REGIMENTAL DOCUMENTS

NAME COLEMAN WM. JAMES REGT. NO. 475046 UNIT 8th Can. Fld. Amb. H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE
2	ATTESTATION PAPER (M.F.W. 23, 133, or 51)				
3	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)				
	TRAINING HISTORY SHEET (M.F.W. 113)				
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)				28594
2	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)				
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)				
3	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)				
1	DENTAL HISTORY SHEET (M.F.B. 465)				
1	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)				
	MEDICAL EXAMINATION (M.F.W. 129)				
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)				
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)				
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)				
	LAST PAY CERTIFICATE (M.F.W. 44)				
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)				
	PARTICULARS OF CHARACTER (A.F.W. 3226)				
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)				
21	C.P.O. 3.				

NON-EFFECTIVE BY

DEATH

Category

DISCHARGE

Category

Hemor

DESERTION

W. 2539
150M-11-18
1272-39-1277

2646

Pte

6th Inf

ORIGINAL

ATTESTATION PAPER.

No. 476046

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

James

any Bodily defect of the said 4th D 4-16

1. What is your name?	William Coleman
2. In what Town, Township or Parish, and in what Country were you born?	London, England
3. What is the name of your next-of-kin?	(Wife) Charlotte Coleman
4. What is the address of your next-of-kin?	777 Pacific Avenue, Winnipeg, Man.
5. What is the date of your birth?	27th November, 1883
6. What is your Trade or Calling?	Laborer
7. Are you married?	Yes
8. Are you willing to be vaccinated or re-vaccinated?	Yes
9. Do you now belong to the Active Militia?	Yes
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

James

William Coleman (Signature of Man).

E. H. Gregg (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

James

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

James

William Coleman (Signature of Recruit)

Date 26th July, 1915 191 . E. H. Gregg (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

James

I, William 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.

James

William Coleman (Signature of Recruit)

26th

Date 25th July, 1915 191 . E. H. Gregg (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 Winnipeg, Manitoba this twenty~~fifth~~ sixth of July, 1915.

J. E. Stanford (Signature of Justice)

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

W. McLeod (Approving Officer)

M. F. W. 23.
200 M.—5 15.
H. Q. 177-33-841.

Certified True Copy
Stafford
for Officer i/c Records
C. E. F.

Description of William Coleman on Enlistment.

Apparent Age 31 years 7 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height		5 ft. 5 ins.
Chest measurement.	Girth when fully expanded	38 ins.
	Range of expansion	2 ins.
Complexion		Ruddy
Eyes		Blue
Hair		Brown
Religious denominations.	Church of England	X
	Presbyterian	
	Wesleyan	
	Baptist or Congregationalist	
	Other Protestants (Denomination to be stated.)	
	Roman Catholic	
	Jewish	

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer).

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 25th July, 1915 191 .

Place Winnipeg, Manitoba

J Allen Lieut
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.

William Coleman 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.

J E Stansfield (Signature of Officer)
Lt-Colonel.
Commanding 90th W'peg Rifles

Date 25th July, 1915 191 .

CANADIAN EXPEDITIONARY FORCE

War Service Badge
Class "A" No. 161292

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 475046 (Rank) Sergeant

Name (in full) COLEMAN WILLIAM JAMES enlisted in

the 8th Battalion

CANADIAN EXPEDITIONARY FORCE at Winnipeg on the 26th

day of July 1915

HE served in No 8 Canadian Field Ambulance

and is now discharged from the service by reason of Demobilization. ~~Medical Unfitness.~~ Demobilization R.O. 1420 (c)

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

Age 35 yrs 2/12.

Height 5 ft. 5 ins.

Complexion Ruddy

Eyes Blue.

Hair Brown

W. J. Coleman Sgt
Signature of Soldier

Marks or Scars

Date of Discharge

MILITARY DISTRICT No. 10 APR 1 1919

H. Morgan
Issuing Officer

Capt
Rank

Date 1 - 4 - 1919

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

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

1.—That discharge certificate must be carried when wearing uniform.

2.—That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing, and

3.—That wearing of uniform renders him liable to usual military discipline, as if on the strength of a unit.

Date of Enlistment

26-7-15

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

Sept. 1/1915

RATE OF SEPARATION ALLOWANCE

~~20~~	~~25~~	30	

1-12-17 P.C. 3251

RATE OF ASSIGNMENT

16.			

PARTICULARS OF SEPARATION ALLOWANCE

No. 475046?

Rank Pte. Promoted Reverted Discharge

Soldier's Name Wm. Coleman

Battalion 90th Winnipeg Rifles 1st Draft.

Beneficiary Mrs Charlotte Coleman

Relationship wife

Address Mrs N. 3554-28th Ave Rtd OK

PARTICULARS OF ASSIGNMENT

Name Mrs. Charlotte Coleman (wife)

Address ~~462~~ Alexander Ave

Winnipeg Change of Address ~~Man~~.

1 Suite 3 Maber Blk - 549 Logan Ave Winpeg. Man 31/7/17

2

3

4

Date 1916	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Dec. 31		583	448	1031	
Jan.	N67061	30	16	46	m
Feb	96512 D	25	16	41	
Mar	114695 A	25	16	41	✓
Apr.	8067 N	25	16	41	
May	131283 M	25	16	41	
June	24738 G	25	16	41	✓
July	78123 S	25	16	41	
Aug	37952 G	25	16	41	
Sept	46458 J	25	16	41	
Oct.	55630 L	25	16	41	
Nov	55625 D.	25	16	41	
Dec	650174 D	45	16	61	
Jan/19	75698 J	30	16	46	
Feb	96944 M	30	16	46	
Mar	866284	30	16	46	
Apr		998	688	1686	
		21 3/19			

0344 9 - W - 470.

