to be vaccinated or re-vaccinated?..... Yes.
- 9. Do you now belong to the Active Militia?..... no.
- 10. Have you ever served in any Military Force?.. If so, state particulars of former Service. none.
- 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.



.....(Signature of Man).
Edward J. Pilot. (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Charles H. Morrison, do solemnly declare that the above answers made by me to the above questions 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 March 27th 1915 Charles H. Morrison (Signature of Recruit)
Edward J. Pilot (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Charles H. Morrison, 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 March 27th 1915 Charles H. Morrison (Signature of Recruit)
Edward J. Pilot (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 Montreal this 27th day of March 1915.

Edward J. Pilot (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above named Recruit.

A. Cedouin (Approving Officer)

Description of Charles K. Morrison on Enlistment.

Apparent Age 24 years 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 6 ft. 2 1/2 ins.

2 Vac. L. arm.

Chest measurement { Girth when fully expanded 37 ins.
 Range of expansion 5 ins.

Mole right side of nose

Complexion Fair

Eyes Blue

Hair Fair

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



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-Sea Expeditionary Force.

Date March 27 1915

W. Ernest Nelson
Capt a/c
 Medical Officer.

Place Montreal

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

[Signature]
 (Signature of Officer)

Date March 27 1915

REGIMENTAL

NAME *MORRISON Charles*

REGT. NO.

UNIT *2nd C. D. C.* H. Q. FILE NO.

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505 REFERENCE

NON-EFFECTIVE BY

- 1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)
- 2 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)
- TRAINING HISTORY SHEET (M.F.W. 113)
- 1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)
- 1 REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)
- 2 COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)
- 2 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)
- 1 DENTAL HISTORY SHEET (M.F.B. 465)
- MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)
- 1 MEDICAL EXAMINATION (M.F.W. 129)
- TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)
- PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)
- DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)
- LAST PAY CERTIFICATE (M.F.W. 44)
- 1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)
- PARTICULARS OF CHARACTER (A.F.W. 3226)
- 1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

10-12-1941

M

CANADIAN

DEATH

Category

H

Med 30-6-41

R 103 Doc 11-7-21

R 103

DISCHARGE

Category

Demob

32459

PUBLIC ARCHIVES RECORDS CENTRE
BOTTES DES ARCHIVES PUBLIQUES
OTTAWA

DESERTION

*3 Misc
1/132
Atacad*

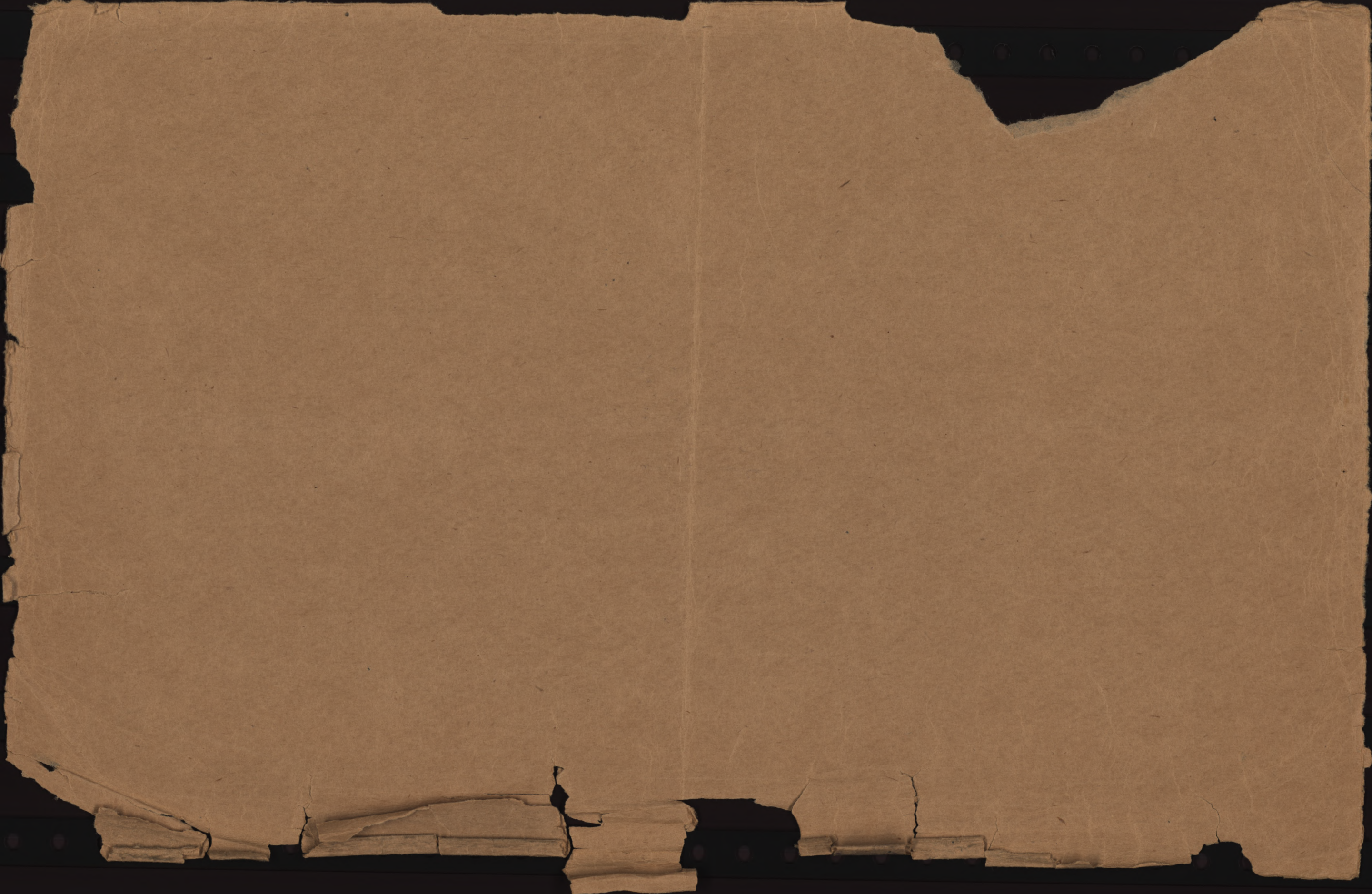
H

Box

480 X 05 (6375)

*62 — 22
22 — 22
10 — 22*

*Mrs. Smith
18. 5. 51*



619
SIN/NAS

MORISON
Surname/Nom

Charles Keith
Given names/Prénoms

OPEN
A.T.I.A.

