

TRIPPLICATE

M. D. 2nd Depot Battalion 2nd C.O. Regiment
Regtl. No. 3321035

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

M.S.A.

(Class One)

1. Surname..... **CRANE**

2. Christian name..... **Ambrose**

3. Present address..... **Vanessa Ont Canada**

4. Military Service Act letter and number..... **Serial 816036 Vanessa Ont**

5. Date of birth..... **26th July 1897**

6. Place of birth..... **Winham Ont Canada**
(town, township or county and country)

7. Married, widower or single..... **Single**

8. Religion..... **Methodist**

9. Trade or calling..... **Turner**

10. Name of next-of-kin..... **Ellen Crane**

11. Relationship of next-of-kin..... **Mother**

12. Address of next-of-kin..... **Winham 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..... **Sincoe Ont Can** (b) Date..... **23rd Oct 1917** (c) Category..... **A-2**

DECLARATION OF RECRUIT

I, **Ambrose Crane**, do solemnly declare that the above particulars refer to me, and are true.

Ambrose Crane (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age..... **20** yrs..... **2** mths. } Distinctive marks, and marks indicating congenital peculiarities or previous disease.

Height..... **5** ft..... **4 1/2** ins. }

Chest measurement } fully expanded..... **35 1/2** ins. }

range of expansion..... **1 1/2** ins. }

Complexion..... **Dark**

Eyes..... **Brown**

Hair..... **Black**

P. Davis

O.C. **2nd** Depot Btln.

2nd Central Ontario Regt.

Place..... **Brantford Ont Canada** Date..... **May 14th 1918**

TRIPlicate

Regiment

Company

No.

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1916

(Class)

1. Name

2. Christian name

3. Present address

4. Military Service Act letter and number

5. Date of birth

6. Place of birth

7. Married, widower or single

8. Religion

9. Trade or calling

10. Name of next of kin

11. Name of educational institution

12. Educational level

13. Whether he is or has been a member of the Forces

14. Particulars of previous military service, if any

15. Military Service Act number under Military Service Act

DECLARATION OF RECRUIT

I hereby declare that the above particulars are true and correct.

Signature of Recruit

DESCRIPTION OF CALLING UP

Height

Weight

Build

Complexion

Hair

Eyes

Class

Post Box

Street

Town

County

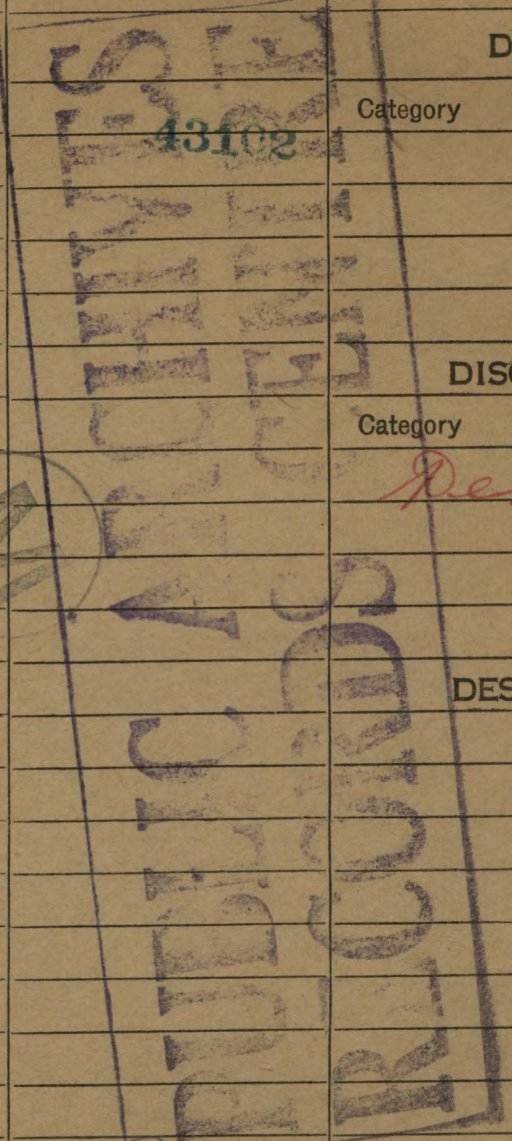
Province

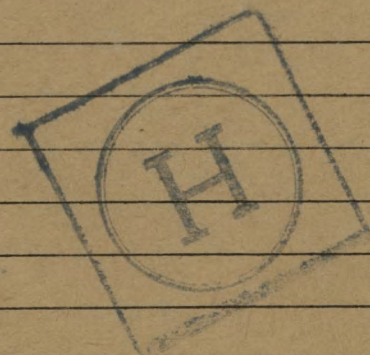
REGIMENTAL DOCUMENTS

12-9-19
P.D.

