ATTESTATION PAPER. No. 1643

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

The second secon	and a serial ser	40 - Maringood (1900 - 1900 -			
QUESTIONS T	O BE PUT	BEFORE	ATTESTAT (ANSWE		0
1. What is your name?	A	Tethon.	10/2	Lamos	Was
0 T - 1-4 m - m - 11 - D	44 44	-	1000	and better to the book of	1
what Country were you born?		may	G Ly	20 - R V	relai
3. What is the name of your next-of-	kin ?	mat Ja	me sellet	tement for	n. Francis
4. What is the address of your next-	of-kin?	marylo	Lyro	ne de	e Lathertal
5. What is the date of your birth?		23 /man	OR 188	4	
6. What is your Trade or Calling?		Ta	Carre	~	
7. Are you married?		***************************************	74.0		
8. Are you willing to be vaccin	ated or re-				
vaccinated?		***************************************	900		
9. Do you now belong to the Active	Militia?				, mystaniae
 Have you ever served in any Milit if so, state perticulars of former Service. 		Light down to	Gorana Maria	illing .	Typ.
11. Do you understand the nature a your engagement?	nd terms of	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	H.		
12. Are you willing to be attested to	serve in the		alexan.		***********
Canadian Over-Seas Expedition.	ARY FORCE?	Jim W	1 10	(Signature	
		O lys	sell "	(Signature of	Witness).
between Great Britain and Germany si the termination of that war provid- discharged.	ed His Majes	ty should so le	ong require my	Signature of	Recruit)
bear true Allegiance to His Majesty K	ing George t	he Fifth, His l	make Oath, th	at I will be fai	t I will as
in duty bound honestly and faithfully Dignity, against all enemies, and will and of all the Generals and Officers set	observe and ol over me. So	bey all orders of help me God.		His Heirs and S	uccessors,
10th for	Jame	e w voca	- Of	(Signature of	Recruit)
Date	16/	ypo	94	(Signature of	Witness)
CERT	IFICATE O	OF MAGIST	RATE.		
The Recruit above-named was conceptions he would be liable to be punded in the above questions were then a substitute of the law taken care that he under duly entered as replied to, and the said before me, at the substitute of t	ished as provide read to the Restands each quad Recruit has	led in the Arm ecruit in my pre- lestion, and tha	y Act. sence. t his answer to d the declarate lay of	o each question ion and taken	has been the oath 1914.
I certify that the above is a true	//			1 Pagentit	10 14
T cereity that the above is a true	Copy of the A	A Transaction of the	D. AS	X	0.00

	7th Ballación
Description of Kelherin 9	ton f. on Enlistment.
	V V
Apparent Age 30 years 6 months. (To be determined according to the instructions given in the Regu-	Distinctive marks, and marks indicating congenital peculiarities or previous disease.
lations for Army Medical Services,)	(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).
	2 vace ught aom
Height 5 ft. 6 ins.	
Girth when fully expanded ins. Range of expansion ins.	
Complexion bush	
Eyes Brown	
Hair Black	
Church of England	
Presbyterian Wesleyan	
Wesleyan Baptist or Congregationalist Other Protestants (Denomination to be stated.)	
Other Protestants(Denomination to be stated.)	
Roman Catholic	
\Jewish	
of rejection specified in the Regulations for Army Me He can see at the required distance with eithe free use of his joints and limbs, and he declares that limbs, and he declares that limbs. I consider him* ————————————————————————————————————	r eye; his heart and lungs are healthy; he has the he is not subject to fits of any description.
James Watson He	ER COMMANDING UNIT. Light of having been finally approved and f Attestation, and every prescribed particular having
been recorded, I colony that I am satisfied with the o	11 Ternolin PS

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ins be

Sept 23 rd 1914.

Proceedings of Court of Inquiry or on men
reported Missing on Active Service
Attestation Papers
2-1
Declaration of change of name,
Authority for special enlistments
Documents of re-enlisted men.
Regimental Conduct Sheet
Compulsory Stoppages
Casualty Forms 2
Proceedings on discharge
Corps History Sheet
Date and No. of Deposit Receipt for
Purchase Money and Amount
Parchment Certificate
Medical Report for Invalids
Medical History Sheet
Proceedings of Regt, Court Martial
Copies of Convictions by Civil Power
Company Conduct Sheet
Clothing Transfer Certificate
Inventory of Kit
Last Pay Certificate
411/01/22

DISCHARGE DOCUMENTS

Na

Name, HET.HERINGTON JAMES. WATSON.

Regt, No, 16431 ... Rank, pt.

