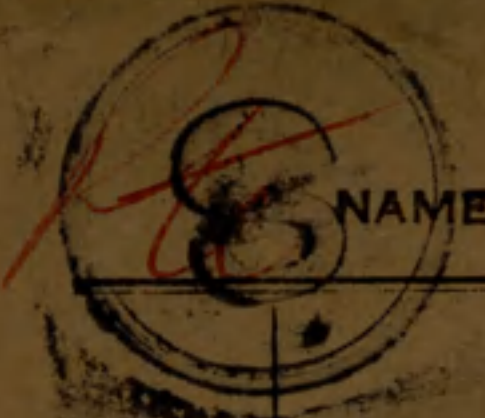


REGIMENTAL DOCUMENTS



NAME

ANGUISH LEIGH

REGT. NO.

331008

UNIT

1st Corps

H. Q. FILE NO.

1st Lt. B. X646

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

3

ATTESTATION PAPER (M.F.W. 23, 133, or 51)

M 16 5/79



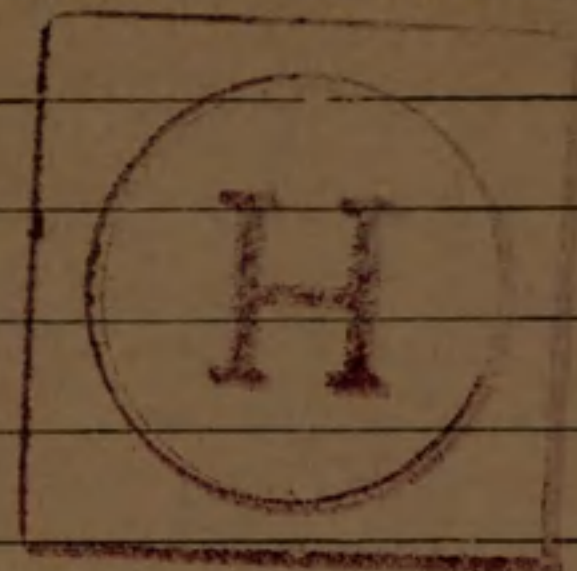
1 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

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)



MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

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)

1 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)