A/c Closed

Ret'd per Cedric

Date 27/3/19 Per

Clerk A. Spence

10

8695 D 5-4-19.

AUDITED.

CONSOLIDATED ACCOUNT

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7993.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128
400M.-6-17.-1772-39-1141
L. L. 22820—M. & D. 7483.

P—56

Rank Name COLEMAN, William. Reg'l No. 475046.

Unit 90th Bn to 11th Bn. If in perm. Corps, What Unit? Married or Single Married.

Place and Date of Enlistment Winnipeg, Man. July 26th, 1915. Place of Birth London, England.

Name and Address, Next-of-Kin Charlotte Coleman, 777, Pacific Avenue, Winnipeg, Man.

Relationship wife.

Assigned Pay Monthly $16 Payable to Next-of-Kin

Effec. Septr.

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

Date 1915 From	To	PAY No. of Days	Rate	Amount	Field Allowance No. of Days	Rate	Amount	Other Credits	Total Credits	Voucher No.	Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc
Sept. 1	Oct. 31	61	1	61 -	61	10	6 10	10 .	77 10	416 595 467		17 03	16 .		49 03	28 07	10% Clothingallce
Nov. 1	Nov. 30	30	1	30	30	10	3		33	642		14 60	16		30 60	30 47	
Dec. 1	Dec. 30	30	1	30	30	10	3		33			- -	16		16	47 47	Invalided S.C.T.D. 20/12/16
31	31	1	1	1	1	..		10	47 47	485 7		24 34			24 34	24 23	Transferred to Basc Depot
Jan 1	10	10	1	10	10	..	1		24 23	35 23		4 87	16		20 87	14 36	Invt. CASC TD 11/1/16
Jan 11	- 31	21	.	21 -	21	.	2 10		14 36	37 46			16 -		16	21 46	
Feb 1	- 29	29	.	29 -	29	-	2 10		21 46	53 36		8 35	16 -		24 35	29 01	Invalided to 3rd Con. Depot 25/2/16
Mar 1	31	31	1 10	34 10	31	..	3 10		24 50 01	66 71		7 85	16 .		23 85	42 86	207 - 50c. 10 for 5 days pay
				216 10			21 30		10 50 247	90		77 04	128 .		205 04	42 86	

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

26-7-15

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

Name Charlotte Coleman

Address ~~777 Pacific Ave~~ 462 Alexander Ave Winnipeg Man

Relation to Soldier wife, child or mother: Wife

Name of Soldier Coleman Wm

Regtl. No.

Rank Pte

Corps 90th ~~Battn~~ Reg

To what Corps belonging when called out

PAYMENTS

42229 M. CO.

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.		J 14259	63	63
Nov.		J 18180	20	20
Dec.		K 13739	20	20
Jan.	1916	O 16188	20	20
Feb.		F 28165	20	20
March		L 24747	20	20

CONSOLIDATED ACCOUNT 3

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
60m.—12-15.
1772—39—818.

Sheet No. 2. Mrs Charlotte Coleman Wife

Name of Soldier Coleman, Wm

Pte

L. L. Job 89002.—Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	0871	20	20
May		05066	20	20
June		158712	20	20
July		77/4	20	20
Aug.		L11928	20	20
Sept.		D.15451	20	20
Oct.		A18980	20	20
Nov.		C22206	20	20
Dec.		C25755	20	20
Jan.	1917	228622	20	20
Feb.		W31433	20	20
March		D14517	20	20
April		G 3610	20	20
May		E 40399	20	20
June		H 69297	20	20
July		G 18637	20	20
Aug.		K 13955	20	20
Sept.		J.P. 16678	20	T
Oct.		J.P. 22357	20	T
Nov.		E 26643	20	T
Dec.		R 25979	20	T
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier .....

PAYMENTS.

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.				

L. L. Job 85095—M. & D. 5953.

Suite 3 Mabel Blk
549 Logan Ave
Winnipeg Man

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
20m.—9-15.
H. Q. 1772-39-819.

31/7/17

wife.

To Whom Mrs Charlotte Coleman

Address ~~367 Logan Ave~~ ~~Winnipeg Man~~ ~~462 Alexander Ave~~ Winnipeg Man

Rate 16.00

SEP 1 1915

By Whom Assigned Coleman Wm

Regtl. No. ~~Pte~~ 475046

Rank Pte

Corps 90th Winnipeg Rifles
1st Draft

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.		H6381	32.	
Nov.		L 4865	16	
Dec.		M 10890	16	
Jan.	1916	O 12792	16	
Feb.		P 14919	16	
March		U 15506	16	

CONSOLIDATED ACCOUNT 2

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
60m.—12-15.
1772—39—819.

L. L. Job 89002.—Req. 6213.

Sheet No. 2. Charlotte Coleman (Wife)

Name of Soldier. Coleman Wm
1st Draft 90 W. Rfs

Month.	Year.	Cheque No.	Amt.	16 00	Remarks.
April	1916	H 1999	16		
May		O K 483	16		
June		P 7896	16		
July		E 53330	16		
Aug.		H 11643	16		
Sept.		Q 17608	16		
Oct.		Q Q 22182	16		
Nov.		Q 26638	16		
Dec.		L 31948	16		
Jan.	1917	Q 36053	16		
Feb.		Q 42394	16	16	
March		S 49942	16	16 L	
April		N 1210	16	16 Ch	
May		O 7116	16		
June		F 14051	16	16 Ch	
July		S 21284	16	16	
Aug.		W 2 9974	16	16	
Sept.		V 33999	16	03	
Oct.		K 47207	16		
Nov.		Y 49176	16		
Dec.		L 55790	16	448	
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1913			
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.				