**CANADIAN FORCES
FORCES CANADIENNES**

**PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL**

"CONTENTS CONFIDENTIAL" *Pop 6375*
"CONTENU CONFIDENTIEL"

**COMPONENT
ÉLÉMENT** CEF



6375

NAME Morrison Charles K. "M.M." 714
RANK & No. 3rd sec. P.O.# 31227/1913-3-19
CORPS Divisional Ammunition Column
ENLISTMENT, PLACE Montreal DATE March 27th 1913
FORMER CORPS Nil
COUNTRY OF BIRTH Canada. Ormstown P.Q.
NEXT OF KIN Morrison D. W. (Father)
ADDRESS OF NEXT OF KIN Beauharnois P.Q. Canada.
DISCHARGE, PLACE S.O.S. Div 29/5/19 Clemat DATE D.O. 169 of 18/6/19 #452

0/5. 16-5-15 $\frac{83}{13}$

336
Q1-6. 27-5-19 $\frac{336}{34}$ epl.

REMARKS:



~~Inv~~

Number, 619

Rank, Cpl

B

Surname, MORISON

Christian Name, Charles Keith

T

Unit, C.F.A. Theatre of War, France

Date of Service, 16.9.15

Remarks, 1

Latest Address, Beauharnois
P.O.

Roll No. B

Page 2596
28.8.72

G. 26260 Sept 9 1821

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

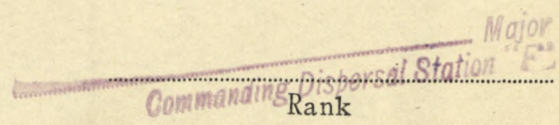
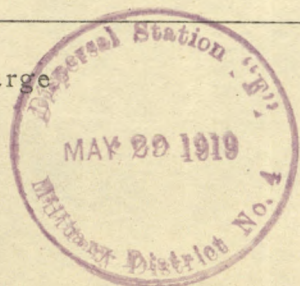
War Service Badge
Class "A" No.

THIS IS TO CERTIFY that No. 619 (Rank) Corporal
Name (in full) Charles Keith Morrison enlisted in
the 2nd C.D.A.C.
CANADIAN EXPEDITIONARY FORCE at Montreal on the 27th
day of March 19 15
HE served in 2nd C.D.A.C. France.
Demobilization.
and is now discharged from the service by reason of Medical Unfitness.



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

Age <u>28</u>	Marks or Scars.....
Height <u>6 ft 2 1/2 ins</u>	<u>Two small scars across L arm</u>
Complexion <u>Fair</u>	<u>One small scar across L hand</u>
Eyes <u>Blue</u>
Hair <u>Fair</u>
<u>C.K. Morrison</u> Signature of Soldier.	<u>L. Gaudreau</u> Issuing Officer.
Date of Discharge <u>May 29 1919</u>	<u>Major</u> <u>Commanding Dispersal Station "E"</u> Rank
	Date <u>May 29</u> 19 <u>19</u>



N.B.- AS NO DUPLICATE OF THIS CERTIFICATE WILL BE ISSUED, ANY PERSON FINDING SAME IS REQUESTED TO FORWARD IT IN AN UNSTAMPED ENVELOPE TO THE SECRETARY, MILITIA COUNCIL OTTAWA, CANADA.
M.F.B. 39A.

London

Charles D. ...

1874

London

1874

London

1874



London

1874

London

1874

London

1874



DIVISION OF VITAL STATISTICS
Ministry of Health
Victoria, British Columbia, Canada



REGISTRATION No. 77-09-006874

Certificate of Death

This is to certify that the following is an extract from the registration on file in the Division of Vital Statistics,
Parliament Buildings, Victoria, British Columbia, concerning the death of

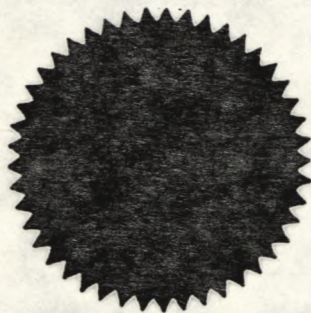
CHARLES KEITH MORISON

Date of death April 25, 1977 Age last birthday 86 years Sex Male

Place of death Victoria, B.C. Birthplace Ormstown, Quebec

Residence 2220 Windsor Road, Victoria, B.C.

Marginal notations:



Given under my hand at Victoria, British Columbia,
this 2nd day of May, 19 85

W.D. Burrows

Director of Vital Statistics.

THE STATE OF NEW YORK
IN SENATE
January 10, 1900.

REPORT
OF THE
COMMISSIONERS OF THE LAND OFFICE
IN RESPONSE TO A RESOLUTION PASSED BY THE SENATE
MAY 10, 1899.

ALBANY:
J. B. LIPPINCOTT & COMPANY, PRINTERS,
1899.

THE STATE OF NEW YORK
COMMISSIONERS OF THE LAND OFFICE



Rank *Enr.* Name **MORISON Charles K.**

Reg'l No. **619**

Unit **No. 4 Sec. Divl. Amn. Col.** If in perm. Corps, What Unit?

Married or Single **Single**

Place and Date of Enlistment **Montreal, 27 March 1915**

Place of Birth **Canada**

Name and Address, Next-of-Kin **D.W. Morrison**

Beauharnois
P.Q.

Relationship **Father**

Assigned Pay Monthly \$

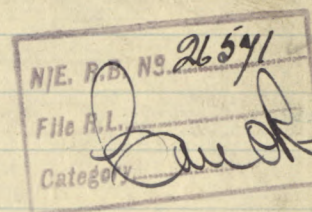
Payable to

Relationship

Separation Allowance \$

Payable to

Relationship



Discharge, Date and Place

Reason

Character

Report

A.F.B. 103 CHECKED (N.R.)
REMARKS *sw*
Taken from Official Documents
4 - JAN. 1917

Date

From whom received

Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.

