

NAME

JACKSON HAROLD MENZIE

REGT. NO.

528027

UNIT

CAME

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)

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

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)

DENTAL HISTORY SHEET (M.F.B. 465)

MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

MEDICAL EXAMINATION (M.F.W. 129)

TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)

PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)

DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)

LAST PAY CERTIFICATE (M.F.W. 44)

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)

CAME 5009A.

MFW. 67.

2 Forms

2 Miss-

1 C.D.3

1 97452324

1 1/2 1/2

DEATH

Category

DISCHARGE

Category

DESERTION

Number 528027 Rank Plt

Surname JACKSON

Christian Name Harold Menzie

Units C.A.M.C. Theatre of War France

Date of Service 8-2-18

Remarks Union Street,

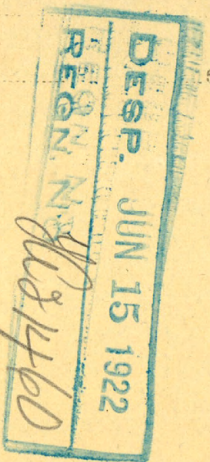
Latest Address 80. Lincoln

Gt

Roll No.

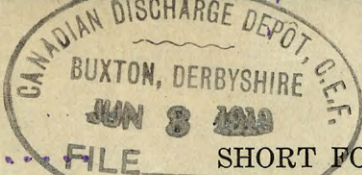
200m.-2-21.M. B. Page 13663.

Number
Surname



Rank

No of
DEPENDENTS.....0



FILE

SHORT FORM.

DISPERSAL AREA.....

12

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

RELIGION. Presb:

NEXT OF KIN. A. K. M. A. R.

1. No.

528027

2 Rank.

Pte

3. Name.

Jackson - Harold Menzies

4. Unit.

C. A. M. C.

C. A. M. C.

5 Date of Discharge

JUL 4 1919

Place

6 Reason for Discharge

CATEGORY

Class 3/18 3/19
No. issued.

TRADE

Barman

OCCUPATIONAL GROUP. 1

SERVICE IN FRANCE.

13 mos.

7. Authority.

No. 2, D.D., Part II, D.O. No. 189.

8. Proposed Residence after Discharge

P.O. Sincor out.

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.?

Harold Menzies Jackson

Signature of Soldier.

10.

CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

No. 2 DISTRICT DEPOT

Date

JUL 4 1919

TORONTO

Signature

For O.C. No. 2 District Depot.

(O. C. Discharging Unit.)

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.S).
11. Equipment Statement Q.M.G. Form (D.O.S. 2), and Clothing
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B. 34).
14. Warrant of Gratitude (Form M.F.W. 2595).
- 15.

Group 6
 No. 4
Q.L.A.
19 6 19

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

252 RATE OF ASSIGNMENT

20			
----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. 528027

Rank Sgt.

Promoted

Reverted

Discharge

Soldier's Name

H. M. Jackson

Battalion

A. M. C. I. D. #2 (formerly 39th Norfolk Regt.)

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

William George Jackson (Brother)

Address

Simcoe St.

Change of Address

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Dec	A53769		20	20	m
Jan	S 67824		20	20	✓
Feb	E 65162		20	20	✓
Mar	L 97869		20	20	✓
Apr	J 12232		20	20	✓
May	F 8057		20	20	✓
June	C 18141		20	20	✓
July	R 27622		20	20	✓
Aug.	F 33484		20	20	✓
Sept.	I 42079		20	20	✓
Oct	B 54414		20	20	✓
Nov	E 50970		20	20	✓
Dec	V 64509		20	20	✓
1919 Jan	H 74596		20	20	✓
Feb	S 76412		20	20	✓
Mar	S 80057		20	20	✓
			3 20	3 20	

M. F. W. 128.
400M. 5-17-1772 39-1141
L. L. 23320-M. & D. 7893.

A/c Closed

Ret'd per.

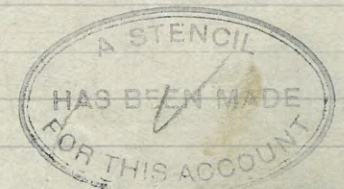
Date 2/7/19

AP
320

Baronia

12/7/19
J. Jackson

m 192.



