m + 24-6-18

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers.....2.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....1.....

Compulsory Stoppages.....

Casualty Forms.....3.....

Proceedings on discharge.....2.....

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.....1.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....12.....

a7 B 122-1
M7W B94a-1
a7W 322-6
Blanket
M7W 671
Rem 1
1pc

M. F. W. 62.
100m.—6-17.
H. Q. 1772—39—935.

Name Coleman Roy Wellington

Regt. No. 663588 Rank Pte

Corps #2 Dis Depot (164th Bn) C M G D

Disability

R. O. No.....

H. Q. No.....

285153

Cards:- 1 Part II
1 Casualty.

2

41 21
10 21
8 21

6

ORIGINAL

ATTESTATION PAPER.

No. 663588

164TH BATTALION

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Coleman
1a. What are your Christian names?	Roy Wellington
1b. What is your present address?	Milton Ont.
2. In what Town, Township or Parish, and in what Country were you born?	Cookstown
3. What is the name of your next-of kin?	James Colemen
4. What is the address of your next-of-kin?	Milton, Ont.
4a. What is the relationship of your next-of-kin?	Father
5. What is the date of your birth?	October 26th, 1898
6. What is your Trade or Calling?	Machine operator
7. Are you married?	No
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9. Do you now belong to the Active Militia?	No
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

Cable 88/5.A.S. dated 5 Mar. 1918. Birth date & Birth place confirmed on 11th March, 1918.
Auth. N.L.22-3.0 d/11/3/18 R.I.C. 31/6 Cable 8-3-18. received at Ottawa 9-3-18.

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Roy Wellington Coleman, 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.

Roy Coleman (Signature of Recruit)

Date March 27th, 1916. L. McNeen Capt (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Roy Wellington Coleman, 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.

Roy Coleman (Signature of Recruit)

Date March 27th, 1916. L. McNeen Capt (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 Milton this 27th day of March 1916

J. W. Peacock J.P. (Signature of Justice)

FOR LT. COL. I/C RECORDS, C.O.M.F.

Office. 9-3-18. Withdrawn LIEUT.

M. F. W. 23.
400M.—1-15.
H. Q. 1772-39-841.

Description of Roy Wellington Coleman on Enlistment.

Apparent Age 19 years 3 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 6½ ins.

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

Complexion Fair

Eyes Blue gray

Hair Fair

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

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).

Small surgical scars
L. Scapula

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 March 29th 1916. R W Bagley

Place Milton Capt. Med. Corps

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.

Coleman Roy Wellington 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.

Lieut. Col. (Signature of Officer)
164 Battalion C. E. F.

Date MAR 30 1916 191

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 663588 (Rank) Private

Name (in full) COLEMAN Roy Wellington enlisted in

the 164th Bn

CANADIAN EXPEDITIONARY FORCE at Milton.Ont. on the 27th

day of March 19 16

HE served in England and France

and is now discharged from the service by reason of Disability pre-existing enlistment not due to or aggravated by service.

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

Age 17 years 7 months	Marks or Scars
Height 5' 6½'	
Complexion Fair	Vacc one left arm.
Eyes Grey	
Hair Fair	

Pte R W Coleman
Signature of Soldier

H S Beeman
Issuing Officer

Captain,
Rank

For Lieut.-Colonel,
O.C. No. 2 District Depot.
Appointment

Date of Discharge 5th June 1918.

Signed at Toronto .Ont. this 5th day of June 19 18

in Military District No. "2"

File Reference No.

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. W. 39a
200m.—2-18
H.Q. 1772-39-882

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. 663588 (Rank) Pte Name COLEMAN R.W.

Unit 164th Bn

Address on Discharge 255 Caroline South Hamilton.Ont.

Character and Conduct Very Good

Former Occupation Machinist

Special Qualifications of Value in Civil Life

Medals and Decorations NIL

Remarks

Signed at Toronto.Ont. this 5th day of June 1918.

H S Beemer Captain,
Name of Officer. For Colonel,
O.C. No. 2 District Depot.
Rank

Appointment

Uniform not to be worn after date of this unless written authority has been granted by the G. O. C. of district.

M. D. 2

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

No. 23

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

Regimental No. 663588 Rank Pte. Name R.W. Coleman

Corps #2 Dis. Dep. who was* Discharged

On June 5, 1918 191....., to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from June 1, 1918 191...., to June 5, 1918 191...., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month		29	Bal. Cr. from prev. month		
Advances by Cheques { No.			Regt'l Pay 5 days at $1 c.	5	
Advances by Cheques { No.			Field Allow. 5 days at $ c. 10		50
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges			Other Allowances* Clothing	8	
Payment on transfer or discharge No. 229 01	46	21	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)	33	
Total	46	21	Total	46	50

*Give particulars.

A monthly stoppage of $.....(†) has.....(‡) been paid on account of Assigned Pay for the month of.....191.... and Sep'n Allce. for month of.....191.... (to) Assignee.....

(Address).....

(†) 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 .....

(2) if married and if a Separation Allowance Card has been submitted No

(3) cause of discharge..... authority D. O. 46

(4) authority for transfer .....

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

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

Date 4/6/18

Place Toronto

R W Muse

Paymaster.

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

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.

100M.—1-18.
H. Q. 1772-39-903.

DUPLICATE

To be made out in duplicate.

H.Q. 54-21-23-53

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 164th O.S., Bn., C.E.F.

(2) Regimental Number 663588

(3) Full Name of Soldier Roy W. Coleman

(4) Place of Birth Thornton, Ontario.

(5) Are you married, or not? No

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

(b) Present Postal Address

(7) Are you a widower?

(8) Have you any children?

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

300M.—5-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes

If so, state name and address James Coleman, Milton west, Ontario.

(10) Is your Mother alive? Yes

If so, state name and address Elizabeth Coleman, Milton west, Ontario.

(11) If your Mother is a widow No

Are you her sole support, or not? No

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

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

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

(15) Are you insured? No.

If so, in what Company?

Have you made arrangements for payment of your Insurance premium

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Lieut. Col.
104 Battalion C. E. F.
Officer Commanding.

Date FEB 1 1917

ORIGINAL

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Coleman Christian Name Roy Wellington

Examined on 27th day of March 1916 at Milton

Birthplace City or Town Cookstown County Simcoe

Apparent age 18.

Trade or occupation Lathe hand.

Height 5 Feet 6½ Inches.

Weight 165 Lbs.

Chest measurement Minimum 33 inches. Maximum expansion 37 inches.

Physical development average

Small-Pox Marks none

Vaccination Marks Arm Right. Left. Number none

When Vaccinated last never

(a) Marks indicating congenital peculiarities or previous disease small scars scar left scapula

(b) Slight defects but not sufficient to cause rejection none

D. 15 each eye

Approved by Robertsley

Rank Capt Adjt 60th Bn M.O.

Date.	Fit or Unfit.	Examined for Re-engagement.
		22 MAR 1918 M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
1/9/16	OK	Robertsley Capt M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
26/4/16	OK	Robertsley M.O.
5/5/16	JAB	Robertsley M.O.
6/5/17	—	[illegible] M.O.

