

00549

ATTESTATION PAPER.

No. ORIGINAL Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION. 439712

(ANSWERS).

1. What is your name? Hamlet, William  
2. In what Town, Township or Parish, and in what Country were you born? Port Clarence, Middlesboro, Durham Co England  
3. What is the name of your next-of-kin? Mrs A. Metcalf (Sister)  
4. What is the address of your next-of-kin? 1219 Walton St, Markham, Ont.  
5. What is the date of your birth? Aug 2, 1886  
6. What is your Trade or Calling? Clerk  
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? Yes 2 yrs St John's Ambulance Assn  
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  
- W Hamlet (Signature of Man)  
J A White (Signature of Witness)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Wm Hamlet, 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.  
W Hamlet (Signature of Recruit)  
Date: Sept 7 1915 J A White (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Wm Hamlet, do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.  
W Hamlet (Signature of Recruit)  
Date: Sept 7 1915 J A White (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 Port Arthur this 7 day of Sept 1915  
A. W. Hay (Signature of Justice)  
I certify that the above is a true copy of the Attestation of the above-named Recruit.  
A. W. Hay (Approving Officer)


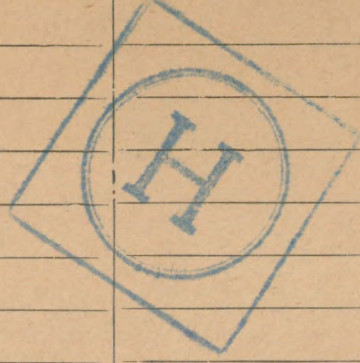
M. F. W. 23.  
200 M.-5-15.  
H. Q. 1772-89-841.



# REGIMENTAL DOCUMENTS

2.4  
5-6-19

NAME Hamlet, Wm. 1 Sgt REGT. NO. 439712 UNIT 52<sup>nd</sup> Bu H. Q. FILE NO. \_\_\_\_\_

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133, or 51)		<i>R3106</i>			DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
TRAINING HISTORY SHEET (M.F.W. 113)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)	<i>25</i>				Category
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)				<i>C5216</i>	<i>Demob.</i>
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)					DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
<i>2 Misc</i>					
<i>1 C.A.D.C. 509a</i>					
<i>2 C.D. 3</i>					
<i>1 R 122</i>					
<i>1 Pay</i>					
<i>1 H 7a</i>					



CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... William Hamlet
  2. In what Town, Township or Parish, and in what Country were you born?..... Post Clarence, Madbury, Durham Co. England
  3. What is the name of your next-of-kin?..... Mrs. Chas. Metcalfe
  4. What is the address of your next-of-kin?..... Wash St. St. William
  5. What is the date of your birth?..... Aug 2nd '1886.
  6. What is your Trade or Calling?..... Clerk
  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?.. yes. St. John Ambulance Corps.  
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
- William Hamlet (Signature of Man).  
J. A. Silver (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, William Hamlet, 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 Sept 7 1914 William Hamlet (Signature of Recruit)  
J. A. Silver (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, William Hamlet, 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 Sept 7th 1914 William Hamlet (Signature of Recruit)  
J. A. Silver (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 St. William this 7th day of Sept 1914

J. A. Silver (Signature of Justice)

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

A. W. Kay (Approving Officer)



• Description of Wm Hamlet on Enlistment.

Apparent Age 29 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 ..... 5 ft. 5 ins.

Chest measurement { Girth when fully expanded ..... 35 ins.  
Range of expansion ..... 2 ins.

Complexion ..... Fair

Eyes ..... Blue

Hair ..... Black turning greyish

Religious denominations. { Church of England .....  
Presbyterian .....  
Wesleyan ..... X  
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-Seas Expeditionary Force.

Date ..... Sept 7 1915

Place ..... P.O. Arthur

G. W. Brown  
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.


Wm Hamlet ..... 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.

A. W. Hay ..... (Signature of Officer)

Date ..... Sept 7 1915



DEPARTMENT OF VETERANS AFFAIRS

To  Copy for H.O. file.

Attention of

NAME HAMLET William.

SERVICE 439712  
NUMBER W.W. 1

C.P.C. No. 234314  
W.V.A. No.

NAVY  
ARMY X  
R.C.A.F.

OTTAWA 4, ONTARIO.  
OCT 12 1965  
Date.....