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

No.				
Rank	Promoted	Reverted	Discharge	
Soldier's Name				
Battalion				
Beneficiary				
Relationship				
Address				

PARTICULARS OF ASSIGNMENT

Name	
Address	
Change of Address	
1	
2	
3	
4	

Date

Cheque
No.Amount
S/AAmount
A/P

Total

REMARKS

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
Wm. G. Jackson (Brother) Lincoln, Ontario Stopped eff. 1/4/19			Plc.

[illegible][illegible]

PARTICULARS OF RENDERING NON-EFFECTIVE:												
MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION	
31/3/18	Bal fwd								2286			
Apr		33							558			
				bat				20	7586			
May		33						20	4996			
				11.60	11.60				3876			
Jun		33		15.80	15.80				3390			
				bat				20	4690			
July		33		" 762 " 56	3.57			20	4333			
					3.57							
"		34		C.a.P				20	5743			
				1192 4870 15/7 8	8.03				4940			
Aug		34			8.03			20				
"		34		C.a.P				20	6350			
				1474 " 16/8 10	3.57							
				19/8 12	3.57				5993			
Sept		34			3.57			20				
"		33		C.a.P				20	7293			
				1297 " 9/9 1	3.57							
				1879 470 16/9 7	3.57				6579			
					714			20				

UNIT AND TRANSFERS

ORIGINAL UNIT - *6am6* *DP2*DATE ACCOUNT FIRST OPENED - *1/12/17*

AUTHORITY

DATE EFFECTIVE

DATE LEDGER SHEET T'S'D

UNIT TRANSFERRED TO

21.7.19 *Canada Section*

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
<i>24/3/18</i>	<i>4240</i>	<i>Etchingham</i>	<i>10747</i>				
			<i>10260</i>				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY

PAY

F.A.

P.F.A.

SUBS'CE ALL'CE

1 - 10

PARTICULARS OF RENDERING NON-EFFECTIVE:

Des to Canada eff 1/7/19. RPP 10307. COD/Beta 1/6/19 COD/Beta 17D2.

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
<i>31/3/18</i>	<i>Balanced</i>	<i>33</i>							<i>2286</i>		
		<i>33</i>		<i>bat</i>				<i>20</i>	<i>558</i>		
<i>May</i>		<i>34 10</i>						<i>20</i>	<i>3586</i>		
				<i>11.27 48.75 15.81</i>	<i>11.60</i>				<i>4996</i>		
				<i>580</i>	<i>446</i>				<i>3876</i>		
<i>Jun</i>		<i>33</i>		<i>bat</i>	<i>14.00</i>			<i>20</i>	<i>3390</i>		
				<i>762</i>	<i>357</i>				<i>4690</i>		
<i>July</i>		<i>33</i>			<i>357</i>			<i>20</i>	<i>4333</i>		
		<i>34 10</i>		<i>C.A.P.</i>				<i>20</i>	<i>5743</i>		
				<i>1192 48.75 15.81</i>	<i>803</i>				<i>4940</i>		
<i>Aug</i>		<i>34 10</i>			<i>803</i>			<i>20</i>			
		<i>34 10</i>		<i>C.A.P.</i>				<i>20</i>	<i>6350</i>		
				<i>1494</i>	<i>357</i>						
				<i>12.1209 12. Bdg.</i>	<i>357</i>				<i>5993</i>		
<i>Sept</i>		<i>34 10</i>			<i>357</i>			<i>20</i>			
		<i>33</i>		<i>C.A.P.</i>				<i>20</i>	<i>7293</i>		
				<i>1297</i>	<i>357</i>						
				<i>1879 47.25</i>	<i>357</i>				<i>6579</i>		<i>Balanced</i>
<i>Oct</i>		<i>33</i>			<i>714</i>			<i>20</i>			
		<i>34 10</i>		<i>C.A.P.</i>				<i>20</i>	<i>7989</i>		
				<i>2075</i>	<i>373</i>				<i>7616</i>		
				<i>2308</i>	<i>373</i>				<i>7243</i>		
		<i>34 10</i>			<i>746</i>			<i>20</i>			

COMPILED BY

CHECKED BY

FORD

FORD

NUMBER 528027 RANK

NAME JACKSON.