Place

Date

		Embarked S.S. Corinthian handed.	Canada	18/5/15	
5th 12-9-15	Adj. Hqrs. 2nd S.A.C.	Taken on Strength No 3 Section from No 4 Section disbanded	Ottawa	1-9-15	Part II O 45.
17 SEP 1915	OC Transp.	Embarked for France.	Southampton	16 SEP 1915	
29-1-16	A.S. Base OC 2nd S.A.C.	Attached to 4th Bde C78 for duty, discipline & Rations	In Field	19-1-16	Part II O 5.
7-2-16	-	Transf to 4th Bde C78.	"	19-1-16	" " " 7
-	OC 4th Bde	Taken on St of Bde on transfer from 2nd S.A.C.	"	20-1-16	" " " 7
31-5-16	"	S.O.S. of unit reporting to 2nd S.A.C.	"	21-5-16	" " " 22.
-	2nd S.A.C.	T.O.S. posted from 4th Bde	"	22-5-16	" " " 22.
5-2-17.	do.	App'd A/Bdr.	"	14-1-17	" " " 24.

619. Morison C.K.

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				
14-2-17.	2 nd D.A.C.	Att'd to Ammunition Dumps	Field.	26-1-17. 26-12-16.	Pt II @ 50. & Pt II @ 39.
24-9-17	"	Ceases attach Ammunition Dumps	"	4-7-17	Pt II @ 174
26-11-17	do	rejoined Column. Promoted Bombardier	do	1-11-17	Pt II @ 203
6-9-18	---	apptd. of Lt pl with pay	Rdr	5-8-18	--- 51
20-5-18	"	Confirmed in rank of cpl.	apptd	14-2-18	-- 70
10-2-19	"	(M. M.) In Confess' ment. await'g trial found & convicted by F.C.M. of N.O.A.S. disobeying a lawful Com'nd. given by his Super' wr Off'ces. Found Guilty & sent to be reduced to the rank of Lt. O. C. sent A.F.B. 2069 of 21-1-19.	apptd.	14-1-19	- 15.
16-4-19	"	Proc. to Eng.	Ynr	16-4-19	- 43
23-4	H. King ccc	205 pending ret to Canada	"	Witley 16-4	- 31
28-5-19	do.	205. to Canada	"	do 19-5-19	- 48
		To Canada	58-F-28	19-5-19	
19-6-19	2 D.A.C.	Awarded Military Medal	auth London Gazette	31227 of 13-3-19.	



Certified Correct
R.L. 2-14-91
R2 S. 1217.K.T. 102-967
Casualty Form—Active Service. (Sect 3)

Regimental No. 619 Rank Quartermaster Name Marison Charles K.
 Enlisted (a) 27-3-15 Terms of Service (a) Duration of War Service reckons from (a) 27/3/15
 Date of promotion to } Date of appointment } Numerical position on }
 present rank } to lance rank } roll of N.C.Os. }
 Extended _____ Re-engaged _____ Qualification (b) Badge

W.S.B.
Class A War Service Badge
Class "A" No.

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				
			Arrived in France 16-9-15		
21-1-16	O.C. Unit	Attached to 4th Can. Arty. Bde.	Field	19-1-16	B.213
27-1-16	D.A.A.G.	Transferred to 4th Can. Arty. Bde.	Field	19-1-16	K.G.2209
20-5-16.	CRA. 2nd C. D. A.	Struck off strength HMMA re-organization of establishment, and posted to 2nd D.A.C.	Field.	21-5-16.	S/C. 1/66. GHQ. OB. 818. Pt, II O. No, 22 d/31-5-16.
20/5/16	G.R.A.	Taken on strength of 2nd D.A.C.	FIELD	22/5/16	P.II.O. 22 D/31/5/16
29-12-16.	O.C. Unit.	Granted Leave of absence	23/12/16 to	3-1-17.	P213. P-II O. No. 5. 8-1-17.
5-1-17.	"	Returned from leave	Field.	2-1-17.	" " " 7. 13-1-17.
19-1-17.	"	appointed a/Bdr vice a/Bdr Cardwell promoted.	"	14-1-17.	" " " 24. 5-2-17.
3-2-17.	"	attached amm. dumps	"	26-1-17.	" " " 30. 14-2-17.
15-9-17.	"	Returned to duty.	"	4-9-17.	" " " 174. 24-9-17.

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.]

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
1-9-17.	O.C. Unit.	Granted 10 days leave.	Field.	29-8-17	B213. P. II G. No. 169. of 10-9-17.
15-9-17.	"	Returned from leave	"	9-9-17.	" " " 174 " 24-9-17.
6-10-17.	"	To Gas Course Can Corp.	"	30-9-17	B213
17-10-17.	"	Rejoined from course.	"	6-10-17	"
10-11-17	"	Promoted Comburrier to Complete Establishment.	Field.	1-11-17.	B213. P. II of 203 of 26-11-17
5/1/18	"	In course at Can Cps Art School	"	31-12-17.	B213
23-2-18	22COAC.	Rejoined Unit	Field.	17-2-18	"
23-3-18.	"	Appr. Act/Corporal with pay Milit. 6 pl. Coy. (S. Eng.)	"	5-3-18.	" P. II of 2051. 1918
11-5-18	-	Conf. in Rank of Corp. and effed.	"	5-3-18.	" P. II of 70-20-51
5-10-18	-	Granted 14 days leave	Aberdeen	1-10-18	B213. P. II of 103 of 12-10-18
19-10-18	-	Rejoined unit.	"	16-10-18.	B213
21-1-19	2.6DAB.	In confinement awaiting trial. N.I.L. Tried & convicted by F.C.M., 14-1-19. of "N.O.A.S. - Disturbing a lawful command Given by his superior officer, 13-12-18" Found guilty, & sentenced to be reduced to the ranks. Confined by C.R.A. 2 cl. div. 15-1-19. Remission Nil.	"	"	B2019 P. II of 15



PROCEEDING TO CANADA. MAY 17 1919
 15 APR 1919
 N.R.
 P. II of No. d/...
 Daily...
 1919
 2-19
 41 d 124.