The DEPARTMENT has received information from

P.M.E., P.O. BOX 216, WINNIPEG 1, MANITOBA, SEPTEMBER 30, 1965.

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death.....SEPTEMBER 28, 1965.....  
Cause of Death.....  
Place of Death...NOT STATED.....

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

Copies to: W.S.R.  
V. I.  
~~RAV~~  
~~BOX~~  
H.O.

} Destroy form if advice of death already received.

*E.C. Richards*  
for  
Chief, Central Registry



## Casualty Form—Active Service.

00549

CERTIFIED CORRECT.  
Canadian Record Office,  
Westminster Palace,  
Millbank, S.W.

Regiment or Corps 2<sup>nd</sup> Canadian Pioneer Bn  
 Regimental No. 439712 Rank Cpl Name Hamlet W  
 Enlisted (a) 7/9/15 Terms of Service (a) \_\_\_\_\_ Service reckons from (a) 7/9/15  
 Date of promotion } Date of appointment } Numerical position on }  
 to present rank } to lance rank } roll of N.C.Os. }  
 Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) \_\_\_\_\_

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
4.3.16.	OC 2 <sup>nd</sup> Pn Bn.	LANDED IN FRANCE.			17/1 Pnr/21/497/44/K1.
29.4.16.	DMS.	HAVRE 8-3-16 Appointed Cpl from Promoted Cpl. Auth:- CO/102/703 d/29 4/16.	Field	4.3.16.	Pt II No 27 d/7 7/16.
		Trans. to CAMC in England.		23 4/16.	17/1 Pnr/21/d/14 5/16. (Pt II Ord No 21 d/21 5/16.
8.3.16.	AAG.	Taken on strength of CAMC General on arrival in France as Water Detach att 2 <sup>nd</sup> Pnr Bn.	Field	27.1.16	Pt II Ord No 26 (52 <sup>nd</sup> Bn) d/27 1/16.
17.6.16.	do	Reg No changed to 439712. Auth:- Ady Can Sec 3 <sup>rd</sup> Ech. 3 <sup>rd</sup> Ech File 171/PNR/2/1	Field	8.3.16.	Pt II Ord No 21 d/21 5/16.
22.12.16.	2 Pnr Bn.	Granted 10 days leave	"	17.6.16.	Pt II Ord No 25 d/21 6/16
5.1.17	"	Rejoined from leave	"	18.12.16	B213 Pt II Ord 56 d/31 12/16
29.12.17	"	Granted 14 days leave	"	31.12.16	B213.
12.1.18	"	Rejoined from leave	"	24.12.17	B213 Pt II 2 d/7 1/18
	a.a.g.	Cease to be att'd as in W.E. to 2 <sup>nd</sup> Pn Bn and att'd as in W.E. to 5 <sup>th</sup> Pn Bn.	"	8.1.18	B213
				3.6.18	Pt II 41 d/14 7/18
				4.6.18	

(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				
8.11.18.	Depms.	To be Sergeant with effect CO/145/141 of 8"/18.		4.6.18	Pt II 73/1918.
14.2.19	S. B. B. B.	3 days leave	Brussels	10.2.19	B213 P36-7/1919.
"	"	7 days leave	Field	13.2.19	
Emb. Camp.		Proceeded to England.	13 AVR 1919		N R Pl. 2 O No d/ ....
		<p>It was clear that the Canadian Section, G. H. Q. 3rd Division, B. E. F.</p> <p><b>S.O.S. ON PROCEEDING TO CANADA</b> PART II. "H" WING, C.C.O. 11/5/19</p> <p><i>Ramsay</i> Captain &amp; Adjutant, 5th. Battalion Canadian Engineers.</p> <p>MAY 10 1919 O. S. T. O. S. No. 2 DISTRICT DEPOT, TORONTO 1919 PART II D. O. 146</p> <p>MAY 19 1919 S. O. S. (DISCHARGED FROM H. M. S.) No. 2 DIS. DEPOT, PART II D. O. 146</p> <p><i>W. C. Roberts</i></p> <p>For O. C. No. 2 District Depot.</p>			



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

M. F. W. 54. (A. F. B. 103:

500M.—9-16

H. Q. 1772-39-920.

00549

# Casualty Form—Active Service.

Unit, Regiment or Corps 2nd Can. Prov. Bn.