1 69165009A
2 6013
1 MFW 67
1 19122

Pay sheets

DEATH

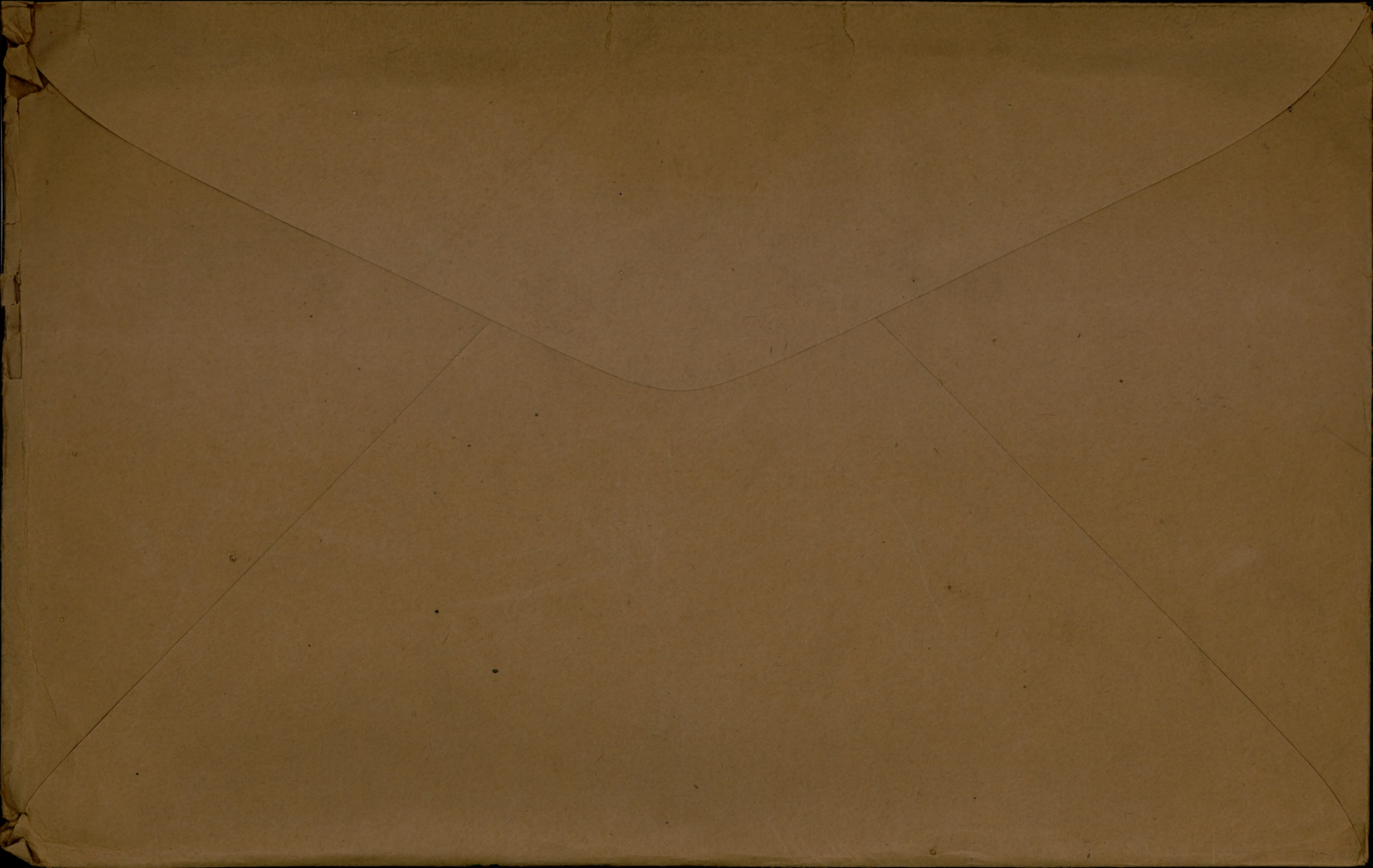
Category

DISCHARGE

Category

Stenob

DESERTION



#2 M. D. 2nd Depot Battalion 2nd C.O. Regiment

Regtl. No. 3310008

M.S.A.

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class One.)

1. Surname..... A N G U I S H
 2. Christian name..... Leigh
 3. Present address..... Simcoe Ont. Canada.
 4. Military Service Act letter and number..... Simcoe Ont. Jany 5th 1918. (8167378)
 5. Date of birth..... Sept 6th 1896
 6. Place of birth..... Port Ryerse. Ont. Canada.
(town, township or county and country)
 7. Married, widower or single..... Single.
 8. Religion..... Methodist
 9. Trade or calling..... Clerk,
 10. Name of next-of-kin..... Miss Maud Anguish,
 11. Relationship of next-of-kin..... Sister
 12. Address of next-of-kin..... Simcoe Ont. Canada.
 13. Whether at present a member of the Active Militia..... No.
 14. Particulars of previous military or naval service, if any..... No.
 15. Medical Examination under Military Service Act:—
 (a) Place..... Toronto, Canada..... (b) Date..... Oct 22nd 1917..... (c) Category..... A2

DECLARATION OF RECRUIT

I, Leigh Anguish, do solemnly declare that the above particulars refer to me, and are true.

Leigh Anguish (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age.....	22 yrs 1 mths.	} Distinctive marks, and marks indicating congenial peculiarities or previous disease. Flesh Mole Over Rt Sternum
Height.....	5 ft 7 1/2 ins.	
Chest measurement } fully expanded.....	36 1/2 ins.	
	range of expansion.....	
Complexion.....	Dark	
Eyes.....	Hazel	
Hair.....	Dark.	

P. J. D. ...
O. C. 2nd Depot Btl. 2nd C.O. Regt.

Place Brantford Canada Date Jany 5th 1918

CANADIAN EXPEDITIONARY FORCE

War Service Badge.