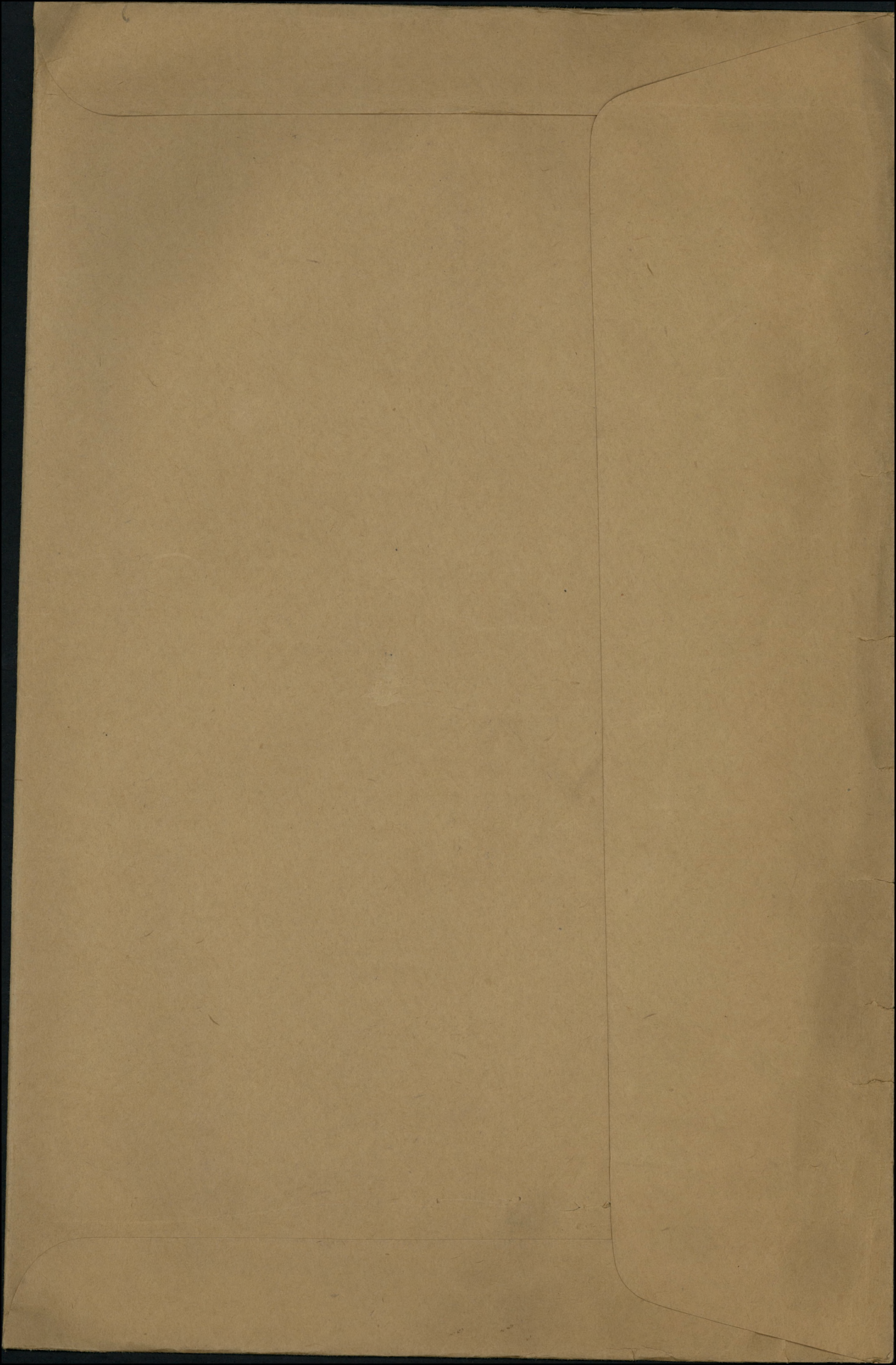
NAME **CRANE** **AMBROSE**

REGT. NO. **3311089** UNIT **8th Fla. Inf.** H. Q. FILE NO.