Enlisted on 29th day of March 1916 at Milton

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	164th Battalion C. E. F.	663588		APR 23 1917
Transferred to	Fwd. Can. Res. Bn. C.M.G.D. M G Pool			MAY 10 1917

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Ravina Bks. Toronto	May 28th, 1918	Underage slight	rhinitis "E" W.J. McLean .....Major A.M.C. Pres. S.M.B.

CANADIAN

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. 1772-39-439.

J.Mc

Surname O'Leary Christian Name Roy Wellington

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital.			Dates of Discharge from Hospital.			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.
		Day	Month	Year	Day	Month	Year				
Hamilton		6	3	17	21	3	17	Pneumonia	6	Recovery. Duplicate Medical History Sheet posted to here. 7.S.	D. R. Finlayson.

DEPARTMENT OF MILITIA AND DEFENCE. 11991

238

WAR SERVICE GRATUITY.

OTTAWA, CANADA.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

If the applicant will enquire at the local Branch of the Canadian Patriotic Fund he will be informed if there is an official who will take this Declaration free of charge.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

1. Christian Names Roy Wellington 2. Surname Coleman

3. Rank Pte 4. Original Unit 164 Batt. 5. Reg. No. 663588.

6. Address, in full, to which future payments of gratuity are to be forwarded Mr. Roy W. Coleman. 69 O'Hara Ave Parkdale Toronto Ontario Canada.

7. Date of enlistment in the C.E.F. March 26. 1916.

8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Not Applicable

9. Relationship of such dependent "

10. Address, in full, of such dependent "

Had no separation allowances

11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? Not Applicable

12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—

164 Batt. Can. Eng. 14 months. Can. Mac gun Company. Eng. France. 12 months. Apl. 1917

13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? No

14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service Mend. Overseas with 164 Batt. April. 5/17.

15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served With 164 Batt. from March 26/16 till May 8/17. and with the C.M.G. Gunners from May 8/17 till June 5/18, overseas

16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department No.

17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? No.

M.F.W. 2595.
1772—-39—1389.
1160—D.P.—250M-12-18.

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units.. No

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid .. No

20. Have you been issued with a War Service Badge? If so, what class ? .. A & B

21. Have you, during the present war, served in the Imperial Forces ? .. No

22. Are you entitled 'o receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled ... No

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? ... No

(b) If so, was such reversion in consequence of misconduct or inefficiency? .. No

24. Are you now serving in the C.E.F. .. No ..... If not, give:—(a) Date of discharge June 5/18 ..... (b) Reason for discharge .. Under age.

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit... No

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit.....
With the 12th Can. Machine Gun Company from November 1/17 till March 20/18

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? No.

(b) If so, are you in receipt of full pay and allowances from that Department? ... No

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: Mr R. W. Coleman

Place of Residence: 69 O'Hara Ave Parkdale Toronto

Declared before me at: Toronto

This 22nd day of January 1919

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths. Geo Wright J.P.

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
5-6-18	33.00			
5-7-18	33.00			
5-8-18	34.10			
No Overpayment	100.10			

Certified Correct.

MINOR

District Paymaster.

W Kimpton - CAPTAIN C.A.P.C., C.E.F.
for PAYMASTER, MILITARY DISTRICT No. 2

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213. Army Form A. 36, or other official documents.
Date	From whom received				
1-11-17.	O.C. Pol.	Arrived France T.D.S. C.M.G.R. Pool	Camiers	1-11-17.	N.R. R.H.R. 135 Pr. 94 of 4-11-17
9-11-17	O.C. 6 R.C.	Transferred to 12th M.G. Coy	Field	8-11-17	NR R.H.R. 45 P.O. 96 of 19-11-17
9-11-17	Do	T/O/S 12th C.M.G. Co	"	9-11-17	NR R.H.R. 45 P.O. 155 of 20/11/17
10-11-17	O.C. Unit	Joined Unit	Field	6-11-17	B213
2-2-18	Do	Evac Sick	—	29-1-18	B213
29-1-18	12 C.F.A.	Sentence adm To	12 C.F.A. 46 F.A.	29-1-18 39-1-18	a36-D784.
29-1-18	46 F.A.	Do adm	46 F.A.	29-1-18	a36-D411
		Trans To	Duty	8-2-18	a36-D1988
9-2-18	O.C. Unit	Returned To Duty		8-2-18	B213
16-4-18	A.A.G.	T.O.S. Can M. Gun Corps and posted To 12 Can M.G. Coy		1-3-18	KA8487 + A6864, 4/16/4/17 P.O. 27 of 15/3/18
16-3-18	O.C.	Despatched to Base as Minor		10-3-18	B213.
8/3/18	A.A.G.	Struck off Strength 12th Can M.Gun Coy on being transferred to Eng as Minor and posted to Can M.G. Depot Seaford		18-3-18	AG 3a2-8875 of 8/3/18 Ref K.B. 25598/2. P.O. 34 of 28/3/18

A.B. Johnson Capt for Lt.-Col., A. A. G.
Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

Correct date of Birth Oct 26th 1900 Not to be sent Overseas until 19 years of age

B3 Aut Ch 22-3 C a/11-3-18 R1 "6" 3170

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

M. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

FOR LT. COL. I/C RECORDS, C.O.R. LIEUT.

Casualty Form—Active Service.

Unit, Regiment or Corps 164th. Battalion. C.E.F.

Regimental No. 663588. Rank Private. Name Coleman. Roy Wellington.

Enlisted (a) 27/3/16. Terms of Service (a) C. E. F. Duration of War & 6 Mo. Service reckons from (a) March 27th. 1916.

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

Extended Re-engaged Qualification (b) (Machine Operator.) Machine Gunner.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date 1917	From whom received				
Apr. 10		Embarked at Halifax for Overseas, disembarked	Halifax England	10 APR 1917 APR 22 1917	
APR 26 1917	164th.	Transferred to 2nd Can. Reserve Batt.	Shorncliffe.	APR 23 1917	Pt. 2. D.O. 53.
25-4-17	2nd Res	Taken on strength 2nd Canadian Reserve Bn.	E.Sandling	23-4-17	Pt.2 D.O.# 97
10-5-17	2nd Res	Transferred to C.M.G.D. Crowborough	E.Sandling	10-5-17	Pt.2 D.O.# 112
1-11-17	Com. C.M.G.D. Com. M.G.D.	Taken on Strength, C.M.G.D. Transferred to Reas. C.M.G. Pool	Crowborough Seaford	MAY 12 1917 31-10-17	Auth. Depot Order Pt. II No. 182 Depot Order Pt. II No. 306.

CAPT. 2nd CANADIAN RESERVE BATTALION

Lieut. A/Adjutant, C.M.G. Depot.

MAY 12 1917

CERTIFIED CORRECT 9 NOV 1917 CAN. RECORDS LONDON

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.

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

92431 —W6490/1535.—2,000,000—J. J. K. & Co., Ltd.—Forms B. 103/1.

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps 164th Battn

Regimental No. 663588 Rank Pte. Name Coleman Roy W.