Statutory Declaration received
Authority for change of name
P.E.O. 31. 3 Dist Od. 25.4.18
also R.L.61.2
d. 29.4.18

C

R—122.

Rank Cpl Name COLEMAN, William James Reg'l No. 475046.

Unit 90th Bn to 11th Bn. If in perm. Corps, What Unit? Married or Single Married.

Place and Date of Enlistment Winnipeg, Man. July 26th, 1915. Place of Birth London, England.

Name and Address, Next-of-Kin Charlotte Coleman, 777, Pacific Avenue, Winnipeg, Man.

Relationship Wife.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

A.F.B. 103 CHECKED
19 DEC. 1916

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
		Taken on strength 11th		6.9.15.	
30.11.16.	O.C. 11th	Trans: to C.A.S.C.T.D. Shcliffe		28.11.15.	Pt II O 267.
29.11.15	O/C Cas C'l	Taken on strength C.S.	"	27.11.15	" " # 149
29.11.15	O/C T.D.2	Taken on strength	Bramshott	27.11.15	" " 39.
11.1.16	do #2.	Trans. to C.A.S.C. #1 T.D.	Bramshott	11.1.16	" " 9
24-1-16	O/C Cn Sc. T.D.	Struck off strength T.D. proceeded to Bramshott	Shorncliffe.	3-1-16	Pt II Do. # 24
16-2-16	C.A.S.C.T.D.	S.O.S. on trans to 3rd Div Train	Bramshott Bramshott } do	9-2-16	Pt II D.O. #47 Shorncliffe C.A.S.C.T.D.
14.3.16	O/C 3rd Div Train	Appd A/Cpl with pay	In the Field	25.2.16	" II # 7
		Embarked for France.		20.2.16	Nom Roll
31.8.16	"	Taken on strength.	Shorncliffe	"	Pt 2 O # 29

A.F.B. 103 chkd. 9.3.16.

475246 Coleman William James

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	Rank	REMARKS Taken from Official Documents
31.5.16	3rd Div Tn	promoted corporal	Field	25.2.16		pt 2 # 17
4-5-17	—"—	attached to 8. C. Fd Amb. as in W/E	—"—	19-4-17	a/Sgt.	8 pt II O. 30
4-5-17	—"—	appt'd a/Sergt with pay	—"—	14-4-17	"	8 pt II O. 30.
2.3.18	"	Confirmed in rank of Sgt	C/Sgt	"	14.4.17.	P 30 17
25.4.18	3 Div Tr	Having declared his true name to be William James Coleman will in future be known as such. all documents to be altered accordingly	Sgt	Field	" "	P II O. 31
8.5.18	3 D T.	SOS to Pool & remain att as in w/E to 8 Fd Amb	Sgt	Field	6.5.18	P II O. 36.
11.5.18	Cas C Pool	TOS from 3 D T & remain att as in w/E to 8 Fld Amb	Sgt	Do	7.5.18	P II O. 60

Statutory Declaration received

Proc to Can. 19.3.19. Sailing # 29 D.A.M.

18.3.19	Casc Pool	SOS to CASC C.D. Witley	"	"	15.2.19	do #5
16.3.19	8 C Fld Amb	Ceased to be att to 8 C F A	Sgt	"	16.3.19	Do. #4.
26.3.19	3rd C D Pool	Attached for all purposes 6 C S P	"	Bisbott	16.3.19	— 5
11.4.19	"	Ceased att. to Pool on [illegible] to Can	"	"	29.3.19	" 7

ORIGINAL

MEDICAL HISTORY SHEET.

#475046

312

Surname Coleman *Christian Name* William JAMES

Examined { on 26 day of July 1915
at Winnipeg

Approved by J. Currie

Rank Lieut. M.O

Birthplace { City or Town
County

Apparent age 31. 7

Trade or occupation Laborer.

Height 5 Feet 5 Inches.

Weight Lbs.

Chest measurement { Minimum 36 inches.
Maximum expansion 2 inches.

Physical development

Small-Pox Marks

Vaccination Marks { Arm Right. Left.
Number

When Vaccinated last

(*a*) Marks indicating congenital peculiarities or previous disease

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

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

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

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

Enlisted on 26 *day of* July 1915 *at* Winnipeg

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	90th Regt.	475046		
Transferred to..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

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.

100M.—5-15.
H. Q. 1772-39-439

Surname..... Christian Name.....

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

10-39

P. 880.

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

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

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, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

1. Christian names William James 2. Surname COLEMAN.

3. Rank Sgt. 4. Original Unit 8th Batt. 5. Reg. No. 475-046.

6. Address, in full, to which future payments of gratuity are to be forwarded
William James Coleman.
1821 McDermid Ave. Winnipeg. Man.

7. Date of enlistment in the C.E.F. 25-7-15

8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge Charlotte Coleman.

9. Relationship of such dependent Wife.

10. Address, in full, of such dependent 1821. McDermid Ave.
Winnipeg. Manitoba.

11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? No.

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:— N/A

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? N/A

14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service N/A

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 N/A

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.

5434. Wt. /30P. 250,000(8). 2/19. S.O.,F.Rd.

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? W.S.C.

21. Have you, during the present war, served in the Imperial Forces? W.S.C.

22. Are you entitled to 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.? W.S.C. If not, give:—(a) Date of discharge W.S.C. 1-4-19 (b) Reason for discharge W.S.C.