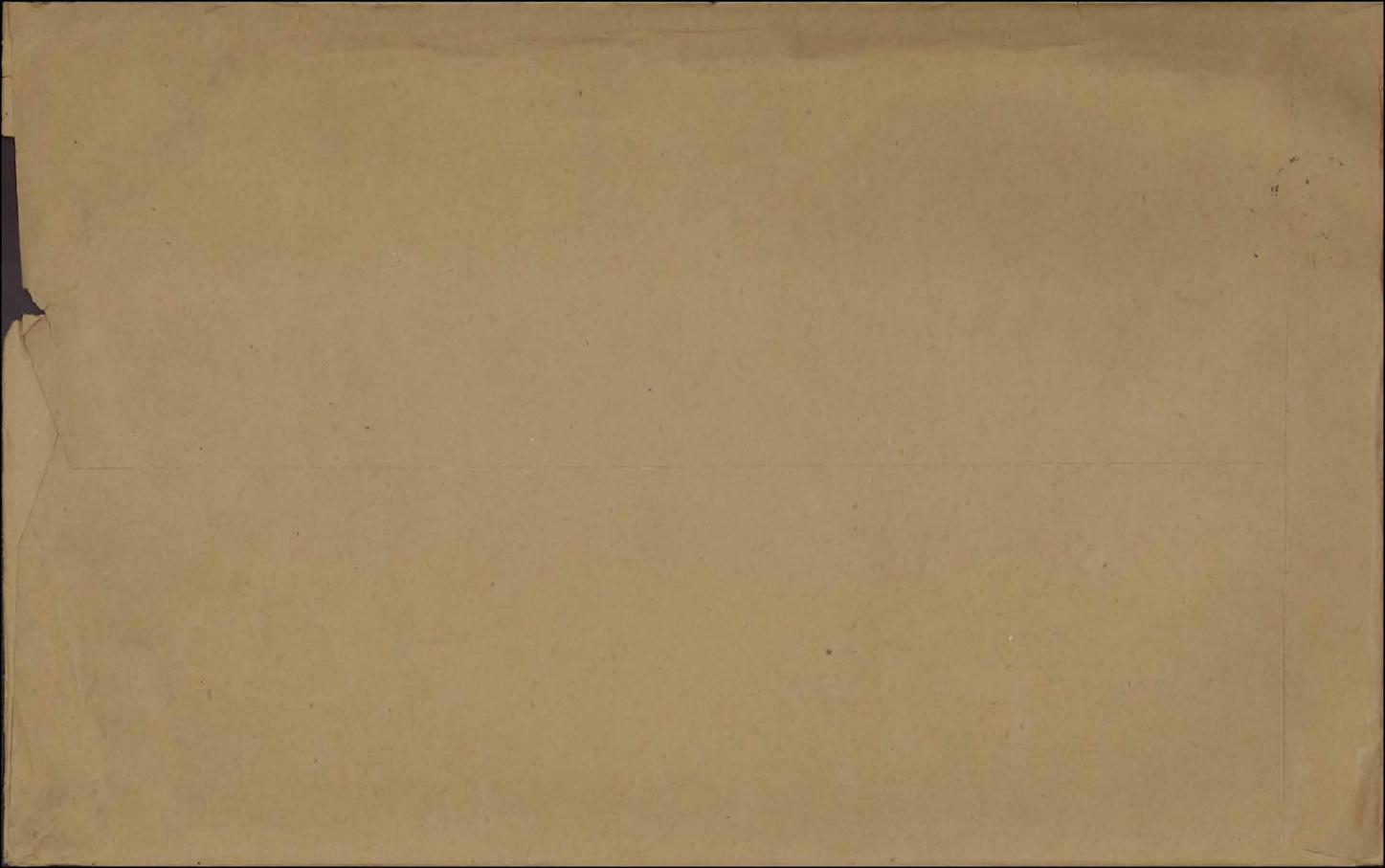
Corps. 7th, Canadian Br. b. 7. 2501 Killed in action 3-6-16,

Casnatty Carl Non-Effective Card Part II Onder Card, J.

Honour & Award Chad.

H. Q. No.,

R. O. No ..



From Duebecper S.S. (Authoria 4/10/14 TRADE OR CALLING Laborers. RELIGION Church of England.
DESCRIPTION. APPARENT AGE 30 YEARS 6 MONTHS HEIGHT 5 FEET 6 INCHES CHEST MEASUREMENT 36 INCHES EXPANSION 2 INCHES COMPLEXION DARK. EYES Brown, HAIR Black. DISTINGUISHING MARKS 2 vacc. rightarm. MEDICAL EXAMINATION. PLACE Valcartier, P. Q DATE Sept. 5 th 1914. Tresent address - not stated

R. 149.						
Nan	TITLY TITLITE CHANGE TOTAL	nk PRIVA	TE	Reg.	No. 16	6431
Uni Nex	t of Kin Mrs J. Hethe	th Batta				877
Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1916	No.2 C.F.Amb.	s.Wd.	Face	A365	10	
3-6-16	KILLED IN ACTION	Rept.fr	om Base	A38	8004	
100						
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The section						
Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
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						To the same

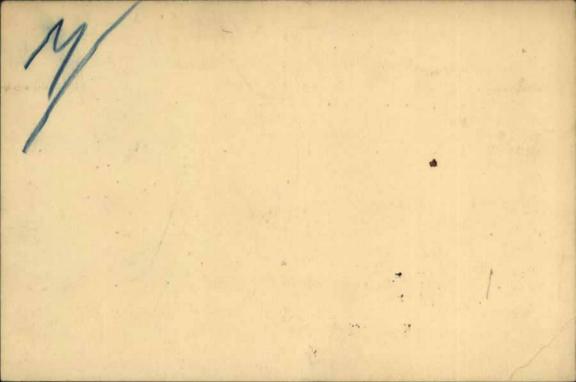
Surname HETHERLINGTON Christian Names James Whateon ... Unit 7th. Bu. Can And Theatre of War . Asiante.... Dates of Service/7.10:1.4...9.2.12....3:.6.16.10. Latest Address.... Mrs. Jane Hetherington (m).
Rallyman. It.
moy Co. Fryonne Roll No. Isoland Page 308