Regimental No. 439712 Rank Cpl. Name Hamlet W.  
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				
9-8-19	Law. G.	En.- awarded. Croix-de Guerre			AO 1 Lt. 31393 d-7-6-19 for S of B

(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







Rank Pte. Name HAMLET, William

Reg'l No. 439712

Unit 52nd Bn. If in perm. Corps, }  
What Unit?

Married or Single Single

Place and Date of Enlistment Pt. Arthur, Sept. 7th 1915.

Place of Birth Port Clarence,  
Middleboro, Durham Co. Eng.

Name and Address, Next-of-Kin Mrs. C. Metcalfe

~~807, Dorset St. Port Arthur, Ont. Canada.~~

1819, Walsh St. Port William, Ont. Canada. Relationship Sister

MRS. C. METCALFE 133. PETER ST. PORT ARTHUR. ONT. CANADA.

Assigned Pay Monthly \$ RL29P423-12-18 Payable to

Separation Allowance \$

Payable to

Relationship

N/E. R.B. No 9377

File R.L.

Relationship

Category

ORGAN

Discharge, Date and Place

Reason

Character

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		3 DEC 1915	
27-1-16	52nd Bn	Taken on strength of Q.D.M.S. Sub	Witley	27-1-16	Pt. II Or. no. 26. 27-1-16.
11-2-16	Q.D.M.S. Sub	Transferred from 25-1-16.	Bramshott	25-1-16	Pt. II Or. no 8. Q.D.M.S. Sub. 11-2-16.
6-3-16	do	Struck off strength, having proceeded to 2nd Pioneer Battalion as Water Detail	do	4-3-16	" " 29 (B20873/16)
6/3/16	2nd Bn	J.O.V.	Angley Down	4/3/16	" " 58
		Embarked for France		9 - MAR 1916	
21-5-16	C.A.M.C. Gd	Taken on strength of C.A.M.C. Gd on arrival in France, attached to 2nd Pioneer Bty as Water Detail	In the field	21-5-16	Pt. II Or. no # 21.
21-5-16	C.A.M.C. Gd	Promoted Corporal	"	23-4-16	Pt. II Or. # 21.
7-7-16	"	Appld. A/ corporal	"	4-3-16	" " " 27



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				
		Ceases att'd 2nd C		3-6-18	
14-7-18	Came Gen	Pioneer Bn + att'd 5th Bn C.E.	Cpl Field	4-6-18	Pt II 41
18-11-18	Gen.	<u>Promoted Sgt</u>	Cpl Field	4-6-18	Pt II 73.
		<i>Croix de Guerre Avec Etoile en Bronze.</i>			
22-4-19.	H <sup>Wing</sup> bbb.	TOS. pending return to Canada	Sgt Willey	13-4-19	cc Dubas 237.9 - - 30 00172
		<i>64-I-160 date of sail 10-5-19.</i>			
14-5-19	H <sup>Wing</sup> bbb	TOS to Canada	Sgt Willey	10-5-19	- 43.
23-6-19	Came Gen	Pro. to Eng. Posted to Camc. C.C.	Sgt. La Haave	13-4-19	- 40
17-7-19	came ccc	TOS. From Camc Gen	Sgt Willey	13-4-19	- 167
9-8-19	b. Am. Gen.	awarded Croix-de-Guerre.			doi h. g. 31393 d 7-6-19.



## CANADIAN EXPEDITIONARY FORCE

## DISCHARGE CERTIFICATE

War Service Badge  
Class "A" No.THIS IS TO CERTIFY that No. 439712 (Rank) Sergt.Name (in full) William Hamlet. G. de G. enlisted in  
the 57th Can. Inf. Batten.CANADIAN EXPEDITIONARY FORCE at Fort William on the 7th  
day of September 19 15HE served in C.A.M.C., 5th Batten. Can. Engrs.Demobilization. France.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 32.Height 5 ft. 5 ins.Complexion Blue HairEyes Black. BlueHair Black.

Marks or Scars

Vaccination marks left  
arm.awarded c. deg. - Jan 15. 19auth. WRO. 4375 2/15-1-19.W Hamlet  
Signature of Soldier.Robinson  
Issuing Officer.

Date of Discharge

No. 2 DISTRICT DEPOT

MAY 19 1919

TORONTO

For  
S.O. No. 2 District Depot.