Harold Menzie

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1918	Balance forward								72.43		
Nov.	P.P.	33		car				20	85.43		
				2513 13 7a mb. 3/11 4	3 73				81.70		
				2714 " 17/11 22	13 06				68.64		
				2920 " 2/12 48	3 73				64.91		
Dec	"	34 10		car	20 52			20	79.01		
				3051 " 15/12 21	3 73				75.28		
Jan	"	34 10		car				20	89.38		
		101 20			24 25			60			
Feb	"	20 80						20	100.18		
				3224 " 1/1/19 11	3 73						
				982 Del Paris 7/1/19 14	27 99						
				3337 13 7a 4/1/19 18	9 33						
				2353 Del Paris 16/1/19 26	23 32				35.81		
				3462 13 7a " 22	3 73						
Mar	"	34 10		car	64 37			20			
				CP 47401 Ldn 11/3/19 126	24 33						
				all 4796 Cane D 25/3/19 159	9 81				15.77		
		64 90			98 51			40 -			
Apr	"	33		444 " 14/4/19 21	4 87			-	15		
				212 11 2/19 22/4/19 41	7 30						
	1 Cr. Note 6444			165 Staff Elna 12/5/19 50	9 73				40 37		
	Subst. Office 73 6/5/19 held by P.D. V.C. Sep 148	13 50			21 90				74 47 30		
May	P pay	34 10						-	107 47		
June	"	33 -						-	107 47 45		
		100 10	13 50		21 90			-	107 47		
				1240 31/5/19 6	4 87				102 60		

89.38
64.90
154.28
138.51
15.77
33
13.50
62.27
21.90
40.37

15.77
100.10
115.87
21.90
93.97

15.77
100.10
115.87
21.90
93.97
24/6/19

P. 559.
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

AUTHORITY

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	NO.	DATE
			\$	C.			\$	C.			\$	C.				\$	C.	NO.	DATE	NO.	DATE								
MONTH	PARTICULARS				CR.1	CR.2	PARTICULARS				DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER-RED. PAY	SER. ALLGE. ENG.												
Tr/ry	Balance from Canada.														15 00.														
Dec.	P.P.				34	10	Dec. ap.							20															
Jan	P.P.				34	10	Q. 4005-1331-422				1	22		20															
Feb	P.P.				30	80	AR 1094-Caul. 21/12/7				9	73			32 25														
Mar.	P.P.				30	80	AR 11446 mcd. 9-178.				14	60		20	30 40														
					30	80	" 1404. " 30-178.				4	87			63 05														
					34	10	JOP. 232. 22/18. JII.				2	33		20	39 47														
							AR 150. JED 712. JI.				4	06			23 58														
							" 1743. 405. 2/3 J. 22.				3	57			57 68														
							" 1870. " 18/3 J.				4	46			34 82														
															20 22 86														

[illegible]

NAME OF HOSPITAL

ASSIGNED PAY MONTHLY \$ 20⁰⁰ ✓ DATE EFFECTIVE 1.12.17
PAYABLE TO William George Jackson Simeoe Ont. RELATIONSHIP Brother
ASSIGNED PAY MONTHLY \$ _____ DATE EFFECTIVE _____

PAYABLE TO	RELATIONSHIP
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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)

QUITTANCE ROLLS

CASH PAYMENTS

2		3		4	
DATE	NO.	DATE	NO.	DATE	

**ASSIGNED
PAY**

OTHER CHARGES

TOTAL DEBITS

BALANCE

**PAY
WITHHELD
OR
DEFERRED**

PAY
AVAILABLE
FOR
ISSUE

REMARKS

DEFER.	SEP.
-RED.	ALLCE.
PAY	ENG.

MONTH-

R. 1 || C. 2

	DR.	C.R.			
DR. 1		CR. 2	DR. 3	DR. 4	BALANCE

60.

2. 25

540

7

41

58

768

1

980

528027. *Pvt. Jackson H.M.*

DATE		PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS					
DATE	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		1	2	3	4	1	2	3	4
			\$	C.			\$	C.			\$	C.								