4-2169- NespMAR'2-1021 9 40 546 Rup AUG 2 1921

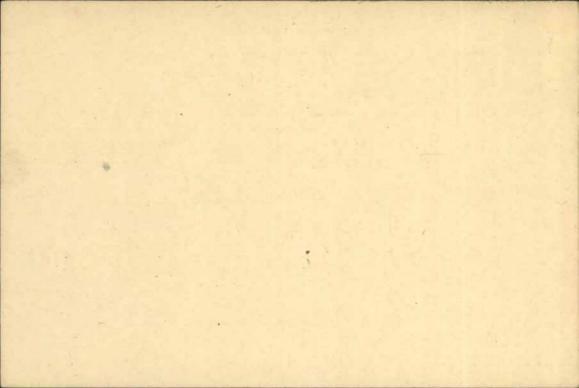
H. Q. FILE No. 649-NAME Netherington, James Watson. REGT'L. No. /643/ CABLE NO. DATE NATURE OF 0.5-84 2/5-/15' Reported Wounded C. 643. 3-5-15 Wounded. M. 6699 18.5-16. adm. to no. 2 Canadean Field ambulance may 6th Isloper. M.8004. 13-6-16. Killed in action June 3 rds 1916. 9782090a Roun 14616. Killedin action in the field June 3rd 1916. Period 24-1017. M. F. W. 42-50m 7-15. L. L. Job 83225 -M. & D. 5842. H. Q. 1772-39-893.

DATE OF LIST No. HOSPITAL REMARKS ADMISSION 50 Wounded. Rep. from the Base V51 (wounded. Kep. from Base S. S. W. shoulder 139 australian Hosp. Wimereux 188 King George V Hosp. Dublin. dio. to sick furlough 10/6/15. O.l. No.3 Gen. Base Depot. 24/6/15 G. S. W. Shldr. 110 rep. Proceedinglo linet." A 3 6 3. 1 no. 2 ban Ild. Amb. 6-5-16. 8. wd. face. A. 38 40) Reptd from Base 3-6-16 Hilled in Oction

Hetherington, J.W. Pte. 16451 7th on. 649-n-156 Eligible for 14-15 Skar, Pte yth Br. Medals & Mrs. Jane Hetherington, (Mother) Decorati ons. Killyman St. Scroll Deep 29.1: 21 Regn. No 2.15324 Moy, co. Tryonne, Piece Deep 8231922 Rayn No. p30477 (Mother) Ireland. Same Serial no 774200 Memorial Same as above (Mother) Cross. OCT -8 1920



T. O. S 12-8-19 00,180-1		Un	17 6th Regt. D. C.O. P.	
PAID	PAID	sig.	PROMOTIONS, TRANSFERS, I	M. D. //
FROM	то	OR REC'T	PARTICULARS	AUTHORITY
1.22	Ceng: 31 Sign. 21	1	Sheen on Jet Bu paylish	
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				UNIT SAILE



Reg. No. Batty. Hospital australian Winnereux Date of Admission Transferred # 3 few. Base Dept Hosp.? King George V Dublin Hosp. 10 55 Hosp. Diagnosis G.S.W. Shldr. SON face. Helled in accom (3) Additional Diagnoses, if more than one state present Die to Rick Furlouf 10. 6. 15 Part Nept To wind 27.6.15 les. 12.5-15 REMARKS CL. 12. 7. 15 110 /2) 16.6.15.88.2 3.5.16 51 Raph from base 19.5.16 9365 warm ded. 4.6.6 9387 Rept from bass Boh. of D.G.M.S. O.M.F.C. London N 7 2 DEFF A.W.D. 2 DEPT. Shannon 8333-15

EPITOME OF HOSPITAL TREATMENT.

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

Ten. ho. 10909

Rank and Name

HETHERINGTON, James Watson

Regimental No.

16431

Name and Address of Next-of-kin

Moy, Co. Tyrone, Ireland.

Mrs. Jane Hetherington, (Mother)

Unit

7th. Battn.

Date of enlistment

Sept 18th.1914.

Place of birth

Ireland

Married (Yes or No)

If in Permanent Force

No

Date and place of discharge

Reason for discharge

Character on discharge

NIE RES

ce.

29.9.9A

Promotions or appointments

h	17.4	omotions of a	ppointments			
Section 1	V Rep Date	Prom 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
	12.5.15	120	Wounded. Questialian Hotel & S. W. Sheda	Wimereux		Cas Rep. 50.
	1615	wo.	Transtat. to England. Kning george V Horse ainha to sick furlough. Granted sick furlough h Horh	publin	10.6.15	Part orders Noiv. CR.88 Pt. II orders 115.
			Taken on strength granted furlough. June 10-16. add: heat of kin		10-6-15	
	17-6-15	vc.30'A	Everseas to 7th Bru	- Shonelile	17-6-10	- Part I adus so 120
	30 15	Dan Byot.	Hattention to duty while on sentry. awarded 5 days FP	Trance	22/1/15	hom hole But II ales 124 CR. 119 NK. Non. Roll Phy 100 #24
No.	14/8/15	do.	Taken on strength	do	25/6/11	· No # 25 . Dated

etherington Rome and Monte Report Record of promotions, reductions, transfers, casualties, etc., during active Place Date REMARKS From whom service. The authority to be quoted Date Taken from Official Documents received in each case. 29/1/16 067 Pon Granted heave from 19/1/16 to 28/1/16 11 24. 4.16. 9.5.7 Bu was offis. Deprived of Field. 29.3.16. 1 Nº 2 Canadian Field aubulance. 6.5.16. C. L. A 365. S. N. Hace on Mr. Hild. 36.16 C.XA 387. Willed in liction of Pt 0.24 14.616 SOW IS CARRED Esh, Transide No. white to be the the service to

hich transfer

Regimental No. 16431

Unit 7th Battalion

Date of enlistment 18th Sept. 1914.