DISCHARGE CERTIFICATE

Class _____

No. _____

Issued.

THIS IS TO CERTIFY that No. 3310008 (Rank) Pty.

Name (in full) Anguish, Leigh enlisted in
the 2nd Cent. Ont. Regt.

CANADIAN EXPEDITIONARY FORCE at Brantford on the 5th
day of January 19 18

HE served in Man. Coops Cyclist Bn. in

and is now discharged from the service by reason of Demobilization.
Medical Unfitness. Frank

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

Age 22 yrs.

Marks or Scars _____

Height 5 ft 7 1/2 in

Flesh mole over

Complexion Dark

Rt Sternum

Eyes Hazel

Hair Dark

L. Anguish
Signature of Soldier

Lucie Thompson
Issuing Officer

Date of Discharge

No. 2 District Depot
Toronto, Ont.
APR 23 1919

For
O.C. No. 2 District Depot.
Rank

Date APR 23 1919 19

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.

2

Certified that document checked with P. 389 Regimental documents.

DEPARTMENT OF MILITIA AND WAR SERVICE GRATUITY.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

- 1. Christian names *Leigh* 2. Surname *Anguish*
- 3. Rank *Plt* 4. Original Unit *2nd C.O.R.* 5. Reg. No. *3310008*
- 6. Address, in full, to which future payments of gratuity are to be forwarded
Molson's Bank
Simcoe Ont.
- 7. Date of enlistment in the C.E.F. ~~March 1918~~ *Jan. 3rd 1918*
- 8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge. *Not applicable*
- 9. Relationship of such dependent *Not applicable*
- 10. Address, in full, of such dependent *Not applicable*
- 11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *Not applicable*
- 12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit :-
- 13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States?
- 14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service.
- 15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served. *13 months Overseas*
2 months 2nd C.O.R. : 1 month 8th Inf. Res. : 5 months
Cdu. Res. Cyclist Co. : 5 months Cdu Corps Cyclist Bn
- 16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department *No.*
- 17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? *No.*

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units. *No.*
19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid. *No.*
20. Have you been issued with a War Service Badge? If so what class? *No.*
21. Have you, during the present war, served in the Imperial Forces? *No.*
22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled. *No.*
23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *No.*
- (b) If so, was such reversion in consequence of misconduct or inefficiency? *Not applicable*
24. Are you now serving in the Imperial Forces? *APR 23 1919* If not, give:—(a) Date of discharge **DEMOBILIZATION**
(b) Reason for discharge
25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit.
26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit in which you served at the front, and dates of such service with that unit.
27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?
(b) If so, are you in receipt of full pay and allowances from that Department?

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: *L. Unguish*

Place of Residence: *Simcoe, Ont.*

Declared before me at: *Ripon Camp.*

This *Seventeenth* day of *March* 19 *19* *Questions 12, 13, 14*

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths under P.C. 2767, dated 11th Nov., 1918.

20, 24, 25, 26 and 27 are unanswered.
Chubb

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....
.....
.....

Certified Correct.

District Paymaster.

FORM OF WILL

M.S.A.

I, Anguish Leigh (Name in full)
Regimental Number 3310008 serving in 2nd. DEPOT Bn., 2nd. C. O. R.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I devise all my real estate unto

Maud Anguish (sister)
Simcoe
Ont.

Name and Address
of person or
persons to whom
it is to go.

absolutely, and my personal estate I bequeath to

.....
.....
.....

Name and Address
of person or
persons to receive
personal estate*
(See note).

NOTE

This space for the
appointment of
Executor if
necessary.

IMPORTANT
NOTE

This must be signed
and Dated by
THE SOLDIER
HIMSELF.

this 30th day of Jan A.D. 1918

Leigh Anguish Signature of Soldier.

*N.B. Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

Signature of First Witness [Signature]

Address of Witness St. Catharines Ont.