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER- RED PAY	SEP. ALLGE. ENG.	MONTH	PARTICULARS	CR.1	C
-------	-------------	------	------	-------------	------	------	------	------	---------	----------------------	------------------------	-------	-------------	------	---

CASH PAYMENTS			ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
2	3	4				CREDIT	DEBIT			

DOLLARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER- RED. PAY	SEP. ALLGE. ENG.
---------	-------	-------	-------------	-------	-------	-------	-------	---------	-----------------------	------------------------

T 17

REGT. No.

528027

NEXT OF KIN

RELATIONSHIP

PARTICULARS

EFFECTIVE
DATE

AUTHORITY

ORIGINAL UNIT
C.E.F.

PLACE OF
ATTESTATION

DATE OF
ATTESTATION

ASSIGNED PAY \$

PAYABLE TO

ADDRESS

STOP PAYMENT FORM
ASSIGNED PAY
RENDERED, DATE

DISCHARGED

PLACE
Tor c

[illegible]

T 1770

DISPERSAL

PAYMASTER

24

REGT. NO.

528027

RANK

NAME (IN FULL)
Pte

J A C K S O N . H . M .

P	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT	IF IN P.F.	(BLOCK LETTERS SURNAME FIRST)
				C.E.F.	WHAT UNIT?	
				<i>same</i>	<i>Molson Bank</i>	<i>Simcoe out</i>
				PLACE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
				DATE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
				ASSIGNED PAY \$	DATE EFFECTIVE	
				<i>20⁰⁰</i>	<i>Closed by Ottawa 3/31/9</i>	
				PAYABLE TO	RELATIONSHIP	ANY CHANGE IN ASSIGNEE OR ADDRESS
				<i>William George Jackson</i>	<i>Simcoe</i>	<i>Out</i>
				ADDRESS		
				STOP PAYMENT FORM	EFFECTIVE	
				ASSIGNED PAY RENDERED, DATE		
				DISCHARGED	PLACE	DATE
						REASON
						AUTHORITY
						IF ENTITLED TO POST DISCHARGE
				<i>Toronto</i>	<i>4.7.19</i>	<i>Demob.</i>
						<i>D.O.189</i>
						<i>Yes</i>

[illegible]

No. 528027 RANK *Pte.*NAME *Jackson, H. M.*T. O. S. *16-11-16* UNIT*(100.139.17-11-16. Q. M. C. Training Depot. #2.*

M. D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916</i>	<i>1916.</i>			
<i>Nov 15</i>	<i>Nov 30</i>	<i>✓</i>		
<i>Dec</i>		<i>✓</i>		
<i>Jan.</i>		<i>✓</i>		
<i>Feb.</i>		<i>✓</i>	<i>Prom. L. Cpl. Prov. 23/1/17</i>	<i>DO 25 of 23-1-17.</i>
<i>Mar.</i>		<i>✓</i>	<i>Prom. L. Cpl. from 1-3-17</i>	<i>100.69 of 2-3-17.</i>
<i>Apr</i>		<i>✓</i>		
<i>May</i>		<i>✓</i>		
<i>June</i>		<i>✓</i>	<i>Prom Sgt</i>	<i>DO 188 of 20-6-17</i>
<i>July</i>		<i>✓</i>		
<i>Aug</i>		<i>✓</i>		
<i>Sept</i>		<i>✓</i>		
<i>Oct</i>		<i>✓</i>		
<i>Nov</i>		<i>✓</i>		

SURNAME.

Jackson.

MA#2

CARD NO.

5038084719

CHRISTIAN NAMES

Harold Menzie.

FOLL.

DO 189 8-7-19 2100.

REGL. NO.

528027.

RANK

Pte.

UNIT

C. A. M. C. G. T. (11. #2.) Depot. Pte. O. R. (2. 10.) Bv.

FORMER CORPS

39th. Norfolk Rifles.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Jackson, John Bart.

RELATIONSHIP TO SOLDIER

Father.

ADDRESS

Simcoe. Ont.

COUNTRY OF BIRTH

Canada. Simcoe, Ont.

DATE

July. 4th. 1897.

PLACE OF ATTESTATION

Toronto. Ont.

DATE

Nov. 15th. 1916.