Name and address of next-of-kin

Mrs.Jane Hetherington - Mother, Millingman Much Moy, Co. Tyrone, Ireland.

Place of birth. Moy, Co. Tyrone. Ire. Date and place discharged Married (yes or no) No.

Amount of pay assigned monthly \$

To whom payable

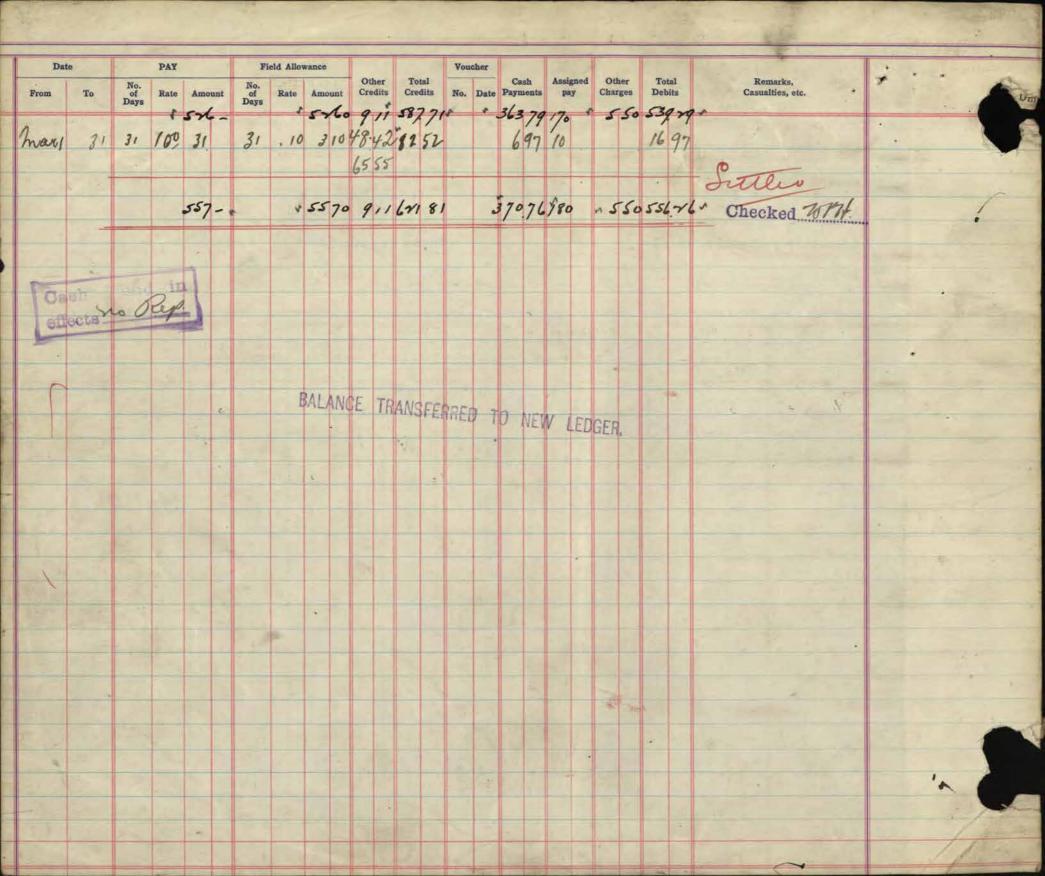
Reason for discharge

Character on discharge

C. L. 9.38

				D. 177	_	-	-							+	Y					if	6 /17	76	MARK	UNITRUS
	D	ate		PAY				ield Allo	wance	3	Oti	i ne	To	sh.	Vouc	her	Car	h	Accin	nod .	Other	To	to?	Remarks,
	From	То	No. of Days	Rate	Am	ount	No. of Days	Rate	Ame	ount		dits	Total Credits No. Date Payments pay Charges Debits		Casualties, etc.									
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		30/11	30	100			30	-10					33		/		30	1	2			30		
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		31/1/15					-						180		/		40	-	1			40		
	- A - Co	28/2/15			28				-		1000						-					8		
	1/3/15	3//3/15	3/	100	3/	on	31	./0	3	10	32	00/	66	10		-	12	00,	15	60	/	27	00	New arrighment
	1/4/15	80/4/15	30	1	80		30	. 10	3		39	101	72	10	-		6	-	15			21		40 2 remby CPM & Blackrock 1/6/13
	15/15	31/5/15	3/	1	31	H	31	-10	3	10	51	10	85	20	-		40	1	15			55		31/4/15 trans 6 30th Batt
	1	30/6/15			30			/0			100			30.	-	-	30	-	15	-		45		LP. Cho 7 th Ball = B01037 7 day Sicklean 10/6/12 1-16/6/15
	Name and Address of the Owner, where the Owner, which is the Owner, which is the Owner, where the Owner, which is the Owner,	31/7/15		1	3/		The second second	./0	3	10		1		40			31		13-			46		Frank from 30 18m 1/15
	22/9/14	31/7/15				7	xcha	me				01	1				lad							France to 304 Bm. 31/7/15
	w/0/	2.101.0	a.		-		74.7	10	5	2	100	40)		E1		Ħ	4	4	15		5 50	20	11	5 day 1 1 10 2 2/7/15 BO24 7 1 Balla
	4	31/8/15 ben 30	31	-	31		31	.10	3		21			51.	112		5	61	15	-	0 00	20	37	Cartie Reducted 9/0/15- £1.
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rei c		1			546	-	- 5	*	24	60	9	11	287	171	8		363	79	1/0		550	539	79	200

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MEDICAL HISTORY SHEET.