Enlisted (a) _____ Terms of Service (a) _____ Service reckons from (a) _____

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

Extended _____ Re-engaged _____ Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
5 APR 1918		TAKEN ON STRENGTH C.D.D. BUXTON Pt. 11 ORDER No. 80			
		EMBARKED FOR CANADA FROM LIVERPOOL			
					Lieut.-Col. Commanding Canadian Discharge Depôt
		T.O.S. No.2 District Depot, Part II, D.O. No. 22 from 30/4/18			
		Dis #2 Dis Depot Toronto 5th June 1918 Partll.....45			
					H B Beecum Lieut. for O.C. #2 Dis Depot.

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				

Army Form B. 103

Regimental Number 663588

Casualty Form—Active Service.

Regiment or Corps 12th M.G. Coy.

Rank ..... Surname Coleman Christian Name Roy Wellington

Religion ..... Age on Enlistment ..... years ..... months

Enlisted (a) ..... Terms of Service (a) ..... Service reckons from (a) .....

Date of promotion to present rank ..... Date of appointment to lance rank .....

Extended { ..... / ..... } Re-engaged { ..... / ..... } Qualification (b) .....

or Corps Trade and Rate .....

Occupation ..... Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked...			
21-3-18.	C.M.G. Corps Depot.	T.O.S. from 12th M.G. Coy. (Minor.) and on command to C.M.G.D.	Seaford.	20-3-18.	Pt. II Do. 68.
			H. S. Moody LIEUT: FOR LT: COL: I/C RECORDS, C.O.M.F.		
					11.4.18.

(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.

(6228) W. 13563/M1477 2,400,000 1/17 McA & W Ltd Forms B./103/4 (E. 868)

[P.T.O.

663588. Pte. R.W. Coleman. Chest Report

Present Complaint.

1. Cough N.S.
2. Frequent blowing of nose.
3. 3/4 white-sputum daily.

No hæmoptysis, pneumonia or pleurisy. Fit & well. Subject to winter colds since childhood & frequent tonsilitis & rheumatism. Cough began when in Hamilton after influenza.

Phys. Exam.

Temp. N. Pulse 78.

Tonsils hypertrophied, pharyngitis, rhinitis.

~~P.S. Rhonchi over lower lobes.~~

Chest ~~[illegible]~~ normal

No evidence Pulmonary or Bronchial disease

Other than cough — probably a slight Bronchitis

is going a few days handicap

No heart murmur elicited at rest or exercise

Standing or lying

J. A. Reeson

663588 Pte. R.W. Coleman Chest Report.

Present Complaint

1. Cough at night.
2. Frequent blowing of nose.
3. One ounce white sputum daily.
   No haemoptysis, pneumonia or pleurisy.
   Family history negative.
   Subject to winter colds from childhood and
   frequent tonsilitis and Rheumatism,
   Cough became worse in Hamilton after enlisting.

Physical examination.
Temperature normal. Pulse 78.
Tonsils hypertrophied, pharyngitis, rhinitis.
Chest normal.
No evidence of Pulmonary or Bronchial disease other
than cough- probably a slight Bronchitis, is only a few days
No heart murmur elicited at rest standing.
or exercise, standing or lying.

May 25th.1918. Signed J.H.Elliott
Spadina Militayy Hospital.

OVERSEAS MILITARY FORCES OF CANADA.

R.L. 22-3.0.
R.L."C"3170.

CANADIAN RECORD OFFICE,
GREEN ARBOUR HOUSE,
OLD BAILEY.
LONDON.E.C.4.
11th March 1918.

Officer i/c R.2.

MINOR.

663588.
Pte.Coleman,R.W.
12th Can.M.G.Coy.

Documentary evidence in the form of
a Cable 8875 A.G.London to Base d/8-3-18.
Received Record Office 9-3-18.
in respect of the marginally named has been received in this Office, in which date of birth is given as 26th day of October 1900.

To be attached to Attestation Paper please.

ORIGINAL.

LIEUT.
for Lt.-Col. i/c Records.
C.O.M.F.

C3/DH.

Noted on Record Sheet.
RII BIII 20/3/18.

Form R 122.
2353—100M—9-12-16.

J. P. Rank | Name COLEMAN, Roy Wellington. | Reg'l No. 663588.

Unit 164th Bn | If in perm. Corps What Unit? - | Married or Single Single.

Place and Date of Enlistment Milton. 27th March. 1916. | Place of Birth Cookstown.

Name and Address, Next-of-Kin James Coleman

Milton. Ont. | Relationship Father.

Assigned Pay Monthly $ | Payable to

Relationship

Separation Allowance $ | Payable to

Relationship

N/E R.B. No. 1577
File R.L.
Category O.R. Can.

Discharge, Date and Place | Reason | Character

H. W. V., Ld.—9546-16.

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.
C.		ARRIVED IN ENGLAND 22 ~~5~~ 4 17 SS. CARPATHIA.			
25-4-17	2nd Res	T.O.S. from Canada	E. Sand, g	23.4.17	D.O. 97
10.5.17	—.—	S.O.S. to C.M.G. Depot	—.—	10.5.17	CMGD Pt II D.O. 132 — 112 d/ 12.5.17.
1-11-17	CMGD	Proceeded Overseas & posted C.M.G. Pool	Seaford	31-10-17	Pt II D.O. 306 M.G. Pool. Pt. II. D. 94 4/14-11-17.
19-11-17.	C.M.G. Pool.	Posted to 12th C.M.G. Coy.	" Field	8-11-17	Pt. II. D.O. 96. 4th Div. M.G. Coy. Pt. II D.O. 155 4/21-11-17.
		MINOR: BORN. OCT. 26th 1900.			
21-3-18.	M.G. Corps Depot.	T.O.S. from 12th M.G. Coy (Minor.) and on Command to CMGD.	" Seaford.	20-3-18.	Pt. II D.O. #68. & Pt. II #81 4/22-3-18. CMGD. & 4th Div. M.G. Coy. Pt. II D.O. #34 4/28-3-18.
4-4-18.	do.	Ceases att. CMGD, and is on command to No. 1. C.D.D., Buxton, (pending return to Canada as a Minor.)	" do.	4-4-18.	Pt. II D.O. #79. & CMGD. #95 4/5-4-18.
16-3-18	do	Transferred to M.G. Corps	" Field	1.8.18	Pt. II D.O. 27.

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.					
4-5 18	C.W.G.C.D.	Ceases to be att to 1st C.A.D. Buxton & SOS having been returned to Canada for disposal by a/G Ottawa	Seaford	24-4-18	Ptte O102.	

EPITOME OF HOSPITAL TREATMENT

HOSPITAL	ADM.
1,	
2,	
3,	
4,	
5,	
6,	
7,	

FORM D.M.S. 1300

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
COLEMAN.	R.W.	663588.

RANK	UNIT	CO.	TROOP	BATTY.
Pte.	M.G.	12.		

HOSPITAL	DATE OF ADMISSION
4. C.F. Amb.	29-1-18.

1. HOSP.

2. HOSP

3. HOSP

4. HOSP.

DIAGNOSIS Scabies. Scabies out

1.

2.

3.

DISPOSITION

C.I. 4-2-18. A130.
" 13-2-18 a/138 ①

Dio. 8-2-18 DATE

REMARKS

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

GRATUITY (IMPERIAL)

CHRISTIAN NAME | SURNAME | REG. NO.

