CERTIFIED TRUE COPY
SUBSTITUTED FOR TRIPLICATE
K.R. & O. PARA. 1904.

R. 101.
10m. 12058. 17/10/17.

UNIT ..... Regimental No. 453

ATTESTATION PAPER.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS)
1. What is your name?	Ralph R Henson
2. In what Town, Township or Parish, and in what Country were you born?	St Catharines Ont.
3. What is the name of your next-of-kin?	W. H Henson
4. What is the address of your next-of-kin?	615 Bathurst St. Toronto Ont
5. What is the date of your birth?	May 23rd.
6. What is your Trade or Calling?	Civil Engineer
7. Are you married?	No
8. Are you willing to be vaccinated or re-vaccinated?	Yes
9. Do you now belong to the Active Militia?	Corp. 9 Inf. Bde.
10. Have you ever served in any Military Force? If so, state particulars of former Service.	No.
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

R R Henson (Signature of Man).
W J Saunders (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, R R Henson, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the **Canadian Over-Seas Expeditionary Force**, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

R R Henson (Signature of Recruit).

Date April 13th 1915 W J Saunders (Signature of Witness).

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, R R Henson, 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.

R R Henson (Signature of Recruit).

Date April 13th 1915 W J Saunders (Signature of Witness).

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at St John N.B. this 13th day of April 1915

E E Sell (Signature of Justice).

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

Certified true copy
for Mgr i/c Records, Ottawa

R Hend (Approving Officer).

Description of Ralph Henson **on Enlistment.**

Apparent Age 28 years 11 months.
(To be determined according to the instructions given in the Regulations for Army Medical Service.)

Height 5 ft 7¾ ins.

Chest measurement.
- Girth when fully expanded 37 ins.
- Range of expansion 4 ins.

Complexion Ruddy
Eyes Blue
Hair L Brown

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

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.)

1 Voc. L. Arm.

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 April 13th 1915 — S Hutton

Place Toronto Ont. — Capt Can A.M.C.

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.

Ralph R Henson 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.

C.W.P. Ramsay (Signature of Officer).

Date June 11th 1915

C.E.F. REGIMENTAL DOCUMENTS
WAR SERVICE RECORDS D.V.A.

HEWSON RALPH ROWLEY 453 C O R C C 23007

DEMOB.



FORM D.M.S. 1300.
8137—50m—28/2/17.

Surname	Christian Name or Names	Reg. No.
Hewson.	R. R.	453.

Rank	Unit	Co.	Troop	Batty.
Spr.	CORCC.			

Hospital	Date of Admission
2/1. Highland Fld. Amb.	15-5-17.
Transferred 9 Cas. Clg. Station	Hosp. 19.5.17
51. Gen. Etaples.	Hosp. 23.5.17.
	Hosp.
	Hosp.

Diagnosis

NS.

(1)
Later Diagnosis (if changed) V.D.G. fl

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Date

D/s to Base Det. 1-7-17.

REMARKS

C.L. 30-5-17. A.294.
(5?)6.6.17 A295
10.7.17. a 307.
8.8.17 a 315 R.F.B Reg. unit 13.7.17

A.M.D. 2 Dept.
Bch. of D.G.M.S. O.M.F.C. London

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

"D" 2. CARD NO.

SURNAME. Hewson

CHRISTIAN NAMES Ralph R.

REGL. No. 4513 RANK Pte.

UNIT Can. Overseas Railway Construction Corps.

FORMER CORPS Corps of Guides.

30 S & Demob 12-4-19
FOLL. 1070 17-4-19
Can. Pte. F & L 2

NEXT OF KIN.

NAMES IN FULL Hewson, W. H.

RELATIONSHIP TO SOLDIER

ADDRESS ~~615 Bathurst St. St. John N.B. Can.~~
41 Hewett Ave. Toronto Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada St. Catharines Ont. DATE

PLACE OF ATTESTATION St. John. N.B. DATE Apl. 13 - 1915

O/S 12-6-15 4/.