Emb. Camp. Proceeded to England.
 Embark H. T. Cedric.
 Liverpool. 18-2-19

16-2-19
 O.C. Unit. Attd. Corp. v. D. Sully
 1919
 2-19
 41 d 124.

48

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

War Service Badge
Class "A" No.

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

No. 619 Rank Cpl Surname MORISON
(Given name in full)

Charles Keith

Unit or Corps 2nd C.D.A.C. Birthplace Ormskirk, Que. Can.

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

I. GENERAL DESCRIPTION:

Physique Good Weight 175 lbs. Height 6 2 1/2 ft. Colour of Eyes Blue

Nutrition Fair

Pulse 70 Regular

Condition of arteries Soft

Vision Rt. 6/12 Left 6/12

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

Identification marks, scars, or deformities.
(Give cause and date of origin).
Two small race scars L arm.
One small scar across L hand

Opinion as to general health and physical condition Good

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

Nervous System No Genito Urinary System No Cardio-Vascular System No

Special Senses No Integumentary System Yes Respiratory System Yes

Disturbance of Mentality No Muscular System No Digestive System No

Osseous and Joint System No Any other general condition Yes

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

Foll. Tonsillitis 2-4-15
Measles
Chicken Pox
Scarlet fever
Croup. (Diph.)
Pneumonia
} in childhood } Good recovery

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Witley (Overseas)

Date 20-4-18 Signed [Signature] M.O.

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

Signature [Signature]

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

THIS SECTION FOR USE IN CANADA—

Examined at(Canada)

Date Signed M.O.

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

Signature

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

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

[Signature]

[OVER]

ORIGINAL MEDICAL HISTORY SHEET.

Surname Marison Christian Name Charles K

Examined { on 27 day of March 1915
at Montreal

Birthplace { City or Town Armstrong
County Canada

Apparent age 24 years

Trade or occupation Teacher

Height 6 Feet 2 1/2 Inches.

Weight 160 Lbs.

Chest measurement { Minimum 32 inches.
Maximum expansion 5 inches.

Physical development Good

Small-Pox Marks

Vaccination Marks { Arm Right Left
Number 2

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease Mole right side of nose

(b) Slight defects but not sufficient to cause rejection

Approved by W. Ernest Nelson
Rank Capt de M.O.

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

War Service Badge
Class "A" No.

Date	Result	VACCINATIONS,
<u>5/11/15</u>	<u>Good</u>	<u>W. Ernest Nelson</u> M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>4/22/15</u>	<u>Good</u>	<u>W. Ernest Nelson</u> M.O.
<u>5/3/15</u>	<u>Good</u>	<u>W. Ernest Nelson</u> M.O.
		M.O.

Enlisted on 27 day of March 1915 at Montreal

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>#4 Sec. D.A.C.</u> <u>2nd Co. Div. Am. Sol.</u>	<u>518 619</u>		<u>27th Mar 1915</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.

Surname.....
 Christian Name.....
Morison.....
Charles A

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				
Montreal Gen. Hosp.	Apr 2/15	2	4	15	21	4	15	Tonsillitis Ac. Follicular	19	Tonsillitis & Bronchitis acute Average severity No complications Recovery Complete	Le Bourne Lieut AMC Montreal General Hospital.

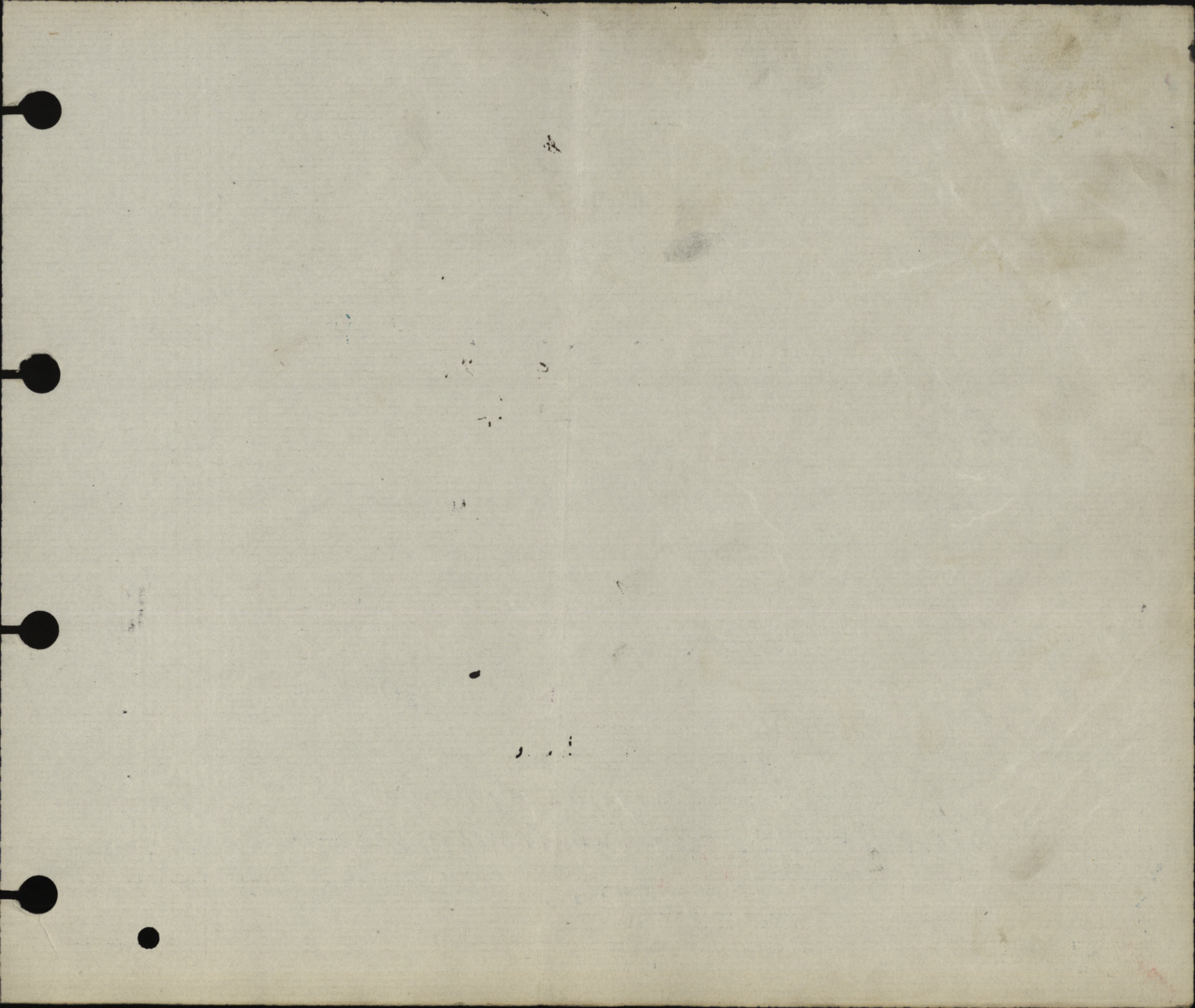
MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