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 W.S.C.

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit in which you served at the front, and dates of such service with that unit W.S.C.

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? W.S.C.

(b) If so, are you in receipt of full pay and allowances from that Department? W.S.C.

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: William James Colena

Place of Residence: Winnipeg

Declared before me at: Dramhetta

This Fourteenth day of March, 1919

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths under P.C. 2767, dated 11th Nov., 1918.

W. A. Cook Major, C.A.M.C.
A/O.C., No. 8 Canadian Field Ambulance.

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
			600 00	530 00
			70 00	

Certified Correct.

District Paymaster.

C.A[illegible] 5009A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) COLEMAN W. J.

REGIMENT C.M.S.B. RANK Sergt No. 475046

Date of Examination in England 20/2/19 | Date of Examination in France

DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 5 - 8 - 9 - 13 , 17.
2. EXTRACTIONS 1 14, 15 . 16 - 18 - 21
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper 1, 2. 3 4 6. 7 10 11 12. 14 Lo . 6
   - (*c*) Full Lower
   - (*d*) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT ? No

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

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

Signature of Dental Officer W. H. Rumford Capt.

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

M. F. W. 54. (A. F. B. 198.
500M.—9-16
H. Q. 1772-39-9-'0.

Casualty Form—Active Service.

Unit, Regiment or Corps (C. A. S. C.) 3rd Div Train

Regimental No. H75046 Rank Sgt. C. E. F. Name Coleman, William James

Enlisted (*a*) 26:7:15 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				
19:3:19		T.O.S. Dispersal Station D.O. 94 Pa 2 141 and Dispersed 1:4:19 D.O. 94 Pa 3 Lieut. for O. C. 10 District 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 dutie .

[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				

Army Form B. 103. Regimental Number 47546

Casualty Form—Active Service.

Regiment or Corps 2nd Can D.A.C.

Rank A/Sgt. Surname Coleman Christian Name W J.

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...			
2-5-17	No-8b7a.	Attchd as Lt & P. Driver	Fred	19-4-17	D.T.S 22.
2/2/18	do	Promoted Sergeant	do	14-4-17	— 11
11/5/18	do	Now attd. from 6A66 Coy	do	7-5-18	— 25
12-2-19	do	Proceeded to England	do	15-2-19	— 12
		Dispersal Area. - W.			

(*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.

W. 11814—M1188 1000m 1/17 (27227) S.P & Co, Ltd. Forms B./103/4 E./...

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				

105B
yds.

Number 475046 Rank Pte.

Surname COLEMAN

Christian Name William James

Units 6a S6 Theatre of War France

Date of Service 20-2-16.

Remarks 284 Bushnell

Latest Address ~~182 McDermaid Ave~~
Winnipeg Man

Roll No.

200m.-6-21.M. Btage 22185.

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	

REGINA DEPOT DEC 15 1920

868—D.P.—40M-1-12-19.

10 "M" CARD NO.

SOS. Dis 1-4-19
D.O.94 of 4-4-19
Demob. 10.02. Sgt.

SURNAME. Coleman.

CHRISTIAN NAMES William (James.) and. Statutory declaration London 26-4-18

REGL. No. 473046 RANK Pte.

UNIT ~~Winnipeg Rifles~~. 90th. (1st. R.D.) Bn.

FORMER CORPS

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Coleman, Mrs. Charlotte

RELATIONSHIP TO SOLDIER Wife

X AD Suite 3 Maber Blk,
549 Logan Ave, Winnipeg Man.

S.A.A.D. 6-8-17

COUNTRY OF BIRTH England, London. DATE

PLACE OF ATTESTATION Winnipeg, Man. DATE July 26th. 1915.

O/S. 27-8-15 208/1

R/C. 27-3-19 292/141 Sgt.

L. L. 04504. M. & D. 6512.

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

MARRIED Yes SINGLE WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES. EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

(641)—Wt. W1751-1403.—500,000.—5-15.—C. & G. Forms B. 103/1.

102.942

Army Form B. 103.

War Service Badge
Class "A" No.

28.12.16

Casualty Form—Active Service.

Regiment or Corps (C. A. S. C.) 3rd Div. Train

Regimental No. 475046 Rank ~~Pte.~~ Corp. Name Coleman

Enlisted (*a*) 26.7.10. Terms of Service (*a*) war. 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: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Embarked	Canada	28.8.15.	KM 1818148.
19-8-16	Can Rec	T.O.S. 2nd C.D. Train		20-2-16	Pt II Ord. 29 31.8-16
		Transfered to No. 6 Coy. 3rd Div. Train. C.A.S.C.		21-2-16	
		Embarked for France		20/2/16	Authy 13184 Cy 14/3/16
25/2/16	Dy. No 4 Coy. Unit	Appointed Acting Corporal, with pay		25-2-16	B213. Part 2 Orders No 7 d 14/3/16
29/4/16.	D.C. Unit.	Promoted. Corporal.	Field	25/2/16.	B213 A. Pt II orders No. 17 dd 3/5/16
28/6/16	D.C. Unit	Sentence Reprimanded for when on Active Service. Neglect of duty in permitting men to ride on loaded wagons on his convoy.	Field	28/6/16	B2069.
30/12/16	— do —	Granted leave of absence	to England	23/12/16	B.213. P II O No 3. dd 15-1-17.
18/3/17.	do.	Rejoined Unit from Leave of Absence.		6.1.17.	K.H. 169/969. Pt 2 Ord. 220 dd 24/3/17
21.4.17	— do —	Appt'd A/Sgt with pay		14/4/17	B213 Pt II 30 4/5/17.
—	—	Attached as in War 8th Can 2nd Unit.	Est. to	19/4/17.	—— do ——

(*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.