SCHEDULE NO. | LINE NO.

UNIT RETIRED OR DISCHARGED FROM

PLACE OF RETIREMENT OR DISCHARGE

DATE RECEIVED FROM OTTAWA | IMPERIAL DEPOT NO.

DATE RECEIVED FROM REG. DEPOT. | DATE FORWARDED TO OTTAWA

868—D.P.—40M-1-12-19.

Number 663588 Rank Cpl.

Surname COLEMAN

Christian Name Roy Wellington

Units Can. M. G. Bde. Theatre of War France

Date of Service 31-10-17

Remarks 305 Main St West,

Latest Address ~~25 W. Caroline South.~~

Hamilton, Ont.

Roll No. B Lag 22183

200m.-6-21.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
a130	4 San. Fld Amb	29-1-18	Scabies M.A.C.
a138	Disch	8-2-18	"

REGT'L. No. 663588

H. Q. FILE No 649

NAME Coleman, R. W.

RANK AND CORPS Pte. M. G. C.

CABLE		NATURE OF CASUALTY
NO.	DATE	

FOLLOWS

NO.

FOLLOWS

L. L. 31493. M. & D. 8476.

M. F. W. 42 100M.—28-11-17.
H. Q. 1772-39-893.

REMARKS

REG. NO. 663588 NAME Coleman R. W
(SURNAME FIRST)

RANK Pte CORPS 16th Batt

AGE 18 SERVICE

NAME OF HOSPITAL Stationary PLACE Hamilton

DATE OF ADMISSION 27-11-16. 16 3 17

DISEASE Tonsilitis (2) Tonsilitis

DISCHARGE 4-12-16 21 3 17

OPERATION

DISCHARGED TO DUTY Yes.

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD

100M—9-17—H.Q. 1211-8-30.

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

Form R. 149.

Name COLEMAN. Rg Rank Wellington

Reg. No. 663588.

Unit R.C.M.G. Cy.

Next of Kin Canada.

Date 1918		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List
29-	1.	H. C. 7. a	Scabies	A	138			
			12822.					
8-	2	To Duty		do	A138	✓		13398

1917 . 1917 .
Mar . ✓
Apr 〃

UNIT SAILED
APR 1 1 1917

No. 663588 RANK Pte NAME Coleman, R. W.

T. O. S. 27/3/16 (28/3/16) (D.O. 51.) UNIT 164th Battalion, C. E. F.

M. D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Mar. 27	Mar. 31	✓		
	Apr.	✓		
	May	✓		
	June	✓	A. W. L. 26-5-16 to 27-5-16.	D.O. 89. 1-6-16.
	July	✓	Det.	D.O. 119.
	Aug.	✓		
	Sept.	✓		
	Oct.	✓		
	Nov.	✓		
	Dec.	✓		
1917				
	Jan.	✓		
	Feb.	✓		

Over

From Halifax Per S.S. Carpathia 11-4-17

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Machine Operator RELIGION Methodist

DESCRIPTION.

APPARENT AGE 17 YEARS 3 MONTHS

HEIGHT 5 FEET 6 ½ INCHES

CHEST MEASUREMENT 37 INCHES EXPANSION 4 INCHES

COMPLEXION Fair EYES Blue Grey HAIR Fair

DISTINGUISHING MARKS Small Smear scar left scapula.

MEDICAL EXAMINATION. PLACE Milton, Ont. DATE Mar. 27th 1916

Present Address:— Milton, Ont.

CARD NO.

SOS. Dis. M.U. 5-6-18 Z.
PAE 49 of 5-6-18.

SURNAME. Coleman.

CHRISTIAN NAMES Roy Wellington

REGL. No. 663588 RANK Pte.

UNIT ~~164th.~~ #2 D.D. Bn.

FORMER CORPS Nil.

NEXT OF KIN.

NAMES IN FULL Coleman. James

RELATIONSHIP TO SOLDIER Father

AD 368 Herkimer St, W.
Hamilton, Ont.

SAAP 22-6-17

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada. Cookstown, Ont. DATE Oct. 26th 1898

PLACE OF ATTESTATION Milton, Ont. DATE Mar. 27th 1916

Q/S 11-4-17 R/C. 30-4-18 171/9 2

M. F. W. 41
100M-1-18.
1772-39-889.

Name Pte R. W. Coleman

Regimental No. 663588

Unit 164 Bn

Date of enlistment

Place of "

Married (yes or no) no

Amount of pay assigned monthly $

To whom payable
SPC

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

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	Remarks, Casualties, etc.
Apr 1	May 31	61	1	61	61	10	6 10	12	79 10					79 39	79	orgl 50 22 subway 2-17
June 1	5	5	1	5	5	10	50	8	13 50	24	01	46	21	79 33		~~orgl orgl~~ dis 0046
Dec P.L.								27-	27-	12	90	5	27-		27-	P.O. 716 - 25/6/18.

M. F. W. 41
100M-1-18.
1772-39-889.

Name

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

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					

M. F. W. 41a.
120m. 1-18
1772-39-1213

English L.P.C. No. 6. 394.

Name Coleman Roy W.

Regt'l No. 663588. Rank Pte. File Numbers { P. M. 25-64.

Former Units 12th M.G. Coy. Original Unit 164th Bn.

Date of arrival in Canada 30-4-18. Boat Aquitania. Port of Disembarkation Halifax.

Rates of Pay:—Regt'l. $1.00 Field 10¢ Date of arrival in M.D. 2.

Separation Allowance. Date paid to Nil Rate Nil. If continued by Chief Paymaster, England No.

Assigned Pay. Date paid to 31-5-18 Rate $20.00. If continued by Chief Paymaster, England No.

Name and address of Beneficiary { Mrs. Eliz. Coleman. 368 Herkimer St. West Hamilton Ont.

Pay claimed on English L.P.C. to 31-3-18 to be paid by new Unit from 1-4-18.

Name of new Unit #2 District Depot. Date L.P.C. forwarded to new Unit 15/5/18

A.P. charged on Reg. L.P.C. to - 31-3-18.

L.L. 34682—M. & D. 8645.

Credit Balance shown on English L.P.C.	OTHER CREDITS DUE	TOTAL CREDITS	Charges to be made on account of advances since English L.P.C. made out: On Boat	~~At Cl. Depot &c~~ A.R	OTHER CHARGES	TOTAL DEBITS	BALANCE TO NEW UNIT: Credit	Debit	REMARKS
$ c.	$ c.	$ c.	$ c.	$ c.	$ c.	$ c.	$ c.	$ c.	L.G. 13-5-18.
30 07.		30 07.							
					9.73				AR. 956.
			4 73						A.R. 3
			5 00						AR 3
			45 00						AR 3.
				40 00					Apr. May. /18.
Debit Balance		79 39.				109 46			
		109 46				109 46		79 39.	

M. F. W. 41a.
120m. 1-18
1772-39-1213

English L.P.C. No.....

Name.....

Regt'l No.....Rank.....File Numbers {.....

Former Units.....Original Unit.....