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
2 ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
1 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
TRAINING HISTORY SHEET (M.F.W. 113)					
1 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)					
5 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					Category
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					<i>Desmob.</i>
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)					DESERTION
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)					
2 <i>P.D.</i>					
1 <i>Rm</i>					



404038



CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge

Class "A" No.

THIS IS TO CERTIFY that No. 3311089 (Rank) Pte.

Name (in full) Crane, Ambrose enlisted in
the 2^d Depot Batt. 2^d C.O.R.

CANADIAN EXPEDITIONARY FORCE at Brentford Ont. on the 14th
day of May 1918

HE served in 8th Res. Batt. England

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

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

Age 21 years

Height 5ft 4 1/2 in

Complexion Dark

Eyes Brown

Hair Black

A. Crane

Signature of Soldier.

Marks or Scars

Two moles left side of neck; one right side

Date of Discharge

3. 2 DISTRICT DEPOT

AUG 25 1919

TORONTO

[Signature]
Issuing Officer
O.C. No. 2 District Depot.

Rank

Date **AUG 25 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.

3311089
C.A.R.
P.L.

...

...

...

AUG

2

Rank

Name

Crane Ambrose

Reg'l No.

3311089

Unit

59th Dst 2nd BN 2nd COR

If in perm. Corps,
What Unit?

Married or Single

Single

Place and Date of Enlistment

Brantford Ont, 14th May 1918,

Place of Birth

Windham Ont,

Name and Address, Next-of-Kin

Ellen Crane,

Windham Ont Can.

Relationship

Mother.

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason

Character

H. W. & V., Ld.—9546-16.

Report.

Date.

From whom received.

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.

MISCELLANEOUS

Arrived in England, 15 8 18 S S NANKIN

21. 9. 18 8 Res

Taken on strength Witley

15. 8. 18 80264

31. 3. 19 "

S.O.S to H.Q. 26. Wemy Melford "

pte 31. 3. 19

*8090 after O.I.
H.Wing 8021 (78-4-19)*

102. I 93

16. 8. 19

15. 8. 19

Rwing

Reported TOS

✓

✓

14. 8. 19

- 109

18. 8. 19

✓

SOS to Canada

✓

16. 8. 19

- 111

Miscell

N/E. H.B. N2 *942*
File R.L. *Can OR*
Category

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.				

1. 1945 7. 10. 1945

1. 1945 5

M.S.A.
59th Draft

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

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-20-070.

Casualty Form—Active Service.

Unit, Regiment or Corps. 2nd Dep Bn 2nd C.O.R.
 Regimental No. 3311089 Rank Pt e Name Ambrose Crane
 C. E. F. Pf/War
 Enlisted (a) 14-5-18 Terms of Service (a) Pf/War Service reckons from (a) 11/5/18
 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)

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
<u>21.9.18</u>	8th Res. Bn	Embarked Canada <u>Halifax</u> Arrived England <u>Liverpool</u> Taken on Strength 8th Res Bn.	<u>Witley</u>	<u>Aug. 2/18</u> <u>Aug. 15/18</u> <u>15/8/18</u>	<u>H. M. J.</u> <u>"Rankin"</u> D.O., Pt. 2 <u>264</u>
<u>28.3.19</u>	—	Sol to <u>b.b.b.</u> <u>Bramshott</u> 2nd C.O.R. D. on reporting to "H" Wing <u>Witley</u>	—	<u>28.3.19</u>	<u>DO + 87</u> <u>Witley</u> Lieut. ASS'T ADJT FOR O.G. 8th CANADIAN RES. BN.
<u>26 JUL 1919</u>		TOS. WITLEY.		<u>26 JUL 1919</u>	Embark S.S.-BELGIC Liverpool 16.8.19 Lieut. <u>Stewart</u>
<u>AUG 1 6 1919</u>		SOS, OMFC. TO CEF CANADA		<u>AUG 1 6 1919</u>	

OFFICER i/c RECORDS,
R. WING C.C.C.,
WITLEY.

