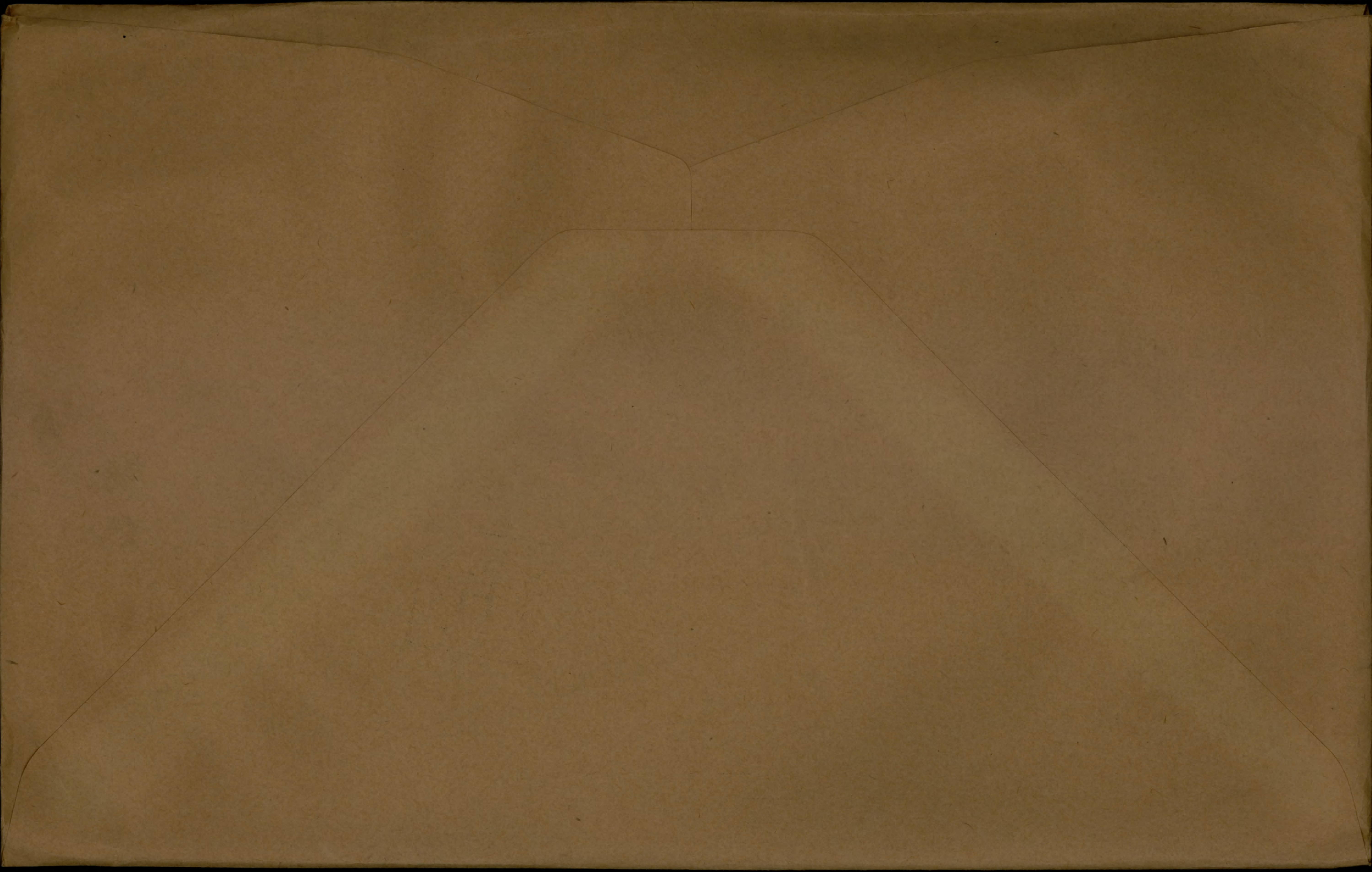


C.E.F. REGIMENTAL DOCUMENTS

NAME CHRISTENSEN EDWARD VICTOR A REGT. No. 478970 UNIT RCR H. Q. FILE No. 19469

NAME CHRISTENSEN EDWARD VICTOR A REGT. No. 478970 UNIT RCR H. Q. FILE No. 19469

M.F.W. 2589
20M-4-46 (9113)
H.O. 1772-39-1377



ATTESTATION PAPER.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

No. ~~15000~~ 478970
Duplicate
Folio.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... Christensen
- 1a. What are your Christian names?..... Edward Victor August
- 1b. What is your present address?..... Work Point Barracks, Esquimaux, BC
2. In what Town, Township or Parish, and in what Country were you born?..... Aalborg, Denmark
3. What is the name of your next-of-kin?..... Mrs E. V. A. Christensen
4. What is the address of your next-of-kin?..... Work Point Barracks, Esquimaux, BC
- 4a. What is the relationship of your next-of-kin?..... Wife
5. What is the date of your birth?..... 21st January 1871
6. What is your Trade or Calling?..... Labourer
7. Are you married?..... Yes
8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... Yes
9. Do you now belong to the Active Militia?..... No
10. Have you ever served in any Military Force?.. 5 1/2 years Royal Navy
If so, state particulars of former Service. (Character on Discharge "Very Good")
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, Edward Victor August Christensen, 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.

Edward Victor August Christensen (Signature of Recruit)
Date 18th July 1916. S. Clarke, Sgt. (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Edward Victor August Christensen, 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.

Edward Victor August Christensen (Signature of Recruit)
Date 18th July 1916. S. Clarke, Sgt. (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 Victoria BC this 18th day of July 1916.
S. Harris (Signature of Justice)

Description of Edward V. A. Christensen on Enlistment.

Apparent Age 44 years — 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. 6 3/4 ins.

Chest measurement { Girth when fully expanded 35 ins.
Range of expansion 2 ins.

Complexion Dark

Eyes Grey

Hair Grey

Religious denominations { Church of England Yes

Presbyterian

Methodist

Baptist or Congregationalist

Roman Catholic

Jewish

Other denominations (Denomination to be stated.)

None

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 18th July 1916

Place Burnaby B.C.

Edward V. A. Christensen
Capt. C. C. 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.

Edward V. A. Christensen 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.

Herbert W. W. Major (Signature of Officer)
Commanding No. 6 Station, R. C. Regt.
Date 18th July 1916.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12

50m.—7-16

H. Q. 1772-39-819

To Whom

Address

Whom Assigned

Regtl. No.

Rank

Corps

Rate

50⁰⁰
~~\$ 28⁰⁰~~ *B.L.*
 OCT 1 1916

P.M. letter 27/10/16 P.M.