Date of arrival in Canada.....Boat.....Port of Disembarkation.....

Rates of Pay:—Regt'l.....Field..... Date of arrival in M.D.....

Separation Allowance. Date paid to.....Rate.....If continued by Chief Paymaster, England

.....

Assigned Pay. Date paid to.....Rate.....If continued by Chief Paymaster, England

.....

Name and address of Beneficiary {.....

Pay claimed on English L.P.C. to.....to be paid by new Unit from.....

Name of new Unit.....Date L.P.C. forwarded to new Unit.....

Credit Balance shown on English L.P.C.		OTHER CREDITS DUE		TOTAL CREDITS		Charges to be made on account of advances since English L.P.C. made out				OTHER CHARGES		TOTAL DEBITS		BALANCE TO NEW UNIT				REMARKS
						On Boat		At Cl. Depot &c.						Credit		Debit		
$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

11991/238

Name Coleman, R.W.
Surname Christian Name

Regimental Number 663588 Rank Pte.

Unit 164th Bn.

Original Unit

District where paid M.D.2

Date of Discharge

P. D. P. Filing Number 5-571-2

Address (in full) 255 Caroline St.
Hamilton, Ont.

Rates:—Regimental pay $ per diem: Field Allowance $ per diem. Separation Allowance $ per month.

L. L. 22573—M. & D. 8009.

Total Credits 91 days		FIRST PAYMENT Cheque No. A	Date	Amount 30 days		SECOND PAYMENT Cheque No. B	Date	Amount 30 days		FINAL PAYMENT Cheque No. C	Date	Amount 31 days		Balance Over-payments to be Recovered		Total Amount Paid	
100	10	9402	5-7-18	33	00	8957	5-8-18	34	10					33	00	67	10
988 ~~181-5~~		~~13868~~	~~25/3/19~~	~~7010~~													

M. F. W. 127.
60M—6 17.
1772 39-1140.

Remarks:

690 O'Hara Ave
Parkdale
Toronto
Ont

Dec'n No. 11191/238 — 03448-?-6

Award ..... days at $ 70.00 per day $ 350.00

S. A. ..... months at $ ..... per mo. $ $

Less P. D. P. Credited $ 100.10

$

Less further debit balance $

Net due payee as below 249.90

TO SO- | FUNDS UP

	Ag.					Amount	
0							
1	988	138868	70.00				
2	2575B	473408	70.00				
3	9456	421383	70.00				
4	727C	454904	39.90				
5							
6							
			249.90				

25/2/19
20.5.19
9.4.19
8-5-19

BC

GEN'L AUDITOR
Posting checked by
.....
Date 25/2/19

ASSIGNED PAY. ASSIGNED PAY.

I Job 4503.—M. & D. 6832.

MILITIA AND DEFENCE

M. F. W. 11.
50m.—6-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name Mrs Elizabeth Coleman

Address ~~Milton~~

~~Ont.~~

368 Herkimer St. West

Hamilton Ont.

Relation to Soldier wife, child or mother } 20.00 April 1. 1917.

APR 15 1917

Name of Soldier Coleman R.W.

Regtl. No. 663588

Rank Pte

Corps 164th.

To what Corps belonging when called out }

PAYMENTS

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

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2. Mrs E. Coleman. (Assignee) ... S. Coleman R. W.

L. L. Job 5470—Req. 6888.

Pte. 663588 - 164th.

20m

Remarks. Apr 1. 1917

APR 1 - 1917

Month.	Year.	Cheque No.	Amt.		Remarks.
April	1916				
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1917				
Feb.					
March					
April					
May		J. 12901	40		40 B.
June		M 19279	20		20. c 368 Herkimer St. W. Hamilton Oct 19/17
July		S 21240	20	120	c
Aug.		W 29967	20		c
Sept.		B 33988	20		c
Oct.		K 47196	20		
Nov.		G 49165	20		
Dec.		L 55779 ~~L 55778~~	20	180	L 55778 Cancel m. W.D
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

bh

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.				

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

Apr. 1/917

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

20.			

PARTICULARS OF SEPARATION ALLOWANCE

No. 663588

Rank Pte. Promoted Reverted Discharge

Soldier's Name R. H. Coleman

Battalion 164th Battn

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs Eliz. Coleman

Address 368 Herkimer St. W.

Hamilton Change of Address Ont.

1

2

3

4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
Dec. 31			180	180		31-5-18 A/c Closed
Jan.	N 67055		20	20		Ret'd per Aquitania
Feb	D 96506		20	20		Date 4-5-18 F.X. 545
Mar	A 114690		20	20		4-5-18 Clerk H B Spence
Ap.	N 8063		20	20		
W.B.	Mar. M 13117		20	20		AP $280.00
			280	280		

MROZB 7/5/18

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22330—M. & D. 76653.

CONSOLIDATED ACCOUNT

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22520—M. & D. 1483.

21-9-61
1280

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	Attestation Paper,	Militia Form B. 233.
Squadron / Battery / Company } Conduct Sheet,	" B. 263a.	Proceedings on Discharge	" B. 218.
Copies of Convictions, by C. P.	in MS.		
Med. Hist. Sheet,	Militia Form B. 313		
Medical Report for Invalid*	" B. 227.		
Statement of Man's Account on Transfer and Last Pay Certificate,	" D. 877.		

*Only if discharged "Medically unfit."

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

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet (in the event of such having been prepared.)

N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

This space to be for numbers.

Proceedings on Discharge.

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page.)

No. 663588

Rank Private

Name COLEMAN Roy Wellington.
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) #2 Dis Depot(164th Bn)(CMGD.)

Date of Discharge 5th June 19181

Place of Discharge Toronto.Ont.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

		Descriptive Marks
Age 17 years 7 months.		
Height 5 feet 6½ inches.		
Complexion	Fair	Scar left scapulax
Eyes	Grey	Vacc one left arm.
Hair	Fair	
Trade	Machinist	
Intended place of residence (To be given as fully as practicable.)	255 Caroline South Hamilton.Ont.	

2. The above-named man is discharged in consequence of

Disability which pre-existed enlsitment not due to or aggravatd by service.

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

3. Conduct and character while in the service have been, according to the records, etc.

Very Good JHB

N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

Machinist

M. F. B. 218.

168m.—6-16.
H. Q. 1772-30-112

(OVER)

WSG Comp.
3-2-19

5. He is in possession of the following number of G. C. Badges:

Nil

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations ..... Nil

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (*Squadron or Battery*), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place) Toronto, Ont.

(Date) ~~1st~~ 5th June 19181

H S Beaumont
Captain,
For Lieut.-Colonel,
O.C. No. 2 District Depot.
Commanding

8. **Certificate to be signed by the Soldier on Discharge**

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place) Toronto, Ont. Pte. D. W. Coleman (*Signature of Soldier.*)

(Date) ~~1st~~ 5th June 1918. H S Beaumont (*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 on 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 toward Engagement to.....(the date to which the Record of Service is completed) 2 years 66 days.

Total 2 years 66 days.

11. **Confirmation of Discharge.**

The discharge of the above-named man is hereby confirmed.

(Place) Toronto, Ont.

(Date) ~~1st~~ 5th June 1918.