R/C. 10-4-19. 303/20 Spr.

L. L. 94504. M. & D. 6512.

M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING Civil Engineer RELIGION Baptist or Congregationalist

DESCRIPTION.

APPARENT AGE 28 YEARS 11 MONTHS

HEIGHT 5' FEET 4 1/4 INCHES

CHEST MEASUREMENT 37 INCHES EXPANSION 4 INCHES

COMPLEXION Light EYES Blue HAIR Lt. Brown

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE Toronto Armouries DATE Apr. 13-1915

Deceased.

9c.

Smith

Number 453 Rank Spr

Surname HEWSON

Christian Name Ralph Rawley

Units C.D.R.C.C. Theatre of War France.

Date of Service 25-8-15

Remarks

Latest Address 41 Hewitt Ave,
Toronto, Ont.

Roll No. B

200m.-2-21.M. Page 13862

DESP. JUN 8 1922
REQN. NO. 4/37721

NAME Hewson. R. R.

RANK AND CORPS Spr C. O. R. C. Corps.

REGT'L No. 453.

H. Q. FILE No. 649.

FOLLOWS No.

FOLLOWS

CABLE

NO.	DATE

NATURE OF CASUALTY.

L. L. 20497—M. & D. 7908

M. F. W. 42—50M.—5-17.
H. Q. 172-39-8s3.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
a292	#2/1 Highland Fd Amb.	15-5-17.	Not stated.
a295	#9 Can Clg Stat	19-5-17	V.D.G.
a307.	#51 Gen. Etaples	23-5-17	V.D.G.
a307.	Disc to Bde. Details	1-7-17	V.D.G.
a315	Reg. Unit	21-7-17	" " "

FORM R. 149.
7106—250m—7/2/17.

Name HEWSON Ralph *Rank* ~~Pte~~ Spr *Reg. No.* 453

Unit C.O.R.C.C.

Next of Kin CANADA

1917	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
May 15	2/1 Highld Fld Amb	Not Stated		A292		
" 29	No. 9 C.C.S.		V?D?G.	A 295.		
May 23	No 51 Gen Hsp Etaples		V D G	A307		
Jly 1	Dis Base Details		V D G	A307		
13-7	Reported Unit		do	1-31/5		

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List

No 453, RANK Pte. NAME Hewson. Ralph. R.

T. O. S. 13-4-15, (C.O. 29 of 23-4-15.) UNIT San. S/S. Railway Const. Corps.

M. D. 6.

PAID FROM	PAID TO	SIG OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915.	1915.		Spr.	
apr. 13.	apr. 30.	✓		
	May.	✓		
	June.	✓		

UNIT SAILED
JUN 14 1915

MEDICAL HISTORY SHEET.

Surname Hewson *Christian Name* Ralph R.

Examined { on 13 April day of April 1915
at Toronto Ont.

Approved by

Rank M.O.

Birthplace { City or Town St. Catherines
County Lincoln

Apparent age 30 yrs.

Trade or occupation Civil Engineer

Height 5 Feet 8 Inches.

Weight 150 Lbs.

Chest measurement { Minimum 36 inches.
Maximum expansion 4 inches.

Physical development Good

Small-Pox Marks

Vaccination Marks { Arm Right. Left.
Number 2

When Vaccinated last April 21 1915

(*a*) Marks indicating congenital peculiarities or previous disease Mole on left shoulder

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

Date.	Fit or Unfit.	Examined for Re-engagement.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
		M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
		M.O.
		M.O.
		M.O.

Enlisted on 27 *day of* September 1914 *at* Toronto

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	Cyclist Corps	453	Good	Sept. 27 1914
Transferred to	C.O.R.C.C. April 13 1915			April 13 1915

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Wolley	25.3.19	—	A Bonk 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.

M. F. B. 313.

200M—11-15.
H. Q. 1772 39-429.