To Whom *D. W. Morison* By Whom Assigned *Morison Chas K.*
 Address *Beauharnois* Regtl. No. *619* ✓
Que. Rank *Emt.*
 Corps *A. H. Sect. Div. Amm. Col.*
 Rate *\$20⁰⁰* MAY 1 1915

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May		<i>0 1137</i>	<i>20 -</i>	
June		<i>Q 2016</i>	<i>20 -</i>	
July		<i>52117</i>	<i>20 -</i>	<i>Per cable col Wad 8-7-15</i>
Aug.				
Sept.		<i>Q 224</i>	<i>40 -</i>	
Oct.		<i>X 1828</i>	<i>20 -</i>	
Nov.		<i>Case 18598</i>	<i>20 -</i>	
Dec.		<i>D 11063</i>	<i>20 -</i>	
Jan.	1916	<i>Q 12175</i>	<i>20 -</i>	
Feb.		<i>S 12458</i>	<i>20 -</i>	
March		<i>W 13079</i>	<i>20 -</i>	





MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 60m.—12-15.
 1772—39—819.

Sheet No. 2. D. W. Morison

Name of Soldier Morison D. K.

Chas
#1 sec Div Am Colm

L. L. Job 89002.—Req. 6213.

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
			220	✓ #2000
April	1916	Q 2177	20	
May		K 4609	20	
June		E 3165	20	
July		S 9886	20	
Aug.		F 11724	20	
Sept.		U 19170	20	
Oct.		U 24469	20	
Nov.		M 29259	20	
Dec.		U 30219	20	
Jan.	1917	S 40201	20	
Feb.		R. 43852	20	
March		K 52189	20	20 les
April		H 3689	20	20 lu
May		Q. 10522	20	20 Bv
June		F 16309	20	CBa
July		Q. 23500	20	B.
Aug.		T 30983	20	
Sept.		T 38464	20	D
Oct.		K 44051	20	
Nov.		A 33397	20	
Dec.		S 60652	20	
Jan.	1918		640	
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.				

Rank *Gr*

Name MORISON Charles K.

Reg'l No. 619

Unit No. 4 Sec. Divl. Amn. Col.

If in perm. Corps,
What Unit?Married or Single *Single*

Place and Date of Enlistment Montreal, 27 March 1915

Place of Birth Canada

Name and Address, Next-of-Kin D.W. Morrison

Beauharnois

Relationship *Father*Assigned Pay Monthly \$ 20⁰⁰

Payable to

next of kin

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason

Character

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						
<i>June 1</i>	<i>June 30</i>	<i>30</i>	<i>1⁰⁰</i>	<i>30</i>	<i>30</i>	<i>10</i>	<i>3</i>		<i>33</i>				<i>20</i>		<i>20</i>	<i>13</i>	
<i>July 1</i>	<i>July 31</i>	<i>31</i>	<i>1⁰⁰</i>	<i>31</i>	<i>31</i>	<i>10</i>	<i>3</i>	<i>13</i>	<i>47</i>			<i>10</i>	<i>20</i>		<i>30</i>	<i>17</i>	
									<i>27</i>	<i>Exchange</i>						<i>17</i>	
<i>1/8/15</i>	<i>31/5/15</i>	<i>31</i>	<i>1⁰⁰</i>	<i>31</i>	<i>31</i>	<i>10</i>	<i>3</i>	<i>10</i>	<i>34</i>			<i>4</i>	<i>87</i>	<i>20</i>	<i>24</i>	<i>87</i>	<i>26</i>
<i>1/9/15</i>	<i>30/9/15</i>	<i>30</i>	<i>1⁰⁰</i>	<i>30</i>	<i>30</i>	<i>10</i>	<i>3</i>	<i>-</i>	<i>33</i>			<i>15</i>	<i>98</i>	<i>20</i>	<i>35</i>	<i>98</i>	<i>23</i>
<i>1/10/15</i>	<i>31/10/15</i>	<i>31</i>	<i>1⁰⁰</i>	<i>31</i>	<i>31</i>	<i>10</i>	<i>3</i>	<i>10</i>	<i>34</i>			<i>5</i>	<i>23</i>	<i>20</i>	<i>25</i>	<i>23</i>	<i>32</i>
<i>1/11/15</i>	<i>30/11/15</i>	<i>30</i>	<i>1⁰⁰</i>	<i>30</i>	<i>30</i>	<i>10</i>	<i>3</i>	<i>-</i>	<i>33</i>			<i>5</i>	<i>28</i>	<i>20</i>	<i>25</i>	<i>28</i>	<i>40</i>
<i>1/12/15</i>	<i>31/12/15</i>	<i>31</i>	<i>1⁰⁰</i>	<i>31</i>	<i>31</i>	<i>10</i>	<i>3</i>	<i>10</i>	<i>34</i>			<i>16</i>	<i>84</i>	<i>20</i>	<i>36</i>	<i>84</i>	<i>37</i>
<i>1/1/16</i>	<i>31/1/16</i>	<i>31</i>	<i>1⁰⁰</i>	<i>31</i>	<i>31</i>	<i>10</i>	<i>3</i>	<i>10</i>	<i>34</i>			<i>2</i>	<i>61</i>	<i>20</i>	<i>22</i>	<i>61</i>	<i>48</i>
<i>Feb.</i>		<i>29</i>		<i>29</i>	<i>29</i>		<i>29</i>		<i>31</i>			<i>7</i>	<i>85</i>	<i>20</i>	<i>29</i>	<i>85</i>	<i>53</i>
<i>Nov.</i>		<i>31</i>		<i>31</i>	<i>31</i>		<i>31</i>		<i>34</i>			<i>5</i>	<i>23</i>		<i>5</i>	<i>23</i>	<i>87</i>
				<i>305</i>			<i>30</i>	<i>50</i>	<i>27</i>	<i>335</i>	<i>77</i>	<i>73</i>	<i>89</i>	<i>180</i>	<i>-</i>	<i>253</i>	<i>89</i>