(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				
AUG 16	1919 O. S.	T. O. S. No. 2 DISTRICT DEPOT,	TORONTO	1919	PART II D. O. 241
AUG 25	1919 S. O. S.	(DISCHARGED FROM H. M. S.)	No. 2 DIS. DEPOT,		PART II D. O. 241

W. C. Roberts
 Li. ut.
 For O. C. No. 2 District Depot.

A. Coy. H. Wing.

War Service Badge
Class "A" No. _____

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. 3311089 Rank PTE. Surname CRANE
(Given name in full)

Unit or Corps 2nd COB Birthplace Ambrose Tillsonburg, Ont.

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

1. GENERAL DESCRIPTION:

Physique good Weight 170 lbs. Height 5' 4 1/2" in. Colour of Eyes brown
Nutrition good
Pulse 72 regular
Condition of arteries soft
Vision Rt. 9/12 Left 6/12
Hearing (conversational voice) Rt. 20 ft. Left 20 ft.

est.

Identification marks, scars, or deformities.
(Give cause and date of origin).
2 moles left side neck.
1 right side.

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 yes
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.

Pleurisy and pneumonia 1912
recovered

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Witley.....(Overseas)
Date 23/7/19..... Signed J. J. Gaudin..... 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 Crane. A......

(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.)

3310721

ORIGINAL

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 to 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 Crane Christian name Ambrose
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 816036
3. Consecutive number on schedule of men reporting for service (if he appears on it)
4. Address (including street and number, if any) Vanessa, Ont.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 23rd day of October 1917, by the undersigned medical board sitting at Simcoe, Ont.

- 5. Age as stated 20 Years 2 Months
6. Apparent age 20 Years 2 Months
7. Height 5 Feet 4 1/2 Inches
8. Weight 140 Pounds
9. Chest measurement { Minimum 34 Ins. Maximum 35 1/2 Ins.
10. Complexion Dark { Eyes Brown Hair Black
11. Physical development Good { Good Fair Poor
12. Smallpox marks None
13. Number of vaccination marks { Right arm Left arm
14. When vaccinated last Never
15. Distinctive marks and marks indicating congenital peculiarities or previous disease V, D 40 L, D 40 R. 2 small fleshy moles right side of neck.

16. Slight defects but not sufficient to cause rejection
The man denies having had { Rheumatism Tuberculosis Syphilis We find no evidence of past { Rheumatism Tuberculosis 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.

W Anderson President.
Member. Fred S. Sude Member.

Table with columns: Date, Result, VACCINATIONS, Date, Result, ANTI-TYPHOID INOCULATIONS, ETC.
Rows: 11-6-18 M.O., 21-5-18 M.O., 12-6-18 M.O., 15-6-18 M.O.

Joined 14th day of May 1918 at Brantford Ont. Canada

Table with columns: CORPS, REG'TL NUMBER, HABITS, DATE
Joined on enlistment 2nd Dep Bn 3311089
Transferred to 2nd C.O.R.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Table with columns: 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 A. Crane

DUPLICATE FROM MEDICAL BOARD

NAME.

Crane

RANK.

Pte

REC. FILE.

*Sts. Rec. 25-219
1002419 20-8-19
file in 10
H. Q. FILE # 206.*

No.

3311089

CORP.

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

H. Q. FILE

206.

ENLISTMENT, PLACE.

Brantford Ont.

DATE

May 14th, 1918.

DISCHARGE, PLACE.

Canada, Windham Ont.

DATE

July 26th, 1897.

REASON.

ADDRESS ON DISCHARGE.

*T. O. S. May 14 1918**D. O. Part II No. 133.*

DOCUMENTS.

Auth fr. Form 135

NEXT OF KIN

Crane, Mrs Ellen

RELATIONSHIP

mother.

ADDRESS

*Windham, Ont.**Ob. 3-8-18 ¹³⁶⁵/₅**R/O. 23-8-19 ³⁹⁸/₉₂ Pte*

CHARGED OUT

RETURNED

CHARGED OUT

RETURNED

TO

DATE

BY

RECEIVED
BY

DATE

TO

DATE

BY

RECEIVED
BY

DATE

211.