Surname Hewson Christian Name Ralph R.

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.

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

A.D.M.S. HEADQUARTERS CANADIAN [illegible] 25 MAR 1919 WITLEY, SURREY

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. 453 Rank Sgt. Surname Hewson
(Give name in full)
Ralph Rawley
Unit or Corps 3rd Can Res Bn Birthplace St Catherines, Ont.

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

1. **GENERAL DESCRIPTION:**

Physique Good Weight 150 lbs. Height 5 ft. 8 in. Colour of Eyes Blue

Nutrition Good

Pulse normal

Condition of arteries normal

Vision Rt. 6/6 Left 6/6

Hearing (conversational voice) Rt. 20 ft.

Left. 4 ft.

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

✓

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.

N/D

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Bradley (Overseas)

Date 25-3-19 Signed N.M.Chamberlain 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 .....

(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 Medical Board.)

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

[OVER]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-39-1142.

C.A.D.C. 5009A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

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.

NAME OF SOLDIER (Block Letters) HENSON . B .

REGIMENT 3rd Can Rec Bn RANK Spr No. 453

Date of Examination in England _____ Date of Examination in France _____



PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT ?

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

- (*a*) In Canada
- (*b*) In England
- (*c*) In France

Signature of Dental Officer _____

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 453 (Rank) Spr.

Name (in full) Ralph Lawley Hewson enlisted in the C.O.R.C.C.

CANADIAN EXPEDITIONARY FORCE at St. John N.B. on the 13th day of April 1915

HE served in France & Belgium

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 32

Height 5' 7 3/4"

Complexion Light

Eyes Blue

Hair L. Brown.

Marks or Scars none.

R. L. Hewson

Signature of Soldier

Date of Discharge

No. 2 DISTRICT DEPOT
APR 12 1919
TORONTO

For Issuing Officer
O.C. No. 2 District Depot.

Rank

Date APR 12 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.

M.F.B. 39A.
1049-D.P.-300M-11-18.
H.Q. 1772-39-882.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. (Rank)

Name (in full) enlisted in

the

CANADIAN EXPEDITIONARY FORCE on

day of 19

HE served in

and is now discharged from the service by reason of

(Medical) (Demobilization)

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

Age

Height

Complexion

Eyes

Hair

Marks or Scars

Signature of Soldier

Date of Discharge

Issuing Officer

Date 19

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an envelope to the Secretary, Militia Council, Ottawa, Canada.

SERVICE AND CASUALTY FORM (Part I).

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

Nothing to be written in this margin.

W1889—P21150 1M 5/18 G.W.P.Co (3490)

(1)*Substantative rank *Acting rank *[To be entered in pencil to facilitate alteration.]	(2) Regiment or Corps
(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 reckons 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.

(Authority) (*date*)

(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.

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

Attached C.C.C. Kinmel Park for return to Canada. Part II Orders No._____. Ceases to be attached C,C,C, Kinmel Park on embarking for Canada, Part II Order No: 79 3/4/19

Commanding 2 Wing, Kinmel Park Camp

Capt.

Embarked Liverpool
S.S'Lapland' 3 April 1919.

APR 3 1919 O. S. T. O. S. No. 2 DISTRICT DEPOT, TORONTO PART II D. O. 112

APR 12 1919 S.O.S. No.2 District Depot

Part II, D.O. No. 107

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

Nothing to be written in this margin.

SERVICE AND CASUALTY FORM (Part I).

(1)*Substantive rank SPR

*Acting rank

*[To be entered in pencil to facilitate alteration.]

(2) Regiment or Corps: CORPS 455

(4) Surname HEWSON.

(5) Christian Names Ralph. R.

(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*) 13th April 1915.