Rank

Date MAY 19 1919 19N.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.



War Service Badge  
Class "A" No. 198853

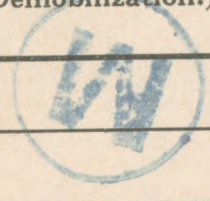
SHORT FORM.

Occupational Group No. 3.

PROCEEDINGS ON DISCHARGE.

D.A.I

(Demobilization.)



1. No. 439712

2 Rank. Sergt.

3. Name. William Hamlet.

4. Unit. 5th Battr. Can. Engrs.

5 Date of Discharge

MAY 19 1919

Place

TORONTO, ONT.

6 Reason for Discharge

Demobilization.

7. Authority.

No. 2, D.D., Part II, D.O. No. 14112

8. Proposed Residence after Discharge

133 Peter St.,

Port Arthur, Ont.

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.?

W Hamlet

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

No. 2 DISTRICT DEPOT

Date

MAY 19 1919

TORONTO

For

Signature

O.C. No. 2 District Depot

(O. C. Discharging Unit.)

Sta  
3-9-407

60



# 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 (A.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 M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122.)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)  
(Enclosed in special envelope (260M) ).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 8).
11. Equipment and Clothing } Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851). *Sup*
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group.....  
 Checked by No. ....  
 Date. *17* MAY 1919



00549

This is to certify that this is the only available M.H.S.

for.....*439712 Sgt. Hamlet. W. 5<sup>th</sup> Battr. C.E.*.....

*Original Unit - 52<sup>nd</sup> Battr.*.....



.....*Lieut. Alex*.....  
O. No Area Record Clearing House,  
WITLEY,



# MEDICAL HISTORY SHEET. 439712

Surname Hamlet Christian Name W

Examined { on 7 day of Sept 1915  
at Port Arthur

Birthplace { City or Town Durham  
County Eng.

Apparent age 29

Trade or occupation 1 Clerk

Height 5 Feet 5 Inches.

Weight 135 Lbs.

Chest measurement { Minimum 33 inches.  
Maximum expansion 35 inches.

Physical development Good

Small-Pox Marks

Vaccination Marks { Arm Right Left  
Number 4

When Vaccinated last 1915

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Approved by

W. H. Lullough  
Rank Capt A.M.C. M.O.

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.
1915	good	<u>W. H. Lullough</u> M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
Feb 1918	good	<u>W. H. Lullough</u> M.O.
1/10	is	" M.O.
1/12	"	" M.O.
1/22	"	" M.O.
1/20	"	" M.O.

Enlisted on 7 day of Sept 1915 at Port Arthur

	CORPS.	REG'T NUMBER.	RANKS.	DATE.
Joined on enlistment	<u>52<sup>nd</sup> OB.</u>	<u>439712</u>		<u>7 Sept 15</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...

[illegible]



War Service Badge  
CANADIAN ARMY DENTAL CORPS. O.M.F.C. "No. ....

# DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) HAMLET, William  
REGIMENT 5th Bn. Pdn/Engs RANK Sgt No. 439712  
Date of Examination in England 16/6/49 Date of Examination in France \_\_\_\_\_

DIRECTIONS TO  
DENTAL OFFICERS

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



## PRESENT DENTAL REQUIREMENTS

1. FILLINGS 16.
2. EXTRACTIONS 20.
3. CROWNS \_\_\_\_\_
4. DENTURES \_\_\_\_\_
  - (a) Full Upper \_\_\_\_\_
  - (b) Part Upper \_\_\_\_\_
  - (c) Full Lower \_\_\_\_\_
  - (d) Part Lower add 20

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

Signature of Dental Officer W. R. Lushford Capt.



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

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. 439712 Rank Sgt Surname HAMLET  
(Given name in full)

Unit or Corps 5th Bn. - Cdn. Engrs. Birthplace William  
Port Clarence/Haverton  
Durham  
England

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

## 1. GENERAL DESCRIPTION :

Physique Good Weight 145 lbs. Height 5 ft. 3 in. Colour of Eyes Blue  
Nutrition Good  
Pulse 72 regular  
Condition of arteries Soft  
Vision Rt. 9/12 Left 9/12  
Hearing (conversational voice) Rt. 20 ft. Left 20 ft.