Surname	hernglon	Chr	istian .	Name_	James	Walson
Examined on W	the day of lefte	Λ	Appro	oved by	Imales	•
) at	Valcarlin	P.Q.		<	1	_
Sirthplace City or T	own Morf	1 1		Ran	k ste	Came. M.
County	no la h	Ireland	Date	Fit or Unfit	EXAMINED FO	OR RE-ENGAGEMENT,
rade or occupation	haboures					
eight 5	Feet b	Inches				
						М.(
S1	Minimum	inches				M,(
hest measurement {	Maximum expansion	36 inches				
hysical development	good					M,(
mall-Pox Marks						
accination Marks		Left. X	Date	Result	VAC	CINATIONS.
	Number 2		2/12/14	14.37	All and	M.C
	1900					M.(
	g congenital peculiariti	-110	3		***************************************	M.0
iscase			70.00	Translation 1		
(b) Slight defects by	ut not sufficient to ca	ause rejection	Date	Result	ANTI-TYPHOID	INCOULATIONS, ETC.
2 not missing .			7 14 19	r	ovek	M.O
			19 14 1	ÿ	eick	Жм.
						М.(
Inlisted on 24	day of Sept		191	1 at 1	alcaile	eq L
	Corps.	REGT'L NUMI	BER.	Habits	THE LE	DATE.
oined on enlistment	get Batt.	1643	1			
Fransferred to						
EXA	MINED OR DIS	CHARGEI	BY A	MEDI	CAL BOAR	D.
STATION.	DATE.	Mar II	DISEASE.			RESULT.

M. F. B. 313. H. Q. 1772-39-439. Entries in Red Ink made from Attestation Sheets.

JUN /7 1915

for D. D. M. S.

DATES OF Remarks on nature of the disease: how induced: if mild or severe; if completely recovered from; whether any particular treatment was adopted. In vonereal 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. Date of Arrival Number of days in Hospital. Admission into Hospital. Discharge from Hospital. Signature DISEASE. STATION. at the of Medical Officer. Station. Day Month Year Day Month Christian Name. Surname

Army Form W. 3016.

No Date
(1) To the Officer i/c Records,
Westmireton Ho. y Willem Restation).
(2) The Officer Commanding, Panadians
Fhornelffe (Station).
(3) The Paymaster Condians
Westmenster Ho. MWWbank(Station).
Regimental No. 16431
Rank and Name The Heatherington ()
has been granted a furlough from June 15 18
His address while on leave will be to live to the imptor
Though though
anne.
I consider he is fit for Light duty. The Day Roma
for Officer in charge King Fogel Hospital.
Oublin (Station).
* Strike out that which is inapplicable.

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the Office.

在一个一个一个一个一个一个一个 Application of the House and the Colored mad heartealth The will be overly the walter off Jee & Ottom in which H. T. W. H. M. P. VALLEY

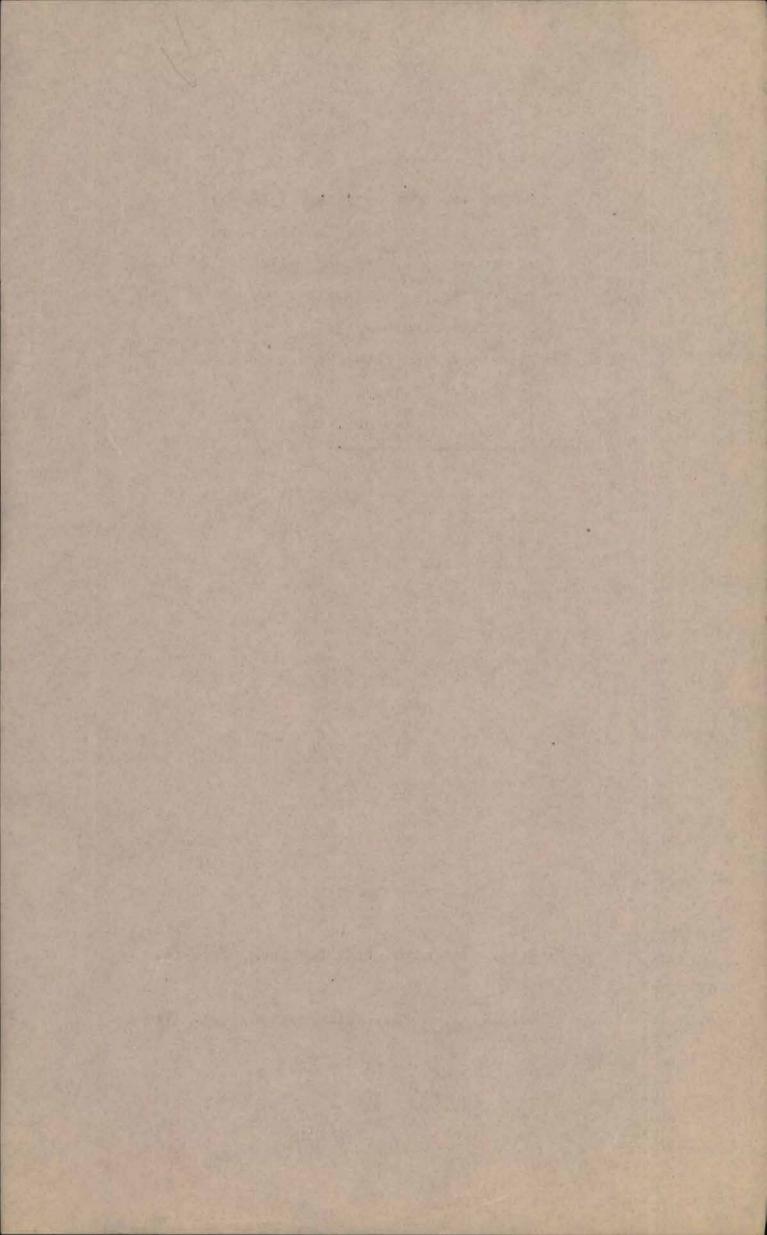
WILL

In the event of my death, I hereby bequeath all my money & effects to my Grandmother, Mrs Marshall.
her adress is Killyman St. Moy Co Tyrone, Ireland.
Pte Jim Watson Hetherington
No 16431. B. Coy.