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



Stop payments
3 M. 28-12-16 Jan 1/17 J.H.F.
Discharged

Stopped

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.

Mrs Charlotte Christenson Wife Name of Soldier Christenson E.

PAYMENTS.

478970

Pte R. E. R.

OCT 1 1916

L. L. Job 4503. - Req. 6832.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		W 26484	50	
Nov.		D 29070	50	
Dec.		K 36282	50	
Jan.	1917	~~K 38018~~	~~50~~	~~Stopped Returning Scandinavian 5/1/17~~
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

\$ 28⁰⁰ 50⁰⁰

150.00 F.X. 10/1/17

Stopped Returning Scandinavian 5/1/17 A.K.

P.W.P. 2/9/17, 11/1/17

Obs. 63692 18/1/17 CH

CH. 10/1/17

KATG

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

Name. Christenson Pte Ed VA

ob 2376. M. & D. 6692

Peru Force

485 Head IV
Victoria
Bb

Reason for discharge 649-6-8057

Mr. Charlotte Christensen

Thoburn P.O. Victoria BC

Land $13\frac{1}{17}$

[illegible]

Name and address of next-of-kin

Unit

Date of enlistment

Place of “

Married (yes or no)

Date and place discharged

Amount of pay assigned monthly \$

Reason for discharge

To whom payable

Character on discharge

File No. 3173-E-2

WAR SERVICE GRATUITY.

Register No. C 1074.

Reg. No. 478970

Dependent

Name Chris Jensen, E. VA.

Address

Address S. A. 31 Regina Ave.

Victoria B.C.

Maywood P.O. North Victoria B.C.

Pay Soldier \$ 189.90

Pay Dependent \$

Matthew C. Jensen

Days

Rate

Less P.D.P. credited

Less further Dr. Bal.

or overpayment.

Net

339.90

150.00

500.00

160.10

339.90

150.00

500.00

160.10

339.90

150.00

500.00

160.10

339.90

150.00

500.00

160.10

339.90

150.00

500.00

160.10

339.90

150.00

500.00

160.10

339.90

150.00

500.00

160.10

339.90

150.00

500.00

160.10

339.90

Clerk

Date

Ck. Order

Ck. No.

Amount

Remarks

Date

Ck. Order

Ck. No.

Amount

22/10/19

38837

533521

189 90

23.10.19

23.10.19

22/10/19

38838

533522

150 00

2

2

3

3

4

4

5

5

6

6

GEN'L AUDITOR

Posting checked by

Date 22-10-19

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name **Christensen, Edward Victor August**
Surname Christian Name

3173-E-1

Regimental Number **478970** Rank **Pte.**

Address (in full) **Maywood P. O.,**

Unit **C.C.A.C.**

Victoria, B.C.

Original Unit **R.C.R.**

District where paid **M. D. 11.**

Date of Discharge **11-5-17.**

P. D. P. Filing Number **5-34-11.**

Rates:—Regimental pay \$ **1.00** per diem: Field Allowance \$ **.10** per diem. Separation Allowance \$ **20.00** per month.

L. L. 22573—M. & D. 8000.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
160 10	405	13-10-17	53 00	400	13-11-17	53 00	402	14-12-17	54 10		160 10

Remarks:

M. F. W. 127.
 60M-617.
 1772 39-1140.

Name Mr. Edvard U. A. Christenson

M. F. W. 41
1 OM-7-16
1772-39 889.

57 Regina Ave Saanich

Regimental No. 478970 X

Name and address of next-of-kin

Unit R.C.R 281

Date of enlistment

Place of " "

Married (yes or no) yes

Date and place discharged 11th May 1917 Esquimalt

Amount of pay assigned monthly \$15⁰⁰

Reason for discharge Class 1 A/O. 97 Para 715. ²⁶/₄ 17

To whom payable M^{rs} Charlotte Christenson Character on discharge

57 Regina Ave Saanich #85 Head St Esquimalt

Job 5351-M. & D. 6880.

	Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
	From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					
1917																	
July	1	28	28	1 ⁰⁰	28	28	104	280		30 80					X 75 99		bur. fd. 24 Balce P.B. D. 45 19
Aug	1	31	31		31	31		310		34 10			25 100		45 19	170 19	bur. fd. 136.09 D.
April	1	11/5/17	41		41	41		410	77 50 83 87 27 - 10	243 47			53 51	53 87	136 09	243 47	

M. F. W. 41
1 OM--16
1772-39 889.

Name and address of next-of-kin

Character on discharge

[illegible]

Medical Report on an Invalid.

Station Can Low. Hosp. Uxbridge

Date 21-11-16.

1. Unit. R. C. R. 5. Age last birthday 52
2. Regimental No. 478970 6. Enlisted { on Aug 24 1914
at Esquimalt (Victoria)
3. Rank Pvt. 7. Former Trade {
or Occupation { B6
4. Name Christensen E. V. A.

8. Disability.

Chronic Bronchitis & Over age

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. Oct 12/16.
10. Place of origin of disability. on Transport ship California.
11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. while on Transport on Oct 12 had an attack of Pleurisy & Bronchitis
He was sent to San Juan Liverpool where he was about ten weeks and came to Uxbridge on 30/Oct/16.

12. (a) Give your opinion as to the causation of the disability.

(b) If you consider it to have been caused by wounds received or illness contracted (1) in the presence of the enemy (2) on active service, explain the specific conditions to which you attribute it. (See notes on page 3).

Infection & Exposure

, no

2 yrs. infection & Exposure

13 What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

General Condition Poor

Local Condition has a bad attack of chronic Bronchitis with a hard dry nasty cough. He has occasional night sweat. He is debilitated and his chest has a shrunken appearance. Dullness on both side of chest. He is over age.

14. If the disability is an injury, was caused

- (a) In action? no
(b) On field service? yes
(c) On duty? yes
(d) Off duty? no

15. Was a Court of Inquiry held on the injury? no

- If so—(a) When? —
(b) Where? —
(c) Opinion? —

16. Was an operation performed? If so, what? no

17. If not, was an operation advised and declined? no.

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service? lost 7 teeth since joining Army

19. Do you recommend

- (a) Fit for duty? no
(b) Fit for light duty? no
(c) Invalided to Canada? yes
(d) Discharge as permanently unfit? yes.

Dr. Rogers Capt Cane
Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except†

Station _____

Date _____

J. Aspinall
Officer in charge of Hospital.

Commanding Hillington House Convalescent Hospital.