O/S. 26-11-17 957 2

RIC. 2-7-19 360 76

L. L. 6945. M. & D. 6994.

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

FROM HALIFAX PER

MARRIED *S.S. SUC. A. 26* SINGLE *yes*

WIDOWER

TRADE OR CALLING

Law Student

RELIGION

Presbyterian.

DESCRIPTION.

APPARENT AGE

19.

YEARS

4.

MONTHS

HEIGHT

5.

FEET

9.

INCHES

CHEST MEASUREMENT

35.

INCHES

EXPANSION

3.

INCHES

COMPLEXION

Fair.

EYES

Blue.

HAIR

Fair

DISTINGUISHING MARKS

Not stated.

MEDICAL EXAMINATION.

PLACE

Toronto. Ont.

DATE

Nov. 15th, 1916.

Present Address - Simcoe, Ont.

W.S.B. CLASS. A.

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

M. F. (A. F. B. 103.)

350M.-5-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps. *AMC TRAINING DEPOT No 2*

Regimental No. *528027* Rank *Pte* Name *Jackson, Harold Menzie*

Enlisted (a) *15.11.16* Terms of Service (a) *15.11.16* Service reckons from (a) *15.11.16*

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

Extended *None* Re-engaged *None* Qualification (b) *Law Student*

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				
		~~Prom. to Cpl. D.O. 69²⁵~~	~~Camp Borden~~	~~23-1-17~~	
		~~" Cpl. D.O. 69~~	~~Yoronto~~	~~1-3-17~~	
		~~" " 2/Sgt. D.O. 126~~	~~"~~	~~1-5-17~~	
		~~" " Sgt. D.O. 188~~	~~Camp Borden~~	~~20-1-17~~	
		Embarked	Canada	20-11-17	
		Disembarked	England	7-12-17	✓
		TAKEN ON STRENGTH from <i>Canada</i>	<i>Shiffe</i>	<i>20/1/17</i>	<i>Platoon 349</i>
		S.O.S. to Overseas	Shorncliffe	8-2-18	Part 2 D.O. 40
		DISEMBARKED	HAVRE		
		Having arrived as Reinforcement is taken on the strength of <i>AMC Gen</i>	Field	8-2-18	<i>NR. Pl 2 ord 9</i>
		<i>To 4th Cdn Div</i>		17-2-18	<i>NR/973</i>

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) e.g. Signaller, Shoing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.]

CERTIFIED CORRECT.
13 FEB 1918
9-2-18
CAN RECORDS, LONDON

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				
23-2-18	13 th Bn	Posted to 13 th Bn		22-2-18	B213 Pt 10 of 6 3/18
23-2-18	"	adms 4 th Div MC 2112/1918		23-2-18	B213 Pt 10 of 6 3/18
7-12-18	"	1.95 of 13 th Bn from battle		15-11-18	B213 Pt 266 of 12-18
11-1-19	"	awarded Good Conduct Badge		8-1-19	B213 Pt 2 of 1-19
1-2-19	"	granted 14 days leave in Paris		27-1-19	B213
8-3-19	13 th Bn	Resigned from 13 th Bn		1-3-19	B213 - Lt 39593/1/2.
		and posted to 6 th Bn			Pt Orders 10/20-3-19
		casualty to Shorncliffe			
		for course of study in			
		Khaki University			
		auth. Gen. Corp. 6 S. 109/9-1/22-2-19			
		6 S. 109/9-1/22-2-19			
		6 S. 109/9-1/22-2-19			
		6 S. 109/9-1/22-2-19			
17.3.19	Cause. Co. Cy	T.O.S. from 13 Bn for course at Khaki University of Canada.	Shorncliffe	7.3.19	Pt 15 64.
17.3.19.	do.	Granted leave with pay and allowances whilst on course at British University.	do.	7.3.19.	Pt ii 64.
24-3-19	do.	Repatriated from leave.	do.	20-3-19	Pt ii 70.
16-4-19	do.	S.O.S. Cause. Co. Cy.	do.	16-4-19	Pt ii 90.

H. Christie

captain. 6. Bn.
 1st Major. Actg. Adj.
 Gen. Sec. of H.Q. 13th Bn.
 1st Lt. 13th Bn.

Cause. Co. Cy. Cause. Co. Cy.

SERVICE AND CASUALTY FORM (Part I).