BALANCE TRANSFERRED TO NEW LEDGER.

ASSIGNED PAY. ENGLAND or CANADA. SEPARATION ALLOWANCE. ENGLAND or CANADA.

EFFECTIVE DATE:-- AMOUNT:-- 20⁰⁰

EFFECTIVE DATE:-- AMOUNT:--

NAME:-- MORISON Charles K.

NUMBER:-- 619

PARTICULARS OF RANK OR APPOINTMENT

NAME, ADDRESS, RELATIONSHIP & AUTHORITY

Mr. D. W. Morrison
Beauharnois
(Father) P. Q. Canada

Stopped 1/5/19

WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
DO 203 26-11-17	1-11-17	Pompt.
DO 51. 6/4/18.	5-3-18.	A/Cpl with Pay.
DO 700 20/5/18	5-3-18	Confirmed in Rank of Cpl.
15 10/2/19. 2000	14-1-19	Trn. by FGCM.
41 12-4-19 2500	16-2-19	Trn. Cpl.

UNIT AND TRANSFERS

ORIGINAL UNIT:-- 2nd Dal

DATE ACCOUNT FIRST OPENED:--

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
5/4/19	63	Field Ins 20	2 72			Legate crbla	56 27
21/4/19	1537	Hecc £10	10 67			2 P.C. crbla	3 87
			52 40				52 40

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBSCE ALL'CE
	1 10	10		
	1 10	10		

PARTICULARS OF RENDERING NON-EFFECTIVE:-- Disch. Canada 30/4/19 Auth. NR. 7545 Bichott to Bichott 25/4/19 M.D.4

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
31-3-18	Bal In d.								36 35		
April	Cpl's Pay	36		Can Ass Pay.				20			
	Cpl's Pay from 2/3/18 to 31/3/18 inclusive	1 35		2 Dal 25 5/18	4 46						
				2 Dal 69 2/18	5 35				43 89		
		37 35			9 81			20			
May	Cpl Pay.	37 20		Can A Pay.				20			
				2 Dal 114 3/5/18	8 92						
				2 Dal 178 18/5/18	5 35				46 82		
		37 20			14 27			20	5 30		
June	Cpl Pay.	36		Can A Pay.				20			
				2 Dal 220 2/6/18	5 35						
				2 Dal 283 17/6/18	5 35				52 12		
		36			10 70			20			
July	Cpl Pay.	37 20		Can A Pay.				20			
				2 Dal 495 7/7/18	5 35						
				-- 588 27/7/18	5 35				58 62		
				-- 616 20/7/18	5 35				53 27		
		37 20			16 05			20			
Aug	C.P.	37 20		Can A Pay.				20			
				2 Dal 649 24/8	3 57				70 47		
		37 20			3 57			20	66 90		
Sept	C.P.	36		Can A Pay.				20			
				2 Dal 680 3/9	7 14				82 90		
				✓ 779 26/9	5 35				75 76		
				✓ 756 25/9	3 57						
				✓ 859 28/9	58 40						
		36			74 46			20			

844 Request
FWD

NUMBER 619 RANK CPL. NAME MORISON - C. K.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Oct	Sub								844		
	C.P.	3720		AT				20	2564		
				872 16/10 2BAC	373				2191		
		3720			373			20			
Nov		36-		AT				20			
				958 7/11	373						
				1087 19/11	560						
				1215 26/11	1493						
Dec		3720		AT				20			
Jan		3720						20	4805		
		11040			2826			60			
				1771 25/1	377						
				Over-C 14/15/11/11 as CPL 18 days @ 10¢		180					
				1832 7/2	373						
Feb		7080		AT				40			
				1897 21/2	373						
				1992 5/3	365						
				2017 14/3	1825						
				2079 21/3	365				4027		
		7080			3678	180		40			
April	Bay.	36-		CAP				20	5627		
				AK 1537 22/11 11/11 11/11	4867						
				63 6/4 2BAC	365						
				4632 7/5 ccc end	973						
				7954 15/5 11/11 11/11 end	973				1551		
		3600			7178			20			

SOS to Canada 19/5/19 S.L. 58 2 BAC. in D4.

C. G. 19.
D. A. F.

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

Service Badge
Class "A" No.

300500




1. No. 619.

2. Rank. Corporal

3. Name. MORISON Charles Keith.

4. Unit. 2nd C.D.A.C.

5. Date of Discharge 29-5-19 Place Montreal P.Q.

6. Reason for Discharge.....
Demobilization. 

7. Authority. R.O. 1420 DD#4 D.O.Pt.II-169.

8. Proposed Residence after Discharge.....
Beaucharnois. P.Q.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W. B 39 Montreal

MAY 29 1919

C. K. Morison


Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place.....
Montreal

Date.....
MAY 29 1919

Signature.....
L. Gauvreau 
(O. C. Discharging Unit.)