* Loss of teeth on, or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as it is essential that the Members of the Pensions and Claims Board should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Article 591 to 598 of the Canadian Pay and Allowance Regulations as amended G.O., 57, May 1st, 1915).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

20. (a) State whether the disability is the result of injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service.

(b) If due to one of these causes, to what specific condition do the Board attribute it?

1 No 11 No
not applicable

21. Has the disability been aggravated by

(a) Intemperance?

(b) Misconduct?

no
no

22. Is the disability permanent?

Age only
not applicable

23. If not permanent, what is its probable minimum duration?

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

none compared with capacity on enlistment

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{4}$, $\frac{1}{2}$, $\frac{3}{4}$, or total incapacity.

25. If an operation was advised and declined, was the refusal unreasonable?

not applicable

26. Do the Board recommend

(a) Fit for duty?

(b) Fit for light duty?

(c) Invalided to Canada?

(d) Discharge as permanently unfit

no
no
no

This man has only been in England a couple of months. Has a slight Bronchitis which his condition is no worse than when he enlisted.

Signatures:—

Station

Date

Uxbridge
Dec 6/16

R. M. Fergusson

President.

H. A. Lang

Members.

Approved.

Station

Date

Assistant Director of
Medical Services.

DEC 13 1916

Canadians, London Area

S. Williams

Administrative Medical Officer.

for A.D.M.S., Canadians, London Area.

PENSIONS AND CLAIMS BOARD, Canadian Expeditionary Force, assembled at
Folkestone, Kent, England, on the _____ day of _____ 191

Members of Board.

LIEUT.-COL. SIR H. MONTAGU ALLAN, C.V.O., *President.* MAJOR JOHN L. TODD, C.A.M.C.
LIEUT.-COL. W. GRANT MORDEN. MAJOR MAURICE ALEXANDER,
Legal Adviser.

Proceedings.

The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked:

_____ Lt.-Col.	<i>President.</i>	_____ Major.
_____ Lt.-Col.		_____ Major.

Forms
I. 1237
10

(Part I.)

Army Form I. 1237.
(C.I.F. 1.)

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	498970.	Pte.	Christensen	E. V. A.
Year	Unit.	Age.	Service.	
	R. C. R.	R. Co.	52.	
(Part II.)				
(a) Station and Date.	(b) Disease			
	Pleurisy			
Can. Con. Hosp. at	(c) Date of origin	Place	Country	
OXFORD, MDX.	23 Oct	Transvaal	a	
50. 10 19.16	(d) Cause			
(e) History to Date.	Admitted to	Date.	Special Treatment, &c.	Result.
	St. Peter's Pool	24 Oct.		
	2 b b a b.			
	3			
	4			
(f) X Ray Report.	From			
(g) Marks of Injury.	External			
	Internal			
(h) Present Condition.	of physical state	Good	Symptoms	Says he is short of breath on exertion.
	of disability	Good		
	Complications			
(i) Prognosis.				
(j) Treatment and Semi-Weekly Progress.	Date.	Treatment.	Progress.	
	1-11-16	P. T. limited		
	8-11-16	do	Fair	
	14/11/16	Bd Discharge		
(k) Result.				
(l) Disposal.	Transferred to	For		
	Clab.	Discharge		
	Date			
	Signed	Capt., C.A.M.C.		

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

(m)

ADDITIONAL MEMO. re Part 1.

ADDITIONAL MEMO. re Part 1.

Yes 4 children.
Labourer.

Labouret.

Esquimault B6 Date Aug 14

Date _____

Aug 14

Yes

1900

No

Section

(n)

TREATMENT, &c., re Part II.—Continued.

Progress.

on 12 Oct while at on transport
had an attack Bronchitis &
Pleurisy. He went St Jude's Inf.
& the L-hire

He has a Bad Cough Dy.
has occasional Night Sweats.
he is debilitated & has a
shrunken Condition of Chest
Swellness in Both Lids. Absence of Bronchial
Breathers. Probably due to Thickening in
Rt Lids where he had phlegm.
Has F in Bronchial Ralls.
in Act of his Age 52 Recommended
Discharge to Canada.

Capt., C.A.M.C.

(O)

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.....R.C.R., C.E.F.
- (2) Regimental Number.....478970
- (3) Full Name of Soldier.....Eduart Vicktor August Christensen
- (4) Place of Birth.....Alberg, Denmark.
- (5) Are you married, or not?.....Yes.
- (6) If married, state,
 - (a) Full name of your wife.....Mary Ann Charlotte Christensen
 - (b) Present Postal Address.....Theburn P.O.,
Esquimalt, B.C., Can.
- (7) Are you a widower?.....No
- (8) Have you any children?.....Yes
 - If so, give number of boys and girls.....1 Boy, 3 Girls.
 - Also their names and ages.....

<u>Roda Tibballe</u>	<u>15 Years</u>
<u>James Tibballe</u>	<u>13 "</u>
<u>Katie Tibballe</u>	<u>11 "</u>
<u>Beatty Tibballe</u>	<u>7 "</u>

(9) Is your Father alive?.....No.....

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

(10) Is your Mother alive?.....No.....

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

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

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

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

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

(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.

.....On Married Establishment, Permanent Force.....

(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.

Harrison
.....Lt. Colonel
Commanding Reg't'l Depot R. C. R.

Officer Commanding.

SEP 30 1916

Date.....

CHS

Rank

Name CHRISTENSEN Edward Victor August

Reg'l No. 478970 ✓

Unit Reinforcemente R.C.R. What Unit? ^{If in perm. Corps, }}

Married or Single Married ✓

Place and Date of Enlistment Victoria. B.C. July. 18th. 1916. Place of Birth Aalborg. Denmark. ✓

Name and Address, Next-of-Kin Mrs. E.V.A. Christensen ✓

Work Point Barracks, Esquimalt. B.C. Canada. ✓

Relationship

Wife. ✓

Assigned Pay Monthly \$

Payable to

C.C.A.C.

Relationship

Separation Allowance \$

Payable to

Relationship

N/E. R.B. No. 2289

File R.L.