1st B.C. Regt.

Note. Extracted from Pay book, Page 14.
Holograph.

No. 16431, Pte. Hetherington, J.W. 7th Bn.



	Casualty Form	n-Active S	ervice.	Westminster Heuse,
	Regiment or Corps	Canady	in B	alla (19 186)
Regimental No.	6431 Rank Trivale	Name Hel	heringh	n James Walson
Enlisted (a) 23/9	If Terms of Service (a) Que	of Mar s	ervice reck	ons from (a) 23/9/14.
Date of promotion in present rank		tment (Nume	rical position on }
Extended	Re-engaged	Qualification (b)		
Date From whom received	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 400 1915 1	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
8/4/15 # # Ja 26# Ocholia	J. S. W. Stoulder do Stoulder R.	Field	25/4/15	1236 bancelled
30 % HS. OKFORD.	to shoulder R. I do Eng.	do H.S. do	28/4/15	W 3034 W 36
	roang 10	Oxfordokias		OFFICER 11- RECORDS CANADIAN SECTION G. H. Q.
			1	
*		1000		

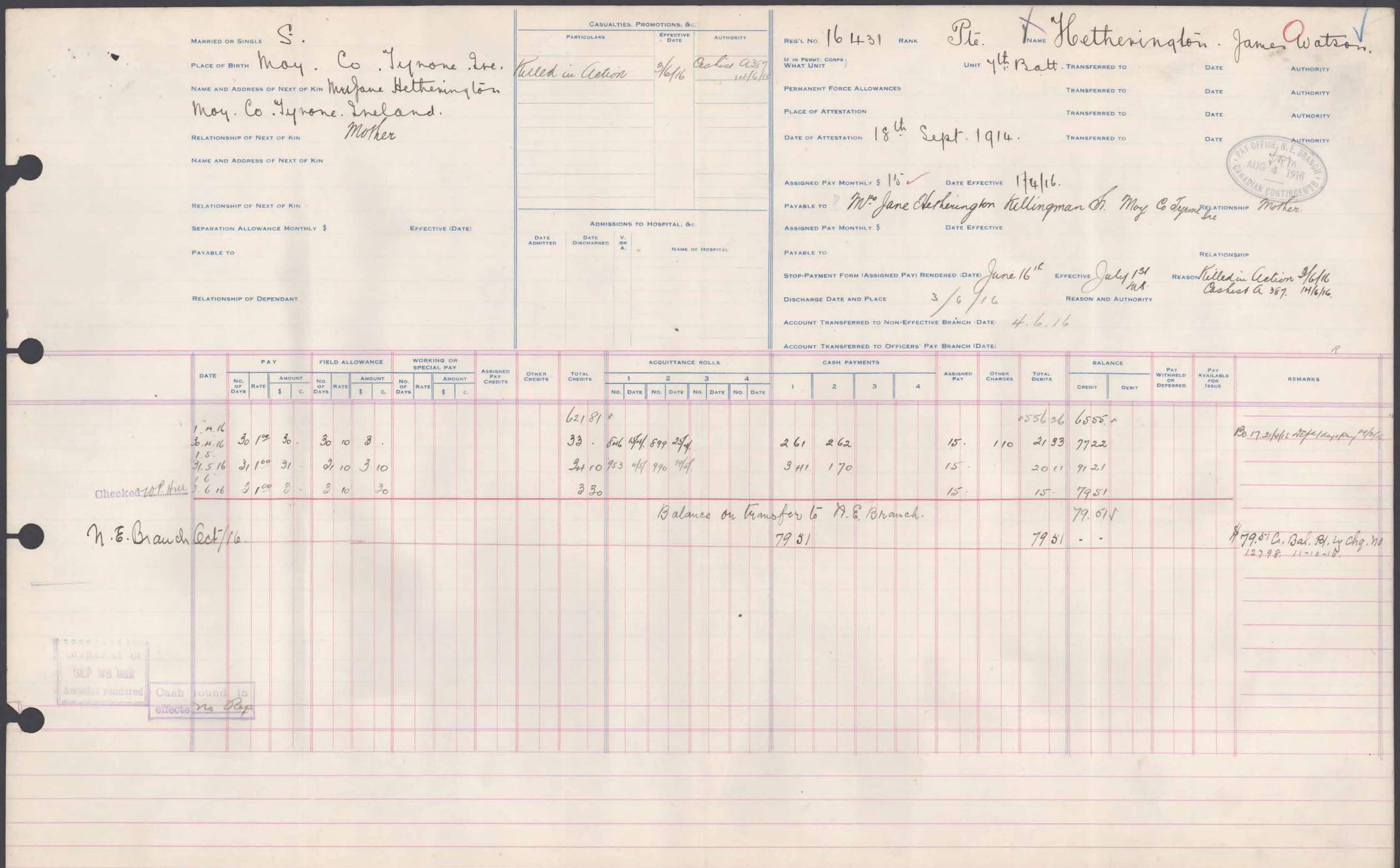
	Report	Record of promotions redoctions, transfers,	THE PERSON NAMED IN			
Date	From whom received	casualties, etc., during active service, as reported on Army Form B, 215, Army Form A, 36, or in other culcial decommus. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213. Army Form A. 36, or other official documents.	
						-

Casualty Form Active Service.