19
2/0
F

SHORT FORM
PROCEEDINGS ON DISCHARGE
(Demobilization)

1. No.	2. Rank	3. Name	4. Title	5. Date of Discharge	6. Reason for Discharge
		MORISON	2nd Lt. U.S.A.		
<p>7. Authority</p> <p>8. Proposed Residence after Discharge</p>					
<p>9. CERTIFICATE TO BE SIGNED BY SOLDIER</p> <p>I hereby acknowledge that at the undersigned place and date I received my discharge Certificate</p> <p>M. E. W. [Signature]</p> <p>Signature of Soldier</p>					
<p>10. CONFIRMATION</p> <p>The discharge of the above named man is hereby confirmed.</p> <p>[Signature]</p> <p>Date</p> <p>Place</p> <p>[Signature]</p> <p>(O. C. Discharge Unit)</p>					



[Faint signature]

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Trigraphs	Medical Form W. 23
or Testimonials of Honor	Medical Form W. 122
Field Conduct Sheet	Medical Form W. 273 or A.F.B. 122
Casualty Form	Medical Form W. 24 or A.F.B. 108
Last Pay Certificate	Medical Form W. 44
Certificates that missing documents are undelivered	
Medical History Sheet	Medical Form B. 212 or A.F.B. 178
Proceedings of Medical Board	A.F.B. 221, A.F.B. 179 or A.F.B. 45
Dental History Sheet	Medical Form B. 442
Medical Report	M. M. W. 123 or D. M. S. 124
Regimental Conduct Sheet	Medical Form B. 212
Company Conduct Sheet	Medical Form B. 222a

1. Attestation Paper, Trigraphs
 2. Medical Form W. 23
 3. Medical Form W. 122
 4. Medical Form W. 273 or A.F.B. 122
 5. Medical Form W. 24 or A.F.B. 108
 6. Medical Form W. 44
 7. Medical Form B. 212 or A.F.B. 178
 8. A.F.B. 221, A.F.B. 179 or A.F.B. 45
 9. Medical Form B. 442
 10. M. M. W. 123 or D. M. S. 124
 11. Medical Form B. 212
 12. Medical Form B. 222a

Group _____
 Checked by No. _____
 Date _____

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate.....	Militia Form W. 23
or Particulars of Recruit.....	Militia Form W. 133
Field Conduct Sheet.....	Militia Form W. 178 or A.F.B. 122
Casualty Form.....	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate.....	Militia Form W. 44
Certificate that missing documents are unobtainable.....	
Medical History Sheet.....	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board.....	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet.....	Militia Form B. 465
Medical Report.....	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet.....	Militia Form B. 263
Company Conduct Sheet.....	Militia Form B. 263a

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133)
2. Casualty Form (M.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or A.F.B. 179)
5. Dental Certificate (C.A.D.C. 5009).
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings of Discharge (M.F.W. 218a)
8. Discharge Certificate (M.F.W. 39)
(Enclosed in special envelope (2603))
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3)
11. Equipment and Clothing Statement, Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851) *4 Dup*
13. Pay Book (P. 164)
14. War Service Medal (Order No. 2595).
15. Sundry Documents.

Group..... B

Checked by No. King

Date MAY 13 1919

To be used for recruits enlisting direct into the Regular Army only.
Army Form B. 178^A to be used for Special Reserve recruits
and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname MORISON Christian Name Charles. K.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Armstown County Canada

Examined ... { on 27th day of March 1915.
at Montreal.

Declared Age ... 24 years Service Badge days

Trade or Occupation ... Teacher Class "A" No.

Height ... 6 feet, 2½ inches

Weight ... 160 lbs

Chest Measurement { Girth when fully Expanded. 32 37 inches

{ Range of Expansion 37 8 inches

Physical Development ... Good

Vaccination Marks { Arm ... Right Left
Number 2

When Vaccinated ...

Vision ... { R.E.—V=
L.E.—V=

(a) Marks indicating congenital peculiarities or previous disease ... { (a) Mole right side of nose

(b) Slight defects but not sufficient to cause rejection ... { (b)

Approved by (Signature) W. Ernest. Nelson.
(Rank) Capt. A.M.C. Medical Officer.

Enlisted ... { at Montreal.
on 27th day of March 1915.

Joined on Enlistment ...	<u>4 Sec D.A.C.</u> Corps.	Regtl. No.
	<u>2nd Div Ammn Col.</u>	<u>619</u>
Transferred to ...		

Became non-effective by
on _____ day of _____ 1915.

(Signature) _____
(Rank) _____

This Medical History Sheet has been compared with the
Corresponding Attestation Paper, and entries made in red
have been taken from the Attestation Paper.

I certify the foregoing to be a true copy of an original entry in a
Medical History Sheet of this man.
W. Ernest Nelson
for the Officer in Charge of Records
Canadian Contingents.
C.A.M.C.

Table II.—Only for Admissions to Hospital or to the Sick

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks
	Day	Month	Year	Day	Month	Year			
Montreal Gen Hosp	2	4	15	21	4	15	Tonsilitis Follicular	19	To

8

List in the case of Warrant Officers treated in quarters.

facts bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.

Signature of Medical Officer

nsilitis & bronchitis acute

C.R. Bourne. Lt. AMC

severity. No. complications. Recovery complete

CANADIAN ARMY DENTAL CORPS, O.M.F.C. DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

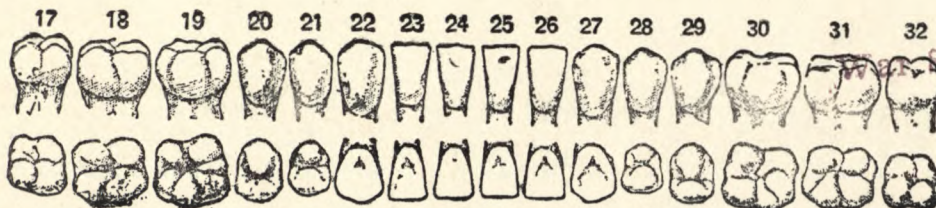
DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block Letters) MORISON, Charles Keith
REGIMENT 2nd C.D.A.C. RANK Cpl. No. 619.
Date of Examination in England APR 2 1919 Date of Examination in France _____

1. This form will be made out for each individual at the time of Demobilization in England or France.

2. Figures as per chart will be used to designate teeth concerned.

3. In reference to Partial Dentures the numbers of teeth thereon will be stated



Service Badge
Class "A" No. _____

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 19.