Identification marks, scars, or deformities.  
(Give cause and date of origin).

3 race marks lt arm

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 no Respiratory System no  
Disturbance of Mentality no Muscular System no Digestive System no  
Osseous and Joint System no Any other general condition no

## 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.

none



EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Wally Camp (Overseas)

Date 17-4-48

Signed A. McNamee Capt 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 W. Hamlet

(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.)

22



Number

439712

Rank

~~pt.~~ Sgt. 10

Surname

HAMLET

Christian Name

William

Units

C.A.M.C.

Theatre of War

France

Date of Service

9-3-16.

Remarks

327 North Howard

Latest Address

207 Gleason St.  
Fort William, Ont.

Roll No.

B. Page 15-123.

200 .-2-21. .



DESP JUL 20 1922  
REGN. NO GA28118



No. 39712  
439712

RANK

Otc.

NAME

Hamlet, W.

T. O. S. 8-9-15 D. O. 142 of

UNIT

52nd Battalion, C. E. F.  
8-9-15.

M. D. 10.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<sup>1915</sup> Sept. 8	<sup>1915</sup> Sept. 30	✓		
Oct.		✓		
Nov.		✓		
Dec.		u.		

UNIT SAILED  
NOV 23 1915



MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

M. F. W. 12.

50m.—6-16.

H. Q. 1772-39-819.

To Whom

Address

Rate

By Whom Assigned

Regtl. No.

Rank

Corps

*Mrs. C. Metcalf*  
*228 Pruden St.*  
*Stout. William*  
*Ont.*

*\$ 100 00*

*Hamlet. W*  
*439712*  
*Cpl*  
*2nd Div*

*Schedule #257. 5-12-16* **PAYMENTS**

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	<i>1914</i>			
Sept.				
Oct.				
Nov.				
Dec.		<i>Q35096</i>	<i>100-</i>	
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				





Rank **Pvt.** Name **HAMLET, William** Reg'l No. **439712**  
 Unit **52nd Bn.** If in perm. Corps, What Unit?  
 Married or Single **Single**  
 Place and Date of Enlistment **Pt. Arthur, Sept. 7th 1915.** Place of Birth **Port Clarence, Middleboro, Durham Co. Eng.**  
 Name and Address, Next-of-Kin **Mrs. C. Metcalfe**  
**1219, Walsh St. Fort William, Ont. Canada.** Relationship **Sister**  
 Assigned Pay Monthly \$ Payable to  
 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						
<b>1915</b>																	
<b>Dec 1</b>	<b>Dec 31</b>	<b>31</b>	<b>100</b>	<b>31 00</b>	<b>31</b>	<b>10</b>	<b>3 10</b>	<b>10 00</b>	<b>44 10</b>	<b>40</b>		<b>17 03</b>					
										<b>87</b>		<b>17 03</b>					
<b>1916</b>																	
<b>Jan 1</b>	<b>Jan 31</b>	<b>31</b>	<b>100</b>	<b>31 00</b>	<b>31</b>	<b>10</b>	<b>3 10</b>		<b>34 10</b>	<b>133</b>		<b>14 60</b>		<b>7 70</b>	<b>22 30</b>	<b>21 84</b>	<b>1026. Transf. LAMA 25/1/16 Rebit 7 days @ 100</b>
									<b>78 20</b>							<b>56 36</b>	<b>21 84</b>



[illegible]



Payable to

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.						
		1915															
52nd Inf.	Dec 1	31	31	1.00	31 00	31	10	310 10 00	44	10	84	14 02			31 06	10 04	10 <sup>00</sup> Br. ft. Canada
	1916																
	Jan 1	31	31	"	31 00	31	"	310	31	10	123	14 60		740	22 30	21 84	Left to P.A.M.B. 23/11/16 D.O. 26. 7 days sick back.
40 S.S.	Jan 25	31	7	"	7 00	7	25	175	8	75					30 59		Taken on strength
B. shot.	Feb 1	29	29	"	29 00	29	"	725	36	25	61	24 37			58 40	8 44	A.D.M.B. S.S. for duty + pay @ corps rate 25/11/16 D.O. 8. 11/2/16
	Mch 1	4	4	"	4 00	4	"	1 00	5	00					13 44		Left to 2nd Bn. 44/11/16 D.O. 29 4/4/16.
					102 00			16 20 10 00	128 20			104 06		740	114 76	Br. Bal. 13 <sup>44</sup> / <sub>xx</sub>	

BALANCE TRANSFERRED TO NEW LEDGER.