Category M U 600

Discharge, Date and Place

Reason

Character

H. W. & V., Ltd.—7165-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
Date.	From whom received.				
		Arrived in England S.S. Californian		13-10-16	
14-10-16	RCRY P.C.L. Dep.	Taken on strength	S.cliffe	13-10-16	PHI DO. 145
14-10-16	"	Adm. to Seaforth Hospital	Liverpool	13-10-16	PHI DO. 145 (Rheumatism)
8-11-16	"	Dis'd from do.	do.	23-10-16	PHI DO. 167
25-10-16	ccac	Reptd to SOS	Shoreham	25-10-16	— 467
	RCRPHLI	Adm ban con Hsp Mxbridge	Shorecliffe	31-10-16	GR 54 (Pleary)
16-11-16	"	SOS to ccac	Scliffe	25-10-16	PHI DO 176
31-10-16	ccab	Adm ban con Hsp Mxbridge	Shoreham	30-10-16	— 478
2-11-17	RCRPHLI Dep.	Discharged from Hsp.	Mxbridge	19-12-16	C.F. 60. (Pleary)
21-12-16	CCAC	Reptd from Mxbridge	Harting	29-12-16	PHI DO 564
26-12-16	"	Rea of bon GRD Buxton for Deb	"	23-12-16	— 569

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.					
6-1-17	CRW	SOS to Can for Dis M.U.	Buxton	6-1-17	AT 05	
1-2-17	G.B.A.L.	S.O.S. proceeding to Canada M.U. seems to be added to C.D.D.	Hastings	5-1-17	PT 055	
	Disch Deft	to Convalescent Home	2nd "H Victoria B.C.	13-1-17	Now Rob 157	

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 478890 Rank Private Name Charles E. O.A.

Corps 11th May who was* Discharged

On 7 1917, to Class 1.

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1st April 1917, to 7 1917, the inclusive date of transfer or discharge.

Dr.	\$	c	Cr.	\$	c
Bal. Dr. from prev. month		36 09	Bal. Cr. from prev. month		
Advances } No.			Regt'l Pay <u>41</u> days at \$ <u>1</u> ⁰⁰	<u>41</u>	
by } No.			Field Allow. <u>41</u> days at \$ <u>10</u> ^c	<u>410</u>	
Cheques } No.			Other Allowances* <u>Sup. Allow.</u>	<u>33 37</u>	
Assigned Pay No. <u>3814</u>		53 87	Other Credits* <u>Clothing</u>	<u>10</u>	
Other Charges* <u>343</u>		53 51	Other Credits* <u>Subsistence</u>	<u>27</u>	
Payment on transfer or discharge No.			Other Credits* <u>Amended L.O.C.</u>	<u>47 50</u>	
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total		243 47	Total		243 47

*Give Particulars.

A monthly stoppage of \$ 15.32 (†) has been (‡) been paid on account of Assigned Pay for the month of May 1917 to (Assignee) W. Charlotte Christensen
(Address) 57 Regina Ave. Saanich.

(†) Insert amount to be assigned, whether it has been paid or not.
(‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer.

Outfit Allowance of \$ has been paid by Paymaster, Military District No. .

REMARKS:—

- State (1) date of enlistment 1st May 1917
(2) if married and if a Separation Allowance Card has been submitted Class 1 2/10/17 5th 115 5th Unit H.Q. 24/10/17
(3) cause of discharge and authority

If discharged from the Contingent, state if Stop Payment advice for Assigned Pay has been forwarded, and date

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date 1st May 1917

Place Esquimaux B.C.

A. E. Praddock

Paymaster

N.B.—For purposes of transfer this form is to be made out in quadruplicate. One copy to Paymaster of new unit; one to District Paymaster; one to accompany the pay-list at the end of the month, and; one for retention as a record.
For purposes of discharge it is to be made out in triplicate. One copy to accompany discharge papers; one copy to accompany pay-list at the end of the month, and; one for retention as a record.

M. F. W. 44.

Capt.
Paymaster "J" Unit, M. H. O. C.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all ranks (Vide Articles 122, 123 and 141, Financial Instructions, 22nd Ed. C.E.F. 1916)

Regimental No. Rank Name

Company or other designation

On the day of 1916

Pay "Interim," "discharged," or "unemployed."

The following is a statement of the amount of the above named from 1916, the inclusive date of transfer or discharge.

By _____

Bar. Or from previous month

Bar. Or from previous month

Rank Pay

Advances

Field Allowance

By

Other Allowances

Assigned Pay No.

Other (Specify)

Other (Specify)

Bar. Or to be deducted by new unit

Balance to be paid by the new unit

Total

Total

Other Particulars

A monthly allowance of £ () per month () has been paid on account of Assigned

Pay for the month of 1916 to Assigned

(Address)

The amount to be retained, whether it has been paid or not, is inserted, and if amount has not been paid for period of account

On Transfer of an Officer

Grant Allowance of £ has been paid by Paymaster, Military District No.

REMARKS:

State if date of retirement

If it is inserted and if a Special Allowance Grant has been submitted

(If cause of discharge and authority)

If discharged from the Contingent, state if Stop Payment advice for Assigned Pay has been forwarded, and if

I have carefully examined this statement of account and find it to be a correct extract from the ledger of the unit.

Date

Place

The amount of the above named from 1916, the inclusive date of transfer or discharge, is inserted, and if amount has not been paid for period of account

CHECKED BY

W. T. W. 22

Form 111

1916

Temporary
To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname *Christensen* Christian Name *E. V. A.*

TABLE I.—General Table.

Birthplace { Parish.....
County.....

Examined { on..... day of..... 191 ,
at.....

Declared Age years..... days.

Trade or Occupation.....

Height feet..... inches.

Weight..... lbs.

Chest { Girth when fully..... inches.
Expanded {
Measurement { Range of Expansion inches.

Physical Development

Vaccination Marks { Arm..... RIGHT LEFT
Number.....

When Vaccinated

Vision { R.E.—V = ...
L.E.—V = ...

(a) Marks indicating congenital peculiarities or previous disease—
.....
.....

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

Approved by
Rank
Medical Officer.

TABLE III.—Boards; Courts of Enquiry, 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
<i>Dec 6/16</i>	<i>Discharge as Permanently unfit</i> <i>W. H. D. S. C. A. M. C.</i>
<i>Dec 13/16</i>	<i>Approved</i> <i>W. H. D. S. C. A. M. C.</i>
	<i>Assistant Director of Medical Services.</i>
	<i>DEC 13 1916</i>
	<i>Canadians, London Area</i>
	<i>APPROVED</i>
	<i>GENERAL AND FOR R.C. TROOPS.</i>

TABLE IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation
<i>DISCHARGED.</i>		
<i>under</i>		
<i>Para 392, Sec. 16, K. R. & O. 1912.</i>		
<i>Being no longer physically fit for war service.</i>		
<i>W. H. D. S. C. A. M. C.</i>		
<i>for Commandant.</i>		
<i>Canadian Casualty Discharge Depot,</i>		

Enlisted { at.....
on day of 191.....

Joined on enlistment Corps Regtl. No.
46. 2 *478970.*

Transferred to

Became non-effective by.....
on day of 191.....
(Signature).....
(Rank).....