(*Signature*) H S Beaumont
Captain,
For Lieut.-Colonel,
O.C. No. 2 District Depot.

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.)

(OVER)

P. 559.

Married or Single S.

Place of Birth Cookstown Ont

Name and Address of Next of Kin Mrs. Elizabeth Coleman. Milton Ont.

Relationship of Next of Kin Mother

Casualties, Promotions, &c.

Particulars	Effective Date	Authority

Admissions to Hospital, &c.

Date Charged	V. or A.	Name of Hospital

Reg'l. No. 663588 Rank Private Name Coleman Roy Willington

If in Permt. Corps What Unit } Unit 164 Batt

Transferred to 2nd Res. Bn. Date 1-4-17 Authority D097/33/4

Permanent Force Allowances

Transferred to CmGD Date 21/8/17 Authority [illegible]

Place of Attestation Milton Ont.

Transferred to 12th M.G.Co. 4th Date 1.1.1918 Authority B.O. 155 20.11.17 eff 9.11.17

Date of Attestation March 27th 1916

Transferred to N.E. "K" Date 1-4-18 Authority

9 SEP 1918

Assigned Pay Monthly $ 20.00 Date Effective April 1st, 1917

Payable to Mrs Elizabeth Coleman, Milton Ont. Relationship Mother

Assigned Pay Monthly $ Date Effective

Payable to Relationship

Stop-Payment Form (Assigned Pay) Rendered (Date) Stopped Effective 1.4.18. Reason Discharged

Discharge Date and Place 31.3.18. Can. Reason and Authority A.F. 3a 2/2 2409 minor

Sailing List #18 25/4/18

Account transferred to Non-Effective Branch (Date)

Account transferred to Officers' Pay Branch (Date)

P.830-25M-21-2-18.

LAST PAY CERTIFICATE.

PARTICULARS.

1. L.P.C. Issued, date 5/4/18
2. Authority A.F. 3a 2/2 O 2409 minor
3. Discharged to Can.
4. Pay Book Verified 5/4/18
5. Balance shown on L.P.A. $30.07
6. Balc. shown on Ledger Sheet $ 33.64
7. Full particulars of entries making diffrence between 5 and 6 if any:-

No.	Date	Unit and Particulars of Entry	Amount Debit		Amount Credit	
~~390~~	~~10/3/18~~	~~4 Div M.G. Btn - Fill~~	~~3~~	~~57~~		

8. Ass'd Pay Cancelled A3M forms rendered Stopped off 1.4.18

or

9. Sep. Allce. and Assd. Pay continued to Dependent in England and transf'd to Acc'ts Br. for Payment Nil

J. H. Jackson
Certified Correct.

Officer i/c Group "C"

			TAL EDITS	Acquittance Rolls 1 No	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	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
			e.																				
			3													20		20	13				
			10	6	7/5/17								9 73			20		29 73	17 37				
			3													20	3 30	23 30	27 07				CmGD. 20 143 23/5/17 2 days F.P. 2 auth. midnight 27/5/17 to 8.30 am 21/5/17
			10													20		20	41 17				
			20													20		20 113 03	43 17				To CmGD 21/8
			10																55 27				
Sep	30	53	33	670 541	30/6 15/6	758	14/7					2 44 4 87	4 87			20		32 18	56 09				
		201 30	201 30									7 31	14 60			120	3 30	145 21					
			201 30									7 31	14 60			120	3 30	145 21					

643588 Pte Coleman R. W

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	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
Oct. Bal fwd					~~56 09~~																														

Month	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Deferred Pay	Ser. Allce. Eng.
									56 09		
				a.R. 935 15.8.17 Cu. G.D.	7 30						
				" 886 31.7.17 "	4 87						
				" 1150 14.9.17 "	7 30						
				" 1009 31.8.17 "	4 86						
				" 1208 29.9.17 "	4 87						
				8 Π a.R. 324 15.5.17 "	7 30						
"	P.P.	34 10		" 407 31.5.17 "	2 44						
				C.a.P.			20	31	25		
		34 10			38 94		20				
Nov.				a.R. 1341 15.10.17 Cu. G.D.	7 30						
"	P.P.	33 -		" 1396 29.10.17 "	4 87						
				C.a.P.			20				
				D4005/2144/30.8.17 Cu. G.D.	1 17						
Dec				C.a.P.			20				
"	P.P.	34 10		8 MAR 107 10.11.17. 12th M.G.Co.	4 46			40	55		
1918		67 10			17 80		40				
Jan	"	34 10		a.R. 117, 12th M.G. Coy 24/11/17	3 57						
				Ass Pay			20				
				" 13, 4th M.G.B. 15/12/17	3 57						
				" 132, 12th M.G. Coy 7/12/17	4 46						
				" 124 " 28/11/17	8 92				34 13		
		34 10			20 52		20				
Feb.	P. Pay	30 80		C.a.P.			20				
				" 109, 4th M.G. Bde 4/1/18	4 46						
				" 165 " 20/1/18	3 57						
				" 1971, 3 CRT 4/2/18	4 46				32 44		
		30 80			12 49		20				
Mar	P.P.	34 10		C.a.P.			20				
				" 263, 4th M.G. Bde 14/2/18	3 57						
				C.P. 8157, London, 19/3/18	4 87						
				a.R 347, 4th M.G. Bde 2/3/18	4 46				33 64		
				" 390 " 15/3/18	3 57				30 07		
		34 10			16 47		20				

Month	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Deferred Pay	Ser. Allce. Eng.
April	Bal Fwd.								30.07.		
"				a.R. 956 Endorsed C.A.F. Burton 10-4-18.	9.73. 9.73.				Split to Reg 4/7/18 20.34		
April											
June	Special Debit Note Bal Transfd to Canada				20 34 20 34				— Nil —		

P. 559.
MARRIED OR SINGLE S.

PLACE OF BIRTH Cookstown Ont

NAME AND ADDRESS OF NEXT OF KIN Mrs. Elizabeth Coleman.
Milton Ont.

RELATIONSHIP OF NEXT OF KIN Mother

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ Nil. EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No. 663588 RANK Private NAME Coleman Roy Willington

IF IN PERMT. CORPS WHAT UNIT UNIT 16th Batt. TRANSFERRED TO 2nd Res. Bn. DATE 1-4-17 AUTHORITY 23097/23/4

PERMANENT FORCE ALLOWANCES TRANSFERRED TO Can G.S. DATE 21 8 17 AUTHORITY A.R.