"Duplicate" Ledger Sheet made up  
from Pay Lists. No trace of Original  
after transfer to "C.A.M.B." 23/1/16.  
Carried on I.H.A. & S. Pichot Pay Lists  
without Ledger Sheet until 4/3/16 & then  
dropped entirely from Pay Lists.  
Pay from 2/3/16 to 31/12/16 Credited on 2nd  
Pichot Pay Lists for Dec/16.

Yook.



[illegible]



ASSIGNED PAY. <span style="float:right">ENGLAND or CANADA.</span>		SEPARATION ALLOWANCE. <span style="float:right">ENGLAND or CANADA.</span>		NAME:- <b>HAMLET Wm.</b>																																	
EFFECTIVE DATE:- <b>1/4/18. 1/2/19.</b>		EFFECTIVE DATE:-		NUMBER:- <b>439712</b>																																	
AMOUNT:- <b>15<sup>00</sup> 25<sup>00</sup></b>		AMOUNT:-		PARTICULARS OF RANK OR APPOINTMENT																																	
NAME, ADDRESS, RELATIONSHIP & AUTHORITY { 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																																	
<b>Mrs. L. Metcalf (Sister)</b> <b>207 Leese St.</b> <b>Port William Ont Can</b> <b>Mrs. G. Metcalf a2m 4/19.</b> <b>133 Peter St.</b>				<b>B.O. 21 21/5/16. 23/4/16. Capt.</b> <b>35, 31/1/18 5 Bn. 66. 4-6-18. Sgt.</b> <b>73, 1/1/18 60th Bn. 4-6-18. Sgt.</b>																																	
(sister) Port Arthur Ont.				UNIT AND TRANSFERS																																	
<b>stopped 1/5/19</b>				ORIGINAL UNIT:- <b>52nd Bn.</b>																																	
<b>NR. 505 CCC Bshott</b> <b>23/4/19</b> <b>MD 2</b>				DATE ACCOUNT FIRST OPENED:-																																	
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK				AUTHORITY      DATE EFFECTIVE      DATE LEDGER SHEET T'S F D      UNIT TRANSFERRED TO																																	
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>DATE OF PAYMENT</th> <th>NUMBER OF A.R.</th> <th>UNIT PAID BY</th> <th>AMOUNT</th> <th>DATE OF PAYMENT</th> <th>NUMBER OF A.R.</th> <th>UNIT PAID BY</th> <th>AMOUNT</th> </tr> <tr> <td>7-4</td> <td>69</td> <td>FIELD</td> <td>F30 548</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>213</td> <td>1315</td> <td>"</td> <td>F30 548</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>19-4</td> <td>1099</td> <td>CCC</td> <td>L 15/12 7300</td> <td></td> <td></td> <td></td> <td></td> </tr> </table>				DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	7-4	69	FIELD	F30 548					213	1315	"	F30 548					19-4	1099	CCC	L 15/12 7300					DAILY RATES OF PAY AND ALLOWANCES	
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT																														
7-4	69	FIELD	F30 548																																		
213	1315	"	F30 548																																		
19-4	1099	CCC	L 15/12 7300																																		
				<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>AUTHORITY</th> <th>PAY</th> <th>F.A.</th> <th>P.F.A.</th> <th>SUBS'CE ALL'CE</th> </tr> <tr> <td>B.O. 21 21/5/16.</td> <td>1</td> <td>10</td> <td></td> <td></td> </tr> <tr> <td><b>560 11</b></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td><b>476 15</b></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE	B.O. 21 21/5/16.	1	10			<b>560 11</b>					<b>476 15</b>																
AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE																																	
B.O. 21 21/5/16.	1	10																																			
<b>560 11</b>																																					
<b>476 15</b>																																					
PARTICULARS OF RENDERING NON-EFFECTIVE:- <b>Dis to an 30/4/19 NR 7546 Bshott to Bshott MD 2</b>																																					
1918 MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION																										
Mar	Bal forward								39891	438																											
Apr	Coop's pay	36						15																													
				ar 53. 10/4/18. 2 Pns (a)	535																																
				ar 110. 26/4/18. 2 Pns.	535				40921	438																											
May	C.B.	36		C.B.	1070			15																													
		3720		ar 183. 8/5/18 2 Pns	535				42606	438																											
June	C.B.	36		C.B.	535			15																													
		3720		ar 151 2/5 2 pns	535																																
				348 1/6	714				43457																												
JUL 1918	Pay	36			1249			15																													
		3720		37 1/2 5 CE	535			15																													
				90 2/7 5 CE	535				44607																												
		3720			1070			15																													
Aug		3720						15																													
				ar																																	
				180-26 7/8- 5 CE	714																																
Sept	Cpl stay	36		C.B.	714			15	46113																												
				DN. AR 380- 6 CE. 15/8	357																																
				AR. 245- 5 CE. 28/8	357				41499																												