TABLE II.—Only for admissions to Hospital or to the Sick List in case of Warrant Officers treated in quarters.

[illegible]

Form to be used instead of blank space on Army Form 179

Proceedings of Medical Board at Discharge Depot.

Number Rank Name and Corps of disabled soldier.

478970 Pte Christenson Edward - R.C.R.

Previous Civilian Occupation.

Labourer

Cause of disability:-

Bronchitis - due to Service

Condition in detail which prevent the soldier earning a Full livelihood:-

Inhaled emphysema of some cough - paroxysmal - mainly in morning. Slight expectoration. Enlisted 1914 - was on Garrison duty until July 1916 when he went to England. Had an attack of pleurisy Oct 1916. No loss a hard dry cough - few signs of bronchitis in chest. Age 32. Skinned for all night in a couple of months

Opinion of the Board.

Degree of incapacity (Please state in fractions.)

1/5

Probable duration of incapacity:-

2 months

Does it render him permanently unfit for "Military Service?"

Yes

Would operation, special treatment or the use of appliances, etc., lessen incapacity.

Convalescent Home

Signature.

W. W. Carreck Major President.

E. Robertson Capt Members.

W. W. Carreck Capt

Station. *Quebec*

Date

Jan 15/17

Approved.

Date

Jan 15/17

Date

6/2/17

W. W. Carreck Major Assistant Director Medical Service.

D. J. McKay Capt Director General Medical Service.

15/17

Number _____ Rank _____ Name and Corps of disabled soldier _____

Previous Civilian Occupation _____

Cause of disability: -

Condition in detail which prevented the soldier from being a full
liveliness: -

Opinion of the Board

Degree of incapacity (Please state in fractions)

Probable duration of incapacity: -

Does it render him permanently unfit for "Military Service?"

Would operation, special treatment or the use of appliances, etc.,
lessen incapacity.

Signature _____ President _____

Members _____

Station _____

Date _____

Approved _____

Date _____ Assistant Director Medical Service _____

Date _____ Director General Medical Service _____

Signature of Officer i/c Records.

(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) Signaller, Shoeing-smith, &c. [P.T.O.]

[illegible]

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

Surname	Christian Name or Names	Reg. No.
Christensen	E.V.A.	478970
Rank	Unit	Co.
Pte.	R.C.R. & P.P.C.L.I.	
Hospital		Date of Admission
Liverpool Military		13.10.16
Transferred Hillingdon Conval.		Hosp. 31.10.16

Hosp.

Hosp.

Hosp.

Diagnosis

Rheumatism

(1)
Later Diagnosis (if changed)

(2) Pleurisy.

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Dis. 23.10.16

Date

Dis. 19.12.16.

C.L 29.11.16 54

REMARKS

" 2. 1. 17 No. 60

C.L. 9-1-17 62. corrected name

A.M.D. 2 DEPT.

Bch. of D.G.M.S. O.M.F.C. London.

Rw.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
54	Mil Liverpool (Seafath)	13-10-16	Rheumatism
54	Disc	23-10-16	"
54	Can Com Hillingdon House Wybridge	31-10-16	Pleurisy.
60	Discharged	19-12-16	" " "
74	M. H. C. C. Esquimaux	28-3-17	Trans. To Out-p.
97	" " " " "	26-4-17	Dis ch. " "

NAME

RANK AND CORPS

CABLE

No.

DATE

NATURE OF CASUALTY

REGT'L No

H. Q. FILE No. 649-

FOLLOWS

No.

FOLLOWS

Christenson, Edward Victor August
 Pte. R. C. R. + P P C. L. I.

498 970

T 307

8-1-17

b.

Sailed from Liverpool for Canada per the
 S. Scandinavian Jan. 5, 1916
 Rheumatism (Aged)

649-C-805-7

CARD NO.

SURNAME.

Christensen

CHRISTIAN NAMES

Edward Victor August

S.O.S. Disch. 11/5/17 = II.

REGL. NO.

478970

RANK

Pte

UNIT

R. C. R. Reinforcements

FORMER CORPS

Royal Navy 5½ years

NEXT OF KIN.

NAMES IN FULL

Christensen Mrs E. V. A.

RELATIONSHIP TO SOLDIER

Wife

ADDRESS

Work Point Barracks
Esquimalt B. C.

CHANGE OF ADDRESS

D 3-5-24

Auth. S.C.R.

d/26 5-24

COUNTRY OF BIRTH

Denmark

Galborg

DATE

Jan 21st 1871

PLACE OF ATTESTATION

Victoria

B.C.

DATE

July 18th 1916.

MARRIED

Yes

SINGLE

WIDOWER

TRADE OR CALLING

Labourer

RELIGION

Church of England

DESCRIPTION.

APPARENT AGE

44 YEARS

MONTHS

HEIGHT

5 FEET

6³/₄ INCHES

CHEST MEASUREMENT

35 INCHES

EXPANSION

2 INCHES

COMPLEXION

Dark

EYES

Grey

HAIR

Grey

DISTINGUISHING MARKS

not stated

MEDICAL EXAMINATION.

PLACE

Esquimalt B.C.

DATE

July 18th 1916

Present address

Work Point Barracks

Esquimalt B.C.

No. 478970

RANK

Pte

NAME

Christenson E.