THE TWO
WITNESSES

Occupation of Witness Bank acct

MUST
SIGN HERE

Signature of Second Witness G. M. Fretwell

Address of Witness Waterdown Ont.

Occupation of Witness Student.

JOHN OF WILT

To be made out in duplicate.

DUPLICATE

H.Q. 54-21-23-53

M.S.A.

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins..... **A. COMPANY**
..... **2nd. DEPOT BN. 2nd. C. O. R.**

(2) Regimental Number **3310008**

(3) Full Name of Soldier **August Lee**

(4) Place of Birth **Port Ryerse, Ont.**

(5) Are you married, or not? **not**

(6) If married, state,
(a) Full name of your wife.....

.....
(b) Present Postal Address.....

(7) Are you a widower?

(8) Have you any children?

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

Also their names and ages.....

(9) Is your Father alive?..... *no*

If so, state name and address..... *✓*

(10) Is your Mother alive?..... *✓*

If so, state name and address..... *✓*

(11) If your Mother is a widow..... *✓*

Are you her sole support, or not?..... *✓*

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

..... *✓*
..... *✓*

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

Miss Maude August
Silver Lake, Colorado

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

..... *✓*

15) Are you insured?..... *no*

If so, in what Company?..... *✓*

Have you made arrangements for payment of your Insurance premium..... *✓*

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

Date..... *Jan 30/18*

W. S. Bleakley Capt
.....
Officer Commanding.

M.S.A. 13.
130 SEP 1918

ORIGINAL
MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar.

1. Surname Anguish Christian name Leigh
 2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule. 816378
 3. Consecutive number on schedule of men reporting for service (if he appears on it) _____
 4. Address (including street and number, if any) Simcoe, Ont.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 22nd day of October 1917, by the undersigned medical board sitting at Simcoe, Ont.

5. Age as stated 22 Years 1 Months. 6. Apparent age 22 Years 1 Months
 7. Height 5 Feet 7½ Inches. 8. Weight 148 Pounds.
 9. Chest measurement { Minimum 32½ Ins. 10. Complexion Dark { Eyes Hazel
 { Maximum 36½ Ins. { Hair Dark
 11. Physical development. Good { Good Fair Poor 12. Smallpox marks. None

13. Number of vaccination marks { Right arm _____ 14. When vaccinated last 1912
 { Left arm 1
 15. Distinctive marks and marks indicating congenital peculiarities or previous disease V. D 15 L. D 15 R.
Flesh mole over right Sternum.

16. Slight defects but not sufficient to cause rejection _____
 The man denies having had { Rheumatism We find no evidence of past { Rheumatism
 { Tuberculosis { Tuberculosis
 { Syphilis { Syphilis
 (Strike out disease admitted or suspected.)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category **A 2.**

J. W. Underwood President.
H. D. Stinson Member. S. H. Richardson Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>12/2/18</u>		<u>60886</u> M.O.	<u>25/1/18</u>		<u>60886</u> M.O.
		M.O.	<u>1/2/18</u>		<u>60886</u> M.O.
		M.O.	<u>7/2/18</u>		<u>60886</u> M.O.

Joined 5th day of Jany 1918 at Brantford, Canada

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>2nd Depot Batt'n</u>			<u>5/1/18</u>
Transferred to.....	<u>2nd C.O.R.</u>	<u>3310008</u>		<u>16 APR 1918</u>
	<u>RESERVE CYCLIST COY.</u>			<u>12 Sept 1918</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT

N. B.—This sheet is 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.

Signature of Man Leigh Anguish

DUPLICATE MEDICAL BOARD

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. 3310008 Rank Plt. Surname ANGUIST H
 (Given name in full)
 Unit or Corps Cyclist Bn. Birthplace Leeds, Yorkt. Ryerse, Ont.

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

I. GENERAL DESCRIPTION:

Physique Good Weight 160 lbs. Height 5 ft. 7 1/2 in. Colour of Eyes Hazel
 Nutrition Good
 Pulse 68
 Condition of arteries Good
 Vision Rt. 6/6 Left 6/6
 Hearing (conversational voice) Rt. 21 ft.
 Left 21 ft.