Mrs. G. Mitaly 22m 4/19.  
133 Peter St.

sister) Port Arthur Ont.

~~stopped 1/5/19~~

K7546  
NR. 505 CCC Bshott  
234/19  
MD 2

# UNIT AND TRANSFERS

ORIGINAL UNIT:- 52nd Bn.

DATE ACCOUNT FIRST OPENED:-

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S F'D	UNIT TRANSFERRED TO
			2 Prov Bn.

## EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS

UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
7-4	69	FIELD	F30 548				
213	1315	"	F30 548				
194	1099	CCC	£ 15/10 7300				

## DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
B.O. 21 21/5/16	1 38/10	5/10		
28/5/16	560 11/15			
28/5/16	476 15/15			

PARTICULARS OF RENDERING NON-EFFECTIVE:- Dis to an 30/4/19 NR 7546 Bshott to Bshott MD 2

1918 MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
Mar 21	Bal Forward								39891	1438	
Apr	Coop's pay	36						15			
				AR 53. 10/4/18. 2 Prov Bn (a)	535						
				AR 110. 26/4/18. 2 Prov.	535				40921	438	
May	C.O.	3720		6 AR	1070			15			
				AR 183. 8/5/18 2 Prov	535				42606	438	
June	C.O.	3720			535			15			
		36		CAD				15			
				AR 251 2/5 2 Prov	535						
				348 1/6	714				43457		
JUL 1918	Pay	3720			1749			15			
				37 1/2 5 CE	535			15			
				90 2 1/2 5 CE	535				44607		
		2720			1070			15			
Aug		3720			1070			15			
				AR				15			
				180-26 8/18- 5 CE	714						
Sept	bpls pay	3720			714			15	46113		
		36		b a p				15			
				N.R. AR 380- 6 CE. 13 9/8	357						
				AR. 245- 5 CE. 28 9/8	357				47499		
		36			714			15			
Oct	bpls pay	3720		b. a. p.				15			
				AR 374 5 CE 28 10/18	746				48943		
		3720			746			15	49719		
Nov.	Lat. P.	45		AR 533 25/1/18 5 Bn b.b.	746						
	Duffy cpl. & Lat 4/6/18 - 3/10/18. 150 dup	45		Lat. Mrs Dec				30			
	Lat. P. Dec	4650									
Jan.	" " Jan.	4650		Lat P Jan.				15			
		16300						45			

COMPILED BY  
CHECKED BY  
D. Mitaly  
J. Mitaly



NAME HAMLET Wm

S.D.S. S. List 64. Trans to Can  
Eff. 10<sup>5</sup>/19 h1 D. 2.



		729		19 <sup>th</sup> /11	✓ 11 68		510 58
		855		21/19	✓ 11 32		499 26
Mich	46 50	Cap.				25	520 76
		1099	✓	25 <sup>th</sup> /19	✓ 5 60		515 16
		968		10 <sup>th</sup> /19	✓ 18 66		496 50
		1229		11 <sup>th</sup> /19	✓ 5 48		491 02
	88 50				156 56	50	

ap	45	Cap				25	511 02
Int on Deferred Pay 30/4/19 49 09							
		69	500	7/4	548		560 11
		1315		21/3	548		549 15
	94 09				1096	25	
		1099	Ho. Wing	19 <sup>th</sup> /19	73		476 15

V.D.S. S. List 64 Trans to Can  
 Eff. 10<sup>th</sup>/19 H.D. 2.







Ex. Finance

P. 552  
MARRIED OR SINGLE

PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$

EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS

EFFECTIVE DATE

AUTH

Appointed a/bpe  
Prom. Corporal.