CERTIFIED CORRECT.
Canadian Record Office.
Westminster House,
7, Millbank, S.W.

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				
24-11-17 15-12-17	OC. 8 C.F.A. do.	Granted 14 days leave to England. Rejoined from — do —		22-11-17 9-12-17.	B 213 P 20. 73. 5-12-17. — do — 78 31-12-17
23-2-18	3rd. C.O.T.	Confirmed in Rank of Lgl as from	Field	14-11-17	B 213 P 20 17 d/ 2.3.18
		Having declared his true name to be William James Coleman will in future be known as such. All documents to be altered accordingly.			Actg. A.A.G. Can. Su. K.M. 16/35451. P. 20. No. 31 d/-
	A.A.G. Can. Su.	Reposted to C.A.S.C. Pool & remains att. as in W.E. from to 8th. C.F. Amb.		6.5.18.	K.A. 18/9457. Pt. 20. No. 36 d/- 8/5/18
	do.	From S. CASC Pool on reposting from 3 C.D. Train & remains att. as in W.E. to 8 C.F. Amb.		7.5.18	KA 18/9457. Pt. 20. No. 60 d/- 11.5.18
30-11-18	86 Amb	Granted 14 Days Leave U.K.		30-11-18	B213
21-11-18	Do	Reprimanded for "in that he" conduct to the prejudice of good order & Mily discipline whilst in charge of a party of men belonging to a parade under command of a senior officer wilfully broke the line of march		18-11-18	A F B 2069 d/.
21-12-18	Do	Rejoined from Leave		21-12-18	B213
14/1/19	C.E.C. Above	PROCEEDED TO ENGLND att.. "H" Wing for quarters & rations from 16/2/19	15		N.R. Pte 11/19.
16/3/19	8 C.F.A.	S.O.S on att. to 3rd Can Pool Brandshott auth: H.Q.C.C.C. letter Brenzett 16/3/19			9 7-4/165 d/ 15/3/19
19/3/19		(auth. 3 Can. Div. A. 120-39 d/ 25-2-19 S.O.S on proceeding to Canada			Lieut. for Lt. Col., A.A.G., Canadian Section

4

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 criticised.

Yes

19. Is the invalid fit for

(*a*) General service,	(Category A)	(Yes ~~or No.~~) Yes - A.
(*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 invalid

(*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.)

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

R-T-C. - Auth - A.G. Tel - 9083 d. 11/11/18.

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

H Burden Capt. *President.*

PLACE Milford Camp. J M Harris Capt

DATE 20/2/19 } Members

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 invalid 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.....

APPROVED BY
Jno W. W. Fipwell Capt
for *Assistant Director of Medical Services*
DATE 20/2/19.

APPROVED BY
Director-General of Medical Services.
DATE.....

original

THIS FORM WILL BE USED FOR ALL RANKS

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 invalid 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 invalid'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 invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such 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 7, 8, 9 and 10 be communicated to the invalid, 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 Milford Camp DATE 20/2/1919

1. 1 (*a*) Unit 8th Fld Amb. (*b*) Regimental No. 475046 (*c*) Rank Sergt.

1 (*d*) Surname COLEMAN (*e*) Christian name Wm. James.

(*f*) Home address 1821 McDermot Ave Winnipeg Man.

(*g*) Next of Kin Mrs. W J Coleman. (*h*) Relationship Wife.

(*i*) Address of Next of Kin Same.

2. Age last birthday 37 Date of birth 27 Nov. 1881

3. Enlistment, or Appointment (if an Officer) (*a*) Place Winnipeg (*b*) Date 31 July 1915

4. Personal description: estimated

(*a*) Height 5' 5½" (*b*) Weight 140 (stripped) (*c*) Complexion fair.

(*d*) Colour of hair Brown (*e*) Colour of eyes Blue. (*f*) Identification marks, Scars, etc. partial amp. L. Gt. Toe and one next toe.

5. Former trade or occupation Labourer

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	3	204

	Periods	
	From	To
Canada	31 July 1915	28/8/15
England	3 Sept 1915	20/2/16
France or other theatres of War	20/2/16	17/2/19

7. Original disease, or injury Frozen Toes. (amputation) L Foot. Large and 2nd Toes. 1st Joint.

(*a*) Date of origin 1909 (*b*) Place of origin Manitoba

(*c*) Cause Exposure.

M. F. B. 227.

300M.—8-18.
1772-59-117.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

(Old Amputations)
Slight weakness

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Left Great Toe amputated at first interphalangeal joint
Left 2nd Toe, amputated at first interphalangeal joint
Slight tenderness in cold weather
otherwise does not bother him walks.
No disability.

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above?
(Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System No. Cardio-Vascular System No. (If pulse rate is abnormal, B. P. will be taken.) Genito-Urinary System No. (Albumen and Sugar will be excluded.)

Special Senses No. Respiratory System No. Integumentary System No.

Disturbances of Mentality No. Digestive System No. Muscular System No.

Osseous and Joint Systems No. Any other general condition No.

10. (a) History (of the condition referred to in Section 9 (a).)

Had Toes frozen in 1909. necessitating amputation at 1st joint of Large and 2nd Toe L foot. practically has not bothered him since.

10.—(b) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (a).)

None.

(c) (Here give a description of wounds, scars, and deformities.

Lt. Gt. Toe. and Lt. 2nd Toe. Amputated at 1st joint (interphalangeal)

11.—(a) Did the disabling condition have its origin before enlistment? Yes.

(b) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

No.