(11) Engagement (*c*)

(12) Service reckons from (*date*)

(13) Special conditions (if any) of enlistment (*d*)

(14) Any subsequent variations (if any) of conditions of service

(Authority) (*date*)

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—P21150 1M 5/18 G.W.P.Co (3490)

Report Date.	Report From whom received	(B) Authority of Part II. of Orders	(C) 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.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
			Embarked for England from Canada	St John	per SS Herschell	14.6.15
			Arrived in England	Longmoor	25.6.15	
26.8.15	Depot Sub Unit (1)		Embark. Overseas Force	Southampton	25.8.15	Nom Roll
5.10.15	GO R66		Proceeded to England	Belgium	5.10.15	Nom. 156.
1.11.15	" "		Proceeded O/ Seas	Longmoor	1.11.15	Nom Roll
21.4.16	" "		Granted Leave from	Field	8.4.16	Nom. 17
30.5.17	" "		Adm 2/1 High. Field Amb	"	15.5.17	GL A 292
6.6.17	" "		From No 9. C.C. Station	"	19.5.17	— A 295.
10.7.17	" "		" No. 51 Gen Hosp.	Etaples	23.5.17	— A 307.
" "	" "		Disp. Base Details	"	1.7.17	— A 307.
30.6.17	" "		Awarded 1 G.C. Badge	Field	23.6.17	Nom. 106
8.8.17	" GL		Disp. to reins	"	27.7.17	GL A 314 D&S.
26.1.19	"		Posted to C R.G.A.	"	17.1.19	Nom. 4.

Nothing to be written in this margin.

28-3-19 Witley Struck off strength to M. D. No. _____, Kinmel Park, Rhyl.

Witley 28-3-19 D.O. 87

Lieut.

Rank Sapper Name HEWSON, Ralph, R. Reg'l No. 453

Unit Can.Rly.Constr.Corps. If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment St John N.B. 13th April.1915 Place of Birth St Catherines Ont.

Name and Address, Next-of-Kin W.H. Hewson
615 Bathurst St, Toronto. Relationship 2

Assigned Pay Monthly $ ✓ Payable to

Relationship

Separation Allowance $ ✓ Payable to

Relationship

Discharge, Date and Place 1.00 10 Reason Character

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
June 30								10									
July 1	31	31	1.00	31	31	10	3 10		44 10	19		5			5	39 10	
								13									
Aug 1	31	31	1.00	31	31	10	3 10	39 10	73 33			34 07			34 07	39 26	
Sept 1	30	30		30	30		3	39 26	72 26			10 71			10 71	~~61 55~~ 61 55	
Oct 1	31	31		31	31		3 10	61 55	95 65			29 20			29 20	66 45	
Nov 1	30	30		30	30		3	66 45	99 45			58 40 17 84			76 24	23 21	
Dec 1	31	31		31	31		3 10	23 21	57 31			17 43			17 43	39 88	
1916 Jan 1	31	31		31	31		3 10	39 88	43 98			14 44			14 44	56 54	
Feb 1	29	29		29	29		2 90	56 54	88 44			13 95			13 95	44 49	
Mar 1	31	31		31	31		3 10	44 49	108 59			14 44			14 44	91 15	
				275			27 50	10 13	312 63			226 48			226 48	91 15	

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						

MARRIED OR SINGLE S.

PLACE OF BIRTH St. Catherines, Ont.

NAME AND ADDRESS OF NEXT OF KIN H. H. Hewson.
615 Bathurst St. Toronto.

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

1st 12 @ 50c

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

DATE	PAY NO. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE NO. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY NO. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 NO	1 DATE	2 NO.	2 DATE	3 NO.	3 DATE	NO.
Mar 31			275				27	50						10 13	312 63							
apl 1-30	30	1.00	30		30	10	3								33							
May 1-31	31		31		31		3	10							34 10	354				25	8/4/16	
June 1-30	30		30		30		3								33			384				
July 1-31	31		31		31		3	10							34 10			441				
Aug 1-31	31		31		31		3	10							34 10			492				
Sept 1-30	30		30		30		3	.							33			530	9/9			
Oct 1/31	31		31		31		3	10							34 10			577	10/10			
Nov 1-30	30		30		30		3								33			608	10-11			
Dec 1/31	31		31		31		3	10							34 10			664	5/12			
			55	00																		
Jan 1/31	31		34	10											34 10	689	22/12	745	10/1			
Feb 1/28	28		30	80											30 80			785	5/2			
Mar 1/31	31		34	10											34 10			822	11/3			

MOTIONS, &c.