Identification marks, scars, or deformities.
 (Give cause and date of origin).
None

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.

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Pipon Camp.....(Overseas)
Date 19-3-19..... Signed + S. P. P. P. P......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 L. Anguish.....

(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.)

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

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) ANGUISH, L.
REGIMENT C.C.Cyclist Bn. RANK PTE. No. 3310008
Date of Examination in England 18-319 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 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 yes
- (b) In England —
- (c) In France —

Signature of Dental Officer A Ross



August 11, 1910

Central Bank of America

Dear Sirs:

I have the honor to acknowledge the receipt of your check of \$100.00 for the account of the Central Bank of America.

The same has been duly cashed and the amount credited to your account.

Very respectfully,
J. H. [Name]

Assistant Cashier

Central Bank of America

100 Wall Street, New York City

Enclosed find the receipt for the same.

Yours faithfully,
J. H. [Name]

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

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

500M.—9-16

H. Q. 1772-39-9:0.

M.S.A. Casualty Form—Active Service.

2nd DEPOT BN. 2nd C.O.B. 8th Res Bn

Unit, Regiment or Corps. War Bridge

Regimental No. 3310008 Rank Pte Name Leigh Anguish Class "A" No.

Enlisted (a) 5.1.18 Terms of Service (a) WAR & 6 MOS Service reckons from (a) 5.1.18

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

Extended Re-engaged Qualification (b) 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				
25-3-18	8th Res.	Embarked Canada <u>2-3-18</u> Arrived England <u>18-3-18</u> T.O.S. from Canada	E.Sandling	8-3-18	Pt. 2 D.O.#84 ✓
16-4-18	8th R.Bn	S.O.S. on transfer to Can. Res. Cyclist Coy.	Witley	16-4-18	D.O. #106. ✓
16 APR 1918	8th Res. Bn.	TAKEN ON STRENGTH FROM TRANSFERRED TO CANADIAN CORPS CYCLIST BN., FRANCE.	Seaford	16 APR 1918	Pt II No. 35 ✓
12.9.18			SEAFORD.	12.9.18	PART II. ORDERS No. 95
23 9/18	CCCB	TOS CCCB	Field	13 9/18	MR 455 FT 54
17 9/18	CCCB	To Trent	"	17 9/18	" 1390
21 9/18	CCCB	Joined unit	"	21 9/18	2013

CERTIFIED CORRECT.
 18 SEP 1918
 CAN. RESERVE CYCLIST COY.

(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				
		<p>Proceeded To England 1 3 19</p> <p>S.O.S. O.M.F. of C. on transfer to C.E.F. in Canada</p> <p>APR 12 1919 EMBARKED FOR CANADA</p>			<p><i>A. Russell</i> Lieut. Lt. Col., AAG., Canadian Section</p> <p><i>Pipony</i> April 12 Part II orders no 28</p> <p><i>G. G. G. G.</i> Capt. & Lt. Can. Corps Cyclist Battalion.</p>
APR 13 1919	O. S.	T. O. S. No. 2 DISTRICT DEPOT, TORONTO.		1919	PART II D. O. 114
APR 23 1919	S. O. S.	(DISCHARGED FROM H. M. S.)	No. 2 DIS. DEPOT,		PART II D. O. 114
					<p><i>W. W. W.</i> Lieut. For O. C. No. 2 District Depot.</p>

TLH Rank Name **ANGUISH, Leigh,** Reg'l No. **3310008**
Dft 2nd C.C.R.D., 10 3th Res If in perm. Corps,
 Unit What Unit? Married or Single **Single**
 Place and Date of Enlistment **Brantford, Jany. 5th. 1918** Place of Birth **Port Ryerse, Ont. Canada**
 Name and Address, Next-of-Kin **Miss Maud Anguish**