Army Form B. 103-1.
Part I.

(1)*Substantive rank *Acting rank [To be entered in pencil to facilitate alteration.]	(2) Regiment or Corps	(3) Regtl. No.
(4) Surname		
(5) Christian Names		
(6) Army Form, number of, Attestation } Form or Record of Service paper }		
(7) Whether of British or of Alien origin [vide A.C.I. 578 of 1918]		
(8) Date of birth as stated on enlistment		
(9) (a)		

(10) Enlistment (b)	(11) Engagement (c)
(12) Service reckon from (date)	(13) Special conditions (if any) of enlistment (d)
(14) Any subsequent variations (if any) } of conditions of service }	Initials and Rank of an Officer.

(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) (Record of Occupation in Civil life (vide Army Order 93 of 1917)
				Industrial Group No.
				Trade or Calling
				Married or Single
				Particulars of Trade Test
				Occupation Cards despatched on (date)
				Second Occupation Card despatched on (date)

(17) Next of Kin			
(18) Demobilizer (f)	(Place)		(Signature of Posting Officer)
(19) Pivotal-man (f)	(Date)		
(20) Qualifications (g)	or (21) Corps trade and rate		
(22) Extended {	(23) Re-engaged {		
(24) Miscellaneous entries:—			

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [vide A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoeing-smith, &c.

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W1889—P2 1150 1M 5/18 G.W.P.Co (3490)

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I, 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer

9.5.19. C.A.M.C. 108 SOS to Lt. Sp. Gooder 8.5.19
Cas Depot Warp. E' Hill for Duty

W. H. Hargrove
Capt.
Officer Commanding C.A.M.C. Cas. Coy.

8/6/19. Attached C.D.D. Buxton for return to Canada, Part II Order No. 133

25.6.19. Ceases to be attached C.D.D. Buxton on proceeding to Canada, Part II Order No. 147

S. Viegles
Lt. for Lt. Col.
Commanding Canadian Discharge Depot.

JUN '25 1919 O.S. T. O. S. No. 2 DISTRICT DEPOT, TORONTO 1919 PART II D. O. 189
JUL 4 1919 S.O.S. (DISCHARGED FROM H. M. S.) No. 2. DIS. D. POT. PART II D. O. 189

W. C. Roberts

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

Nothing to be written in this margin.

TLH Rank Name JACKSON, Harold Menzie, ✓
Unit If in perm. Corps, }
Dft AMCTD No 2, to AMCTD What Unit? }
Place and Date of Enlistment Toronto, 15th. Novr. 1916. ✓
Place of Birth Simcoe, Ont ✓
Canada
Name and Address, Next-of-Kin John Bartholomew Jackson, ✓
Simcoe, Ont. Relationship Father. ✓

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

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		7-12-17	S/S SCOTIAN
15-12-17	Camb. S.	Taken on strength	Pt S'cliffe	20-11-17	RE-349.
9-2-18	"	S.O.S. on proceeding O'Sea	"	8-2-18	Camb. Gen — 40 Pt II 9 d/20-2-18.
6-3-18	13th Amb	TOS from Camb. Gen.	Field	23-2-18	Camb. Gen — 10. Pt II 12 d/4-3-18.
17-12-18	13th Amb	Granted G.C. Badge	Pt Field	15-11-18	Pt II 66.
17-3-19	Camb. S.	TOS from 13th Amb.	" S'cliffe	7-3-19	13th Amb. Cmb. — 64. 76 P.O. 10 d/20-3-19. cancelled by R.F. 30 7/22-3-19
22-4-19	cancelled	of 13th Amb	Pt Bexhill	17-4-19	— 23
16-4-19	cancelled	SOS to 13th Amb	Pt Schiffs	16-4-19	— 20 cancelled by 96 d/16-4-19
9-5-19	cancelled	SOS to 13th Amb	Pt Bexhill	9-5-19	— 108 C.H. Hill 30.1.30. 12.5.19

F.F.B. 103 CHECKED

13 FEB. 1918

JACKSON, F.M.