Effective Date	Authority

HOSPITAL, &c.

Name of Hospital

Reg'l No. 453 Rank Sapper Name Hewson, Ralph. R.

If in Permt. Corps What Unit | Unit C.O.R.C.C. | Transferred to | Date | Authority

Permanent Force Allowances | Transferred to | Date | Authority

Place of Attestation St John. N. B. | Transferred to | Date | Authority

Date of Attestation April 13th 1915 | Transferred to | Date | Authority

Assigned Pay Monthly $ Nil Date Effective

Payable to Relationship

Assigned Pay Monthly $ Date Effective

Payable to Relationship

Stop-Payment Form (Assigned Pay) Rendered (Date) Effective Reason

Discharge Date and Place Reason and Authority

Account Transferred to Non-Effective Branch (Date)

Account Transferred to Officers' Pay Branch (Date)

Acquittance Rolls 2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
							221 48					221 48	91 15	41 00			
													124 15				
	25 84/16						13 63				48 64		62 30	95 95			
384								13 63					13 63	115 32			
441								13 95					13 95	135 44			
492								13 95					13 95	155 62			
530	5/9							13 95					13 95	17467			
577	10/10							13 95					13 95	19482			
603	10/11							17 44					1744	21038	165		
664	5/12							17 44					1744	22704	180		
745	10/1						8 72	13 95					22 67	23847	195		
785	5/2							13 95					13 95	25532	210		
822	11/3							17 44					1744	27198	225		

453 Spr Hewson R.

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS		
	No. of Days	Rate	Amount $	Amount c.	No. of Days	Rate	Amount $	Amount c.	No. of Days	Rate	Amount $	Amount c.				1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	1	2	3
Apr	30		33								15				48			13	8/4						17 44	
May	31	1/10	34	10					11	.50	5	50			39 60			65	5/5						17 84	
June	30		33						30		15	80			48											
July	31		34	10											34 10											
Aug	31		34	10					31		15	50			49 60											
Sept	30		33												33	291	4/9			CBD				17 85		
																232	4/8	194	16/7	195	7/7			14 28	6 24	6 25

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLGE. ENG.
		~~Ack. 392 88~~							392 88		
Oct.	P.P.	34 10							426 98		
		34 10									
Nov.	P.P.	33		A.R. 352 7/10/17 L.O.R.L.L.	14 28						
Dec.	P.P.	34 10							479 80		
		67 10			14 28				34 10		
Jan.	P.P.	34 10		A.R. 407 10/11/17 L.O.R.L.L.	14 28				513 90		
									32 12		
				" 449 7/12/17 "	892				481 78		
				" 498 22/12/17 "	892				~~479 80 Ack.~~		
		34 10			32 12				30 30		
Feb.	P.P.	30 80		" 534 5/1/18 "	10 71				513 59		
				" 608 5/2/18 "	14 28				24 99		
		30 80			24 99				487 59		
Mar.	P.P.	34 10		" 655 4/3/18 "	892				34 10		
		34 10			892				521 69	38	.50
									512 77		

son R.P.

CASH PAYMENTS 2	CASH PAYMENTS 3	CASH PAYMENTS 4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
										Granted WP 50c per day 1 4/17 B.o. 71 13 7/17.
44				X	17 44	302 54				
84					17 84	324 30				Ceases to draw WP eff. 12/5/17 50 91. 19/5/17.
				15	15	339 30				Overbs. £13 10s W.P. 30 days @ 50d
				21 00	21 -	370 40				V.D. 28/5 - 4/7/17 35 dys. D. 0 10 97/7/17
					- -	420				
24	125			15 50	60 12	392 88				Overbs. 31 days Aug a/c W.P. @ 50d per day.