PLACE OF ATTESTATION Milton Ont. TRANSFERRED TO 12th M.G.C. DATE 1.1.1918 AUTHORITY B.O. 155 20.11.17 eff 9.11.17

DATE OF ATTESTATION March 27th 1916 TRANSFERRED TO R.E.'K' DATE 1-4-18 AUTHORITY

ASSIGNED PAY MONTHLY $ 20.00 DATE EFFECTIVE April 1st 1917

PAYABLE TO Mrs Elizabeth Coleman, Milton Ont. RELATIONSHIP Mother

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) Stopped EFFECTIVE 1.4.18. REASON Discharged

DISCHARGE DATE AND PLACE 31.3.18. Can. REASON AND AUTHORITY A.R. 3a 2/2 2409

Sailing List #18 25/4/18

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) Minor

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

SEP 1918

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	IELD ALLOWANCE No. of Dys	IELD ALLOWANCE Rate	IELD ALLOWANCE Amount $	IELD 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	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
1/4/17	Balance from Canada														Nil.																				
Apl 1	30	1.00	33												33												20		20	13				
May 1	31	1.10	34	10											34 10			✓6	7/5/17					✓973			20		29 73	17 37				
June	30		33												33												20	3 30	23 30	27 07				Bal 12. 10 143 23/5/17 2 days F.T. 2 Arch. mining 27/5/17 L 8 3. an 21/5/17
July	31		34	10											34 10												20		20	41 17				
Aug	21		22												22												20		20	42 17				To Can GS 2/8
" 21/31	11		12	10											12 10														11 3 03	55 27				
Sep	30		33												33			✓670	30/6					2441 / 487	✓487		20		32 18	56 09				
			201	30											201 30			✓541	13/6	758	14/7			7 31	14 60		120	3 30	145 21					
															201 30									7 31	14 60		120	3 30	145 21					

OPINION OF THE MEDICAL BOARD—(*Continued*).

21. It is recommended that the soldier be discharged. (When not for discharge add special recommendation).

That he be placed in Category E and be discharged for disability. pre existing enlistment not due to nor aggravated by service See K.R.&O. ~~That he be placed in Category "E" and be discharged as phy~~ and ~~as underage~~. Canadian Para. 322 Sec. 10. and as underage

Before signing the President of the Medical Board will read the certificate signed by the soldier, to the soldier, and if no change is indicated will initial the certificate.

W. T. McLean Major *President.*

Ea Lane Capt.

T C Routley Capt. } Members.

PLACE Ravina Bks. Toronto

DATE May 28th, 1918

APPROVED BY

C Cunningham Capt

Assistant Director of Medical Services.

DATE 31/5/18

APPROVED BY

Director-General of Medical Services.

DATE

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned, ... understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness ..... Signed .....

Should the refusal of the soldier to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

President.

PLACE ..... } Members.

DATE .....

N.O .K. Mother Mrs. Elizabeth Coleman
255 Caroline South Hamilton Ont.
ans Address Same

Exa, Capt. Mil. Mar. 27th 1918

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the soldier to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the soldier's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the soldier concerned, from witnesses, or from documents.
4. Special care is required in answering question 13. Please read the questions carefully. All questions must be answered.
5. If space provided under any sections is insufficient use blank space, page 4 or add another sheet. Such entries or sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 8, 9 and 10 be communicated to the soldier, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London, (1915), by Messrs. Harrison & Sons.

STATION Ravina Bks. Toronto DATE May 27th, 1918

1. 1 (a) Unit Dist. Depot. #2 (b) Regimental No 63588 (c) Rank Pte.

(d) Surname COLEMAN (e) Christian name Ray Wellington

2. Age last birthday 17 Date of birth October 26th, 1900

3. Enlisted at Milton, Ont., on March 27th 1906

NO. 2 MILITARY DISTRICT JUN 3 1918 34-60-769

4. Personal description:—

(a) Height 5ft. 6½ in. (b) Weight (stripped) (c) Complexion Fair

(d) Colour of hair Fair (e) Colour of eyes Grey (f) Identification marks small sc r on left scapular. Vaccination 1 on left arm

5. Address after discharge (for the use of the Board of Pension Commissioners)

255 Caroline South, Hamilton, Ont.,

6. Former trade or occupation Machinist

7. (a) Service	Years	Days
	2	61

	Periods From	Periods To
164 Batt. C.M.G.S.	Mar. 27th, 1916	May 12th, 1917
Dist. Depot. #2	May 12th 1917 Apr. 30th, 1918	Apr. 30th, 1918 To Date

(b) Has he been overseas? France 8. Original disease or disability (1) Underage (2) Bronchitis

(a) Date of origin (1) Oct. 26th 1900 (2) Pre enlistment (b) Place of origin (1) Canada (2) Canada

(c) Cause* (1) Natural (2) Unknown

(d) Present disease or disability (1) Underage (2) Slight bronchitis

9. Present condition (a) (Important to be a full description of the present disabling condition or conditions only.) "History" must be recorded in Section 10.

[After describing all abnormalities, anatomical and functional, contributing to present disability (see section 11) state whether such disability is directly due to (*a*) weakness, (*b*) loss (complete or partial) of any organ or member of its functions, or (*c*) to the necessity for rest of the body or of some of its parts.]

Subjective Patient states he is 17 years of age (1) Objective looks age tated - perhaps more

(2) Subj. (2) SEE specialists report on chest.

(2) Objective.

9. Present condition.—(*Continued.*)

All other systems normal

Incapacity due to underage

specialists report states chest is normal

(b) Are the following systems normal? If not, briefly state abnormality

Nervous Yes Digestive Yes Respiratory Yes see 9 Cardiac Yes

Genito-Urinary Yes Skin, Middle Ear, Eye or any other part Yes

10. History: (*a*) of Condition referred to in "a" section 9.

Has had slight cough for years

(*b*) Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination.

Vaccination scars 1 left arm

Large tonsils and pharyngitis and rhinitis

11. If the disabling condition had its origin before enlistment, has it been aggravated on service?

(1) No (2) No

12. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? (1) (2) No

The regimental documents will be referred to.

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? (1) until Oct. 26th, 1919 (2) No disability

14. Treatment (Case reports, general or special, should be secured and attached where possible).

M.H.S. shows 6 days for Tonsilitis.

OPINION OF THE MEDICAL BOARD

14. (*Continued*).

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?
(If the answer is "yes" state nature of treatment required and probable duration.)

(1) (2) No

16. Can the former trade or occupation be resumed? Yes
(If not, briefly state why.)

17. Recommendations For discharge E.

F Hamlin Capt.
Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier and either "satisfied" or "not satisfied" struck out.)

I, the undersigned have heard the description of my disability and present condition read, and am satisfied ~~(or not satisfied)~~ with it. (If dissatisfied, statement should follow.) I complain in addition of W.T.M.

W. R. Coleman
Signature of soldier examinea.

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticized.

We Concur

19. Is the soldier fit for

(a) General service,	(Category A) (Yes or No).
(b) Service abroad, not general service,	(" B) (Yes or No).
(c) Home service, (Canada only),	(" C) (Yes or No).
(d) Temporarily unfit.	(" D) (Yes or No).
(e) Unfit for service in Categories A, B and C,	(" E) (Yes or No).

20. It is certified that the soldier
(a) Does require treatment. (Give the nature of the condition and of the treatment required and its probable duration).

(b) Does not require treatment.
(c) Should pass under his own control.
(d) Should not pass under his own control.
(Strike out condition not applicable).

OPINION OF THE MEDICAL BOARD—(*Continued*).

21. It is recommended that the soldier be discharged. (When not for discharge add special recommendation).

That he be placed in Category E and be discharged for disability, pre existing enlistment not due to nor aggravated by service See K.R.&O. ~~That he be placed in Category "E" and be discharged as physically unfit~~ and ~~as underage.~~ Canadian Para. 322 Sec. 10. and as underage

Before signing the President of the Medical Board will read the certificate signed by the soldier, to the soldier, and if no change is indicated will initial the certificate.