528027

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.				
6-6-19	CHEWILL	AD to CDD Burton	Pte. Lyminge	2-6-19	Pt DDD 34 TOS. CDD Pt. 60. 160 9 14 19.
		84-I-4-date 25/6/19.			
11-7-19	LDB.	SOS to L & F & Burton	Burton	25/6/19	LD. 160
		SOS TO CAN. CAMO. ALLEO, I			

To be made out in duplicate.

H.Q. 54-21-23-51

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.M.C. TRAINING DEPOT NO. 2

(2) Regimental Number.....528027

(3) Full Name of Soldier.....Harold Menzie Jackson

(4) Place of Birth.....Simcoe, Ont., Can.

(5) Are you married, or not?.....No

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

(b) Present Postal Address.....

(7) Are you a widower?.....No

(8) Have you any children?.....

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

Also their names and ages.....

(9) Is your Father alive?.....Yes......John Bartholomew Jackson.....

If so, state name and address.....Simcoe, Ont......

(10) Is your Mother alive?.....No......(Stepmother: Mary Cruden Jackson.....

If so, state name and address.....same 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.

(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.....

Julian Mount.....Major A.M.C.
Officer Commanding.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge

Class "A" No.

318373

THIS IS TO CERTIFY that No. 528027 (Rank) Private

Name (in full) Harold Menzile Jackson enlisted in

the Canadian Army Medical Corps

CANADIAN EXPEDITIONARY FORCE at Toronto on the

day of Nov 19 16

HE served in France in 13th Field ambulance

Demobilization.

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

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

Age 21

Height 5.10

Complexion Fair

Eyes Grey

Hair Fair

H. Jackson
Signature of Soldier.

Marks or Scars

2 lacer. left arm

R. W. [Signature]

Issuing Officer.

Date of Discharge

No. 2 DISTRICT DEPOT

JUL 4 1919

TORONTO

For

O.C. No. 2 District Depot.

Rank

Date JUL 4 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.

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. 528027 Rank Private Surname Jackson
 (Given name in full) Harold Menzie
 Unit or Corps C. Amc. Birthplace Canada

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

I. GENERAL DESCRIPTION:

Physique Medium Weight 135 lbs. Height 5 ft. 11 in. Colour of Eyes Grey
 Nutrition 1000
 Pulse 70
 Condition of arteries 1000
 Vision Rt. 20 Left 20
 Hearing (conversational voice) Rt. 21 ft.
 Left 21 ft.

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

Vac. Mark & Arm

Opinion as to general health and physical condition 1000

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 me

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 Buxton.....(Overseas)
Date 6/6/19..... Signed J. J. Bryan 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 H. Jackson.....

(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.)

2. I.

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters)

Jackson, H. M.

REGIMENT

C.A.M.C.

RANK

Pvt.

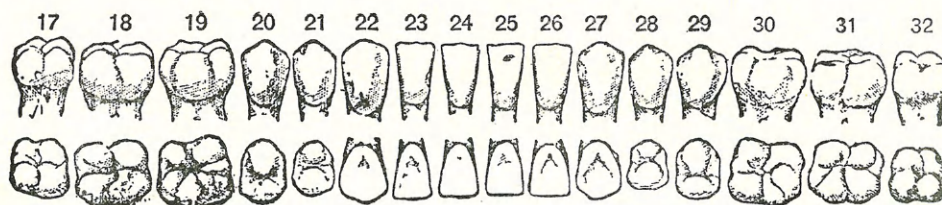
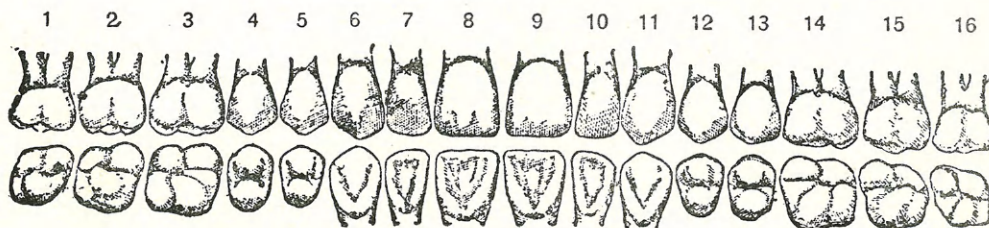
No.