T. O. S.

UNIT

Royal Canadian Regiment

M. D.

6

PAID
FROMPAID
TOSIG.
OR
REC'T

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS

AUTHORITY

1916
July 25 Aug 31

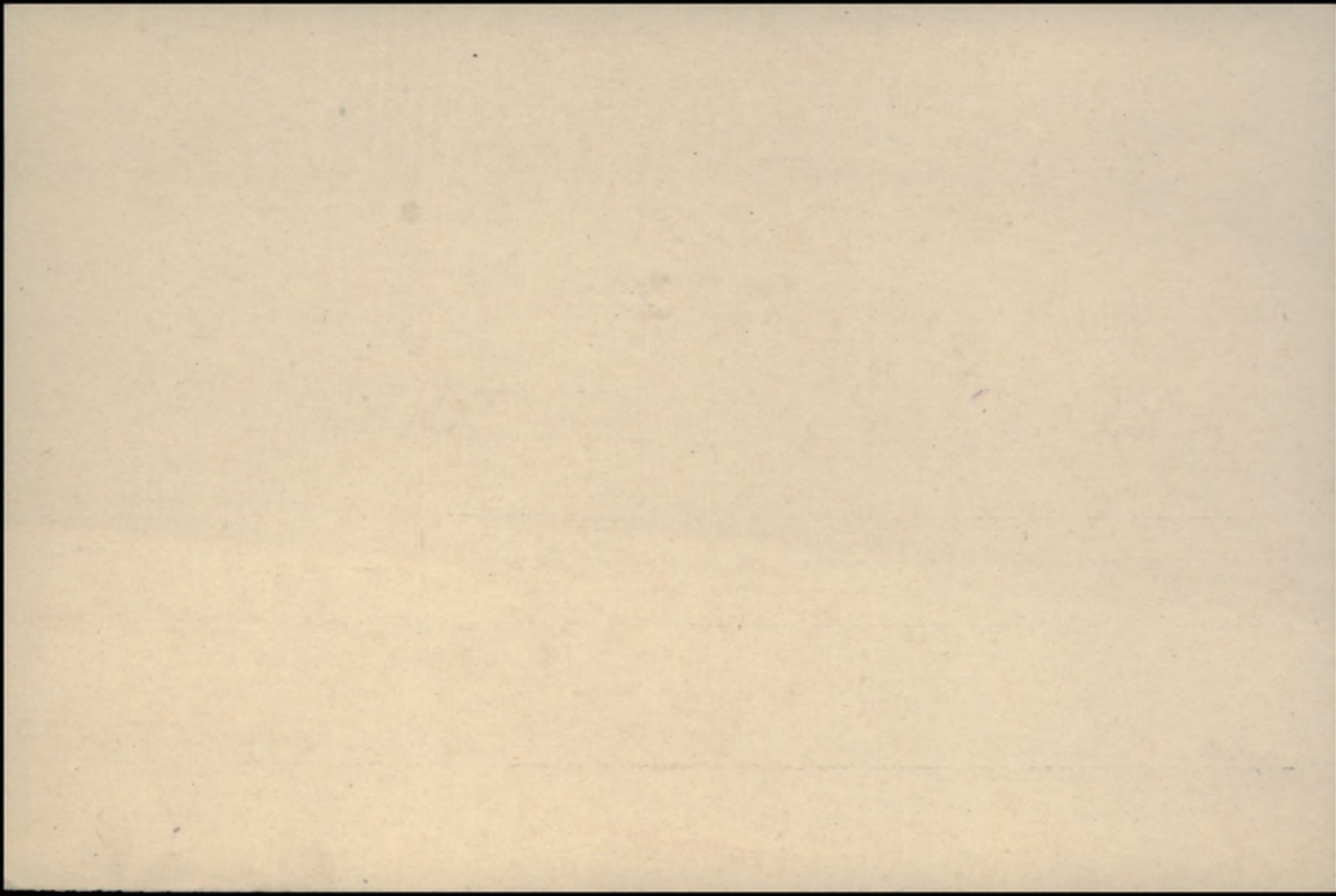
Left

Oct. report

Now shown on this (Base).

Trans-cancelled

DO 236.



9. Edward Victor August
Name Christensen Rank

Rank

Pte

Reg. No. 478970

Unit

~~RCR & PPCLI DEPOT.~~

2nd Res

Next of Kin

Canada.

[illegible]

[illegible]

No. 478890 RANK *gt*

NAME *Christenson E. V. A.*

T.O.S. Discharged from
R.C.R. 1-2-17
W.O. 34 9-2-17

UNIT *Casualties M. H. C. C.*

M. D. *11*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1917</i> <i>Feb 1</i> <i>Mar</i>	<i>1917</i> <i>Feb 28</i>	<i>L</i> <i>L</i>		



No.

RANK

Pte.

NAME

Christensen C. V. A.

T. O. S.

UNIT

Royal Canadian Regt.