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? (a) No (b) 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? Permanent.

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

Surgical, previous.
A.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? No.
(If the answer is "yes" state nature of treatment required and probable duration)

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

17. Recommendations. n. a.

J. H. Macdonald Capt CAMC
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned W. J. Coleman 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. J. Coleman. Sergt. Rank.
Signature of invalid examined.

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

Date	Brief details, and signature
Sept 6/15	First Inoculation
Sept 16/15	Second Inoculation R. Gibson Capt. C.A.M.C.

Table IV.—Service Table.

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

Army Form B. 178.

To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178[A] to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

Coleman

MEDICAL HISTORY of

Surname Coleman *Christian Name* W. J

TABLE I.—GENERAL TABLE.

Birthplace .... Parish London County England.

Examined .... on 31st. day of July 1915.
at Winnipeg.

Declared Age .... 31. years 280. days.

Trade or Occupation .... Labourer

Height .... 5 feet, 5½ inches.

Weight .... 140. lbs.

Chest Measurement — Girth when fully Expanded 38 inches.
Range of Expansion 2. inches.

Physical Development .... Good.

Vaccination Marks — Arm .... Right Left 4.
Number

When Vaccinated .... Sept 16/15 Childhood.

Vision .... R.E.—V= Good.
L.E.—V=

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

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

Approved by .... (*Signature*) R. Gibson. Capt. C.A.M.C.

(*Rank*) *Medical Officer.*

Enlisted .... at Winnipeg
on 31 day of July 1915.

Corps	Regtl. No.
8th Batt.	475046

Joined on Enlistment ....

Transferred to ....

Became non-effective by ....

on ____ day of ____ 191 .

(*Signature*)

(*Rank*)

(15882) W4581—515 90,000 9/14 S.P. & Co. Ltd.

P.T.O.

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				

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

Date	Brief details, and signature
Sept. 6-15	Vaoculation Anti-typhoid
" 16-15	" "
	R.Gibson
20/2/16 Milford Camp.	A. Old Camp. Two Toes Up foot. Mrs Hanley Epicamp

Table IV.—Service Table.

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

I certify the foregoing to be a true copy of an original entry on a Medical History Sheet of this unit.

C.A.M.D.
for the Officer in Charge of Records
Canadian Contingents.

DUPLICATE. 475046

ARMY FORM B. 178.

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. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname COLEMAN *Christian Name* W.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish LONDON County England

Examined ... ... on 31rst day of July 191 5, at WINNIPEG

Declared Age ... ... 31 years 280 days.

Trade or Occupation ... Labourer

Height ... ... 5 feet 5½ inches.

Weight ... ... 140 lbs.

Chest Measurement — Girth when fully Expanded: 28 inches. Range of Expansion: 2 inches.

Physical Development ... Good

Vaccination Marks — Arm ... (Right / Left); Number: 4

When Vaccinated ... ... September 21-1915

Vision ... ... R.E.—V= Good; L.E.—V=

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

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

Approved by (*Signature*) R.Gibson

(*Rank*) Captain

Medical Officer.

Enlisted ... ... at WINNIOEG on 31rst day of July 191 5

Joined on Enlistment ...	Corps.	Regtl. No.
	8th Batt.	
Transferred to	11th Battn.	475046

Became non-effective by ... on ... day of ... 191 .

This Medical History Sheet has been compared with the Corresponding Attestation Paper, and entries made in red have been taken from the Attestation Paper. (*Signature*) A.Keanis Lieut.-Col. (*Rank*) In Charge of Records, Canadian Contingent.

(4887.) W. 9597/1588. 500M. 9/15. C. P. LTD. Forms E. 178 95

P.T.O.

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

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				

LIST OF DISCHARGE DOCUMENTS.

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

2. Casualty Form (A.F.B. 103),
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178),
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5003a),
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discharge (A.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
(Enclosed in special envelope (260M)),
9. Copy of Discharge Certificate (M.F.W. 39a),
10. Dispersal Certificate (P.D. 8),
11. Equipment (Statement Q.M.G. Form (D.O.S. 2).
and Clothing)
12. Last Pay Certificate (P.S.51). & dup
13. Pay Book (A.H.Q.),
14. War Service Certificate (Form M.F.W. 2595),
15. Sundry Documents.

Group B 1440
Checked by No. 14
Date 18-2-19

War Service Badge
Class "A" No. 161292

1

D.A. "M"
O.G. 7
11-5-40

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 475046.
2. Rank. Sergeant.
3. Name. Coleman William James
4. Unit. 8th Canadian Field Ambulance
5. Date of Discharge 1-4-19 Place Winnipeg.
6. Reason for Discharge Demobolisation
7. Authority. Do
8. Proposed Residence after Discharge 1821 McDermaid Avenue. Winnipeg. Man.

MEDICAL DOCUMENTS FORWARDED TO S.O.R. OF D.R.C. 19/3/19

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate M. F. W. ?

W. J. Coleman. Sgt.
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

Date

Signature
(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

NUMBER 41506 RANK Sgt NAME Coleman A.S.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									24545	50	
Sep		45		cap				16	28443		
				1 aR626 87a. 23/9	535				26908		Good 13/11/18
		45			535			16			
Oct		4650		cap				16	29958		
				25 aR680 87a 7.10	1306				28652		
				aR762 v 31/10	1119				27533		
		46 50			2428			16			
Nov		45						16	30433		
				aR844 v 5/11	1959				28474		
				aR1635 v 30/11	9733				18741		
				aR903 v 30/11	933				17808		
Dec		4650		cap				16	20858		
				Cy 81563 11/12	2433				18425		
Jan		4650		cap				16	21475		
		138 00			15058			48			
Feb		42 00						16	24075		
				6/1083. 8 C.F Amb. 21/2/18	1866				22209		
				24/1411 v 10/1	746				21463		
				6/1187 v 31/1	2566				20903		
				10/1206 v 6/2	933				19970		
	Default Interest	350			4103				20320		
				138/sum ccc 18/3	973				19347		
				173/30 v 21/2	73				12047		
		4550			12378			16			

Debtors 21/3 Ledg

P 820
12474—375M—13-2-18.