528027

Date of Examination in England

10/6/19

Date of Examination in France



PRESENT DENTAL REQUIREMENTS

1. FILLINGS

2 - 30 - 31

2. EXTRACTIONS

} nil

3. CROWNS

4. DENTURES

(a) Full Upper

(b) Part Upper

(c) Full Lower

(d) Part Lower

} nil

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

} NO

Signature of Dental Officer

J. H. M. Cap.

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.

ORIGINAL MEDICAL HISTORY SHEET.

Surname **JACKSON**

Christian Name **HAROLD MENZIE.**

Examined { on **15th** day of **NOVEMBER** 191 **16**
at **Toronto, Ont.**

Approved by

M. B. Jackson

Birthplace { City or Town **Simcoe**
County **Norfolk, Ont.**

Rank **Capt.** M.O.

Apparent age **19 years**

Trade or occupation **Law Student**

Height **5** Feet **9** Inches.

Weight **146** Lbs.

Chest measurement { Minimum **32** inches.

Maximum expansion **35** inches.

Physical development **Fair**

Small-Pox Marks **nil**

Vaccination Marks { Arm Right Left.
Number **x** **1**

When Vaccinated last **Childhood**

(a) Marks indicating congenital peculiarities or previous disease

nil

(b) Slight defects but not sufficient to cause rejection

nil

Enlisted on **15th** day of **November** 191 **16** at **Exhibition Camp, Toronto.**

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	A.M.C. Training Depot #2.	528027		15. 11. 16.
Transferred to	same of			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
Buxton	6/6/19	Catg A	H. L. Bryan Capt

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

Surname.

Christian Name.

[illegible]

ATTESTATION PAPER.

ORIGINAL
No. 528027

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... Jackson
- 1a. What are your Christian names?..... Harold Menzie
- 1b. What is your present address?..... Simcoe, Ontario.
2. In what Town, Township or Parish, and in what Country were you born?..... Simcoe, Ont. Canada.
3. What is the name of your next-of-kin?..... John Barth^{James} Jackson
4. What is the address of your next-of-kin?..... Simcoe, Ont.
- 4a. What is the relationship of your next-of-kin?..... Father
5. What is the date of your birth?..... July 4th 1897
6. What is your Trade or Calling?..... Law Student
7. Are you married?..... No
8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... Yes
9. Do you now belong to the Active Militia?..... Yes
10. Have you ever served in any Military Force?..... Lt. 39th Norfolk Rifles. (prov)
If so, state particulars of former Service. Qualified Sergeant Infantry.
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

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Harold Menzie Jackson, do solemnly declare that the above are answers made by me to the above questions and that they 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 15 November 1916. Harold Menzie Jackson (Signature of Recruit)
Julian R. Broughton (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Harold Menzie Jackson, 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 15 November 1916. Harold Menzie Jackson (Signature of Recruit)
Julian R. Broughton (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 Simcoe this 15 day of November 1916.

Calvarien (Signature of Justice)
Lieut Colonel

Description of Harold Menzie Jackson on Enlistment.

Apparent Age.....19.....years.....4.....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.....9.....ins.

Chest-measure-ment { Girth when fully expanded.....35.....ins.
Range of expansion.....3.....ins.

Complexion.....Fair.....

Eyes.....Blue.....

Hair.....Fair.....

Religious denominations. { Church of England.....
Presbyterian.....Pres......
Methodist.....
Baptist or Congregationalist.....
Roman Catholic.....
Jewish.....
Other denominations.....
(Denomination to be stated.)

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.....Nov. 15.....1916.....

Place.....Lorain's.....

M. B. Jackson
Capt.
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.

.....Harold Menzie Jackson.....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.

Julian D. Boyd.....(Signature of Officer)
Major J.M.C.

Date.....15.....11.....1916.....



Library and Archives
Canada

395 Wellington Street
Ottawa, ON K1A 0N4

Bibliothèque et Archives
Canada

395, rue Wellington
Ottawa, ON K1A 0N4

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TITLE/TITRE _____
RG 150 MG _____ R- _____ SERIES/SÉRIE _____
ACCESSION 1992-93/166 VOL _____ PAGE(S) 36
BOX/BOÎTE 4746-64 REEL/BOBINE _____
FILE/DOSSIER Jackson, Harold Menzie #528027
DATE 14/12/2011