M. D. //.

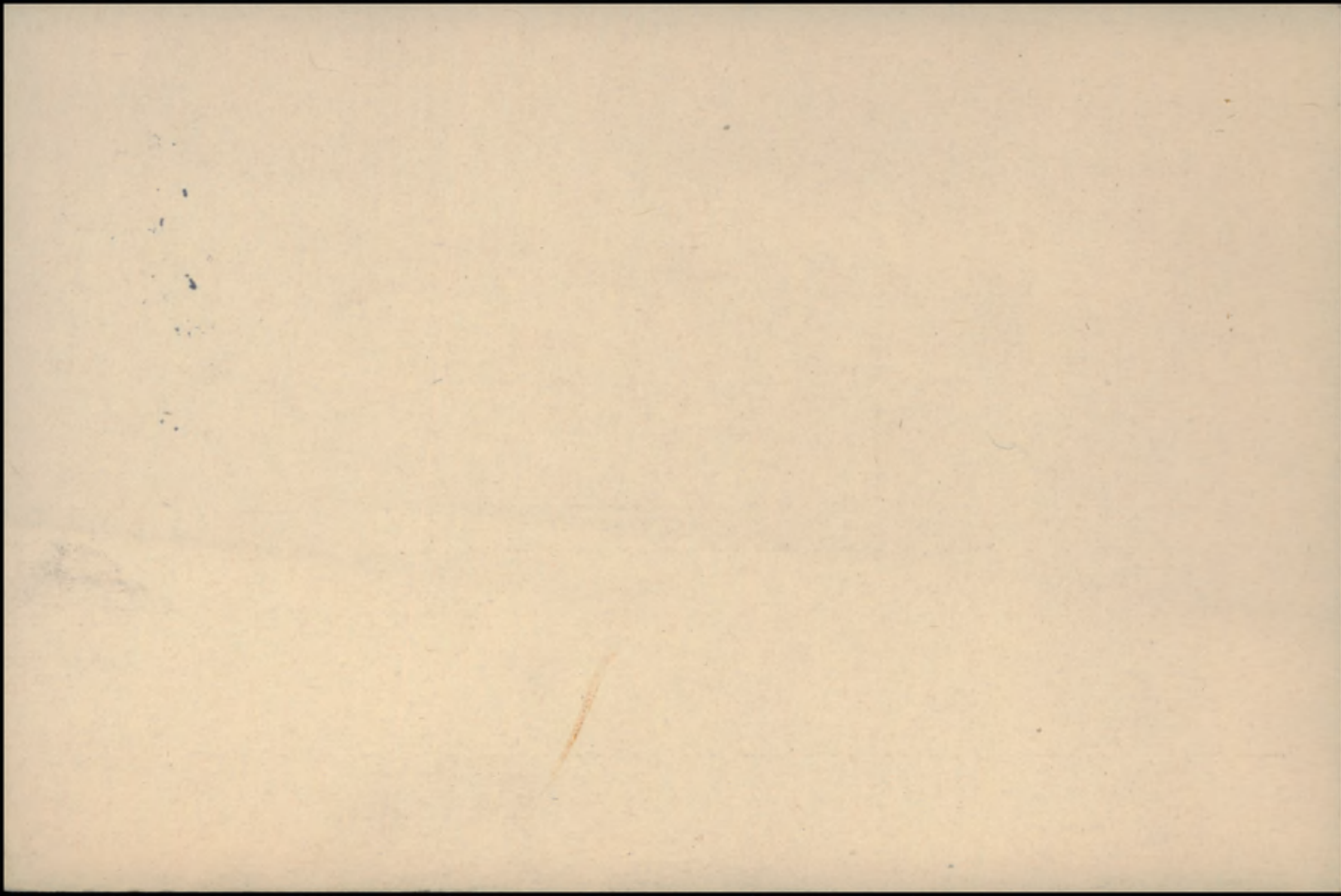
PAID
FROMPAID
TOSIG.
OR
REC'T

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS

AUTHORITY

1915. Jan. 1.	1915. Jan. 31.	✓
Feb.		✓
Mar.		✓
Apr.		✓
May.		✓
June.		✓
July.		✓
Aug.		✓
Sept.		✓
Oct.		✓
Nov.		✓
Dec.		✓
1916. Jan. 1.	1916. Jan. 31.	✓
Feb.		✓
Mar.		✓
Apr.		✓
May		✓
June		✓
July 1	July 24	✓



M-64

B

Number... 478970... Rank... Pte...

Surname... CHRISTENSEN...

Christian Name... Edward Victor August...

Unit... R. C. C. Theatre of War... England

Date of Service... 13-10-76...

Remarks... 31 Regina Ave. Victoria

Latest Address... 485 ...

... B. C.

Roll No. A Page 448

M. A. 11210 Sharp

30191

2251
26/1/17
4105.26 Jan. 17

PENSIONS AND CLAIMS BOARD, Canadian Expeditionary Force, assembled at
Prior Park, Bath, England, on the day of 191

Members of Board.

Proceedings.

The Board having considered the evidence of the man marginally noted, and the
documents submitted, hereto attached, which form part of these Presents, marked

C.P., KINGSWAY, W.C.
30,000-17/4/16-10533.

Army Form B, 179.
Canada.

Medical Report on an Invalid.

Station Can. Con. Hospital, Uxbridge.

Date 21-11-16

MILITARY DEFENCE

JAN 26 1917

H.Q. CANADA

1. Unit R. C. R.

5. Age last birthday 52

2. Regimental No. 478970

6. Enlisted { on August 24th. 1914

3. Rank Private

{ at Esquimaux Vict.

4. Name Christensen E.V.A.

7. Former Trade
or Occupation Laborer

8. Disability.

Chronic Bronchitis and Over age

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case.
In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his
military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability.

October 12th. 1916

10. Place of origin of disability.

On Transport Ship California.

11. Give concisely the essential facts of the
history of the disability, noting entries
on the Medical History Sheet bearing
on the case.

While on transport on Oct. 12th. had an
attack of pleurisy and bronchitis. He was
sent to Sandun, Liverpool where he was about
10 weeks, and came to Uxbridge on 30-10-16.

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith.

12. (a) Give your opinion as to the causa-
tion of the disability.

Infection and Exposure

(b) If you consider it to have been
caused by wounds received or illness
contracted (1) in the presence of the
enemy (2) on active service, explain
the specific conditions to which you
attribute it. (See notes on page 3.)

1) No

2) Yes Infection and Exposure.

FALSE DOCKET

2

1555
17

13. What is his present condition? General Condition poor.

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

Local Condition:- Has a bad attack of Chronic Bronchitis with a hard dry nasty cough. He has occasional night sweats, and is debilitated. His chest has a shrunken appearance. Dullness in both sides of Chest. He is over age.

14. If the disability is an injury, was it caused

- (a) In the presence of the enemy? No
(b) On active service? Yes
(c) On duty? Yes
(d) Off duty? No

15. Was a Court of Inquiry held on the injury?

- If so—(a) When? No
(b) Where? Not applicable
(c) Opinion?

16. Was an operation performed? If so, what? No

17. If not, was an operation advised and declined? No

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

Lost 7 teeth since joining the Army.

19. Do you recommend

- (a) Fit for duty? No
(b) Fit for base duty? No
(c) Invalided to Canada? Yes
(d) Discharge as permanently unfit? Yes

I have satisfied myself of the general accuracy of this report, and concur therewith, except†

Station

Date

* Loss of teeth on, or immediately after, active service should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

Officer in medical charge of case.

Officer in charge of Hospital.

Signatures:-

Station

Date

Approved.

Station

Date

Assistant Director of Medical Services.

DEC 13 1916

Canadians, London Area

Opinion of the Medical Board

NOTES—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as it is essential that the Members of the Pensions and Claims Board should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 641 to 648 of the Canadian Pay and Allowance Regulations).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

20. (a) State whether the disability is the result of injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service.

(b) If due to one of these causes, to what specific conditions do the Board attribute it?

21. Has the disability been caused or aggravated by

- (a) Intemperance?
(b) Misconduct?

22. Is the disability permanent?

23. If not permanent, what is its probable minimum duration?

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{2}$, $\frac{1}{3}$, $\frac{2}{3}$, or total incapacity.

25. If an operation was advised and declined, was the refusal unreasonable?

26. Do the Board recommend

- (a) Fit for duty?
(b) Fit for base duty?
(c) Invalided to Canada?
(d) Discharge as permanently unfit?

27. Remarks.

This man has only been in England a few months. His condition is much better and his condition is no worse than when he enlisted.

President.

Members.

Administrative Medical Officer.

RELATIONSHIP OF DEPENDANT

EFFECTIVE (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

Entered on N.E. Card Index *Z. B. 74.*

Net Balance
Canada \$79.00
✓ 100.176 B.D. 176/116
✓ 1909 Jan 19/6
Deducted from Net Payments
X- Extracted from P.D. Pay Bk
S. Fund 28/12/16, off 1-1-
Pay Book verified
Discharged to Canada
28/12. P.D. 1-583-241.
Trans. N. T. Brough 29-12-
62. Bal. H. 141
2 P.D. rend. 29.12.16.
243 Adv. C.D. Buschm. S.P.H. No 2
5/1/17. Deb. Bee. 1-02.
\$67.50 H. has been debited again
for many Net in Canada. Please
order. See not on letter dated
17/1/18. Ob. No. C 2692. (Copy to C)

LIST OF DISCHARGE DOCUMENTS.