B

* Strike out whichever inapplicable.

ASSIGNED PAY. * ENGLAND OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.	NAME:- COLEMAN Willaim ~~James~~
EFFECTIVE DATE:- 1. 9. 15	EFFECTIVE DATE:-	NUMBER:- 475046
AMOUNT:- 16 00	AMOUNT:-	PARTICULARS OF RANK OR APPOINTMENT

NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

Charlotte Coleman
462 Alexandria ave
Wife Winnipeg Man

Non Effective 1-3-19

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
D017.357 2/3	14.4.17	Sergt.

UNIT AND TRANSFERS

ORIGINAL UNIT:-

DATE ACCOUNT FIRST OPENED:-

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

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
4/4/19	30 301	44 C.E.S.	73 00			Extract from Ledger Bal	203 20
						Extract	73 00
							130 20

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 35	15		

PARTICULARS OF RENDERING NON-EFFECTIVE:- Transfd Can 28/2/19 N.R.G. 3557 Bskt 22/2 B/shot M.D.10.

MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									1780 50		
				cap				16			
Apl	SP	45							2070 2		
				3 ak 1x 87 amb 15/4	981				19721		
				1 ak 100 x 28/4	892				18829		
		45			1873			16			
May	x	4650									
				cap				16	208 79		
				1 ak 141 87 amb 9/5	625				20254		
				8 " 194 x 27/5	714				195 40		
		4650			1359			16	205 40		
June		45									
				cap				16	22440		
				4 ak 190 87a 14/8	1071				2236950		
		45			1071			16			
July		4650									
				cap				16	25419		
				4 ak 394 87 amb 16/7	1428				23994		
				1 ak 340 " 1/7	714				23277		
				13 ak 443 x 28.7	714				22563		
		4650			2858			16			
Aug		4650									
				cap				16	25613		
				6 ak 195 87 amb 18/8	535				25078		
				11 ak 561 " " 31/8	535				24543		
		4650			1070			16			

MARRIED OR SINGLE M.

PLACE OF BIRTH London. Eng.

NAME AND ADDRESS OF NEXT OF KIN Charlotte Coleman.

~~779 Pacific Ave~~ Winnipeg.
462 Alexandria Ave.

RELATIONSHIP OF NEXT OF KIN Wife

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
~~apptd a/sgt with pay.~~	14-4-17	Do. 80. 4/5/17
confirmed in rank as L/Cpl.	29.4.17	7017
3rd Div Train		7/13/18

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 475046 RANK ~~Sgt~~ ~~Cpl~~ a/Sgt. NAME Coleman, William

IF IN PERMT. CORPS WHAT UNIT UNIT 3 Div Train TRANSFERRED TO 8 Fld amb DATE 31/3/17 AUTHORITY June AR.

PERMANENT FORCE ALLOWANCES TRANSFERRED TO 3rd D. Trains 1-11-17 DATE AUTHORITY

PLACE OF ATTESTATION Winnipeg TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 26th July 1915. TRANSFERRED TO DATE AUTHORITY

C

ASSIGNED PAY MONTHLY $ 1600 DATE EFFECTIVE Sept. 1915.

PAYABLE TO Charlotte Coleman. ~~779 Pacific Ave~~ Winnipeg RELATIONSHIP Wife
462 ALEXANDRIA AVE. (Allt 63604 14/5/17)

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE 1916	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 C	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
Mar.			216	10			21	30					10	50	247 90											77	04	128		205 04	42	86				
															36																				
Apl	30	1c	33	-	30	1c	3	-							33	346	14/4	468	29/4					3	49	4	36	16		23	85	55	01			
May	31	"	34	10	31	10	3	10							34	520	13/5	588	20/5					3	41	4	06	16		23	64	68	54			
June	30	"	33		30	"	3								36			721	7/6							3	41	16		19	41	85	13			
July	31	"	34	10	31	"	3	10							37 20	765	23/6	888	11/7					4	26	3	49	16		23	75	98	58			
Aug	"	"	34	10	"	"	3	10							37 20	968	26/7	1039	13/8					4	36	3	49	16		23	85	111	93			
Sept	30	"	33	-	30	"	3	-							36 -	1129	27/8							4	36			16		20	36	127	57			
																1274	25/9							4	36										
Oct	31	"	34	10	31	"	3	10							37 20	1201	13/9	1330	10/10					3	49	3	49	16		37	34	137	43			
Nov	30	"	33	-	30	"	3	-							36 -	1411	29/10	1466	11/11					5	23	3	49	16		24	72	148	71	8	25	140 46
Dec	31	"	34	10	31	"	3	10							37 20	1531	24/11							12	21			256 16		28	21	157	70	~~9~~	~~30~~	~~146 40~~ Payt in Jan.
1917		1.10	48	80			48	80								1675	23/12			1CK				5	23	24	34								
Jan	31	.10	37	20											37 20	1612	15/12			960	27/1			4	36	7/3	-	16		122	93	71	97	6	50	65 47
Feb	28	"	33	60											33 60	1416	31/1							2	62			16		18	62	86	95	7	00	79 95
																2045	28/2	2210						4	36	4	36	304							
Mar	31	"	37	20											37 20	2008	20/2	2131	17/3					5	23	3	49	16		33	44	90	71	7	50	
			675	40									10	60	685 90									66	97	33	84	174 38		370	595 19	90	71			
			675	40									10	60	685 90									66	97	33	84	174 38		370	595 19					