Regiment or Corps 36

Regim	ental No.	643/ Rank	Name Hethe	eningi	toy de.
Enliste	ed (a) 23/9	14 Terms of Service (a) Sura	from of War s	Service rec	ekons from (a) 23/9/14
Date o	f promotion esent rank		ment)	_ Num	perical position on bil of N.C.Os.
Extend	ded	Re-engaged	Qualification (b)) karje	rtil
	Report From whom	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other
Date	received	A. 36, or in other official documents. The authority to be quoted in each case.			official documents.
	Hospital	Transferred to This.	houcliffe	19/15	Mes 30 = R. B. CEF
		Transfiredto	Oversay "	4/6/5	Mee 30 Rass
08/11	0G. H.S.	Shop W. Shoulder	2/8:	30/4/10	W36
7-1710	of 7-2 Ba	of Jakenon Strength o	7 th Batt	25-6-15	Part I orders 14-8-15
22-1-16	. wo	Granted a days from	Field	19-1-16	B213, Part I Orders 5
u/3/16.	O.C. TUBA	Returned from Ceave	80	30/1/16.	0.213
29/3/16.	wo	timed I dans pay for form of Kell	(So	29/3/16	Broba Pettordans holy.
6/5/16.	3 c. n. a.	S.W race Do	20.7.0.	6/5/16.	0.36. 505 311
6-6-16	0.c. 7ª	Killed in action	rield		137/92. 327 Postaders hozy
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1	Report	Record of promotions, reductions, transfers,			1	Remarks	
Date	From whom received	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, 218, Army Form A. 36, or other official documents.		
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11.5	ENLA		116-1760				



PAY FIELD ALLOWANCE WORKING OR SPECIAL PAY

NO. OF RATE S C. DAYS RATE \$ C. DAYS CASH PAYMENTS ASSIGNED OTHER TOTAL PAY WITHHELD AVAILABLE PAY CHARGES DEBITS CREDIT DEFERRED ISSUE To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

Surname & etheric	glow Christian Name a	o. W.
Birthplace Parish	TABLE I.—GENERAL TABLE. County	
Examined	onday of	
Declared Age	years	
Trade or Occupation		
Height	feet,	
Weight		lbs.
Chest Girth when fully Expanded. Measurement Range of Expansion		
Vaccination Marks	Right	Left
When Vaccinated	(R.E.—V=	
Vision	L.E.—V—	
(a) Marks indicating congenital peculiarities or previous disease		
(b) Slight defects but not sufficient to cause rejection	(b)	
Approved by (Signature)		
(Rank)		Medical Officer.
Enlisted	atday of	
Joined on Enlistment	1 Br Olumbia	Regtl. No.
Transferred to		
Became non-effective by		
(Signature) (Rank)	on day of	191 .

Table II.—Only for Admissions to Hospital or to the Sick List in the

	Congruence states		Admitted to Hospital Discharged from Hospital				from l	Disease	Number of days	Remarks bearing on the
	Name of Hospital	Day Month Year		Day Month Year			Disease	in Hospital	Remarks bearing on the use. In cases of subsequent progres given in the specia	
Harth Casth	Rul X Itrah	28	5	15	9	6	15	SWord shall life.	41	Inepedit Jo
	102									
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									The state of	
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									400	

J. L.

o the Sick List in the case of Warrant Officers treated in quarters. Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet. Number of days in Hospital Gehedit free Superied Fragment semmed. P.S. Street Estar. 41

Signature of Medical Officer

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and signature
4-11	
	Table IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

DUPLICATE.

Army Form B. 178.

To be used for recruits enlisting direct into the Regular Army only.

Army Form B. 178^a to be used for Special Reserve recruit and Special Reservists enlisting into the Regular Army

MEDICAL HISTORY of

Surname	HETHERIN(FON	Ch	ristian Name	gJA	MES WATSON	
			L-GEN	ERAL TAI	BLE.		
Birthplace	. Parish	MOY		Coun	ty_ Tyr	one, Ireland	1
Examined		on 24	th.	_day of	September	ra.	_191 4.
13Aannineu	·	at	Va.	leartier	P.W.		
Declared Age			30	years_	6.mths.	days.	
Trade or Occ	upation		Labour	er.			
Height				5 feet,	6	inches.	
Weight					130	lbs.	
Chest G	irth when fully Expanded.				3	inches.	
	ange of Expansio					inches.	
Physical Dev	elopment		Good.				
	Arm			Right		Left -	
Vaccination 1	Marks / Number					2.	
When Vaccin	ated		1900				
Vision		. {R.EV	<i>T</i> =				
		((a)	=				
(a) Marks in	ndicating cor eculiarities o						
previous	lisease	e l					
		((b)					
	efects but no	OF.	2.	teeth mis	sing.		
		L.					
Approved by	(Signature	3)		George	Gibson.		
	(Rank				Capt.	C.A.M.O.	
						Mearce	al Officer.
		(at		Vale	artier		
Enlisted		{on	Eandd	ay of	Septer	nber	191 4.
				Corps.		Regti, No.	
Joined on En	listment .	** {	7th. B	att.		16431	
Transferred	to	1					
Tansierred	to	. (
Became non-	effective by	-			This Madical 1	Attention D	н клитерытей у
					Color, Local Substitution (CC)	Attestation Paper, and a from the Attestation	entries esade
	200		day	ot	Coloni	W.R.WARD,	191 .
	(Signature)				Can	l in Charge of adian Contin	Record
	(Rank)						2-1-00