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	* EN CA
EFFECTIVE DATE:–		EFFECTIVE DATE:–	
AMOUNT:–		AMOUNT:–	

NAME, ADDRESS, RELATIONSHIP & AUTHORITY | WHEN PAYEE OF A.P. IS THE SAME AS PAY WORD "SAME" ONLY TO BE WRITTEN IN

L 3029
Willey
&
Willey
MD 2

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES W BY INSERTION OF DATE CHARGED IN RED IN

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY		AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY
6-1-19	1461	60RGG.	503	~~9 33~~			
3-2-19		London	£14	~~15 13~~			
11-2-19	4313	3rd 6R Bn.	£3	~~4 60~~			
				92 06			Sailed to Canada

PARTICULARS OF RENDERING NON-EFFECTIVE:– Dis to Can 28-2-19 NOR 3029 Willey

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PART
March	Bal Fwd.			
April	P. Pay	33		AR 28. 8/4/
		33		
May	P.P.	34 10		" 202 8/5/1
		34 10		
June	P.P.	33 –		" 392 3/6/18
				C.P. 10004 11/
				A.R. 516 14/6/1
				" 243 14/6/
		33		
July	P.P.	34 10		" 588 9/7/18
		34 10		
Aug	P.P.	34 10		816. 8/
				Forfeits 2 da
				25/6/18 20
				8/8/18
		34 10		
Sept	P.P.	33 –		1022 6/9/
		33		
Oct–	"	34 10		1146 "
		34 10		
Nov	"	33		1313 "
				300 Victory loan
				1349 Coy
Dec	"	34 10		
Jan 19	"	34 10		
		101 20		3/2/19
Feb	"	30 80		Cash Pay

Gen Hosp 300 =
Can Sept 1 Aug
from Sept 1 Aug

COMPILED BY..... John Doyle
CHECKED BY..... D. Doyle

SEPARATION ALLOWANCE. * ENGLAND OR CANADA.

EFFECTIVE DATE:-

AMOUNT:-

NAME:- HEWSON. Ralph R.

NUMBER:- 453

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT

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

L 3029
Withy
&
Withy
MD 2

UNIT AND TRANSFERS

ORIGINAL UNIT:- C.O.R.C.C.

DATE ACCOUNT FIRST OPENED:-

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO

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

NT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
33				
3				
10				
06			Sailed S Canada Eff 3/4/19	
			L-37	

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 -	- 10		
	L/Bal 3 4 2 81	2 0 6 Bal 2 8 0 75		

IVE:- Sto St Can 28-2-19 NOR 3029 Withy 15-2-19 Withy MD 2

Can. War Loan 300 from def. Pay

	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
								512 77	387 50	
	33		aR 28. 8/4/18 coRcc	14 28				531 49	402 50	
	33			14 28						
	34 10		" 202 8/5/18 "	8 92				356 67	417 50	
	34 10			8 92						
	33 -		" 392 3/6/18 "	8 92						
			C.P. 10004 11/6/18	3 8 93						
			A.R. 516 14/6/18 "	3 57						
			" 243 14/6/18 "	97 33				440 92	432 50	a/c engrs Park.
	33			148 75						
	34 10		" 588 7/7/18 "	7 14 -						
	34 10			7 14				467 88	444 50	
	34 10		816. 8/8 "	8 9 -						
			Forfeit 2 days pay R.W. and L. 25/6/18 to 8/8/18 inclusive 2.0.50 28209 18/7 O.C.		2 20			490 86	460 -	
	34 10			8 9 -	2 20					
	33 -		1022 CoRCC 4/9. 4	8 92.				514 94	475	
	33			8 9 -						
	34 10		1146 " 3/10 7	9 33 -				539 71	190	
	34 10			9 33					140	
	33		1313 " 13/11 8	1 8 66 -				554 05		
									205	
			$300 Victory loan from defence pay 34	300 -				254 05	205	
			1349 CoRCC 6/12 52	18 66 -				235 39		
	34 10			337 32				269 49		
	34 10							303 59	235	
	101 20		3/2/19	337 32						
	30 80		Cash Payment 14-0-0					334 39		

NUMBER 453 RANK Pte NAME Hewson R. R.