4.3.16

D.O.

a.y.

D.O.

23.4.16

a.21

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED

DATE DISCHARGED

V. OR A.

NAME OF HOSPITAL

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1	2	3	No.	DATE	No.	DATE	No.	DATE
			\$	c.			\$	c.			\$	c.												
				102				16	20					10	128	20	992	12-10						
																	634	22-6						
																	1117	26-11						
																	1068	13-11						
																	531	26-5						
																	404	12-5						
																	902	12-9						
																	957	26-9						
																	787	25-7						
																	801	12-8						
																	857	29-8						
																	576	10-6						
																	735	14-7						
																	429	25-4						
																	282	15-3						
																	1030	30-10						
																	375	10-4						
																	1168	16-12						
																	1175	16-12						
																	1243	28-12						
																	1353	28-1						
																	1340	23-1						
																	1477	21-4	1582	25-3				
																	1479	17-4	1531	15-3				
																	77	21-4						
																	146	21-4						
																	472	4-6						
																	331	20-5						
																	585	23-6						
																	581	13-6						
																	740	10						
																	740	10						



IONS, &c.

EFFECTIVE DATE		AUTHORITY
		D.O. 24
3.16		d. 4. 4. 16.
		D.O. 21
3.14.16		d. 21. 5. 16.

REG'L No. 439412 RANK Cpl NAME Hamlet, Wm

IF IN PERMT. CORPS } UNIT 52nd Co ADM BSS TRANSFERRED TO 2nd Bn DATE 5. 3. 16 AUTHORITY D.O. 24

WHAT UNIT }

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION Port Arthur, Ont. TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION Sept 4/15 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY \$ 114 <sup>#15</sup> DATE EFFECTIVE 1-4-18

PAYABLE TO Mrs. C Metcalf, 204 Dease St, Fort William, Ont. RELATIONSHIP Sister

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

ATTENDANCE ROLLS					CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
2		3		4	1	2	3	4				CREDIT	DEBIT			
DATE	No.	DATE	No.	DATE												
					3 49			107 06		7 50	114 46	13 44				
					2 55											
					13 08											
					3 49											
					2 55											
					2 56											
					3 49											
					4 36											
					2 62											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											
					3 49											
					4 36											
					2 56											



Hamlet 5<sup>m</sup>

[illegible]

1917 Oct																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																															
-------------	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--



SH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
2	3	4					CREDIT	DEBIT			
85	75 61	20706				7 70 411 49 328 61			309		
57						7 114 358 67			325' 50		
46						16 94 377 73			347		
46											
90	75 61	20706				7 70 435 57					





Library and Archives  
Canada

395 Wellington Street  
Ottawa, ON K1A 0N4

Bibliothèque et Archives  
Canada

395, rue Wellington  
Ottawa, ON K1A 0N4

For material still subject to legislative, contractual or institutional obligations, users warrant that they will respect those obligations and not use LAC collections in a manner that would infringe the rights of others. Liability that may arise in the use of a copy is assumed in full by the user. LAC accepts no responsibility for unauthorized use of collection material by users.

To ensure proper citation and to facilitate relocation of an item, the source of the material and its reference number should always accompany the copy.

Pour les documents faisant encore l'objet d'obligations législatives, contractuelles ou institutionnelles, les usagers s'engagent à respecter ces obligations et à ne pas utiliser les documents des collections de BAC de façon à nuire aux droits d'autrui. Ils doivent assumer entièrement toute responsabilité qui pourrait découler de l'utilisation d'une reproduction de document. BAC décline toute responsabilité quant à l'utilisation non autorisée de documents provenant de ses collections.

Afin de citer un document avec exactitude et d'en faciliter le repérage, sa source et son numéro de référence doivent toujours accompagner la reproduction.

TITLE/TITRE \_\_\_\_\_  
RG 150 MG \_\_\_\_\_ R- \_\_\_\_\_ SERIES/SÉRIE \_\_\_\_\_  
ACCESSION 1992-93/166 VOL \_\_\_\_\_ PAGE(S) 36  
BOX/BOÎTE 3992 - 22 REEL/BOBINE \_\_\_\_\_  
FILE/DOSSIER HAMLET, WILLIAM SGT 439712  
DATE DECEMBRE 2012