RS

Number 3311089 Rank Se.

Surname CRANE

Christian Name Ambrose

Units 2nd B.O.R. Theatre of War England

Date of Service 15-8-18

Remarks

Latest Address Vanessa, Ont.

Roll No. A Page 4890

200m.-6-21...



(This form to be filled in by all ranks on voyage to Canada.)

.....

R	RANK	SURNAME	INITIALS	UNIT
.....

al address.....
(Street) (City or Town) (Province)

one person to be notified of arrival.....

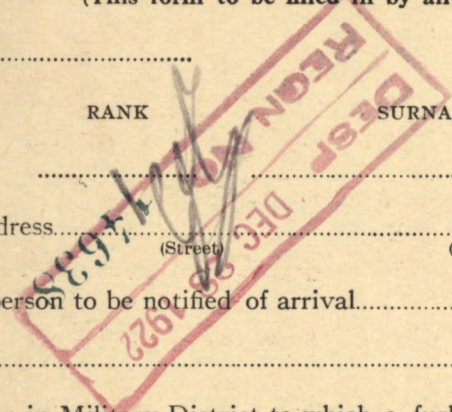
Station in Military District to which a furlough warrant is required.....

Railway.....

d, is your wife on board..... Number of children on board.....

stination.....

(Sgd.).....



DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

checked this document with original documents

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 8165), 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 Ambrose 2. Surname Crane
- 3. Rank Private 4. Original Unit 2nd C.O.R. 5. Reg. No. 3311089
- 6. Address, in full, to which future payments of gratuity are to be forwarded.....
P.O. - Dan Vanessa -
- Ontario
- 7. Date of enlistment in the C.E.F. 14-5-18
- 8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge. None
- 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. 14-5-18 to 14-8-18 Canada.
2nd C.O.R. - 14-8-18 to present time England.
- 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

5134 Wt. /30P. 250,000(8) 2/19. S.O., F.Ed.
6621 Wt. /P50. 20,000(4) 3/19. S.O., F.Ed.

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?~~
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 C.E.F.? If not, give:—(a) Date of discharge
(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. *Who?*
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. *Who?*
27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? *Who?*
- (b) If so, are you in receipt of full pay and allowances from that Department? *Who?*

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:

Ambrose Crane

Place of Residence:

P.O. Vanessa - Ontario

Declared before me at:

H. King C.C.C. Walsby

This

2

day of

July

19*19*

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.

QUESTIONS 12, 13, 14, 23, 24, 25, 26, 27, ARE UNANSWERED.

Ch Douglas

Major

"H" Wing C.C.C.

POST DISCHARGE PAY.

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

Certified Correct.

District Paymaster.

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) C R A N E A
 REGIMENT 4 Wing C.B.C. RANK Pa No. 3311089
 Date of Examination in England 22.7.19 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