Simcoe, Ont. Canada Relationship **Sister**

Assigned Pay Monthly \$ Payable to

Relationship

Separation Allowance \$ Payable to

Relationship

Discharge, Date and Place Reason Character

H. W. & V., Ltd.—9546-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
		Arrived in England		18-3-18	S/S TELEA
25.3.18	8 Res	T.O.S. from leave.	E. Sling Pte	8.3.18	DD 84
16.4.18	8 Res	SOS to C. R. Coy Coy	Willey	16-4-18	DD 106. Pt II 25 M 19/18
12-9-18	6 R.L.C.	SOS on priv of 6 R.L.C.	Southern Pte	12-9-18	95 666 B. Pt 5 20 54 10/23/9/18
7.3-19	6 R.L.C.	Proceeded to England	Field	1.3.19	DD-114
		46-1-34 D/12-4-19			
12.4.19		Returned to Canada	Reform Pte	12.4.19	DD 28

Misc

2000

N/E R.B. No. 2817
 File R.L.
 Category 3700AN

A.F. Bin 3 Checked
 17.9.18
 76-4

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

3081

Feb. 1/18

OVERSEAS CONTINGENTS Enlisted 5/18

RATE OF SEPARATION ALLOWANCE

--	--	--	--

AUTHORITY FOR NEW ACC'T.

M. R.

RATE OF ASSIGNMENT

15. ⁰⁰			
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PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No. 3310008
 Rank Pte. Promoted Reverted Discharge
 Soldier's Name *Anguish Leigh*
 Battalion *A Coy 2nd Bn. 2nd. C.O.R.*
 Beneficiary
 Relationship
 Address

Name *Miss Maud Anguish*
 Address *#4 Lynwood Ave.*
 Change of Address *Simcoe*
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Mar 1918	M 77486		30	30	R
April	H 7944		15	15	B
May	C 7304		15	15	B
June	B 15738		15	15	B
July	Y 28724		15	15	✓
Aug	A 31254		15	15	
Sept	A 37970		15	15	
Oct	A 44609		15	15	M
Nov	A 52693		15	15	M
Dec.	B 64208		15	15	M
Jan	B 71926		15	15	M
Feb	X 79910		15	15	
MAR	D 84496		15	15	
APR	G 1936		15	15	
MAY			225	225	

407-L-9

M. F. W. 128.
400M-6-17-1772-30-1141
L. L. 22320-M. & D. 7993.

ch. 5 3/4

R. Amstrong

A/c Closed
 Ret'd per... *As directed*
 Date... *20-4-19* M.F.W.187 *26-4-19*
 Clerk... *B am hick* M.D. 2
 NO 90592.

AUDITED.

M.R.O. 1a.

M.S.A.

SURNAME.

Anguish

R

CARD NO.

K

CHRISTIAN NAMES

Leigh

SOS 23-4-19. Demob.

REGL. NO. 3310008

RANK Pte.

FOLL. 200114 of 24-4-19. 2019

UNIT 2nd Cen. Ont. Regt. 2nd Depo. Bn.

FORMER CORPS Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Anguish, Miss Maud

RELATIONSHIP TO SOLDIER Sister

ADDRESS Simcoe. Ont.

COUNTRY OF BIRTH Canada Port Ryerse. Ont.

DATE Sept. 6th 1896

PLACE OF ATTESTATION Brantford. Ont.

DATE Jan. 5th 1918

O/S. 8-3-18. 1168

R/C 70-4-19 307 Pte

L. L. 6915. M. & D. 6994.

2

M. F. W. 22. 100M.-8-16. H. Q. 1772-39-339.

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE

CS.

HM

Number 33 10008 Rank

PCB

Surname ANGUISH

Christian Name Leigh

Units Can. Cyc. Bn Theatre of War France

Date of Service 13 - 9 - 18

P

Remarks Bua

Latest Address Limcoe

out

Roll No. B. Page 20653

200m.-6-21.M.