1. Proceedings on discharge. (Army Form B. 268.)
2. Proceedings on transfer to reserve (if any). (Army Form B. 2056.)
3. Duplicate attestation.
4. Army Form B. 97 (if any).
5. Declaration of change of name (if any).
6. Re-engagement paper (if any). (Army Form B. 136.)
7. Authority for continuance, or extension, of service (if any). (Army Form B. 221.)
8. Court of Inquiry on an injury (if any). (Army Form A. 2.)
9. Regimental conduct sheet. (Army Form B. 120.)
10. Company conduct sheet. (Army Form B. 121.)
11. Copies of convictions by Civil Power (if any).
12. Medical history sheet. (Army Form B. 178.)
13. Medical report on invalid (if any). (Army Form B. 179.)
14. Copy of receipt for purchase money (if any).
15. Attestation of fraudulently enlisted man for corps in which he has not been held to serve (if any).
16. Detailed statement of former service allowed to reckon towards pension (if any).
17. Copy of 3rd page attestation (in the case of men from abroad entitled to deferred pay who go to Netley or the discharge depot for discharge).
18. Descriptive return. (Army Form D. 400), where required. See section 11 on second page.
19. Active service casualty form. (Army Form B. 103).
20. Employment sheet. (Army Form B. 2066).

In the case of recruits who are rejected before, or on, final approval, the discharge documents will consist of—

1. Duplicate attestation. (On third page the date and cause of discharge will be entered and signed by the competent military authority).
2. Medical history sheet (if any). (Army Form B. 178).

Instructions as to the preparation, dispatch, and custody, of discharge documents.

1. When a soldier is to be discharged, the documents retained with the duplicate attestation will be placed inside this form. Should any of the documents be missing, an explanation of the deficiency, signed by the commanding officer, must be substituted for the missing document. The officer in charge of records will then extract from the original attestation, any documents required to complete the list of discharge documents enumerated in the margin, which will then be placed in this form in the sequence given.

2. When men are discharged from the colours at home as medically unfit, or with claims to pension, Army Form B. 268 will be sent confirmed, together with the duplicate attestation and documents retained therein to the officer in charge of records 10 days in advance of the date for discharge in the case of invalids, and 14 days in other cases. This officer will then extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them in this form, and after carefully checking the duplicate attestation with the original forward the whole to the Secretary, Royal Hospital, Chelsea. When such men are discharged abroad, the same procedure will be adopted as above, with the exception that the discharge documents will be sent to the officer in charge of records immediately after discharge takes place (except in the case of men who are granted gratuities on discharge from local battalions or companies, Royal Artillery).

3. When soldiers are sent home from abroad for discharge, the documents retained with the duplicate attestation will be placed inside this form and sent home with the men for transmission to the officer who carries out the discharge, together with the following additional forms:—

- (a) Discharge certificate (Army Form B. 2079 or Army Form B. 264).
- (b) Character Certificate (Army Form B. 2067) if entitled.
- (c) Copy company conduct sheet (Army Form B. 121) when required under King's Regulations.

The duplicate attestation and documents retained therein will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin and place them in this form.

4. The discharge documents of re-enlisted pensioners, on re-discharge, will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them inside this form, and forward the whole to the Secretary, Royal Hospital, Chelsea, irrespective of the cause of discharge.

5. The original and duplicate attestations of recruits who are rejected before, or on, final approval will be retained by the approving officer for one year, when they will be destroyed.

6. In all other cases the discharge documents will be sent, directly the discharge is carried out, to the officer in charge of records of the unit concerned.

7. Postage need not be paid, and receipts are not required, in the case of documents sent to Chelsea or to the War Office,

8. When the discharge documents of men not entitled to pension are sent to the officer who will have final charge of them, they are to be accompanied by Army Form B. 279, and that officer will, if they are found to be correct, sign and return Army Form B. 279. Should any document be missing, he must at once apply for it.

9. The officers having final charge of the discharge documents will arrange them according to regimental numbers, and enter the names in the alphabetical index, Army Book No. 129.

CERTIFICATE

A

n B. 263.

Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No.	478970	Army Rank	Pvt.
Name	Christensen, Edward W. R.		
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)			
Corps	C.C.A.C. R.C.R. C.B.F.		
Battalion, Battery, Company, Depot, &c.	R.C.R. C.B.F.		
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)			
Date of discharge	May 11th 1917		
Place of discharge	Esquimaux B.C. Canada		
1. Description at the time of discharge.			
Age	52 years	months	Descriptive marks. 4 Yare mfgs W. Am. 3 " " " " " "
Height	5 feet	4 1/2 inches	
Chest measure	girth when fully expanded ins.		
ment	range of expansion ins.		
Complexion	Ruddy		
Eyes	Grey		
Hair	Grey		
Trade	Butcher		
Intended place of residence	480 Head St.		
(To be given as fully as practicable)			
(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)			
2. The above-named man is discharged in consequence of			
Para. 392, Sec. 16 of B & O. 1912.			
Being no longer physically fit for war service.			
Anthoni, Pension Commissioner Telegram 24-4-17			
(The cause of discharge must be worded as prescribed in the King's Regulations, and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted)			
3. Military character			
Good			
4. Character awarded in accordance with King's Regulations:—			
To be filled in on the soldier quitting the Colours.			
CANADIAN DISCHARGE DEPOT			
Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.			
Initials of Commanding Officer.			
Army Form B. 2088 has been issued to*			

* Strike out if not applicable.

[OVER.]

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... .. Class

6. Campaigns, Medals and Decorations

Certificate of education

7. His accounts and balances, and I have impartially inquired into all matters brought before me in accordance with Regulations.

(Place) Esquimaux - B.C. (Date) 27th April 1917
Commanding Officer Commanding Regiment.

8. Certificate to be signed by the soldier on discharge.

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(Place) Esquimaux - B.C. (Date) 27th April 1917
(Signature of Soldier.)

(Date) 27th April 1917 (Signature of Witness.)

(When a soldier is absent through illness or any other cause, and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned should be attached here.)

9. Additional certificate in the case of a soldier who takes his discharge at his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

(Signature of Soldier.)

10. Statement of service.

Service towards engagement to 11/5/17 (the date to which the record of service is completed) 2 years 260 days.

Further service " " (the date of confirmation of discharge)

Total ... 2 ... 260 ..

11. Confirmation of discharge.

The discharge of the above-named man is hereby confirmed for 11th May 1917 (date)

(Place) Esquimaux - B.C. (Date) 27th April 1917
Signature: Parker Lt Major

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated and signed by the soldier.)

None.

E. V. B. Christensen