PRESENT DENTAL REQUIREMENTS

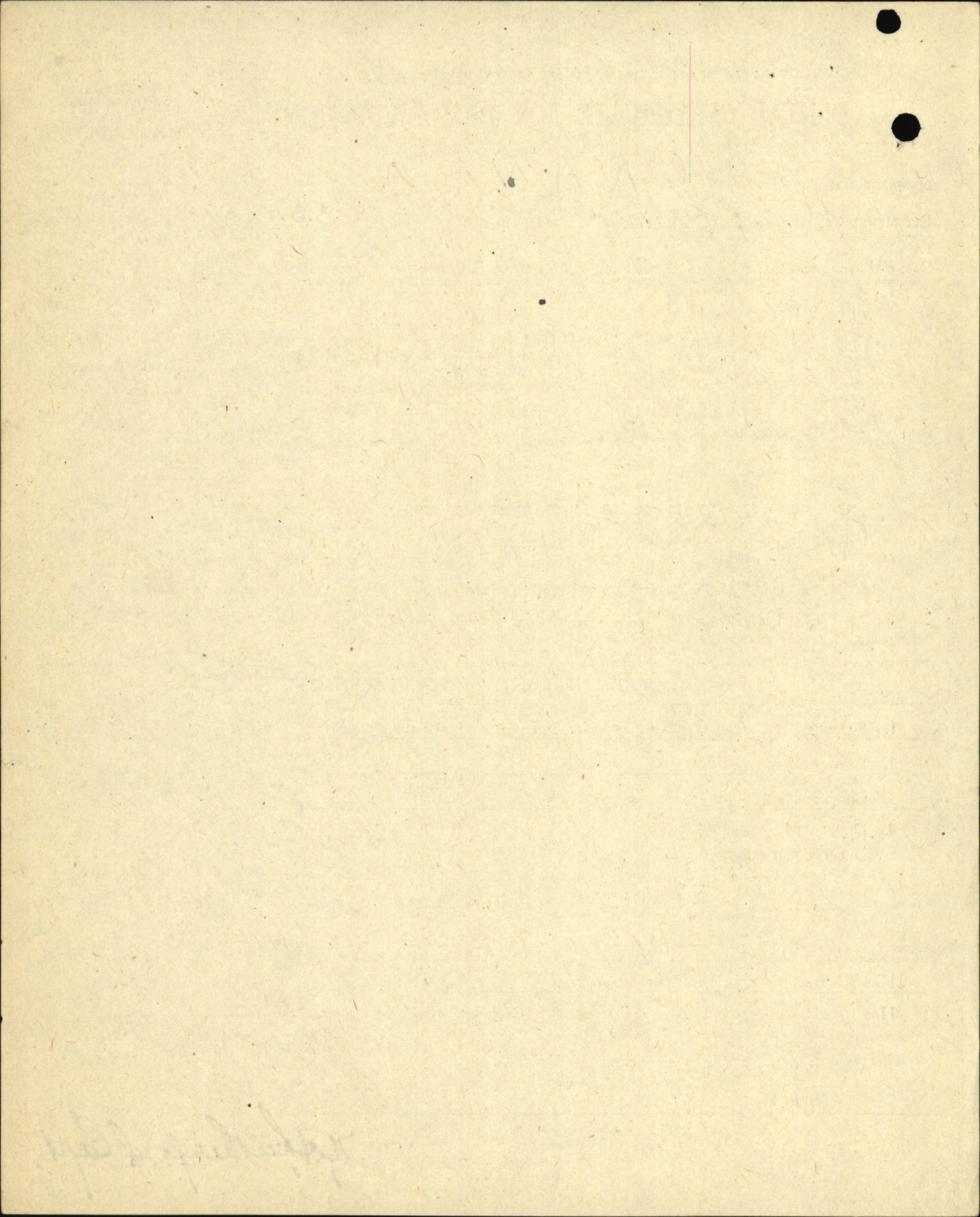
1. FILLINGS 2-3-4-5-11-12-13-16
2. EXTRACTIONS _____
3. CROWNS _____
4. DENTURES
 - (a) Full Upper _____
 - (b) Part Upper +
 - (c) Full Lower _____
 - (d) Part Lower - 17-18-19-29-30-31-32

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 Yes
- (c) In France _____

Signature of Dental Officer W. H. Shepherd Capt.



3311088

BRITISH BMA ST L LIDDGIR

MADE IN CANADA

Year	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935
Condition on entrance																			
Condition on discharge																			
Condition on re-entrance																			
Condition on re-entrance																			

1. The first time a tooth record is made is on the first red ink drawing in red ink.
 2. On re-examination the condition of teeth in months to be marked on drawing in red ink.

INSTRUCTIONS

AUTHORITY
A.P. NOM. ROL

A.P. July 1918 by S. H. G. S. ...
 can d. p. 6. P. H. ...
 which ever applicable.

ASSIGNED PAY	ENGLAND OR CANADA	SEPARATION ALLOWANCE	ENGLAND OR CANADA
EFFECTIVE DATE:- 1-7-18		EFFECTIVE DATE:-	
AMOUNT:- \$15.		AMOUNT:-	
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.	
Miss E. Crane Vanessa P.O. Ont			
Stopped off 1.8.19			
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
3/7	605		9.43
9/7	1283		38.93
			48.66