475046 ~~Cpl~~ a/Sgt Coleman W. $16.00

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
forward			675	40										10 50	685 90									6697	33 84	17438		320		595 19	90 71				
Apl	30	1.20	36	-											36 -													16		16 -	110 71				
May	31	1.50	46	50										16 - / 5 10	46 50 / 21 10	78	18/4							3 49				16		19 49	158 82				appointed a/Sgt with pay 14/4/17. / 5-10 rank pay 1/6 exp. Chgd twice Jan 1916
June	30	-	45	-											45 -					25	30/4 8th Fld Amb.					523		16		21 23	182 59				
July	31		46	50											46 50													16		16 -	213 09				
Aug	1-30		45	-											45 -													16		22 24	235 85		17		transr to 8th Fld Amb
	30		~~46~~ 45	~~50~~											~~46~~					41	10/5 8th Fld Amb.			70 46 / 2 25 / 8 35 / 8 26 / 5 35 / 5 35	33 84	185 25 / 624		16		690 15 / 16 06	221 29		17	204 29	
	1	"	1	50											1 80	37 / 96 / 74 / 17 / 197	29/5 30/6 1/8 14/8 30/8																		
Sept	30		45	-											45 -													16		26 70	239 59		21 25	218 34	

MONTH 1917	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
Oct	Bal b/f								239 59 / 26 09	21-25	
	Oct A/pay	46 50 / 46 50							16 2 70 09		
Nov	Sgt P.	46 00		AR 56 13/16 87A	6 25				16 / 5 61 59		
				AR 236 8th Fld Amb 20.9.17	7 14						
				AR 278 " " 4.11.17	7 14				16		
				Dn AR " 14/7/17	5 35						
Dec	Sgt P	46 50							16 303 71		
1918 Jan	" "	91 50 / 46 50			25 88				32 / 16 250 21		
				AR 1088 8th Fld Amb. 22.11.17	9 73						
				" " " "	87 60						
				" 298 " "	19 63						
				" 246 " 29.12.17	8 92						
				Dn AR 139 " 31.7.17	5 35						
				Dn AR 216 " 14.9.17	5 36						
				AR 20977 ~~2nd Lt~~ Sgt 4.12.17	24 33				173 29 / 38 25		
Feb	Sgt P	46 50			160 92				16 199 29 / 25 99		
		46 50		CAP							
				AR 380 87A 17/1	6 25						
				Mail 332 " 14/12	11 60				17 430		
				AR 440 " 30/1	7 14						
					25 99				16		

MONTH 1917	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
March			46 50	CAP					16 204 80		
				AR 502 87A 17/1 / 16	6 25						
				AR 551 " 27/12 / 26	7 14				18 39		
				AR 707 " 28/3	7 14						
			46 50	AR 637 " 20/3 / 26 78	6 25				L 178 02	50	

Cedric

AUDITOR | PAYMASTER

M. OR S. DPM C 1012

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

REGT. No. 4/5046 RANK Pte. NAME (IN FULL) Coleman W. J. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Yes. DATE EFFECTIVE

TO WHOM PAID Mrs L Coleman. RELATIONSHIP

ADDRESS At 3 Maker Blk 549 Logan Ave Winnipeg Man.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
1821 ~~A. C. Dunstall~~		

ORIGINAL UNIT C.E.F. 32F. IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO 106th Inf. DATE 19.3.19 AUTHORITY 2094

DATE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 16.00 DATE EFFECTIVE

PAYABLE TO ~~Mrs L Coleman~~ RELATIONSHIP

ADDRESS ~~At 3 Maker Blk 549 Logan Ave~~ Winnipeg Man.

ANY CHANGE IN ASSIGNEE OR ADDRESS: 398 Gertrude St Winnipeg. 3.6.19.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE Closed 31/3/19. EFFECTIVE

DISCHARGED M29 10. PLACE — DATE 1.4.19 REASON D. AUTHORITY 2094 IF ENTITLED TO POST DISCHARGE PAY

Date of Enlistment

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.			TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.			TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																						
28.2.19									130	20																							130	20			BAL. ENG. L.E.F.
1/3-8/4	39	1.50	58	50	35 00 70 00				130	20							9 73 4 87 5 00 25 80 10										16	00			293	70					Bal 130 20 Christmas A Rec. 1st payment W.S.G. Advances - Boat - Train A.P. aband. on Rec. L.E.F. C. to 28/2/19 Allow'ce up March.
			6.83	0a.																																	
Bal SA					100																																
183 days @ minimum			420	00	180	00			601	00							7	00															350	00	181	00		
																											10	50					339	50	181	00	Bal 10 85 9 P.P. P.O. 2/4.31/4 D. 1.50
May 9																	564 38 70																269	50			76 - 2nd pt. 65f.
June 8																	758 67 70																199	50			76 - 3rd " "
July 15																	791 36 70																129	50			76 4th " "
							31/8										172 64 41 70																59	50			76 5th " "
							Discount										1866.37	59	50																181	-	59 50	6th Final.

War Service Gratuity. 6.83 0a.

Soldier Dependent

1st Payment W.S.G. as above

S.A. Suspended (Commencement Charge by error) awaiting advice from Ottawa.

19-3-20

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1200.