MONTH	PARTICULARS	Cr. 1.		Cr. 2.		PARTICULARS	Dr. 1		Dr. 2
	fwd.	30	80			fwd.			
	Interest on Deferred Pay. 28-2-19	38	42						
	6922					1461 CoR CC 6/1/19	30	9 33	
						CP 22960 3/2/19	58	68 13	
						4364 2nd Res 13/2/19	66	14 60	
						5038 ~ 21/3/19	118	29 20	
		69	22				12126	121 26	

ewson R.R.

TICULARS		DR. 1		DR. 2		DR. 3		DR. 4		BALANCE		DEFERRED		SEPARATION	
	fro:									334	39				
										372	81	265	00		
6/1/19	30	9	33							363	48				
3/2/19	58	68	13							295	35				
13/2/19	66	14	60							280	75				
21/3/19	118	29	20							251	55				
	12126	121	26												

WAR SERVICE BADGE CLASS A 280816 M.D.2

SERVICE GROUP 22

OCCUPATIONAL GROUP 6

Toronto
Father
Civil Engineer

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

A

1. No. 453

2. Rank. Spr

3. Name. Hewson Ralph Rawley

4. Unit. 3 Res. 6 O.R. 66

5. Date of Discharge APR 12 1919 Place TORONTO, ONT.

6. Reason for Discharge DEMOBILIZATION

7. Authority. No. 2, D.D., Part II, D.O. No. 167

8. Proposed Residence after Discharge 41 Howick Ave Toronto

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.?

R. R. Hewson
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place TORONTO, ONT.

Date APR 12 1919

Embarked Liverpool
S.S. Lapland 3 April 1919
Disembarked Halifax 10 April 1919

For
O.C. No. 2 District Depot.

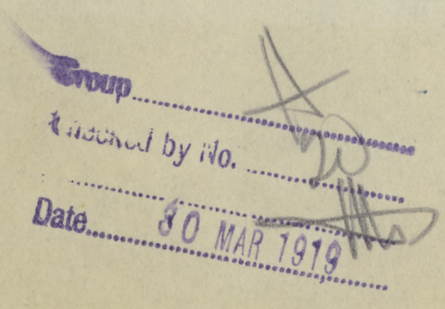
Signature
(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

HN 13-7-60

LIST OF DISCHARGE DOCUMENTS.

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



R—122.

Rank Name HEWSON, Ralph, R. Reg'l No. 453

Unit Can.Rly.Constr.Corps. If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment St John N.B. 13th April.1915 Place of Birth St Catherines Ont.

Name and Address, Next-of-Kin W.H. Hewson

615 Bathurst St, Toronto Canada Relationship

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

N/E. R.B. No 8887
File R.L.
Category Can OR

Discharge, Date and Place Reason Character A 1 B 103

Report Date	Report 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
		Embk'd for England from Canada St John 14.6.15			
		Per SS Hochschelt from			
		Arrived England Longmoor Camp 25.6.15			
26.8.15	D.A.A.G. Emb Port #1	Embd Overseas France	Southampton	25.8.15	Nom Roll
5.10.15	O/C C.O.R.C.C.	Proceeded to England	Belgium	5.10.15	Pt II 156
1.11.15	" "	Proceeded Overseas	Longmoor	1.11.15	Nom Roll
21.4.16	" .	Granted Leave from	In the field	8.4.16	Pt II - 17.
30-5-17	" " "	Admt: 2/1 Highl: Field Amb.	" " "	15-5-17	G.L. A 292.
6:6:17	. "	Trans No 9 Cas Clear Stn	" "	19:5:17	— A 295.
10:7:17	" " .	" No 51 Gen: Hosp	Etaples	23-5-17	— A 304
" " .	" . .	Discharged Base Details	—do—	1-7-17	— A 307.