NAME:- CRANE, Ambrose E		
NUMBER:- 3311089.		
PARTICULARS OF RANK OR APPOINTMENT		
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
P.C. from Canada	1-8-18	Pte.
UNIT AND TRANSFERS		
ORIGINAL UNIT Draft No. 59. 2/2 nd BOR.		
DATE ACCOUNT FIRST OPENED:- 1-8-18.		
AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S P'D
		8 th Res Bn
DAILY RATES OF PAY AND ALLOWANCES		
AUTHORITY	PAY	F.A.
P.C. from Canada	1	10

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
31-7-18	Bal. from Canada								37.05		
Aug	R.P.	34.10		AP Aug Sept				30			
Sept		33.00		AR 4064 26.8.18 Frencham	4.87						
				4921 26.9.18 8 Res	4.87						
					9.74			30	64.41		Account agreed
Oct	P.P.	34.10		A.P.				15			
				5339 10/10 8 Res (5)	4.87						
				5884 28/10 ✓ (9)	4.87				73.97		
		34.10			9.74			15			
Nov	P.P.	33.00		A.P.				15			
				6290 14/11 ✓ (1)	4.87						
Dec	✓	34.10		6721 4/12 ✓ (13)	9.74						
1919				A.P.				15			
Jan	✓	34.10						15	115.37		
		101.20			14.60			45			
Feb	✓	30.80						15	131.17		
				7197 3/1/19 ✓ (1)	38.93						
				7200 23/1/19 8 Res (2)	19.17						
				7752 28/1 ✓ (5)	14.60						
				8014 12/2 ✓ (12)	14.60						
March	✓	34.10		A.P.				15			
				8200 26/2 ✓ (19)	14.60						
				8508 12/3 ✓ (27)	14.60				33.47		
					116.80			30			

COMPILED BY *M. J. Fletcher*
 CHECKED BY *[Signature]*

1919

NUMBER

3311089

RANK

NAME

Corane. A.

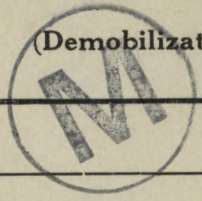
MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
March									33 47		
April	P. P.	33		A.P.				15	51 47		
				151 2/4 B'chott (1)	7 30				44 17		
				9088 24/3 S Res (1)	14 60				29 57		
May	✓	34 10		L.A.P.	21 90			15	48 67		
				919 - 16.4. Mwing (15)	7 30				41 37		
		67 10			29 20			30			
June	✓	33		bal.				15	59 37		
July	✓	34 10		bal.				15	78 47		
				16.5. 67 46. Mwing (3)	7 30						
				73.6 2.5. (3)	9 73						
				10259. 4.6 ✓ (6)	9 73						
				17867. 17.6 ✓ (9)	9 73				41 98		
		67 10			36 49			30			
				AR 1203 9/7. Mwing 38 93							
				on AR 605 3/15. — 9 73					6 68		
					48 66						
				AR 3926 1/8 886 Mwing 4 87					11 55		
					4 87						

lost can 16/8/19 DL 102

U.S. B Class 'B'

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)

Recp. G. - 1
DA - I



1. No.	3311089	
2. Rank.	Pte.	
3. Name.	Crane Ambrose	
4. Unit.	8th Res. Bn.	
5. Date of Discharge	AUG 25 1919	Place Toronto
6. Reason for Discharge	Demobilization	
7. Authority.	No. 2 District Depot, Part II, D.O. No. 241	
8. Proposed Residence after Discharge	Vanessa, Ont. Vanessa 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.?	
	<i>A Crane</i>	
	Signature of Soldier.	
10.	CONFIRMATION.	
	The discharge of the above named man is hereby confirmed.	
Place	No. 2 DISTRICT DEPOT	
Date	AUG 25 1919	
	TORONTO	
Signature	<i>[Signature]</i>	
	O. C. No. 2 District Depot. (O. C. Discharging Unit.)	

49
8.11.62

REPORT FORM
PROCEEDINGS ON DISCHARGE
(Continuation)

[The main body of the form is a large rectangular area with horizontal lines, intended for handwritten entries. It contains very faint, illegible text and a blue scribble on the left side.]

REMARKS TO BE MADE BY SOLDIER

The undersigned hereby certifies that the facts stated herein are true and correct and that he has received my discharge certificate.

Signature of Soldier

REMARKS TO BE MADE BY OFFICER

The facts of the above matter are hereby confirmed.