Table II.-Only for Admissions to Hospital or to the Sick List in the ca

Name of Hospital.	Admir	ted to I	Iospital	Disc	charged Hospita	from I	D'	Number of Days	Remarks bearing on the cause
	Day	Month	Year	Day	Month	Year	Disease	of Days in Hospital	Remarks bearing on the cause use. In cases of syph subsequent progress, in given in the special syp
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	1 146								

he Sick List in the case of Warrant Officers treated in quarters.

nber Days n spital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital must be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer.
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(AAPTROPHENIA)		
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Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

	Date.			Brief details, and signature	h.	
2	/12/14	Vacc.		=		
7			phoid Inco	. Sick.	G.G.	

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					=	
	=					
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TRON'S						
	Récord	The state of the s		Service Table.		
	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation
	инивишем акторицова		*))) 10211-10 000 [[[] [] [] [] [] [] [] [] [] [] [] [] [
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	***************************************)))))))))))))))))))))))		
21						

additional assignment.

MILITIA AND DEFENCE

ASSIGNED PAY.

Mors Jane Marshall

Address

Killyman Street Hogy bo Tyrome Treland

Regtl. No. 16 431

Rank drivate

Corps, &c. 30th Reserve Battn (from 7th Battn)

By whom assigned Hetherington & M.

Rate 500/XX.

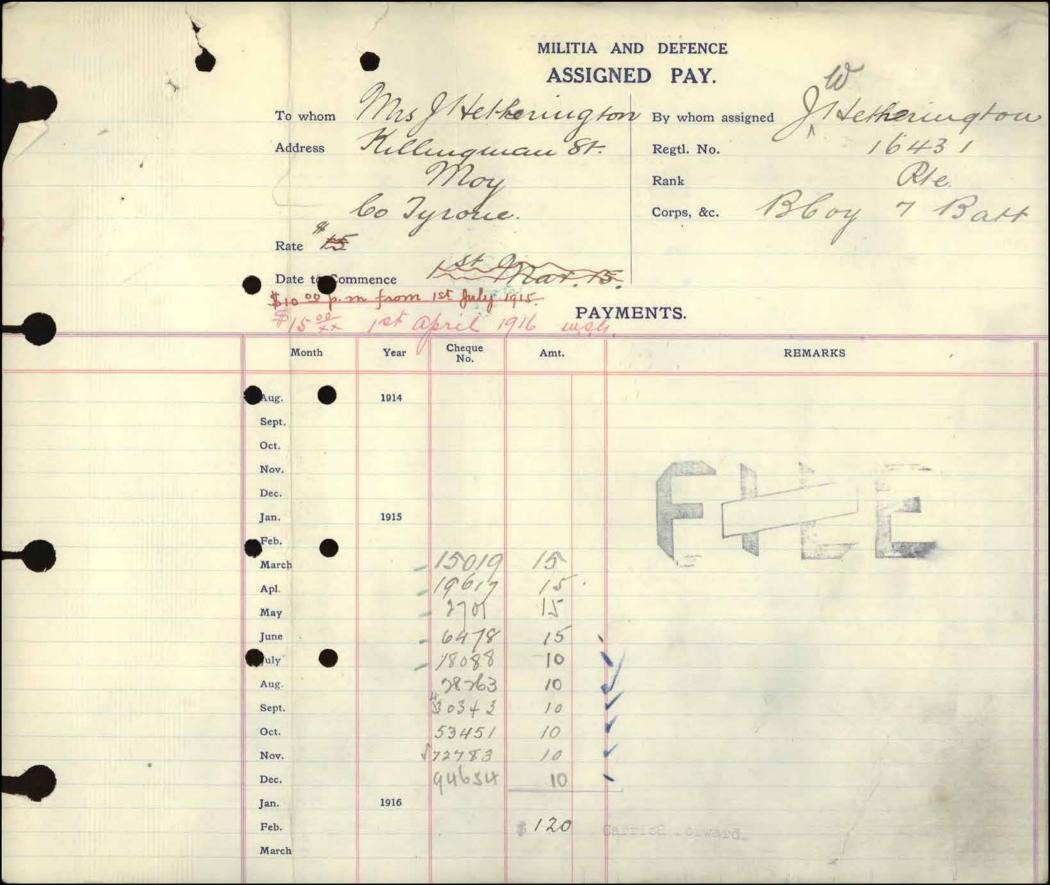
Date t_commence 1st July 1915

	PAYMENTS.							
	Month	Year	Cheque No.	Amt.	REMARKS			
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	Sept.							
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	Nov.							
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The second second second second	Apl.							
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	Oct.		43453	5				
	Nov.	/	72785	5				
	Dec.		getles6	8	+			
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	Feb.							
	March							

ASSIGNED PAY.

By whom assigned Hetheringhin J. W. Pli Regtl. No. 16431.

	u				The state of the s			
Month	Year	Cheque No.	Amt.	Pay Sheet	REMARKS.			
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Feb.		0	830	Payment S	toppake to more payments assigned dead			
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Nov.								
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Regtl. No. 16431 ASSIGNED PAY. ASSIGNED PAY. ASSIGNED PAY.									
		Cheque			17	da	un		
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Feb.		12985m	10-	->					
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July		-	195		Rilled Killed	lin	Action.	*	
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