W. J. McLean Major *President.*

Capt.

T. Routley Capt. } Members.

PLACE Ravina Bks. Toronto

DATE May 28th, 1918

APPROVED BY

Assistant Director of Medical Services.

DATE 31/5/18

APPROVED BY

Director-General of Medical Services.

DATE

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned, ... understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness ..... Signed .....

Should the refusal of the soldier to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

President.

PLACE

DATE } Members.

N.O.K. Mother Mrs. Elizabeth Coleman
255 Caroline south Hamilton Ont.
Ans Address Same

Exa. By
Capt. Digby
Milton, Ont.
Mar. 27th 1916

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the soldier to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the soldier's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the soldier concerned, from witnesses, or from documents.
4. Special care is required in answering question 13. Please read the questions carefully. All questions must be answered.
5. If space provided under any sections is insufficient use blank space, page 4 or add another sheet. Such entries or sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 8, 9 and 10 be communicated to the soldier, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London, (1915), by Messrs. Harrison & Sons.

STATION Ravina Bks. Toronto DATE May 27th, 1918

1. 1 (a) Unit Dist. Depot. #2 (b) Regimental No. 63588 (c) Rank Pte.

(d) Surname COLEMAN (e) Christian name Ray Wellington

2. Age last birthday 17 Date of birth October 26th, 1900

3. Enlisted at Milton, Ont., on March 27th 1906

4. Personal description:—

(a) Height 5ft. 6½ in. (b) Weight (stripped) (c) Complexion Fair

(d) Colour of hair Fair (e) Colour of eyes Gray (f) Identification marks Small scar on left scapular. Vaccination 1 on left arm

5. Address after discharge (for the use of the Board of Pension Commissioners)

255 Caroline South, Hamilton, Ont.,

6. Former trade or occupation Machinist

	Years	Days
7. (a) Service	2	61

	Periods From	Periods To
164 Batt. C.M.G.B.	Mar. 27th 1916	May 12th 1917
Dist. Depot. #2	May 12th 1917	Apr. 30th, 1918
	Apr. 30th, 1918	To Date

(b) Has he been overseas? France 8. Original disease or disability (1) Underage (2) Bronchitis

(a) Date of origin (1) Oct. 26th 1900 (2) Pre enlistment (b) Place of origin (1) Canada (2) Canada

(c) Cause* (1) Nattral (2) Unknown

(d) Present disease or disability (1) Underage (2) Slight bronchitis

9. Present condition (a) (Important to be a full description of the present disabling condition or conditions only.) "History" must be recorded in Section 10.

[After describing all abnormalities, anatomical and functional, contributing to present disability (see section 11) state whether such disability is directly due to (*a*) weakness, (*b*) loss (complete or partial) of any organ or member of its functions, or (*c*) to the necessity for rest of the body or of some of its parts.]

Subjective Patient states he is 17 years of age (1) Objective looks age tated + perhaps more

(2) Subj. (2) SEE specialists report on chest.

(2) Objective.

9. Present condition.—(*Continued.*)

All other systems normal

Incapacity due to underage

specialists report states chest is normal

(b) Are the following systems normal ? If not, briefly state abnormality

Nervous Yes Digestive Yes Respiratory Yes see 9 Cardiac Yes

Genito-Urinary Yes Skin, Middle Ear, Eye or any other part Yes

10. History: (*a*) of Condition referred to in "a" section 9.

Has had slight cough for years

(*b*) Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination.

Vaccination scars 1 left arm

Large tonsils and pharyngitis and rhinitis

11. If the disabling condition had its origin before enlistment, has it been aggravated on service ?

(1) No (2) No

12. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment ? (1) (2) No

The regimental documents will be referred to.

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one ? (1) until Oct. 26th, 1919 (2) No disability

14. Treatment (Case reports, general or special, should be secured and attached where possible).

M.H.S. shows 6 days for Tonsilitis.

OPINION OF THE MEDICAL BOARD

14. (*Continued*).

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit ?
(If the answer is "yes" state nature of treatment required and probable duration.)

(1) (2) No

16. Can the former trade or occupation be resumed ? Yes
(If not, briefly state why.)

17. Recommendations For discharge E.

F. Hamilton Capt
Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier and either "satisfied" or "not satisfied" struck out.)

I, the undersigned have heard the description of my disability and present condition read, and am satisfied ~~(or not satisfied)~~ with it. (If dissatisfied, statement should follow.) I complain in addition of W.T. Mch

R. R. P. Coleman
Signature of soldier examinea.

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report ? If not, give differing opinions, with reasons, quoting the number of the answer criticized.

We Concur

19. Is the soldier fit for

(a) General service,	(Category A)	(Yes or No).
(b) Service abroad, not general service,	(" B)	(Yes or No) No
(c) Home service, (Canada only),	(" C)	(Yes or No) No
(d) Temporarily unfit.	(" D)	(Yes or No) No
(e) Unfit for service in Categories A, B and C,	(" E)	(Yes or No) No

20. It is certified that the soldier Yes
(a) Does require treatment. (Give the nature of the condition and of the treatment required and its probable duration).
XXXXXXXXXXXXX

(b) Does not require treatment.
(c) Should pass under his own control.
(d) Should not pass under his own control.
XXXX ~~(Strike out condition not applicable)~~.

* N.B.—This Form being applicable to any Board of Officers or Committee or Court of Inquiry, this blank to be filled in accordingly.

The signature of each Officer composing the Board, &c., should be attached to the end of the proceedings.

PROCEEDINGS of a * MEDICAL BOARD

assembled at VANCOUVER, B.C.

on the 28th February 1917

by order of A/Assistant Director Medical Services, M.D.No.XI

for the purpose of reporting upon:

Dr. R.E. Coleman.

PRESIDENT.

W.S. BAIRD Major C.A.M.C.

MEMBERS.

G.B. MURPHY Captain C.A.M.C.

The BOARD having assembled pursuant to order, proceed to examine Dr. R.E. Coleman.

He states that when 11 years of age he had a fracture cof the left femur (compound). There exists at present a definite shortening of six inches of the left leg, causing him to walk on the toes of the left foot and giving a decided limp to the gait. Movements at hip joint are absolutely normal. The knee joint is prominent on account of smallness of thigh and calf muscles. The tone of ~~the~~ these muscles is excellent. The knee comes within an angle of 10 degrees of full extension and can be flexed normally. The movements at the ankle are pretty much limited to flexion and inversion of the foot.

There is atrophy and loss of function of the anterior tibial group and personal group of muscles. There is a callus under the transverse arch of the foot which gives him some trouble but is

amenable to care.

There is a small anaesthetic area on the postero-inferior - lateral surface of the lower leg.

He has no other disabilities.

W S Baird MAJOR, C.A.M.C.

G Murphy CAPTAIN C.A.M.C.

APPROVED.

Major. A.M.C.
A/A.D.M.S. M.D.No.XI.

March 2nd, 1917.