Signature

(Of C. Discharge Unit)

UNITED STATES OF AMERICA

DEPARTMENT OF JUSTICE

CRIMINAL DIVISION

WASHINGTON, D.C.

IN RE: [Name]

Case No. [Number]

Presented to the Court by the United States Attorney

at [Location]

on [Date]

for the purpose of [Purpose]

of the [Authority]

in accordance with [Reference]

FILED OF DISCHARGE DOCUMENTS

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 (2601D)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D.3).
11. Equipment Statement Q.M.G. Form (D.O.S. 2), and Clothing
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B.64).
14. Service Gratuity (Form M.F.W. 2595).
15. Sanitary Documents.

Group..... B

Checked by No. 10

Date..... 15/8/17

"BELGIC" 25.8.19

DISPERSAL 'I'

AUDITOR 80 PAYMASTER 25

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

REGT. No. 3311 089 RANK Pte NAME (IN FULL) CRANE, A.

M. OR S.

Form with fields for NEXT OF KIN, RELATIONSHIP, PARTICULARS, AUTHORITY, ORIGINAL UNIT, PLACE OF ATTESTATION, DATE OF ATTESTATION, ASSIGNED PAY, DATE EFFECTIVE, PAYABLE TO, ADDRESS, STOP PAYMENT FORM, DISCHARGED, PLACE, DATE, REASON, AUTHORITY, and IF ENTITLED TO POST DISCHARGE PAY.

Table with columns for MONTH, PAY AND F.A., OTHER CREDITS, TOTAL CREDITS, ACQUITTANCE ROLLS, CASH PAYMENTS, ASSIGNED PAY, REGIMENTAL CHARGES, OTHER CHARGES, TOTAL DEBITS, BALANCE, and PARTICULARS OR REMARKS. Includes handwritten entries for 31/7/19, 31/8/19, 122 dys, and various dates in Sept and Oct.

BALANCE FROM PREVIOUS ACCOUNT

Dr L.P.C. Cloth allow. 1st inst. 16.6.6 wing Boat train & post-cheg aug at.

W.S.G. Due Soldai. Dep. W.S.G. Paid by #3, D.D.

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

Date of Enlistment 14-5-18

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch C

16034

July/18

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

15.00			
-------	--	--	--

112246
BMT

PARTICULARS OF SEPARATION ALLOWANCE

No. 2311089

Rank *PL* Promoted Reverted Discharge

Soldier's Name *Ambrose Crane*

Battalion *L. Dep Bw 2-6.1.R. Spt +9*

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name *Miss Eva Crane*

Address *Vanessa PO ont*

Change of Address

1 MISS EVA CRANE, CI6034

2 VANESSA P.O.,

3 ONT. 15 15.00

4 % 3311089 PTE AMBROSE CRANE FIFTEEN DOLLARS

Date	Cheque No.	Amount S/A	Amount A/P	Total
July 1918				
July	A 24990		15	15
Aug	I 34610		15	15
Sept	L 43979		15	15
Oct	M 51913		15	15
Nov	D 59966		15	15
Dec	K 67214		15	15
Jan	M 42348		15	15
Feb	P 77784		15	15
Mar	Q 90049		15	15
Apr	R 2732		15	15
MAY	H 7987		15	15
JUN	O 9258		15	15
JUL	D 12600		15	15
Aug	E 13497		15	15
			<u>210</u>	<u>210</u>

3871-a-22

REMARKS

A/c Closed 31-8-19

Ret'd per... *Belgie*

Date 23-8-19 M.F.W. 187 11-9-19.

Clerk... *A. Boyd*

M P 113920 und 11/9/19

RM



M. F. W. 128
4004-5-17-1772-33-1141
L. L. 22320-M. & D. 7953.

AUTHORITY } md2-B3
FOR }
NEW ACC'T. } *Wm. Jackson 19/7/18*

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No. _____

Rank _____ Promoted _____ Reverted _____ Discharge _____

Soldier's Name _____

Battalion _____

Beneficiary _____

Relationship _____

Address _____

Name _____

Address _____

Change of Address _____

1 _____

2 _____

3 _____

4 _____

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
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C. 10014

M. F. W. 128.
 400M-5-17-1772 39-1141
 L. L. 22229-M. & D. 7663.