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				
30:6:17	CORPS.	Awarded 1 Gp Badge	Field	23-6-17	Pte 20. 106.
8:8:17	" 62	Discharged to reinforcement	— " —	27:7:17	62. A 31
26-1-19	60 Rgt	Posted to 6 B 72	— " —	17-1-19	RED 04
29·1·19	3rd Res Bn.	TOS from Pte CORD	Whitley Spa.	29·1·19	- 29
		37-1-32.		3.4.19	
28·3·19	"	Sol to MDW 2 Rhyl	" "	28-3-19	— 87
3·4·19.	MD2.	SOS to Canada.	Rhyl. -	3-4-19.	- 79.
		SL. 37. Dover. I			
31.3.19.	" "	T. O.S. from. 3rd TPES..	" "	2.3.19	— " — 76.

"LAPLAND" 10-4-19

DISPERSAL "I"

H 3216.

AUDITOR | PAYMASTER

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

M. OR S. REGT. No. 453 RANK Spr. NAME (IN FULL) HEWSON R.R.

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? No. — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. C.O.R.C.C. — IF IN P.F. WHAT UNIT? — (BLOCK LETTERS SURNAME FIRST)

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 13/8/15 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ Nil — DATE EFFECTIVE

PAYABLE TO — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE Toronto. — DATE 12-4-19 — REASON Demob. — AUTHORITY D.O. 107 — IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	PAY AND F.A. RATE	PAY AND F.A. AMOUNT $	PAY AND F.A. AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.			TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	ACQUITTANCE ROLLS COL. NO. 1 DATE	ACQUITTANCE ROLLS COL. NO. 2 NO.	ACQUITTANCE ROLLS COL. NO. 2 DATE	ACQUITTANCE ROLLS COL. NO. 3 NO.	ACQUITTANCE ROLLS COL. NO. 3 DATE	CASH PAYMENTS COL. NO. 1 $	CASH PAYMENTS COL. NO. 1 C.	CASH PAYMENTS COL. NO. 2 $	CASH PAYMENTS COL. NO. 2 C.	CASH PAYMENTS COL. NO. 3 $	CASH PAYMENTS COL. NO. 3 C.	ASSIGNED PAY $	ASSIGNED PAY C.	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C.	OTHER CHARGES $	OTHER CHARGES C.			TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	T.O.S. 3/4/19 D.O. 107 PARTICULARS OR REMARKS SUBS.....10.....D.O.....
BALANCE FROM PREVIOUS ACCOUNT																																						
28.2.19									280	75																									280	75		Bal on Eng. L.P.C.
18.4.19	49	8 1 10	53	90																																		P & A. 13.3.19 to 18.4.19.
					35	00																																Clothing Allce 1st Part W.S.G.
					70	00																																
																	487	50																		Boat and Fares money.
																	400	58			29	20														Endorsed on L.P.C.
									158	90															70	00			6	60			439	65				
	Wsg.																																					W.S.G. paid as above.
183 days			420	00					420	00																							76	60	Due Soldier 343	40		6 days P & A. overcredited
																																					1st W.S.G. Paid by #2 D.D.
							May	14	352	891															63	40							140	—	280	—		
							June	9	679	644															70	—							210	—	70	—		
							July	3	691	654															70	—							280	—	140	—		W.S.G. PAID IN FULL
							AR 128 Sep.	3	138	276															140	—							420	—	—			FOR PAYMASTER WAR SERVICES
									420	—															413	40			6	60			420	—				
																																							Final

100M-1-19.—L. L. 53962—M. & D. 9723.
M. F. W. 2596.
1772-39-1390.