DESP. JAN 27 1930

REGAN. NO. 451-255

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 (D.S.).
11. Equipment Statement (M.G. Form (D.O.S. 2) and Clothing).
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group A
 Checked by No. 5
 Date Apr 9-19

PR 121919 EMBARKED FOR CANADA
 DISEMBARKED HALIFAX 20-4-19 SHORT FORM.
 PROCEEDINGS ON DISCHARGE.
 (Demobilization.)

Military District 2
 D. A. I.
 M
 Next of Kin: Sister

1. No.	3310008	War Service Badge Class No. <u>A 787714</u>
2. Rank.	Pte.	
3. Name.	Anguish, Leigh	
4. Unit.	Edn. Corps Lye. Bn.	
5. Date of Discharge	APR 23 1919	Place TORONTO, ONT.
6. Reason for Discharge	Demobilization.	
Trade: Electrician Occupational Group: 21 Service in France: 12.9.18. to 1.3.19.		
7. Authority.	No. 2 District Depot, Part II, D.O. No. <u>114</u>	
8. Proposed Residence after Discharge	Simcoe Ontario	
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. ? Leigh Anguish Signature of Soldier.	
10.	CONFIRMATION. The discharge of the above named man is hereby confirmed. Place: TORONTO, ONT. Date: APR 23 1919 [Signature] For O.C. No. 2 District Depot Signature (O. C. Discharging Unit.)	

K.E.
 3.1.20.
 com.

"ADRIATIC" 20-4-19

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES

REGT. No. 3310008 RANK Pte.

M. OR S. OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?
ADDRESS					PLACE OF ATTESTATION	TRANSFERRED TO DATE
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				DATE OF ATTESTATION	TRANSFERRED TO DATE
TO WHOM PAID	RELATIONSHIP				ASSIGNED PAY \$	DATE EFFECTIVE
ADDRESS					PAYABLE TO	RELATIONSHIP
					ADDRESS	ANY CHANGE IN ASSIGNEE OR ADDRESS
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE
					DISCHARGED	PLACE DATE
						REASON AUTHORITY
						IF ENTITLED TO POST DISCHARGE PAY

Bes. to yo. 60.

Molsons Bank, Simcoe. ONT.

3/1/19.

1500 closed 30-4-19 by Ottawa
Miss Ethel Anguish, Sister
44 Lynwood Ave. Simcoe.
Ont.

Toronto

23-4-19

Demob

D0114

Yes

MONTH	PAY AND F.A.		OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS		BALANCE		
	NO. OF DAYS	RATE			AMOUNT	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2				COL. NO. 3	DEBIT	CREDIT	DEBIT	CREDIT
31-3-19																		
27-4-19	27	1.10	29 70															
			35 00 70 00															
				134 70				487 50				15 00						
								106 79							131 60			
											70 00							
												440						

BALANCE FROM PREVIOUS ACCOUNT

T.O.S. 12/4/19 D.O. 114
SUBS. 10

Dr. Bal. Aug. 2 P.b.
1-4-19 to 27-4-19 P.D.
6 lothing allow.
1st limit W.S.G.
April
Boat & Train

W.S. & Paid above.
Hdep P.D. & vers.
M.7.

W.S.G. PAID IN FULL
FOR PAYMASTER WAR SERVICE GRATUITY

ASSIGNED PAY: ENGLAND OR CANADA: SEPARATION ALLOWANCE: ENGLAND OR CANADA: NAME:- ANGUISH Leigh
EFFECTIVE DATE:- 1-2-18 EFFECTIVE DATE:- NUMBER:- 3310008
AMOUNT:- 15⁰⁰ AMOUNT:-

NAME, ADDRESS, RELATIONSHIP & AUTHORITY: Miss Maude Anguish h/r. h p b ban Pte
Lynwood Ave
Semice Ont
(sister)

Stopped Eff. 1.4.19.