2. EXTRACTIONS _____

3. CROWNS _____

4. DENTURES

(a) Full Upper

(b) Part Upper

(c) Full Lower

(d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? No.

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)

(a) In Canada

(b) In England

(c) In France Yes

Robertson
A. D. D. S. M. D. No. 4

Signature of Dental Officer

Arthur Hynes

Grant

CANADIAN ARMY DENTAL CORPS OFFICE

RECOMMENDATION FOR PROMOTION

MORRISON, Charles Keith

Sgt. C.D.C. Cpl. 619

1. Name of Candidate
2. Grade
3. Branch
4. Service Number
5. Date of Birth
6. Date of Commission
7. Date of Last Promotion
8. Date of Last Transfer
9. Date of Last Discharge
10. Date of Last Re-Entry

11. Date of Last Appointment
12. Date of Last Discharge
13. Date of Last Re-Entry
14. Date of Last Promotion
15. Date of Last Transfer

(a) For Class
(b) For Grade
(c) For Branch

Signature of Candidate

Date

Signature of Recommending Officer

His Majesty the King has been
graciously pleased to approve
the award of the Military Medal
for bravery in the field to the

~~the~~ undermentioned

Con Army
Postum Order

619 Ppl MORRISON, CK fr 919
2nd Can Div Amm Col Con F.A

Charles Keith

MORRISON

MM

LG#

619.

31227

13 March 1919

Casualty Form—Active Service.

Unit, Regiment or Corps..... 2nd DAC

Regimental No. 619 Rank Cpl Name MORISON, C.K.
C. E. F.

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

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

Extended..... Re-engaged..... Qualification (b).....

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
18-6-19	C/S	TOS DD4 Disp. Sta. "F"	Montreal.	19-5-19	D.O.Pt. 11-169
18-6-19		SOS DD4 Demob.	"	29-5-19	D.O.Pt. 11-169 R.O.1420.
		<i>G.H. Fletcher</i> 2/		Lieutenant, Assistant Adjutant, District Depot No. 4.	
19.6.19	2 nd Divl. Amm. Col.	Awarded M.M. auth L. G. 31227 d/13-3.19			<i>A.O. Hanson</i> <i>For Draft</i>



(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, Shoehing Smith, etc., etc., also special qualifications in technical Corps duties.

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

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				

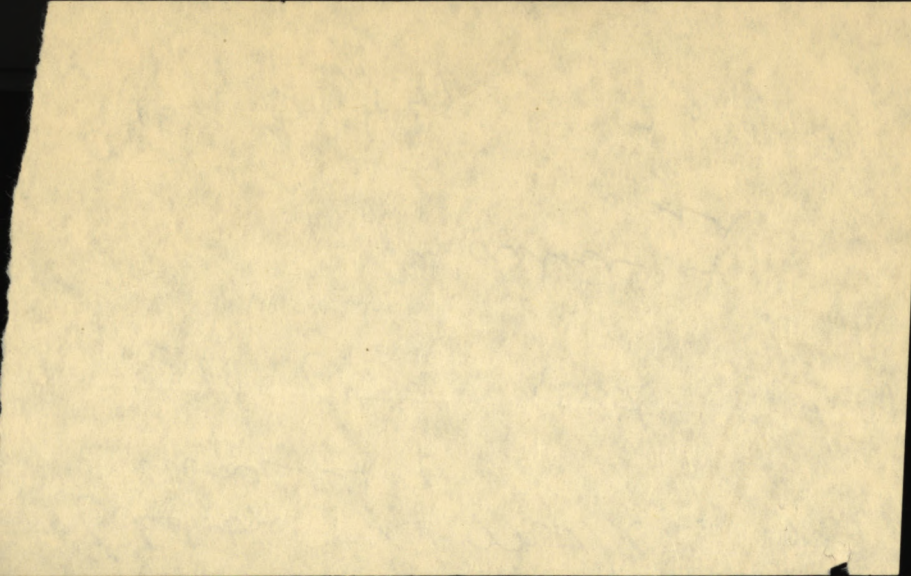
Citation for Millon's Medal
awarded to

619 Charles Keeth MORISON

No detail on
card

996-3842

231917



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

M

19428

May 1-15

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

20.			
-----	--	--	--

924709

PARTICULARS OF SEPARATION ALLOWANCE

No. 619
 Rank Genl. Promoted Reverted Discharge
 Soldier's Name Charles H. Morrison
 Battalion No. 4 Sect. Div. Amm. Col.
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name W. W. Morrison
 Address Beauharnois Ave.
 Change of Address
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917					
Dec 31			640	640	
Jan 18	J 67600		20	20	✓
Feb	7 73645		20	20	✓
	H 73444		20	20	✓
Mch	Z 90214		20	20	✓
Apr	N 9858		20	20	✓
May	R 17065		20	20	✓
June	N 21323		20	20	✓
July	H 30733		20	20	✓
Aug	P 40061		20	20	✓
sep	U 42312		20	20	✓
Oct.	H 53558		20	20	✓
Nov.	Z 56759		20	20	✓
Dec.	X 67241		20	20	✓
1919					
Jan.	Z 72121		20	20	✓
Feb	W 76454		20	20	✓
Mch	M 85728		20	20	✓
Apr	P 3432		20	20	✓
May	G 7986		20	20	✓
			<u>980</u>	<u>980</u>	

File 013132-C-21

73444 to be returned
 m^d 30/3/18
 H 73444 returned 12/3/18 and cancelled. Greene 17/3/18

Des. L.P. 108056 4-6-19.

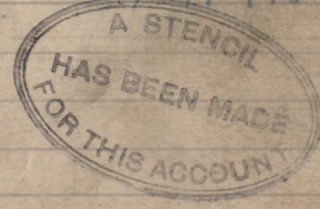
A/c Closed 31-5-19

Ret'd per. Cedric

Date 27/5/19 M.F.W. 187 4/6/19

Use 27/5/19

* ordered change metry 4/3/18



MD # 4

M. F. W. 128
 400M-6-17-177-38-1141
 L. L. 22520-M. & D. 7583.