UNIT AND TRANSFERS
ORIGINAL UNIT:- 13. Ford Dpt 2nd Dep Bn - 2nd BOR
DATE ACCOUNT FIRST OPENED:-

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
35	19/11/18	16/11/18	21/5/18 Res byc Co

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
2/3/19	4579	Rejoin	£3				1460

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBSCE ALL'CE
h p b ban	1	-	-	10

PARTICULARS OF RENDERING NON-EFFECTIVE

1918 MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
March 31	Balance forward								25 88		
April	Res Pay	33 00		a.p.				15 -			
				AR 179 12/4/18 8 Res	4 87						
				✓ 1 1/3/18 Halifax	5 00						
		33 00			9 87			15	34 01		
				a.p. ban				15	19 83		
				450 h.r. b. b. 7.5.18	24 33						
May	P P	34 10		372 h.r. b. b. 27.11.18 34d	9 73						
				853 .. 28.5.18	4 87						
		34 10			38 93			15	14 18		
June	P P	33		1152 Seafood 13.6.18	7 30						
				car ay				15			
				1357 Seafood 27.6.18	17 03				15 15		
		33			17 03			15			
July	J.P.	34 10		ban a.p.				15			
				1628 Siford 11/7	7 30						
				1766 ✓ 25/7	9 73				17 22		
		34 10			17 03			15			
				ban a.p.				15			
Aug	P P	34 10		2256 Ford 13.8.18	9 73						
				2387 .. 27/8/18	9 73				16 86		
		34 10			19 46			15			
				Car away				15			
Sept	P P	33		2556 Seafood 2.9.18	14 60						
				10221 h.r. b. b. 22.9.18	4 46						
				2811 Seafood 14.9.18	2 88				15 52		
		33			19 21			15			

carried over to

COMPILED BY: J. C. Salter
CHECKED BY: K

NUMBER 3310008

RANK *06*

NAME *ANGUSH*

Leigh

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									15 52		
<i>October</i>	<i>PP</i>	<i>31 10</i>		<i>ban a pay</i>				<i>15</i>	<i>30 62</i>		
				<i>826 ccbw 18 1/8 25</i>	<i>839</i>				<i>26 23</i>		
		<i>31 10</i>			<i>839</i>			<i>15</i>			
<i>Nov.</i>	<i>✓</i>	<i>31</i>		<i>C.A.P</i>				<i>15</i>	<i>44 23</i>		
				<i>1054 7 1/8 ccbw (7)</i>	<i>466</i>				<i>39 57</i>		
				<i>1439. 22 1/4. 12 B. 22.</i>	<i>560</i>				<i>33 97</i>		
		<i>31 10</i>		<i>C.A.P.</i>	<i>10 26</i>			<i>15</i>	<i>53 07</i>		
<i>Dec.</i>	<i>✓</i>	<i>31 10</i>						<i>15</i>	<i>72 17</i>		
<i>Jan</i>	<i>✓</i>	<i>31 10</i>						<i>15</i>	<i>87 97</i>		
<i>Feb</i>	<i>✓</i>	<i>101 20</i>			<i>10 26</i>			<i>15</i>	<i>82 94</i>		
		<i>30 80</i>							<i>77 91</i>		
				<i>1432. 6.1.19. ccbw 1</i>	<i>5 03</i>				<i>77 91</i>		
				<i>1480. 19.1.19. ✓ 4</i>	<i>5 03</i>				<i>62 98</i>		
				<i>1687. 12.12.18. No. 12 B. 6</i>	<i>14 93</i>				<i>58 32</i>		
				<i>1556. 6.2.19. ccbw 6</i>	<i>4 66</i>				<i>50 86</i>		
				<i>2315. 20.2.19. Lb. Hants 8</i>	<i>29 65</i>				<i>69 96</i>		
<i>Mar</i>	<i>✓</i>	<i>34 10</i>		<i>C.A.P.</i>				<i>15</i>	<i>11 56</i>		
				<i>5068 7-3-19. 4th Res</i>	<i>58 40</i>				<i>3 out</i>		
		<i>64 90</i>		<i>4577. 21.3.19. Ripon 15</i>	<i>74 60</i>			<i>30</i>			
		<i>64 90</i>			<i>110 11</i>			<i>30</i>			

L.O.S. 12-4-19 L.L.H. ccbw